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COMPLEX TYPES OF SPEECH PATHALOGY BASED ON PSYCHOLINGUISTIC ANALYSIS

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Abstract

This article provides information on the most complex types of speech patalogies based on psycholinguistic analysis and on the work carried out in the process of their correction. Psycholinguistic analysis evaluates speech defects such as Alalia, aphasia, incomplete speech development, and dysarthria as the most complex speech defects.

Keywords: Psycholinguistics, patalogy, alalia, aphasia, dysarthria, dyslalia, speech.

Introduction

From year to year, we are witnessing an increase in attention to persons with disabilities in Uzbekistan and the creation of many conditions for their education. Here is such a topic that, of course, the science of speech therapy is developing, it is worth noting separately the advances in it. We can say that the increase in the number of children with speech impairments became the basis for an increase in special education and educational facilities for them as well. As in each area, Logopedia divided its data into levels, which it studies and analyzes. Below we will have information about speech patalogies, which are indicated as complex speech defects based on psycholinguistic analysis.

So what is Psycholinguistics itself? Psycholinguistics is a science that studies the formation of speech, as well as the processes of perception and formation of speech in the case of their interaction with the language system. It emerged from the synthesis of psychology and Linguistics. Psycholinguistics develops a model of human speech activity and the formation of psychophysiological speech, examining them through psychological experiments. Such investigations have resulted in psycholinguistics incorporating speech orators such as Alalia, aphasia, incomplete speech development, and Dysatria into complex speech defects.

Speech disorders are a set of diseases that prevent correct speech behavior and the normal existence of children in society. To date, the number of patients with such problems has increased. About 25% of 4-year-olds suffer from similar diseases. Disadvantages do not disappear on their own. Therefore, the Prevention of speech disorders in preschool children is one of the most relevant areas of speech therapy, medical and pedagogical practices.

Let's now have a wider overview of speech defects below:

Alalia (Greek a-no, Latin lalio-speech) is the absence of speech and the underdevelopment of speech due to organic trauma of the speech Center in the large hemispheres of the cranium before the birth of the child, during the maternal womb, or during the development of speech in the early developmental stage.

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The origin of alalia has been explained differently by scientists and researchers from different eras. Among the etiological factors, the main one is the fact that the child suffers from diseases such as maternal encephalitis, meningitis, during the mother's womb, unfavorable conditions for fetal development, poisoning of the fetus with various substances, damage to the brain as a result of infection with various diseases during the first development period after birth, and many similar reasons are indicated.

Aphasia is one of the severe complications of brain damage, in which all types of speech activity are systematically disrupted. The complexity of speech disorders in aphasia depends on the localization of the site disturbed by injury (localization-Latin loca lis local, Bior site specific, locus location, location), the size of the injury center. In this case, the response response of a speech-deficient individual to his oratory deficit is also relevant.

Causing the origin of aphasia, we can indicate the following: disorders of blood circulation in the brain as a result of ischemia and hemorrhage, in cases of various brain injuries, the appearance of tumors in the brain and Infectious Diseases.

Aphasia we can divide into 2 types. Motor (motion) as well as sensor (perception).

It is believed that the first work aimed at correcting the speech of patients with aphasia observed began to be carried out at the beginning of the XIX century. A study of the literature of this period, we can see that much of them are focused on the study of motor aphasia, and only a small part on sensory aphasia.

Dysarthria is a speech disorder caused by organic pathology of the nervous system, characterized by difficulty in pronunciation, disorders of words or individual sounds. Develops in childhood, disrupts the mental development of the child, causes a feeling of insecurity, complexes. Appearing in adults, complicates communication, makes it difficult for a person to work in society, deprives him of the opportunity to engage in certain activities, reduces the ability to work. Complex measures to correct this condition allow you to improve the work of the speech apparatus, restore the patient's normal ability to speak.

About the disease. This pathology mainly affects children, which are caused by congenital problems. Speech disorders in adulthood, as a rule, become a consequence of acquired brain diseases.

Dysarthria is one of the most common diseases in speech therapy. This can only be felt to a specialist or reach a level where the patient's speech becomes completely incomprehensible to others. In this case, articulation or phonation, speech breathing, intonation, speech rhythm and tempo may suffer.

Types: depending on the degree of damage to the speech analyzer, the following forms (types, types) of dysarthria are distinguished:

- bulbar (caused by damage to the nuclei located in the medulla oblongata);

- pseudobulbar (associated with damage to nerve fibers that transfer impulses from the cortex to the cranial nerve nuclei);

- subcortical or extrapyramidal (the result of pathology of the subcortical nuclei of the brain);
- cerebellum (diseases of the cerebellum, develops by its pathways);
- cortical (the lesion is located in the cerebral cortex).



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Depending on how understandable a person's speech is to others, 4 levels of dysarthria are distinguished in speech therapy:

I (deleted) - a change in speech is noticeable only to the speech therapist, detected during the examination;

II (mild dysarthria) - in general, the patient's speech is understandable to others, but some defects in the pronunciation of individual sounds are detected;

III (middle-level dysarthria) - the patient's speech is understood only by family members and other people who are in constant contact with him, the meaning of what is said is not understandable to strangers;

IV (severe grade dysarthria) - the meaning of what is said is incomprehensible even to those near the patient, or speech is completely absent.

Dyslalia is one of the most common speech defects. This is a violation of sound pronunciation during the preserved innervation of normal hearing and speech apparatus. The child cannot pronounce the sound (skip it or break the pronunciation) or replace one sound with another. Causes of dyslalia:

- reduced language;

- defects in the structure of the jaw;
- incorrect structure of the palate;
- thick lips;
- improper education of the child's speech in the family;
- imitation;
- bilingual in the family;
- pedagogical neglect;
- underdevelopment of phonemic hearing.

Dyslalia can occur as a result of a child's inability to keep his tongue in the correct position, or as a result of his rapid transition from one movement to another.

Often parents refer to a speech therapist: "look at the child, because he does not say the sound "R". When the speech therapist begins to check, it is determined that his pronunciation of a number of sounds is impaired.

It is too early to put distorted sounds until the age of three, but it is necessary to prepare the child and his articulation apparatus for the correct pronunciation of speech.

The full speech of the child is an indispensable condition for his successful schooling. Therefore, in preschool age, before they become a permanent, complex defect, it is very important to eliminate all the shortcomings of sound pronunciation. It should be remembered that in the preschool age period, the child's speech develops most intensively - this is the most flexible and flexible. Therefore, all types of dyslalia can be overcome more easily and quickly. A complex violation of sound pronunciation can lead to a number of serious complications and other defects in the oral and written speech of the child.

Logopedic help. To help a child with speech development impairment, a complex and individual approach is required. With speech disorders in children, not only the coordinated work of medical professionals is necessary, but also the active work of teachers and parents.

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All forces should be aimed at early detection of pathology and its complete correction. If preventive measures are not enough and the pathological process has developed, the correction of speech therapy is carried out first.

In young children, the following are performed:

- Exercises for the development of articulatory motor skills.
- Methods of developing fine motor skills.
- Programs for the development of impressive and expressive speech.
- Development of hearing and attention.

Such activities will help prevent speech development delays and speed up the recovery process. In preschool children, the following are held:

- Collective phonetic games.
- Methods for correctly composing sentences.
- Finger, hand games.
- Development of phonemic hearing.
- Formation of coherent speech.

These activities prevent the appearance of secondary diseases (behavioral disorders, personality formation). It is very important for children to learn in a team, to correctly formulate the function of speech.

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