



## TEACHING PROBLEMS OF CHILDREN WITH DOWN SYNDROME

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### ABSTRACT

*The article deals with teaching children with various disabilities, teaching methods in special educational institutions, various problems and ways to overcome them.*

**KEYWORDS:** *Down syndrome, abnormal development, nervous system disorders, birth abnormalities, difficulties in teaching abnormal children.*

### DISCUSSION

The defectology focuses on different categories of abnormal children: children with hearing impairments (deaf, deaf, and deaf children); visually impaired (visually impaired); blind and deaf children; children with severe speech disorders; children with deficiencies in support staff members; children with mental retardation. Anomalous children should be brought up and taught in special educational institutions. Only a defect that has a strong impact on the overall development of a child can be considered an anomalous child. For example, if a child only hears his left ear, it does not affect the overall development of the child. It does not belong to anomalies. This disability cannot be considered anomalous, even if the defects that occur in older adults do not affect their overall development. Severe changes in the physical and mental development of abnormal children may adversely affect the identity of the individual.

Therefore, special conditions should be created to educate and educate such children, that is, they should be taught and trained in special kindergartens and schools on the basis of special

programs and textbooks. Any abnormal development may be due to organic or functional changes in the central and peripheral nervous system. Different developmental disorders of the child may be the result of unfavorable environment and poor education. For example, adverse family conditions, pedagogical neglect, mistreatment of the teacher, and many other factors may adversely affect the development of the child and impede his ability to absorb the program material well. causes the water to fall off. However, we do not include such an infant in the category of abnormal children, because their developmental defects are not related to any organic or functional pathological changes in the body, but for other reasons. Tutors and teachers should be able to distinguish such children from anomalous children. For an origin, any abnormal development may be congenital or acquired. Birth defects are often linked to the health and living conditions of a pregnant mother. The development of the fetus in the mother's womb may be affected by infection, intoxication, injury, and other factors. Maternal illness during pregnancy and unintentional use of various medications can cause anomalies. Birth abnormalities may also be caused by genetic or

genetic factors. For example, there was a disorder of the auditory analyzer and the transfer of mental retardation from one generation to another.

(Down syndrome, Rhesus factor and others). Parents' alcoholism, drug addiction, and toxic mania can also cause abnormal abnormalities. Abnormal abnormalities occur as a result of adverse effects on the baby's body during and after birth. Brain trauma during childbirth can lead to a child's abnormal development, vacuum extractor or fibroids, as well as abnormal development of the baby's umbilical cord (asphyxia) and others. The child's illness at an early age can lead to abnormal development such as mining and central nervous system disorders. There are many measures being taken to prevent child anomalies in our country. Much progress has been made in this area. The expansion of medical treatment in the Republic of Uzbekistan has also led to a significant reduction in the number of children with anomalies due to major advances in medicine.

Children with hearing impairments fall into the category of anomalous children. Because this defect has a negative impact on the development of the program material in the development of the child as a whole. Children with hearing impairments need to be trained and trained in special settings in special settings. Light levels of hearing impairment also affect the development of the child. There are a number of unique challenges in developing a kindergarten and school program. For example, hearing impairments in younger children, such as loss of age at two years of age, result in deafness, and the child gradually forgets what they already know. The child becomes deaf and dumb, and becomes deaf. Symptoms of mental retardation may also appear if the child is not given proper help at the right time.

However, a special correction setting that replaces the defect and activates the control processes helps to correct the child's defects and promote their overall mental development. There is a special kindergarten and a boarding school for deaf children. Specialist educators and educators should help ensure that these children receive appropriate training. As mentioned above, deaf children in deaf language use include deaf, congenital and acquired children. Deaf children, in turn, are divided into children with mild, moderate, or severe hearing impairment, regardless of their hearing impairment. Children with severe hearing impairment can hear the spoken speech at a distance of 6-8 m from the ear, 3-6 m away. Medium-hearing deaf children hear 4 to 6m and 1-3 m. In severe headache, the child only hears the voice spoken in the middle braid at a distance of 2m from the earpiece and 0.5m away. As a result of deafness, a child may have a number of shortcomings in speech: poor vocabulary, poor grammatical component - dropping out of words, misuse of words, interoperability. Inability to connect, to colloquial, to make words, to change words, to not use suffixes: misinterpreting sounds -

misleading, distorting consonants and others. Some of the teachers and educators mistakenly think of the child as lazy, irresponsible, and bullying because of their lack of understanding of child's speech deficiencies. This means that there will be secondary spiritual changes. Children with severe hearing disabilities can be brought up in a public park and school, along with healthy peers. However, they need to be treated in a way that creates comfortable conditions for them. They have been making great progress in working with deaf children.

In this category, abnormal children successfully graduate from high schools after being trained in special evening schools in special boarding schools (for deaf, hard of hearing children). They work in different businesses around the country. This means that hearing defects can be completely eliminated, completely compensated, and corrected. The main task of educators and teachers is to separate disabled children from other children and to provide them with special education where necessary.

The child develops all the knowledge and skills necessary for independent living. Blind children perceive the environment through their visual analyzer. They should also be educated in a special school for the visually impaired or special classes at the sight school. However, it is well known that most of these children begin their studies in public schools. After years of failure, they go to special schools. Such children should be separated from their peers and sent to special schools as soon as possible. Children with visual impairments cannot distinguish between lines well. Conditional similarity can cause letters to overlap, resulting in many errors in reading and writing. As a result of the inability to separate numbers, they have difficulty calculating and solving mathematical problems. They don't like the whiteboard, charts, and other drawings. They get tired quickly while doing the visual work. Inadequate environments and adverse conditions can lead to a dramatic decline in the visibility of the child. Tutors and teachers should promptly refer an eye-care consultant to visually impaired children. The ophthalmologist recommends that the child be checked and, if necessary, wearing sunglasses and determine where the child should be educated. Children who wear sunglasses should be provided with proper sanitary and hygienic conditions in kindergartens and schools. The child's workplace should be properly and adequately covered. The focus is on how the child sees the whiteboard, the table, the drawings on the card, and other educational materials. Given that the abnormal reflux of the child's eyes becomes fatigued, it is necessary to adjust the workload as much as possible during the classroom, and to monitor the volume of eye-catching tasks. Children with visual acuities ranging from 0.05 to 0.4 receive instruction in special kindergartens and schools. Training is conducted in these areas, but textbooks, which are

printed in letters that are far from the various technical and magnifying optics, use special lighting. One of the main objectives of the special school is to ensure that children have the ability to properly use their vision and learning skills while learning, and to create conditions for effective vision and development of their child. Secondary complications resulting from visual impairment and others. After graduation from special schools, children with visual impairments work in the Republican blind society. They are engaged in intellectual activity (writer, poet, high school teacher, musician, etc.). Thus, there are great opportunities for the development of children with visual impairment through education. Properly compensated, as a result of correction measures, they can play a role in their lives.

## REFERENCES

1. *The Law of the Republic of Uzbekistan "On Education"*. -T., 1997.
2. *National Program for Personnel Training of the Republic of Uzbekistan*. -T., 1997. Karimov I.A.
3. *Harmoniously developed generation is the foundation of Uzbekistan's development. "Dream of harmoniously developed generation"* - T., "Sharq", 1999.
4. Karimov I.A. *High spirituality is invincible force*. T., "Uzbekistan" 2008.
5. *"Bases of defectology"* - T. Petrovsky A.V. *General Psychology*. T., "Teacher", 1992.
6. Karimova V. *Psychology*, T., 2002. PM Polatova.
7. *Special Pedagogy*. T., 1999 PM Pulatova *"Implementation of educational work in auxiliary boarding schools"*. Tashkent. 1996.
8. Muminova L., Ayupova M. *"Logopedics"*. T., Teacher 1993.