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WITHOUT DOWN SYNDROME AMONG ROMA PRIMARY SCHOOL STUDENTS

Abstract: Educational services are provided according to the available options, in compliance with the public policies. After the closure of the specialized schools for students with intellectual disabilities, they study in the general education schools in Bulgaria and are dealt with by the state administration. This is also valid for the students with Down Syndrome. It is a real challenge for a teacher in a class with such pupils. And what are the challenges for a teacher teaching in a class with bilinguals under language pressure with a Down Syndrome? In the article are examined these issues, and a low incidence Down Syndrome in pupils in the primary educational stage in the Bulgarian schools is found, and a minimal, almost zero, in schools with predominance of bilinguals from Roma origin, notwithstanding the social and cultural areal. And what are the reasons? Could this be a phenomenon? Should the answer be sought in the medical field or elsewhere?

Key words: students with special educational needs, Down Syndrome, Roma, bilinguals, inclusive, diseases.

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Introduction

The quality of the education systems in the countries of the European Union are reviewed according to different criteria by an independent organization funded by the ministers of those countries. The expectation is for them to be transformed and become more progressive and sustainable. Therefore, all the parties concerned work to improve the inclusive capacity [9]. Working with children and students with special educational needs, in terms of quality of organization of the educational process, is many times impossible. Why is this

happening? If the teacher is not sufficiently qualified to work in a general education class or group with children or students with different learning needs, they will have either a poor-quality interaction with them, or there will be no interaction at all. And what would be the challenge if in their class or group, almost all children are bilinguals under language pressure by the official language, and there are also children with special educational needs?

In the textbook in psychiatry by Goldberg, Bendzhamin and Kriyd (1997) they determine the visibility of disabilities as the main reason for severe

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stigma of the person by their peers. The authors indicate Down Syndrome as an example for intellectual disabilities with visual characteristics of the person. The medical definition of Down Syndrome, according to them, determines the condition as genetic chromosomal disease – trisomy, with visible facial characteristics – round skull, small, with a tongue too large for the oral cavity, eyes-elongated almond-shaped, hypotonia, heart defect, intestinal atresia. They claim that the measured IQ of a person does not place them into the group of intellectually disabled people, but rather the marginalizing factors of the environment contribute to that [5, 232-233]. According to Martin Davis (2008), the daily hindrances and challenges facing the people with learning disabilities are a product of their own intellectual impairment. The author takes into consideration the primary and secondary segregation by the society of such people. For example, people with a stigma of this type are usually discriminated with regards to the educational services provided for their needs. Such services are provided depending on the circumstances, according to the social policies. As a consequence, there is a change of focus from the individual to the functioning of society. This means that the people with learning disabilities are a problem of the state administration [2, 89].

According to science, by Jean Piaget, there are four stages of cognitive development: sensorimotor – up to 2 years, preoperational, concrete operational and formal operational [8, 283]. In the context of education of children and students with special educational needs, the focus of interest is the comparison of those four stages of mental backwardness. The model is of Grossman (1985) and Bojanin (1985), reviewed by Matanova (2003). The IQ achievements of the children in these stages are compared, and according to their IQ results are determined the respective levels of mental backwardness. According to Zamfirov (2019), by the indicated authors, at the formal operational stage there is no degree of mental retardation. This places more specifically the tasks for organization of the educational process in the general education school for work with children and students with intellectual disabilities, among whom are those with Down Syndrome [10, 58-59].

Teaching children and students with special educational needs in the general education school in Bulgaria is regulatory stipulated. The educational institutions for students with more severe disabilities teach those children for whom a written decision for such a separation is issued by an expert multi-disciplinary team. In general, slight and moderate deficits should not be a reason for segregation on the basis of health characteristics, in order to perform the requirements of the regulations for inclusive education.

Another pressing matter today is immigration. This creates challenges for the different educational systems. Children with a different mother tongue are educated in educational institutions of the countries where the immigrants have decided to settle in. M. Matlin (M. W. Matlin, 2009, по Schwartz & Kroll, 2006) in her textbook in cognitive psychology defines the bilinguals as persons, *who actively use two different languages*. Following Gass & Pnemann's concepts, the author points the attention to the fact that people, as a general rule, do not learn a second language by accumulation of words onto their mother tongue's grammar structures. On the contrary, learning a new language represents adoption of a new language system, which she calls interlanguage. Respectively, by use of this system, they can develop their verbal skills related to the rest of the cognitive skills in the creation of constructs, plans and thesis. There are countries where the official system is by- or trilingual, e.g. Belgium, Switzerland, Canada. In our country, by constitution, the main language is Bulgarian, and this places the people with a different mother tongue under language pressure. The topic has been elaborated in science by many authors, as for example Lambert (1990), Peal and Lambert (1962), Bialystok (2001), Rhodest (2005), Campbell and Sais (1995), Hamers and Blanc (1998) (reviewed by M. Matlin, 2009) [6, 141-142].

The main obstacle for bilingual children and students to be provided with education is their pertaining to marginal groups (communities). The authors M. Daneva and M. Nikolova (2020) indicate an increase of 31% of the students in the Bulgarian educational system, who do not complete their primary education, compared to the average level 27% for the European Union [3, 30-34]. The report of the European Council for increasing the effectiveness of compulsory school education of Roma children and the added value from the guaranteed access to professional education for the Roma youths concludes that this percentage for Bulgaria has doubled to 67% for the Roma students in junior-high-school and first high school stage. They leave school before they have become 16 years old [4, 3].

In connection with the performance of the practical pedagogical training of students in study programs for preschool and primary school teachers at Faculty of Engineering and Pedagogy-Sliven, Technical University of Sofia, Bulgaria it was found that in the schools on the territory of Sliven District, students with special educational needs with Down Syndrome are a very rare case. This raises many questions: what is the difference in the intellectual disability in children and students with Down Syndrome? In the foregoing theoretical synopsis, it was found, in the aspect of the intellectual deficit, that a person is not considered to belong to the group of people with intellectual disabilities because of their intelligence, but rather due to the marginalizing

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factors of the environment [5, 232-233]. The students with Down Syndrome with slight and moderate degree of intellectual deficit are taught in general education schools. This is a challenge for a teacher to have such students in class. And what might be the challenge to teach students with Roma or another origin having Down Syndrome? Is there any specificity in their simultaneous manifestation?

Seeking answers to those questions provoked our professional interest to research the incidence of Down Syndrome in pupils from the 1st to the 4th grade in the schools in Sliven district, which is distinctive for Bulgaria with its problems with the marginalized and numerous Roma communities.

The method in the present empirical pedagogical research is the survey. It is used with optimal applicability in connection with the established thesis in the theoretical synopsis [1,101]. According to M. Nikolova and R. Staneva (2019) the skills to create a questionnaire card with appropriate for the responding group questions are significant. They should not be too complicated, nor misleading, or implying subjectivism in the responses. The choice of standardized answers is an effective approach [7, 38]. When carrying out a survey, a questionnaire card with standardized answers is used. The question subject to research is *What is the incidence of students with special educational needs in the general education school in primary education?* The first emphasis in the questionnaire is the number of students with special educational needs with the greatest incidence (the first three), and the second – with the lowest (one). A questionnaire with standardized answers is used in the implementation of the survey method. The research question is *what is the prevalence of pupils with*

special educational needs in mainstream schools in the primary phase of education. The first focus of the questionnaire is on the number of pupils with special educational needs with the highest frequency (the first three) and the second - with the lowest (one).

The total number of pupils in primary school education in the school year 2021/2022 are 7464, according to data of the District Administration of Education. The results obtained from inquiries with the headmasters of the general education schools determined the first three positions with greater incidence hyperactivity with or without attention deficit, followed by autism in the respective spectrum, and intellectual development difficulties at third place. To the question for the lowest incidence of disorders is Down Syndrome. The results are represented in Figure 1.

From the results given in the standardized answers for incidence of disorders/ conditions – the first three positions are occupied by *hyperactivity with or without attention deficit* with 46%, followed by manifestation of *autism in the respective spectrum* with 33%, and at third position are *intellectual development difficulties* with 21%. To the question for most rare incidence of disease from the ones indicated in the tool, the responses were with absolute majority in favour of the Down Syndrome with 89% of all answers.

An interesting result from the analysis of the survey is the fact that with zero incidence stood out the schools either in small settlements with predominant Roma population, or in town schools where the majority of students in class (around and over 80%) are of Roma origin.

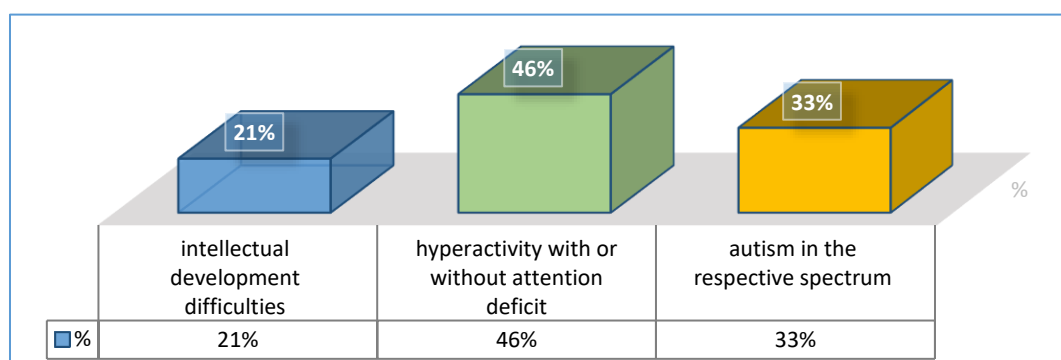


Figure 1. The most commonly manifested diseases

Conclusion

The Down Syndrome is a genetic disorder within the scope of the intellectual deficit and the grading of the deficit corresponds to the first three stages of children's development according to J. Piaget. This is valuable data for the preparation of teachers and their inclusive professional skills.

A student with Down Syndrome is not placed in the group of students with intellectual disabilities because of their intelligence, within the meaning of intellectual deficits, but rather due to the marginalizing factors of the environment. The educational services are provided according to the circumstances, i.e. the public policies, therefore we

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reckon that the students with intellectual difficulties in learning do not receive adequate to their learning condition education by including them into the curriculum of the general education school.

Our pedagogical competence allows us to ascertain low incidence of Down Syndrome in pupils in the primary stage of education in the Bulgarian

school, and a minimal, close to zero, in schools with over 80% of students-bilinguals from Roma origin.

And what are the reasons for that?

Could this be a phenomenon?

Should the answer be sought in the medical field or elsewhere?

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