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## **IMPROVEMENT OF LANGUAGE AND COMMUNICATIVE PROFICIENCY OF FUTURE SPECIALISTS**

Ways of improving the language and communication proficiency of future specialists in higher education have been revealed and analyzed in the research article.

It was noted that in organization of educational process at higher educational establishments that stipulates both vocational and educational component, the content of the future specialist's professional grammar has been taken into account in order to be approximate as much as possible to modern production requirements.

The main components of the job profile diagram of young specialists in any field of national economy have been identified.

The place and role of language and communicative proficiency for education of modern specialists of various specialties and importance of having necessary skills have been identified. Requirements for communicative proficiency level of future specialist have been indicated.

It has been proved that it is possible to direct the educational process in accordance with the goal by selecting the necessary means and creation of certain conditions.

The significance of the subject "Ukrainian (for specific purposes)", which provides deepening, improvement, systematization of knowledge, skills, language skills, taking into account professional field that successfully combines elements of the speech culture, stylistics, rhetoric, terminology, and the like has been revealed.

The importance of classes with elements of rhetoric as a science of persuasive communication, necessary in all spheres of human activity as the basis of a specialist's professionalism in any industry has been indicated.

The need for continuous improvement of language and communicative proficiency of individual as a necessary component for modern specialist training has been proved.

**Keywords:** *job profile diagram; language proficiency; communicative proficiency; higher educational establishment; educational process*

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## **PECULIARITIES OF MASTERING LANGUAGE MATERIAL BY CHILDREN WITH DOWN SYNDROME**

The article reveals peculiarities of language learning by children with Down syndrome. Children with Down's syndrome frequently have speech and language impairments although the nature of their language learning difficulties can differ substantially between individuals. Both hearing loss and delayed development contribute to language learning. Children show specific strengths in receptive vocabulary. Sign and gesture can support vocabulary learning and visual scaffolds support language learning. Enhanced verbal environments help to develop verbal abilities. While understanding precedes expressive ability for all children, this balance is frequently larger than usual and is sometimes vast, which in some cases leads to children's understanding and other abilities being underestimated. Individuals are likely to have difficulty expressing their thoughts and feelings. Most learners have significant speech, language and communication needs throughout childhood. Activities to support the full range of speech, language and communication needs that individual children experience should be directed by a speech and language therapist.

The script of the workshop of the same name for philology teachers, which can be conducted in extra-curricular time in the system of postgraduate education, has been worked out.

**Keywords:** *linguistic material; mastery of linguistic material; child with Down syndrome; philology teacher; postgraduate education.*

**Introduction.** Down syndrome (DS) is a genetic disorder caused by a failure of the 21st chromosome to separate during cell division and thus changes the development of the body, which includes brain development as well. Due to its specific occurrence, it is not considered a disease but a permanent lifetime condition of a person. This condition is characterized by several psychophysical characteristics which are mostly common for all persons with Down syndrome: poor muscle tone, slanted eyes, round face with a flat profile, short hands, low cognitive functioning.

These characteristics are also accompanied with specific disabilities such as auditory, visual, tactile, speech, language and communication difficulties. However, it is important to know that there is no universal rule or any sign by which the level of disabilities or difficulties in persons with Down syndrome can be predicted.

Moreover, the range of diversity related to mental capacities, behaviour and developmental abilities in general is quite large. Each child, each person with Down syndrome is different. Only discovery and knowledge about specific needs and

capacities of a single person enables the proper treatment and, accordingly, the most productive performance. Therefore, it is immensely important to ensure that the child is offered as free a development as possible and, as little as possible, limit the expectations placed on the child.

**Analysis of relevant research.** The problems of teaching children with Down syndrome were the subject of scientific findings of such authors as: G.Bird, S.Buckley, Anne E.Fowler, C.Jenkins, Jin-Chang Huang, O.Jones, O.Milevs'ka, A.Minenko, O.Mozoluk-Konovalenko, etc.

**Aim of the Study.** Aim of the Study is to single out some peculiarities of mastering language material by children with Down syndrome on the basis of scientific and pedagogical literature and to make some tips for effective teaching children with Down syndrome reading, writing and speaking.

**Main material of research.**

Children with Down's syndrome typically have a speech and language impairment and should be seen regularly by a Speech and Language Therapist who can suggest individualized activities to promote their speech and language development.

The language delay is caused by a combination of factors, some of which are physical and some due more to perceptual and cognitive problems. Any delay in learning to understand and use language is likely to lead to cognitive delay. The level of knowledge and understanding and thus the ability to access the curriculum will inevitably be affected. Receptive skills are greater than expressive skills. This means that children with Down's syndrome understand language better than they are able to speak it. As a result, their cognitive skills are often underestimated.

Children with DS often experience language learning difficulties disproportionate to their mental age. Expressive language, especially, is delayed relative to cognitively matched control children (Chapman, 1995), often resulting in wide expressive-receptive and expressive-cognitive gaps.

Consequently, children with DS often seem to have things to say, but reduced means with which to say them. This observation has led many practitioners to introduce sign language as an alternative mode of communication for children with DS when they are first beginning to talk. One estimate places the frequency of such an intervention as high as 85% (Miller, 1992). In early periods of language development, the size of the expressive lexicons of children with DS (estimated from parent report on vocabulary check lists) are typically smaller than that of matched, typically developing control children (Miller, 1992).

Thus sign use can augment the expressive lexicons of at least some children with DS. Children with DS experience many constraints as they develop, learn and use the spoken language of their communities. Some constraints are congenital and linked to the extra genetic material; others emerge developmentally as children adapt to their physical, social and linguistic environments. Some will overcome these constraints to become good communicators, but many will experience difficulties in using speech to communicate effectively with others. Children with DS present with more speech and language impairments than their typically developing peers, but impairments specific to the syndrome have yet to be identified. The range of communication impairments is similar to that encountered in the general pediatric population. Some may experience difficulties with the content (semantics) or the form (grammar, phonology) of the language, or with its use in interpersonal communication (pragmatics). Difficulties may also arise with speech intelligibility, voice and fluency (Cain, & Oakhill, 2007).

A variety of language difficulties are present among children with Down syndrome, but Kumin (1998) believes that children with Down syndrome do not present with consistent speech and language characteristics. Roberts et al. (2007) dispute findings by Kumin (1998), as they explain several patterns of language development typically observed in children with Down syndrome start with deficits in phonology. Martin et al. (2009) agree with Roberts et al. (2007), as they report the commonality of deficits in children with Down syndrome does exist; specifically, they found that it is typical for these children to have lower speech intelligibility than nonverbal mental aged matched typically developing peers. In addition to phonological deficits, Martin et al. (2009) reported expressive vocabulary, syntax (expressive & receptive) and pragmatic characteristics to be a deficit amongst the Down syndrome population. Children with Down syndrome begin to demonstrate phonological deficits when transitioning from babbling to speaking their first word, which occurs around 21 months of age (Abbeduto et al., 2007), evidenced by a slower elimination time of phonological processes such as the deletion of final consonants on words. According to Roberts et al. (2007) speech intelligibility affected by phonological factors is a lifelong challenge for those with Down syndrome. The exact etiology is not as explicit, as it may be due to several factors including sound error patterns, reduction of word shapes, and apraxia of speech, dysarthria, rate of speech, improper stress placement and voice quality. Martin et al. (2009) support this as they report that speech intelligibility may be affected by voice quality, apraxia of speech, and dysarthria. Decreased speech intelligibility not only creates communication barriers between individuals, it may also negatively affect the development of appropriate language skills (Martin et al., 2009).

Abbeduto et al. (2007) believe delays in early vocabulary development manifest from general cognitive delays, since their first word appears at the same mental age as typically developing children. Receptive vocabulary observed in children with Down syndrome appears to be consistent with typically developing children, although some research appears to contradict this belief with evidence of delays in this area (Abbeduto et al., 2007). Martin et al. (2009) also found contradictions in research regarding receptive vocabulary skills in children with Down syndrome; however, their reports described several studies suggesting that children with Down syndrome can understand spoken language in the same manner as their mental aged matched typically developing peers.

Other speech and language problems in children with Down's syndrome stem from difficulties with their auditory short-term memory and processing skills. The auditory short-term memory is the memory store used to hold, process, understand and assimilate spoken language long enough to respond to it. Any deficit in short-term auditory memory will greatly affect pupils' ability to respond to the spoken word or learn from any situation entirely reliant on their auditory skills. In addition, they will find it more difficult to follow and remember verbal instructions.

The following are early intervention strategies that can be used to help children with Down Syndrome develop and increase their understanding of language:

Take advantage of language opportunities during daily routines:

Activities such as taking a bath, cooking, grocery shopping, changing a diaper, or driving in the car are a wonderful time for learning. Caregivers can consistently identify actions, label items, expand on their children's utterances to facilitate vocabulary acquisition and overall language development. It takes a lot of repetition for children to learn and start to use words appropriately. Include a variety of words that include all the senses. "Does the water feel hot?" or "Can you smell the cookies?" When speaking, identify textures, colors, express feelings etc.

2. Read, read, read:

It can never be said enough how important reading is to children. When reading a book, it's important to not only read the words on the page, but to talk about what is on the page, what the characters are doing or how they might be feeling. Make reading a book an interactive experience.

3. Incorporate play time with other kids:

Children can learn a lot just by interacting with other children as they are interested in and motivated by their peers. They imitate each other's actions and will learn from them. Play time with other children will also help them develop social skills. Concepts such as sharing, taking turns, pretend play, creating, etc. can all be increased.

4. Play with them:

Children don't know how to play with toys and games on their own, we need to show them. Get on the floor and play with blocks, balls, bubbles, sing a song, etc. During this time talk about what you and the child are doing (Ex: stack up the blocks, let's blow more bubbles, it's my turn) and expand on their utterances. Play time is critical for children to develop their ability to focus and attend to a task. When you are engaged together in a task, you are developing a special bond with your child and they are learning!

Mentioned above allowed us to work out a workshop for philology teachers «How to teach languages to children with Down syndrome». It can be provided as an extracurricular activity in the system of postgraduate education.

«How to teach languages to children with Down syndrome»

Introduction.

Narrator. Dear colleagues! Our today's workshop is devoted to teaching languages to such special children as children with Down syndrome. We shall speak about this genetic condition in general; we shall single out some cognitive, psychological, language and speech peculiarities, which are typical for this category of children. Then you will see the portraits of some famous people who have Down syndrome. Some literary stories about these kids' fortune will be shown. As a final, we will discuss and make some tips for effective teaching children with Down syndrome reading, writing and speaking.

Narrator. Let us work in groups and make up a portrait of a kid with Down syndrome. You will have cards with different characteristics.

Group 1 will choose the genetic reasons of the syndrome.

Group 2 will find cognitive peculiarities.

Group 2 will find psychological and communicative specific features.

Group 3 will choose articulation apparatus and speech problems.

(The whole portrait is being discussed and analyzed)

Video watching. Teachers watch a video "They are different from the way we think. How do children with Down syndrome".

Power Point Presentation. Now let us watch a presentation. There are some famous people who have Down syndrome. They can work and they have a happy life.

Among them, there are actors: Lauren Potter, Luke Zimmerman, Jamie Brewer, Tommy Jessop, Chris Burke, Edward Barbanell, John Taylor and others.

Spanish actor Pablo Pineda, the first European with Down syndrome, completed a university degree.

Karen Gaffney is a disability rights campaigner and the first living person with Down syndrome who received a honorary doctorate degree.

Robbie Savage is a football fan and socialite, official mascot of the Brave Warriors, Namibia's national football team.

Chelsey Verner is sport gymnastics world champion.

Jamie Brewer is an actress and a model.

Narrator. We should say that everything depends on the way parents and teachers will organize the child's life and education.

Now let's find out what specific features of mastering language material by children with Down syndrome really exist and what a teacher can do to teach a language to this category of kids.

(Presentation, choosing correct items, discussing)

Now choose the correct answer:

Your child asks: "Why did this girl born with Down syndrome?"

There is no reason of birth with this syndrome.

She is infected from another child in maternity hospital

Maybe her mum used drugs or alcohol, or smoked a lot when she was pregnant.

What will you advice your child to answer a child with Down syndrome about the place you live in:

In a flat in multi-stored building in the street near the stadium.

I have already told you about it. You must remember what you are told.

We have a big flat with three rooms in it. I can draw it on the sheet of paper for you.

Narrator. Our colleagues have prepared short presentations devoted to different stories about children with Down syndrome, which you can read and discuss with your students in the classroom.

Teacher 1. "My Sister, Alicia May", by Nancy Tupper Ling

Teacher 2. "My Friend has Down syndrome"

Teacher 3. Alden R. Carter "Big Brother Dustin"

Teacher 4. Alden R. Carter "Dustin's Big School Day"

Teacher 5. "Be Good to Eddie Lee", by Virginia Fleming

Teacher 6. "We'll Paint the Octopus Red" by Stephanie Stuve-Bodeen

Narrator. Our workshop comes to the end. Let us summarize what we have discussed in the form of "a round table". Let us make some practical tips for teachers who teach languages to children with Down syndrome.

(all tips are shown)

Conclusions and perspectives of future researches. So we can come to conclusion that Children with Down's syndrome frequently have speech and language impairments although the nature of their language learning difficulties can differ substantially between individuals.

Both hearing loss and delayed development contribute to language learning. In addition, the learning profile includes verbal processing difficulties associated with verbal short term memory, as well as phonological and morpho-syntactic difficulties (phonological problems reflect difficulty in distinguishing and manipulating small units of sound. Morpho-syntactic problems relate to the understanding and use of small words and word parts with grammatical meaning.

Children show specific strengths in receptive vocabulary which means that expectations for concept learning across the curriculum can be relatively high; children typically have more advanced vocabulary than grammatical knowledge. Sign and gesture can support new vocabulary learning and visual scaffolds such as photos and pictures support language learning. Enhanced verbal environments that build semantic and syntactic knowledge help to develop verbal abilities.

While understanding precedes expressive ability for all children, this balance is frequently larger than usual and is sometimes vast, which in some cases leads to children's understanding and other abilities being underestimated. Individuals are likely to have difficulty expressing their thoughts and feelings.

Children and young people need sufficient time to process and respond to information. It may be more difficult for them to ask for information or help. Adults may tend to ask closed questions or finish people's sentences without giving much needed time or other ways of supporting them to communicate. As a result, children often receive fewer opportunities to engage in conversation.

A significant minority of children with Down's syndrome have social communication difficulties and may meet criteria for dual diagnosis of autism spectrum condition (ASC).

Children and young people may experience a range of difficulties that affect their speech clarity and fluency. Speech skills may follow a different, rather than slower, developmental trajectory with children more likely to use inconsistent pronunciations. Therefore, a proactive approach to implementing graded speech activities is recommended, for example to develop awareness and production of sounds, words and syllables.

Most learners have significant speech, language and communication needs throughout childhood. Activities to support the full range of speech, language and communication needs that individual children experience should be directed by a speech and language therapist.

We worked out a workshop for philology teachers «How to teach languages to children with Down syndrome». It can be provided as an extracurricular activity in the system of postgraduate education.

Perspectives of future researches can be in analysis of children's literature about kids with Down syndrome and working out some tips and practical recommendations for teachers how to work with them.

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**КАЗАЧІНЕР О.**

Харківська академія післядипломної освіти, Україна

### **ОВОЛОДІННЯ МОВНИМ МАТЕРІАЛОМ ДІТЬМИ З СИНДРОМОМ ДАУНА**

У статті розкрито особливості оволодіння мовним матеріалом дітьми з синдромом Дауна. Розроблено сценарій однойменного воркшопу для вчителів-філологів, який можна проводити в позааудиторний час у системі післядипломної освіти.

У дітей з синдромом Дауна часто спостерігаються порушення мовлення, хоча характер їх труднощів з вивченням мови може істотно відрізнятись між особами. Діти виявляють специфічні сильні сторони в сприйнятливій лексиці. Знак та жести можуть підтримувати вивчення словника, а візуальні опори підтримують вивчення мови. Розширене мовне середовище допомагає розвивати словесні здібності. Більшість учнів мають значні потреби у мовленні, мові та спілкуванні протягом дитинства. Водночас, заходи, спрямовані на підтримку повного спектру мовних, мовних та комунікаційних потреб, які повинні переживати окремі діти, повинні керуватися логопедом.

**Ключові слова:** мовний матеріал; оволодіння мовним матеріалом; дитина з синдромом Дауна; учитель-філолог; післядипломна освіта.

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### **DIAGNOSTIC METHODS OF DETERMINING OF WOULD-BE PSYCHOLOGISTS' READINESS TO WORK IN INCLUSIVE EDUCATIONAL INSTITUTIONS**

Proceeding from the literature review and the empiric material the article describes five main diagnostic methods of determining of would-be psychologists' readiness to work in inclusive educational institutions: 'Intolerance-tolerance' (L. Pochebut), social and psychological mindset and instructions (O. Potiomkina), the characteristics of would-be psychologists' sphere of individual and personal relationship (R. Cattell), motivation of affiliation (modification of M. Magomed-Eminov's test), 'Diagnostics of Social Empathy' (L. Zhuravliova). Characterized diagnostics aim to define the person's positive qualities and characteristics in the structure of would-be psychologists' readiness to work in inclusive educational institutions (tolerance; social and psychological mindset and instructions, altruism, effectiveness, liberty and work; emotionality and will, intelligence and communicative abilities; affiliation; social empathy). The diagnostics are important, since in the process of professional activity a would-be psychologist works in an inclusive educational institution, is to take decisions and provide psychological support for a participant of educational process. Participant's behavior does not always coincide with personal views of a psychologist towards a definite situation. Simultaneously, the necessity to act in accordance with the current legislation to limits and corrects practical psychologists' and other participants' of educational process actions while taking decisions on their further correlation. The used diagnostic methods are correlated and mutually supplemented because each method describes only separate aspect person's positive qualities and characteristics in the structure of would-be psychologists' readiness to work in inclusive educational institutions. Thus, their use is reasonable in correlation only.

**Key words:** diagnostic methods; the level of professional readiness; would-be psychologists; the work in inclusive educational institutions.

Problem statement and its connection with important scientific or practical tasks. The Law of Ukraine 'on Education' (2017) and the concept 'New Ukrainian School' (2016) give a particular place to the education within the capacity of people with special educational needs. It stimulates in psychological and pedagogical sciences to find the approaches to work and realize the tasks for the research area. It also touches would-be psychologists' qualitative vocational training to work in inclusive educational institutions. Professional duty of the specialists is a qualified psychological accompany of the participants of educational process in inclusive educational institutions: the adaptation of pupils with special educational needs and them being a participants of the process. The gap in the vocational training of the would-be psychologists in higher educational institutions avoids their further professional activity. The monitoring of the vocational training of would-be psychologists to work in inclusive educational institutions includes the use of diagnostic methods system of the process.

Analysis of the recent researches and publications that describe the aspects of the problem and that are relied on by the author; identification of the previously unsolved part of the problem in general. The literature review analysis proves the fact that despite numerous studies on the specialty 'Theory and methodology of the vocational education', there appears the lack of them on the determining of would-be psychologists' level of professional readiness to work in inclusive educational institutions in particular. Today would-be psychologists' diagnostic methods to implement inclusive education are