



Speech and language therapy

The role of the Speech and Language Therapist for babies and pre-school children who have Down's syndrome

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It's important to remember that all families and children are unique.

All parents who have a new baby will need time to adjust to their new situation. Many parents will feel some anxiety about their baby having Down's syndrome, which is natural. Some babies will be diagnosed with Down's syndrome at birth, while other parents will receive the diagnosis during pregnancy. Some parents will seek immediate information and support, while others will take time to process any additional challenges their baby may have. Some parents may need to focus their immediate attention on their baby's health.

Families often seek speech and language therapy support when their baby is beginning to use gestures and sounds to communicate.

However, your baby's communication development begins at birth, and your Speech and Language Therapist can help you to support your baby's development from the very beginning.

Early Communication Development

All children are individuals and will progress through stages of development at their own pace. Some children will spend a longer time in each stage. All ages are approximate, and the most important factor is that your child is making some progress.

Birth to six months

In these early weeks and months, your baby will be learning about interaction, eye gaze, paying attention to faces, and joint attention. At first, her communication will be reflexive, such as crying when she is uncomfortable. Over time, this will develop into more intentional communication, when she begins to make sounds or movements to try to tell you something.

You can help your baby by interacting with her and using lots of gestures and facial expressions.

Copy your baby's facial expressions, take turns and be responsive. Make sounds, play, sing to your baby. Most babies who have Down's syndrome will need to be given additional time, repetition, and opportunities to practise. Parents may need to consciously remember to keep talking to their baby who may take longer to respond.



- Your Speech and Language Therapist will offer support from very early in your baby's life, to help you identify opportunities to promote your baby's communication and learning in your daily routine.
- Your Speech and Language Therapist will explain how to interact with your baby, and will advise you on how to support your baby's development from reflexive communication to intentional communication. She will explain how to give your baby additional time to respond, and how to include lots of repetition.
- It is important to seek speech and language therapy in these early days, to promote your baby's communication and interaction skills which are a vital step towards later speech development and will also help to avoid your baby experiencing frustration.

Six to eighteen months

At this stage, your baby will be doing all of the above, plus making more sounds (babbling) and beginning to understand early words. Introduce some signs, such as Makaton signs. Choose high frequency words (words that your baby often hears) and high interest words (words that describe items or actions that your baby is interested in). Use the words and signs in your daily routine, to help your baby to connect the word and sign to the item or action. Don't expect your baby to copy signs or to sign back to you just yet.

- Your Speech and Language Therapist will help you to understand the stages of communication development, and to identify your baby's current stage of development. She will explain the next step in your baby's development and will advise on strategies and activities that you can use at home to help your baby reach the next developmental stage.
- Your Speech and Language Therapist will help you to choose which sounds and words to use with your child and will demonstrate suitable activities to promote your child's vocabulary and speech sound development, as well as continuing to support his communication and interaction skills. She will teach you any new signs that you need.

One to three years

At this stage, your child may be learning to understand and use (say and/or sign) new vocabulary, and to engage in two-way communication exchanges (little back and forth 'chats'). As your child begins to show that he can understand some words and signs, you can identify

and encourage opportunities for him to use signs and sounds within your daily routines and games. Increase the number of signs you are using and focus on just two or three signs at a time. Use lots of repetition. Include story time in your daily routine, as this provides many opportunities for communication and introducing new words.

- Your Speech and Language Therapist will continue to help you to identify your child's current stage of development, and his strengths and challenges, and will explain the next step in your child's development. She will advise on strategies and activities that you can use at home to draw on your child's strengths and help him to reach the next developmental stage.
- Your Speech and Language Therapist will help you to choose which sounds, words and signs to use, and will teach you any new signs that you need. She will explain strategies for allowing your child to take the lead in play, and how to watch your child and name the things that interest him. She will demonstrate simple activities to play with your child and may recommend specific toys or resources. She will advise on picture books to look at with your child and will explain how to make your own books with family and home pictures.
- Your Speech and Language Therapist will work directly with your child at your home, or in the clinic, or at your child's nursery.

Two to four years

At this stage, your child may be increasing his vocabulary (signs and spoken words), and his speech clarity may be improving. He may be beginning to use more meaningful communication.

- Your Speech and Language Therapist will advise you on which new words and signs to practise and how often to introduce new words/signs. She will advise you on which speech sounds your child should practise and will demonstrate suitable games and activities for sound practise. She may provide or recommend specific resources to use with your child.
- Your Speech and Language Therapist will advise you on how to promote your child's attention and listening skills, and his ability to understand language. She will advise you on when and how to start encouraging your child to put two words or signs together to make little phrases (e.g. 'my ball'; 'daddy drink'; 'blue car'). She may recommend turn taking, memory, matching, and early reading activities.
- Your Speech and Language Therapist will work directly with your child at your home, or in the clinic, or at your child's nursery. Your child may be offered individual therapy sessions or may be offered small group therapy sessions with other children who have similar needs.



- Your Speech and Language Therapist will work closely with your child's nursery, and will contribute to his Education, Health and Care Plan (EHCP) sections B, E, F and I, or his Statement of Special Educational Needs.

Feeding development

Feeding difficulties are common in babies and young children who have Down's syndrome, occurring in around 50% of infants.

Many factors contribute to feeding difficulties, and these may include hypotonia, oral-motor coordination, dentition, underlying health concerns such as heart conditions and cows milk intolerance, etc.

- Your Speech and Language Therapist will advise you on how to support the development of your baby's feeding skills, such as weaning, introducing new textures and tastes, chewing, drinking from a cup, drinking from a straw.
- You must contact your Speech and Language Therapist before implementing a new feeding programme (e.g. an oral-motor programme).
- You will be referred to a Specialist Speech and Language Therapist as part of a Multidisciplinary Team if your baby has specific feeding needs, such as difficulties with sucking and swallowing, breathing disruptions, gagging or coughing during feeds, signs of aspiration or reflux, weight loss.

Further reading

Speech and Language Development and Intervention in Down Syndrome and Fragile X Syndrome. Roberts, J., Chapman, R., and Warren S. (2008). Baltimore: Paul H. Brookes Publishing Co.

Supporting Feeding and Oral Development in Young Children. Down Syndrome Ireland and Heart Children Ireland
https://downsyndrome.ie/wp-content/uploads/2018/03/feeding_oral_development.pdf