



PECULIARITIES OF SPEECH OF CHILDREN WITH MOTOR ALALIA SPEECH DISORDER

Makhmudova Madinakhan Sobirkhanovna

Associate Professor of the Special Pedagogy Department of QDPI, PhD

Vakhobova Munirakhan Sadirdinovna

Kokan State Pedagogical Institute, Master's Student

Abstract

The article presents an opinion on the specific characteristics of the speech of children with motor alalia speech impairment, the complex manifestations of motor alalia that make up a set of speech and non-speech signs, and the dominant signs.

Keywords: Alalia, speech sign, vocabulary, phonetic-phonemic process, lexical-grammatical component, articulation, motor skills, correction, cerebral cortex, center. Motor alalia is a complex syndrome consisting of a set of speech and non-speech signs. Speech disorders take the leading place in the structure of speech impairment in motor alalia.

In motor alalia, speech disorders are of a systematic nature and are characteristic of all its components: phonetic-phonemic and lexical-grammatical.

Children can be divided into a group where phonetic-phonemic underdevelopment prevails (they are deficient) and groups where lexical-grammatical underdevelopment prevails. According to assumptions, the first group-dominant hemisphere is based on the initial injuries of the lower parts of the central motor areas of the cortex. It is based on the injury of the anterior parts of the motor cortex of the group of muscles and tendons that originate in the performance of articulatory movements or in the general musculature (performance of other movements).

The development of the pronunciation system in children with alalia is characterized by its uniqueness in terms of quality and quantity. It is manifested in all children to one degree or another and at each stage of speech development.

Fine movement coordination of the speech apparatus is not formed in children with alalia. Anomitic-synthetic disorders of the speech movement analyzer have different forms: oral apraxia, sequence disorder, etc. In this case, there are difficulties in finding the desired articulation position, inability to perform a certain articulation movement, and mastering the sequence. In these cases, movement disorders, which determine speech articulation disorders, take the leading place. As a result of kinetic and





kinesthetic apraxias, deficiencies are observed in the phonetic and phonemic aspects of speech. Articulation movements associated with kinesthetic impulses from the speech apparatus to the cerebral cortex play an important role in the process of sound analysis and description under normal conditions, help to determine the sound content of the word, and maintain the necessary sound sequence. In alalia, the child has a hard time determining the necessary sound sequence of a word, cannot replace one word with another. This leads to an increase in paraphasia, defects that indicate disturbances in the mobility of the main causal processes, i.e., perseveration, etc., and defects in the foci of excitation and inhibition. As a result, if the child's hearing and understanding of speech are sufficiently preserved, and there is no paresis of the articulation muscles and paralysis of the lips, which prevent the independent development of speech, speech does not develop independently, and for a long time it is limited to the pronunciation of certain sounds.

The higher the degree of underdevelopment of the cerebral cortex, the more profound and coarse the underdevelopment of speech functions. It was observed that there is a direct connection between articulatory praxis disorders and speech movements, therefore, on the one hand, the phonetic system of speech, on the other hand, understanding and perception of speech.

In alalia, the violation of small articulatory movements leads to a decrease in the tone of the brain side of the speech movement analyzer, as a result of which the perception of weak and subtle kinesthetic impulses becomes difficult and even completely limited. Only relatively large kinesthesias are received and analyzed by the cortex. As a result, in motor alalia, there is sometimes insufficient perception of self-directed speech, slowness and difficulty in understanding grammatical forms and large written text. N.N. According to Traugott, 70% of children with motor alalia fully understand self-directed speech, 20% of children have a slight decrease in understanding, and 10% of children have poor understanding, but in such cases, children's own speech is always worse than understanding.

Often, due to the inability to clearly perceive sounds, children pick up only individual elements of phrases and cannot connect them to a single content structure. Such limited understanding is a secondary manifestation of the main defect.

While having extremely poor active speech, children may have sufficient passive vocabulary. At first glance, the state of speech understanding may not raise doubts, but there will still be some difficulties in understanding complex speech options. Different levels of understanding have been identified: from a complete lack of understanding of grammatical forms to particular difficulties in understanding single grammatical constructions.



It is observed on the basis of the diffuseness of phonemic perceptions, the uncertainty of sound perception and repetition, the cases of weak targeting of the word in the sound and syllable structure, the lack of structural formation of words and phrases in children, the lack of sufficient variability in the use of grammatical tools. .

In alalia, the phonemic realization of words and statements is disturbed, the linguistic decoration of speech is not formed - sound-syllable and morpheme construction. Disruption of the rhythmic origin of speech is manifested in the slowing down of the flow of speech, in the pauses between syllables and words when pronouncing words in syllables. The speech is either reciting a poem or fragmentary (dividing various speech fragments with intervals of different lengths) with the emphasis on each verse. The lack of formation of the rhythmic structure of words and phrases is observed together with the violation of speech tempo, rhythm, and musicality. Children can't catch the rhythm and can't perform the proposed rhythmic picture by clapping and tapping.

When reflecting words, the child instead of a word expresses a complex of vague sounds that are close to it, uses several distorted variants of one word: "top", "tok", "hello", "salon". Depending on the increase in vocabulary, difficulties in mastering the structure of words become somewhat noticeable. The number of such violations increases suddenly. There are many wrong words in speech flow.

In children with motor alalia, vocabulary develops slowly, with incorrect use in speech practice.

The poverty of lexical-semantic tools leads to various substitutions based on similarity, proximity, and contradiction (bowl-bowl). Substitutions based on the external signs of objects are often observed, while those based on less functions are observed (internal signs). Substitution of the word according to its importance characterizes a slightly higher level of the child's speech development. V.K. According to Vorobyova, the diffusion and substitution of meaning is often observed in the use of verbs in relation to nouns. Children cannot use synonyms, antonyms, generalizing words. They have the same quality and stocks and very limited. At all stages of speech development, it is determined that it is difficult to activate the vocabulary, that children cannot correctly choose words from the vocabulary and cannot use them correctly.

The vocabulary of such children is limited to everyday topics, the child cannot explain the meaning of words, cannot use the means of word formation. Thus, the speech remains poor for a long time, surprising with expressions that are not characteristic of the native language. According to F. Sobotovich, the child develops his speech abilities: his collection of thoughts corresponds to the collection of thoughts of young





children, such thoughts themselves are their content, at a somewhat higher stage of development.

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