

TYPOLOGICAL DISORDERS IN SPEECH AND COGNITIVE DEVELOPMENT IN PRESCHOOLERS WITH GENERAL SPEECH UNDERDEVELOPMENT

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The methodological basis of the study was the theory of the activity approach to the development of the psyche in ontogenesis (A.V. Zaporozhets, A.N. Leontiev, D.B. Elkonin, etc.); theoretical provisions on the structure of the defect (L.S. Vygotsky, T.A. Vlasova, V.I. Lubovsky, M.S. Pevsner, etc.); theory of psychological and clinical diagnostic criteria (S.S.Lyapidevsky, E.M. Mastyukova, O.V. Pravdina, A.M. Smirnova, M.E. Khvattsev, etc.); the position on the leading role of education and upbringing in the psychological development of the child (L.S. Vygotsky). The diagnostic study included:

- 1. The study of the motivational and personal component (the formation of voluntary attention, performance, learning ability, manifestations of reactions to approval, comments).
- 2. Research of the sensory-perceptual component (determination of the level of formed simultaneous and sequential processes at the nonverbal and verbal levels: visual-spatial gnosis, visual and auditory-speech memory, spatial-temporal relations).
- 3. The study of the intellectual component (mental operations: analysis, synthesis, comparison, generalization, classification: features in establishing logical cause-and-effect relationships between objects, phenomena, actions).
- 4. The study of the speech component (determination of the formation of phonemic, lexical, morphological and syntactic levels of speech development).

According to the results of the diagnostic study, correlation and factor analysis were carried out, according to which it was found that diagnostic techniques can be divided into five factors (F): thinking (F2), visual-spatial gnosis, sensory-perceptual perception (F3), phonetic-phonemic perception, auditory-speech memory (F4), motivational factor (F5). The obtained quantitative data of each of the factors were conditionally divided according to the "level of formation" as follows: "High level" (the level of conditional and normative development); "Average level" (a level close to conditional and normative development); "Low level".

Cluster 1.

Included children with ONR-11 (74%) and ONR-I (26%), whose level of development of expressive speech was significantly higher than the pronunciation ability. The subjects' passive vocabulary corresponded to the lower limit of the age norm. Children understood indirect instructions, could memorize and execute two-step instructions. Interestingly, the subjects of this cluster after training could determine (!) the difference between words like "flower"-"flower", "house-"house", understand grammatical changes of nouns (show where the house is and where the houses are), about strange relations (show who is sitting on a chair and who is under a chair. Who hid behind a bush, and who hid in a bush). However, tasks for the establishment of passive-active structures, even after training, were not available.

Cluster 2.

Cluster 2 included children (78 people) ONR-III (35%), ONR II (46%), ONR I (19%): 2, P4 - corresponded to the average level of development, RZ, P5-a low level.



A distinctive feature of the children of the second cluster was the low level of development of the motivational component. Children with great difficulty came into contact with an adult, often refused to perform tasks if they thought that the task was difficult, or if they realized that the task was being performed incorrectly. The children coped well with combining objects according to the proposed feature (color- shape- size), paired objects according to a significant feature (rain - umbrella, flowers - vase), correctly laid out plot pictures. Cluster 3.

Included 17 children (ONR-1183%, ONR-1 17%), in whom the formation of all factors corresponded to a low level of development, which was partly due to pedagogical neglect: parents did not understand the seriousness of their children's violations. None of the parents had previously sought help from specialized specialists.

Diagnostics showed that children mostly understood high-frequency vocabulary, indirect instructions. Two-step instructions were not memorized even after initial training and, therefore, they were not followed. Understanding lexical and grammatical constructions was significantly difficult. Accomplishment classifications, groupings with subjects, the isolation of an extra subject, the establishment of cause-and-effect relationships was possible only with the help of training. The formation of visual-spatial perception, auditory-speech memory was formed at a low level: significant difficulties were caused by tasks for reproducing spatial, sound, dynamic characteristics of non-verbal sounds. Recognition of basic colors, shapes, finding familiar objects with noisy images, recognition of the image on split images, which presents difficulties for the subjects of this cluster.

At the same time, already at the initial examination, it was found that children are successfully studying, show criticality for success and failures. There was a "sensory hunger" of children. The subjects were interested in everything: the specialist himself, the equipment of the room where the examination took place, and the presented game material. However, due to the rapid exhaustion, children were often distracted, "left" the examination procedure, therefore, in order to achieve a diagnostic result, the experimenter needed a frequent change of the proposed tasks performed in different spaces: at the blackboard - under the table - on the carpet - in the house - at the table.

Cluster analysis in our study allowed us to establish the following typological features of disorders in speech and cognitive development in preschoolers with general speech underdevelopment:

- 1) general underdevelopment of speech with significant impairments of perception processes (visual and/or auditory);
- 2) general underdevelopment of speech in combination with significant violations of the motivational component;
- 3) general underdevelopment of speech in combination with complex disorders of cognitive development caused by pedagogical neglect.

Preschoolers with ONR have variants of the formation of each of the nonverbal components (from a low level to a conditionally normative one), as well as various combinations of violations of speech and cognitive components in the structure of the ONR defect.

Taking into account the manifestations of individual typological disorders in speech and cognitive development will allow us to develop options for a comprehensive correctional and



developmental program for preschoolers with general speech underdevelopment, aimed at the maximum possible correction of violations.

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