

# Speech Therapy Work in The Correctional and Pedagogical Education of Children with Developmental Disabilities

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**Abstract:** This article covers the content, goals and objectives of speech therapy work in the correctional and pedagogical education of children with developmental disabilities. Also, the specific features of speech disorders in such children, methods of their elimination, and ways to effectively organize speech therapy classes are analyzed. The work considers the possibilities of supporting the speech development of children through the use of modern pedagogical approaches and correctional methods.

**Keywords:** Developmental disability, speech therapy examination, training, principle of complexity, principle of comprehensive study of the child's speech capabilities.

**Introduction:** The process of raising and educating children with developmental disabilities is a pressing issue in the field of modern pedagogy and speech therapy. This category of children is characterized by a high incidence of speech disorders, which significantly affect their social, emotional and cognitive development. Therefore, it is necessary to pay special attention to speech therapy in the correctional and pedagogical system.

Speech is the main tool in the overall development of a child, through which a person expresses his thoughts, communicates with the social environment and acquires knowledge. Speech disorders in children with developmental disabilities can manifest themselves in various forms - difficulties in articulation and pronunciation, impaired phonemic hearing, weaknesses in lexical and grammatical aspects. Therefore, the correct organization of speech therapy examinations and classes plays an important role in their speech and overall development.

## Literature review

The issues of correctional-pedagogical study of speech disorders in children with developmental disabilities

and the organization of speech therapy work are a topic that has been widely studied in recent decades. In Uzbek and foreign literature, the methodology of speech therapy work, diagnostic methods, planning of classes and the importance of an individual approach are emphasized.

The studies of G.A. Volkova (1997), T.B. Filechova (2003) and G.V. Chirkina (2005) showed the importance of the principle of complex diagnostics in examining children with developmental speech disabilities and organizing classes. Their works emphasized the importance of taking into account factors such as the child's history, family circumstances, articulatory apparatus and phonemic hearing status in speech therapy examination.

Also, modern research (Ivanova, 2010; Petrova, 2012) shows the need to individualize the methodological approach when working with children with complex developmental disorders. For example, simplifying tasks taking into account age-specific characteristics or using visual materials increases the effectiveness. It is emphasized that speech therapy classes for children with visual and hearing impairments should be based on practical and demonstrative methods.

In addition, since speech disorders include various components - articulation, acoustics, grammatical structure and phonemic skills, speech therapy work requires an integrated approach (Смирнова, 2015; Захарова, 2017). A complex methodological approach takes into account not only speech, but also non-speech functions - movement, perception, attention and memory.

At the same time, when teaching children with speech and other disorders, the didactic materials of classes and the content of tasks should be selected in accordance with the individual characteristics of the child. This approach helps to increase the effectiveness of speech therapy work, develop communicative functions in children and adapt them to the social environment.

#### Results and discussion

In the correctional and pedagogical system for children with developmental disabilities, we allocate a special place to speech therapy work, since speech disorders play an important role in the structure of developmental disabilities. Many special studies have been devoted to the study of the problem of speech disorders in children, and speech therapists often encounter such cases in practice, find themselves in difficult situations, in which they must independently search for the correct and targeted ways of corrective influence, model the pedagogical process, and implement an integrated approach in specific work.

The tasks of a speech therapist include:

- developing methods for speech therapy examination of children with developmental disabilities;
- conducting diagnostic measures to determine the level of speech development and speech characteristics of the child;
- establishing interaction with this category of children in correctional speech therapy work.

The diagnostic stage is of great importance, at which the existing defects, their content, and the individual characteristics of the child are determined. Speech therapy examination of children with developmental disabilities is aimed at a fairly wide range of problems - studying the child's history, family circumstances, the structure of the speech apparatus, identifying disorders in the language system, determining the state of

phonemic hearing, etc.

This speech therapy examination is fundamentally no different from the existing and proven methods (G.A. Volkova, T.B. Filechova, G.V. Chirkina). Developments in this area should be applied in accordance with the specifics of the defects in each specific case, as well as the age of the children. For example, for toddlers, the material is simplified; for children with visual impairments, real objects, toys or relief pictures are used instead of pictures; the correct formulation and selection of instructions for tasks is of great importance. Taking into account the excessive polymorphism of the children's contingent, according to its characteristics, the following principles can be recommended for the development of diagnostic methods for speech therapy examination:

The principle of complexity involves the collection and analysis of information from specialists - doctors, speech therapists, psychologists (according to their discussions).

The requirement to take into account age limits sets the goal of diagnosing children according to their age, and then teaching them. Children come to special institutions at different ages (from 3 to 5 years old), therefore, examination tasks should be developed according to the age capabilities of each child, offering him to start with tasks that he can perform at this age.

The principle of comprehensive study of the child's speech capabilities means that in a speech therapy examination: the structure and level of mobility of the articulatory apparatus, general and fine motor skills, oral praxis, phonemic and synthesis skills, as well as the pronunciation of sounds, lexical and grammatical aspects of speech and other important features are studied one by one.

The examination should be carried out on the basis of a combination of various methods and techniques, in accordance with each specific situation. An important condition for its success is the correct selection of instructions, and sometimes the correct explanation of the proposed tasks. They can be demonstrative verbal, performed in collaboration with a speech therapist, gradually moving on to independent performance. The child must understand what is required of him, what task he faces.

When working with children with a developmental

disability, standard methods of examination should not be used. Depending on the preserved and impaired functions, and the child's speech capabilities, verbal and nonverbal tasks are offered. For some children, most of the selected tasks should be nonverbal, while for others, both verbal and nonverbal tasks are preferred.

It is important to record and compare the speed of completing tasks, the correctness and accuracy of the child's activity. During the examination, many important factors were determined: whether the children were interested in the task or not, their attention, level of fatigue, attitude to failure, etc.

Speech itself reflects a complex physiological, psychological, thinking process, in which, as well as the elementary level (sensorimotor, gnostic-practical), its highly organized level is also included (spiritual, linguistic features). In this regard, speech and its disorders, as well as corrective work aimed at its correction, are considered from different angles - medical, psychological, linguistic, psycholinguistic.

Violations in the motor areas, gross sensory and, in some cases, mental retardation lead to the underdevelopment of all components of speech. Speech disorders in children with developmental disabilities have their own specific features (difficulties in distinguishing sounds similar in articulation and acoustics, in mastering pronunciation control, in mastering the grammatical structure of speech), requiring differential methods of corrective influence. When studying speech disorders in children with various disabilities, not only all components of speech activity are analyzed and recorded, but also the state of non-speech functions, which subsequently underlie complex speech therapy. The specificity of working with this category of children is that the correction of speech disorders and many factors that aggravate them is carried out taking into account the nature of additional disorders - vision, hearing, motor capabilities, and cognitive characteristics.

Speech therapy is a whole system of pedagogical methods that combine a number of interacting parts. These exercises are considered the main form of correctional education, in the process of which all components of speech are developed sequentially and in interaction. The leading organizational forms are individual and frontal exercises. For children with

complex developmental disorders, it is advisable to use individual forms of work. For the success of individual speech therapy exercises, their correct organization and accurate knowledge of specific disorders are necessary. The timing of eliminating a particular disorder, as well as the sequence of its elimination, depend on the manifestation of the defect identified during the examination.

Proper planning of all work is of great importance. Each of its stages should have well-thought-out specific goals and final results. The process of planning a lesson begins with determining the goal. In this case, the emphasis on educational activities and the development of children's cognitive activity should be clearly formulated. The structure of the lesson, the choice of methods and techniques, vocabulary work will depend on its topic and purpose.

When conducting lessons, a speech therapist should always conduct observations and analyzes, determining what children have mastered and what needs to be worked on further. A speech therapy work program can be built taking into account the following factors, taking into account the conditions of effectiveness for it.

1. In this work, special attention is paid to the development of the communicative function of speech. The acceleration of speech communication leads to the emergence of extensive speech practice. The correct selection of material that is convenient for children's pronunciation and relevant for their communication serves as a guide to entering into communication. It is also of great importance to create favorable conditions, use various types of activities aimed at establishing direct communication. Children should be taught to apply the processed speech operations in similar or new conditions, to creatively implement the acquired skills in various types of activities.

2. In connection with the low speech development of children and the slow pace of assimilation of the material, it is necessary to correctly determine the volume of the proposed material, pay special attention to the content of each lesson.

The specificity of working with children of this category depends on the structure of the components of the embodied defect, which can be manifested in various speech (dysarthria, rhinolalia, etc.) disorders, disorders of the analyzer system (vision, hearing, musculoskeletal

system) or intellectual disorders. For example, in speech therapy work with children with deaf or blind dysarthria, it is necessary to include speech therapy massage, actively conduct articulation exercises, etc.

3. The development of analysis-synthesis activity in most children of this category involves the development of higher mental functions. During each session, corrective tasks emphasize one or another mental function - memory, attention, perception, thinking.

4. The planning of speech therapy sessions assumes the need to include exercises aimed at activating the activity of various stored analyzers, which are most effectively involved in the formation of speech activity.

5. An important condition for organizing and conducting such classes is a system of interactive repetition of the content of the work methods. Repetitions should not be mechanical, but conscious, by changing the type of classes, children will gain interesting and new elements. To consolidate the material, specially created or spontaneously arising conditions are introduced into the repetition system.

6. Various methods are used in speech therapy classes: practical, demonstrative and verbal. The features of their selection and application are determined depending on the speech and additional defects, the content, goals, objectives of the speech therapy effect, the stage of work, and the individual psychological characteristics of the child. For example, in eliminating a defect in the form of dysarthria in a blind child, it is advisable to rely on practical and verbal methods.

The criterion for combining and selecting methods and techniques for teaching children is the alternation of types of activities: naming pictures, speaking together and in reverse, finding a word corresponding to a given sound, listening, etc. The lesson should be planned so that all the various analyzers in children are directly involved - hearing, vision, speech, movement, tactile, etc.

One of the important conditions for organizing the educational process for this category of children, depending on their specific characteristics, is the coverage of speech therapy classes with didactic materials. In this case, the correctness and accuracy of the child's activity in the speech and locomotor apparatus should be depicted on a sufficiently large, bright, clear, tactile surface for children with a number

of digits. If speech disorders in children are accompanied by visual impairments, then the main requirement is given to pictorial materials: the image should be bright, with clearly delineated boundaries.

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