

Guidance on Preparation for Learning and Concentration of Autistic Children in the Urban Village of Surabaya: A Multicultural Guidance Study

Mierrina¹, Febrina Prahesti Hendraswari², Finna Astri Widiyana³

¹ Department of Islamic Guidance and Counseling, State Islamic University of Sunan Ampel Surabaya

² Department of Islamic Guidance and Counseling, State Islamic University of Sunan Ampel Surabaya

³ Department of Islamic Guidance and Counseling, State Islamic University of Sunan Ampel Surabaya

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ABSTRACT

The population density observed in one of the settlements in Surabaya poses a challenge in the process of equitable distribution of access to education and the socialization related to the stages of child growth and development, consequently affecting the community's awareness regarding the stages of child growth and development. Children with autism spectrum disorder experience developmental delays, yet they have the same rights as other children with typical development. The development of autistic children differs from that of their peers; they often exhibit specific patterns and require a high degree of consistency. Autistic children require support from various parties to optimize their abilities. The methodology employed in this research is qualitative, utilizing a case study model. This study employs an individual support program plan, with the subjects being children with autism spectrum disorder residing in a shelter in one of the settlements in Surabaya. The researcher's objective in implementing the Applied Behavior Therapy (ABA) method is to enhance self-readiness and concentration in autistic children.



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Corresponding Author:

Mierrina, Email : mierrina@uinsa.ac.id¹

Introduction

Surabaya City is the second most densely populated city in Indonesia after Bogor City, with a population growth rate of 0.89% per annum, as evidenced by the 2023 population census data conducted by the Surabaya City Population and Civil Registration Office (2022). The socio-economic landscape of life in this metropolitan city's urban settlements constitutes the subject of examination. Within these settlements, informal

economic activities serve as a vital means of livelihood for the lower- to middle-income population strata, exerting a significant influence on the city's overall economy.

The urban settlements in question boast adequate road infrastructure, facilitating easy access for residents, despite the presence of numerous narrow alleyways impassable by four-wheeled vehicles. The primary sources of livelihood for the majority of the population in these urban settlements are private employment and entrepreneurship, which starkly highlight economic disparities across various settlement areas. This also serves as an indicator of a prevailing lack of understanding regarding child growth and development stages.

Based on the results of observations and interviews conducted by the researcher, the most prominent issue is population density, which acts as an impediment to the equitable provision of education access and also socialization pertaining to the stages of child growth and development. According to data on Low-Income Communities (MBR) presented by the Department of Communication and Informatics of Surabaya City (2022), it is evident that educational disparities are occurring in several settlements, which tend to influence the community's awareness regarding the stages of child growth and development. This phenomenon is attributable to the economic conditions and poverty prevailing in the area, including the settlements under scrutiny in this study.

The developmental disorders observed in children with autism encompass cognitive, linguistic, and behavioral delays, all of which significantly impact the social interaction process. One commonly encountered issue in autistic children is the challenge of maintaining concentration on a specific object. Typically, autistic children tend to fixate on objects that capture their attention, such as brightly colored items or objects with motion, for instance, toys featuring rotating wheels or spinning fan blades, among others.

In the case examined by the researcher, the client exhibits issues related to a low level of self-readiness prior to commencing the learning process, as well as difficulties in concentrating on a specific object. The client's diminished self-readiness before commencing learning is manifested through behavior characterized by frequent reclining rather than maintaining an upright posture. Furthermore, the client's struggle with concentrating on a specific object is demonstrated by their inability to sustain focus on a single object for less than 10 seconds.

The client easily becomes distracted by their surroundings when they feel bored. This can be observed through the repetitive body movements performed by the client, such as tapping their hand against their chin with increasing intensity as their discomfort grows.

This indicates that the client is disturbed by the conditions in their environment. The developmental delay in the field of language is also experienced by the client, leading to suboptimal verbal abilities. Autistic children who are unable to speak will face increasing difficulties in communicating with their immediate environment. Consequently, the usual recourse for these autistic children is to resort to sign language as a means of communication.

Furthermore, the client also exhibits a low self-response when engaged in communication. The client requires slightly more time to process the instructions provided to them. Additionally, the client often fails to concentrate their attention on the individual attempting to engage in communication, resulting in the absence of eye contact between the client and the person initiating the interaction.

Method

The methodology employed in this research is qualitative in nature, utilizing a case study model. In this particular case, the researcher conducted observations of children with special needs, specifically children with autism, by measuring their levels of self-readiness and concentration development. In this research, the researcher employs the ABA (Applied Behavior Therapy) method to enhance self-readiness and concentration in children with autism. Services provided to children with autism must be tailored to the appropriate method so that they can be applied directly. Some of these methods include the Lovaas method or Applied Behavior Analysis (ABA) and the Son-Rise method.

In this research, an individual mentoring program plan was employed, involving subjects who are children with Autism Spectrum Disorder, residing in shelters in Surabaya. Within this program, several achievements were attained, including primary objectives (short-term), achievement criteria, methods/media/materials utilized, as well as program evaluation outcomes. Moreover, an assessment process was carried out to ascertain the description of the children's abilities, encompassing academic prowess, emotional maturity, social maturity, self-care skills, and various other aspects.

Furthermore, diagnosing autism in children can be achieved by observing the appropriateness of a child's communication and behavior based on their growth and developmental stages. Due to the diverse characteristics of individuals with autism, the most ideal diagnostic approach involves consulting with a multidisciplinary team of specialized doctors, such as neurologists, pediatricians, child specialists, specialists in pediatric diseases,

and language therapy specialists for children, as well as expert therapists who professionally handle autistic children.

In the diagnostic process, early detection of autism disorders in children is crucial. Early detection allows the recognition of existing realities or facts in the field, enabling prompt interventio. Handojo (2004) revealed that the ideal age for early intervention is between 2-3 years old. Although challenging, signs and symptoms of autism can be observed early on, even before the age of 6 months.

In this study, the researcher engaged in a particular social context, conducted observations, and interviews with individuals deemed knowledgeable about the client's (significant other) social situation. The selection of data sources for the interviewees was carried out purposefully, involving deliberate consideration and specific objectives. In order to obtain sufficient data that aligns with the desired criteria, it is imperative to employ appropriate data collection methods. The data collection methods utilized in this research encompass interviews, observations, and documentation.

a. Interview

An interview is a question-and-answer process in research that takes place orally, wherein two or more individuals engage in face-to-face interaction, directly receiving information or statements (Achmadi, 2015). This interview is directed towards the parents of the client who are directly involved in providing therapy for autistic children.

b. Observation

The observation employed in this research is participatory observation. In this observational approach, the researcher actively engages in the daily activities of the individuals under study or those serving as sources of research data. While conducting observations, the researcher participates in and experiences firsthand the actions performed by the data sources, thereby gaining insight into their joys and challenges. (Sugiyono, 2017). In this context, the researcher conducted observations on the client, encompassing moments of activity within the home environment in the presence of their parents, interactions with their younger sibling, and during the client's participation in interventions.

c. Documentation

The documentation method involves the retrieval of data pertaining to items or variables in the form of records, client learning outcome transcripts, books, progress reports, and the like. (Bungin, 2015).

The analysis of data is the systematic process of seeking and organizing data obtained from interviews, field notes, and other materials so that it can be easily comprehended, and its findings can be communicated to others. Analysis in any type of research is a mode of thinking. It pertains to the systematic examination of something to determine its constituent parts, the relationships among those parts, and their connection to the overall entity. (Sugiyono, 2017).

Results and Discussion

After the researchers provided treatment to the client using the Applied Behavior Analysis (ABA) method, the results are as follows .

In terms of self-preparation aspect, the researcher observed initial client behavior wherein the client frequently positioned their body in a reclined or leaned posture, often relying on someone nearby for support. This behavior was evident during the first and second sessions. Subsequently, during the third session, the client began to exhibit the ability to assume an upright sitting posture before commencing the learning process. This habit emerged after we introduced a conditioning intervention aimed at encouraging the client to sit upright prior to the commencement of the learning process. The researcher endeavored to position the client's seating arrangement close to the wall, and a study desk was placed in front of the client's body, thereby prompting the client to sit upright as their back was in contact with the wall, and the front part of their body was in proximity to the study desk.

After the client was able to sit upright with the assistance provided, the researcher proceeded to gradually reduce the assistance given. The client was no longer positioned to sit near a wall; however, a study table was still provided in front of the client's body. As a result, the client was able to maintain an upright sitting position even without a wall behind their body or someone nearby to serve as support. Furthermore, the client was able to follow the sitting instructions provided by the researcher.

Furthermore, in terms of the difficulty in concentrating on a specific object experienced by the client, this is manifested through the client's behavior of being unable to sustain their attention on a single object for a period of less than 10 seconds. Initially, the researcher endeavored to capture the client's attention by providing flashcards featuring numerical elements. Subsequently, the researcher engaged the client in communication by offering conjectures corresponding to the flashcard held by the researcher. The client still did not exhibit a meaningful response, merely glancing at the flashcard for 1-2 seconds before attempting to retrieve the flashcard held by the

researcher and placing it on the study table, without further attention to the flashcard. The client seemingly demonstrated their lack of interest in this matter.

In the second meeting, the researchers once again employed the use of flash cards featuring animal elements to capture the attention and concentration of the clients, in order to prevent them from being easily distracted by their surroundings. The clients began to exhibit their attentiveness, as evidenced by their gestures, where they started to gaze in the direction of the flash cards for approximately 2-3 seconds and demonstrated the ability to guess the names of the animals depicted on the flash cards held by the researchers. More than ten animals were successfully guessed by the clients.

Subsequently, during the third meeting, when the client began to be capable of maintaining an upright posture, they also exhibited the ability to follow the instructions provided by the researcher. In this third session, the researcher observed a novel development, wherein the client demonstrated the capacity to momentarily focus by reciting "shalawat" (praises upon the Prophet Muhammad) and "ayat kursi" (a verse from the Quran). Although their articulation remained somewhat unclear and stuttered, the client managed to recite both the "shalawat" and "ayat kursi" from start to finish. In fact, even from the initial encounter, the client displayed the capacity to comply with instructions from others, such as when instructed to kiss a hand before bidding farewell. However, it should be noted that the client still required instructions delivered with slightly greater intonation and a processing time of approximately 2-3 seconds before carrying out said instructions.

In the fourth session, the researcher directed the client's attention towards enhancing their focus on a specific point by introducing a game explicitly designed to sharpen concentration, namely the Anatex Rollercoaster. This game consists of circular wooden blocks positioned on a winding iron track. Upon receiving this toy, the client demonstrated the ability to sustain their concentration for a duration of 10 to 20 minutes. This was achieved through the alternating manipulation of the circular wooden blocks from one side to the other, each block featuring a diverse array of colors. Consequently, this activity persevered and was repeatedly undertaken by the client in subsequent sessions. Consequently, upon each initial visit, the client would gravitate towards this plaything, retrieve it autonomously, and proceed to sit calmly while directing their focus exclusively toward the toy.

The problem of clients who are easily distracted by their surroundings when they feel bored can be observed through repetitive body movements, such as tapping their hand against their chin with increasing intensity as their discomfort grows. This indicates that the client is disturbed by their surroundings.

Researchers aim to reduce such behaviors by providing games and encouraging clients to learn in accordance with their interests. One of the games that the clients enjoy is playing with blocks,

which serves to enhance their concentration. When clients become bored and exhibit repetitive behaviors, such as tapping their hands against their chin, the researchers make efforts to prevent this by either holding the client's hands or covering the client's chin with their own hand. Additionally, at times, the researchers guide the clients to gently stroke their chin when they attempt to tap their hands towards it.

In the implementation of the treatment, starting from the first meeting, the researcher also introduced religious practices such as daily prayers, recitation of blessings (sholawat), and the recitation of Ayat Kursi to the client. The client followed smoothly and considered these practices as the initial process before starting the treatment. The client also demonstrated his affection for sholawat, evident from silently reciting it even though the sound was not very clear. The client often recited the call to prayer (adzan) with a loud voice, albeit somewhat stuttering. The religious practices were incorporated by the researcher as a supportive program to achieve results from the implemented treatment process.

Each time the treatment was conducted, the researcher guided the client to initiate activities by reciting prayers and sholawat. The prayers taught by the researcher were easy for a child of the client's age to memorize, including prayers before and after studying, before and after meals, before sleep and upon waking up, as well as prayers responding to the call to prayer. With increasing concentration and focus every day, the client found it easier to read and memorize daily prayers. The memorization method involved the guidance approach, where the researcher did not allow the client to read alone but participated in reading and reciting, enabling the client to follow the researcher's recitation. This was done repeatedly and became a routine. The client, in addition to receiving treatment tailored to his issues, also gained religious values from these practices.

In conducting this research, the researcher consistently involved the client's parents in the mentoring process. The client's parents always played a role in assisting, calming the client during tantrums, providing instructions when the client behaved hyperactively, and informing the researcher of the client's preferences to capture the client's attention during the treatment. Thus, during interventions using the Applied Behavior Analysis (ABA) method, the researcher ensured that the parents were always present. The goal was for them to understand the client's progress before and after the treatment. The researcher also gathered information about the client through interviews and counseling sessions with the parents. During these interviews, questions were asked about the client's attitude toward others, the parents' handling of the client at home, and other relevant aspects. Additionally, to support the mentoring process, guidance was provided to the parents on how to accept and understand the role of parents in handling Children with Special Needs (CSN).

The researcher also provided guidance to the parents to pay more attention to what the client with autism consumes, as it can affect his brain and motor functions. Items such as chocolate, nuts, and other high-sugar content foods and drinks were recommended to be reduced. Parents were

advised to switch from a bottle to a glass for the client's beverages. These changes were aimed at preventing hyperactive behavior and difficulty in control, including the client frequently hitting his chin with clenched fists. After providing guidance several times with the parents, positive changes were observed. The client became accustomed to drinking from a glass, no longer asked for chocolate or milk, could sit calmly for an extended period, and reduced the habit of hitting his chin.

To support the parents, the researcher always strived for cooperative client mentoring. Motivation and positive affirmation were given to the parents to help them accept the situation, stay enthusiastic, and focus on mentoring the client. From the interview process, it was observed that parents initially felt afraid and lacked confidence about enrolling the client in mainstream schools, fearing poor acceptance and an unsupportive environment. Therefore, as a counselor, the researcher explained from a different perspective that children with special needs have unique qualities that can be demonstrated to others for acceptance. Having a child with special needs is not something to regret but rather something to be grateful for. Parents of children with special needs are chosen parents blessed by God with the imperfection or limitation of their child, yet there is a unique ability that sets them apart from typical children. As parents, they should be able to develop the potential of their child with special needs and prove that these children are capable of achieving things just like any other child.

Conclusion

Based on the guidance provided to the child with autism spectrum disorder, it is concluded that the implementation of the Applied Behavior Analysis (ABA) method is deemed sufficiently effective in cultivating self-readiness and concentration in autistic children. The method employed to modify the child's behavior by minimizing negative behaviors and enhancing positive behaviors has yielded results in the form of a reduction in the client's propensity for undesirable behaviors following treatment by the researcher. This is evident in the client's behavior, as previously, the client often positioned themselves to lean on others or reclined when prompted to learn, but gradually began to exhibit an upright posture when encouraged to engage in learning activities. Furthermore, the client's behavior, characterized by a low level of concentration on a particular object and susceptibility to distractions from the surrounding environment, has begun to undergo transformation as the client discovers objects that capture their attention.

The limitations in research pertaining to guidance for children with autism spectrum disorders are primarily attributed to the suboptimal involvement of parents in sustaining the interventions carried out consistently at home. This is due to both parental unfamiliarity.

with the subject matter and the busy schedules parents maintain in meeting the economic needs of their families. As is characteristic of urban village communities, they remain entangled in economic aspects and may not prioritize educational aspects for their children. Consequently, it is deemed necessary to provide guidance to parents in urban village communities in nurturing and educating their children, particularly those with special needs.

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