CHILDREN WITH DELAYED MENTAL DEVELOPMENT

Mirbabaeva Nadirakhan*

*Teacher, Department of Defectology of QSPI, UZBEKISTAN Email id: Hurshidahon1991rahimova@mail.ru

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ABSTRACT

This article provides detailed information on the types of mentally retarded children, correctional work conducted with them, and scientists who have conducted research with mentally retarded children.

KEYWORDS: *Emotion, Volitional States, Ulgurmovchi Students, Constitutional; Somatogenic; Psychogenic; Cerebral Form.*

INTRODUCTION

There are also children with retarded mental development among pre-schoolers. Mental development slows down as a result of diseases of the central nervous system, primarily affecting their cognitive activity - intellect, logical thinking, perception, memory, voluntary attention, work ability and other qualities. In such children, deficits in the sphere of emotion and will are primary, and mental weakness is a secondary phenomenon.

T.a. vlasova, m.s. pevzner, v.i. lubovsky, t.v. yegorova, k.s. lebedinskaya, n.a. nikashina, k.k. mamedov, d.b. shoumarov, n. According to the data of a.sipina, r.d.triger and other scientists, such children make up 5.8% of primary school students.

Mentally retarded children are mainly divided into two groups according to their mental level:

1. Children with mild disabilities - after receiving 1-3 years of education under special conditions, they can continue their education in the appropriate class of public school.

2. Children who are significantly behind in their mental development - these should be taught in special conditions until they graduate from school. Such children cannot master the school program as well as their healthy peers. Teaching mentally retarded children in a public school, like everyone else, has a negative effect on the educational process, that is, it pulls the average student's level back, and prevents the development of good and excellent students.

Due to the inability to master the program materials well, mentally retarded children always fail, which causes many different negative traits to appear in their behavior.

Scientists k.s.lebedinskaya, g.p.berton, e.m.dunayeva and others recommend dividing mental retardation clinically and psychologically into the following types: 1) constitutional; 2) somatogenic; 3) psychogenic; 4) cerebral form.

Signs characterizing the constitutional form of mental retardation include the following: the body structure of the child looks 1-2 years younger than that of healthy peers. He behaves like children of kindergarten age and is still "immature" for education. Such a child does not engage in academic activities well, because he has no interest in learning and low work ability. Due to irresponsibility, lack of motivation, poorly developed abilities to analyze and synthesize mental processes, he learns reading and writing, mathematics with great difficulty. Cases of rapid fatigue during classes, headaches cause a further decrease in working ability and activity in such a child with a constitutional form.

This shortcoming in development can be caused by impaired functioning of the thyroid gland during the pregnancy of the child's mother, and cardiovascular diseases.

As a result of being frequently sick with various chronic diseases at an early age, the child may not grow well, which in turn leads to mental retardation, delay, somatic form of underdevelopment. Chronic infections, allergic conditions, birth defects and similar diseases are especially common in children. Slowness of mental development related to somatogenic causes causes asthenia in the child. In some children, somatogenic infantilism is observed, that is, the child does not grow and remains an infant. In this case, neurosis-like states of self-doubt, timidity, capriciousness, masculinity, low interest, etc. Are observed in the child's psyche.

In the psychogenic form of mental retardation, the child is brought up in unfavorable, wrong conditions from an early age, and the negative aspects of this upbringing have affected his mental development. The causes of such defects can be divided into 3 groups:

1. Not being involved in raising a child at all, leaving it completely to its own devices, in which children do not develop a sense of duty and responsibility. In addition to the lack of development of intelligence, interests, cognitive activity, feelings and will, the lack of knowledge and impressions necessary for mastering academic subjects is also added.

2. Pampering the child in every way, not teaching him sufficient independent activities, not forming a sense of initiative, responsibility, raising the child to be a "family man", and also as a result of acting according to his heart, the child may lag behind in his mental development.

3. Abusive treatment of a child, physical punishment, harsh handling, aggressive attitudes of parents related to alcoholism cause the child to be constantly nervous and lag behind in mental development. Such children develop impudence, lack of courage, lack of initiative, independence, cowardice and other feelings. All this has a negative impact on intelligence and cognition.

In the psychogenic form of mental underdevelopment, the feelings arising as a result of wrong upbringing are added to the deficiencies related to cognitive activity, and finally, as a result, the development of the individual is derailed, and pathological feelings appear in him. It is necessary to distinguish such children from pedagogically neglected children. Pedagogically neglected children have a normal psyche, and as a result of improper upbringing, they fall into the ranks of underachieving students. However, in children with mental retardation, all-around improper development of the personality is associated with mild organic injuries in the central nervous system.

In the most complex and widespread psychogenic form of mental retardation, there are changes related to brain disease and immaturity. According to the information provided by our scientists, 50% of such children have organic defects in the nervous system. appears. Brain-related organic infantilism can be divided into two:

1. Children whose moods change, most of them are in high spirits, they retain the characteristics of children younger than themselves.

2. Children who are more depressed and depressed, unable to solve tasks independently, unable to take initiative, are seen to be afraid.

These two types of infantilism of an organic nature related to the brain are often accompanied by a number of additional phenomena. These include:

1. Cerebral-endocrine infantilism. In this case, the function of the internal secretion glands is disturbed. As a result, children's feelings are not well developed and neuropathy occurs. The child's sleep and appetite will not be good, there will be a tendency to dyspepsia.

2. Cerebrasthenic conditions, these are also common. The central nervous system quickly gets tired, neurodynamic changes are observed. As a result, mental ability decreases, memory decreases, attention becomes scattered, quick reactions, crying in girls, excessive excitability are observed in boys, the child has low work ability, gets tired easily for trivial things.

3. Situations close to neurosis in nature, these are expressed together with phenomena such as fear of the dark, loneliness, danger for the health of oneself and others, hyperkinesis, stuttering, enuresis.

4. Psychomotor agitation - more common in boys. It is characterized by activity, distraction, and quick distraction.

5. Affective changes are characterized by unexplained mood swings and aggression.

6. Psychopathic changes - include negative traits such as low motivation for mental activity, negative attitude to study, stealing (kleptomania), more lying.

7. epileptic disorders - manifested by seizures in various forms.

8. Apathetic-adynamic disorders are characterized by a decrease in initiative, slowness of mental activity, excessive emotional emptiness.

The cerebral form of mental retardation is the result of brain injuries, meningitis, meningoencephalitis, hydrocephalus and other diseases.

Children with retarded mental development will be less able to study, but if this condition is detected in time and correctly, if appropriate support is organized for the children, they can master the public school program.

In some forms of mental development deficiencies, it is useful to treat children from time to time in special psychoneurological sanatoriums. In the sanatorium, the child is gradually involved in collective work. When he shows signs of exhaustion, he is temporarily released from school or given other simpler tasks. After treatment at the sanatorium, the child continues his studies at his school. In our country, for children with retarded mental development, special pre-school

boarding schools and equalization classes have been established in extended day schools. Education in these matters is conducted on the basis of regular kindergarten or school programs and textbooks, and a special protective and gentle treatment procedure is established. Educational activities are aimed at eliminating the shortcomings of children's thinking ability, attention, work ability, memory, speech and thinking. In teaching such a child, the teacher works in special conditions and with special methods, taking into account his unique individual characteristics, and organizes appropriate support.

The scientific investigations conducted by the employees of the Institute of Child and Adolescent Hygiene under the Ministry of Health, including N. P. Weizman and other scientists, show that mentally retarded children are intermediate between healthy and retarded children in terms of learning. During the examination, these scientists give the same tasks to mentally retarded and mentally retarded children, so that if normal healthy children correctly understand the given task and perform it in the right order, such children do not understand the task and cannot perform it, and mentally retarded children partially understand the same task and they do partially. Therefore, mentally retarded children understand much better than mentally retarded children, and they have the necessary opportunities to do this. Although the learning ability of children with retarded mental development is lower than that of their healthy peers, it is wrong to send such children to a special school because this school program makes it easier for them. The public school should provide special support to ensure that the child can complete his program by creating the necessary conditions (opening a special class-equalizing class).

Kindergarten teachers and primary school teachers should help children with mental retardation to receive education in special conditions, identify them in time, separate them from other children, and advise parents to refer to specialist psychoneurologists. Children with retarded mental development are treated and treated among their healthy peers or in special institutions, with the aim of protecting and correcting their mental activity.

Thanks to timely and properly organized assistance, children in need of this category of special assistance will later develop well, and after graduating from school, they will receive a successful education in higher educational institutions.

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