# WAYS AND METHODS OF SPEECH FORMATION OF CHILDREN WITH ALALIYA SPEECH DEFECTS QDPI SPECIAL PEDAGOGY

(LOGOPEDICS) DIRECTION 2 LEVEL MASTER'S STUDENT

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**Abstract:** the article describes the types of alalia speech defects and ways of speech formation of children with alalia speech defects. References are given about the general system of speech therapy work with children with motor paralysis, aimed at working on imitating speech and enriching active vocabulary.

**Key words:** alalia, motor alalia, sensory alalia, speech, communication, brain, big hemisphere, kinesthetic, differentiation, imitation, articulation.

Currently, scientific research is being carried out by scientists in our country on the issue of teaching children with mator alalia to speak, eliminating their pronunciation defects, and improving speech imitation. At this point, let's talk about the "Alalia" defect, alalia [Greek. a negation suffix and lalia - speech] - children's lack of language or inability to speak well due to the underdevelopment or damage of the speech zones in the cortex of the large hemispheres of the brain. Injury to the child's head while in the mother's womb or during birth, suffering from serious diseases during infancy are the causes of the disease. In this case, the child's speech does not develop for a long time: until the age of 5-7 years, and in some cases until the age of 10-12 years, the child does not speak. There are motor and sensor types of alalia. Sensory alalia is rare, and motor alalia is more common. In motor alalia, the child speaks little and incorrectly, understands the speech addressed to him. As he pronounces some sounds, he cannot master sound combinations, instead of the whole word, he says a part of it. In sensory alalia, the child has difficulty understanding the speech of others, or does not understand it at all. As the child grows up, his mental development lags behind his peers. Children with this disease are taught in special schools on the basis of special correctional education. As a result, although for a long time, many of them mostly children with mator alalia recover their speech and pass the curriculum of general education schools.

Motor alalia is a systematic underdevelopment of expressive speech of a central organic character, which is expressed by the lack of formation of necessary language operations in the process of speech formation, along with the relative preservation of semantic and sensorimotor operations. In alalia, the phonetic and phonemic side of speech, as well as the lexical and grammatical structure, are closely related to each other.

Although the development of imitation of speech, the development of active vocabulary is determined by the main task of correctional education, a consistent correctional system based on modern ideas about speech activity has not yet been developed. This shows the need to further improve the correctional speech therapy work with children with motor alalia. It is observed that children with motor alalia have a limited vocabulary, a tendency to use gestures and amorphous words for a long time. One of the obvious signs of these children's speech is a significant difference in the volume of passive and active vocabulary. Preschool children with motor paralysis understand the meaning of many words; their passive vocabulary is within normal limits. However, the use of words in oral speech, the active use of the existing vocabulary creates great difficulties. In children with motor alalia, the formation of expressive speech is hindered by a violation of the analytical and synthetic activity of the speech-action analyzer.

These disorders can occur for various reasons, including: a) kinesthetic oral apraxia, that is, difficulties in the formation and strengthening of articulatory structures, and later motor differentiation of sounds; b) difficulty in moving from one action to another; c) difficulties in mastering this sequence of actions (its motor scheme) for pronouncing a word, etc. First of all, children with motor alalia have difficulty speaking, the peculiarities of their active vocabulary are explained by the instability of the sound images of words, the difficulty of remembering them and maintaining the syllable line. Children's poor active vocabulary is manifested in the inability to choose familiar words from the dictionary and the inability to correctly use familiar words in speech. Thus, most of the impairments in speech imitation characteristic of children with alalia are related to the process of word retrieval rather than to the concepts behind the words. Children, as a rule, have correct concepts, but it is difficult to find words to express the concepts. In the studies of L.A. Danilova, it is stated that children with motor alalia "do not have normal connected speech".

S. N. Shakhovskaya identified the "absence of speech sentences in children with alalia, their desire to avoid connected speech", the difficulty of constructing sentences in retelling, the inability to control the form of speech and its content at the same time, uncertainty and difficulties in expressing thoughts. emphasizes.

L.V. Melikhova notes the agrammatic character of the sentences of children with alalia of preschool age, at the same time, she emphasizes long pauses in oral speech, distortion of words.

N.N. Traugott emphasized the narrow situational nature of the vocabulary of children with motor alalia. This is reflected in the fact that they do not immediately start using the words they have learned in different situations of oral communication. With a slight change in the situation, he even stops using words that are well known to him and are spoken in other circumstances. N.S. Zhukova believes that the big differences between children with normal and impaired speech development are observed in the activation of predicative vocabulary (verbs, adjectives). Children with motor alalia of preschool age have difficulties naming many adjectives used in the speech of their peers whose speech is developing normally. Preschool children's oral vocabulary is dominated by words denoting actions that the child performs or observes every day. It is much more difficult for them to master generalized, abstract words, words denoting status, evaluation, adjectives, symbols, etc. A distinctive feature of the vocabulary of children with motor alalia is the incorrect use of words, and this, in most cases, is expressed in verbal paraphasias. In the speech of children with motor alalia, the manifestation of unclear or incorrect use of words is different.

Sometimes children use words too broadly. Others have a very narrow understanding of the meaning of the word. Sometimes children whose speech is not developed in general use the word only in an abstract situation, and when speaking in other situations, the word is not included in the context. Thus, the understanding and use of the word will still be situational. Its meaning and sound structure are not sufficiently clarified, so it is constantly in the process of search.

Targeted work on imitating speech and enriching active vocabulary is important in the general system of logopedic work with children with motor paralysis. This is primarily determined by the leading role in the education of preschool children. Children with motor alalia gradually gain the ability to freely use familiar words and begin to use them without restrictions in all situations. This often leads to refusal to name words, understanding their meaning, and constant searching. At the same time, the child himself knows his mistake, but often cannot name the appropriate word. Some errors sometimes appear cumulatively, for example, substitution with another word is observed along with substitution using sign language. At the same time, if there are difficulties in finding a word, children's "detailed" answers often show various errors in a

continuous sequence: for example, first a word is replaced by another word, then replaced by verbal description, sound imitation, gesture, etc. Children's limited vocabulary mainly reflects things and events that are directly perceived through the senses. At this stage of speech development, words related to the verbal expression of abstract relations of reality are almost not available for children.

Therefore, the lack of formation of active vocabulary in children with motor alalia is manifested in a harmonious way with a violation of the motivation to communicate, the activity of various components of the activity. The lack of desire to communicate is related to communication difficulties and makes them worse.

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