Services for Children with Special Needs at SLB Melati Ceria Palangka Raya

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Abstract

Deaf is a disorder whose hearing is not functioning so it requires special education services. Deafness is divided into two categories, namely deaf and hard of hearing. The purpose of this study was to describe: profiles of deaf children at SLB Melati Ceria Palangka Raya and learning services for deaf children at SLB Melati Ceria Palangka Raya. This research uses a qualitative case study method. Primary data sources are one class teacher and one deaf child. The secondary data sources are parents, documents in the form of child contact books, assessments from psychologists and schools, as well as photos and learning service activities for deaf children. The data obtained from observations, interviews and documents regarding learning services for deaf children at SLB Melati Ceria Palangka Raya. So, the results of the study show: 1) Profiles of deaf children in SLB Melati Ceria Palangka Raya include: characteristics of deaf children, characteristics of deaf children, types of deaf children. 2) Learning services for deaf children at SLB Melati Ceria Palangka Raya, namely: behavioral therapy services and individual class services.

Keywords: Early Childhood, Learning Services, Deaf

INTRODUCTION

Early Childhood Education is an institution that provides educational services and child development because the education provided will be the basis of life, early childhood is also known as the golden period that only occurs once in a lifetime. Child development must be stimulated from an early age because when stimulation is given too late it will have an impact on children who eventually experience delays in their development. When a child has experienced delays in their development, it is necessary to pay attention to providing special services in education (Hartati, 2017).

Providing special services in education, the implementation of education is based on Law No. 20 of 2003 concerning the National Education System, Article 5 paragraph (2)

which states that citizens who have physical, emotional, mental, intellectual, and/or social disabilities have the right to receive special education. Referring to the law above, it can be seen that the government recognizes the right of every child with special needs to have the same opportunity to receive education as every child (Wirantho & Arriani, 2017). This is in line with the verse in the Qur'an that humans as creatures created by Allah SWT have the same status in the eyes of Allah SWT so that no one should differentiate between one another. In accordance with the word of Allah SWT in QS. Al-Hujurat (13):

Meaning: "O mankind, indeed We have created you from male and female. Then We made you into nations and tribes so that you may know one another. Verily the noblest among you in the sight of Allah is the most pious of you. Indeed, Allah is All-Knowing and All-Aware" (Al-Hujurat/49:13) (Qur'an Kemenag, 2013, p. 49).

The beginning of the implementation of education for children with special needs was through special education in the form of segregation. The segregation model is the implementation of special education for children with special needs, where children have the right to receive education to develop their potential. The Republic of Indonesia built schools with this segregation model in the form of special education units or Special Schools (SLB) (Hajar & Mulyani, 2017).

The implementation of special school education needs to be equipped with various knowledge about children with special needs, this knowledge is expected to enable teachers to identify children. Identification of children with special needs is needed to find the type of disorder in children because children with special needs have different characteristics. The difference in these characteristics can be seen from the physical, emotional, and intellectual aspects of the child it affects the child's growth and development compared to children of the same age (Rukmana & Suyadi, 2020).

Service programs are provided according to the type of special needs of the child, such as for children with special needs, namely deaf. Deaf are children whose hearing is not functioning so they need special services because children who are hard of hearing can still be helped medically and psychologically, while those who are classified as deaf are children who experience an inability to hear, so children with special needs who are deaf must be given special services (Widiastuti, 2020).

Providing special services can develop the abilities of deaf children who are directed to services that are provided in a well-programmed manner and goals that are achieved. For teaching and learning activities to run effectively, it is necessary to provide services as a learning strategy. This learning must use a special service that is tailored to the needs of the child (Gunawa, 2013).

Relevant research by Sapto Aji Wirantho and Farah Arriani entitled "Education Service Policy for Children with Special Needs in Early Childhood Education Units" states

that in organizing education services for children with special needs, class teachers also need to work together with special guidance teachers, doctors, psychologists and therapists so that the education services provided are by the development and needs of children with special needs. The difference in previous research is that the research was conducted in eight regions while this research was only in one region and the similarity in this research with previous research is that it discusses the policy of education services for children with special needs (Wirantho & Arriani, 2017).

The journal written by Jum Anidar entitled "Educational Services for Children with Special Needs" states that providing educational service policies for children with special needs in the implementation and preparation of programs must be designed in such a way as to be by the level of growth and development that they have. The difference in previous studies discussed several types of disorders in children with special needs while this study only focuses on one disorder in children with special needs, namely deafness, while the similarity in this study is that both discuss children with special needs (Anidar, 2016).

The journal written by Sri Hartati entitled "Services for Children with Special Needs at Tiji Salsabila Inclusive Kindergarten, Padang City" states that the services provided by special education class teachers to children with special needs at different times. Class teachers also assist children with special needs in carrying out activities according to the needs of each type of child's disorder (Hartati, 2017). The difference in previous studies is that the implementation of the study was in an inclusive school while this study was in a special school and the similarities in this study are that both discuss providing services to children with special needs.

One of the institutions that provides services for children with special needs is SLB Melati Ceria Palangka Raya. This can be seen in one child with special needs, namely deafness in language development and speaking is not yet able and doing sign language movements is still not developed and in social terms is backward. Therefore, deaf children need learning services. The purpose of this study is to describe profile of deaf children at SLB Melati Ceria Palangka Raya including characteristics of deaf children, characteristics of deaf children, and types of deafness. Then, to describe learning services for deaf children at SLB Melati Ceria Palangka Raya, namely: behavioral therapy services and individual class services.

METHODS

The study used a descriptive qualitative case study method, a study that produces descriptive data in the form of written words from objects of observation that occur in the field. This study was conducted to describe the Services for Children with Special Needs at SLB Melati Ceria Palangka Raya (Case Study on Deaf Children). The time of the study was carried out in March - April 2023 and the location of the study was carried out at SLB Melati Ceria Palangka Raya on G.Obos VI Street Gg. 7B No. 46. The primary data

sources in this study were one class teacher and one deaf child at SLB Melati Ceria Palangka Raya. The secondary data sources are parents, documents in the form of child liaison books, psychological and school assessments, and photos and videos of learning service activities. Data collection techniques use observation, interview, and documentation techniques. The data validity techniques used in this study are technical triangulation and source triangulation. Data analysis techniques start from data condensation, data presentation, and concluding.

RESULTS AND DISCUSSION

Profile of Deaf Children at SLB Melati Ceria Palangka Raya

Deaf children have several profiles or conditions that are different from normal children, both in terms of physical, language, intellectual or intelligence, social, type, and characteristics. These deaf children need more attention for their survival. (Nesy & Kasiyati, 2021).

Characteristics of Deafness

Several physical characteristics can distinguish between deaf children and other normal children, for example; Stiff and slightly hunched walking due to problems with the balance organs in the ear, Short and irregular breathing, and a sharp way of looking at the person they are talking to (Setiawan, 2020).

Based on the results of observations in this study, the physical characteristics in the individual class of SLB Melati Ceria Palangka Raya are known to have DSD children with facial abnormalities. It can be seen from the shape of both eyes that are not normal because on the right side, the eyelid is half open and on the left side the eyeball is slightly raised so that it looks squinted and there is a tip of the nose that looks flat, slanted and the shape of the mouth is wide. Expressing movements on the fingers is rather stiff so that is lacking in fine motor skills, this can be seen when the child holds a pencil, the way to thicken the letters is also fully assisted and the way he walks is slightly bent.

This is in line with the results of the interview with Mrs. RS as an individual class teacher who stated: "Yes, this child has had a facial abnormality since birth, for his fine motor skills he is still not fully able to do it, for example holding a pencil is still weak, cutting following a pattern is still not developed either but this child in fine motor skills for sticking activities can still be done by himself". Therefore, each deaf child has different characteristics in terms of physical characteristics so that in identifying them it cannot be the same for each child.

Similarly, in terms of language and speech, DSD children are not yet able to speak like normal children, are not yet able to make sounds, and can only do a little sign language. DSD children are not yet able to speak or speak because they are still young, so class teachers pay more attention and teach DSD children sign language gradually.

This is in line with the results of an interview with Mrs. RS as an individual class teacher who stated that: "her child has not been able to speak at all and is still in the

process of learning sign language guidance, even then in following sign language movements it is still not very clear because it is indeed quite difficult, yes, he is still 5 years old so he must be guided extra ". Therefore, DSD children are first taught to understand the letters of the alphabet until they memorize them, after which the class teacher can continue the ability to speak and speak to DSD children.

In addition, in terms of intellectuality, from the results of observations, DSD children are intellectually like normal children, but when learning takes place, the teacher first gives an example and the child can follow the teacher's direction. Based on this, DSD children are enthusiastic about going to school and learning so that when providing learning, the class teacher does not have too much difficulty in teaching them and so that DSD children can understand it, usually the class teacher gives commands in non-verbal form (Sari et al., 2023).

This is in line with the results of an interview with Mrs. RS as an individual class teacher who stated that: "her child has normal intelligence like children in general, especially when counting fingers, he is quick to respond, during learning activities, he is also focused and able to sit quietly". Therefore, DSD children in terms of intellectuality only need to be given sharpening of understanding and examples first in doing their assignments.

Finally, in terms of social and emotional, adults can interact and the child also likes to joke with the class teacher. However, with peers and the surrounding environment, the DSD child does not dare to approach or even avoid. The class teacher also tries the DSD child to interact with other children but immediately hides behind and hugs the class teacher tightly. Deaf children in their social environment like to interpret negatively so sometimes they have feelings of inferiority and feel isolated and have prejudice because they are not treated fairly (Agustin, 2019).

In line with the results of the class teacher interview which stated: "Children who go to school here don't want to be approached, they are afraid and avoid each other, but on Fridays, I join the class with a hyperactive child, well if this hyperactive child goes here and there, his response is laughing but if approached he immediately comes to me". Therefore, children with DSD need guidance and direction in terms of their socialization so that children with DSD can develop in socializing with others, especially their peers.

Characteristics of Deafness

Hearing disorders are indeed difficult to detect with the naked eye because they are not visible. In general, deaf children show that they are late in language development so their social development is retarded, their speech is not very clear, they are dependent on others, they have feelings of fear of the wider environment and there is no reaction to sounds and voices (Ariani & Karyati, 2023).

The results of the observation show that language skills are indeed late and have not been taught to speak so many do sign language with non-verbal movements. So DSD

children respond to communication with teachers or other people by raising their thumbs, nodding their heads, and touching or patting people's hands. The child does not show any reaction at all to the sounds or voices around him because the DSD child has very severe hearing loss. In line with the results of the interview with Mrs. RS as an individual class teacher, she stated that: "if the characteristics of hearing impairment in DSD children are that the child likes to raise his thumbs or nod his head when responding to me talking like sign language movements, the same as her child if something falls can't hear because his hearing loss is severe".

Therefore, regarding the characteristics experienced by DSD children, the class teacher needs to provide guidance and direction in terms of the dependence of DSD children on their class teacher who cannot be left, and feelings of fear of the wider environment, language, and social development. At least in language and social DSD children can do sign language movements taught by the class teacher to help DSD children also in communicating.

Types of Deafness

Giving treatment to deaf children, of course, schools can place them according to the classification and level of their deafness so that it is by the direction of clear educational goals, the level of hearing loss in deaf children is grouped into several types, starting from 0-75 dB and above. This is related to the different hearing abilities of each child, so proper handling is needed (Purwowibowo et al., 2019).

DSD children are included in the Profoundly Losses level commonly called deaf children with a level of deafness above 75 dB. Levels above 75 dB DSD children do not hear sounds around them at all with a small possibility from a distance of approximately 1 inch (2.5 cm). This is an obstacle for DSD children in speaking and language development is hampered, so DSD children need sign language movements to help them communicate.

In line with the interview, Mrs. RS as an individual class teacher stated that: "If for example the child is focused on doing the task and then we call him, he will not look unless we touch his hand, then the child responds, the object falls or we clap our hands behind his ear, he doesn't hear".

Therefore, DSD children are more specialized in learning sign language movements slowly and gradually. Class teachers should teach sign language earlier at an early age because repeated guidance is needed so that DSD children can memorize sign language movements, although in general, the most important thing is that children are used to it and are no longer afraid to communicate with others and sign language can also cover deficiencies in DSD children.

Learning Services for Deaf Children at SLB Melati Ceria Palangka Raya Behavioral Therapy Services

Behavioral therapy or behaviorist approach is a treatment procedure that focuses on changing behavior. This behavior is seen as the development of a person as a person who grows into what is formed by the surrounding environment, one type of behavioral therapy is teaching to interact socially (Ni'matuzahroh et al., 2021). Based on the observation results, it can be seen that in providing behavioral therapy, especially in the socialization of DSD children, the goal has not been achieved because it still uses inappropriate teaching techniques in conducting behavioral therapy on deaf children. The class teacher in providing behavioral therapy only tries to get DSD children to study together with one hyperactive child on Fridays with one hour of learning. DSD children should not only be given the opportunity to interact with their peers for one hour but should be continuously.

The results of the interview with Mrs. RS stated that: "DSD needs behavioral therapy, especially in socializing with peers, that's why I have a bit of difficulty with behavioral therapy for children with DSD because they don't want to socialize with their friends until now". In this case, teachers should use the flooding technique, which is a behavioral modification technique by doing it continuously. The method is to create an unwanted cause or fear until the child who needs behavioral therapy realizes that something they are worried about does not happen. The application of the flooding technique must be careful because it can cause an emotional reaction from the child (Mulawarman et al., 2020).

Therefore, in providing behavioral therapy, it takes time continuously, not just one day. As a result of carrying out behavioral therapy over a long period, children will forget the behavioral therapy that they have done. Socializing deaf children is not only done with behavioral therapy but can also be done with speech coaching. Good verbal communication skills for deaf people are the result of speech coaching services provided in a programmed manner, this must be considered by class teachers to better understand how to provide learning services so that DSD children can develop socially.

Individual Class Service

Individual learning in special schools is a plan that includes designing activities for deaf children. One of the factors that must be considered in implementing individual learning is the management of class facilities and infrastructure and the Individual Learning Program (PPI) as preparation for learning (Hasan, 2017). Based on the observation results, it can be seen that individual class services at SLB Melati Ceria in facilities and infrastructure are still inadequate in learning media provided specifically for deaf children. Support for individual learning activities for deaf children is still not met, most of the daily learning media creation uses HVS paper made by the previous class

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teacher, so that the learning achievement of DSD children takes a little longer in the process.

Early age really needs learning that is more focused on the child, and the special needs that DSD experiences, namely very severe hearing impairment, so teachers need to prepare appropriate learning media so that the learning and teaching process is effective. In line with the results of the interview, Mrs. RS stated that: "We direct these DSD children to individual classes because their children still can't do anything, usually the schedule for DSD children is during the day after classical classes. If DSD children have made very significant developments from before, maybe in terms of socializing with friends or emotionally and towards being able to use sign language, they can be transferred to classical classes".

Therefore, in schools in providing individual class services, the preparation of learning media is still inadequate. It is hoped that schools can provide facilities and infrastructure in individual classes to create learning media according to the type of disorder, especially for deaf children. Class teachers can actually also conduct learning in individual classes using sound and rhythm perception services because that is also a need for deaf children in learning so that the class feels varied and not monotonous for children.

CONCLUSION

Deaf children at SLB Melati Ceria Palangka Raya can be seen from the characteristics that include physical, language and speech, intellectual and intelligence aspects as well as social and emotional aspects of DSD children. Deaf children can be identified based on characteristics that can be done through assessments at school or from psychologists/ENT and the type of deafness in their children above 75 dB. In addition, there are two learning services provided by SLB Melati Ceria Palangka Raya for deaf children, namely: behavioral therapy services and individual class services.

Implementing learning services requires the right techniques so that the learning process and handling of deaf children can provide changes and development. Therefore, teachers need to participate in training held to handle deaf children. It is also hoped that in providing learning services, the time for learning and teaching activities will be increased, so that learning carried out for children with special needs can accelerate their development process.

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