

Kids vs disabilities



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Down syndrome affects many people in this world. Not only does it affect the person diagnosed as Downs, but it also affects their family and everyone around them. There are physical characteristics that help you identify somebody with Downs. There are also some health concerns that you need to worry about. In this essay I will give you a clearer understanding of what Downs syndrome is, and what it means to have Downs. Down syndrome can be caused for three different reasons. The most prevalent reason is called trisomy 21. This means that rather than having 46 chromosomes you have 47.

This is the cause for approximately ninety-five percent of the people affected by Down syndrome. The extra chromosome is usually found on the twenty-first pair. The next cause only affects 1 percent of the Downs population. It is known as mosaicism. This is caused from an error during cell division right after conception has occurred. It has been seen that with mosaicism some of the cells have 47 chromosomes while other cells only have 46 chromosomes. The last reason can be traced back to the parent's. It is known as translocation.

The twenty-first chromosome is translocated on to another chromosome. The parents could be carrying the chromosome that translocates. This form of Down syndrome affects only 3-4 percent of the people living with Downs. There are some health concerns that you should also be aware of when dealing with someone with Downs syndrome. It has been found that between sixty and eighty percent of people with Down syndrome has a hearing deficit. If you were dealing with a young Downs syndrome child it would be a good idea to have their hearing checked.

It is also common to have a congenital heart disease. Unfortunately many children need surgery and will be under a doctor's care their whole life. Children with Down syndrome are more likely to have problems with their vision than other children. A lot of children with Down syndrome have cataracts at birth that need to be removed. Due to the fact that intestinal abnormalities is also more common in children with Downs, one of two things occur. Either they do not eat and fail to get the nutrition they need as infants, or they tend to focus on food and have a problem with obesity.

Another contributing factor to this could be the fact that Down children are also more prone to thyroid dysfunctions. This could also affect their central nervous system so it needs to be monitored closely. Some other problems that may occur but are not as likely are: leukemia, seizure disorders, skin disorders, sleep apnea, and early onset of Alzheimer disease. I work very closely with an adult with Down syndrome. I personally see many of these things affect her everyday. Medication can help most of the disorders, but even so, it seems like your life is then controlled by the times that you have to take medication.

On the other end of the spectrum, I have found people with Down syndrome to be very loving, and ask nothing more of you than your friendship. To me, this quality makes them very special people. There are some physical characteristics that would help a doctor to identify a child affected by Down syndrome. I think the most prevalent is that of a "flat" face. It appears that they do not have the same curvature on their face as we do. It seems to be flattened. Next, would be that the back of their head is also flattened. It goes straight down rather than having a curve to it.

They also have smaller ears, decreased muscle tone, smaller mouth, a gap between their first two toes, and skin folds in the corner of their eyes. None of these physical features causes any disability or decreases their function. In personal experience I have found that people with Down syndrome also have an enlarged tongue. Because of this they let their tongue hang out of their mouth a lot. Like most things if you start early it can be corrected. In one instance that I have seen, as soon as the child started sticking out her tongue the mother would gently put it back in her mouth.

She continued to do this until the child no longer let her tongue hang out of her mouth. If you start to work with Down syndrome children when they are young they seem to go further in life. Children with Down syndrome need just as much attention as other children, and enjoy the same things as other children. Children with Down syndrome must be taught individually though according to what their strengths and weaknesses are. They use certain meetings in order to set their new goals and to see what the child has achieved.

The first one is known as the Individual Education Plan (IEP). This will decide what type of education the child will get and how it will be taught. Next is the Individual Family Service Plan (IFSP). The family plays a large role in the child's development and these meetings show the parents how they can be more involved and help in the child's learning. This will continue through their whole life. When they become adults they will have what is known as an Individual Service Plan (ISP). This occurs once a month.

The adult with Down syndrome sets their own goals, sees what goals they have met, and decides where they want to go from there. As you can see a person with Down syndrome may entail more of your time and energy, but in my experiences I have found it to be worth the time and energy. They are very loving people that deserve a chance in life just like everyone else. Just remember they have to work twice as hard to get half as far in life as you do. So maybe there is something we can learn from them like how to appreciate the little things, while still doing our best in life.