

DIAGNOSING AND ORGANIZING REHABILITATION OF CHILDREN WITH DISABILITIES ON THE AUTISM SPECTRUM

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Abstract:

This article highlights the factors of ensuring continuity of work on the correct diagnosis of children with autism syndrome, effective organization and conduct of correctional and developmental work that ensures the elimination of deficiencies in behavior and general development, as well as their successful adaptation to social life.

Keywords: autism spectrum defect, ASD, autism syndrome, symptom, stereotype, diagnosis, zone of immediate development of the child, early intervention.

AUTIZM SPEKTRIDA KAMCHILIGI BO‘LGAN BOLALARNI TASHXISLASH VA REABILITATSIYA ISHLARINI TASHKIL ETISH

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Annotatsiya:

Ushbu maqolada autizm sindromli bolalarni to'g'ri tashxislash ishlari, xulq-atvori va umumiy rivojlanishidagi kamchiliklarni bartaraf etish hamda ularni ijtimoiy hayotga muvaffaqiyatli moslashishini ta'minlovchi korreksion-rivojlantiruvchi ishlarni samarali tashkil etish va olib borishning uzviylikini ta'minlash omillari yoritilgan.

Kalit so'zlar: autizm spektridagi kamchilik, ASB, autizm sindromi, simptom, stereotip, diagnostika, bolaning yaqin rivojlanish zonasi, erta aralashuv.

Аннотация:

В данной статье освещаются факторы обеспечения непрерывности работы по правильной диагностике детей с синдромом аутизма, эффективной организации и проведению коррекционно-развивающей работы, обеспечивающей устранение недостатков в поведении и общем развитии, а также их успешную адаптацию к социальной жизни.



Ключевые слова: дефект аутистического спектра, РАС, синдром аутизма, симптом, стереотип, диагностика, зона ближайшего развития ребенка, раннее вмешательство.

Introduction

Autism is becoming one of the most urgent problems around the world. According to the information provided by the Republican Center for Socialization of Children, more than 200 children diagnosed with autism are currently registered in Uzbekistan. However, there are many children who have not yet been involved in the rehabilitation process and are left out of correctional work.

The variety of clinical manifestations of autism, the existence of complex forms and types of this disease, as well as the complexity and specificity of correction and education work, make the study of autism syndrome not only a medical, but also a social and urgent problem.

The French researcher J.M. Itar first drew attention to the problem of autism, calling it "intellectual mutism", thereby showing that one of the main symptoms of mutism is the lack of development of speech or retardation in impaired intelligence.

The term autism (Greek: autos-self) was put into practice by E. Bleiler in 1912 and means a specific type of thinking that is regulated by the emotional needs of a person and does not correspond to real life.

Deficit on the spectrum of autism is a desire for extreme solitude, a violation of emotional connection even with close people, stereotypes in behavior and speech, an abundance of the same type of affective actions (interests), with the uniqueness of speech, communication and intellectual development is described.

E.R. Baenskaya and M.M. Liebling distinguish the following characteristics of children with early childhood autism:

- violation of the ability to establish emotional communication;
- presence of stereotyped, monotonous actions in behavior;
- in the development of speech: defects such as mutism, echolalia, speech stamps, absence or distortion of personal pronouns in speech.

Therefore, the problem of rehabilitation of children with autism syndrome is considered very urgent, and in more than 70% of cases of EBA (early childhood autism), profound disability is observed if therapeutic and corrective work is not carried out.

Work with children with autism syndrome is carried out in order to integrate them into society and successfully socialize them.

It is necessary to solve the correct diagnostic issues at the very beginning of correctional and developmental work with children with autism syndrome. Diagnosis of individuals with autism spectrum disorder is carried out in 4 stages:

I. Indicative stage. At this stage, the most urgent problems of the child, the etiology of the disorder are studied, the strategy of further diagnostic methods is chosen, flexible and primary correctional approaches are chosen.

At this stage, the following main work methods are carried out:



1) biographical - it is carried out during the study of documents and interviews with parents and close relatives of the child.

2) observation - is carried out in various situations of the child's activity (during direct examination by one or another specialist, in the classroom, at play, while walking, etc.);

3) interview with the child and parents.

As a result of the correct implementation of the I indicative stage, the child's somatic, mental and psychological condition, family upbringing conditions, the level of adaptation and potential opportunities in the children's community, the characteristics of emotional and voluntary manifestations, the level of work, fatigue, adults and peers it will be possible to summarize preliminary information about the specific characteristics of relations with

II. The stage of in-depth study and identification of the zone of immediate development of the child.

The main tasks of this stage are:

1) study the processes of development of mental functions (attention, perception, memory, thinking, speech);

2) analysis of the features of the emotional-voluntary sphere and motivational preparation;

3) study the characteristics of personal development;

4) to study the extent and nature of knowledge, skills and qualifications related to the child's age and characteristics;

5) to study housing conditions, family relations and family upbringing.

The following basic work methods are used for this:

1) pedagogical experiment;

2) psychological experimental methods.

This is done by using standardized psychological methods for parents, questionnaires and questionnaires and others.

Carrying out this stage, analyzing and summarizing the obtained results allows for a comprehensive analysis, development of a single strategy for working with the child and the preparation of medical conclusions presented at the psychological, pedagogical, speech therapy, medical-pedagogical board in order to coordinate it with the parents.

III. Dynamic diagnostic stage. At this stage, children with autism syndrome are accurately diagnosed, the direction of a specific correctional work system is determined in the direction of individual education, and the correctional methods of the development program are analyzed and studied.

At this stage, an emphatic pedagogical experience is conducted, in which individual approaches to teaching are optimized and areas of education and correction of a child with autism syndrome are analyzed.

IV. Stage of studying catamnetic data.

At this stage, the level of adaptation of children to different situations and conditions is evaluated.



At this stage, all the child's catamnetic information is collected and the effectiveness of the psychological and pedagogical support service is evaluated.

According to the data of catamnesis in practical activity, the level of social adaptation is divided into three:

- a) the child is socially adapted at school, does not face special difficulties in communication and educational activities;
- b) faces difficulties in communication, but successfully overcomes them, social disorder is not observed;
- c) faces difficulties in educational activities and social interactions, needs psychological and pedagogical support.

Rehabilitation of children with autism syndrome requires non-standard approaches incorporating medical, pedagogical, speech therapy, eurythmic and other correctional support activities. Rehabilitation approaches, primarily aimed at eliminating developmental defects such as stereotyped behavior, speech, motor skills, mental and mental weakness, effectively help socialize children with autism spectrum disorders.

Methods used with children with autism spectrum disorders are divided into 2 groups: basic and auxiliary methods.

The main methods allow to master communication, social, educational, professional, labor and other practical skills necessary in everyday life. The use of one of the main methods is a necessary condition for the organization of education, but it is not always sufficient.

Auxiliary methods - create conditions for the implementation of the main methods, but give an effective result when used together with the main methods. Auxiliary methods include hippotherapy, dolphin therapy, various methods of holding, aesthetic and ergotherapy, and even yoga.

Currently, there is no single effective method of correction and development of children with autism syndrome. Specific results can be achieved by simultaneously applying different correction methods and involving a group of specialists with different specialties. Parents take the main role in working with children with autism syndrome, it is necessary for them to form a system of necessary knowledge, skills, competences and personal qualities so that they are ready to establish a special educational process and relationships with their children in the family. That is, work with an autistic child begins with the training of parents and is carried out with the intervention of all specialists in the correctional work system.

Correctional rehabilitation work with a child with autism syndrome should begin as early as possible.

The sooner the defects in children are detected, the better the result of correctional work for autism can be hoped for. The first study on this topic was conducted in 2012 by Sally Rogers, a professor of psychiatry and behavioral sciences in the United States. His research has shown that early intervention normalizes brain activity in 18-month-old autistic children. A study published in the Journal of the American Academy of Child and Adolescent Psychiatry, entitled "Early Behavioral Intervention Modulating Brain Activity in Children with Autism Syndrome,"



found that children who received a specific intervention therapy were more likely to look at faces than at objects. showed more brain activity.

At the beginning of specially organized correctional and developmental work with children with autism syndrome, of course, diet should include: consumption of vitamin-rich products, adherence to a diet, introduction of gluten-free, casein-free and soy-free diets, use of antibacterial and anti-candidal drugs, support of the immune system The use of methods such as support, removal of heavy metals from the body gives a good result.

In the process of working with children with autism syndrome, the use of medical methods is of primary importance. The Tomatis method is widely used in practice with ASD children. At the same time, medical methods include high-frequency therapy (sound therapy), brain micropolarization (stimulation of speech zones, mental development), biacoustic stimulation, Baroque chambers (oxygen therapy), Homeopathy, and others.

Psychological methods of correctional and developmental work with children with autism syndrome are very diverse.

Eurythmy is an artistic movement art that appeared at the beginning of the 20th century. It is music combined with specially coordinated and synchronized movements similar to dance or pantomime. Eurythmic movements are based on the experience of musical charm and speech skills.

In educational institutions, correctional and developmental work aimed at the development of cognitive processes of children with autism syndrome and their adaptation to social life is organized primarily in the form of individual training. Later, after the child is ready for social interaction, the activities are continued in small groups and in groups. This, in its place, is the basis for the child to communicate with his peers, and helps to achieve social adaptation.

Group classes with children help children with autism syndrome to learn in inclusive classes in general schools. This is one of the urgent issues, because nowadays children with autism syndrome study in special specialized schools (for children with intellectual disabilities) or in home education.

The integration and interaction of medical, pedagogical and psychological influence is of great importance for children with autism syndrome to get an education among their peers, to have their position in society, to develop in all aspects and to show their identity. In the implementation of this work, the joint cooperation of the Ministries of Health, Pre-school and School Education, Higher Education, Science and Innovation, Youth Policy and Sports, as well as the assembly of local citizens and families raising children with autism syndrome does.

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