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IJIEMR Transactions, online available on 26th Feb 2021. Link:

https://ijiemr.org/downloads/Volume-10/Special

DOI: 10.48047/IJIEMR/V10/I03/52

Title: Ways to work on the speech breathing of a deaf child in correctional classes.

Volume 10, Issue 03, Pages: 227-229.

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Ways to work on the speech breathing of a deaf child in correctional classes.

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Abstract. In this article it is discussed the sound culture of speech in the native language, the pronunciation of sounds, words and phrases, correct speech breathing, as well as the ability to use adequate vocal power, the normal pace of speech and the formation of various into national means of expression given Techniques for the effective use of playful exercises in the formation of verbal breathing skills are described.

Keywords. Speech, correctional exercises, deaf children, speech breathing, breathing exercises.

I. Introduction.

Speech is one of the most complex mental functions of man and has emerged in the process of social work as a means of communication between people. Through speech, a person perceives objects and events in the external world. The development of a child's speech is associated with the formation of the individual as a whole, as well as all mental processes. "Language acquisition is not just a process of imparting knowledge, skills and abilities. This is education first and foremost. It is the education of the heart, the education of the mind, the formation of the formation of thoughts, the enduring work on the most delicate aspects of the human psyche, 1 "said the Russian pedagogue KD Ushinsky.

The basics of normal speech are the ability to correctly distribute the breath, the correct articulation of each sound and clear diction (Latin "diction" -pronunciation), is the ability to pronounce words clearly, clearly, to master the skills of speech, to form the norms of literary pronunciation. to be acquired on the basis of the most important conditions, such as the development of phonemic auditory perception (the ability to distinguish sounds and phonemes in words). The normal

measures that lead to the development of normal speech in children with hearing impairments should be based on the following tasks.

1. To develop the ability to listen to speech, to determine the sound of any sound,

development of a child's speech is based on the ability to listen to speech correctly. Corrective

- speech, to determine the sound of any sound, and to perceive the speed and rhythm of speech;
- 2. Work on verbal breathing means teaching the child to take slow, deep breaths and exhale strongly, continuously and sparingly, and the length of the breath helps to add words and phrases and the listener to understand the speech.
- 3. Development of the articulatory apparatus;
- 4. Develop the ability to control the volume based on the culture of communication;
- 5. Effective organization of teaching to pronounce each sound and words and phrases clearly and intelligibly, is in accordance with the rules of orthoepy of the Uzbek literary language, forms the basis of correctional education does.

In the formation of speech, the vocal cords located in the larynx, along with the muscles, the tongue, the lips, the oral cavity, the nasal cavity, and the additional cavities between the face and forehead bones, the larynx, the larynx, the bronchi. The lungs are actively involved. Speech breathing is

¹D.R. Babayeva. Theory and methods of speech development. (Textbook). - T .: «Barkamol fayz media», 2018, - 432 p.



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voluntary breathing as opposed to spontaneous breathing. In non-verbal breathing, exhalation and exhalation take place through the nose, the duration of which is almost equal to the exhalation. Speech breathing is done through the mouth, breathing is faster and breathing is slower. In non-verbal breathing, the breath is exhaled immediately after exhalation, followed by a pause. In verbal breathing, there is a pause after exhalation, followed by a slow exhalation. Deaf children are accustomed to non-verbal breathing and have difficulty holding their breath for long periods of time, not only because of incorrect or poor control of their respiratory function, but also because of incomplete movement of vocal cords in phonation. During articulation, vocal cords and excessive force also make it difficult to hold the breath and distribute it properly during speech. Sound is produced when airflow from the lungs hits the vocal cords in the larynx. Hence, sound pronunciation is done during exhalation. The air in normal breathing is deficient for speech. should take slow, deep breaths and exhale vigorously and sparingly to add words and phrases and help the listener understand the speech. When you speak, you breathe out much longer than you breathe out. Therefore, speech breathing is the most important factor in the formation of sounds. A child with a hearing impairment is accustomed to exhaling quickly due to the inability to use the respiratory muscles properly and the inactivity of the articulatory apparatus, making it difficult to pronounce vocal, sonorous and fricative in one breath. Therefore, it is important to teach a deaf child to breathe continuously and sparingly. In teaching deaf children to pronounce, working on speech breathing is the first step in corrective action. The main purpose of working on speech breathing is to develop the ability to breathe correctly in deaf children, to develop the ability to pronounce words and short phrases in one breath, to develop the ability to use correctly. This includes special breath exercises that strengthen the diaphragm, abdominal and intercostal muscles, and

articulatory motor skills, as well as speech therapy games that provide breathing strength and duration. All speech therapy games aimed at breathing exercises serve to increase lung ventilation. Excessive work on breathing exercises is also not advisable. Breathing exercises are performed in a specially equipped, clean and ventilated room. During the first days of training, a variety of nonspeech breathing exercises are performed. Then you need to learn how to pronounce vowels, sonors, fricatives and syllables. This process allows you to pronounce words aloud and in combination. The instructor should conduct breathing exercises according to strict rules during the correctional training. Deaf children need to control the expansion of the chest when they breathe in and the contraction of the chest when they breathe out, and the fact that they breathe through the mouth and not through the nose during pronunciation. The following breathing exercises can be used to develop strength and length of exhalation during training.

Exercise named "In the garden"

In this exercise it is aimed to teach deaf children to breathe more deeply and to breathe more continuously and sparingly;

Teaching technique: The teacher explains the sequence of actions to the children. On the basis of imitation, children perform this method.

Instructions should be as following:

- "Guys, let's stand up." We put our left hand on our stomach for control and our right hand on our ribs: we exhale "puffff". This causes the abdominal muscles to contract. Then we breathe as if imagining a flower smelling. The abdomen protrudes and the ribs dilate. Breathing is stopped by a sharp movement of the abdomen, the lower abdomen is shortened. Then take a slow, even breath and expand your abdomen and ribs. You take short breaths and exhale long breaths.

Exercises such as "Bubbles", "Clouds", "Hot Tea", and "Autumn Tree" have also been used to improve breathing strength and length.

We can use the following exercises to develop the ability to breathe in and out at



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the same time. "Football", "Feed the Animals", "

"Candle" exercise

The purpose of this exercise is to: develop differential breathing and strong exhalation and activate the lip muscles;

Exercise technique: The teacher shows the children the sequence of actions. "Guys, we're holding the candle flat and blowing at it for a long time." If the fire is evenly spaced away from us, then we are breathing evenly.

Methodical instructions: The teacher repeats this method 2-3 times. All breathing exercises are conducted in preparatory classes only.

Defectologists use special playful exercises to achieve positive results in the formation of correct speech breathing skills in deaf children, correct pronunciation of sounds and the development of uniformity and intonation of speech. The formation of verbal breathing skills is also the most important factor in the prevention of subsequent speech defects. Deaf children learn to pronounce sounds and words clearly and intelligibly by imitating a teacher's speech. Pronouncing the same sound over and over again also helps to develop speech breathing.

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