

# **DEVELOPING THE SPEECH OF PRESCHOOL CHILDREN WITH MILD DYSARTHRIA BASED ON ACTIVE GAMES**

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## **Abstract:**

This article provides necessary information about the specific features of the speech of children with dysarthria and their development based on movement games.

**Keywords:** Speech disorder, dysarthria, verbal praxis, synkenesis, hyperto-nicity, hypotonicity, expressive speech, expressive speech, dyspraxia, motor coordination, fine motor skills, gross motor skills.

## **Introduction**

Nowadays, mild dysarthria is frequently observed as a speech disorder among preschool children. Dysarthria is a speech impairment caused by a disruption in the innervation of the articulatory apparatus, leading to sound production difficulties. The speech development of children with mild dysarthria lags slightly behind the norm, ranging from minor delays in the formation of morphological and syntactic structures to clear expressive speech disorders. Dysarthria is considered a speech disorder of central origin. It results from an organic impairment in the innervation of the speech apparatus, affecting pronunciation. The term “dysarthria” comes from the Greek words dis (disorder) and arthon (articulation). The following researchers have studied vocabulary development in children with mild dysarthria: E. F. Arkhipova, R. I. Lalaeva, L. V. Lopatina, and N. V. Serebryakova. According to these scholars, in cases of mild dysarthria, children's vocabulary development lags behind age norms. Children with mild dysarthria experience certain vocabulary limitations, difficulties in updating their lexicon, and uncertainties in understanding and using words correctly.

Mild dysarthria is usually diagnosed after the age of five. In its manifestation, it resembles complex dyslalia, but the key difference is that children with dysarthria exhibit neurological symptoms. Therefore, correcting dysarthria requires the involvement of specialists from multiple disciplines. The speech development of children with mild dysarthria lags slightly behind the norm, manifesting in delays in the formation of morphological and syntactic structures, as well as clear expressive speech disorders. Existing minimal brain dysfunctions intensify the speech development process in children with mild forms of dysarthria. Based on the analysis of oral speech in preschool children aged 5-7, N. V. Serebryakova identified the stages of semantic field formation.

1. Lack of semantic field formation. The child perceives the surrounding environment emotionally but cannot verbally express it. Syntagmatic associations play a leading role. (For example, the child recognizes that a cat meows but cannot describe it in words).

2. Structurally unformed semantic field. Although not yet fully developed, children begin to understand semantic relationships between words that are different in meaning but connected metaphorically or situationally (e.g., "house - roof").

3. Formation of concepts, processes, and classifications. Children identify various connections between semantically related words but differentiate them based on only one distinguishing semantic feature.

The first group of children includes those with mild dysarthria (phonemic impairment). L. V. Lopatina describes them as follows:

### **First Group:**

The size and quality of the active vocabulary correspond to the age norm. Children correctly generalize and categorize images and do not make mistakes in tasks related to learning inflections. However, when performing tasks on word formation, many struggle to form the names of animals and their offspring (e.g., for "rabbit" – "rabbits," "little rabbits").

Preschool children with mild dysarthria experience delays in developing the semantic structure of words. They show deviations in the correlation between the denotative and lexical-semantic components of word meanings.

## **Second Group:**

This group consists of children with mild dysarthria (phonetic-phonemic underdevelopment). Their active vocabulary is weaker than that of the first group. They struggle with generalizing concepts such as wild and domestic animals, birds, furniture, footwear, and transport.

More than half of the children in this group face difficulties in selecting antonyms and epithets for objects. They also struggle with:

- Associating a noun with a number (e.g., matching the word “horse” with the number “five” as in “five pencils”).
- Using auxiliary words correctly (e.g., “The dog crawls out from under the porch”).
- Forming diminutive and augmentative noun forms (e.g., “window – small window”).

The author classified the third group as children with severe forms of dysarthria (general speech underdevelopment). The quality and size of their active vocabulary do not correspond to the age norm.

Children in this category are rarely encountered in speech therapy practice. They tend to substitute words with associative neighbors and are unable to use generalizing concepts. Like the second group, children in this category struggle with selecting antonyms and suffixes for objects. They make numerous errors in tasks related to learning grammatical structures, and even with adult assistance, they still encounter significant difficulties. The underdevelopment of word formation processes leads to impaired speech communication and limits children’s cognitive abilities. Children with mild dysarthria tend to replace words with the most familiar ones in their speech. The primary mechanism behind their lexical disturbances is a deficit in phoneme discrimination, which, in turn, causes difficulties in distinguishing lexemes due to deficiencies in auditory and kinesthetic perception of words.

As a result, the morphological system of language is initially affected, as its formation is closely linked to the opposition of word endings based on their phonetic structure. In terms of the maturity of lexical and grammatical structures, children with mild dysarthria exhibit variability in symptoms—ranging from slight delays in morphological and syntactic development to pronunciation disorders in expressive speech and issues affecting the overall linguistic system. In the process of mastering word meanings, preschool children first acquire the

denotative features of a word's semantic structure. As classification processes develop and the lexical system becomes more structured, they begin to recognize conceptual and lexical-semantic characteristics within word meanings.

Speech is one of the key aspects of a child's overall development and is closely linked to intellectual growth. The richer and more accurate a child's speech is, the easier it becomes to express thoughts, comprehend the surrounding reality, and engage in meaningful interactions with peers and adults. Consequently, the child's cognitive development becomes more active.

Speech is highly complex and diverse, requiring development from the early years of life. Communication serves as the primary tool for speech development and is carried out through various activities, including education, daily life, work, and play.

As noted in the works of N.V. Serebryakova, differentiation within the semantic field has not yet fully formed. Children with normal speech development demonstrate the potential for such differentiation, whereas children with speech impairments lack distinguishing features between elements of the semantic field. Research has identified a lower performance level in various tasks compared to typically developing preschool children, including renaming objects (L.S. Vygotsky), explaining the meanings of words—especially general meaning words—understanding the grammatical meaning of words, and distinguishing semantically similar words [5].

E.F. Arkhipova, in her research, highlights that children use words in a scattered and extended sense. Children with mild dysarthria tend to replace words with the most familiar ones in their speech practice. The primary mechanism for lexical structure disruption in their speech is phoneme discrimination impairment, which, in turn, causes difficulties in distinguishing lexemes due to deficits in auditory and kinesthetic word representation. As a result, the morphological system of language is initially affected, as its formation is closely linked to the opposition of word endings based on their phonetic structure. Various studies confirm the presence of secondary impairments in the lexical component of the speech functional system. The above facts indicate that children with mild forms of dysarthria are insufficiently prepared for learning and communication, which require knowledge of language, speech, and, primarily, lexical elements. Therefore, targeted speech therapy intervention is necessary to shape the lexical structure of speech. This involves understanding the lexical and grammatical



meaning of words, their semantic structure, and recognizing words as elements of language and speech within a specific system, ensuring clear lexical and grammatical meanings [1].

### **“Colored Cars” Game Technology**

Game Objective:

To teach children to differentiate colors, develop agility, and integrate speech with movement.

Children stand along the room’s wall, representing cars in a garage. Each child holds a flag (or a cap, or a circular piece of cardboard) in one of three colors: blue, yellow, or green. The teacher stands in the center of the room, facing the players, holding three flags of corresponding colors. The teacher raises one flag (sometimes two or all three). Children with the matching color run across the playground, imitating a moving car by making “di-dit” sounds. When the teacher lowers the flag, the cars stop, turn around, and head back to their garages. The game is repeated 4-6 times.

#### **Instructions:**

The teacher may also hold a red flag. When the red flag is unexpectedly raised, all cars must stop immediately

### **“Rabbits and the Wolf” Game Technology**

Game Objective:

To expand children’s vocabulary, improve cognitive processes, and integrate speech with movement.

The players act as rabbits, with one player representing the wolf. On one side of the playground, the rabbits mark their burrows, while on the opposite side, the wolf hides in a ravine. The teacher recites the following rhyme:

“Little rabbits on the meadow,

Hop around, play and prance.

Glancing left and glancing right,

Is the wolf perhaps in sight?”

Following the text, the rabbits hop out of their burrows, run around the playground, sometimes jumping on both feet, sometimes crouching and nibbling grass. When the teacher says “wolf,” the wolf leaps out of the ravine and chases the rabbits, trying to catch them (by tagging them). The rabbits rush back to their

burrows, where they are safe. Any captured rabbit is taken to the wolf's den in the ravine. The game restarts, and after the wolf catches 2-3 rabbits, another player takes on the role of the wolf. The game is repeated 3-4 times.

### **Instructions:**

Each rabbit must return to its own burrow, although a shared burrow is also an option. Initially, the teacher may take on the role of the wolf

### **Plural Formation Game**

#### **Objective:**

To teach children how to form plural nouns independently.

#### **Game Process:**

The speech therapist shows a picture of a single object and asks the child to find and point out the corresponding plural version among other images.

#### **Example Pictures:**

Ball – Balls, House – Houses, Bucket – Buckets, etc.

The speech therapist shows a picture and names it: "Ball."

- "What about your picture? What is depicted?"

#### **Child's response:**

- "My picture shows balls."

This process continues until all 5-6 images are named and matched correctly.

### **"One-Many" Game**

The speech therapist throws a ball to the child and says a singular noun, such as "apple." The child then throws the ball back while saying the plural form, "apples." This game helps children coordinate movement with speech. The speech therapist names 5-8 different words during the game.

According to N.V. Serebryakova's research, differentiation within the semantic field is not yet fully developed in young children. Children with normal speech development demonstrate the potential for such differentiation, while those with speech impairments struggle to distinguish elements within a semantic field. Studies have shown that children with speech delays perform at a lower level in tasks related to:

- Changing the names of objects (L.S. Vygotsky's concept)
- Explaining the meanings of words, especially general terms
- Understanding the grammatical meanings of words

- Differentiating semantically similar words

E.F. Arkhipova's research highlights that children tend to use words in a scattered and expanded manner. Those with mild forms of dysarthria often replace words with the most familiar ones in their vocabulary. The primary mechanism behind their lexical difficulties is phoneme discrimination impairment, which leads to problems in distinguishing words based on auditory and kinesthetic perception. As a result, the morphological system of language is initially affected, as its development relies heavily on phonological distinctions in word endings.

Various studies confirm the presence of secondary impairments in the lexical component of speech function. These findings indicate that children with mild dysarthria are not sufficiently prepared for learning and communication due to gaps in their knowledge of language, speech, and, most importantly, word elements. Therefore, targeted speech therapy interventions are necessary to develop a child's lexical system through structured activities. This approach helps children understand both the lexical and grammatical meanings of words, their semantic structure, and their role as fundamental components of language and speech.

## Conclusion

One of the most evident characteristics of children with mild dysarthria is a limited vocabulary. Active vocabulary refers to the set of words a child freely uses in everyday life. Mastering vocabulary is a crucial aspect of cognitive development, as it reflects the child's historical experience and knowledge in the form of speech, particularly through word meanings.

The primary impairment in mild dysarthria is a disruption in pronunciation. As a result of these pronunciation difficulties, children struggle to acquire new vocabulary. Additionally, many children with mild dysarthria exhibit underdeveloped lexical-grammatical structures and phonemic processing difficulties, which are secondary impairments caused by disruptions in speech sounds.

An individualized approach is the most effective method for working with children who have speech impairments. The data above demonstrate that dysarthria is a complex speech disorder that differs from other speech impairments. If not corrected in time, dysarthria can lead to reading and writing difficulties, ultimately resulting in dysgraphia and dyslexia. Therefore, a



comprehensive approach involving in-depth study, appropriate treatment, and targeted exercises is essential for effective speech therapy intervention.

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