

THE EFFECTIVENESS OF VISUAL MEDIA IN INCREASING SELF-DEVELOPMENT ABILITY TOWARD CHILDREN WITH MILD MENTAL RETARDATION

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ARTICLE INFO	ABSTRACT
<p>Article history:</p> <p>Received 12/03/2021 Approved 20/07/2021</p> <hr/> <p>Keywords:</p> <p>Structured learning approach Visual media Self-development skills Lightly visually impaired children</p>	<p>Abstract: Research aims to prove the effectiveness of visual media to improve self-development skills in children with mild visual impairment. The ability to do self-development is still low, so training requires a structured defense approach with visual media in picture cards. The research method used in this study is a class action. The class-action study intended by researchers is a group of children in the guesthouse Bhakti Luhur Malang Foundation in 4 children who have a mild visual impairment. The purpose of this study is the improvement and change in achieving more optimal results. The results showed an increase in scores. In the first cycle, the performance test results scored 62.5% and observation results of 60.2%. In the second cycle, the child's ability inside by achieving a score of 77.7% and observation results of 79 %. Thus, it shows that a structured learning approach with visual media can increase self-development in lightly visually impaired children.</p>

INTRODUCTION

Mild mental retardation children are part of the Children with Special Needs. Mild mental retardation children have intellectual limitations or children identified as having a low level of intelligence (below average). They require special assistance or services to carry out their developmental tasks, including education and guidance programs. Wasielewski (2016) argues that students with special needs have more tremendous obstacles than normal children, therefore with this difference, their success in academics requires further examination. They have difficulty learning new things, especially abstract or related concepts, and difficulties or problems with short-term memory (Sukoco, 2009).

The American Association of Mental Retardation proposed a new opinion in Special Education in Ontario Schools (Agustina, 2021). They say that mild mental retardation children still have academic abilities equivalent to regular children in grade 5 Elementary School. However, the cognitive development of mental retardation children stops at the concrete operational stage.

From previous studies carried out, it can be concluded that mild mental retardation children have slow development. However, they can still be guided and trained according to the child's ability to absorb the information. They are also provided to be practiced in everyday life and value in the continuity of life and still have potential that can be improved to the maximum even though it is not perfect. For that, they need both physical and non-physical facilities so that they can develop optimally. Therefore, self-development learning needs to be given to mental retardation children to provide provisions for the future. In addition, self-development learning that is trained intensively carried out every day repeatedly with the help of caregivers through examples and image/visual media can help prepare them to return to their families and integrate with the community.

METHOD

The research method used in this research is Classroom Action Research. Classroom Action Research describes the cause and effect of treatment, describes what happens when the treatment is given and describes the entire process from the beginning of the treatment to the impact (Arikunto, Suhardjono, & Supardi, 2015). In the classroom action research, the researcher meant the group of mild mental retardation children at the Wisma Bhakti Luhur Foundation, Malang. The researcher chose the type of classroom action research because it considers several reasons: Classroom action research has characteristics and benefits that follow existing needs or problems to improve, and changing training to achieve more optimal results.

The design used in this study is the model proposed by Kemmis & Taggart (1988). This design is a further development of Kurt Lewin's model. The research design was used because this research was not carried out by one person alone but was carried out collaboratively by involving various parties, as the implementer of the action and the researcher (Sanjaya, 2009). The Kemmis &

Taggart (1988) design or model can include some cycles, each consisting of the following stages: planning (plan), implementation and observation (act & observe), and reflection (reflect). These stages take place repeatedly until the research objectives are achieved.

The subjects in this study were four mild mental retardation children in several Wisma Bhakti Luhur Foundation Malang. These mild mental retardation children were identified as having low self-development skills even though they had been taught several times. Data collection techniques are the most strategic step in research because the primary purpose of research is to collect data (Sugiyono, 2013). Data collection techniques in this study can be in the form of tests and observations.

RESULTS

It is known that the average pre-test score is 62.5%, so it can be concluded that the ability to brush the teeth of mild mental retardation children in pre-test activities is in the category of not being able to / not yet independent. By looking at the table of pre-test scores, it can be seen that all children need treatment by brushing their teeth properly through a Classroom Action Research approach with visual media.

Descriptive of the Pre-Test Results of Eating Self-Eating Children with Mild Mental Retardation. On Sunday, April 2nd, 2021, the pre-test was conducted for mild mental retardation children at the Bhakti Luhur Foundation. Pre-test activity aims to determine children's ability before implementing Classroom Action Research with visual media. At the time of the pre-test, the researcher only gave instructions and orders in the practice of brushing teeth. Figure 1 shows the pre-test scores for mild mental retardation children at the Bhakti Luhur Foundation.

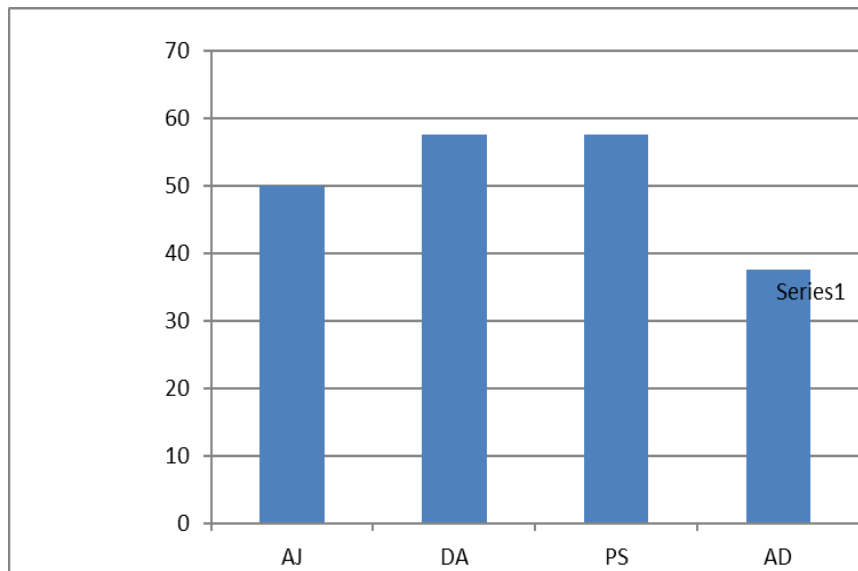


Figure 1. Research Procedure Histogram of the Results of Brushing the Teeth of Mental Retardation Children Before the Action

Ability to Develop Self Eating After SLA With Visual Media Given (Post-test)

The post-test activity was conducted on Wednesday, May 12th, 2021, for moderate mental retardation children at the Bhakti Luhur Foundation. The post-test activity aims to determine the ability of students after being given treatment. The following are the post-test scores for moderate mental retardation children at the Bhakti Luhur Foundation.

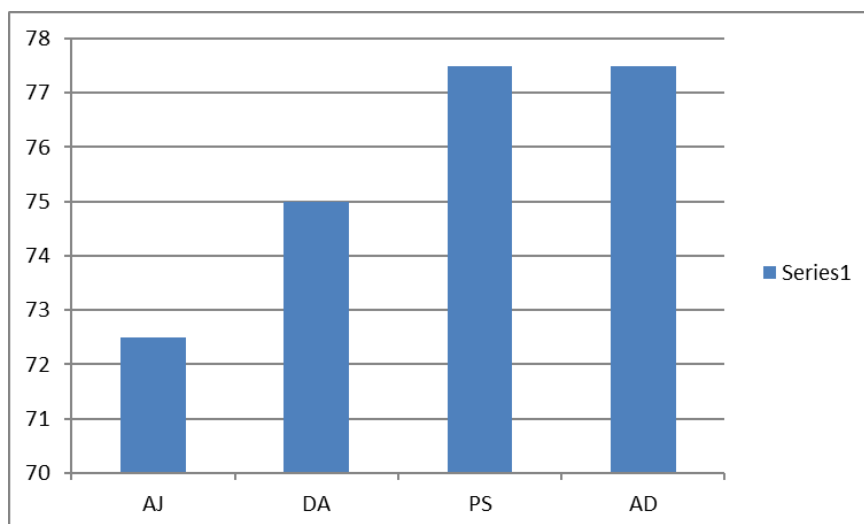


Figure 1. Histogram of Performance Results (post-test) of Mild Mental Retardation Children after the Action

Table 1. Values of Children (post-test) with Mental Retardation after SLA with Visual Media

Description	AJ	DA	PS	AD
Prepare the toothbrush and toothpaste	4	4	3	4
Gargle before brushing teeth	3	4	4	4
Brushing the entire surface of the teeth	3	2	3	3
Brushing the inner teeth	2	3	3	2
Brushing the outer teeth	3	3	3	2
Brushing the tongue and the roof of the mouth	2	2	3	3
Gargle with water	3	3	4	3
Cleaning toothbrush	3	3	3	3
Clean the area around the mouth	2	3	2	3
Returning toothbrushes	4	3	3	3
Percentage	72.5	75	77.5	77.5

DISCUSSION

The self-development ability of mental retardation children who have slow intellectual abilities and tend to think abstractly, but mild mental retardation children have the potential to learn and require more significant support and or attention than other children (Watson, Voss, & Bloomer, 2019). The development of the use of visual media in mild mental retardation children has the main goal of carrying out daily activities. Thus, it can meet their needs independently (Alligood, 2014). In addition, the development of visual media can attract children's attention. This attention is to clarify the message conveyed so that mental retardation children are easy to follow, remember, motivate, fun, and help mild mentally retarded children develop self-development abilities to achieve independence (Sudrajat & Rosida, 2013). Visual media that already exist need to be developed following current technological developments. The learning medium contains a lot of knowledge and skills that are simple and interesting so that mental retardation children are not bored with self-development learning (Cahyo, 2011; Fajarwati & Sujarwanto, 2015). In addition, according to (Mais, 29) visual media is to attract attention, clarify the presentation of ideas, describe or decorate facts that might be quickly forgotten if not visualized.

In the process of self-development training for children with mild mental retardation, the emphasis is on providing direct experience to develop self-development skills to carry out daily activities independently (Wulandari, Susilawati, & Kustiawan, (2019).

Self-development training with the help of visual media can help mentors themselves in daily mentoring because children only need initial guidance and training, and the body repeats several times to explain and direct and train children according to the existing visual media. Furthermore, children with mild mental retardation can learn independently by looking at the media in pictures with the steps and doing it themselves. However, the role of the caregiver, in this case, remains to observe without directing, but the child can do it himself.

The child himself continues the activity and does it repeatedly until the child masters and can do it himself without the assistance of a caregiver. Mumpuniarti (2007) emphasized that the main principles in the method/method of learning for mild mental retardation children are as follows: (1) slowly if the child does not understand the training material provided, it needs to be repeated (2) with concrete examples or through the media. Support in the form of picture cards, (3). In training mental retardation children, it is necessary to apply various appropriate or appropriate methods to facilitate children's understanding, such as demonstrations or a structured learning approach.

Based on the above problems, the model used in training mental retardation in children's self-development in carrying out daily activities in this study is Classroom Action Research (CAR) with visual media in picture cards adapted to the child's conditions and abilities. Combining various methods supported by existing visual media can support success in training children's self-development to do it themselves. Thus, the child is ultimately independent in carrying out daily activities without depending on the people around him.

The results in the first cycle obtained by the subject of AJ are 60% has not achieved success. Due to several obstacles in the implementation of providing direction, the child is still not ready, causing the child to lack concentration in following the activities of the next stage. After conducting discussions in the first cycle, the researcher realized that improvements needed to be made in the second cycle. In the second training cycle, the children see and observe visual images by providing more precise and more exciting directions. It can be exciting and enthusiastic, and enthusiastic so that in role-playing as in the modeling stage, children do it right so that the results are 75% of the previous stage. Likewise, the DA subject in the first cycle was 62.5% at this stage or cycle I. The DA subject was also not ready. The time was too fast and caused him to lack concentration, so that following the next stage affected him looking happy, but he did not observe seriously. Discussions with the team at the following stage by making improvements in clear and exciting directions. At the modeling stage, the subjects followed enthusiastically and enthusiastically and understood and were able to follow. When practicing the correct brushing of teeth, children could do it with some help, such as reminding when finished. Tooth brushing equipment returned to its place. The training achievement in the second cycle increased by 15.2%, namely 77.7%. In the subject and AP, it was also the case that in the first cycle, the activities that started in the afternoon and the wrong time when it was time for them to play were used for training on brushing their teeth, making PS and AP subjects equally less concentrated in participating in activities. The results were the same, 62.5%. However, at the improvement stage or in the second cycle, the trainer uses time agreed with the children and the accompanying caregivers. Because of that, the child is ready to participate in activities with a concentration on participating. The results of the training obtained by PS and AP in the second cycle increase significantly. The acquisition value of 77, 7 the results obtained in the first cycle of training were 62.5%.

Based on the results achieved by research subjects, using Classroom Action Research (CAR) with visual media can improve children's skills of mild mental retardation in brushing their teeth properly. Classroom Action Research Methods supported by visual media will significantly provide convenience for the trainer and the subjects who focus on the research. Furthermore, this can provide optimal results to research subjects. The results achieved are successful in remembering and changing new behaviors, namely new habits or skills that can be used in everyday life at the guesthouse. The technique's success with visual media that has seen results on research subjects will be applied to other children according to their characteristics.

CONCLUSION

Based on the results of the data analysis in the discussion and the study results, it can be concluded that the use of visual media in picture cards can improve the ability of self-development for children with mild mental retardation. Practical steps in learning and practice using visual media in the form of picture cards with the steps, namely: 1) Caregivers prepare toiletries and picture cards, 2) Caregivers introduce toiletries with concrete objects, 3) Caregivers show bathing utensils in the form of the picture and the child mentions the goal so that the child is increasingly able to remember bathing equipment, and 4) The caregiver explains the steps for taking a bath with picture cards: The image wets the body with water, rubs the body with soap, rinses with water until clean and wipes the body with a towel. This bath step is attached to a fixed area to learn independently every time they take a shower with the existing steps.

The child's ability before the action of the AJ subject reached a score of 60% in the moderately capable category. Next, the AD subject achieved a score of 62.5% in the good category, and the PS subject achieved a score of 62.5 in the good category, and the AD subject achieved a score of 62.5% in the good category. In the second cycle, the results increased with the subject of AJ achieving a

score of 75% in the very good category. Finally, the subject of DA reached 77.7% in the very good category, the PS subject scored 77.7% in the very good category, and AD subjects scored 77.7% in the very good category.

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