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Speech Development In Children With Cerebral Palsy Through Art Therapy

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Abstract: This article is devoted to the study of the development of speech in children with cerebral palsy using art therapy. The article describes the scientists who developed the system of correctional work with children with cerebral palsy, and the methods of developing speech in preschool children with cerebral palsy using art therapy. The article presents the principles of correctional speech therapy with children with dysarthria.

Keywords: Cerebral palsy, musculoskeletal system, hyperkinesis, speech, dysarthria, pedagogical technology, psychotherapeutic, art therapy, therapy, preschool children, psychocorrection.

Introduction: Thanks to speech, people develop a thinking mechanism. Through speech, a person acquires new knowledge, skills and abilities. The most important skill that a preschool child must master is to develop his own speech. This is considered the general basis of raising and training children in the field of education. Speech is a necessary part of communication in the developmental process. Speech disorders have a negative impact on the overall development of a child. Severe speech disorders can prevent the formation of higher mental functions of a child, including higher levels of cognitive activity. Cerebral palsy is observed in most children with injuries to the musculoskeletal system. Cerebral palsy in children is a disease of the immature, unformed brain. Engaging in art, especially for children with cerebral palsy, helps to correctly form a worldview and reveal their creative potential. Art therapy in preschool institutions, as a health-preserving technology, is aimed at developing attention, speech, memory, logic, imagination and thinking.

According to some researchers, cerebral palsy in children was described in the works of Hippocrates. However, although the discovery of this disease belongs to William Little, the first mentions in the medical literature refer to the names of doctors Denis, Billard and Kruweiler. At that time, the disease was not yet called cerebral palsy. An international group of scientists approved the term “cerebral palsy”. Muscle hyperkinesis negatively affects not only the general, but also the speech motor skills of the child. Low mobility of the speech apparatus (tongue, lips, jaw, uvula, small tongue movements are impaired) leads to phonetic disorders of speech, that is, defects in the pronunciation of sounds. Muscle hyperkinesis causes the appearance of defects in the pronunciation of sounds, such as dysarthria or anarthria. Hyperkinesis of the diaphragm, intercostal muscles leads to speech breathing, vibration of the uvula, and a violation of the rhythm of speech. In the relatively more common pseudobulbar form of dysarthria, the articulation tone is high. The mobility of the lips, tongue, uvula, lower jaw, and uvula is impaired, resulting in defects in the pronunciation of sounds, voice, and speech rate. Due to the lack of contraction of the muscles around the salivary glands, the child drools. Such a child cannot chew or swallow well. The speech of a dysarthric child is unclear, slurred, hoarse, and monotonous.

For the first time, the clinical manifestations of dysarthria were described by A. Oppenheim, G. Pezitz, who considered the mild form of dysarthria to be a speech defect, which differs in its pathogenesis, and in

the earliest classification of speech pathology, any violation of articulation was singled out and given the term “dysarthria”. Gowers divided such dysarthric speech disorders into cerebral and bulbar forms. M.S. Margulis expressed the opinion that in dysarthria it is possible to identify lesions in different areas of the brain. They studied in the context of focal brain lesions. M.S. Margulis was the first to clearly distinguish dysarthria from motor aphasia and distinguished bulbar and cerebral forms. I.I. Panchenko in his works studied the pathogenesis of dysarthria in children with cerebral palsy, the manifestation of its specific clinical symptoms, and at the same time created a methodology for speech therapy based on the pathogenetic side.

Dysarthria has the following symptoms:

- Speech articulation motor and pronunciation of sounds associated with speech breathing;

- Problems with voice;

- Deficiencies are observed in both vowels and consonants;

- Insufficient articulation praxis;

- Speech breathing disorders arise as a result of impaired innervation of the respiratory muscles.

M.V. Ippolitova, E.N. Vinarskaya, K.N. Vitrof, K. Vovatr, L. Danilova, S.S. Lyapedevsky, I.I. Panchenko, K.A. Semyonova, E.M. Mastyukova studied. When classifying dysarthria, they worked according to the principle of taking into account the focus of injury. Dysarthria is divided into bulbar, pseudobulbar, cortical dysarthria, subcortical, and cerebellar. Currently, the concept of pedagogical technology has taken a firm place in the science of educational practice and theory, but its place in the perfect dictionaries of pedagogy remains unknown. “Pedagogical technology” is a technique for meaningful implementation in the educational process. Engaging in art helps children to correctly form their worldview and reveal their creative potential. Art therapy in preschool institutions, as a health-preserving technology, is aimed at developing attention, speech, memory, logic, imagination, and thinking. The goal of art therapy is to combine the client's self-expression and self-knowledge with personal development through art, as well as to develop the ability to take constructive actions taking into account the reality of the surrounding world.

Sand therapy helps to develop fine motor skills rapidly, because the child uses all his fingers in the drawing process and performs very complex movements with them," says Gnezdilov [20]. This means that he can speak more than his peers, and his memory and coordination of movements improve. "A drawing in the sand can be understood as a three-dimensional image of any aspect of the mental state. An unknown problem plays out in the sandbox, like a drama, the conflict moves from the inner world to the outer world and becomes visible,” says O.A. Novikovskaya.

Puppet therapy is used in working with children and is based on identification with the image of a favorite hero (fairy tales, cartoons, toys). The emergence of modern dances, emphasizing the importance of personal, expressive self-expression, made it possible to address unconscious themes. Grabenko, Isadora Duncan, Rudolf Laban, Mary Wigman made a special contribution to this area.

Development of children's speech on the basis of puppet therapy.

“Doll Lolakon woke up”

Purpose: to strengthen children's ability to act with objects and toys. Continue to form play actions, achieve a balance between two actions in play - speech and movement. Form the skill of self-service.

Instructions: The child is guided through a sequence of actions to be performed upon waking from sleep.

When waking up in the morning, actions such as washing face and hands, brushing teeth, combing hair, making the bed, performing morning physical education exercises, table manners, and greetings are performed. The child is also taught spontaneous speech and the processes of knowing them based on questions and answers are also developed.

Expected results: through this technology, children with disabilities will develop the skills of self-service and self-care. Results such as table manners and regular performance of morning physical education exercises will become a habit.

Tasks aimed at the comprehensive development of children based on sand therapy.

"Draw and say" technology.

Goal: to enrich children's vocabulary with new words, develop finger motility, visual perception, speech and motor skills.

Performance: This game is held outdoors or in a room on sand that is harmless to children. The child draws simple objects in the sand (for example, a butterfly, a ball, an apple, a flower, a car). and names the pictures he draws, telling what he knows about them.

Instructions: First, the child is shown pictures of the objects that need to be depicted, the specialist or parent first draws the picture in the sand himself, and then draws it together with the child. After repeating the task 2-3 times together, it is given as an independent task.

Expected results: through this technology, children will be able to correctly name new objects, familiar objects, and Skills such as being able to correctly describe are formed. By reflecting them in the sand, finger motility is developed.

RESULTS AND DISCUSSION

1 week is allocated for the examination of preschool children in need of special assistance. The first part of the day is selected for the experiment. A calm psychological environment is created for the experiment. The experiment is organized individually with each selected foster child. The following factors are determined as criteria for assessing children:

Evaluation criteria			
High	**Medium**	**Low**	**Very low**
The child was able to complete the task without any mistakes or shortcomings. He understood the question and task correctly. He was able to answer the questions correctly. His speech was fluent.	Completed the assigned task well. Made up to 3 mistakes during the task. Good communication skills, was able to communicate freely.	Has a low level of understanding of the given task. Makes gross mistakes during the task. Has a very low level of ability to answer questions correctly	Did not understand the task given. Could not answer the questions. The level of understanding of the task is very low. There are shortcomings in speech and intelligence. The child could hardly answer the questions

Today, in the field of special pedagogy, psychology, in particular, the use of non-traditional technologies in the system of correctional and speech therapy work with children with developmental disabilities is becoming popular. The fact that art therapy is considered a psychocorrective method based on art has been used since the 50s of the last century, its capabilities, the effective impact of each type of art therapy on the development of cognitive and mental processes of children of each age, their psychological support, and the elimination of speech defects have been reflected in a number of literatures. It has been studied that the child's cognitive processes, vocabulary, and their revival through staging and play are the basis for the good formation and development of the child's psychomotor functions. The essence of art therapy, each of its types has been studied by several scientists, through the use of the identification mechanism of the plots in the stories told to children, the presented world, and the signs similar to the real state of the child. The fact that art therapy can help adults overcome their phobias and fears was considered on the example of scientific literature. Based on the study of scientific research works and their analysis, it is clear that all of the above-mentioned works were conducted in the field of special pedagogy, scientific research, but it was found that the development of speech in children with disabilities in preschool education has not been studied sufficiently as an object of research. Therefore, it was proved that the scientific and theoretical study of the

problem of developing speech in children with cerebral palsy in preschool education through art therapy, and the development of methodological recommendations for preschool educators, pedagogues and speech therapists on the development of children's speech are an urgent scientific problem.

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