

Encouraging Being Active

Activities which many with Down's syndrome enjoy include swimming, canoeing, cycling (on tandem or solo with two wheels or more), dancing, gymnastics, trampolining, football, horse riding, sailing, skiing, cricket, climbing and abseiling, table tennis, boccia. Fulham FC has teams of people with Down's syndrome and have played other similar teams across the world. Other football clubs welcome players with special needs, too. Cricket4Change invites those with Down's syndrome. Wheels for Wellbeing, Cycling for All and All Ability Cycling are widely available in London and nationwide. Disability Snowsport enables all to ski.

Resources:

The Down's Syndrome Association:

www.downs-syndrome.org.uk tel. 0333 1212 300

For dictionary of accessible pictures:

www.peoplefirstltd.com

www.widgit.com

Picture Banks at www.Changepeople.co.uk

Other contacts:

www.fulhamfc.com

www.cricketforchange.org.uk

www.disabilitysnowsport.org.uk

www.StreathamIceHockey.com www.werewolvesoflondon.org.uk

www.seeability.org



downsyndrome OK provides help for people with Down's syndrome, parents, carers and professionals in southeastern England. It is affiliated to the Down's Syndrome Association.

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COACHING A CHILD OR ADULT

WHO HAS DOWN'S SYNDROME

What is Down's Syndrome?

Down's syndrome - the collection of characteristics identified in the 1860s by Dr. Langdon Down and subsequently recognised by Professor LeJeune in Paris as being caused by an extra chromosome in every cell. This is in addition to the 23 chromosomes inherited from each parent giving, as with all of us, their likenesses, abilities and interests. The reason for the extra chromosome is still unknown but is no-one's fault.

It is the extra chromosome that causes the learning difficulties BUT appearance is NO INDICATION of potential ability. Until 1970 children with Down's syndrome were generally looked upon as ineducable whereas, now, most are integrated into mainstream schools. The Down's Syndrome Association (founded in 1970 by Rex Brinkworth MBE, a remedial teacher in Birmingham) has extensive information on teaching and stimulating all with Down's syndrome.

Rewards for Achievements

Many with the condition (not a disease, simply the way they are) are in need of exercise. The gene that tells you and me we are hungry is on the extra chromosome i.e. they have three whereas the rest of us have two. Therefore food is not an ideal reward. Applause, stars or points on charts and plenty of praise will all be effective. Keep repeating the praise for many weeks to ensure continuing achievement.

Guidance on Teaching

Enjoy your pupil. Most have a great sense of fun and will be keen if you catch their enthusiasm. Do this visually - they learn best through their

eyes. Keep instructions clear and simple. If you give more than one instruction they might only remember and act on the last one. Some might only be able to carry out one instruction at a time.

Try to warn your pupil in advance if a change to their programme is foreseen. A sudden alteration could lead to behaviour problems. Avoid slang. Even adults with learning difficulties will often take statements literally as a child does. If several coaches are teaching, agree on your terminology to avoid confusion. Be prepared to repeat the same instruction many times, patiently, with fun. Being over-dramatic can help. Be as practical as possible. Watch that the slower pupil is not the one left with inefficient tools or equipment.

Recognising Limitations

Ensure the light is on your face to help the pupil to see your expression. Many with Down's syndrome have poor sight. (Make sure their glasses are clean). Adjusting when moving from shade to bright, or vice versa, might be slow - watch for steps in doorways. An activity in which the ball goes away (e.g. bowling) rather than has to be intercepted (e.g. tennis) could be more suitable for your pupil. There could be poor eye/hand co-ordination (which may be improved with practice).

Legs are usually short as are fingers plus thumbs are set low. A foot rest to avoid feet 'dangling' will help fine control of fingers and hands. A pupil who is hearing impaired (even temporarily because of glue ear) could be missing words (such as "Don't") or parts of words. Give positive instructions. Nearly half the babies born with Down's syndrome will have had a congenital heart condition. These days, usually an operation will have corrected the fault - check with the pupil or carer.

Care Alert

Muscle tone is often low at birth - hypotonia. Hips could still be slack and ankles weak. There can be looseness at the top of the spine which can lead to damage of the spinal cord - needing URGENT medical attention. The DSA publishes guidance on atlanto-axial instability or subluxation - see DSA website. Although very rare, ensure your team members are aware of the signs. At one time an x-ray was required but this is no longer recommended.

Behaviour

Break each task into very small steps. Sometimes teaching the last step first helps the pupil's comprehension. A pupil who feels the task is too difficult or too boring, or feels unwell, could divert attention from the lesson or 'clam up' and become obstinate. The solution is usually to make them laugh - more fun brings relaxation.

There could be an objection to 'practising' i.e. repeating a task just done. Ask for it in a different place (on the floor?) or using a different colour etc. Be firm and consistent if a pupil is challenging the teacher - as with any other pupil - but consider whether they have understood your requirement. Be aware that your pupil might reply to a question with the answer s/he thinks will please you. Ask another way to check.

Communication

Your pupil could have difficulty speaking and being understood. The brain works more slowly, the tongue is large compared to the size of the mouth and mouth muscles can be slack. Many with Down's syndrome have been taught to sign using Makaton or Signalong, both based on British Sign Language. Poor short-term auditory or working memory makes it difficult to hold words for long enough to process them. If you can hold a sign which they know this can help them to remember the subject being explained.

Many with Down's syndrome are capable readers. However, if you give your pupil printed information, it could be easier to read if in, say, 14 point or larger. There are dictionaries available to add pictures to make information sheets accessible for people with learning disabilities (see below).

Health Considerations

The presence of the extra chromosome does not prevent other conditions or medical problems. There can be, for instance, excess catarrh, thyroid disorder, autism, cerebral palsy, colour blindness, arthritis, diabetes, susceptibility to leukaemia and, in later life, to dementia. A person with Down's syndrome might not be aware of pain, complain of pain or be able to show you accurately where it hurts. Through the Down's Syndrome Association you can raise specific questions with the experts who form the Down's Syndrome Medical Interest Group.