

DEVELOPMENT OF CHILDREN WITH SEVERE AND PROFOUND MENTAL RETARDATION

Karimova Gulkhimor Latifjon kizi

Andijan State Medical Institute,
Assistant of the Department of Neurology

Kamaldinova Dildora Bakhtiyor kizi

Andijan State Medical Institute,
Assistant of the Department of Neurology

Annotation:The article reveals the patterns of development of children with severe and profound mental retardation. The article is addressed to pediatricians and pediatric neurologists. The article analyzes significant cognitive delays and delays in the development of such types of disease. Some aspects that should be taken into account in relation to the development of children with severe and profound mental retardation were also analyzed.

Keywords:children with developmental disorders, organic damage to the central nervous system, special education, comprehensive rehabilitation by means of education, intellectual disability.

Mental retardation in children is a persistent violation of the mental development of a certain qualitative structure. With mental retardation, there is a leading deficiency of cognitive activity and first of all, persistent expressed underdevelopment of abstract thinking, processes of generalization and abstraction, combined with the inertia of mental processes. Childhood mental retardation is a condition in which a child has a significantly lower level of cognitive abilities compared to typical developmental norms. This condition usually manifests itself as limitations in intellectual functioning and the child's adaptive skills.

Mental retardation or oligophrenia is defined as a disorder of mental development in various areas: intellectual, cognitive, emotional, which leads to social maladjustment. The pathology manifests itself before the age of 3 years, when the child stops developing and develops dementia.

Symptoms of mental retardation in children appear for various reasons:

heredity;

negative prenatal effects: flu, syphilis, alcohol;

postpartum problems, such as asphyxia.

Mental retardation are not diagnosed at the age of one year. But after this you can notice signs that should alert you. We would like to draw the attention of parents: if you find any alarming symptoms, you need to understand that only a specialist can definitely tell about the presence of the disease by doing tests and conducting research. It is impossible to know for sure that a baby has mental retardation at home.

It is worth noting that over the past 20 years, significant changes have occurred in the special education system of the Russian Federation. Children with disabilities (CHD) are playing an increasingly important role as in the education system and in society as a whole. The mental development of a child occurs through the interaction of biological and social factors in the process of assimilation and appropriation of socio-historical experience developed by humanity. At the same time, the child's assimilation of human experience occurs in the course of his active activity. In the process of mastering social experience and the achievements of human culture, the child learns not only the ability to correctly act with objects created by human hands and communicate with other people using language, but also ways of thinking. It is in the process of mastering human actions and human behavior that the child acquires the necessary mental qualities and personality traits.

In addition, it is also worth noting that children with severe and profound mental retardation experience significant cognitive and developmental delays. Their intellectual functioning is well below average and they often have limitations in adaptive behavior and communication skills. The development of these children is unique and requires specialized support and interventions to improve their overall well-being and quality of life. Here are some key aspects to consider regarding child development with severe and profound mental retardation:

1. Cognitive development: Children with severe and profound mental retardation typically have limited cognitive abilities. They may have difficulty understanding abstract concepts, have difficulty solving problems, and demonstrate limited memory skills. Their cognitive development is significantly delayed compared to typically developing children.

2. Physical development: Physical development in children with severe and profound mental retardation may also be delayed. They may have movement disorders such as difficulties with coordination, balance and fine motor skills. This can affect their ability to perform daily activities such as dressing, feeding and grooming.

3. Communication: Communication deficits are common in children with severe and profound mental retardation. They may have limited or no speech and rely on alternative forms of communication such as gestures, sign language, or augmentative and alternative communication (AAC) devices. Speech therapy and other interventions can help improve their communication skills and improve their ability to express their needs and wants.

4. Social and emotional development: Social and emotional development may be impaired in children with severe to profound mental retardation. They may have difficulty understanding social cues, forming relationships, and regulating their emotions. It is important to provide them with a supportive and inclusive environment that promotes social interaction and emotional well-being.

5. Education and Intervention: Children with severe and profound mental retardation benefit from individualized educational programs tailored to their specific needs. Special education services that include a combination of structured instruction, visual supports, and adaptive equipment can help improve their learning and developmental outcomes. Early intervention services are especially important to support their development in the early years of life. 6. Multidisciplinary approach: Supporting children's development with severe and profound mental retardation requires a multidisciplinary approach involving specialists from various fields, including special education teachers, speech therapists, occupational therapists, physical therapists, psychologists and medical specialists. Collaborative efforts provide a comprehensive and holistic approach to meet the unique needs of the child.

7. Family Involvement: Families play a vital role in the development of children with severe and profound mental retardation. They provide support, advocacy and love, and play an important role in implementing home-based strategies and interventions. It is important to involve families in the child's educational and therapeutic programs by providing them with resources, training and emotional support. It is worth noting that the terminology used to describe individuals with intellectual disabilities, evolved, and the term "mental retardation" is considered obsolete. Currently, the preferred terminology is "mental retardation" or "developmental disability." In addition, each child is unique, and their developmental trajectory can vary greatly even within the same diagnostic category. Thus, individualized assessment and intervention plans are critical to meet their specific needs and promote their optimal development.

Conclusion. Reversing the above, it is worth concluding that the concept of "mentally retarded child" includes a very diverse in composition there are a lot of children who are united by the presence of damage to the cerebral cortex, which is diffuse in nature. Morphological changes, although not with the same intensity, affect many areas of the child's cerebral cortex, disrupting their structure and functions. All this causes the emergence of various, with different distinctness,

expressed deviations that are detected in all types of mental activity, especially sharply in thought processes. In conclusion, it should be noted that it should be remembered that that children with mental retardation may develop differently and some achievements may take longer. It's important to be patient and support to help the child reach his or her potential and ensure optimal quality of life.

LIST OF REFERENCES USED :

I. Scientific literature, textbooks, monographs, articles:

1. Textbook / Pedagogy and psychology of children with mental retardation (intellectual impairment) / Yakovleva, Karanevskaya, Bratkova
2. Textbook / Mental retardation in children and adolescents / Dmitry Isaev

II. Electronic resources

1. <https://www.bibliofond.ru>
2. <https://zachnik.com/sp>
3. <https://allbest.ru>
4. <https://cyberleninka.ru/a>