THE EFFECTIVENESS OF AN INDIVIDUAL APPROACH IN WORKING WITH CHILDREN WITH SPEECH DISORDERS.

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Annotation: *This article explores the effectiveness of the individual approach in working with children with speech disorders. Speech impairments- such as dysarthria, dyslalia, alalia and phonetic-phonemic underdevelopment-significantly affect a child's communication and learning. Logopedics focuses on diagnosing, preventing and correcting these disorders to develop a child's full communicative abilities. The paper analyzes the theoretical basis of individualized methods, age-specific techniques from preschool to adolescence, and practical therapies including speech exercises, technology-enhanced tools, and games. Emphasis is placed on the collaboration between family and educators, which ensures a family-centered rehabilitation model and enhances therapy outcomes. conclusion underscores that combining tailored intervention programs with parental involvement leads to significantly improved speech development in affected children.*

Аннотация: *Статья посвящена эффективности индивидуального подхода при работе с детьми, имеющими нарушения. Речевые дефекты затрагивают многие аспекты жизни ребенка и бывают различных типов; дизартрия, дислалия, алалия, логоневроз заикание, афазия, фонетико-фонетическое недоразвитие и др. Логопедия занимается диагностикой, занимается диагностикой, предупреждением и коррекцией подобных нарушений речи. В работе рассматриваются теоретические основы индивидуального подхода, методы коррекцией, адаптированные под возрастные особенности детей, а также современные технологические средства и игровые методики. Подчеркивается важность взаимодействия семьи и педагогов в комплексе реабилитационных мероприятий. Сделаны выводы о необходимости интеграции индивидуальных программ обучения и тесной работы с семьей для успешной речевой реабилитации детей.*

Annotatsiya: *Ushbu maqola nutqida nuqsoni bo'lgan bolalar bilan ishlashda individual yondashuv samaradorligi mavzusiga bag'ishlangan. Nutq buzilishlari — bolalarning ijtimoiy va ta'lim olishi uchun katta to'siq bo'lib, ularning dizartriya, dislaliya, alaliya, logonevroz zaikaniye, afaziya yoki fonetik-fonemik rivojlanmaganlik kabi turlari mavjud. Logopediya fani nutq nuqsonlarini aniqlash, oldini olish va tuzatishga xizmat qiladi, bu esa bolaning muloqot qobiliyatini to'la shakllantirishga olib keladi. Maqolada individual yondashuvning nazariy asoslari, bolalar yoshiga ko'ra mos usullar va amaliy texnologiyalar tahlil qilinadi. Masalan, logopedik o'yinlar, vizual va audiokomponentli mashg'ulotlar, mobil ilovalar va sun'iy intellekt vositalari orqali bolalar nutqi mustahkamlanadi. Ota-onalar va pedagoglar bilan yaqin hamkorlik oilaviy-qamrovli yondashuvni ta'minlab, davolash samaradorligini oshiradi. Yakunda individual metodlar va oilaviy treninglar birgalikda qo'llanilganda, nutq nuqsoni bo'lgan bolalarning rivojlanishi sezilarli darajada yaxshilanishi ta'kidlanadi.*

Keywords: *speech disorders, individual approach, dysarthria, dyslalia, alalia, stuttering, aphasia, phonetic-phonemic underdevelopment, speech therapy, family collaboration*

INTRODUCTION

Speech is the primary means through which humans express their thoughts and desires, and its disorders can negatively affect a child's learning, upbringing, and social adaptation. The field of logopedics focuses on identifying, preventing, and correcting speech disorders and is closely interconnected with pedagogy, psychology, and linguistics. Worldwide, speech disorders among children are widespread. For instance, research in Brazil indicates that general speech impairments were observed in 24.6% of preschool-aged children, and this figure rises to 57% by the age of 5–6. Therefore, an individual approach tailored to each child's speech disorder has become a necessity. An individual approach involves applying methods adapted to the child's intellectual and psychological characteristics and developmental level, as well as adjusting educational objectives according to the child's abilities. Specialists such as Vygotsky and Piaget from Germany also recommended differential approaches to children during the learning process. This article analyzes types of speech disorders, the theoretical foundations of individual approaches, methods applied according to age, and practical correction techniques.

Scientific and Theoretical Foundations of the Individual Approach

The principle of the individual approach emphasizes that each child requires special attention based on their psychological and physiological characteristics. This approach is grounded in concepts such as Vygotsky's Zone of Proximal Development (ZPD) and Piaget's stages of development. For example, children with speech disorders can be divided into two groups according to the manifestation of their impairments: those with predominantly phonetic-phonemic underdevelopment and those with predominantly lexical-grammatical underdevelopment. These groups primarily reflect neurophysiological and developmental variability. Researchers emphasize that "children can be classified according to speech underdevelopment signs into those with a predominance of phonetic-phonemic underdevelopment and those with a predominance of lexical-grammatical underdevelopment." Therefore, during the correction process, the group to which a child belongs is taken into account.

The individual approach theoretically implies providing education adapted to children's learning and psychological abilities. In the teaching and upbringing process, the child's speech function, psychological traits, and social conditions are carefully studied. Consequently, a personalized rehabilitation plan is developed for each child. Research shows that speech therapists who consider an individual approach for each child achieve the best results. For example, not only are speech exercises tailored individually, but the overall lesson schedule also takes into account children's mood and needs. Thus, theoretically, individualization—adapting the educational content to the child's needs—forms the basis for optimal teaching.

Age-Based Individual Methods

Children of different ages have varying levels of speech development and needs; therefore, age-appropriate methods are applied:

Preschool Age (2–6 years):

At this stage, working with children with developing speech focuses heavily on play-based methods. Finger theaters, picture puzzles, songs, movement games, and colorful visual aids are incorporated into speech sessions. For instance, to stimulate listening skills, didactic images, sound-producing toys, and hand-movement exercises are used. Speech activities are short but frequent, and parents are actively involved. To expand vocabulary, children play games with objects reflecting their environment, practice gestural communication, and perform intonation and tone exercises.

Primary School (6–10 years):

At this stage, children begin partially independent reading, so exercises include phonetic and articulation training alongside reading and writing tasks. Speech therapy sessions focus on associating sounds with letters, using sound cards, and reading poems or stories to practice speech. Higher-level exercises strengthen grammar and vocabulary, and linguistic games introduce new words. If necessary, communication tools such as booklets and illustrated papers are used more extensively. Additionally, children are taught to create creative tasks like composing stories based on pictures while reading aloud.

Middle School (10–14 years):

Children at this age think more independently, so speech sessions address abstract and complex topics. In addition to phonetic restoration, educational computer games, visual mapping, and audio tasks are incorporated into lessons based on school subjects, expressions, Q&A, and report-style activities. For example, Arabic-Turkish exercises, tasks to understand meaning in speech, and exercises for comprehending TV texts are used. Considering the psychological characteristics of adolescents, independent exercises and robot-transcribers are employed to allow children to independently check and refine their speech skills.

Adolescents (15–17 years):

When working with adolescents, it is important to communicate on a peer level and establish transparent interaction. Age-appropriate methods include drama scripts, debate tournaments, professional speech games, and online forums. For example, speech exercises can be conducted through acting in films or theater roles, focusing on improving public speaking skills. Additionally, literature-based activities and discussion exercises are used to expand vocabulary. Modern technologies are also incorporated, such as mobile applications and video conferencing, to facilitate independent reinforcement exercises. Furthermore, tasks like writing social media posts or maintaining a blog help develop expressive language skills.

Practical Methods

Various practical methods are employed to correct speech disorders:

Speech Therapy Sessions:

Customized sets of exercises are designed for each type of speech disorder. For example, articulation gymnastics (lips and tongue movements), breathing control exercises, and sound production training are commonly used. Additionally, children engage in reading, speaking, and writing exercises related to specific topics. Motor exercises involving hands and feet (e.g., hand tapping, finger dexterity exercises) are also performed

alongside speech exercises. Comprehensive approaches are emphasized in national speech therapy centers, combining speech, reading, and writing development with grammar exercises and visual aids. For severe disorders such as dysarthria or rhinolalia, specific methods like speech therapy massage or ultrasonic therapy are applied. According to experts at these centers, "severe speech disorders require specialized individual methods (e.g., speech therapy massage)."

Games and Imitation Methods:

Play is the most effective method for young children. Through playful activities, children better perceive and actively participate in speech exercises. For instance, descriptive games help children learn sounds by associating them with fairy tale characters, solving puzzles through Q&A, or matching words to pictures. Phono-rhythmic exercises combined with physical movements, such as chewing exercises and hand gestures, are also applied. Parents are encouraged to organize engaging speech games at home.

Technological Approaches:

Modern technology plays an increasingly significant role in speech therapy. For example, computer-based graphic exercises and mobile applications allow individualized speech training. Interactive platforms, such as the English SLP articulation program or Russian-language logopedic apps, teach children to accurately reproduce sounds and phrases. AI-based speech analysis programs (e.g., NutqBlub or Articulation Station) provide immediate feedback and track progress. Global experience shows that incorporating games and applications increases children's motivation and makes speech practice more enjoyable. Virtual environments, such as interactive VR games, are also being used. Importantly, technology-based playful exercises significantly enhance the effectiveness of structured training.

In practice, speech therapists develop individualized programs for each child, considering the type of speech disorder, age, and abilities. Modern research also shows that the use of technological and game-based elements, including home practice via mobile applications, increases the effectiveness of speech rehabilitation.

Scientific Research, Statistics, and Methodological Examples

For instance, speech therapy research shows that the prevalence of speech disorders in children varies with age. A study conducted in Brazil among 1,810 preschool children revealed that the overall prevalence of speech disorders was 24.6%, and this figure increased to 57% in younger children aged 5–6. This highlights the importance of timely identification and corrective interventions.

Additionally, global statistics provide data on logoneurosis: according to the Stuttering Foundation, approximately 1% of people suffer from stuttering. In Uzbekistan, specialized centers have established speech therapy offices to analyze various speech disorders in children, such as dysarthria, rhinolalia, and dyslalia. Monitoring conducted by speech therapists in schools and kindergartens indicates that out of every 10–15 children, 1–2 require speech correction.

Methodologically, corrective programs are being developed based on both international and local scientific and practical examples. For instance, in foreign practice, the phonetic rhythmics method is applied, where speech and body movements are

coordinated to conduct future sound-repetition exercises. In Uzbekistan, numerous methodological manuals and video tutorials have been developed within the field of logopedics. Additionally, psychologists conduct research aimed at supporting the social-emotional development of children with speech impairments.

Collaboration with Families and Educators

Working closely with parents and teachers is crucial for children with speech disorders. Parents need to conduct regular exercises at home and support the child's overall development. For example, international studies indicate that collaboration between parents and speech therapists is key to success. Current education and healthcare policies emphasize family-community approaches as a high-value priority. Therefore, a speech therapist's role is not only to work with the child but also to explain speech exercises to the whole family and involve parents in the training process.

Collaboration with teachers ensures proper techniques are applied in schools and kindergartens: educators should integrate the speech therapist's recommendations into lessons and consistently support the child's motivation.

Furthermore, the family environment significantly influences speech development. Parents' temperament, communication style, and consistency in upbringing positively affect the improvement of speech. Research analysis shows that lower parental education levels increase the risk of speech disorders, making it essential to dedicate more time and opportunities for speech-related activities at home.

Conclusion

The individual approach plays a crucial role in working with children who have speech disorders. The analyses and research presented above demonstrate that developing specialized methods tailored to a child's specific speech impairments significantly increases the effectiveness of therapy. Starting from the preschool stage, age-appropriate play-based and exercise methods should be applied, gradually introducing more complex knowledge over time. Additionally, the integration of information and communication technologies and game elements enhances the child's motivation and makes sessions more engaging. Most importantly, collaboration among speech therapists, parents, and educators, along with a family-centered approach, ensures a well-structured intervention process and strengthens the child's social and psychological adaptation.

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