

Antonov Arseniy Vyacheslavovich

student

Scientific supervisor

Zimovets Natalia Viktorovna

Candidate of Philological Sciences,

Associate Professor, Associate Professor

FSAEI of HE «Belgorod State National Research University»

Belgorod, Belgorod region

PREVENTION OF SPEECH DISORDERS

Abstract: for the prevention of speech disorders, a speech therapist together with parents can use a set of various measures aimed at preventing or eliminating risk factors through special effects on children, which include therapeutic, pedagogical and social effects. Already at the initial stage of using preventive measures for speech disorders, it is possible to prevent or slow down manifestations of deviations from the norm, in particular, speech pathology, which is closely related to the prevention of neuropsychiatric abnormalities.

Ключевые слова: prevention, early development, speech environment.

Антонов Арсений Вячеславович

студент

Научный руководитель

Зимовец Наталья Викторовна

канд. филол. наук, доцент, доцент

ФГАОУ ВО «Белгородский государственный национальный

исследовательский университет»

г. Белгород, Белгородская область

ПРОФИЛАКТИКА РЕЧЕВЫХ НАРУШЕНИЙ

Аннотация: для профилактики речевых нарушений логопед совместно с родителями может использовать комплекс различных мер, направленных на предотвращение или устранение факторов риска посредством специального

воздействия на детей, включающего терапевтическое, педагогическое и социальное воздействие. Уже на начальном этапе применения профилактических мер при речевых расстройствах можно предотвратить или замедлить проявления отклонений от нормы, в частности, речевой патологии, которая тесно связана с профилактикой нервно-психических отклонений.

Ключевые слова: профилактика, раннее развитие, речевая среда.

The prevention of speech disorders, as well as the prevention of any diseases or pathological conditions, is based on eliminating, if possible, from the child's life those causes that can lead to violations. Unfortunately, sometimes it is still not possible to completely prevent the occurrence of speech pathology, and in these cases the task of prevention is reduced to the greatest possible mitigation of the adverse effects of harmful factors that have already acted. It is on this side of the issue that we would like to draw the special attention of parents. Let's trace the content of preventive measures step by step (as if in the course of the child's development).

Since much of a child's development can be predetermined by heredity, future parents need to take this issue very seriously. If there is a particularly unfavorable inheritance on the maternal or paternal side, it is necessary to consult specialists, after which carefully weigh all the pros and cons.

As for the state of health of the expectant parents themselves, it is very important not to allow a thoughtless attitude to life and the acquisition of various kinds of bad habits. If such habits have already been acquired, then both expectant parents need to completely abandon them at least a year before pregnancy.

The period of pregnancy requires special attention in the sense of preventing speech disorders. However, a lot depends directly on the woman herself, on her compliance with the necessary personal precautions.

All kinds of stressful situations that arise in the family have a very negative effect on the future child, especially if they become protracted. Therefore, all family members should be well aware of the importance of the moment and the need to create as calm

an environment as possible in the house. The resolution of all kinds of conflicts should be postponed not only during pregnancy, but also for the entire postpartum period.

As for all kinds of accidents, many of which are beyond our power to prevent, then the reasonableness of the behavior of the woman herself and her closest relatives and friends is very important here.

The very process of childbirth also largely depends on the woman. In the near future, before giving birth, it is necessary to exclude supposedly urgent travel and flights to other cities.

After the birth of a child, it is necessary to carefully monitor the course of his early development, noting any deviation from his normal course of development.

Prevention of speech disorders directly at an early age consists mainly of the following two points:

1) taking care of the physical and neuropsychiatric health of the child and the safety of his speech organs;

2) taking care of the correct speech development of the child, including the creation of the necessary social and living conditions for this.

The solution to the first of these tasks is specifically expressed in the following:
prevention of head injuries;

prevention of various diseases and childhood infections occurring with high fever (compliance with the terms of preventive vaccinations, exclusion of direct contact with patients, etc.);

protection of the hearing organ from colds, from ingestion of foreign bodies, from excessive noise (even during sleep), as well as timely treatment and mandatory «follow-up» of ear diseases;

protection of articulatory organs, consisting of the following:

o prevention (and treatment) of rickets and the possible appearance of abnormalities of the bony parts of the speech apparatus;

o exclusion of cases of sucking a finger or constantly placing a hand under the cheek during sleep (the latter can lead to the formation of a so-called cross bite);

- o early prosthetics of teeth in case of premature loss, since tooth loss in children causes significant deformation of adjacent teeth and jaws (age-related tooth change is not meant here);

- o timely surgery of clefts of the upper lip and palate, if present in the child;

- o timely pruning of the short frenulum of the tongue (no later than 4–5 years, since by this time those sounds should appear in speech, the correct articulation of which is hindered by the short frenulum);

- protection of the voice apparatus from colds, dust ingress, voice overload (excessive shouting, excessively loud and tense speech, etc.);

- protection of the child's nervous system (exclusion of loud shouts, scary stories and various kinds of intimidation, a gentle approach to the child during any illness and for some time after its end, the fight against ascariasis, etc.); this type of prevention is especially important for the prevention of all kinds of neurotic speech disorders and, first of all, stuttering.

Taking care of the correct speech development of the child should be expressed in the following:

- providing a favorable speech environment as a necessary role model (in terms of the absence of speech disorders in the people around the child);

- encouraging the babble of a child with facial expressions of joy;

- fostering a focus on the perception of the speech of others, for which you need to talk to the child as much as possible starting from the first days of his life;

- slow and clear pronunciation by adults of simple words related to a child's specific life situation, as well as clear naming of surrounding objects and actions performed, which will help the child gradually «begin» to master speech;

- clear pronunciation by adults of words incorrectly spoken by a child, designed for unobtrusive and gradual correction of his incorrect pronunciation;

- teaching the child to look into the other person's face during a conversation, since visual perception of articulation contributes to its more accurate and faster assimilation;

- systematic creation of such situations in which the child must express his request verbally (adults should not strive to «understand him in half a word», especially with

just a gesture or glance); it is necessary to organize the child's life in such a way that the situation itself causes him to need verbal communication, including «talking» with animals, toys, etc.;

complete exclusion of cases of «babbling» with a child, depriving him of the right role model;

practicing rhythmic, music and singing; the latter contributes to the development of proper breathing and a sufficiently flexible and strong voice, as well as prevents slurred speech;

the development of fine manual motor skills, which play an extremely important role in mastering full-fledged speech.

It is impossible not to mention another type of prevention – the prevention of relapses (returns) of speech disorders. Such relapses of speech disorders may occur in the case of insufficiently firm consolidation of the results of speech therapy work or in particularly unfavorable life situations that disrupt compensation mechanisms. Of all the cases of speech pathology, such relapses are most often observed with stuttering. It is important to understand here that the newly educated skill of correct speech is still very fragile and therefore, for its full automation, it takes some time and continuous work to consolidate. Even with pronunciation disorders, there may be a return to the old defective articulation, which is more strengthened than the newly educated one. For this reason, even after the cessation of speech therapy classes, parents should spend some time with the child special exercises and monitor his speech. At the final lesson, speech therapists usually give such recommendations, but, unfortunately, some parents underestimate their importance.

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