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# CHARACTERISTICS OF PERSONALITY AND INTERPERSONAL RELATIONSHIPS IN CHILDREN WITH READING AND WRITTEN SPEECH DEFECTS

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Article history:		Abstract:
Received: Accepted: Published:	26 <sup>th</sup> August 2021 24 <sup>th</sup> September 2021 30 <sup>th</sup> October 2021	Interpersonal relations are subjectively experienced interconnections between people, objectively manifested in the nature and methods of mutual influences exerted by people on each other in the process of joint activities and communication. Interpersonal relationships are a system of attitudes, orientations, expectations, stereotypes and other dispositions through which people perceive and evaluate each other. These dispositions are supported by the content, goals, values and organization of joint activities and act as the basis for the formation of a socio-psychological climate in the team.
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The main criterion that determines the position of a child in a peer group is the teacher's assessment and academic success. Interpersonal relationships are those direct connections and relationships that develop in real life between thinking and feeling individuals. Interpersonal relationships are realized, manifested and formed in communication. The role of communication in shaping a child's personality is extremely important.

In preschool age, a child develops complex and varied types of relationships with others, which largely determine the formation of his personality. It is important to study these relationships in order to purposefully shape them.to create a favorable emotional climate for each child in the group. Some characteristics of temperament also influence the formation of interpersonal relationships. It has been experimentally established that choleric and sanguine people are easily socialized, while phlegmatic and melancholic people experience difficulties. External physical disabilities and chronic diseases usually have a negative impact on the self-concept and ultimately complicate the formation of interpersonal relationships. Temporary illnesses and reduce sociability and the intensity of interpersonal contacts. Interpersonal relationships are formed in all spheres of human activity, but the most stable are those that manifest themselves in the process of joint labor activity. In the course of performing functional tasks, not only business contacts are consolidated, but also interpersonal relationships are formed and developed, which subsequently acquire a multilateral and deep character.

Initially, the child enters into communication with a peer for the sake of a game or activity to which he is prompted by the characteristics of the peer, which are necessary for the development of compulsory actions. In preschool age, children develop cognitive interests. This creates a reason to turn to a peer, in which the child finds a listener, expert and source of information.

Personal motives that persist throughout preschool childhood are divided into comparison with a peer, with their ownability and desire to be assessed by a peer. The child demonstrates his skills, knowledge and personality and encourages other children to reaffirm their worth. The motive for communication is his own qualities in accordance with the characteristics of a peer - to be appreciated by him. It is interesting to note the influence of self-esteem of each participant in communication on the development of interpersonal relations. Adequate self-esteem allows a person to objectively assess their own characteristics and correlate them with the individual psychological characteristics of the partner and the situation, choose the appropriate level of interpersonal relations and correct it if necessary.

Excessive self-esteem introduces elements of arrogance and condescension into interpersonal relationships. If a communication partner fits this style of interpersonal relationships, then they will be quite stable, otherwise the relationship will become tense.

A person's low self-esteem forces him to adapt to the style of interpersonal relationships offered by the communication partner. Hearing plays an important role in the interpersonal relationships of children. A child with normal hearing hears adult speech, imitates it, and learns to speak independently. Listening to the explanations of an adult, the kid learns about the world around him, masters the complex concept of reality and learns the meanings of

## **European Journal of Humanities and Educational Advancements (EJHEA)**

many words. Through listening, he / she can control his / her own speech and compare it with the speech of others. The way of communication is an important aspect in the study of interpersonal relationships of people with hearing impairments. The exchange of meanings, values, feelings, which is the essence of interpersonal relations, is actually carried out between hearing and deaf people on the basis of sign language; between hearing and deaf people - on the basis of oral speech in oral and written form.

Hearing plays an important role in a child's intellectual and linguistic development. A child with normal hearing hears adult speech, imitates it, and learns to speak independently. Listening to when an adult explains something, the baby learns about the world around him, deeper understands reality and learns the meaning of many words. Through listening, he can observe his own speech and compare it with the speech of others, mastering not only the correct pronunciation of sounds, but also the lexical and grammatical means of speech. In the future, preserved physical hearing becomes a prerequisite for mastering reading and writing. The theoretical basis of psychological and pedagogical classification is the provisions that determine the specifics of the development of a child with impaired auditory analyzer. Violation of the auditory analyzer in a child must be considered in its fundamental difference from a similar defect in adults. In adults, at the time of the onset of hearing loss, the tongue is already developed, and the defect of the auditory analyzer is assessed from the point and vision ability to communicate based on hearing. Hearing loss in childhood affects the mental development of the child and leads to various consequences.

The child has impaired speech development. If deafness occurs early, it leads to a complete lack of speech. Absent-mindedness interferes with the normal formation of verbal thought, which leads to cognitive impairment. In order to properly understand the development of a child with hearing impairment, it is important to consider the ability to independently acquire a language. On the one hand, hearing impairment interferes with the normal development of the language, on the other hand, the normal functioning of the auditory analyzer depends on the level of language development. The higher the level of language development in a child, the more opportunities to use residual hearing.

A person who speaks the language and has a sufficient vocabulary can better comprehend spoken language, because he perceives familiar words and phrases in accordance with their meaning in the context of the sentence. Children with better language development give the impression of hearing. The better a child's hearing, the more opportunities for independent language development based on imitating the speech of other people. R.M. Boskis examines a child's hearing impairment from the point of view of language development in a given hearing impairment. The better a child can speak, the more opportunities he has to use his hearing. In the case of deafness, a hearing loss of more than 80 dB is determined. If the audiometry reveals a hearing loss of less than 80 dB, the child is said to have a hearing loss. R.M. Boskis identified two main groups of children with hearing impairment - deaf and hard of hearing. The deaf group includes children who cannot independently master the spoken language due to congenital or early acquired deafness. To category and the hard of hearing are those who have limited hearing, but can independently develop language (at least minimally). Depending on the development of the language, there are 2 groups of children with hearing impairment:

• Hard of hearing, having a relatively developed speech with minor defects (violations of phonetic pronunciation, deviations in the grammatical structure of speech); Hearing impairment with profound underdevelopment of speech function (sentences are short, incorrectly constructed, individual words are severely distortedness.). Among deaf children, 2 groups are also distinguished, depending on the time of the onset of the defect:

• Early deaf children who lost their hearing in the 1st or 2nd year of life or were born deaf; Late deaf children, that is, those who lost their hearing at the age of 3-4 years, as well as those who retained speech due to the later onset of deafness.

The term "late deaf children" is arbitrary, since this group of children is characterized not by the time of onset of deafness, but by the fact that they can speak while deaf.

Hearing impairment primarily affects the formation of speech, that is, the mental function, which primarily depends on the state of hearing. Thus, based on the assessment of the state of hearing, the level of speech development, taking into account the time of the onset of hearing impairment, 4 groups of children with hearing and speech impairments are distinguished.

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## **European Journal of Humanities and Educational Advancements (EJHEA)**

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