



Methods Of Speech Development of Children with Disabilities

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ABSTRACT

Preschool age is a period of active mastery of the child's spoken language, the formation and development of all aspects of speech - phonetic, lexical, grammatical. Full knowledge of the native language of preschool age is a necessary condition for solving the problems of mental, aesthetic and moral upbringing of children in the most delicate period of development. Children with specific needs have been recognized. have many of the same traits as youngsters who are usually developing. These children may take longer to develop their speech, while others may have deficits that are not diagnosed at birth but become more obvious with time, and still others may struggle in school, with issues ranging from concentration, learning, language, and perception to behavioral issues. This page explains terms and topics related to normal speech and language development, communication, language disorders, and language differences. It also outlines how professionals can interact with primary caregivers to provide necessary services for students in school programs who are facing language problems.

Keywords:

Methods, Factors, Contributors, Speech Development, Disabilities, Traits, Language

Normal speech development at an early age depends on the complex interrelationships and interactions of biological and social factors. The list of biological risks that can affect speech disorders is quite large and is in many ways similar to the causes of hearing loss and neurological pathologies in first-year children. Why? Because in human development, speech is the "youngest" and most delicate mental function, it can not withstand the influence of trivial pathological factors that other systems of the child's body can withstand, and can be damaged. The successful development of speech at an early age, as mentioned above, in many respects depends on a number of social factors such as the child's growth in a normal speech environment, close emotional and psychological communication with the mother, difficult social conditions in the family and lack of psychological stress. The level of development of modern correctional and

speech therapy pedagogy raises the issue of early propaedeutic and habilitation work with children under 3 years of age. Timely speech therapy diagnosis facilitates the adaptation of the speechless child to social life, full use of the opportunities of sensory periods in the formation of higher mental functions, effective correction of the child's mental development and prevention of secondary disorders. The earlier individual problems identified in a child's initial speech development are identified, the more time parents and educators will be able to devote to correcting them. Speech therapy diagnostics and correction aimed at early detection and correction of speech developmental disorders, retardation using special educational tools should begin in the first months of a child's life. To do this, a step-by-step study of what is needed for a child to develop well from birth to three years, how to develop activity in the baby,

how well the child's cognitive activity is developed, as well as ways to prepare the child for speech, ways to understand and teach speech need to be identified. The stages of speech development in young children, the causes and symptoms of speech defects, scientific and methodological aspects of speech therapy developmental work with speechless children were studied. A methodology for checking the speech of children with complex disabilities at an early age has been developed. In 0-3 years of a child's life, huge shifts occur in his speech development. This is marked by rapid overall development and mastery of various aspects of the mother tongue. In the first year of a child's life, voice relationships, the ability to imitate and understand develop, and the first words are mastered. From the very first year, speech begins to function as a communication and becomes a tool for developing thinking. In the second year, comprehension, the ability to imitate, active speech develops (mainly vocabulary is mastered). In the third year, comprehension, active speech: vocabulary, grammatical forms, syntactic structures (different sentences) develop. For the development of speech, the life situation in which the child is brought up - care for him, the attitude of adults around him, their upbringing, influence, as well as his own activity (the child's activity in various activities) is of great importance. In the first three years, speech is formed in the course of a child's life activities: in regime periods, in independent play, in specially organized lessons. In the timely development of a child's speech, the attitude of adults towards him is important. In response to a caring, positive attitude, the child develops positive emotions and a variety of relationships. "When speech is inadequate, there is a delayed commencement of speaking, low vocabulary, agrammatism, and pronunciation abnormalities." The development of children's speech is essential for their overall development. Its etiology, which varies according on the stage of development is distinct from the different symptoms of speech deficiency to a more advanced viewpoint on the potential of a teaching method on the basis. The word

"incomplete speech" refers to a speech issue that develops over time represents a comprehensive method, with pedagogical analysis. is in charge. An method like this is more biologically broad than expert pathogenetically the faulty structure, which necessitates medical certification. Analysis is required. However, it is critical for a pedagogue-speech therapist to collaborate with someone. The rate at which immaturity develops, as well as the rate at which speech developsgenetic markers, mental activity, and associated neurological disorder. Speech is produced when particular biological conditions exist, and it occurs most frequently throughout the normal growth and functioning of the central nervous system.

Speech, on the other hand, is a crucial social function. That is why biological conditions alone are insufficient for the child's growth to occur in the context of adult interaction. In this instance, the child's communication with a close emotional relative (mother) is critical. The people that surround the youngster have a need for communication. is created as a result of interaction with He is the person in charge of a child's life. Its fundamental organic requirements and the demand for new impressions in two months arises as a result of. In communication, expressive facial expressions, The means of subject-action and speech are separated. The beginning point for speech development is one-word phrases, which are in the process of normal speech production in children with all types of speech developmental issues. The level of speech comprehension in one-word and amorphous phrases can vary simple for the child's self words from the lowest level that are difficult to grasp until you understand the relevance of individual grammatical structures. Some non-speaking children are able to comprehend the meaning of basic auxiliary structures.

A speech impairment affects people who have problems speaking in a regular tone of voice or tempo. Speech impairments make it hard for people to communicate properly, and they can happen in both children and adults. These disorders can cause frustration and

embarrassment to the person suffering from them. Children are born ready to learn a language, but they need to learn the language or languages that their family and environment use. Learning a language takes time, and children vary in how quickly they master milestones in language and speech development. Typically developing children may have trouble with some sounds, words, and sentences while they are learning. However, most children can use language easily. Parents and caregivers are the most important teachers during a child's early years. Children learn language by listening to others speak and by practicing. Even young babies notice when others repeat and respond to the noises and sounds they make. Children's language and brain skills get stronger if they hear many different words. Parents can help their child learn in many different ways, such as:

Responding to the first sounds, gurgles, and gestures a baby makes.

Repeating what the child says and adding to it.

Talking about the things that a child sees.

Asking questions and listening to the answers.

Looking at or reading books.

Telling stories.

Singing songs and sharing rhymes.

This can happen both during playtime and during daily routines. The spatial relationship of two objects can be displayed in a variety of ways, such as inside the box, above the box, beneath the box, and next to the box. Some kids have a large enough passive vocabulary to express themselves verbally. The main goal of speech therapy work with children with disabilities is to develop speech communication, to increase the ability to explain speech to give the child the best understanding of his speech by others. Speech therapy work is aimed at correcting speech disorders in all its aspects (vocabulary, grammar, phonetics), along with stimulating the development of emotional and mental functions that general underdevelopment in children severely disrupted the formation of all components of the speech system, namely:

pronunciation, syllable structure of words, phonemic processes, language analysis and synthesis, lack of monologue coherent speech, lexical and grammatical structure, visual gnosis, optical-spatial practice, memory, attention, motor function, thinking; lack of development of cognitive activity and, accordingly, no formation of speech and non-speech conditions for mastering writing. An analysis of the errors and difficulties faced by general underdeveloped children in speech learning shows the role and importance of dysgraphia prevention. There are alterations in the muscle tone of the tongue and lips in the articulator, which restricts their mobility. The majority of the kids reported an increase in saliva. Chewing and eating difficulties. The key goal is to get people to respond with their voices. To create visual-motor coordination, adjust the position of the hands and thumbs as needed. Exhalation after vocalization. Create a "Animation Complex" with a sound element. Inspire a response from the audience. Develop visual fixation and object observation. Pay attention to what you're hearing. Before and after meals, activities are held on a daily and regular basis.

In conclusion, speech development of children with disabilities plays a very important role, and if the methods presented in this way are used effectively, achieving the intended goal will not cause any problems.

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