



## SOCIO-MEDICAL ASPECTS OF CHILDREN'S DISABILITY (On the example of Surkhandarya region)

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### ABSTRACT

*This article provides information on the socio-medical aspects of childhood disability as a backbone indicator of public health.*

Introduction. Currently, there are many unfavorable trends in the dynamics of the health status of the child population, namely:

increased frequency of congenital and hereditary diseases;

a high proportion of children born with injuries and pathologies of the central nervous system;

progressive growth of chronic forms of pathology and diseases of allergic origin;

an increase in the frequency of complications of viral and parasitic diseases, including controlled infections.

According to the World Health Organization, about 10% of the world's population are disabled, of which more than 100 million are children with disabilities. In particular, 4.9% of children under the age of 16 in the most developed countries of the world live in China, 14-15% in the UK, 6.3%

in Saudi Arabia (4.3-9.9% depending on region) and 12.8% in the USA, 4.5% of children in Russia are children with disabilities. Today, more than 700,000 (2.06%) disabled people live in Uzbekistan, including more than 100,000 (14.3%) disabled children under the age of 16.

The increase in morbidity among children causes an increase in the disability of the child population. Over the past 10 years, the number of disabled children has increased by 103.6 thousand.

The increase in the number of children with disabilities is associated with the increase in 2006 of the age limit for children with disabilities from 14 to 16 years (this corresponds to the main international legal acts and current legislation in the Republic of Uzbekistan), as well as the introduction of a system for early detection of deviations, diagnostic, including screening programs.



The purpose of the work. This article studied the socio-medical aspects of childhood disability in the Surkhandarya region as a systemic parameter of public health.

Results. The number of children with congenital malformations was: boys - 9.2% and girls - 13.6%, total: 22.8%. The number of children with disabilities was 37.2% of boys and 40% of girls, total: 77.2%.

Based on the results of a survey conducted on the age and gender of children with disabilities in the Shurchi, Kumkurgan and Kizirik districts of the Surkhandarya region, the following indicators were identified.

Disabled children under the age of 16, registered by the Medical Association of the Shurchi region, accounted for 6.4% in the Surkhandarya region, of which 51% are disabled boys and 49% are disabled girls in the Shurchi region.

Disabled children under the age of 16, registered by the Medical Association of Kumkurgan district, made up 5.9% of the population of the region, of which 43.7% were boys and 56.3% girls in Kumkurgan district. Registered by the Medical Association of the Kizirik District, children under the age of 16 accounted for 9.7% of the region's population, of which 45.6% are disabled boys and 54.4% are disabled girls of the Kizirik District.

When studying the lifestyle and living conditions of families of children with disabilities in the Shurchi, Kumkurgan and

Kizirik districts of the Surkhandarya region, the frequency of congenital and acquired disorders in girls was higher than in boys.

Diseases of the nervous system leading to disability in children accounted for 24.3%, including 59.2% in boys and 40.8% in girls. Failure to fully comply with a healthy lifestyle in people with disabilities, neglect of small children,

for children due to early marriages, the use of poor-quality drinking water, the use of low-calorie foods, environmental pollution, high levels of mental stress in families are now born and leading to disability in growing children.

Failure to fully lead a healthy lifestyle in families with disabilities, neglect of care for young children, lack of knowledge of child care due to early marriages, poor water composition, low caloric content of food, more environmental pollution than in other areas, high levels of stress in families lead to disability of newborns and growing children.

Findings. Based on the results of research, it is necessary to develop and implement evidence-based preventive measures aimed at reducing child poverty, improving the quality of medical, social and nursing care for children with disabilities. It is necessary to identify early risk factors affecting the child's disability, including dispensary supervision and timely medical examination, as well as a qualitative improvement in the work of nurses.

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