
THE IMPORTANCE OF PHONETIC-PHONEMIC FEATURES IN TEACHING LITERACY TO PRESCHOOL CHILDREN WITH DYSARTHRIA SPEECH DEFICIENCY

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Abstract

In this article, the phonetic-phonemic deficits in literacy education of preschool children with dysarthria speech deficiency, the description by scientists of the causes of dysarthria speech deficiency, speech defects in children with various motor deficiencies and the manifestations of mild dysarthria are described.

Keywords: Dysarthria, phonetic-phonemic deficiency, speech, sound, literacy training, vocabulary, correction, motor deficiency, articulation.

Introduction

Correct speech is an important condition for a child's all-round development. The more accurate the child's speech and the richer the vocabulary, the easier it is for him to express his thoughts, the opportunity to perceive the environment expands, and his relationship with adults and his peers will be complete and meaningful, his mental development will also take place actively. That is why it is important to care about the timely formation of speech in children, its purity and correctness, to prevent various defects that appear in the norms of this language, and correct communication is important.

Speech disorders of one or another level have a negative effect on all the child's mental development and are reflected in his activities and behavior. Severe speech disorders can affect mental development, especially the formation of higher levels of cognitive activity. This is connected with the close connection of speech and thinking, the limitation of social, including speech, communication.

Speech disorder, limited speech behavior can have a negative impact on the formation of a child's personality, cause non-existent mental disorders, specific features of the emotional-volitional sphere, and pave the way for the development of negative qualities in his character.

All this has a negative impact on acquiring literacy, learning in general, choosing a profession, and causes the child to lag behind his peers in school.

Children with dysarthric speech deficiency have limited speech experience, language tools are not improved. The need for verbal communication is not sufficiently met. Colloquial speech is poor, few words, it is inextricably linked to a certain situation and

becomes incomprehensible outside of this situation. The reason for the occurrence of such disorders is explained by the damage of a certain pair of nerves of the brain.

The causes of dysarthria speech deficiency are distinguished by different scientists as follows:

1. violation of the innervation of the articulatory apparatus, as a result of which there is a deficiency in certain muscle groups (lips, tongue, soft palate); lack of movement, their rapid fatigue due to injury to one or another part of the nervous system;
2. movement disorders: difficulties in finding the necessary position of the lips and tongue to pronounce sounds;
3. oral approximation;
4. minimal brain dysfunction.

A mild form of dysarthria is observed in children with mild asphyxia or birth injuries without obvious movement disorders, as well as in children with a history of pregnancy or other unexpressed negative effects during childbirth.

In such cases, a mild form of dysarthria is combined with other symptoms of minimal brain dysfunction and is considered one of the symptoms of MMD. Taking into account the connection of the violation of the process of pronunciation of sounds in the mild form of dysarthria with movement disorders and the prevalence of paretic states of the organs of the articulatory apparatus, scientists divided children into 4 groups and identified the following manifestations of mild dysarthria:

- sound pronunciation disorder caused by the incompleteness of some motor functions of the speech and motor apparatus (group 1);
- laxity, weakness of articulation muscles (group 2);

These two groups belong to mild forms of pseudobulbar dysarthria.

- clinical characteristics of deficits in the pronunciation of sounds associated with difficulties in performing voluntary movements (group 3), (scientists include this in shell dysarthria).

Speech defects in children with various motor deficits (group 4) (included in the mixed form of dysarthria).

Acquiring the correct pronunciation of sounds develops on the basis of the close connection of sensory and motor functions, which ensure the unity of the speech system. On the one hand, the correct acquisition of the sound side of speech determines the development of the phonemic and perceptive level of perception in many ways. On the other hand, during the development of speech, the auditory analyzer feels the influence of the speech movement analyzer: the child hears and perceives the sounds as they pronounce them, the child differentiates the sounds that he pronounces correctly according to what he hears, or vice versa.

Also, in order for the child to correctly form the sound side of speech, not only the articulatory apparatus should be ready for it, but also he should be able to hear well and have the ability to differentiate between his own and others' speech.

Dysarthria (in mild form) in children with speech deficiency, phonemic hearing impairment is of a secondary nature. Children are bad at differentiating close sounds

(on the basis of pictures), choosing pictures for given sounds, exercises on familiar syllables. In children with dysarthric speech deficiency, due to pathologies in the articulatory apparatus (hynertonus, hypotonus, deviation, hypertinesis, hypersolivation, etc.), the motility of articulatory organs is disturbed, articulatory movements deteriorate.

This motor deficiency has a negative effect on the formation of phonemic hearing. This disorder of the first syllable resists changes in the process of teaching the mental operations that make up phonemic perception. Due to this, the phonemic skills, skills and imaginations that perform phonemic analysis in the mental framework (qualification) are not formed. Also, the structure of the connection between the hearing and speech movement apparatus leads to insufficient mastering of the sound content of the word, which, in turn, is reflected in the process of acquiring reading and writing. Impaired clarity of articulation during speech, incomprehensible speech of children with dysarthria speech deficiency does not allow the formation of clear auditory perception. This makes it difficult for children with dysarthria to control the pronunciation side of their speech.

In conclusion, the existing methods of correcting the speech of children with dysarthria (mild form) of preschool age cannot fully solve the problem, and it is urgent to develop methods to eliminate dysarthria. The study of children with dysarthria (mild form) with speech deficiency shows that, along with the violation of the tone and functions of the articulatory apparatus, this group of children is characterized by underdevelopment of general and fine motor skills, which is also confirmed by the literature of the last year. confirms.

In many works, the need to develop small hand motor skills in dysarthria speech deficiency is recognized. Neurophysiological information about the closeness of the innervation of the articulatory apparatus to the areas of innervation of the fingers, as well as the importance of hand movements for the development of speech, requires such an approach to correctional work.

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