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ANALYSIS OF SKILL COMMUNICATION AND MORAL EDUCATION MENTAL RETARDATION STUDENTS

Candra Dewi

Universitas PGRI Madiun candra@unipma.ac.id

Melik Budiarti

PGSD, FKIP, Universitas PGRI Madiun melik@unipma.ac.id

Abstract

Communication skills and moral education are key in social interaction with others. Mentally retarded students experience a disruption in developing communication and the need to provide moral education to retarded mental students. This study aims to analyze the communication skills and moral education of mental retardation students in elementary schools. This research is a descriptive study with a qualitative approach. This study used three types of data collection techniques, including observation, documentation, and interviews. The technique used to analyze data in this study is interactive data analysis consisting of the stages of data reduction, data presentation, and conclusion drawing. Based on the implementation of the study in addition to experiencing learning difficulties, mental retardation students also experience a disruption in communication. Retarded mental students have difficulty communicating with their friends and also with their teachers. The mentally retarded Shiva also has not received the maximum moral education.

Keywords: communication skills, moral education, mental retardation

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A. INTRODUCTION

Students with mental retardation have different characteristics with normal students in their learning activities. Students mentally retarded learning by imitating others, they had an academic disability characterized by intellectual or cognitive function retarded mental students below average compared to normal students, accompanied by limitations on their adaptive functions so that mentally retarded students had difficulty adapting with the surrounding environment. This adaptive behavior has a role that is as important as intellectual or cognitive abilities. Mental retardation or intellectual disabilities or developmental retardation are the developmental retardations of children's behavioral

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functions caused by intellectual damage to the child. IDEA (Individual with Disabilities

Education Act) defines that mental retardation, in general, has a level of intellectual ability

below the average normal child and simultaneously experiences obstacles to adaptive

behavior during its development which results in detrimental performance (performance) of

children's education (Heward, 2009: 132) From these difficult adaptive abilities, students

also find it difficult to communicate with others.

Not all mental retardation children have the same characteristics. Heward (2009: 138)

describes the characteristics and education of mental retardation children, among others:

1. Cognitive function is the characteristic of weakness in cognitive and learning functions

including weak memory, slow learning process, problems with attention, difficulty

generalizing in learning and lack of motivation in learning.

2. Behavioral adaptation is mental retardation students substantially experience weaknesses

in behavior adaptation. This limitation in social skills creates difficulties in obtaining

opportunities to participate in their environment.

Characteristics of children who experience mental retardation lie in weakness in the

academic field. Retarded mental children have difficulties in the field of academic

performance. These difficulties can be seen from various fields of student teaching.

Academic ability is influenced by weak attention, memory, motivation, language

development and the process of generalizing the language. The social characteristics and

behaviors of mental retardation children will influence them in adapting to the surrounding

environment, which will relate to the ability of retarded mental students in communicating

and interacting both in and outside the classroom.

Cognitive aspects of mental retardation students will affect their communication and

social skills and vice versa. A person's cognitive function includes basic academic

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knowledge, reading, writing, recognition functions of numbers, time, currency and

measurement. According to Efendi (2001: 9) communication is an interaction that takes

place between individuals because of the similarity of meaning about what is being said.

Communication will occur if someone delivers a message to another person with a specific

purpose and purpose which is supported by the presence of components of the message /

source/communicator, the recipient of the message (communicant) media, messages and

effects (Cangara, 2008: 21).

Communication done by a person includes receptive language and expressive

language. This communication is important and it is necessary for individuals to interact

with other human beings, both individuals, and groups, and the person uses information

obtained to connect with the environment and others. The purpose of communication is to

change behavior, change opinions, change attitudes, and change social (Cangara, 2008: 9).

Communication disorders are one of the characteristics experienced by mental retardation

students, these disorders can be mild disorders and severe disorders. This condition will

become increasingly difficult if the social environment of mental retardation students does

not provide 1 communication skills for mental retardation children. Mental retardation

conditions have placed children in difficult conditions to learn communication skills,

especially for complex communication.

B. METHODS

This research was carried out in elementary schools. This research was carried out in

grade 1 elementary school. This research is a descriptive study that uses a qualitative

approach and presents it in the form of data in the form of words and descriptive language.

Qualitative research is a research shown to describe and analyze phenomena, social

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activities, attitudes, beliefs, perceptions, thoughts of individuals as well as groups

(Sukmadinata, 2007: 60).

Subjects for this study were retarded mental students in elementary schools. As a

triangulation, researchers utilize School Principals and Class 1 teachers. The research is

based on that the Primary School has implemented an environmental education that is

integrated with each learning theme. In research data collection techniques used include

observation, interviews, and documentation.

The instrument used is the researcher himself. Data analysis in qualitative research

was carried out when data collection was being carried out and after the completion of data

collection. Activities in analyzing qualitative data of other children: (a) Data reduction, is a

process of selecting, separating, paying attention and simplifying, abstracting and

transforming crude data that arises from the records found in the field; (b) presentation of

data, carried out to facilitate the researcher in seeing the picture in the last or only certain

parts of the research; (c) drawing conclusions, is a continuous verification as long as the

research process takes place during the data collection process. The conclusion is done by

taking the essence of a series of research results based on observation, interviews and

documentation.

Data validity techniques used are using triangulation. This technique checks the

validity of the data by utilizing something other than data for checking purposes or as a

comparison to the data. This study uses two types of triangulation namely source

triangulation and technical triangulation. Source triangulation was used by researchers to

check data obtained from grade 1 students, class teachers and principals. While technical

triangulation is used by researchers after getting the interview results which are then

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checked by the results of observation and documentation.

C. RESULT AND DISCUSS

1. First Respondent

AS was born in Ngawi on September 1, 2007 the daughter of Misdi and Kasini.

Her parents worked as farmers (farm laborers). Mr. Misdi was 42 years old and only

graduated from elementary school while her mother was 32 years old and graduated

from elementary school. AS's medical history from birth to now has never experienced

very worrying pain, but only heat, flu or coughing. At the time of pregnancy the

mother's AS also did not experience any problems, such as a pregnant person in general,

never taking drugs sold in the market and often feeding the womb in the midwife.

According to the midwife, there is no normal pregnancy. Her birth was normal through

the midwife, her baby was also big. AS in the IQ test has less intelligence. Intelligence

classifications include Intellectual Defective with the interpretation of children having

difficulty adjusting to relationships, difficulty learning new things and requiring a longer

time in learning. In terms of communication, AS experiences problems or

communication disruptions both from expressive language and receptive language. A

receptive language disorder is indicated by the ability to digest questions raised by

researchers that are not clearly understood even though the question is very easy.

2. Second Respondent

ARP was born in Ngawi, September 1, 2003, from Suparno and Wagiyem. His

father was 45 years old, graduated from elementary school and worked as a farmer.

While his mother was 35 years old, his last education never graduated from elementary

school and worked as a farmer. ARP medical history, when in the womb had no

complaints, normal as pregnant women in general and also experience morning sickness.

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During pregnancy never experience bleeding or consume drugs sold in the market. At the age of 4 years, ARP once experienced high heat up to step and that was also experienced at the time of grade 1 elementary school, around the age of 7 years experienced a step to come in the hospital for 7 days and recovery for one month at the hospital. ARP in IQ tests, intelligence classification including below average, grade IV with the interpretation of intellectual abilities under children of his age, sufficiently able to learn new things, have less memory and less able to understand new information. ARP experiences problems or communication disorders both from expressive language and receptive language. A receptive language disorder is shown by the ability to digest questions posed by researchers that they do not clearly understand even though the question is very easy.

3. Analysis of Communication Ability and Moral Education of Mental Retardation Students

In learning, especially in mental retardation students can be known from the results of initial observations and interviews. Before carrying out the research process researchers conducted observations and interviews to find out the real conditions in the field and find information about social inactivity and mental retardation student communication in schools. In following the teaching and learning process in the US class is different from his friends in the classroom. The child is more passive in attending classes in class. The results of this observation combine direct observation by researchers and the results of cross-checks from the class teacher. The US learning process requires a longer time than his friends and requires frequent repetition to understand it. Observations are carried out at the time of the respondent's resting activity. The US does not play outside the classroom with other friends, he is only in

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class while holding a pencil and a book. The US is always seen together with his friend

Silvi. The US is not seen communicating with friends. When invited to talk with his

friend he just kept quiet. Moral Education has not been maximally given to the US. This

is because the US is difficult to communicate with and he only mimics the activities of

his friends. for example, imitating his friend to put money in the charity box and not his

own awareness.

ARP has the ability to think less and this happens also in the ability to understand.

The habit factor is to make this child do it but for new material or things that have just

been learned, the child experiences difficulty in learning it so that it needs the help of

others to make it easier to understand the material both from his teacher and from his

peers by working in easy steps or step by step. ARP is seen communicating with peers.

When playing he often played with kindergarten students. ARP Moral Education also

cannot run well. ARP also only mimics the activities carried out by friends. When a

friend falls while playing, ARP is silent and does not help.

D. CONCLUSION

Disruption of communication and moral education faced by mental retardation

children in the regular class must be resolved. The disorder is located in the academic field

of students, the ability to do social interaction, communication skills and motive skills (fine

motor skills associated with writing activities) and less optimal education. Besides this, the

problem faced is the memory of a weak child. To improve the ability of children both in

academic, social, communication, motorbike, and memory, it is necessary to strive for

repeated exercises. Training for respondents to improve their abilities requires support from

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the family, teachers, and peers

E. SUGGESTION

Based on the above conclusions, the following suggestions can be submitted:

1. For teachers, they should always provide motivation and service to mental retardation students, especially to train their communication skills and moral education. In addition, the teacher should increase insight in describing support for parents who have mentally retarded children so parents will also train students' communication skills while at home.

2. For schools, they should be able to facilitate and channel the talents of mental retardation students.

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