



Organization of Correction Work with The Help of Sensormotor Correction Method

Nazokat Abidova

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Abstract: This article provides recommendations on the organization of correction work with children with autism spectrum disorders using the sensor correction method. Information is provided about the standards established in this correction work, the child's age, practice regimen, training duration, form, level of effectiveness, and work with the child's parents.

Keywords: Autism, child, correction work, method, help, practice regimen, training duration, form, level of effectiveness.

Introduction: Classes are held in a specially equipped room. Performing dynamic exercises of the complex requires a lot of space, so classes should be held in a large area (at least 25 sq. M). Well ventilated, because during the exercises oxygen gas exchange increases sharply. A moderately hard carpet should lie on the floor so that during the exercises the child, on the one hand, does not slip on it, and on the other hand, his body is in strong motion. This will provide additional massage of the spine, biologically active points and the whole body. Perhaps for some exercises you will need large inflatable balls (it is recommended not to completely pump air into the ball so that the ball is a little softer). Also, centrifuges, various mats, tunnels, blankets, ottomans, balls of different weights and sizes, massagers, hard brushes and other equipment are used, as well as to provide a wide range of tactile sensations for the child.

Recommended standards

Child's age. Classes can be started from 2 years old, but as a rule, at this age autism spectrum disorders are not clearly diagnosed, and such children rarely see a specialist. The optimal (when the greatest effect from

the lessons is achieved) is the preschool age from 4 to 6 years. The proposed classes are effective in the complex of general remedial classes and for primary school age. They are also useful for adolescents with RAS, but only due to hormonal changes in the body during puberty.

Practice mode. Depending on age and level of development, the session lasts from 20 to 60 minutes. The frequency of sessions is 2 times a week. At the same time, parents are given separate brain exercises that ensure the systematic and regularity of correctional work.

Duration and form of the session. The sessions are conducted by a specialist for a year. They can be individual and group, depending on the age and level of development of children. The set of exercises is selected individually for the child, and even in group work, the approximate level of development of the entire group is taken into account. The speed of assimilation of the program is individual for each child. When setting new goals and objectives or to consolidate the achieved dynamics, the specialist and the parents decide individually in each case whether it is necessary to continue or repeat the correction course.

Indicator of effectiveness. To take into account the effectiveness, it is recommended to conduct diagnostics using the same methodological methods that were used before the start of correction. In this regard, it is recommended to use standard methods of neuropsychological diagnostics for primary and dynamic assessment. The state of higher mental functions should be assessed individually for each child, based on the data of the neuropsychological examination, as well as the quality of the tasks performed. At the same time, the high-quality performance of the exercise by the child, although it does not have high prognostic significance, should not be the main criterion for assessment.

A comprehensive assessment of the functioning of mental functions is required, including at the behavioral level. Therefore, to assess the effectiveness, it is recommended to use data from a comprehensive examination of the child, including data from psychological and defectological examinations, a psychiatric examination, and medical diagnostics (for example, EEG). Since work is often carried out with young children and children with severe emotional disorders, a qualitative assessment of the child's development is also important, which is difficult to quantify.

Contraindications and limitations.

There are practically no age restrictions on correction,

but the effectiveness of correctional activities naturally decreases with the age of the child. Correction is recommended for almost all children diagnosed with "early childhood autism", regardless of intellectual disability and speech abilities, since it is primarily aimed at basic sensorimotor skills. This is especially useful for children with a low level of emotional regulation and limited, insufficient Directive educational resources. It is not recommended to start working independently with children with autistic disorders with a reduced threshold of convulsive readiness, epileptic seizures and forms of epilepsy, since many exercises aimed at muscles and general muscle tone can lead to muscle stiffness. If high intellectual development is accompanied by pathological activity of the first degree in the form of fears, hallucinations and other effective signs, then work with the sensorimotor correction method is also not indicated. Thus, the decision to start work on the sensorimotor correction method should be made in cooperation with a number of specialists (psychiatrist, neurologist, psychologist, defectologist, etc.). Classes can only be conducted together with a neuropsychologist who has undergone special training in this practice and can adequately assess the level of development and condition of the child.

Recommendations for parents.

Correction work requires regularity and consistency and is carried out in close cooperation with a specialist. Questions are welcome during the work, because then the parents will have to do most of the work independently. Literally, at home. At the same time, the child's behavior and emotional reactions change, and each parent faces various difficulties inherent in children with autism, which require significant energy and costs from all participants in the process. Therefore, it is important for parents to assess their resources before starting work, allocate a certain amount of time for daily activities and decide who can help them (at least in the first stages).

The mother's condition and her mood are very important for classes with the child. After all, children with autism spectrum disorders have a symbiotic relationship with her, and they completely depend on her condition and character. In the classroom, the mother looks at the child, follows her gaze, smiles at her, and sooner or later the child with autism smiles at her, at first - just with pleasure, and then in return. If the child does not feel well, is afraid or tries to avoid contact, the defectologist should not be engaged. It is necessary to listen to the child and start classes when he is ready for this. Of course, consistency is important when performing any set of exercises. Classes with the child in the first stages always require a lot of energy and require good physical fitness and emotional endurance

from the parents. Therefore, parents should not hesitate to participate in the sessions if they are not feeling well. It is important that the mother feels calm, relaxed, and comfortable during the sessions.

His movements should be confident, strong, but at the same time soft and affectionate.

You should not practice too much for the first time, let the child get used to it, enter the stereotype of the lesson. Children at levels 1 and 2 of correction should be given regular breaks from very strong body movements, in general, the duration of interaction should not exceed 30 minutes. The time of classes increases gradually: first, the basic exercises are mastered, then, when it is clear that the child does not get tired, new ones are added. They may differ depending on the characteristics of each child.

For example: The child should not be forced to do exercises against his will. Force should not be used to force the child into this or that position, the time of the lesson should be convenient for him.

It is very important for parents to make the lesson interesting: it is advisable to follow the exercises with interest, sing songs. Give the child maximum attention during the lesson.

In the final stages, children at the 4th stage of development add role-playing games to gymnastics with various characters that appear in the imagination of the child or parents. It is necessary to allow mothers to do exercises with the child at this time.

Develop a rhythm of self-confidence and mastering the complex together with the child, which is comfortable for them. Each parent-child pair has its own characteristics. Parents should try to get the most valuable thing for themselves - physical and emotional communication with their child - as much as possible.

In his famous book, what to do if your child has brain damage? After all, the disease affects not only the child, but also his entire family, in addition, the child's illness is often (directly or indirectly) a continuation of the psychological family history for many generations. In this regard, I would like to quote a paragraph from the above-mentioned book: "Once a child with a developmental disability (not autistic) asked his mother.

- Mom, why did a misfortune like mine happen in our family? The mother replied:

- My son, when a child with disabilities is born. Allah Almighty, after consulting with his assistants, says: "Is there a good family that can correct a sick child?"...

The proposed lessons help parents develop previously unclaimed responsibilities, and as a result, good results are achieved. But the main work is done by feelings:

affection and understanding of what you are doing and why. A specialist can guide in difficult times, share experiences, provide necessary information, support, but it is up to the parents to follow this path.

CONCLUSION

In conclusion, I would like to emphasize once again that sensorimotor correction is a necessary link in correctional work with children with autism spectrum disorders and significantly increases its effectiveness. The proposed exercises affect the deep parts of the brain, activating higher structures, which in turn stimulates the development of mental functions (movement, speech, spatial perception, memory, thinking). Sensorimotor correction is aimed at restoring the ontogenetically determined vector of the formation of higher mental functions

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