

The role of early detection in developing verbal communication (Oral language) in kindergartens for children with an autism spectrum disorder

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Abstract :

The current study aims to reveal the importance of early detection of children with autism spectrum in kindergarten and its role in developing verbal communication (verbal language) in this category. In addition to demonstrating the importance and necessity of early intervention for the aforementioned group to improve their communicative abilities, by comparing the results of cases with cases of late detection, and thus providing models for early and late detection. Accordingly, we will rely in this study on the application of the oral language test (ELO) on a sample of four children with autism spectrum, two of whom are integrated into kindergartens who were detected early, and the other two are unintegrated and were detected late. The results revealed that autism spectrum children who were integrated into kindergartens with early detection had better verbal communication performance compared to those who were not integrated and were detected late.

Key Words: early detection, autism spectrum, kindergartens, integration, verbal communication.

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Introduction :

The growing interest in Autism Spectrum Disorder, the impact it has on the family of affected individuals, and the treatment and support it requires in daily life, are all factors that make autism spectrum disorder - today - a topic of great interest to most researchers in all their specializations, and Those interested in public health and human rights, (APA, 2000). According to the American Psychiatric Association (APA, 2013), autism spectrum disorder is a unique unit, as its diagnosis is based on the following criteria:

- (a) Persistent impairments in communication and social interaction that are not explained by a general developmental delay;
- (b) A limited and/or repetitive list of behaviors, activities, and interests؛
- (c) Symptoms appear from early childhood (but may not fully manifest until after social demands exceed the limited abilities of the autistic child);
- (D) Difficulties and limited activities in the child's daily life.

The aforementioned behavioral symptoms are closely related to several cognitive deficiencies, such as language deficiencies, problems in executive control, great difficulty in eliciting mental states of other individuals, and a tendency to focus on details rather than what is general (Kenworthy et al., 2011).

Where the first years of a child's life are important and influential in all developmental forms, and accordingly, specialists confirm that the early experiences of the child affect his development and later learning. Therefore, it is advisable to integrate the child in his early years in kindergarten to develop his skills in all areas. The objectives of education in kindergartens are not separated from the objectives of education in general, as if education aims to build a good individual who contributes to the development of his country with an integrated personality, then the educational role of kindergartens is to develop the child's personality in terms of physical, kinetic, linguistic and social aspects.

Kindergartens are educational and social institutions that seek to rehabilitate the child properly to enroll in primary education so that the child does not feel the sudden transition from home to school, and the ages of children at this stage range from two and a half to six years (and it can be less), in At this stage, the normal and abnormal child is detected, as well as children with special needs. It is possible to talk about early detection, which generally begins in the child's environment, at home, or where he was brought up in the early stages of his life. Often parents or specialists in early childhood centers (kindergartens) carry out the task of detecting, as the child shows some behaviors and habits that are inappropriate for his normal age in the following areas:

-Language skills: such as speaking and understanding spoken language ;

- Cognitive skills, memory, and motor skills and the ability to use them in coordination with the other senses ;
- Listening and concentration skills in different circumstances ;
- Ability to think and solve problems ;
- In addition to some general behavioral aspects ;

The autism spectrum is one of the most common disorders that can be detected early in kindergarten, as it appears in the first years of a child's life. According to the American Psychiatric Association in 2000, autism appears in its basic manifestations in the first thirty months of life, and its disorders include Both the rate of growth and development, response to sensory stimuli, and language. Although impairments in language abilities are only part of the diagnosis of autism spectrum disorder, practitioners and researchers often distinguish between low-functioning autism (with an IQ of less than 65 or 70) and high-functioning autism (with an IQ greater than 65 or 70), and although neuropsychological deficiencies are not a criterion for diagnosis, many individuals with autism spectrum disorder show significant cognitive deficiencies (Habib et al, 2019).

Among the first studies on autism, we find the study of Kanner, 1943, which looked at autism as a disorder that affects the child in his early childhood, and that the most important characteristic of it is his weakness in establishing relationships with others, and a failure in language and cognitive skills, in addition to the study of Asperger, which viewed autism as a failure to develop appropriate language and establish relationships with others. (Ghanèm, 2016, p.10).

Communication is considered one of the main criteria in diagnosing autism, especially linguistic communication, which is defined as the use of words as symbols to express needs, thoughts, and feelings between people. Communication is considered a sophisticated human behavior because it distinguishes man from other creatures using speech and language (Al-Sartawi, 2000, p. 419).

Studies have shown that the main problem of autism is related to communication, whether verbal or non-verbal communication, so 'Ghalèm' indicated in her study entitled (Linguistic and non-linguistic communication in the autistic child, a proposal for a therapeutic communicative program that guarantees - a case study of two cases suffering from autism), that the child Autism suffers from weakness in language communication. (Ghalèm, 2016).

In the same context, Laajal conducted a study entitled (The Impact of Linguistic Production and Comprehension Skills on the Effectiveness of Communication for the Autistic Child), and one of the results reached is a strong relationship between language production and communication effectiveness for the autistic child, and accordingly, the autistic child suffers from a problem In better expression and use of linguistic symbols and a lower percentage of linguistic understanding. (Laajal, 2016).

Since language is the first tool for expressing ideas, through it the theories and laws that run life are understood, and through it, we can understand and influence others, the child receives knowledge through the language that he acquires automatically by hearing and repeating the words of those around him (Wafi, 2003, p. 23), it is very

important, and in this regard, “Zineb Shukair” indicated that the oral language is a means of transmitting a message from the source to the recipient, and this word is spoken, and the receiver perceives it through the sense of hearing (Ali, 2001, p. 164). Studies conducted on autistic children regarding their oral language indicate that there is a weakness and sometimes a complete absence of oral language in this group. Among the studies, we find the “Berioir” study in 1990, which stated that more than half of autistic children do not speak Throughout their lives, as for the rest of those who can speak, language disorders appear to them clearly and severely, and the study of Swinks and others in 1996 indicated that autistic people are greatly affected by the absence of language, and even in the case of its presence, they will be late and turbulent, which has the consequence It has to delay their skills of social adjustment, and their participation with others, especially in spontaneous playing situations. (Ezoghbi, 2015).

Therefore, early detection is extremely important, in the later treatment process for this category of children, autistic children. A child whose strengths and weaknesses are identified at an early stage will benefit directly from the services provided by care and maternity centers and kindergartens, and then preventive steps can be taken and Procedural follow-up to prevent the transformation of a simple difficulty into a permanent disability that accompanies the child in all stages of his life, hence the importance of early detection, in order to deal with the phenomenon in its time, and not to reach a stage where treatment programs are unable to achieve their goals.

And speaking of early detection, or talking about an early intervention that would develop the child’s skills, early intervention programs can start at any time after birth and up to the school stage, but the more they start at an earlier stage, the greater their positive impact in various fields. (Mohammed Ziyad, 2004, pp. 139-160).

In order for children with autism spectrum to master the basic skills that their ordinary colleagues master, they need early intervention from specialists, and therefore early intervention is a set of methodological ways and scientific steps to be taken, as it begins immediately after confirming the diagnosis, it is limited to parental guidance In order to promote the sensory-motor development of the child, through exercises related to vision and growth in general to alert the child. As a second stage, motivating the child to acquire several concepts that serve as the correct foundations upon which the language system used in the child's environment is based, in order to form multiple cognitive structures within the framework of cognitive acquisition and learning. In the second year of life, children begin to walk and can handle things with greater skill, and there is an exponential increase in language and functional understanding; Expressive language moves from the first associative features to the word and the beginning of the syntax, and this was indicated by a study (Lorde et, RisiPickles, 2004), where he tracked children who were initially diagnosed with autism at the age of two and who received early intervention and found that 14-20% of this sample were nonverbal (meaning using less than five words per day), and at the age of nine, subgroups of verbal children with autism were identified based on language measures; Some children did not display language deficits, and other children showed impairments in grammatical skills with relatively simple

vocabulary skills similar to those of children with specific language impairments. In the same context, we find a study by "Zineb Mohammed" (2009) entitled the impact of early intervention on the linguistic development of children with an autism spectrum disorder in the Kingdom of Saudi Arabia in the Eastern Province (Dammam). The study aimed at evaluating the impact of early intervention on language development and addressing some manifestations of language and communicative deficiencies in children with autism. To achieve the goal, the researcher used the experimental method, on a sample of 50 autistic children. The researcher concluded that there is an improvement and linguistic progress in autistic children (and statistically significant) after the application of the program, and to explain the behavioural symptoms that appear in individuals with autism spectrum disorder, based on the point of view of cognitive psychology, several explanatory models have been proposed, which are reflected in the following theories:

1. The theory of mind deficit theory:

The theory of mind deficit theory asserts that individuals with autism spectrum disorder do not have the capacity for what we might call mentalization, or are unable to establish mental states for themselves and are unable to elicit mental states from other individuals (Baron-Cohen et al, 1985).

2. The weak central coherence theory:

The theory of weak central coherence asserts that individuals with autism spectrum disorder show a qualitatively different style of information processing, as these individuals tend to focus on molecules or information related to details of objects or situations and their processing (local processing) instead of paying attention to its general meaning (processing global) (Frith, 1989).

Tafrith and her colleagues believe that the primary or basic cognitive disabilities that children with autism spectrum disorder suffer from, are mainly due to their lack of what she called "weak central coherence", which is the ability that develops in normal children gradually and pushes them to collect and organize the information obtained from the surrounding environment, in order for the individual from them to provide a comprehensive explanation and understanding of the situations he faces, by reading others' thoughts, intentions, gestures, and other important environmental cues. (Valeri sepernoza, 2009)

3. The executive dysfunction theory:

The theory of executive dysfunction in autism is among the most important explanatory models that have succeeded to a large extent in explaining the non-social manifestations of autism spectrum disorder, mainly represented in the cognitive and behavioral dimensions together. The pioneers of this theory see that all the abnormalities that appear in individuals with autism spectrum disorder are closely related to the presence of imbalances in one of the components of executive functions such as planning, restraint, mental flexibility, monitoring, subjectivity, organization, and working memory. (Hill, 2004)

In support of this theory, Damasio and Maurer (1978) have noted that the symptoms that appear in individuals with autism spectrum disorder are similar to

the behavioral symptoms shown by individuals who suffer from an injury at the frontal lobe level.

Executive functions constitute a broad structure, as there is no single and unified definition for them, and in general, executive functions represent the Umbrella term for many capabilities such as planning, initiative, transformation, problem-solving, monitoring, self-control, Braking, and working memory. (Chan et al, 2008, jurado and Rosselli, 2007)

Therefore, the current study came to reveal the importance of early detection of children with autism spectrum in kindergarten, and its role in developing verbal communication (verbal language) for this group, in addition to clarifying the importance and necessity of early intervention for this group to improve their communicative abilities by comparing the results of their cases. In cases of late detection, thus providing models for early and late detection.

So we ask the following question:

Does early detection of children with autism in kindergarten have a role in developing verbal communication (verbal language)?

Hypothesis:

Early detection of children with autism in kindergarten has a role in the development of verbal communication (verbal language)

Approach :

In this study, we relied on the descriptive approach based on the case study, as it is the most appropriate for the current research.

The sample:

The sample consisted of four children with autism spectrum aged between 6 and 8 years, in the unit of detection and psychological and pedagogical follow-up in Mostaganem.

Sample properties:

The sample characteristics are summarized in the following table:

Table1. Characteristics of the study sample

	case	sex	Age	type	degree	detectio n age	Detectio n type	Join Kinder garten	schoo ling
Cases of early detection integrated in kindergarten	1	M	7	autism spectru m	mediu m	1	early	Yes	Yes
	2	M	6.5	autism spectru m	mediu m	2.5	early	Yes	Yes
Cases of late detection not integrated in kindergarten	3	M	7.5	autism spectru m	mediu m	4	late	No	No
	4	F	6.5	autism spectru m	mediu m	4	late	short	No

4. Study tool:

ELO Oral Language Test:

•Definition of scale:

The test was designed by "Abdul Hamid Khomsi", and measures oral language ability in children. It was adapted to the Algerian environment by "Addie Dalila" in 2017 in the framework of a Ph.D. thesis. The test is applied individually, the instruction is given orally on the cases and the answer is written in a paper answer.

The test measures six dimensions:

*Lexicon: It consists of items that study the lexicon at the level of reception and production.

٤,١ **The lexical reception:** It consists of 20 boards directed at children of the category (5 years and 3 months-10 years and 3 months), where the child is asked to point to a specific picture using the following instruction: "Show me the desired picture."

٤,٢ **Scientific production:** This sub-test consists of two parts:

The first part: consists of 50 pictures and the child is asked to name this picture, which is divided into the following age groups:

-The first 20 images are for children from 5 years and 3 months.

The picture from 1 to 32 is intended for children of the age group (6 years and 3 months to 8 years and 3 months.)

-All items represented in 50 images were directed to children from 9 years and 3 months to 10 years and 3 months.

The instruction: "What is this"?

The second part: It consists of 10 pictures present in the test booklet that represent actions, and the child must answer the question: What should he do?

This set is suggested for children from 5 years and 3 months to 8 years and 3 months immediately after the first part.

The instruction: "What does he do"?

٤,٣ **Repetition of words:** It consists of 32 items.

The instruction: "I repeat what I say, you must listen carefully because I will say it only once."

4.٤ **Understanding:** The test consists of 32 items that include pictures. The items are divided into two groups:

The first group: consists of 21 items intended for children from 5 years and 3 months to 8 years and 3 months.

The second group: consists of 11 items intended for children from 9 years and 3 months to 10 years and 3 months.

The instruction for the first show: "We will have fun together, listen carefully and show me the picture that contains the word I am going to say to you.

The instruction for the second Show: "Listen carefully to what I am going to say and show me the picture that contains the word I am going to say to you.

4.٥ **Production of phrases:** It consists of 25 items divided into two groups.

The first group: consists of 16 items intended for children from 5 years and 3 months.

The second group: it consists of all the items, meaning 25 items that children from 6 years and 3 months to 10 years and 3 months answer.

The instruction: "I will show you pictures as you complete the word".

4. ٦ Repeating Phrases: This sub-test consists of 15 phrases that children of 5 years and 3 months answer.

The instruction: "Take back with me what I am going to say".

Score: 1 point is given for the correct answer and 0 for the incorrect answer.

5. Presentation and analysis of the results:

5 ١. Presentation of the results of autism spectrum children with early detection and integrated in kindergartens

5 ١, ١. Presentation of the results of the first case:

Quantitative analysis:

Table 2. Results of the first case in the oral language test for autism spectrum children with early detection integrated in kindergarten

items Score	Lexical reception /20	Lexical production /42		Repeat words /32	comprehensio n /21	Phrase producti on /25	Total /140
		(٣٢/١)	(١٠/٢)				
Score	11	٣٢	٠٨	٢٤	١٦	١٦	١٠٧
		40					
Percentage	55	١٠٠ %	%٨٠	%٧٥	%٧٦,١٩	%٦٤	٧٦,٤٢ %
		%٩٥,٢٣					

Qualitative analysis:

Through what was presented in Table No. 02, it is clear that the linguistic balance of the first case of autism spectrum children with early detection integrated in kindergarten was good, given the lexical results represented in the lexical reception items, which were above the average by 55%, and lexical production Which was good, as I got a score of 40 out of 42, which is equivalent to 95.33%, which is a very good rate for this category of children. As for the item repetition of words, we see that the case did not face difficulty in repeating the words, as it obtained a score of 24 out of 32, which is equivalent to a success rate estimated at 75%, which is a good percentage, and the same is the case with the understanding item, we find that the case did not face any difficulty in an item Understanding, as its success rate was estimated at 76.19%, which is a good rate. We also find that the case was able to produce phrases, as it was able to produce 16 phrases out of 25 by 64%, and this is good. While the overall success rate in the selection was estimated at 76.42%, which is a good percentage indicating a good linguistic balance among children on the autism spectrum.

5 ١, ٢. Presentation of the results of the second case:

Quantitative analysis:

Table 3. Results of the second case in the oral language test for autism spectrum children with early detection integrated in kindergarten

items Score	Lexical reception /20	Lexical production /42		Repeat words /32	comprehens ion /21	Phrase production /25	Total /140
		(٣٢/١)	(١٠/٢)				
score	١٠	١٣	٠٧	١٦	٠٧	١٢	٦٥
		20					
percentag e	٥٠	٤٠,٦٢%	٧٠%	٥٠%	٣٣,٣٣%	٤٨%	٤٦,٤٢%
		٤٧,٦١%					

Qualitative analysis:

Looking at the data in Table 03, we find that the second case of autism spectrum children with early detection who are integrated in kindergarten has a good linguistic repertoire, as it obtained 10 points out of 20 in the lexical reception item, which is equivalent to a success rate of 50%, which is a good percentage, as for the lexical production item, where we find that the case obtained a success rate estimated at 47.61%, which is close to the average and acceptable for children of the autism spectrum. As for the item repeating words, the results showed that the case did not face great difficulties in repeating the words, as it obtained 50 %, which is a good percentage, given the results related to the production of phrases, we find that the case may have encountered some difficulty, but not to a great extent, as it obtained 12 points out of 25, which is equivalent to 48%, which is an acceptable average rate for this category of children.

Regarding the results of the case in the test as a whole, we find that the case obtained a score of 65 out of 140, with a success rate of 45.42%, which is a medium and very acceptable rate for children on the autism spectrum.

5.٢ Presentation of the results of autism spectrum children with late detection and who are not integrated in kindergarten:**5.٢.١. Presentation of the results of the first case:****Quantitative analysis:****Table 4.** Results of the first case in the oral language test for autism spectrum children with late detection who are not integrated in kindergarten.

items Score	Lexical reception /20	Lexical production /60		Repeat words /32	comprehensio n /21	Phrase production /25	Tota l /140
		50/	/10				
score	0	0	0	0	.٣	.	٣
		0					
	0	0	0	0	١٤,٢٨%	.	

percentage		0				٢,٠% ١٤
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Qualitative analysis:

Through the results presented in Table No. 04, it is clear that Case No. 01 of the autism spectrum children with late detection who are not integrated in kindergarten has a very poor linguistic repertoire, as the success rate of the case in the oral language test did not exceed 02.14%, and given To the results of both the lexical reception and lexical production, as well as the repetition of words and the production of phrases, we find that the case was not able to achieve any point, and this indicates the severe poverty in the lexicon. As for understanding, we find that the case faced difficulty at the level of this item, as its success rate in the item did not exceed 14%, which is a very weak rate.

5.٢.٢ Presentation of the results of the second case:

Quantitative analysis:

Table 5. Results of the second case in the oral language test for autism spectrum children with late detection who are not integrated in kindergarten.

items Score	Lexical reception n /20	Lexical production /60		Repeat words /32	comprehensio n /21	Phrase productio n /25	Total /140
		50/	/10				
score	١	٢	٠	١	٠,٣	٠	٧
percentage	٥%	٦,٢٥%	٠	٣,١٢%	١٤,٢٨%	٠	٥,٧١%

Qualitative analysis:

Through what was presented in the table, it is clear that the case has a poor linguistic repertoire, as its success rate was estimated at 5.71%, which is a very weak percentage. We also find that the case encountered difficulty in the various items of the test, such as the lexical reception, where it obtained a rate of 5% in this item, which is very weak. The prominent difficulty that the case faced was at the level of the item repetition of words and the production of phrases, where its success rate in the item repetition of words reached 3.12% with only one point, while it was unable to produce not a single phrase. As for understanding, the case obtained a success rate estimated at 14.25%, which is a weak rate also.

5. ٣ Presentation of the sample results in the oral language test:

Quantitative analysis:

Table 6. The results of the study sample in the oral language test.

	cases	lexical reception		lexical production				repeating words	
				1		2			
		Poin t	%	Point	%	Poin t	%		
Cases of early detection integrated in kindergarten	1	11	٥٥%	٣٢	١٠٠%	8	80%	24	75%
				95.12%		40			
	2	10	٥٠%	13	40.62%	7	70%	16	50%
				47.61%		20			
Total		21	52%	60		71.42%		40	62.5%
Cases of late detection not integrated in kindergarten	3	0	0	0	0	0	0	0	0
				0		0			
	4	1	5%	2	6.25%	0	0	1	3.12%
				4.76%		2			
Total		1	2.5%	2.38%		2		1	1.56%

	cases	understanding		Phrase production		Total	
		Point	%	Point	%		
Cases of early detection integrated in kindergarten	1	16	76.19%	6	64%	107	76.42%
	2	7	33.33%	12	48%	65	46.42%
Total		23	54.76%	28	58%	172	61.42%
Cases of late detection not integrated in	3	3	14.28%	0	0	3	2.14%
	4	3	14.28%	0	0	7	5.71%

kindergarte n							
Total	6	14.28 %	0	0	10	1.78%	

Qualitative analysis:

Based on Table No. 06, it is clear that the performance of the group of autistic children with early detection and who are integrated into kindergarten in the oral language test is much better than the performance of the category of autistic children with late detection who are not integrated into kindergarten, where we see that the success rate of the first category amounted to 61.42 %, which is a good percentage for children of the autism spectrum, while the success rate of the second category did not exceed 02%, which is a very weak percentage.

By comparing the results of the two groups in the various test items, we find a significant difference in the results of the lexical reception item. The group of autistic children with early detection who are integrated into kindergarten had a success rate estimated at 52.5%, which is a good percentage compared to the results of the category of children with late detection who are not integrated into kindergartens whose success rate did not exceed 3%. The same applies to the lexical production item, where there was a big difference between the two categories in favor of the first category, with a success rate estimated at 71.42%. As for the item repetition of words and the item producing phrases, the results show that the children of the second category faced great difficulty at the level of these two items and their success rates did not exceed 02% in the item repetition of words, while the cases were unable to answer the item of producing phrases, unlike the children of the first category, whose success rate at the level of this item was 56%, which is a good percentage for children on the autism spectrum.

6. Discuss the results:

Through the results of the sample members in the oral language test (ELO), and in the light of quantitative and qualitative analysis, it was found that the autism spectrum children with early detection who are integrated into kindergarten have a rich linguistic repertoire compared to the autism spectrum children with late detection who are not integrated into kindergarten. Through the results obtained, we find that the children of the first category were able to pass most of the test items easily, as the images were familiar and circulating, although this does not prevent the presence of some distortions related to syntactic pronunciation in some cases.

Returning to the same previous data, we find that children with early detection integrated into kindergarten have a good lexicon. Concerning naming, we noticed that the cases were able to name most of the pictures as well as using verbs correctly in the items related to lexical production compared to children with late detection who were not integrated into kindergarten, as their results were very weak, and the same observation regarding the lexical reception item.

As for the phonological aspect, we find that children with early detection integrated into kindergarten have very acceptable phonological competencies, and this is what

their results showed in the item repetition of words, where we find that this first category can produce phrases and use nouns and verbs with some grammatical and structural errors, which is considered good for this group compared to the group of children with late detection who are not integrated into kindergarten who were unable to repeat words nor produce phrases. This confirms the effective role of kindergarten centers and their contribution to early detection and therefore early intervention and its role in improving the abilities of the autistic child in several areas, as many studies confirmed its effectiveness, similar to the RisiPickles study (Lorde, 2004), where he followed up on initially diagnosed children with autism at the age of two years who received early intervention, and it was concluded that 14-20% of this sample were nonverbal (ie using less than five words per day), and at the age of nine, subgroups of verbal children with autism were identified based on language scales. Some children did not display language deficits, and other children showed impairments in grammatical skills with relatively simple vocabulary skills similar to those of children with specific language impairments.

Considering that the autistic child suffers from a weakness in communication (verbal or non-verbal), which was confirmed by most studies, such as the study of Ghalèm entitled "Language and non-linguistic communication in the autistic child - a proposal for a therapeutic communication program to ensure a case study of two cases with autism), Which concluded that the autistic child suffers from impairment in language communication. In addition to a study conducted by "Laajal" entitled "The Impact of Production Skills and Linguistic Comprehension on the Effectiveness of Communication in the Autistic Child), the study concluded that there is a strong relationship between language production and the effectiveness of communication among the autistic child, and we conclude from this that the autistic child suffers from a major problem in Better expression and use of linguistic symbols with a lesser percentage of linguistic comprehension. Therefore, early detection has become an urgent need to reveal the weaknesses of this group to correct them with early and optimal intervention.

Based on our findings, as well as the results of previous studies, it can be said that early detection of children with autism spectrum in kindergarten has a role in the development of verbal communication (verbal language). Early detection means early intervention, and this is what Zinèb Mohammed's study concluded in (2009) entitled the impact of early intervention on the linguistic development of children with an autism spectrum disorder in the Kingdom of Saudi Arabia in the Eastern Province (Dammam), where the study aimed to assess the impact of early intervention on language development and treatment Some aspects of communicative language deficits in children with autism. To achieve the goal, the researcher used the experimental method, on a sample of 50 autistic children, and the study concluded that there is a (statistically significant) linguistic improvement and progression for autistic children after the application of the "Teatch" program. In the end, it becomes clear that early detection is extremely important in all cases. Early detection means early intervention that will reduce the severity of the remnants of disability or disorder at all levels.

7. Conclusion:

Early detection of people with special needs remains one of the most important steps that pave the way for the effectiveness of treatment in various fields. Early detection leads to early diagnosis, as well as an early intervention that would limit the development of remnants of disorder or disability. Since early detection requires specialized qualifications to confirm it, which may not be available anywhere, talk about autism spectrum disorder in particular as a developmental disorder that appears in the early years of a child's life, where the child at this stage is often in the home or family environment, this will delay the early detection process. But with the emergence of kindergarten centers, it has become possible for early detection, especially as the child goes out of his family environment to the outside world, where he comes into contact with his colleagues and specialists in the field of education. Therefore, kindergartens have a major role in the early detection of children with autism spectrum for early and optimal intervention for the aforementioned category to reduce the severity of the remnants of the disorder and remedy the deficit in various aspects, especially interaction and social communication.

Recommendations:

- Enhancing parents' awareness of the importance of integrating children into kindergarten, to link the child with his colleagues from the outside world to ensure his interaction and communication.
- The necessity of providing psychological, educational, speech therapy, and medical follow-up in kindergarten centers, as they receive a very sensitive age group.
- Coordination between the family, kindergartens centers, education, training, and rehabilitation centers for people with special needs within the framework of early intervention.

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