



Research Article

ORGANIZATION AND CONDUCT OF SPEECH THERAPY CLASSES WITH STUDENTS WITH SPEECH DISORDERS IN SECONDARY SCHOOLS

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ABSTRACT

this article discusses the organization and conduct of speech therapy classes with severe speech disorders in a general education school. The conditions and model of work of teachers and a psychologist with students with speech disorders integrated into a mass school are analyzed. At present, the contingent of children with speech disorders starting school has changed significantly both in terms of the state of speech development and in terms of the level of preparedness for systematic learning. Teaching in elementary school students special conditions for learning, development and education, which we will consider in this article.

KEYWORDS

Organization of a speech therapist, speech therapy classes, inclusive education, children with severe speech disorders, special conditions in an educational school, speech therapy support.

INTRODUCTION

Severe speech impairment negatively affects all components of a child's mental development: the

development of cognitive activity becomes more difficult and slows down, logical and semantic memory

is disturbed, memorization productivity decreases, children hardly master mental operations [3, p. 53-54]. Younger schoolchildren with severe speech disorders do not reach the level of development of memory, perception, and attention that is timely to start learning. There is a decrease in the processing of verbal and sensory information, a decrease in efficiency. Children with primary pathology of speech have deficiencies in the development of verbal-logical and visual-figurative thinking. The development of speech indicates that a coherent statement is far from perfect. Children have difficulty in orienting in the task and understanding of instructions, a decrease in the range of perceived speech information, and a lack of understanding of complex semantic speech patterns.

THE MAIN RESULTS AND FINDINGS

- organize diagnostic examinations and timely identify students with speech pathology; identification of students for enrollment in a speech therapy center is carried out from September 1 to 15 and from May 15 to 25 according to a schedule agreed with the heads of the educational institution; - to enroll students at a speech therapy center, to complete groups;
- to conduct classes with students to eliminate various speech disorders and to help overcome the failure in the Russian language caused by them; classes with students are held according to the schedule during hours free from lessons;
- to carry out systematic communication with the deputy directors for educational work of supervised schools, class teachers and parents of students attending a speech therapy center;
- attend classes in order to develop a unified focus in the work of a speech therapist and teacher with students with speech impairments;
- to interact with teachers on the development of general educational programs by students (especially in the Russian language);
- inform the pedagogical council of the school about the tasks, content and results of the work of the speech therapy center;
- at the end of classes, conduct graduation (graduation lesson, at which the progress of children who have received speech therapy assistance is evaluated;
- to promote speech therapy knowledge among teachers and parents of students to prevent and correct speech disorders;
- participate (make presentations and reports) in meetings of methodological associations of teachers, in the work of pedagogical councils;
- attend and actively participate in methodological associations of speech therapists of educational institutions;
- know the content of the program in the Russian language, master the methods and techniques of teaching the Russian language, take them into account in their work, use didactic material in accordance with the topic of the program that is studied in the lesson;
- regularly hold parent meetings and consultations;
- engage in classroom equipment and systematically equip the classroom with the necessary didactic material;
- maintain contact with preschool educational institutions, with special (correctional) educational institutions for students with developmental disabilities, speech therapists and specialist doctors of children's clinics and the psychological, medical and pedagogical commission;
- systematically improve their professional qualifications;

- comply with the rules and regulations of labor protection, safety and fire protection;
- ensure the protection of life and health of students during the educational process;
- immediately inform the administration of the educational institution about the accident that happened to the child in the premises of the speech therapy center;
- maintain documentation in the prescribed form;

main documentation:

1. List of students with disabilities and speech disorders.
2. Journal of examination of oral and written speech.
3. Register of attendance (group and individual) classes.
4. Voice map.
5. Annual methodological work plan of a speech therapist.
6. Long-term work plan.
7. Lesson work plans for each group.
8. Abstracts or detailed plans for speech therapy classes.
9. Workbooks and notebooks for testing.
10. Class schedule of groups, certified by the principal of the school or the inspector of the district department of education.
11. Passport of the speech therapy room, card file of equipment, educational and visual aids located in the speech therapy rooms.

12. Annual report on the work of a speech therapist;
- at the end of the academic year, draw up a report on the work of the speech therapy center and submit it to the administration of the educational institution;
 - draw up a schedule for the work of the speech therapy center by the beginning of the school year, coordinate it with the director of the school (where the speech therapy center is located) and approve it with the administration of the educational institution. [3]

Tasks of correctional and pedagogical influence:

- formation, clarification and correction of sound pronunciation;
- clarification and correction of phonemic perception;
- refinement and correction of the skills of sound-letter analysis and synthesis;
- formation, clarification, enrichment and correction of the vocabulary;
- clarification and correction of grammatical categories;
- core correction of specific mistakes in written speech;
- formation and improvement of communicative skills and abilities [4,5].

A whole complex of speech functions is disturbed. It:

- phonemic underdevelopment of speech - the lack of formation of the process of distinguishing sounds, which leads to a violation of the functions of phonemic analysis, synthesis and representations;

- violation of the pronunciation of words of a complex syllabic structure, rearrangement and replacement of sounds and syllables, reduction in the confluence of consonants in a word;

- Poor vocabulary development. The active vocabulary is dominated by nouns and verbs. Difficulties in word formation. There are few generalizing concepts in the dictionary of children, almost no antonyms, few synonyms. So, when characterizing the size of an object, children use only two concepts - large and small, with which they replace the rest;

- in the speech of children there are agrammatisms, which manifest themselves in changing nouns by number and gender, agreeing numerals and adjectives with nouns in gender, number and case. Often mistakes are made in the use of prepositions, especially complex ones, their omissions in a sentence or replacement with other prepositions.

- underdevelopment of related speech.

Severe speech defects adversely affect the development of cognitive activity and behavior of children. Communication of the child with other people is difficult, therefore, the learning process becomes difficult for the child. This leads to negative experiences. They, in turn, also negatively affect the cognitive activity of the child [2].

The education of such children, after passing the commission, takes place according to an adapted program. Great importance is given to the development of fine motor skills.

Recommendations for Teaching Children with Severe Speech Impairments

- Early start of complex correctional and developmental work.

- Continuity of the correctional-developing process.

- Use of special methods, techniques and teaching aids.

- Individualization and differentiation of learning

- Providing a special spatial and temporal organization of the educational environment [1].

- Introduction, if necessary, into the content of the child's education of special sections.

- Organization of work on the socialization of children.

- Creation of conditions for the development of initiative, cognitive and speech activity through involvement in various activities.

CONCLUSION

Of great importance for stimulating the speech activity of schoolchildren is the behavior of the teacher in the classroom. The teacher arouses and directs the interest of students, supports him through encouragement, with the help of a mark, through the establishment of friendly relations in the class. Playing an active role in the organization of the lesson, the teacher does not limit the speech activity of children.

Although the correction of the speech of children with TNR is a long and complex process, nevertheless, as a result of speech therapy and general developmental classes, children gradually develop a sense of language, mastery of speech means, on the basis of which a transition to independent development and enrichment of speech in the process of free communication is possible.



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