



## Ways to conduct lessons for children with speech disabilities with innovative technologies

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**ABSTRACT**

Speech problems in children are one of the most widely studied topics in science. Performing speech exercises from a child’s early age can prevent him or her from developing speech-related defects in the future. In this article, the author describes in detail the work on speech defects in children, the use of innovative technologies in their treatment.

**Keywords:**

Speech Problems, Treatment, Innovation Technologies, Manological Speech, Alalia And Etc.

Speech is not an innate ability, but is formed throughout life in parallel with the physical and mental development of the child. In order to study and understand speech disorders, it is necessary to know the normal course of speech development of the child, the peculiarities of this process, the conditions that play a major role in the successful formation of speech. It is also important to know exactly the developmental stages of a child’s speech. This is necessary for the timely detection and identification of any shortcomings in the development of speech. It is known that this particularly rapid life begins in a person working 2-5 years. A child up to 3 years old can pronounce about 30-700 words correctly, 4 years of speech using complex sentences. At this point, the child's vocabulary is about 1,500 words. It is well known that in order to communicate with children with disabilities, the educator must have very strong pedagogical skills. Because many children with disabilities (because of their own shortcomings) do not want to communicate with others, and even if they do, it is difficult. As people interact with each other, one of their main goals is to influence each other, that is, to make a good

impression on their ideas. But many children with disabilities have a weaker mindset. and find it difficult to articulate their ideas in speech (because of their shortcomings). Therefore, the educator must first be able to influence the thoughts, feelings, and behaviors of children with disabilities through a variety of psychological means.

It is well-known that speech is a process of interaction, the means of which are words. In manological speech, as well as in dialogic speech, a person wants to use all his vocabulary to find the most effective words and influence his partner. A child with a speech impediment is often reluctant to engage in communication as a result of hiding the defect, and even if he or she does, he or she will interact with a narrow circle of people (family members, kindergarten sister, and a few close friends). As a result, they have less vocabulary and less circulation. In the morning, they have a hard time telling the lion that was given to them. In some cases, such children use some of the factors of the paralinguistic effect of speech, such as speech impairment, low-pitched expression, pauses, stuttering, coughing, verbal actions, and shouting. What is characteristic of the

communication process is that when the interlocutors want to influence each other, they first think about what to say and what words to use. How the communication goes and who has the most influence also depends on the roles of the partners. An initiator of an impact is a partner who has a deliberate goal of influencing and uses all of the above tools to achieve that goal.

Therefore, in the process of conversation, the child should feel the initiative, that is, the child should feel that he plays a key role in the conversation, for which the educator should create a dialogue for this purpose. It is very important that the child can feel loved and cared for. The teacher's use of games, speaking exercises, finger theater, short scenes, picture puzzles, educational games, finger gymnastics and rhyming games in the process of communication helps to make the communication positive. Speech failure is caused by distortion of its sensory or motor aspects. Often both functions are impaired. Causes of speech impediments include various adverse effects during pregnancy, birth injuries, and asphyxia after childbirth. In motor alalia, the active vocabulary is not formed independently or is formed very slowly. Thus, children are more likely to use active speech and are more likely to complete tasks. Such children are significantly behind in development. Their concepts and imaginations are limited.

In some children, mental retardation is accompanied by pronounced speech defects. As a result of speech therapy, your child's speech will begin to develop. But vocabulary, especially active vocabulary, is slowly growing. Aggramatisms begin to be observed in speech. Then there are problems in education. It is very difficult to diagnose children with sensory disturbances in speech. Such children do not understand speech. As a result, it is difficult to communicate, which in turn negatively affects the child's mental development. After a long session with a specialist, children develop a reaction to speech, and then the desire to speak independently. In early lessons, children's speech is made up of individual sound combinations, sometimes short words. The dictionary expands slowly. Due to the nature of

the difficulties in diagnosis, children with speech impediments are sometimes replaced by mentally retarded children. It is important to make maximum use of visual aids when examining children with speech problems. They should be recommended tasks that do not require active speech from the child. In this way, the child's knowledge, imagination, independent organization of play, etc. are determined. Diagnosis of speech disorders in children with motor disorders is not difficult.

Speech is the most important mental function inherent only in humans. Speech is the main communicative function that is carried out through a particular language. On the basis of speech and its semantic unit of the word, such mental processes as perception, imagination and memory are formed and developed. L. S. Vygotsky pointed out that speech is a fundamental factor for the development of thinking and the formation of "I". In cases where a child has retained hearing, intellect is not impaired, but there are significant speech disorders that cannot but affect the formation of his entire psyche, we are talking about a special category of abnormal children - children with speech disorders. Speech disorders to one degree or another (depending on the nature of speech disorders) negatively affect the entire mental development of the child, affect his activities and behavior. Severe speech disorders can affect mental development, especially the formation of higher levels of cognitive activity, which is due to the close relationship of speech and thinking and the limited social, in particular speech, contacts, during which the child learns the surrounding reality.

Speech disorders, limited verbal communication can negatively affect the formation of the child's personality, cause mental layers, specific features of the emotional-volitional sphere, contribute to the development of negative character traits (shyness, indecision, isolation, negativism, feelings of inferiority). Speech therapy is the science of speech disorders, methods of their detection, elimination and prevention by means of corrective training and education. It is one of the sections of defectology. The term is derived from the Greek logos (word, speech), peideo

(educate, teach) - in translation "education of speech." Currently, there is a noticeable progress in the development of speech therapy. On the basis of psychological analysis, important data were obtained on the mechanisms of the most complex forms of speech pathology (aphasia, alalia and general speech underdevelopment, dysarthria). Speech disorders are studied with complicated defects: with oligophrenia, in children with impaired vision, hearing, musculoskeletal system. Modern neurophysiological and neuropsychological research methods are being introduced into speech therapy practice. The relationship between speech therapy and clinical medicine, pediatric neuropathology and psychiatry is expanding.

Speech therapy at an early age is intensively developing: the features of pre-speech development of children with organic lesions of the central nervous system are being studied, criteria for early diagnosis and prognosis of speech disorders are determined, techniques and methods of preventive (preventing the development of a defect) speech therapy are being developed. All these areas of research have significantly increased the effectiveness of speech therapy work. Due to the fact that correct speech is one of the most important prerequisites for the further full development of the child, the process of social adaptation, the identification and elimination of speech disorders must be carried out at an earlier date. The effectiveness of eliminating speech disorders is largely determined by the level of development of speech therapy as a science. The subject of speech therapy as a science is speech disorders and the process of teaching and upbringing of persons with speech disorders. The object of study is speech impairment in a particular subject.

The structure of modern speech therapy is preschool, school speech therapy and speech therapy for adolescents and adults. The fundamentals of preschool speech therapy as a pedagogical science were developed by R. E. Levina and are based on the teachings of L. S. Vygotsky, A. R. Luria, A. A. Leontyev. The main goal of speech therapy is to develop a scientifically grounded system of training,

education and re-education of persons with speech disorders, as well as the prevention of speech disorders. Domestic speech therapy creates the most favorable conditions for the development of the personality of children with speech disorders. The success of Russian speech therapy is based on numerous modern studies of domestic and foreign authors, testifying to the great compensatory capabilities of the developing child's brain and the improvement of ways and methods of speech therapy correctional influence. I.P. Pavlov, emphasizing the extreme plasticity of the central nervous system and its unlimited compensatory capabilities, wrote: "Nothing remains motionless, unyielding, but can always be achieved, changed for the better, if only the appropriate conditions are fulfilled." Based on the definition of speech therapy as a science, the following tasks can be distinguished:

- study of the ontogeny of speech activity in various forms of speech disorders;
- determination of the prevalence, symptomatology and degree of manifestations of speech disorders.
- identification of the dynamics of spontaneous and directed development of children with speech disorders, as well as the nature of the influence of speech disorders on the formation of their personality, on mental development, on the implementation of various types of behavioral activities.
- study of the peculiarities of the formation of speech and speech disorders in children with various developmental disabilities (with impaired intelligence, hearing, vision and musculoskeletal system).
- elucidation of the etiology, mechanisms, structure and symptoms of speech disorders.
- development of methods for pedagogical diagnostics of speech disorders.
- systematization of speech disorders.
- development of principles, differentiated methods and means of eliminating speech disorders.

- improvement of methods of prevention of speech disorders.
- development of issues of organizing speech therapy assistance.

In these tasks, both the theoretical and practical orientation of speech therapy is determined. The theoretical aspect is the study of speech disorders and the development of scientifically based methods for their prevention, identification and overcoming. The practical aspect is the prevention, detection and elimination of speech disorders. The theoretical and practical tasks of speech therapy are closely related. To solve the set tasks, it is necessary:

- ensuring the relationship between theory and practice, communication between scientific and practical institutions for a faster introduction into practice of the latest achievements of science;
- implementation of the principle of early detection and overcoming of speech disorders;
- dissemination of speech therapy knowledge among the population for the prevention of speech disorders.

Speech disorders are diverse, they are manifested in a violation pronunciation, grammatical structure of speech, poverty of vocabulary, and also in violation of the tempo and fluency of speech. In children with speech impairments there is a violation of the process of forming pronunciation due to defects in perception and pronunciation of speech sounds. They are worse than their peers, memorize speech material, with a lot of mistakes perform tasks related to active speech activity. For speech such children may lack intelligibility, expressiveness of speech, fuzzy diction, creating the impression of a general blurred speech, mixing of sounds. Individual violations are detected the semantic side of speech. Despite the diverse subject vocabulary, it lacks words denoting the names of some animals, plants, professions of people, body parts. Learners tend to use typical and similar names, only approximately conveying the original meaning of the word. Forming words correctly, the most used in speech practice, they still find it difficult to playing other options. Insufficient level the

formation of the lexical means of the language is especially clearly manifested in understanding and use of phrases, proverbs with a figurative meaning. Grammatical design of speech, mistakes in use are often encountered grammatical forms of the word. Particular difficulty for learners represent constructions with subordinate clauses, which is expressed in pass, change of unions, inversion. Lexico-grammatical means of language formed differently.

The solution of these problems determines the course of speech therapy influence. The main direction of speech therapy is the development of speech, the correction and prevention of its violations. In the process of speech therapy work, the development of sensory functions is provided; development of motor skills, especially speech motor skills; development of cognitive activity, primarily thinking, memory processes, attention; the formation of the child's personality with the simultaneous regulation and correction of social relations; impact on the social environment. Speech therapy uses knowledge of general anatomy and physiology, neurophysiology about the mechanisms of speech, the cerebral organization of the speech process, about the structure and functioning of analyzers involved in speech activity.

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