

SPEECH DEVELOPMENT DELAY AND DIAGNOSTIC PATHWAYS

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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 the delay of speech development and the ways of diagnosis. The ways of diagnosing such a disease were also analyzed.

Keywords:children with developmental disorders, heredity, special education, comprehensive rehabilitation by means of education, intellectual disability.

Delayed speech development is a collective term denoting the discrepancy between the level of speech activity of a child and his age. Since speech is a mental function (along with thinking, attention, perception and others), an isolated delay in speech development leads to a delay in the development of the psyche as a whole. Speech is the most important component of a child's neuropsychic development, the formation of which occurs during the first years of life, but later determines its quality in all subsequent age periods. Speech is one of the complex higher mental functions of a person. The speech act is carried out due to the complex coordinated work of the system of organs that make up the speech apparatus. The speech apparatus consists of two parts: central and peripheral.

The central speech apparatus is represented by the structures of the nervous system. It includes the speech zones of the cerebral cortex (mainly the left hemisphere), subcortical nodes, cerebellum, pathways, nuclei of the brainstem, as well as nerves innervating respiratory, vocal and articulatory muscles. It should be noted that the easiest option for diagnosis is speech delay against the background of the normal development of other mental functions.

The most common reason is heredity. As a rule, in such children, relatives began to speak after 3 years. If heredity is excluded, it is necessary to examine the child's hearing and the state of the organs of the speech apparatus. In other cases, along with a delay in speech development, the child has a delay in mental development or a peculiarity of character. In these cases, the diagnosis is always carried out with the participation of a neurologist and a psychiatrist in the following direction:

1. Consultation with a neurologist
2. A neurologist prescribes examinations of brain functions.

How can you determine the disease in a child. Let's consider it appropriate to talk a little about the symptoms of the disease. Children with delayed speech development are often withdrawn; they may have increased salivation and a characteristic face (with a half-open mouth). Children with ZPRR can be both slow and inhibited, and — much more often — aggressive, hyperactive and almost uncontrollable on the part of adults. ZPR is manifested by weak memory, rapid fatigue of the child, lack of independence, difficulties in communicating with peers, anxiety, slow physical development. Mood swings and emotional contrast

are very common — just now the child was cheerful and positive, and after 5-10 minutes he is already crying, stamping his feet and angry. School-age children suffering from delayed speech development often prefer to play with toddlers, whom they understand better than their peers.

It is noticed that Delayed speech development is considered a pathology. Occurs in children with developed intellectual abilities, but with impaired timing of speech manifestation. The vocabulary of such kids is meager, there are obvious and distinct defects in the pronunciation of individual phrases or even words.

The child cannot form sounds and correctly formalize speech. There are three degrees of RR: First degree. The child's nervous system remains unaffected, so speech delay is minimal. It is important to identify the problem at this stage in order to eliminate it quickly. Speech delay manifests itself in minor volitional and emotional deviations from standard behavior. A slight degree of speech lag, however, is a serious obstacle to the child being able to catch up with his peers in development on his own. Second degree. In addition to speech disorders, mental abnormalities and pathological manifestations from the nervous system are detected. This is manifested by emotional instability, impaired memory, attention and fine motor skills. Mild paralysis restrains articulation, mainly the tongue, tremor of the limbs appears, slowness. Third degree. The speech area of the brain is affected, which leads to extensive speech disorders. The child has difficulty pronouncing words and cannot form phrases. The sense of language is completely absent, which is why the grammar of speech is violated, memory, thinking suffers, attention becomes scattered, and emotions are unpredictable.

Symptomatology, which indicates a child at the age of 3-5 years:

The correct pronunciation is distorted. Groups of sounds are formed poorly, including deaf, sonorous, soft and hard. Phonemic hearing is poorly developed. The baby cannot distinguish the combinations of C and I, W and P, O and H that are close in articulation. Their pronunciation is difficult for him. Complex words, syllables are distorted. Often the child rearranges them, skips or replaces them with others. There are few words in the vocabulary of the little man, there are no complex combinations at all. Sentences consist of words that are inconsistent in numbers, cases and genders. For example, a kid can say instead of "big dog" – "big dog", instead of "I want to drink" – "I want to drink". All phrases are constructed extremely simply. There is no agreement in the proposals. In compound and compound sentences, the word order is chaotic, there are no prepositions at all or they are inserted at random.

In addition to the mentioned, it would be good to mention that the treatment of children's speech development involves various methods and approaches depending on the specific needs and challenges of each child. Speech therapy is a common form of treatment, which includes activities and exercises to improve speech and language skills. Speech therapists often use play-based therapy to engage children and make the treatment enjoyable. They may also use tools and techniques such as articulation exercises, language stimulation activities, and assistive technology to enhance communication abilities. Early intervention is crucial in addressing speech development issues in children. It is important to recognize any delays or difficulties in speech and language as soon as possible and seek professional help. Speech therapists can assess the child's abilities, create individualized goals, and design appropriate treatment plans. Furthermore, parents and caregivers play a vital role in supporting children's speech development. They can actively participate in therapy sessions, practice exercises at home, and create a language-rich environment by reading, talking, and playing with their child.

Remember, every child's journey is unique, and the treatment process may vary. Consult with a professional speech therapist or pediatrician for specific guidance tailored to your child's needs.

In general, speech development delay is a condition in which a child does not reach the expected level of speech development for his age. Diagnosis of speech development delay includes several options and ways of assessment, including the following:

1. Early intervention: Parents and close people around the child may be the first to notice a delay in speech development. They may pay attention to the absence or limited use of speech by the child, the lack of coherent speech or understanding of words and instructions. In case of suspected speech development delay, it is recommended to contact a pediatrician or an early development specialist.
2. Speech development assessment: Specialists, such as speech therapists or speech therapists, evaluate the development of speech in children. This may include observing the child while playing and socializing, as well as using standardized tests and development scales. They can also evaluate the child's hearing and overall development.
3. Medical assessment: In case of suspected speech development delay, doctors may recommend additional medical studies to exclude organic causes of delay, such as hearing problems or general development.
4. Early intervention: After the diagnosis of delayed speech development, early development specialists can offer an early intervention program. This may include regular sessions with a speech therapist or speech therapist, as well as recommendations for parents on ways to stimulate the child's speech development in everyday life.

Most experts agree that it is necessary to restore the processes of proper development and cure the pathology of psychorechological development before school education. The greater the neglect of the disease, the more difficult it is to treat it and the more irreversible the consequences. The first thing to do if parents notice the strange behavior of the child and the symptoms that we have listed above is to go to a neuropsychologist or neurologist for diagnosis. The doctor will check the child's ability to perform exercises for thinking, concentration, attention and make initial conclusions about his condition. This is followed by correctional programs, work with a speech therapist, a speech pathologist, a teacher and other specialists who will help to remove the main defects. Let's note again, the main factor of success in treatment is the timeliness of correction. After 5-6 years, it is sometimes almost impossible for doctors to nullify speech disorders, problems of psychological development. This will definitely cause harm in the child's later life. Today, there are a lot of specialists who can prescribe high-quality and correct treatment that can completely remove the consequences of ZPRR.

It is important to note that every child is unique, and earlier diagnosis of any disease will help to cure and provide timely assistance to the child!

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