

NORMAL AND PATHOLOGICAL FORMATION OF SPEECH FUNCTIONS IN CHILDREN WITH IMPERFECT SPEECH DEVELOPMENT

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Abstract: This article deeply studies the patterns of speech function formation in children with speech underdevelopment (SUD) in norm and pathology. It shows that speech disorders are associated with psychological, neurological and social factors. The article also pays special attention to the communication needs of children, the development of communicative functions, and methods of identifying and correcting speech defects.

Keywords: Speech development, Speech functions, Speech disorders, Psycholinguistics, Preschool children, Children with underdeveloped speech.

In recent times, the success of the study of speech underdevelopment has been achieved due to the fact that researchers have increasingly relied on the methodology of a comprehensive syndromic approach to the analysis of the defect in their work. The psycholinguistic basis of such a study is one of the first, and this is expressed in the work of E. F. Sobotovich, V. A. Kovshikov, B. M. Grinshpuk and other researchers. However, according to V. K. Orfinckaya, unlike previous periods, there were more controversial issues and contradictions among researchers studying speech underdevelopment than generally accepted rules. The inertness of the processes of observation and inhibition of the psychophysiological mechanisms underlying speech underdevelopment is indicated by the high functional vulnerability of the tissues of the cerebral cortex. I.K. Samoilov researchers have identified a lack of spatial concentration of excitatory and inhibitory processes in the cerebral cortex[7].

In children with incomplete speech development, the study of the electrical activity of the brain often revealed pronounced local changes in biorhythmicity in the temporal-occipital areas, fronto-occipital and peripheral branches of the dominant hemisphere. L. A. Belagrud) A. I. Lidenbauk and other researchers, in order to expand the concept of incomplete speech development, include in it all the states of speech absence and its late-formed devices. They distinguish between incomplete speech development and neurological absence of speech, regular dementia, absence of speech in schizophrenia, hearing loss and algophrenia. K. P. Bekkor M. Savok in the picture of speech development and biological and social causes now distinguish components associated with the predominance of their incompetence. According to researchers, the previously named hearing-motor-motor developmental delay with specific movements is manifested, which is caused by disorders of the auditory-motor complex or adverse social influences. R. E. Levina recommends a psychological type of disorder. In this case, he divides children into groups. With incomplete auditory perception (phonemic) and visual perception without impairment. With impaired subjective and mental activity.

Considering the specifics of the psychophysical and speech state of preschool children, the methodology for studying the speech of children with incomplete speech development was developed in this direction, taking into account modern data on the study of speech in neuropsychology. This methodology is aimed at analyzing speech disorders from a qualitative and quantitative perspective, which allows classifying speech disorders by their nature and degree of manifestation. In addition, it can be used to assess the symptomatology and degree of thoughtfulness of speech development. In childhood, oral speech is of great importance for a person with speech communication.

Thus, the tasks specified in the methodology allow us to isolate the central link of speech disorders, since they consider defects at different stages (sound, word, sentence, text), each speech defect

manifests itself to a different extent. The underdevelopment of speech function in children and the specificity of secondary defects in the child's mental development are conditioned by the inability to master the program requirements of a public kindergarten without influence. The secondary defects of cognitive activity, indicated by many authors (M.E. Khvatsev, R.E. Levina, Ye.M. Mastyukova, V.K. Vorobeva, etc.), indicate the need to form such thinking operations as memory, perception, analysis, synthesis, comparison, generalization in children of this category. Therefore, the aspects related to the study of the specifics of cognitive activity in children with incompletely developed speech deserve special attention. However, information on these specifics and the development of correction methods is rare in modern literature [3].

The development of speech functions is a complex process, and R.E. Levina, studying the laws of the formation of children's speech in norm and pathology, distinguishes five stages that a healthy developing child goes through during the acquisition of speech. Until the first phonemic stage, the child does not differentiate sounds, understand speech and have personal speech activity, active speech at all.

At the second stage, the separation of relatively contrasting or distant phonemes appears. However, close phonemes are not differentiated. The child's pronunciation is distorted, he does not distinguish between the correct and incorrect pronunciation of others.

At the third stage, decisive shifts occur.

The child begins to hear the sounds of the language in accordance with their phonemic signs, he feels the difference between incorrect pronunciation. The speech sound remains incorrect. However, the child begins to adapt to the new perception, which is expressed in the appearance of intermediate sounds between the sounds pronounced by adults. At the fourth stage, new images of sound perception begin to prevail. The child begins to recognize words that are already pronounced incorrectly, and the previous norm is expressed. Active speech develops almost correctly.

At the fifth stage, the process of phonemic development is completed, and the child hears and speaks correctly. It forms subtle and differentiated sound images of words and individual sounds. The correct development of a child's speech is determined not only by the level of development of phonemic perception and the pronunciation side of speech, but also by the ability to distinguish the sound composition of words in the speech of others and in personal speech.

One of the main functions of speech that develops in preschool age is the communicative function. From early childhood, the child uses speech as a means of communication. Communication occurs as a specific situation with the participation of adults and adults.

Speech expresses certain requirements, answers to questions, and questions that arise in connection with any activity or with new objects or events. The role of communication is great not only in the life of a child, but also in the life of a person in general. Communication is usually included in the practical interaction of people. It is also carried out in joint work, study, team play and many other activities. Communication provides planning, implementation and control of people's activities. At the same time, communication satisfies a person's specific needs for communication with other people. The satisfaction of this need, which arose in the process of social and historical development of people, is associated with the emergence of a feeling of joy.

The communication process can become separated from other forms of activity and acquire relative independence. By the end of the first year of life, a form of communication with others is formed in children - object-action communication, a form of interaction with others associated with the joint play and manipulative activity of a child and an adult.

To do this, children use practical actions in combination with the function of expressive actions (approaching, observing the object, etc.). During the preschool period, the child's attachment to a

specific situation, characteristic of object-action communication, is preserved. The word serves only this form of initial communication.

Gradually, mastering the function of verbal images of speech allows the child to move away from situations and interests that are not used.

By the end of the preschool period, extra-situational personal communication appears in children. Its main form develops from adolescence.

Communication tools and control processes equally affect speech communication. The development of verbal communication, like the development of speech, also needs to be taken into account, as well as the development of mental processes necessary for communication and influencing the formation of speech behavior. Speech disorders are characterized by a violation of speech means (limited vocabulary, changes in the meaning of words, and other defects).

Scientists are interested in the theoretical and practical study of the problem of checking and eliminating speech underdevelopment in preschool children. Speech errors in children with a lag in speech development are considered accidental in comparison with children with incomplete speech development. In such children, the volume of speech skills lags behind the norm, and it is common for them to make mistakes characteristic of children younger than themselves. Despite a certain level of limitations from age norms (in particular, the range of sounds), children's speech provides its communicative functions, and in some cases is a regulator of expressive behavior. In them, the desire for spontaneous development, the use of developed speech skills in free communication, is more clearly expressed, which allows them to compensate for speech deficiencies until they enter school.

Underdevelopment of speech is defined as a form of speech anomaly in children with normal hearing and intelligence, in which the formation of all components of speech (phonetic-phonemic, lexical and grammatical aspects of speech) is impaired.

Underdevelopment of speech components leads to a lag in the development of literacy in children in the future, to the inability to fully master the kindergarten school programs.

Research has been conducted in various directions on the shortcomings of underdevelopment of speech in children of preschool age. R. E. Levina (NTR) distinguished 3 levels [10].

1. Underdevelopment of speech is characterized by the absence of speech, such children are speechless children. Children aged 4-5 years old have a small vocabulary, unclear and incomprehensible speech is limited to a complex of sounds. The characteristic feature of these children is the presence of expressive words with multiple meanings when differentiating objects and phenomena.

The passive vocabulary of these children is larger and richer than their active vocabulary, but they have reduced speech comprehension, do not understand the meaning of many words, there are no stasis in the pronunciation of sounds. Sounds are replaced by each other, phonemic training is impaired. For children with this level of general speech development, the tasks given on the analysis of sounds are voiceless.

2. It is characterized by the initial widespread speech disorder in which speech is not fully developed. Children can use simple phrases, have a certain vocabulary, they can distinguish the names of objects and phenomena from signs. However, in such children, the development of speech is clearly expressed at a gross level [5].

They use sentences consisting of two or three words. Their vocabulary is below the norm for this age, they have difficulty using words that indicate action, they do not know the name of an object, its color, shape, and other signs. They confuse the forms of agreement, and they cannot match the number of the verb with the number of the noun.

The phonemic aspect of speech lags behind this corresponding norm, syllables change places, consonants shorten the sound when they come one after another.

3. In the expanded phraseological speech of the incomplete development of speech, elements of underdevelopment in the lexical-grammatical and phonetic-phonemic aspects are observed.

Children can communicate with people when they have speech, but they can do this with the help of their explanations in the presence of parents (educators), but it is very difficult for such children to communicate freely, they cannot distinguish sounds from each other when pronouncing them, they divide a group of sounds into sounds that are easier in terms of articulation, in some cases, they distort the pronunciation of sounds, and the vocabulary is also lagging behind the norm.

The specificity of lexical errors is visible in the analysis of vocabulary. During the examination, grammatical errors are observed, such as not speaking words to the end in sentences. In most cases, there is a lack of understanding of the change in the meaning of words with the addition of an adverb.

The following factors are responsible for the history of children 4-6 years old who are admitted to speech kindergartens: mental illnesses, alcoholism in the mother, mental illnesses, venereal and severe somatic diseases, non-compliance with the mother's daily routine during pregnancy, difficult childbirth, anemia, complications of mental diseases of internal organs, general somatic weakness, genetic diseases in children after birth. The formation or lag in the development of psychomotor functions leads to a number of difficulties in self-service in children.

The formation of fine voluntary movements is congenital, such as walking, tying shoes, tying ribbons, sewing clothes. These difficulties are exacerbated by impaired spatial orientation. This is expressed, for example, in the inability to distinguish the right and left sides of shoes from parts of clothing, etc.

R.E. Levina defines speech underdevelopment in three degrees: from the complete absence of speech communication tools to complete speech disorders with elements of phonetic-phonemic and lexical-grammatical underdevelopment.

Scientists are interested in the issue of examining and eliminating speech underdevelopment in preschool children, both theoretically and practically. Underdevelopment of speech is understood as such a form of speech anomaly in children with normal hearing and intelligence, in which the formation of all speech components is disrupted, including the phonetic and phonemic side of speech. The problem of speech underdevelopment was studied from various aspects, for example: psychological - pedagogical R.E. Levina, psychological - linguistic, V.K. Orfinskaya, E.F. Sobotovich, V.A. Kovshikov, medical - pedagogical S.S. Lyapedevsky, E.M. Mastjukova and others.

Speech errors in children with delayed speech development are considered random compared to children with incomplete speech development. In such children, the volume of speech skills lags behind the norm, and it is common for them to make errors typical of children younger than them.

Despite certain limitations from age norms (in particular, the range of sounds), children's speech provides its communicative functions, and in some cases is a regulator of full-fledged behavior. In them, the desire for spontaneous development, the use of developed speech skills in free communication is more clearly expressed, which allows them to compensate for speech deficiencies until they enter school.

Underdevelopment of speech is defined as such a form of speech anomaly in children with normal hearing and intelligence, in which the formation of all components of speech (phonetic-phonemic, lexical and grammatical aspects of speech) is disrupted.

Underdevelopment of speech components leads to a lag in children's literacy development in the future, their inability to fully master kindergarten school programs.

Research on the shortcomings of underdeveloped speech in children of preschool age has been conducted in various directions. R. E. Levina (NTR) distinguished 3 levels.

4. Speech underdevelopment is characterized by the absence of speech, such children are speechless children. Children aged 4-5 years old have a small vocabulary, unclear, incomprehensible speech,

limited to a complex of sounds. In differentiated speech, expressive words are characterized by the presence of multiple meanings.

The passive vocabulary of these children is larger and richer than the active vocabulary, but they have reduced speech comprehension, do not understand the meaning of many words, there are no stasis in the pronunciation of sounds. Sounds are replaced by each other, phonemic training is impaired. For children with this level of general speech development, the tasks given on the analysis of sounds are voiceless.

5. The initial stage of speech underdevelopment is characterized by a violation of speech in a person who is widely used. Children can use simple phrases, have a certain vocabulary, they can distinguish the names of objects and phenomena. However, in such children, the development of speech is clearly expressed at a gross level.

They use sentences consisting of two or three words. The vocabulary is less than the norm corresponding to this age, there are difficulties in using words denoting signs of action, they do not know the name of the object, its color, shape and other signs. They confuse the forms of agreement, they cannot match the number of the verb with the number of the noun.

The phonemic aspect of speech lags behind this corresponding norm, they change the position of syllables, they shorten the sound when consonants appear in succession.

6. In the widespread phraseological speech of incomplete speech underdevelopment, elements of underdevelopment are observed in the lexical-grammatical and phonetic-phonemic aspects.

Children who have speech can communicate with people, but they can do this with the help of their parents (educators) and their explanations, but it is very difficult for such children to communicate freely. When pronouncing sounds, they cannot distinguish them from each other. In some cases, it is appropriate for these children to pronounce sounds in a distorted manner. The vocabulary also lags behind the norm.

The analysis of vocabulary shows the specificity of lexical errors. During the examination, grammatical errors are observed, such as not speaking to the end of words in sentences. In most cases, there is a lack of understanding of the change in the meaning of words with the addition of an adverb.

The following factors are responsible for the history of 4-6-year-old children admitted to speech kindergartens: mental illnesses, alcoholism in the mother, mental illnesses, venereal and severe somatic diseases, non-compliance with the mother's daily routine during pregnancy, difficult childbirth, anemia, complications of mental diseases of internal organs, general somatic weakness, genetic diseases in children after birth.

The formation of psychomotor functions or their lag in development causes a number of difficulties in self-service in children.

The formation of fine voluntary movements is innate, such as walking, tying shoes, tying ribbons, sewing clothes. These difficulties are further aggravated by the violation of spatial orientation. This is expressed, for example, in the inability to distinguish the right and left sides of the shoe, etc.

R.E. Levina defines three degrees of speech underdevelopment: from the complete absence of speech communication tools to complete speech disorders with elements of phonetic-phonemic and lexical-grammatical underdevelopment.

The 1st degree of speech underdevelopment is characterized by the absence of speech.

Such children are speechless children. The vocabulary of such children aged 4-6 is poor, vague. Imitation of speech sounds is limited to a complex of sounds. The indiscriminate expression of objects and phenomena, the multiplicity of words is a characteristic feature: "tu tu" - a car, a plane, a boat; "taq" - fell, dropped, broke, spoiled. The passive vocabulary of these children is much richer than the active vocabulary, but the comprehension of speech is reduced, they do not understand the meaning of many words. There is no stability in the pronunciation of sounds, sounds are replaced by each other,

phonemic training is impaired. For children with this level of speech underdevelopment, the tasks given on the analysis of sounds are incomprehensible.

The 2nd degree of speech underdevelopment is characterized by the initial widespread use of the usual. Children can use simple sentences, have a certain vocabulary. They can distinguish the names of objects, phenomena, and individual signs. However, in such children, the underdevelopment of speech is clearly expressed at a gross level. They use sentences consisting of two or three words. The vocabulary is less than the norm corresponding to this age. There is a lack of knowledge of generalizing words. There are difficulties in using words denoting actions and signs, they do not know the name of the object and other signs. They confuse the forms of agreement, cannot match the number of the verb to the number of the noun. The phonetic aspect of speech lags behind the norm corresponding to this age. Children with such a deficiency change the position of syllables, shorten the sound that follows consonants.

The 3rd degree of incomplete speech development is characterized by elements of lexical, grammatical, and phonetic-phonemic underdevelopment in speech. Children who have speech can communicate with people, but they do this with the participation of their parents, with the help of their specific explanations. It is very difficult for such children to communicate freely.

The inability to distinguish sounds from each other when pronouncing them, replacing groups of sounds with sounds that are easier to articulate, and in some cases, distorting the pronunciation of sounds are characteristic of these children. The vocabulary also lags behind, and the analysis of vocabulary reveals the uniqueness of lexical cases. During the examination, persistent grammatical errors are observed, such as not pronouncing sentences and words in sentences to the end. In most cases, they do not understand how the meaning of a word changes with the addition of an additional word.

Underdevelopment of speech is a special form of speech development, in which the child does not have mental and auditory deficiencies, but the formation of all components of the speech system is disrupted. Children with the first level of speech development are characterized by a limited active vocabulary and insufficient differentiation of their perception of the environment. Therefore, children cannot find orientation in space (they confuse left-right, up-down, back-front), they confuse time (they cannot determine the time of day, seasons). They have difficulty distinguishing colors, cannot determine sizes and shapes by holding them with their hands (manipulating).

Children with the second level of speech development are limited to naming objects that are directly perceived, and they ignore their properties. There is also a lag in using defining words that indicate the shape, color, and material of objects. They, like children with the first level of speech development, have difficulty determining size and space.

Although children with the third level of speech development have a wide range of expressive speech, there are elements of lexical-grammatical and phonetic-phonemic underdevelopment in them. Although children at this level of speech development communicate with others, for this they need to be accompanied by their parents, who will comment on their speech. Free communication creates great difficulties for such children.

The fact that an adult does not understand a child's speech certainly has a negative impact on the child. Even the sounds that children can pronounce correctly do not sound clearly enough in their speech.

The speech of such children is characterized by undifferentiated pronunciation of sounds (consonants, affricates and sonorants), in which one sound replaces two or more sounds at once. For example, the child cannot pronounce the sound s' very clearly, but replaces several sounds with it: the sound s ("syamalyot" instead of airplane), the sound sh ("syapka" instead of hat), the sound z ("sanchil" instead of chain), the sound ch ("botya" instead of kindergarten).

At the same time, children at this stage use all word classes, correctly use simple grammatical forms, strive to build subordinate and connected sentences (“Aka ko‘tya tikti, musuk odi, uga kedi” - My brother went out, caught a cat, brought it home).

The child's pronunciation skills improve (it becomes possible to distinguish between correctly and incorrectly pronounced sounds in his speech, to determine the nature of their distortion), children begin to pronounce words with different syllables and sound structures better. Children usually have no difficulty in naming objects, actions, signs, qualities and situations that are familiar to them from their life experience. They can tell stories about their family, themselves and friends, events in the world around them, and can compose short stories on topics that interest them. However, as a result of a careful study of all aspects of the speech state, it becomes clear that in children's speech, signs of underdevelopment can be found in each component of the language system (lexicon, phonetics, grammar). In oral communication, children tend to avoid words and phrases that are difficult for them. However, when children are faced with conditions in which they are forced to use words and grammatical categories that are difficult for them, their speech development deficiencies are clearly manifested. Since our research was conducted with children whose speech is not fully developed, we will dwell in more detail on the characteristics of this level given by R.E. Levina, N.A. Nikashina. They show that children's everyday speech is relatively wide, there are no gross lexico-grammatical and phonemic disorders, only there are specific deficiencies in the development of phonetic, lexical and grammatical constructions. In the oral speech of children at the third level of speech underdevelopment, individual agrammatical sentences, incorrect or ambiguous use of some words are observed. In addition, the authors showed that children use only the simplest sentences, and the construction of more complex sentences expressing a chain of actions related to various objects creates difficulties for them. In the independent statements of such children, the correct connection of words in sentences expressing time, space, and other relationships is often violated. The incomplete development of speech at this level is primarily manifested in the lack of knowledge of the meaning of some words, their unclear understanding, and the inability to use them in sentences.

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