BG Pulse Journal USA
ISSN:1947-2536 http://www.bgpulseusa.com/index.php/bg

UDK:159.9:616.89
E99

PSYCHOLOGICAL-PHYSIOLOGICAL STATE IN CHILDREN WITH AUTISM

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ABSTRACT: Autism is a departure from real existence that creates a similar appearance, manifesting itself in various forms. Patients from the very beginning of the disease are isolated from those around them, are silent, rarely interact with people, when forced, they are formal, cold, avert their eyes, and do not extend their hand when asked. Conversation with them is limited to a narrow circle. In some cases, patients wear a mask: large dark glasses, a wide-brimmed hat, long hair, and a beard.

In more severe cases, patients for no reason quit school and work, do not leave the house and even spend a lot of time in bed. In other cases, they leave the city and hide in the forest, mountains, caves. Some patients change their place of work and profession to compensate for their autism.

The thinking of such patients is isolated, they live in their fantasies, they feel like they are at the center of what is happening around them.

Keywords: Early childhood autism, Rett syndrome, Asperger syndrome, introversion, schizophrenia, anemia, echolalia, medication.

INTRODUCTION.

Splitting of the psyche (split - in ancient Greek "schisis", from which the term schizophrenia comes) is partly due to autism. The patient lives in two worlds at the same time: the internal, which is the main one for him, and the external reality, which he perceives as an ornament. Splitting has several types. It is most often manifested in the form of symptoms of ambivalence (dualism of perception) and ambivalence (dualism of character). In such cases, the patient experiences two opposing feelings towards the same person or phenomenon at the same time. At the same time, the patient may feel that there are two opposing thoughts, in which some patients feel that their brain is divided into two hemispheres, each of which thinks independently.

In more severe cases, patients feel that they are split into two personalities, that is, they are both themselves and someone else at the same time.

Emotional numbness is noticeable from the very beginning of the disease. Patients gradually lose their sense of humanity and interest, begin to treat family members and loved ones coldly. Then the coldness increases over several years, and the patient becomes completely indifferent to the environment.

Later, interest in tempting ideas fades and they mechanically reject them. Emotional numbness is accompanied by a loss of will, that is, apathy is accompanied by abulia (apathico-abulic symptom).

Autism (from the Greek word "autos" - "myself") is a specific state of the psyche, in which the patient does not want to communicate with the outside world, with those around him. He likes solitude. He repeats the same actions and similar words. A child diagnosed with autism lives in his own world. His thinking is not like that of others. His actions are not connected with real reality. Emotional experiences play a major role in the actions of patients. This syndrome is more common in boys than in girls. The variety of symptoms and the variability of the disease indicate the complexity of this disease: from subtle autistic features to the need for constant care.

LITERATURE REVIEW.

According to scientists, one of the causes of autism is the lack of a certain type of protein during the fetal period. The second reason is the accumulation of two heavy metals, lead and mercury, in the body. The third reason is environmental pollution and severe stress during pregnancy. Anemia, high blood pressure, and increased pressure in the kidneys are all causes of autism. In addition, the spread of autism symptoms, i.e. the development of developmental delays, Rett syndrome, Asperger syndrome, and the classic symptom complexes of autism are also increasing. Information about the disease is also increasing. Previously, shy, introverted, and schizophrenic children were called "abnormal children", but today such children are called autistic children (autism).

Autism is divided into the following by age:

Early childhood autism - up to 2 years;

Childhood autism – ages 2-11;

Adolescent autism ages 11-18.

Signs of autism

- ✓ Social backwardness;
- ✓ Talking to oneself in communication, making various hand movements;
- ✓ Early onset of general signs.
- ✓ The child's inattention to the mother (laughter, physical movements, vocalizations);
- ✓ The child's lack of "readiness" - that is, when trying to pick him up, he does not stretch out his arms, does not try to stand on his knees, completely stops sucking;
- ✓ Reluctance to play with a team, capriciousness when playing with parents and others, wanting to play alone;
- ✓ Increased sensitivity to sound, light, and capriciousness during games such as teasing, shouting, jumping on a swing;
- ✓ Weakening of the ability to speak, even to the point of mutism. Echolalia, i.e. repeating words, repeating phrases heard from parents or constantly repeating words heard in cartoons, this is called Asperger syndrome;
- ✓ Picky eating, poor appetite, poor sleep;
- ✓ Not following orders, not looking at objects when shown, not paying attention to one's own name;
- ✓ Strict adherence to a set routine, i.e. waking up at the same time, keeping objects in the same place, sorting objects by shape, etc.;
- ✓ A clear violation of the ability to speak, using adult phrases, repeating the same words, not entering into dialogue;

- ✓ Not being afraid of dangers: not afraid of heights, highways, animals, but afraid of simple objects, such as a boiling kettle, electric lighter, etc.;
- ✓ Repetitive movements, circling, swaying, repeating gestures;
- ✓ Spontaneous outbursts of anger, laughter, and panic;
- ✓ Noticing some unusual behavior, such as remembering numbers that are difficult to remember, memorizing song lyrics, or writing illegible notes.

In adolescent autism, hormonal changes in autism are also added to the symptoms. The diagnosis is made by a psychiatrist based on symptoms alone. Many autistic children may not fit the autism symptoms listed in the literature. In some cases, autistic children may even communicate with people, which creates difficulties in making a diagnosis.

RESEARCH METHODOLOGY.

For the purpose of treatment, the following measures can be used to correct the lagging aspects, which are suitable for all types of autistic children:

- Conducting classes with a speech therapist to improve speaking skills;
- Using picture cards for speaking or teaching words by writing on a tablet or computer;
- Playing various games with the child, with only one specialist in one area;
- Drug treatment is prescribed only as an adjunct if the child has strong aggression.

Children with autism should be accepted as they are. Adults need to identify this in a timely manner and support them. There are assumptions that autism may occur in the fetus during the period of its development in the womb due to a deficiency of certain proteins in its brain. The connection of this disease with heredity has not yet been fully studied. A group of American and French scientists concluded that it is necessary to study stem cells involved in the sense of smell in the early stages of brain development. Because a biopsy smear that can be easily taken from the nose creates a certain convenience in studying these cells, and thereby allows us to identify genetic and biological factors that play an important role in the developmental processes associated with autism. Also, these studies can help understand the origin of autism and pave the way for the development of new treatment methods for patients.

The role of a psychologist in working with hyperactive children. When organizing classes with hyperactive children, a psychologist can use a specially designed correctional and developmental program. Working with parents and teachers is crucial in helping hyperactive children.

It is necessary to explain to adults the child's problems, to make them understand that his actions are not intentional, to show that without their help and support such a child will not be able to overcome all the difficulties he has.

The psychologist should explain to the parents of hyperactive children that they should follow specific methods of educational influence. They should remember that the improvement of the child's condition "depends on a gentle, calm and consistent attitude towards him."

When raising such children, parents should not allow two extremes: on the one hand, showing excessive mercy and compassion, and on the other hand, not making excessive demands on him, combined with excessive severity, cruelty and punishments, which he cannot fulfill.

As the psychologist M. Rotter showed, such children face serious difficulties when they enter school. Because learning activities make high demands on the development of the attention function. That is why children with ADHD cannot fulfill school requirements.

As a rule, in adolescence, such children retain attention deficits, but hyperactivity disappears and is often replaced by a decrease in activity, inertia of mental activity, and lack of desire.

Another problem in school education and a factor causing low achievement is left-handedness. Left-handedness is a big problem for educators, parents, and the child himself. Everyone knows that the superiority of the left hand over the right hand is congenital.

Until recently, the development of the mental characteristics of left-handed children was considered separately from the development of their brain. However, the brain and psyche are interconnected as an organ and its function.

Left-handedness is a necessary individual characteristic of a child, which must be taken into account in the educational process. The educational process is traditionally based on the development of verbal and logical thinking, the development of the left hemispheres of the brain. This situation makes it difficult for left-handed children to successfully adapt to the educational process.

The dominance of the left or right hand is not a child's desire or masculinity, but a specific distribution of tasks between the right and left hemispheres of the brain. Why does left-handedness occur? What causes left-handedness?.

We usually think of the brain as a single organ, but its unity is formed by the activity of both cerebral hemispheres. There is a clear difference between them, and the share of both hemispheres in the functional relations of the brain is not the same. Moreover, one of them dominates.

ANALYSIS AND RESULTS.

According to the nature of manifestation, three types of functional asymmetry can be distinguished: motor (uneven participation of the left and right sides of the body - arms, legs and face - in the formation of general motor behavior). Sensory (functional imbalance of paired sensory organs and the formation of mental speech and other higher mental processes).

Approximately 70% of left-handed children have speech centers located in the left cerebral hemispheres, and 30% in the right cerebral hemispheres.

The hand is a semi-functional organ of human motor activity. Therefore, the development of the hand as an organ of gesture indicates the leadership of the left hand in the formation of the speech center.

There are many concepts of hand asymmetry, the most common of which are: right-handedness, left-handedness and ambidexterity (two-handedness). Indicating the factors underlying the manifestation of left-handedness, scientists distinguish pathological, hereditary and forced left-handedness. However, most scientists emphasize that left-handedness is “natural” hereditary.

Both cerebral hemispheres are capable of perceiving and processing words and images, but this process occurs differently in them. Left cerebral hemisphere. Verbal, logical, “intellectual” (observational). It processes information coming from the brain sequentially, analytically. In solving problems, it is characterized by an analytical approach in accordance with the principle of induction (from the specific to the general).

Right hemisphere. Nonverbal, figurative, visual. Processes signals simultaneously and as a whole. Allows you to see objects on several mental planes. It is characterized by synthesis according to the principle of deduction (from the general to the specific).

As a rule, right-handed people are dominated by the left hemisphere of the brain, which specializes in processing verbal information. In 95% of them, the speech center is located in the left hemisphere of the brain.

The peculiarity of the lateralization of the brain function of left-handed people affects their cognitive processes, which include: the method of analyzing information, processing material in parts; better perception of verbal compared to non-verbal stimuli; lower ability to perform visual-spatial tasks (Bezrukikh M.M., Knyazeva M.G., 1994; Mikadze Yu.V., Korsakova N.K., 1994).

Until recently, teaching left-handed children to write with their right hand was mandatory. However, such cases still occur today. In particular, the fact that parents force their left-handed children to use their right hand in the educational process and teachers also encourage this causes serious problems in the mental health of children.

According to numerous reports, neurotic states and neuroses are more common in left-handed people than in right-handed children. Because, forcing left-handed children to be right-handed (using various punitive measures) is the cause of the development of neurosis.

Retraining to the right hand leads to a breakdown of the naturally occurring individual direction of lateralization, which is a strong stress factor. Thus, the transfer of left-handed children to the right hand is absolutely unacceptable. In the field of cognitive processes, the following may be manifested in the activities of left-handed children:

Low visual-motor coordination: children have difficulty performing tasks related to copying graphic images, especially in sequence; they cannot keep a line in writing and reading; their handwriting is poor.

Deficits in spatial perception and visual memory, difficulties in analyzing spatial coherence: left-handed people often show distortions in the shape and proportion of shapes in graphic representations; handwriting playfulness; omissions and substitutions of letters in writing; optical errors, confusing letters similar in shape. For example, t for p, m for l, n for k, and i for n; confusing left and right, under-above, in front of-behind, etc. when determining the spatial location of objects.

A unique strategy of processing information, an analytical style of perception: left-handed people are characterized by the ability to process material in parts, and as a result of such analysis, a whole picture of the object of activity is formed. This reflects the sluggishness of left-handed people, for full perception and understanding they need to process the material step by step for a long time.

Weakness of attention, difficulties in shifting and concentrating attention.

Speech disorders: errors in analyzing letters.

The above-mentioned features directly affect the effectiveness of acquiring educational skills. Another feature of left-handed children is their emotional sensitivity, restlessness, irritability, nervousness, as well as low working capacity and rapid fatigue.

This is not only a consequence of the asymmetry of the cerebral hemispheres, but also a consequence of forcing them to switch to the right hand. In addition, 20% of left-handed children have a history of difficulties during pregnancy and childbirth (according to some reports, a birth injury may be one of the causes of left-handedness, since the right hemispheres take over the functions of the injured left hemispheres).

CONCLUSIONS AND SUGGESTIONS.

The emotional sensitivity of left-handed children is a factor that makes it difficult to adapt to school. Their entry into school life is slower and more painful than others. That is why left-handed children should always be under the special attention of teachers, psychologists and parents. Thus, left-handed children can face many problems at school. Especially in the preschool period and younger school age, if sufficient attention is not paid to their full mental development, it leads to serious problems in mastering educational activities.

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