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THE CONTENT OF EDUCATION FOR CHILDREN WITH DISABILITIES WITH DYSARTHRIA

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ABSTRACT

In this article, the specific features of the speech of children with dysarthria are revealed on the basis of an emphatic experiment and scientific conclusions are presented.

KEYWORDS

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speech, speech defect, sound, pronunciation, phonemic perception, dysarthria, vocabulary, passive vocabulary, active vocabulary, cerebral cortex, speech center.

INTRODUCTION

Today, caring for children and adolescents in need of special assistance, social support of their rights, organization of the educational process in accordance with the needs and abilities of these children, and equalization to a healthy society are among the most urgent issues. Children's speech gradually develops on the basis of adult speech. A child learns to pronounce sounds and words correctly by imitating adults.

Speech disorders of one or another level can have a negative impact on the child's personality and the formation of cognitive activity. The study of speechimpaired children shows that as much as speech and thinking are related to each other, speech and action American Journal Of Social Sciences And Humanity Research (ISSN – 2771-2141) VOLUME 04 ISSUE 03 PAGES: 51-62 SJIF IMPACT FACTOR (2022: 6. 015) (2023: 7. 164) (2024 - 8.166) OCLC – 1121105677 Crossref i Google S WorldCat MENDELEY

are also closely related to each other. A child's acquisition of speech allows him to understand, plan and organize his actions. One of the speech disorders in children is dysarthria.

In children with dysarthria, we can clearly see the violation of articulatory motility, the limitation of voluntary movements, the violation of coordination, the violation of general and small hand motility, and all this has its effect on speech, cognitive process, and general development. After all, the degree of development or limitation of movements shows a severe or mild level of speech impairment. The more severe the speech defects are, the more gross disturbances in the child's movement are observed.

It was the lack of research works, methodical recommendations, and the lack of a correctionallogopedic work system taking into account the structure of the speech defect that led us to consider this topic as urgent.

The purpose of the research is to study the lexical aspect of the speech of preschool children with dysarthria.

Dysarthria is a pronunciation disorder due to an organic disorder of the innervation of the speech apparatus. Disruption of the lexical-grammatical aspect of speech in dysarthria is not considered the main disorder. Distortion of speech by sound takes the leading place. The speech of children with dysarthria is slurred and unclear. Dysarthria is characterized by the speed, fluency, pauses, not saying sounds and words until the last sentence, dropping words in speech. In dysarthria, the voice is low or high, monotonous, sometimes hoarse.

In most children with dysarthria, a unique formation of vocabulary is observed, the use of the same words to express objects and actions, the absence of famous words in speech, and the lack of formation of generalized concepts can be seen. Especially in them, words expressing the sign and quality of objects, as well as various actions related to them, are limited. This peculiarity is associated with the main disease in children - movement disorders, which prevents children from moving freely and moving with objects, limiting their communication with the external environment.

The development of speech understanding in children with dysarthria is unique. This is manifested in insufficient understanding of ambiguous words, difficulties in distinguishing the meaning of synonyms, antonyms, adjectives and adverbs.

Studies have shown that speech disorders are often associated with pseudobulbar dysarthria. Pseudobulbar dysarthria is caused by damage to the cortical-nuclear pathways of the movement from the cerebral cortex to the nuclei of the trunk nerves.



Pseudobulbar dysarthria is characterized by increased or decreased muscle tone in the articulatory speech apparatus. Examination of the mobility of the articulatory speech apparatus made it possible to distinguish several groups of children. In the children of the first group, there was a decrease in the flow of saliva, the speed, size and amplitude of the movements of the lips and tongue muscles, the voice strength, speech breathing and release. Decreased innervation of the cranial nerves is different, often lateral movement of the tongue, raising the tip of the tongue to the upper lip is decreased. Breathing during speech is difficult in children, which reduced the fluency of speech breathing and caused forced pauses in speech.

Children of this group have difficulty in speech communication, almost all of them get tired quickly, their speech activity is not always manifested. Children's verbal communication was minimal. They rarely asked questions of the nature of learning.

Children belonging to the second group of pseudobulbar dysarthria have paralysis mainly in the muscles of the articulatory apparatus. In these children, along with disorders of pre-lingual sounds, deficits are observed in lip sounds, which require sufficient force, especially lip-lip sounds (p, b, m), as well as vowel sounds, especially in sounds (i, u) that require sufficient lifting of the tongue. Due to the paralysis of the soft palate, a sudden limitation of movements was detected, so the child pronounced all



sounds in a nasal tone. Speech is slow, low, poorly formed.

As a result of the analysis of the pedagogical psychological and methodical literature on the problem, it was found that there is no corrective pedagogical work system if the research studies aimed at studying the speech deficits of children with dysarthria take into account the characteristics of the Uzbek language structure of the speech deficit.

The age and individual characteristics of the children were taken into account when examining the speech of preschool children with dysarthria.

We have developed a point system to evaluate the level of speech development. The results of the assignment were evaluated in a 5-point system. Each task is evaluated separately and displayed in graphs. This assessment makes it possible to determine the strengths and weaknesses of the speech activity of children with dysarthria, and to compare their results with those of other children.

The speech material was selected taking into account the age and speech abilities of the children. The assignments are intended for 5-6-year-old children with dysarthria. At the same time, many tasks do not require extensive verbal explanations in children. In order to assess the dynamics of speech therapy, it is necessary to examine the child at the beginning and at the end of the school year. American Journal Of Social Sciences And Humanity Research (ISSN – 2771-2141) VOLUME 04 ISSUE 03 PAGES: 51-62 SJIF IMPACT FACTOR (2022: 6. 015) (2023: 7. 164) (2024 - 8.166) OCLC - 1121105677

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We conducted our investigation in 3 stages.

At the 1st stage, we talked with group speech therapists. During the conversation, we determined the history of the child's development, studied the child's documents;

In the 2nd stage, we studied the lexical side of children's speech based on the methodology given above;

At the 3rd stage, we observed children during various activities (play activities, study activities).

Before examining the children, we collected complete information about their physiological hearing ability and intellectual condition.

The results of the passive vocabulary test in children with dysarthria are presented in Table 1.

Table 1.

	Dysarthric children Scores of children									
Nº	Assignments	(in %)								
		1. P	2.	NG3-SE	RV 4.	<u>\$</u> 5.				
1	Dialogue	10%	30%	40%	20%	-				
2	Follow verbal commands	-	40%	30%	30%	-				
3	Understanding plural and singular nouns and verbs	-	30%	30%	30%	10%				
4	Checking the level of understanding of sentences based on the meaning of words	-	20%	50%	20%	10%				

Results of a passive vocabulary test in dysarthric children

As a result of the tasks given to check the passive vocabulary of children with dysarthria, we found the following:

Task 1 Dialogue. Children are asked 10 questions, one after the other, from simple to complex. (Question: What is your name? How old are you? Who did you come here with? etc.). The task was to determine the ability to understand the question by solving the specific seleanti-syntactic problem of adequate activity described in children. The obtained results showed that many children with dysarthria had a little difficulty in understanding the questions, an additional question was necessary for them to understand the content of the dialogue. (Boy, what is the girl doing?). On task 1, 10% (1 child) understood all the questions asked by the speech therapist. 30% (3) children hesitated and tried to answer the questions using different gestures. 40% (4 children) understood the questions after the speech therapist repeated them several times. 20% (2 children) understood only some of the questions even after the speech therapist repeated them several times. Who is the oldest in your family? What did you have for breakfast? How many children are you in the family? It was difficult for the child to understand such questions.

In children, the 2nd task, i.e., the task given in verbal form (take the book, close the door, sit on the chair) was aimed at determining the ability of children to follow commands, establishing a logical-spiritual connection between objects. After children were given simple and complex commands in verbal form (in which the child was asked to perform 2-3 actions in a row with one sentence), only 40% (4) of the participants performed the tasks hesitantly, but correctly, 30% (3) of the children were asked questions by the speech therapist. understood after several repetitions, 30% (3) children understood only some commands even after the speech therapist repeated the questions several times. Children had difficulty understanding commands based on performing 2-3 actions in a row with one sentence.

According to the 3rd task, 30% (3 children) hesitantly, but correctly, performed the tasks given in the form of understanding and distinguishing nouns and verbs that come in the form of plural and singular. In particular, they correctly distinguished whether the objects depicted in the picture are singular or plural. 30% (3) children understood and performed the tasks with help after the task was repeated by the speech therapist. The children were asked guiding questions to help them. 30% (3 children) understood only some of the questions after the speech therapist repeated the questions several times. Difficulties in understanding and distinguishing verbs that come in the form of plural and singular were observed in children. 10% (1) child could not complete the task at all.

In task 4, 20% (2) children hesitantly, but correctly, performed tasks aimed at checking the level of



understanding of sentences based on the meaning of words. In this, the child was shown a group of pictures. The child is required to show the required picture, 50% (5) of the child understood and performed the task after the task was repeated by the speech therapist, with help. The children were asked guiding questions to help them. 20% (2) children only understood the meaning of some words after the speech therapist repeated the questions several times. Difficulties in understanding and distinguishing between high and low concepts were observed in children. 10% (1) children did not understand and could not complete

The conducted research process showed that the speech activity of the examined children was very low. Due to the lack of sound pronunciation, the children did not express their desire to engage in spoken

the task.

communication. Some were afraid of being incomprehensible to those around them. Pedagogically neglected or, on the other hand, pampered by their parents, were not ready to engage in the necessary forms of speech communication with their peers and adults. Limitation of speech communication, deficiencies in the pronunciation of sounds limit children's speech experiences. Children with dysarthria have not developed the simplest ideas about objects, transports, fruits, animals, professions, and seasons used in our daily life. The range of information on the subject of items used in everyday life in the family is limited. We found this out during the experimental investigation of our scientific research work. We have tried to present the results of checking the active vocabulary of dysarthric children in the process of experimental examination in Table 2.

Table 2

N⊴	Tasks given to check active speech	Dysarthric children									
		Scores of children									
		(in %)									
		5		4		3		2		1	
		At	At	At	At	At	At	At	At	At	At
		the	the	the	the	the	the	the	the	the	the
		begi	end	begi	end	begi	end	begi	end	begi	end
		nnin	of	nnin	of	nnin	of	nni	of	nnin	of

Results of an examination of the active vocabulary of dysarthric children

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		g of	the	g of	the	g of	the	ng	the	g of	the
		the	year	the	year	the	year	of	yea	the	year
		year		year		year		the	r	year	
								year			
								-			
1	Dictionary of subjects	-	10%	20%	30%	40%	50%	40	10	-	-
								%	%		
2	(Section A-B)	10%	30%	30%	50%	40%	20%	20	-	-	-
								%			
								, .			
3	Verb dictionary	10%	20%	30%	50%	20%	10%	20	10	20	10
								%	%	%	%
								70	70	70	70
4	Dictionary of idioms	-	-	20%	40%	30%	40%	20	20	30	10
								%			
								70	%	%	%
5	Choosing an identifier	-	10%	20%	30%	30%	40%	40	20	10	_
										100	
								%	%	%	
6	Words with many	-	7 -	20%	40%	40%	50%	-30	10	_10	-
-	meanings		×	70	RE12	HIN	6.2			ED	
								%	%	%	
L											

Sequencing, guiding and clarifying questions were used as support for the difficulties observed during the assignment process.

The active vocabulary of children with dysarthria was checked at the beginning of the year and at the end of the year. During the research, some of the children performed the given tasks with interest, while some were shy and tried to tell us whether they were right or wrong. Some children refused to complete the tasks given by us and some children could not complete the tasks. Nevertheless, we tried to explain the tasks given to children in an interesting way and managed to determine the results.

As a result of the tasks given to check children's active vocabulary, we found the following:

Task 1 was to check the children's vocabulary of subjects. In checking the vocabulary of the subjects, we used "A" section for words that are always used in

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everyday life and "B" section for words that are rarely used in everyday life. According to the results of the experimental test, in the results of our experimental research conducted at the beginning of the year and at the end of the year, we achieved the following results (parts A and B): at the end of the retest, 10% (1 child) correctly understood all the given 28 words and was able to use them in the active vocabulary. At the beginning of the year, 20%(2) children were able to use all the words (11 words) in section "A" and 10-12 words in section "B" in active vocabulary, understood 6 words in section "B". At the end of the year, 30% (3) children were able to use all the words (11 words) from section "A" and 10-12 words from section "B" in active vocabulary and understood 7 words from section "B". At the beginning of the year, 40% (4) children could not use 2 words from section "A" and 12 words from section "B" in their active vocabulary, but they understood all these words, the children could use all the other proposed words in their active vocabulary. At the end of the year, 50% (5) children could not use 2 words from section "A" and 12 words from section "B" in their active vocabulary, but they understood all these words, and the children could use all the other proposed words in their active vocabulary. At the beginning of the year, 40% (4) children used 7 words from section "A" in active vocabulary, the rest were observed in passive vocabulary, used 2 words from section "B" in active vocabulary,



9 words in passive vocabulary, 5 words in section "B" were not understood by the children, because it was found that they did not use these words in everyday life at all. At the end of the year, 10% (1) children used 8 words from section "A" in active vocabulary, the rest were observed in passive vocabulary, 3 words from section "B" were used in active vocabulary, 9 words were used in passive vocabulary, 4 words from section "B" were used by children they didn't understand.

Task 2 was to check the children's verb vocabulary. What does the child do to the material offered by the experimenter? A task was given to find words based on the question. A follow-up analysis showed that at the beginning of the year, 10% (1) of the children were able to independently find more than 3 words for all 6 words offered. Including, Rabbit jumps, runs, sleeps. At the end of the year, 30% (3) children were able to independently find more than 3 words for all 6 offered words. 30% (3) children 3 out of 4 of the words offered at the beginning of the year, the remaining 2 words

He was able to find words from 2, by the end of the year, based on re-examination, this indicator increased to 20% (2). 40% (4) children were able to find 2 words out of 4 out of 6 words from the task given at the beginning of the year with the help of guiding questions, and at the end of the year 20% (2) children were able to find 2 words out of 4 out of 6 words given with the help of a speech therapist, 2 words they could find only one word. At the beginning of the year, 20%

(2) children were able to find 1 word based on the guiding questions for 5 out of 6 words offered with help after the instruction was repeated by the speech therapist and the task was re-explained. Children who refused the task were not observed.

Task 3 was a test of children's idiom vocabulary, in which the child was shown a series of pictures and the child was asked to name the situations in the picture. According to the test results, at the beginning of the year, 10% (1) children were able to independently find 2 words, at the end of the year, 20% (2) children were able to independently find 2 words for each proposed task. For example, the baby is crying (the picture is shown), how is the baby crying? They answered that the baby was crying loudly and for a long time. 30% (3) children were able to answer 2 questions based on the guiding questions for each task offered at the beginning of the year, and by the end of the year, based on re-examination, this indicator increased to 20% (2). 20% (2) of the children were able to find 2 words for 2 of the 3 tasks at the beginning of the year based on repeating each instruction several times and guiding questions. At the beginning of the year, 10% (1) children were able to find 2 words for 3 of the 3 tasks based on several repetitions of each instruction and guiding questions. At the beginning of the year, 20%(2)children were able to find 1 word for 2 out of 3 tasks based on repeating each instruction several times and with the help of a speech therapist. At the end of the

year, 10% (1) children were able to find one word for 3 of the 3 tasks based on repeating each instruction several times and with the help of a speech therapist. 20% (2) children could not complete the task at all, despite the help provided at the beginning of the year. This indicator decreased by 10% at the end of the year.

Task 4 examined the determiner selection condition of children's speech by showing the child a series of pictures and asking the child to name the situations in the picture. According to the test results, at the beginning of the year, 20% (2) children were able to independently find 1 word for each of the offered words, at the end of the year, 40% (4) children were able to find 2 words for each offered task based on the help of a speech therapist. For example, a house (picture shown), What kind of house? They answered that it was a beautiful, big house. 30% (3 children) after repeating each task offered at the beginning of the year several times, based on guiding questions, this indicator increased to 10% (1 child) based on reexamination by the end of the year. 20% (2) children were able to find 1 determiner for all words offered at the beginning of the year with the help of a speech therapist, and this indicator was the same at the end of the year. 30% (3) children could not complete the task despite the help provided at the beginning of the year, gave vague answers. This indicator was reduced by 20% based on the re-examination at the end of the year.



The 5th task consists of a task check consisting of ambiguous words in children's speech. According to the results of the check, at the end of the year, 10% (1) children were able to independently say 3 words for each task offered. 20% (2) children were able to independently say 2 subjects for each task offered at the beginning of the year, by the end of the year, based on re-examination, this indicator increased to 10% (1). 40% (4 children) were able to say the name of the object with the help of a speech therapist after showing the picture of the object to all the words offered at the beginning of the year. At the end of the year, 20% (2) children were able to say the name of the object based on the help of the speech therapist after showing the picture of the object. 10% (1) children could not complete the task despite the help provided at the beginning of the year, gave vague answers.

The 6th task consists of checking the vocabulary of possessive pronouns of children's speech, and the results of the check show that at the beginning of the year, 20% (2) children made one mistake while performing the task and corrected it independently. At the end of the year, 40% (4) children made 1 mistake while performing the task and corrected it independently. 40% (4) children made 2-3 mistakes while performing the proposed tasks at the beginning of the year, help was required: auxiliary questions, instructions corresponding to specific details and pictures were given, and they corrected these mistakes



based on the help of a speech therapist. Raised to 10% (1 item). 30% (3 children) performed some tasks incorrectly at the beginning of the year, they could not correct these mistakes even with the help of a speech therapist, this indicator decreased to 20% (2 children) by the end of the year. 10% (1) children could not complete the task despite the help provided at the beginning of the year, gave vague answers.

In the training conducted by the speech therapist, vocabulary work was directed to the development of understanding of general and figurative meanings of words, polysemy, general and specific relations. Vocabulary enrichment included learning new words, deepening the understanding of known ones, clarifying their aspects and differences, choosing synonyms and antonyms. The speech therapist introduced the children to the meanings of different words, words with multiple meanings, similar and opposite meanings, using interesting game situations. By choosing words with opposite meanings, children were taught to compare different objects and events:

A) time (day-night, morning-evening);

- B) space (near-far);
- V) natural phenomena (dark-light);

G) proportion according to taste, weight, hardness (sour-sweet, heavy-light, wide-narrow).

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Logopedic training includes exercises that teach children to find words that are specific and suitable for their content.

During the lessons, children learned to use singular and plural nouns and verb forms correctly.

Children continued to be taught to compose sentences of various forms in the classes, speech exercises based on the example given by the speech therapist were widely used. Then independently constructed auxiliary constructions, changing sentences, reconstructing the sentence by changing the person in action; expanding (expanding) the sentence with connected clauses; replacement of some elements; they have mastered making a sentence with base words, making a sentence with one base word, making a sentence based on given speech information (combination), subject or plot picture.

In order to activate children's speech and develop the skills of forming independent sentences, the speech therapist uses the method of creating a story based on plot pictures (about 5-6 exercises).

Above, we recommended to carry out the logopedic work system in order to increase the vocabulary of speech of children with dysarthria. The organization of this logopedic correctional work in the speech and intellectual development of the child, taking into account his individual characteristics, is of great importance for the effectiveness of education. Having studied the pedagogical psychological and special literature on the issue, analyzed them, and based on the results of the experiential examination, we came to the following conclusion:

- as a result of the analysis of the pedagogical psychological and methodical literature on the problem, it was found that there is no corrective pedagogical work system if the research studies aimed at studying the speech deficits of dysarthric children take into account the characteristics of the Uzbek language structure of the speech deficit;
- an experiential testing methodology was prepared in order to thoroughly study the lexical side of the speech of dysarthric children of preschool age;
 when examining the lexical side of the speech of children with dysarthria, the main attention was
 paid to the passive and active vocabulary of children.
- the development of passive vocabulary of children with dysarthria is higher than the development of active vocabulary as a result of an experiential examination.
- the results of checking the active vocabulary of children with dysarthria at the beginning of the year and then at the end of the year showed that the words in the children's vocabulary at the beginning of the year were on average 52%, and after a year of speech therapy training, it was

found that the words in their vocabulary increased by 20-30%.

 the content of corrective pedagogical work on eliminating the vocabulary of dysarthric children and its deficiencies is determined.

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