



STUTTERING-RELATED SPEECH IMPAIRMENT IN CHILDREN: THE CONTENT OF WORK AIMED AT DEVELOPING COMMUNICATIVE SKILLS

O‘rinboyeva Muxlisa Abdurahim qizi

Tashkent International Chemical University, Speech Therapy Program

Master Degree MSPD 1U Group Tashkent, Uzbekistan

Abidova Nilufar Zakirovna

Scientific Supervisor,

Tashkent Institute of Chemical Technology

Abstract

This article examines the content, structure, and pedagogical logic of work aimed at developing communicative skills in children with stuttering-related speech impairment within inclusive educational settings. The study is grounded in the understanding that stuttering is not only a disruption of speech fluency, but also a factor that may affect social participation, emotional regulation, classroom interaction, and the child’s confidence in verbal communication. In this context, communicative development is treated as a multidimensional process that includes speech initiation, dialogic participation, turn-taking, expressive clarity, listening behavior, situational language use, and interactional resilience. The article systematizes the main directions of intervention work, including diagnostic assessment of communicative difficulties, creation of psychologically safe speech environments, gradual expansion of verbal activity, integration of play-based and collaborative tasks, and coordination between speech therapist, teacher, and family. Particular attention is given to the pedagogical conditions that support communicative growth in children who experience speech tension, avoidance behaviors, or fear of speaking. The article also outlines principles for selecting educational content and communicative exercises according to age, individual speech profile, and classroom context. The proposed approach is oriented toward inclusive education practice and teacher preparation, emphasizing functional communication, emotional support, and sustainable participation in learning interactions rather than fluency-focused correction alone.

Keywords: Stuttering, speech impairment, communicative skills, children, inclusive education, speech therapy, communication development, fluency disorders, pedagogical support, classroom interaction, language anxiety, social participation, dialogic speech, play-based intervention, family involvement.

Introduction

DUDUQLANISH NUTQ KAMCHILIGI BO‘LGAN BOLALARNING KOMMUNIKATIV KO‘NIKMALARINI RIVOJLANTIRISH ISHLARINING MAZMUNI

O‘rinboyeva Muxlisa Abdurahim qizi

Toshkent Kimyo Xalqaro universiteti

Logopediya yonalishi MSPD 1U guruh magistri.

Toshkent, O‘zbekiston

Abidova Nilufar Zakirovna

Ilmiy rahbar, Toshkent kimyo-texnologiya instituti

Annotatsiya:

Ushbu maqolada inklyuziv ta’lim sharoitida duduqlanish bilan bog‘liq nutq nuqsoni bo‘lgan bolalarda kommunikativ ko‘nikmalarni rivojlantirishga qaratilgan ishlarning mazmuni, tuzilishi va pedagogik mantiqi tahlil qilinadi. Tadqiqot duduqlanish faqat nutq ravonligining buzilishi emas, balki ijtimoiy ishtirok, emotsional o‘zini boshqarish, sinfdagi o‘zaro ta’sir hamda bolaning og‘zaki muloqotga bo‘lgan ishonchiga ta’sir qiluvchi omil ekanligi haqidagi qarashga asoslanadi. Mazkur kontekstda kommunikativ rivojlanish nutqni boshlash, dialogik ishtirok, navbat almashish, ifodaning aniqligi, tinglash xulqi, vaziyatga mos til qo‘llash va muloqotdagi barqarorlikni qamrab oluvchi ko‘p o‘lchovli jarayon sifatida talqin etiladi. Maqolada aralashuv ishlarining asosiy yo‘nalishlari tizimlashtiriladi, jumladan kommunikativ qiyinchiliklarni diagnostik baholash, psixologik jihatdan xavfsiz nutq muhitini yaratish, og‘zaki faollikni bosqichma-bosqich kengaytirish, o‘yin asosidagi va hamkorlikdagi topshiriqlarni integratsiya qilish, shuningdek logoped, o‘qituvchi va oila o‘rtasidagi hamkorlikni yo‘lga qo‘yish masalalari yoritiladi. Nutq tarangligi, chetlab o‘tish xulqlari yoki gapirishdan qo‘rqish holatlari kuzatiladigan bolalarda



kommunikativ o‘shni qo‘llab-quvvatlovchi pedagogik shart-sharoitlarga alohida e‘tibor qaratiladi. Shuningdek, maqolada ta‘lim mazmuni va kommunikativ mashqlarni tanlashning yosh xususiyatlari, individual nutq profili hamda sinf kontekstiga mos tamoyillari bayon etiladi. Taklif etilgan yondashuv inklyuziv ta‘lim amaliyoti va pedagog kadrlar tayyorlashga yo‘naltirilgan bo‘lib, faqat ravonlikka qaratilgan korreksiyadan ko‘ra funksional muloqot, emotsional qo‘llab-quvvatlash va ta‘limiy o‘zaro ta‘sirlarda barqaror ishtirokni ustuvor deb biladi.

Kalit so‘zlar: duduqlanish, nutq nuqsoni, kommunikativ ko‘nikmalar, bolalar, inklyuziv ta‘lim, logopediya, kommunikativ rivojlanish, nutq ravonligi buzilishlari, pedagogik qo‘llab-quvvatlash, sinfdagi o‘zaro ta‘sir, nutqiy xavotir, ijtimoiy ishtirok, dialogik nutq, o‘yin asosidagi aralashuv, oilaviy ishtirok.

Introduction

Stuttering-related speech impairment in children should be understood as a complex developmental condition that affects not only speech fluency, but also the broader system of communication through which the child enters social, educational, and emotional life. In pedagogical and speech-therapy practice, fluency disruption is often the most visible symptom, yet the educational consequences of stuttering are much wider. Children who experience repetitions, prolongations, blocks, and speech tension may gradually develop avoidance of verbal participation, fear of speaking in front of peers, reduced initiative in dialogue, and dependence on limited communicative situations that feel predictable and safe. For this reason, work with such children cannot be restricted to mechanical correction of speech output. It must include purposeful development of communicative skills as a core educational objective.

In inclusive education, this issue becomes especially important because the classroom is a communicative environment by nature. Learning occurs through listening, answering, asking questions, negotiating meaning, participating in pair and group activities, retelling, discussing, and expressing personal opinions. A child with stuttering-related speech impairment may possess adequate intellectual potential and age-appropriate understanding of content, but still encounter barriers in demonstrating knowledge because oral participation is emotionally and physically difficult. This creates a risk of underestimation of the child’s



abilities, social withdrawal, and secondary emotional difficulties. Therefore, communicative development should be considered a condition for academic inclusion, not an additional or optional direction of support.

The concept of communicative skills in relation to children with stuttering includes several interrelated components. It involves the ability to initiate contact, maintain dialogue, use speech according to context, regulate speech pace and breathing with support, listen to interlocutors, observe turn-taking norms, respond appropriately to questions, express needs and feelings, and continue interaction despite speech difficulty. In other words, communicative competence is both linguistic and social. It is formed in real interaction and supported by psychological safety, predictable routines, positive adult mediation, and gradual expansion of speaking roles. This view shifts the focus from “error elimination” to “functional participation,” which is particularly relevant in inclusive pedagogical settings.

Another important consideration is the child’s emotional experience of communication. Many children with stuttering develop anticipation of failure in speech situations, especially when interrupted, corrected harshly, rushed, or compared to peers. Such experiences may intensify muscular tension and further disrupt fluency, creating a self-reinforcing cycle. Consequently, the content of developmental work should include not only speech exercises, but also supportive communicative conditions that reduce pressure and normalize participation. Teachers, speech therapists, and parents must act in coordination so that the child receives consistent communicative expectations across school and home contexts.

This article examines the content of work aimed at developing communicative skills in children with stuttering-related speech impairment from a pedagogical and inclusive education perspective. It systematizes the main directions of support, including assessment of communicative needs, planning of age-appropriate interaction tasks, organization of a psychologically safe classroom speech environment, and collaboration among educational participants. The article also emphasizes that sustainable progress is achieved when communicative development is embedded in everyday learning activities and social interaction, rather than isolated from the child’s real educational experience.



Methods

This study uses a qualitative, practice-oriented methodological design aimed at conceptualizing and systematizing the content of work used to develop communicative skills in children with stuttering-related speech impairment in inclusive educational settings. The methodological basis combines theoretical analysis, comparative review of pedagogical and speech-therapy approaches, and model-based synthesis of intervention content. The purpose of the method is not to test a single therapeutic protocol, but to construct an educationally relevant framework that can guide teachers, speech therapists, and inclusive education specialists in planning communicative support for children in real classroom and school contexts.

The first methodological component is analytical review. Sources from speech therapy, developmental psychology, inclusive pedagogy, and child communication research are examined to identify stable principles that are applicable to communicative development in children with fluency disorders. Particular attention is given to concepts related to communicative competence, social participation, emotional safety in speech interaction, dialogic learning, and family-school collaboration. During the review process, the study distinguishes between fluency-centered correction tasks and communication-centered developmental tasks. This distinction is essential because the article focuses specifically on the content of communicative work, while recognizing that fluency support remains clinically important.

The second methodological component is functional decomposition of communicative skills. For the purposes of pedagogical planning, communicative development is broken into interrelated domains that can be observed and supported in educational practice. These domains include initiation of communication, maintenance of dialogue, response adequacy, turn-taking behavior, verbal expression of needs and opinions, listening participation, emotional regulation during speaking, and communicative persistence in situations of speech difficulty. Each domain is treated as a developmental target that may manifest differently depending on the child's age, severity and variability of stuttering, prior communicative experiences, and level of support in the environment. This decomposition allows the intervention content to be structured not around abstract goals, but around observable communicative behaviors.



The third component is pedagogical modeling of intervention content. A practice-oriented model is constructed through synthesis of reviewed approaches and educational requirements of inclusive classrooms. The model is organized around sequential and parallel directions of work: diagnostic assessment, environmental adaptation, guided communicative practice, collaborative classroom inclusion, and family-mediated reinforcement. Within this model, communicative tasks are selected according to three criteria: functional relevance to the child's daily communication, psychological safety, and developmental accessibility. The methodology assumes gradual increase of communicative complexity, beginning with low-pressure interaction formats and progressing toward broader participation in group and academic discourse.

The fourth component is contextual adaptation to inclusive education. Because the target audience includes pedagogical university students and practitioners in inclusive education, the method intentionally integrates the roles of multiple participants rather than isolating speech therapy as a separate process. The framework identifies the speech therapist as a specialist in assessment and individualized support, the classroom teacher as an organizer of communication-rich learning situations, and the family as a continuity agent for supportive communication routines. This multi-subject perspective reflects the practical reality of inclusive schooling, where communicative development occurs across settings and depends on consistency of interactional norms.

To strengthen applicability, the study also uses scenario-based method design. Typical school communication situations are treated as units of analysis: answering in class, asking for help, participating in pair work, retelling a short text, joining play, and responding to peer questions. For each situation, the methodological approach considers possible barriers for children with stuttering and selects support strategies such as speech pacing, visual prompts, turn preparation time, cooperative roles, and non-punitive response formats. In this way, the method links theoretical principles to concrete educational situations and provides a structured basis for interpreting communicative progress beyond speech fluency alone.

Results

The analysis and pedagogical modeling carried out in this study resulted in a structured framework describing the core content of work aimed at developing



communicative skills in children with stuttering-related speech impairment in inclusive educational settings. The results show that effective communicative development is best organized not as a narrow set of fluency drills, but as a coordinated system of pedagogical, speech-therapeutic, and social-interactive tasks embedded in the child's everyday learning environment. The proposed content framework integrates diagnostic, preventive, developmental, and participatory dimensions and emphasizes stable communicative functioning in real interactions.

The first result is the identification of a multidimensional target structure for communicative development. The study demonstrates that communicative progress in children with stuttering should be assessed and supported across several domains simultaneously: readiness to initiate interaction, ability to maintain dialogue, clarity of communicative intention, responsiveness to interlocutors, turn-taking regulation, emotional stability during speaking, and persistence in communication after a speech disruption. This expanded target structure helps avoid a common pedagogical error in which the child's communicative competence is judged only by fluency smoothness. In practice, some children may continue to experience stuttering moments while showing meaningful growth in interactional confidence, participation frequency, and communicative flexibility. These changes should be recognized as valid developmental outcomes.

The second result is the systematization of intervention content into interconnected directions of work. The framework includes diagnostic-analytical work, speech-environment organization, guided communicative training, educational integration of communicative tasks, and family-based communicative support. Diagnostic-analytical work includes observation of communicative behavior in different contexts, identification of avoidance triggers, and description of the child's preferred interaction formats. Speech-environment organization includes reduction of time pressure, respectful turn allocation, non-interruptive listening norms, and emotionally safe feedback practices. Guided communicative training includes structured dialogue exercises, role-play, situational speech tasks, and graduated participation routines. Educational integration involves adapting classroom tasks so the child can participate meaningfully in discussion, pair work, and oral responses. Family-



based support extends these principles into home communication and reduces contradictory adult demands.

The third result is the clarification of pedagogical conditions that significantly support communicative growth. The analysis indicates that children with stuttering-related speech impairment demonstrate more stable engagement when adults shift from performance pressure to communicative support. The most productive conditions include predictable speaking routines, advance preparation opportunities, acceptance of variable speech tempo, reinforcement of message content rather than form alone, and collaboration between teacher and speech therapist in selecting communication tasks. The result is particularly important for inclusive classrooms, where unadapted oral participation demands may unintentionally intensify speech anxiety and reduce educational involvement. The study shows that communicative inclusion improves when task design allows alternative entry points into participation, such as pair rehearsal before whole-class speaking or guided response formats.

The fourth result is the development of a progression logic for communicative work. The framework proposes movement from low-risk to higher-demand communication situations. Initial stages prioritize emotionally safe interaction, short responses, familiar partners, and supported dialogue in structured routines. Intermediate stages introduce wider communicative roles, including asking questions, clarifying ideas, and participating in collaborative problem solving. More advanced stages emphasize flexible communication in less predictable academic and social contexts, including spontaneous comments, group discussion, and narrative expression. This progression supports gradual expansion of communicative agency while minimizing overload and repeated experiences of failure.

The fifth result is the recognition of communicative outcomes that are educationally meaningful and observable for teachers. These outcomes include increased frequency of voluntary participation, reduced avoidance of speaking situations, improved turn-taking behavior, more sustained dialogue, better use of context-appropriate phrases, and greater emotional tolerance when speech disfluency occurs. The study also highlights a change in peer interaction quality when classroom norms are intentionally structured around respectful listening and inclusive communication. Thus, the results indicate that communicative development work in children with stuttering should be designed as an ecosystem



of support, where fluency is addressed within a broader objective of social participation, educational engagement, and communicative competence.

Discussion

The results of this study support a central pedagogical argument: communicative development in children with stuttering-related speech impairment should be treated as a functional and socially embedded process rather than a narrowly clinical correction task. This position is especially important in inclusive education, where participation in learning is mediated through communication. When the educational system evaluates the child mainly through fluent oral performance, it risks confusing speech difficulty with low competence. The proposed framework responds to this problem by shifting attention toward communicative participation, interactional confidence, and the child's ability to remain engaged in dialogue despite episodes of disfluency. Such a shift does not diminish the importance of fluency-oriented support; rather, it places fluency within a broader developmental and educational logic.

A key implication of the findings is that the communicative environment itself functions as an intervention factor. In many school settings, speech pressure is unintentionally produced by rapid questioning, public correction, competition for speaking turns, and time-limited responses. For children with stuttering, these conditions may intensify anticipatory anxiety and increase avoidance behavior. The present framework shows that relatively simple pedagogical modifications such as slower turn pacing, predictable participation formats, supportive listening rules, and advance preparation time can significantly improve communicative engagement. This suggests that inclusive practice should not rely only on individual remediation, but also on environmental design that reduces communicative barriers.

The study also highlights the importance of recognizing progress indicators beyond speech smoothness. In practice, teachers and even families may underestimate development if stuttering moments remain visible. However, the results indicate that meaningful gains often appear first in participation behaviors: the child begins to answer more often, initiates contact more willingly, maintains dialogue longer, and tolerates communication breakdown with less emotional withdrawal. These changes are educationally significant because they directly affect classroom learning, peer interaction, and self-efficacy. Therefore,



assessment systems in inclusive settings should include communicative-behavioral indicators alongside speech characteristics to provide a more accurate picture of growth.

Another important discussion point concerns interdisciplinary collaboration. The framework confirms that communicative development is most sustainable when speech therapist, classroom teacher, and family work from shared principles. Inconsistent adult responses can weaken progress. For example, if the therapist promotes calm pacing and acceptance of communicative effort, but the classroom rewards only fast and fluent answers, the child receives conflicting expectations. Similarly, if parents overprotect the child by speaking on their behalf in all situations, opportunities for guided communicative practice are reduced. The study therefore supports a coordinated model in which adults align their interaction strategies, reinforce message content, and gradually expand the child's communicative roles across contexts.

At the same time, the proposed framework has practical limitations. Because it is a conceptual and model-based study, its effectiveness requires empirical testing in different age groups, school types, and levels of stuttering severity. Classroom realities also vary: large class sizes, limited specialist support, and insufficient teacher preparation in inclusive communication may affect implementation quality. Nevertheless, the framework provides a pedagogically grounded basis for designing support that is realistic, flexible, and compatible with inclusive education goals. Its main contribution lies in reframing communicative work with children who stutter as a shared educational responsibility aimed at participation, dignity, and long-term communicative competence.

Conclusion

This article has examined the content of work aimed at developing communicative skills in children with stuttering-related speech impairment from the perspective of inclusive education and pedagogical support. The main conclusion is that effective assistance in this area cannot be reduced to fluency correction alone. Although speech fluency remains an important therapeutic concern, the educationally significant objective is broader: helping the child participate in communication with confidence, continuity, and functional adequacy in classroom, peer, and family interactions. In inclusive settings, communicative competence is a prerequisite for learning participation, social



belonging, and self-expression; therefore, communicative development should be treated as a central component of support rather than a secondary outcome.

The study has shown that the most productive content of work includes several interconnected directions: careful assessment of communicative behavior across situations, creation of a psychologically safe speech environment, guided practice in dialogue and situational communication, adaptation of classroom speaking demands, and consistent support from family members. Such a system allows adults to address not only visible disfluency, but also avoidance, speech anxiety, reduced initiative, and fragile communicative self-confidence. A child may continue to experience moments of stuttering and still demonstrate substantial progress through increased participation, stronger turn-taking, more stable dialogic engagement, and greater tolerance of communicative difficulty. These indicators must be recognized as meaningful results in pedagogical and inclusive practice.

An important conclusion of the article is that the communication environment itself can either intensify or reduce speech-related barriers. When adults rush the child, interrupt frequently, evaluate only speed and smoothness, or create competitive speaking situations without preparation, communication becomes a source of stress and withdrawal. By contrast, when teachers and specialists provide predictable speaking routines, respectful listening norms, preparation time, and supportive response formats, the child receives conditions for gradual communicative expansion. This confirms that inclusive education requires not only individual intervention, but also intentional organization of interactional culture in the classroom.

The proposed framework also emphasizes the necessity of interdisciplinary cooperation. Sustainable communicative development is most likely when the speech therapist, classroom teacher, and family share common principles: reducing pressure, supporting message content, encouraging participation, and extending communicative roles step by step. In this coordinated model, each participant contributes to the same developmental trajectory in different contexts. The speech therapist provides specialized assessment and targeted exercises, the teacher ensures communicative inclusion in daily learning activities, and the family reinforces supportive communication habits at home. Such continuity increases the likelihood that the child's progress will generalize beyond isolated sessions.

At the same time, the article acknowledges that implementation depends on teacher preparedness, school resources, and the availability of specialist collaboration. Future empirical studies are needed to test and refine the proposed content across age groups, levels of stuttering severity, and different inclusive classroom conditions. Nevertheless, the conceptual conclusions remain pedagogically relevant: children with stuttering-related speech impairment need support that protects dignity, strengthens communicative agency, and enables meaningful participation in education. The long-term goal is not simply smoother speech in controlled tasks, but the formation of resilient, functional, and socially supported communication that allows the child to learn, interact, and develop as an active participant in inclusive educational life.

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