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Formation of Oral Speech of Children with Cochlear Implants in a Special Educational Institution

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Annotation: In this article, it is important to educate children with hearing impairment after cochlear implantation surgery, choosing an educational institution, program and teacher for this group of children, and children's education after cochlear implantation. special pedagogical conditions for studying developmental characteristics, formation of oral communication skills in children are discussed.

Key words: Cochlear implantation, rehabilitation, correction, speech, hearing perception, pronunciation, localization.

The problem of inclusive education and upbringing of children with disabilities is still relevant for the general and special education system [1; 5;]. The process of education and training of students after cochlear implantation surgery for children with hearing impairment is very important, choosing an educational institution, program and teacher for children of this group remains an issue. The attitude towards choosing a specialist who will work individually with a child with a cochlear implant is also controversial - should it be a sign teacher or a speech therapist? What should be the general, inclusive or integrated education of children with cochlear implants? Today, we have a small and not always successful experience of speech development in children with cochlear implants, which makes the debate serious.

In the practice of correctional pedagogy and special psychology, there is a certain principle of distinguishing developmental disorders - the classification of dysontogenesis. The classification of developmental disorders is the determination of the boundaries that determine the scope of competence of defectology. Today, the results of scientific research and practical activities conducted in this field of science reveal the competences of a specialist who provides special assistance to various categories of disabled children, as well as the specific features of development and the specific features of the correction process. allows expanding research opportunities in the field of obtaining new information about At the same time, there are controversial issues related to the definition of child development conditions that are not clearly defined or emphasized in the current classifications. This is due to the expansion of the "borderline" condition, the increase in the number and quality of developmental pathologies, the increase in the number of children with severe disorders, etc.

In our opinion, accurate determination of the health status of a child undergoing research and correctional-pedagogical work allows us to identify ways and methods of working with a group of children's development disorders that are new for the teacher-defectologist, to test them and to correctly support them. allows to use. This is a group of hearing impaired children who have undergone cochlear implantation. Successful prosthetics with cochlear implantation does not mean that the children of this group do not cease to be hearing children, because the perception of normal speech sounds and non-speech pitches, hearing ability is not restored immediately after the operation. In our opinion, it would be appropriate to pay more attention to the analysis of the works of deaf sign linguists on the mechanisms of speech development and hearing abilities of children with hearing impairment. Therefore, it was based on a rich experience in the development

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of tools for studying the developmental characteristics of children after cochlear implantation and in the future correction work on the development of hearing and speech communication.

The problem of unification of hearing impaired children I.M. Gilevich, L.I. Tigranova, O.I. Kukushkina, L.M. Kobrina, E.I. Leonard, N.D. Shmatko, N.N. Malofeev, F.U.Kadirova, Z.N.Mamarajabova, N.Yakubzhanova, N.Dadahojayeva and others have been studied and are being studied. [1; 4; 5;].

Children's speech communication is born through speech activity (oral or written), and it has been shown that they are combined with the process of imitating adults in joint activities. In the process of communication, the child receives information about the world, cultural and social environment, tools and production, motives and tasks of activity through adults, as if through a prism. For this, the child needs a minimum: to have well-formed communication skills, intact controllers that ensure the formation of these skills, and a developed emotional-voluntary field. The level of language skills, development skills and the ability to prepare for general education largely depends on the level of speech development of a hearing impaired child [2; 3].

Complete mastery of a child with hearing impairment with oral speech requires the development of a more free understanding of the interlocutor's spoken speech and the ability to speak clearly and comprehensibly for others [7]. The formation of oral speech develops the hearing ability of schoolchildren with hearing impairment through the continuous use of individual hearing aids.

We believe that implementation of primary general education for children with disabilities will be of particular importance in the context of developing communicative skills of students with cochlear implants. First of all, it depends on the planned results of mastering the adapted basic general education program, that is, communicative educational activities - the ability to communicate in various educational and extracurricular activities based on oral and written speech. liq. It is very important for these children to master the basic educational program, develop skills, acquire knowledge, develop knowledge and skills, including readiness to solve educational and life tasks [6].

The formation of oral communication skills in children with cochlear implants is effective in the implementation of special pedagogical conditions:

- regular development of students' ability to communicate with language and speech behavior;
- ➤ development of auditory and visual-motor coordination, hearing of speech, ability to hear oral speech, formation of external speech skills, acceptance of non-speech sounds (including music) as a prerequisite for full development of speech;
- ➤ development of oral speech, understanding of speech, explanation and expansion of lexical fund, formation of grammatical structure of speech, pronunciation of voice, learning to read and write as the basis of full mental development of the child;
- > to develop the conscious use of oral speech in various communication situations.

In accordance with the requirements of special standards, pedagogical support is aimed at social adaptation of students with cochlear implants using a practice-oriented approach. In this regard, special attention is paid to the choice of speech material that is often used in life situations. During the transition from one age to another, the vocabulary gradually increases, the active vocabulary is updated. Differentiation of active speech material is done taking into account very important sections for children. In educational and extracurricular activities, it is necessary to combine the ability of students to correctly format their speech: not to simplify, but to introduce more complex conversational structures into independent speech. It is important to offer students a sufficient amount of speech material related to mastering the content of the lesson (lesson) in each lesson or

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in extracurricular activities. With cochlear implantation of the child, the structural organization of the topic and speech work unit is necessary, the content of the speech material should be as diverse as possible.

In our opinion, in the process of teaching speech to hearing-impaired children, it is necessary to follow the global principle of global speech perception, which allows to perceive texts as a whole, gradually understand and highlight the main idea, and analyze phrasal and layered details.

The program conducted by the teacher in the lesson and the individual work program of the individual teacher, difficult acoustic conditions in the classroom, continuous work in the polylogic mode in the lesson, lexical, grammatical, phonetic and phonemically important and diverse "scissors" signs of speech material - all this led to persistent signs of backwardness in children with cochlear implants in basic school subjects, especially in Russian. When studying the grammatical basics of the language, difficulties in making adverbs and semantic questions for cases, in making sentences with the given word, in coordinating the subject and predicate in person and number, in using adjectives and nouns in gender, case and number, in using prepositions is determined. Students make mistakes matching words in sentences.

Pedagogical support from the teacher and daily effective correctional support from the sign teacher is a condition for the effectiveness of teaching for such children. Consistency of science teachers and interaction with the gesture teacher remains a crucial time for successful training.

There are special difficulties in writing dictations. The need to revise the content of the program became clear, because the success of inclusive education of schoolchildren with implants requires organized and new approaches to pre-school education. The main directions of the corrective work of the gesture teacher were determined:

- > elimination of shortcomings in the pronunciation aspect of speech and its grammatical design;
- development of hearing and phonemic perception;
- development of monologic written language;
- > observation of students' performance in general subjects with hearing correction after cochlear implantation;
- ▶ help in mastering the grammatical categories of the language.

The existing system of hearing development of deaf schoolchildren is the basis for preparing children with cochlear implants to receive text as dictation, since dictation is a type of spelling exercise while listening to words and phrases. Sign teachers of the school created a system for preparing children with cochlear implants to write dictations. In the process of experimental work, we systematized speech material that was difficult to understand and included it in the program of individual lessons. We believe that a sign teacher should start by working out the obscure words found in the dictation text and in the conversational text in order to prepare school children with cochlear implants to write a text under dictation.

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