

Examination Of The Lexical Aspect Of The Speech Of Preschool Children With Mental Retardation

Ayupova M.Y.

Professor of the Department of Speech Therapy, Uzbekistan National Pedagogical University, Uzbekistan

Abdullaeva Sh.Sh.

Master of Speech Therapy, Uzbekistan National Pedagogical University, Uzbekistan

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Abstract: This article examines the impressive and expressive aspects of speech in preschool children with delayed mental development and explains the ways to implement them. This article covers the theoretical and practical aspects of studying and assessing the speech of children with mental retardation of preschool age. The study discusses the interrelation of the ontogenetic, etiopathogenetic, speech and mental development processes of a child, as well as the assessment of the child's speech using systematic and complex methods based on the principles of an individual and differential approach. The article analyzes the phonetic, phonemic, lexical and grammatical components of speech in children with mental retardation, impressive and expressive speech functions, and special diagnostic methods used in the process of speech formation. The article also recommends the use of didactic games, subject pictures, demonstration materials and step-by-step tasks in assessing a child's speech. Assessment of speech activity is carried out on a 5-point system, and this assessment allows you to identify the speech strengths and weaknesses of children with mental retardation, plan individual correctional and rehabilitation work, and monitor the dynamics of the child's development. The article enriches speech development and logopedic diagnostics with practical instructions for working with preschool children with mental retardation, providing a methodological basis for special education teachers and logopedics.

Keywords: Mental, impressive, expressive, complexity, visualization, ontogenetic, etioprogenetic, differential, individual, systematic, vocabulary.

Introduction: The study of the speech of children with mental retardation of preschool age is based on such principles as ontogenetic, etiopathogenetic, the interrelation of speech and mental development, individual and differential approach, complexity, demonstrativeness, and the progression from simple to complex. The principle of development is used in the formation of the child's speech functions, which includes the analysis of objective and subjective conditions and processes of speech disorders.

The principle of systematicity is intended to analyze the interaction of the components of speech and is used to develop the interconnected nature of the phonetic and phonemic, lexical and grammatical aspects of speech. The principle of mutual harmony, which reveals the connection between the formation of speech in various situations and the state of mental processes, is also

taken into account [1].

The lexical aspect of speech in preschool children is the main tool for their perception of the environment, expression of thoughts, and communication. The level of formation of vocabulary is directly related to the general mental development of the child, the scope of imagination and the culture of speech. Examination of the lexical system of children's speech is an important diagnostic process aimed at determining their vocabulary, skills in understanding and using words appropriately. Vocabulary reflects the child's mental development, communication needs and the extent to which he perceives the environment. Therefore, methods for studying the lexical system allow us to assess not only the quantitative indicators of words, but also the level of their substantive, logical and functional use. This process is also of great importance

in identifying lexical deficiencies in children with mental retardation and choosing the right pedagogical direction to eliminate them [5].

Examination of oral speech of children with mental retardation of preschool age consists in determining the level of their vocabulary. Speech therapy examination of children is carried out individually in a separate room, in a quiet environment. Only after the tasks are clearly explained to the children are they expected to answer. If the child does not understand the task, the task is explained again or a sample is given. After that, the test subject is expected to answer individually. During the research, the child's fatigue is taken into account, and games are played between tasks. The children's answers are recorded in the protocol without changes [3]. In many children with mental retardation, passive (speech comprehension) speech is also impaired along with active speech.

A.R. Luria emphasizes that when examining expressive speech, it is necessary to take into account its interrelation with its expressive side. This is explained by the fact that impaired speech hearing leads to secondary impairment of speech articulation and expressive speech. Impairment of articulatory processes and internal speech affects such impressive processes as the perception of speech sounds and understanding the content of speech [3].

Regarding the complexity of expressive speech, A.S. Vygotsky expressed the opinion that "Understanding speech is something more and more important than simply reacting to a sound signal." Accordingly, children are tested for expressive speech in the following tasks:

- dialogue. This task consists of 10 questions that gradually become more complex. Difficulties in understanding such questions are observed only with gross defects in expressive speech;
- carrying out verbal commands;
- understanding nouns and verbs in the plural and singular;
- understanding the meaning of sentences, checking the level of understanding speech based on the meaning of words. In this case, the child is shown a group of pictures and asked to show the named pictures [3].

The following special methods are used to check the expressive vocabulary of children with mental retardation: naming objects, naming objects according to their description, generalizing the names of objects, etc. Children are offered pictures with objects. They are asked to name their names, actions and qualities.

In terms of naming objects, children are offered pictures with objects on the following topics: toys,

fruits, vegetables, household, animals, wild animals, clothes, shoes, dishes, transport. Children are invited to name the pictures. They are asked to name them and answer the question of what we can call the objects depicted in this picture in one word. In this method, the use of the following generalizing words is checked: toys: dolls, car, bear, cube, pyramid, ball; vegetables: vegetables, onions, potatoes, tomatoes, cucumbers, cabbage, turnips, beets; domestic animals: sheep, goat, horse, puppy, cat, cow; wild animals: lion, tiger, bear, fox, wolf; clothes: shirt, pants, coat, skirt; shoes: boots, shoes, calish, boots, sneakers; dishes: plate, bowl, spoon, fork, teapot, cup; transport: bus, plane, steamer, train, subway; family: father, mother, grandmother, grandfather, brother, sister, younger brother [5].

Naming words that indicate movement: The speech therapist shows the child pictures of objects and asks questions that express movement: What does the wind do? (pets, sings, blows, makes noise, knocks down). What words can describe what a cat does? (scratches, plays, purrs, meows, caresses, sleeps, looks). What does a puppy do? (sleeps, plays, meows, caresses). What can a puppy do? (sleeps, plays, meows, eats, caresses). What does a puppy like best? (sleeps, plays, runs, bites (bones), chases (cats), caresses). How does a puppy behave when you give it a bone? (meows, enjoys, looks, rejoices, rushes). What does a puppy do when you pick it up? (moves, rejoices, looks, sleeps). What does a bird do? (flies, sits, chirps, looks, sings, drinks). What does a cat do when it is petted? (meows, rejoices, gets excited, scratches). What does a cat do when it sees a mouse? (chases, runs, catches, jumps). What sounds do geese, ducks, crows, dogs make? How do sparrows, frogs, snakes, fish, rabbits move? Naming the properties of objects: The speech therapist gives the child the task of finding the signs of the object: - grapes - what?

(green, ripe, sweet,) - pear - what? (yellow, sweet, ripe, tasty), apple - what? (tasty, sweet, big), lemon - what? (yellow, juicy) [4].

Examination of the speech activity of children with delayed mental development is carried out in stages and includes an analysis of the main components that make up speech. Instructions for each task are given with a specific example. This is important for children with mental retardation, providing them with guidance. When difficulties are observed, the child is assisted by guiding questions, repeating instructions, and analyzing the sample. A scoring system has been developed to assess the level of speech development. It is recommended that the results of the task be evaluated on a 5-point system. Each task is evaluated separately and displayed in graphs. This assessment

allows you to identify the strengths and weaknesses of the speech activity of children with mental retardation, compare their results with those of other children. The assessment takes into account the specificity and correctness of the task (correct understanding and acceptance of instructions, ability to accept and use help, ability to correct mistakes). Qualitative-quantitative analysis of the results allows not only to determine the degree of speech impairment of one child, but also to determine a typical indicator for all children of this category. Taking into account the characteristics of cognitive activity of children with mental retardation (low cognitive activity), it is also recommended to use various methods that increase cognitive activity, namely didactic games, exercises, visual materials, toys, pictures, and diagrams [3].

CONCLUSION

In conclusion, it should be said that the above methods of examining the speech of children with mental retardation and the recommended materials allow solving the following problems: taking into account the developmental characteristics of children; drawing conclusions about the level of formation of the basic components of speech in a qualitative-quantitative manner; identifying the potential capabilities of children; planning corrective and developmental work in accordance with the specific needs of the child; implementing an individual approach; determining the dynamics and further direction through the results of a step-by-step examination.

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