

THE EARLY ATTENTION OF LANGUAGE IN CHILDREN WITH DOWN SYNDROME IN PRESCHOOL CHILDHOOD

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ABSTRACT

Guaranteeing quality care for children from birth in relation to the educational influence exercised in the first years of life is necessary for the achievement of early stimulation and care in all its dimensions. The purpose of this article is to conduct a review study on how early language care for preschool children with Down syndrome has developed. Therefore, a study is made of the evolution that occurs in the developmental areas of children with Down syndrome at this stage, and particularly in language. The progress made in offering early care in this area will guarantee greater preparation for school entry and will greatly favor educational and social inclusion and the integral development of their personality.

Keywords:

INTRODUCTION

The World Health Organization (WHO), the United Nations Children's Fund (UNICEF) and the United Nations Educational, Scientific and Cultural Organization (UNESCO) continually urge researchers to carry out studies on the causes and prevention of warning signs in early childhood (0-6 years); to develop diagnostic methods; and to design educational variants that promote their development.

This has promoted the adoption of agreements and commitments by countries at the global level, and specifically in Latin America, to guarantee quality care for children from birth. The Cuban social project includes the creation of children's circles, maternity homes, paediatric services,

neurodevelopmental centres, diagnosis and guidance centres (CDOs), community action programmes such as "Educate your child" and, significantly, the constant improvement of the early childhood (0-6) curriculum.

With regard to the educational influence exerted in the first six years of life, it should be noted that different terms are used, such as: early stimulation, early stimulation, appropriate stimulation, early care, early intervention, early education, initial education, among others, and that they are used interchangeably.

On this issue, we share the criteria offered by Torres (2003), about placing the emphasis on the conception that supports the use of one or another terminology, and not on the selection of it. Nevertheless, the terms stimulation or early care are currently used in many countries with a tangible frequency, the latter being of particular interest for research.

According to the Early Care Group (E.C.G.) (2000) the main purpose of this is to carry out interventions with children, their families and the environment, so that a flexible response can be given to the transitory or permanent needs they present.

According to Diaz (2001), children with chromosomal diseases constitute a subgroup of priority beneficiaries, where those with Down syndrome are distinguished, and who are located in the group of children with established risk.

Numerous studies conducted internationally: Singh (1976), Spiker (1990), Pueschel & Pueschel (1993), Martínez (2011), Pérez (2013), Kumin (2015), Robles-Bello (2016), among others, agree from different perspectives that Down syndrome is the leading cause of intellectual disability with a genetic origin, and highlight its high incidence in the population. The world average is approximately 1 for every 700 births, a figure that may vary according to the country.

In Cuba, according to data updated by the National Center of Medical Genetics, its approximate frequency is 1 for every 1,000 live births, while in Villa Clara province (where the research is carried out), the statistics provided by the Provincial Center of Medical Genetics reflect a prevalence at birth of 0.65 for every 1,000 live births, which represents 6 for every 100 births.

One of the areas most affected in early childhood children with Down syndrome is language. Authors such as: Fisher (1987), Del Barrio (1991), Rondal (2008), Kumin (2013), Jiménez (2014), Pérez (2015) have made contributions related to its appearance, evolution and its ostensible lack of development from the first year of life; however, they also refer to the fact that towards pre-school childhood, a slight take-off begins to be noticed in it, which is why, in the author's opinion, early attention to language at this stage is indispensable.

Authors as: Spiker (1990), G.A.T. (2000), Gallego (2005), Miñán (2007), Candel (2008), Perera (2011), Romero & Crisol (2015), Angulo, Gijón, Luna & Prieto (2016), Gallego & Rodríguez (2016), Paz, Palma & González (2017) have focused their studies on early attention.

They have focused on its conceptualization and organization, on the importance of carrying it out as soon as possible and with a multi and interdisciplinary character. They look at it from a globalizing viewpoint, where they include, with special emphasis, the socio-communicative area; however, although they allude to the first six years of age, they put the emphasis on the first three when conceiving their proposals.

Without ignoring the importance of intervening as early as possible, this is one of the main gaps identified by the author. It is necessary to take into

consideration the potential of preschool childhood (3-6 years) to exert an organized influence; the evolution that takes place in the areas of development of children with Down syndrome at this stage, and particularly in language, as well as their proximity to the arrival at school.

The fact that language constitutes the fundamental instrument for cognition and communication, enhances the value of this research. The progress made in offering early care in this area will ensure greater preparation for school entry and will greatly favor educational and social inclusion and the comprehensive development of the personality of children with Down syndrome (Miñán, 2007).

In the international arena, research by Flores & Troncoso (1993), Buckley & Bird (2005), Miller, Leddy & Leavitt (2001), Rondal (2008), Moya et al. (2010), Galeote, Soto, Sebastián, Rey, & Checa (2012), Kumin (2013), Moreno (2015), Pérez (2015), Paz, Palma & González (2017), recognizes the value of quality early care, and the subsequent benefits it can bring.

In the national context, Fernández et al. (2009) ratify the importance of influencing early childhood through the project: "Prevention and comprehensive care of children with special educational needs in early and preschool age" (now called early childhood), as well as Travieso (2008), with its contributions on stimulation and early care of children with indicators of possible mental retardation (intellectual disability).

In this regard, we also distinguish Pons (2011), who addresses the stimulation of language development in children with a presumptive diagnosis of mental retardation, based on an ontogenetic - preventive - stimulating model that is implemented through a pedagogical strategy.

Although the value of this contribution is acknowledged, none of the authors mentioned above stops to focus on children with Down syndrome.

The characterization of the Cuban preschool child made by Siverio et al. (1995) and specifically that of the preschool child from Villa Clara, a background that must be consulted, although they have allowed for an in-depth study of the distinguishing features and educational care of children between 0 and 6 years of age, they have not included children with Down's syndrome as an object of study either.

On the other hand, Massagué (2005), who focuses on children with Down's syndrome in early childhood and provides a socializing model to encourage verbal development, does not take preschoolers into consideration in his study.

García's (2000) research proposes a program of care for Down syndrome, other disabilities and their families, essentially based on the program proposed by Candel (1993). In this program, speech therapy intervention is considered directly, but it does not specify how to carry out early language care.

Other relevant scientific results are those obtained from the Villa Clara province in the research projects: "Prevention and comprehensive care of early childhood children with special educational needs for the beginning of their school life", directed by Carreras (2008) and "Prevention and comprehensive speech therapy care of children with special educational needs in communication", coordinated by Hernández (2013). However, although both include tasks related to language in children from 0-6 years old, they do not focus on those with Down syndrome, so the analysis carried out shows that there are few studies in Cuba that emphasize this problem.

The purpose of this article is to conduct a review study on how early language attention for preschool children with Down syndrome has developed.

DEVELOPMENT

There are various views about the benefits of early care in the later development of the child, and there is no doubt that attention to language as early as possible has a positive impact for people with Down syndrome.

In this regard, Miller, Leddy & Leavitt (2001), Troncoso (2002), Hernández, Hernández & Rodríguez (2019a), Hernández (2020) highlight the value of providing early language care for people with Down syndrome. They are of the opinion that it has a great effect on their autonomy and on the development of skills that favor their social and educational inclusion.

Many international studies seek to improve early care and give priority to the area of language in children with Down syndrome.

In the literature consulted, Miller, Leddy & Leavitt (2001) refer to the existence of early language intervention or care programs, both family-based and school-based, both of which recognize the value of an appropriate communication pattern and work towards the achievement of the best possible models.

Grácia and Del Río (2008) provide a naturalistic intervention in communication and language for families, teachers and educators of children with Down syndrome. These authors suggest activities for the creation of interactive routines, the adaptation of the environment and the improvement of social-communicative interaction strategies.

The aforementioned researchers, like Boavida (2018) and Hernández (2020), defend the criterion that intervention should be offered in the most natural environment possible.

From this perspective, it is considered appropriate to combine work with the school and the family, since both contexts are conducive to the development of early language care, based on a coherent work among all the factors involved.

Given the multiplicity of factors that may influence the language development of children with Down syndrome, specialists such as Miller, Leddy and Leavitt (2001), Rondal & Lang (2009), Moreno (2015), have made proposals that emphasize the development of pre-linguistic skills, the reinforcement of any verbal production emitted by the child during play, and work with orofacial structures.

They also emphasize the intervention to be made on the lexicon, since there are several factors that limit its development. They believe that a very valuable resource to obtain progress in vocabulary is the simultaneous use of the word and a specific gesture or gesture sign to refer to an object or event, and they emphasize its gradual abandonment once the verbal form has been stabilized.

In addition, they consider the early development of grammar and syntax to be of vital importance; they recommend that once the child has a certain development of vocabulary, he or she should move on to demonstrating, repeating, telling events through play, based on the combination of two words that will become more complex as the length of the broadcasts that serve as models increases.

On the other hand, Rondal & Lang (2009) also distinguish the value of learning to read with the use of global methods as a recognized didactic resource for language development.

The effectiveness of other methods such as tonal verbs, total communication, the bimodal method and sign language is also recognized. In this regard, it is agreed with Kumin (2014) that, in children with Down's syndrome, various communication systems can be used in order to enable

them to communicate their needs effectively until they learn to speak to meet them.

In this sense, the literature consulted refers to support in different Augmentative Communication Systems (ACS), which favor their communication, without limiting the development of oral language. This resource is considered to be of great value in offering early language attention to these children.

The importance of the subject and its approach in the international sphere makes it necessary to approach it from the Cuban context, based on the analysis of the definition offered by López (2006).

This author considers that early attention to language is: "the set of actions aimed at developing in children (without forcing their own evolutionary rhythm) the phonological/phonic, morph syntactic, semantic and pragmatic skills necessary to facilitate the communicative exchanges of the youngest with their environment" (p. 11).

The researcher mentioned above emphasizes the systematic and sequential nature of early language attention and recognizes the role of monitoring the level achieved. Furthermore, she points out the early application of stimulation techniques based on environmental modification and highlights both their welfare and preventive nature.

Another important research is the one carried out by Pons (2011), in which he refers to early stimulation; a term also used to designate the educational influence exercised in early childhood. This author proposes an ontogenetic-preventive-stimulatory model of oral language development in preschool children with a presumptive diagnosis of mental retardation (intellectual disability), based on comprehensive speech therapy.

From this model, the author of the present article considers to a great extent the stages through which Ontogenetic development takes place, the particularities of the age group and of children with intellectual disabilities, the disposition of the personal, personalized components and the contexts of socialization in order to imprint particularities and individualize the process of early language care.

He agrees with Fernández (2008), Pons (2011), Hernández, Hernández & Rodríguez (2019b) on the value of involving the family and the community's educational agents in early language care.

The theoretical elements discussed above, the in-depth study of the specialized literature and the taking of a stand with contemporary criteria of significant value, allow us to contextualize the term early language care for children with Down syndrome in preschool.

From this perspective, Hernández (2020) considers that early language care for preschool children with Down syndrome is (p. 36):

A set of preventive, stimulating and intervening actions, designed on the basis of the characterization of language, and aimed at the child (three to six years old), their families and the environment. Their essential purpose is to strengthen, correct and/or compensate for the components of language (phonetic-phonological, lexical-semantic, morphosyntactic and pragmatic), taking into account the inherent characteristics of this chromosomal disease, the type of care in which these children are educated, the family context and the multiplicity of educational agents involved in their development.

This contextualization highlights the value of the characterization of language in children with Down syndrome as a premise for the execution of actions; it distinguishes the role of the family, the environment and the modality of care where the educational influence is received, as well as the particularities of children with this syndrome.

Early language care for Cuban children with Down syndrome in preschool is organized on the basis of the model of early and preschool care for children with special educational needs, Fernández (2008), and is based on the care modalities defined for the rest of the children, with an increasingly inclusive approach.

Children with Down syndrome are cared for from the institutional modality, either in specific Special Education Centers (special nursery school, special classroom and preparatory grade in the special school) or from ordinary centers (preschool grade in primary school, special classroom within the nursery school or from the classrooms of the general nursery school) when they receive the benefits of educational inclusion.

In the case of the non-institutional modality, they are served by the "Educate Your Child" program, where the promoters and executors exert their influence. In both modalities, these children receive direct attention from different specialists, whose functions include providing guidance to their families, educational staff and community agents.

The theoretical elements consulted in relation to early language care for children with Down syndrome, as well as the systematic field work carried out, made it possible to contrast existing theory with the pedagogical practice carried out in this area, and to enrich the theoretical study on the subject from this perspective.

In this sense, from the researcher's critical viewpoint, the current model of early care used in Cuba and the other studies that complement it do not sufficiently address a series of aspects that limit the practical execution of work directed at language with children with Down's syndrome.

The aspects mentioned that are revealed (with support in the theoretical gaps found), are related to: the characterization of the language of these children, the contextualization of the early attention to language, to the individual characteristics and the organization of the modalities of attention where they receive educational influence, as well as to peculiar qualities (summarized in guiding ideas) that this process must possess.

On the other hand, with support in practical testing, the following also constitute deficiencies in the early language care of children with Down syndrome: the diversification of methods, means, procedures, resources and support for this purpose, the preparation of teachers and families and their organized implementation.

As a result of the analysis carried out, the process of early language care for children with Down's syndrome has distinctive qualities, which are expressed in guiding ideas or guidelines, considered to be: "an expression of a high level of generalization (...) of knowledge about what and how to do in the theoretical-methodological conception proposed" (Guerra, 2005, p.64).

These guidelines that should be followed in order to conduct the process of early attention to the language of children with Down syndrome in preschool, are based on the theoretical-practical gaps, the professional experience sustained by the author in working with these children, and the field work with the multiplicity of factors involved in the research.

This last aspect not only allowed them to be built from a vision of group consensus, but also to gradually enrich them from the experiences of those involved in the process, and the breadth of views; all on the basis of existing theory.

The guiding ideas are based on the following (Hernández, 2020, p. 38 - 44):

Early attention to the language of children with Down syndrome that takes as a premise the indispensable preparation of all factors involved in language development.

It is based on the idea that preparation "encompasses the system of knowledge and skills that each worker must possess in their profession or position, in order to carry out the missions entrusted to them in their respective entities". (Official Gazette: 2018, p. 32).

By virtue of the above, it is considered that in order to successfully organize and direct the early attention to language in children with Down syndrome, it is necessary to prepare the teaching staff involved, so that they have the knowledge and skills that allow them to make the most of the resources and tools; made available to them, in order to optimize and individualize this process.

Therefore, in relation to knowledge, the following are identified as essential theoretical nuclei to be mastered by this staff: the particularities of language development in children with Down syndrome, the factors that affect their development, early attention to language and its particularities in Down syndrome from different educational settings, as well as the methods, means and procedures used in correspondence with the characterization of language.

On the other hand, the most important skills to be developed by the teaching staff are: characterizing the language development of children with Down syndrome through the use of various methods and techniques, as well as modeling actions for early language attention, with adjustment to the organization of the educational environments in which they develop.

In this endeavor, it is important to take advantage of the broad possibilities offered by the postgraduate degree stipulated in Ministerial Resolution 132/04, as amended by 166/09, as well as the paths established for methodological and scientific methodological work in preschool education (Resolution200/2014). In this way, debate, reflection and collaborative work will be encouraged.

Early attention to the language of children with Down's syndrome that takes as its starting point the characterization of language with the use of specific techniques for its evaluation.

In order to organize effective early attention to this area, it is considered of great value to start with the characterization of the language of children with Down syndrome.

In this effort, the use of assessment techniques such as PLON, CDI-Down and the spontaneous language assessment test is important. Their use, in combination with other methods at the empirical level (observation, interview, document analysis) allows for an in-depth characterization of the language components (phonetic-phonological, lexical-semantic, morph syntactic and pragmatic) and important processes for verbal emission such as breathing.

The application of these tests facilitates the evaluation of the child with Down syndrome in different situations and in the most natural context possible. With their implementation, relevant data about the child's life history are obtained.

The use of tests such as the CDI-Down allows the peculiarities of ontogenetic language development in Down syndrome to be taken into account by constituting the only validated test in Spanish in this syndrome.

These evaluation techniques, together with speech therapy research, make it easier for the speech therapist and other educational agents to make an explanatory, personalized diagnosis of language development in children with Down syndrome, which will allow for the design of early care strategies and actions that are increasingly adjusted and developmental.

Early attention to the language of children with Down syndrome that is contextualized to the characteristics of educational environments and their

organization, based on the optimal use of spaces and processes of the different modalities of care (institutional and non-institutional).

In order to design early language services for children with Down syndrome in preschool, it is important to take into consideration the diversity of educational environments in which they receive care (special school, general and special daycare center, "Educate Your Child" program, among others), and to promote their educational inclusion.

Each environment has characteristics and forms of organization that distinguish it, which is a strength for favoring early language care in a creative and contextualized manner.

In the case of the "Educate Your Child" program, the speech therapy specialist belongs to the People's Council coordinating group, and is responsible for drawing up the action plan together with the other members, and including those that guarantee early language care.

This program is basically organized through the group care modality for preschool children, through joint activity, which consists of three moments: initial phase, execution and final moment.

It is during this last moment that the Speech Therapy specialist provides orientation to families, and offers direct attention to the language of children with Down syndrome, although it is valid to acknowledge that the promoters and executors can take advantage of the different moments to carry out the language attention in a planned manner.

The spaces and social relationships that are generated in the community with the operation of this program open up broad possibilities for the language development of children with Down syndrome.

Through home visits, it is possible to follow up on the orientations, and these, together with other channels (elaboration of educational messages or advice, exchanges or conversations), favor the preparation of the families in relation to what to do and how to act in order to offer early attention to the language of these children.

For its part, in the institutional care modality, the programmed activity constitutes an important form of organization of the educational process; in its preparation, the conscious and planned organization of individual work is essential, in order to favor the language development of children with Down syndrome. This task is particularly important in the special nursery school where "Knowledge of the Surrounding World and Language Development" is taught.

Independent activity also occupies an important place in the educational work carried out in the institutional care modality. During its execution it is necessary to simultaneously attend to the individual work of children with Down's syndrome and that of the small groups. The emergence of initiatives in each one of the group members can be enriched to benefit the individual language development of these children.

Play is an essential organizational form of the educational process; for children with Down syndrome, adult participation should not only be part of their organization, but also of their development.

On the other hand, if we take into consideration that all the moments in the life of children are educational, with equal involvement in their integral development, we cannot overlook the importance that all the personnel (teachers and non-teaching) take advantage of the processes of satisfying their needs for cleanliness, food, sleep, as well as the reception of the children upon their arrival at the institutions in order to favor the development of language.

The curriculum modifications within the preschool education improvement, introduce a curriculum organized in educational and

developmental dimensions, which take into account the integrated and interdependent way in which early childhood development occurs, which expands the horizon of possibilities for early language care of preschool children with Down syndrome and equalizes their opportunities.

Within the stated dimensions, the "Communication" dimension is distinguished. This dimension cuts across the others and emphasizes the value of communicative situations generated in play and in all moments of daily life, an aspect that can be used to make early language care more effective.

In this process of improvement, the criteria, opinions and proposals of educational agents, the family and representatives of social sectors of the community are taken into account. These are essential elements for offering early language care to children with Down syndrome.

Early attention to the language of children with Down syndrome that considers the diversification of methods, means and procedures to be used, as well as the resources and support necessary to promote language development.

Knowledge of the diversity of methods and procedures that can be applied to the early language care of children with Down syndrome is an element of unquestionable value.

The use of methods that have emerged for speech rehabilitation in people with hearing disabilities, such as the tonal verb; of total communication, the bimodal method and sign language, can be used as a way to facilitate or increase their communication.

The use of real objects, commonly used gestures and photographs in early childhood is effective. In accordance with their particularities, the following are also recommended: The Pictographic Communication System (SPC), communication boards, and personal agendas, among others.

In addition, methods and procedures such as observation, demonstration, conversation and explanation are very useful for the early language care of children with Down syndrome, and the combination of some of them increases their effectiveness. Dramatization and play are recognized as valuable pedagogical procedures used for these purposes.

Other specific procedures to facilitate interaction and language through play are: self-centered speech, parallel speech, expansions, spacing, and constructions and breaks.

On the basis of their speech-language diagnosis, other procedures are recommended such as: phonic analysis, imitation, mimicry and visual control, emphasized pronunciation, grammatical analysis, joint language, answers to questions, spontaneous language and reflex language.

On the other hand, the development and use of teaching aids, is very useful for early language care of preschool children with Down syndrome. These should be simple, attract their attention, and be of an adequate size to facilitate individual and collective work in an enjoyable manner.

The use of Alternative Communication Systems (ACS) facilitates work with language components, particularly the semantic lexicon and the syntactic morph; as well as the use of routines that organize the child's activity and promote understanding.

It is important that the pedagogical staff select the methods, means, procedures, resources and supports in correspondence with the personalized, positive and developmental diagnosis that is made of each child with Down syndrome in preschool.

The selection of these elements and the optimal use of the advantages offered by the organizational variants of the treatment (individual or

collective) guarantee to a great extent the success of early language care at this stage.

In order to achieve early attention to the language of children with Down syndrome, the active role of the family must be prioritized from the most natural environment possible.

Although sometimes the family shares responsibility with other institutions and professionals, the need to give them an active role in early language care is recognized; the impact of their actions from the most natural environment possible is a fundamental source of stimuli to provoke meaningful situations for the child.

ANALYSIS AND DISCUSSION

The above confirms the relevance of one of the main transformations declared in the improvement of preschool education in relation to the leading role of the family in the education and development of its children, as well as the need for its consistent and systematic preparation, based on its experiences.

In order to ensure that the family of a child with Down syndrome is prepared to be an active player in early language care, the routes established by the Preschool Education subsystem are used. In addition, it is essential for them to be present during the direct attention sessions, so that they do not become mere spectators, but rather are involved in the activities that encourage child-child and child-adult interaction.

In this sense, it is considered important for the family to know the particularities of communication of their child with Down syndrome; how they should speak to him/her; how they can take advantage of all the practical situations that arise in the family dynamic, and give them a playful focus.

The family must learn to use the resources of the child's environment to mobilize and activate him/her. It is important to provide pleasant experiences through play with and for the child, with the involvement of all family members to avoid overloading any family member.

Another valuable element for the family to play an active role in this sense is that they learn to adapt their communication strategies to the development of their child's language; that they understand the importance of increasing their experiences and taking advantage of all natural contexts, as opportunities to increase the child's communicative exchanges.

On the basis of the knowledge and skills that the family possesses and the new ones that they acquire during the preparation that they receive in a systematic way, it will be possible for their participation in the process of early language care of the child with Down syndrome to lose the traditional spontaneous character, to become a conscious and directed activity.

Early attention to the language of children with Down syndrome that promotes the coordinated and integrated action of the educational agents involved in the process, regardless of the type of care in which it is developed.

In the non-institutional modality, this coordination is reflected in the elaboration of the action plan by the coordinating groups at the different levels, where the actions that guarantee early language care are included and the multifactor focus is made concrete.

Although coordination, which is closely linked to multifactor, has been declared a working principle of the "Educate Your Child" program, it is also considered to be a highly valuable element in providing early language care from an institutional perspective.

The above statement is based on the Early Childhood Education Plan (2016), which reaffirms that one of the main changes in preschool education

is the multifactor nature of early childhood education and reflects on its relevance to both types of educational provision.

In the institutional modality, therefore, coordinated and integrated work is evident from the board of directors and the cycle groups, where actions to provide early language care for children with Down's syndrome are planned and evaluated.

In both modalities, it is necessary to achieve integration between specialists from the educational sector itself and from these with specialized personnel from other sectors such as: health, the National Institute of Sports and Recreation (INDER), culture, political and mass organizations.

The coordinated and integrated work of the educational agents involved in the process favors the use of the community's facilities and services. It also makes it possible to join forces during the planning, implementation and evaluation of early language care actions for children with Down syndrome, in order to make them more effective.

From this perspective, it is considered that the process of early language care guarantees the development of this area in the preschool child with Down syndrome, to the extent that it is carried out from a broad and participatory social perspective, involving different professionals from the educational sector and other social sectors, based on the coordination of actions.

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