



**THE DEVELOPMENT OF SEXUAL EDUCATION LEARNING
MODEL FOR AUTISTIC SMP LEVEL BASED ON
SOCIO-SEXUAL BEHAVIOR METHOD IN SLB
AUTIS SURAKARTA, INDONESIA**

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Abstract:

Autistic teens have an interest in the fulfillment of sexuality on others, but the style of expression of reviews their sexuality is often naive, immature and not in keeping with his age. As for the purpose of this research is to gain an overview, find a models of learning, and evaluate to what extent the effectiveness of the learning models, so it is expected to be a new solution to an autistic teenager in particular learning models. The method of research is research research development (R & D) models and develop learning materials that already exist with a learning models using the method of Sexual Behavior with Socio engineering research in principle in accordance with the method of the Research & Development Model. Results of psychologically, the criteria set by the researcher then qualified subjects totaled 18 people consisting of 13 people-sex men and 5 women-sex people. Through random assignment then John Matheson 9 people as a group of 9 people and experiments as a control group. Then the teens have a tendency to try something he finds fun. Similarly, with the development of his sexuality, teens usually do the experiment as a form of realization of his identity search. Therefore, this research to develop existing teaching methods with the socio models of Sexual Behavior that consists of several stages and in their implementation stages with the criteria of the results can be explained in the methods of analysis of data used is the Sexual Behavior of the socio models by using test Mann Whitney U Test and Wilcoxon test for comparing the subject's score on the pretest and posttest than the control group and experimental. The results show that the second group of experimental psycho-

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education on effective parent to improve knowledge of sexuality in teenagers mild mental retardation Mann Whitney U ($p = 0.024$) Test and Wilcoxon test ($p = 0.012$).

Keywords: sexual education, autistic adolescent, socio sexual behavior

1. Introduction

Autism is a severe developmental disorder or widespread neurobiological factors and can occur in children in the first three years of his life. Persons with autism disorder have a problem with communicating, social-interaction, and restricted interests and activities as well as repetitive or preventive (Suryana, 2004). According to Mulyadi (2009), children in need and other special with quite a lot. However, there are three types of the heaviest and most can be classified in Indonesia, namely: Autism Infantile, Asperger's Disease and Attention Deficit (Hyperactive) Disorder.

The behavior of a child with special needs such as autism is a significant thing, but the fundamental problems encountered in Indonesia become very crucial and needs to be handled first. Some facts that are considered relevant to the issue of autism in Indonesia are:

1. Absence of appropriate handling instructions in Indonesia because it is not enough simply implementing instructions for handling external application does not always correspond with the culture of the lives of children Indonesia;
2. There are still many cases of autism that are not detected early, so when the children grow older, the problems become more complex;
3. The experts were able to diagnose autism, information about the disorder and autistic characteristics as well as the formal institutions that provide educational services for children with autism have not been spread evenly across all regions in Indonesia;
4. The final issue is also important that a little knowledge, both clinically and practically supported by the empirical validity of the data (empirically Validated Treatments / EVT) of countermeasures autistic problems in Indonesia. An estimated 75%-80% of people with autism have mental retardation, while 20% of them have a high enough ability to specific areas.

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Autistic children with disabilities have problems/disorders in the areas of:

1. Communication;
2. Social Interaction;
3. Sensory Disorders;

4. The pattern of play;
5. Behavior;
6. Emotions;

Basically, the phases of development of individuals with autism are no different from other normal individual (Puspita, 2008). They changed the growth of body hair, voice changes at similar developmental tasks. But the facts that became distinction between individuals with autism disorders and normal adolescent include communication, social interactions, and restricted activities and interests, and repetitive or preventive (Suryana, 2004). So also in development in adolescence, where the teenager was a transitional period, ranging from 12 to 21 years. During the teenage mi cannot be termed as a child and an adult cannot be said (Monks et al, 1996). At this stage, the individuals with autism have emotional changes, physical, social and sexuality are the same. The physical changes they are: start growing hair on the face, underarms and pubic area, changes in the growth of body hair, voice changes in women and began menstraasi (Puspita, 2008).

Unlike the typical teenager, the sexual urge is felt, experienced even be used as a natural phenomenon by normal teenager, sometimes need to be asked of peers or others. While that occurs in adolescents with special needs, especially autism, they cannot control their sexual behavior in case of sexual drive. Sexual behavior is behavior that is directed at achieving the satisfaction or enjoyment of sex (Pumamasari. 2008).

Similarly, adolescents in general, autistic teen sex education should be introduced as early as possible, particularly in individuals with autism who do require special handling (Puspita, 2008). The role of parents in childhood is crucial in preparing children with autism in the face of the teen years and adulthood. Parents are the ones who are responsible for the teaching of sexuality in children. However, the house is a private area where children are expected to express their sexuality needs. Parents had the opportunity to introduce the members of the body through daily activities, parents can establish a routine habit of children so that children understand the concepts of public versus private, parents and siblings can also be a model of behavior for the child.

In designing learning strategies there is one more thing that is not less important instructional media. Instructional media comes from the Latin plural of medium, which means an intermediary (between) is an intermediary source of the message (source) with the message recipient (receiver). In the process of teaching and learning is very useful media to convey the message in the process of learning, physical form to convey the lesson content. Teachers in presenting the subject matter must be accompanied by a supporting medium so that the learning process can be run in accordance with the purpose of learning. Thus, the relevant learning strategies can help solve existing

problems in school in general and for students with special needs such as autism in the study of sex education in Public Primary Schools SPECTRUM.

Given the importance of sex education for children with special needs such as autism, in the age of trying to enter their teens, children also need to understand the privacy and parts of his own body. What should not be considered when talking to other people, as well as touch can and cannot do to others, for girls, teach about hygiene during menstruation. The authors were interested in the issues raised into an essay in the form of a thesis titled Development of Sexual Education Learning Model-Based Method For Autistic Youth Socio Sexual Behavior in Autism SLB Surakarta.

The formulations of the problem in this research are:

1. How is the learning process of sexual education for adolescents with autism?
2. What model of learning by Sexual Behavior Socio method do?
3. The extent to which the effectiveness of learning what might be achieved in the implementation process of learning methods Socio Sexual Behavior?

2. Expectations of Product Specifications

Products developed the guidelines and instructions of sexual education for adolescents with autism based model of socio sexual behavior. The product is able to accommodate sexual education materials relating to the early guidance curriculum that can be used as a reference for the special schools with autism.

Products developed that sexual education of autistic teen sexual behavior model based socio compiled with the model specification as follows:

- a. Title
- b. Foreword
- c. table of contents
- d. Guidelines and instructions developed from initial guidelines applicable curriculum.
- e. Material curriculum program for children with autism, consists of three levels, the basic level, Intermediate level and Advanced level. The Basic and Intermediate level consists of six categories:
 - Category A = Ability Following Lessons;
 - Category B = The ability of Imitation (Imitates);
 - Category C = Ability Receptive Language (Cognitive);
 - Category D = Expressive Language Ability;
 - Category E = Ability Pre-Academic
 - Category F = Capabilities Help Yourself;

For Advanced Level, there are three additional categories: The ability of socialization and language ability Abstracts and Readiness for School.

Compliance and Eye Contact are included in Category A are the keywords entered Lova as method. Without mastery of both these abilities, children with autism will be very difficult to teach and understand the activities and behaviors of others.

Having mastered both children, then is followed by teaching ability Imitation and impersonations. Furthermore, the ability of Receptive Language, Expressive Language, Ability Pre-Academic, Self Help Ability, Abstract Language Proficiency and ability Socialization can be taught gradually and orderly.

Each product has different specifications with other products, while the advantages of these products is to train children to have the ability and skills of productive and recreation.

3. Importance of Development

In academic research is expected to be material in developing teaching materials autistic adolescent sexual education, which will provide relevant and contextual learning environment of students. Results of research material development are expected to be useful:

1. Educational Institution, the results of this study can be used as enrichment materials for teaching children with autism, especially adolescence autism.
2. For the teacher and therapist, the therapist can improve main quality standards of content standards that include core competencies and basic competencies, as well as standards-based learning process in context.
3. For students making it easier to achieve independence.
4. For other researchers, the results of this study can be used as a reference against which subsequent research related to the study.

4. Assumptions and Limitations of Development

A. Assumptions

Some assumptions put forward in development research are as follows:

- a. With models available guidebooks
- b. Socio sexual behavior, sexual education is expected understanding of autistic adolescents will be more easily absorbed by the students. So the implications are expected that can improve independence and understanding of sexual behavior that is acceptable in the environment in accordance with the norms and moral values.

- c. Students can use the learning model in accordance with conditions of students (abilities, needs, and constraints).
- d. Students can be equipped an ability skills it needs to achieve independence and as the eternal to the surrounding community.

B. Limitations Development

There are several limitations of development, in this study the product produced, among others:

- a. The learning objectives of autistic children in particular have not been there a statute and objective standard, but the clear teaching autistic children adapted to the needs of children keautisan level. (Diyah Puspita, 2003: 3).
- b. Principles of education and instruction for children with autism should be conducted continuously, simultaneously, and integral (comprehensive and integrated), resulting in the implementation of education not only in schools, but also must be followed up for activities at home.

5. Research Methods

5.1 Research design

This study is a research and development (R & D), using an experimental design to test the product developed where researchers want to develop a product guidelines and instructions to parents and peers in enhancing the independence of children with autism, so it can work like a normal kid.

Based on the problem under study, the researchers used a quantitative approach.

5.2 Participants

This study uses a random measurement prior to randomization, or in other words does after their measurement sample (pretest). Grouping subjects performed with random techniques (random assignment), (Latipun 2004).

The characteristics of the population in this study are:

- a. Youth mild mental retardation;
- b. Aged between 13 to 18 years;
- c. Youth mild mental retardation;
- d. Attends SLB junior level;
- e. Having a parent who can write and read;
- f. Parents subjects aged between 35 to 55 years;
- g. The level of parental education the subject of at least junior high school.

Based on criteria established by the researcher, subjects are eligible, amounting to 18 people consisting of 13 same-sex male and 5 female. Through random assignment then elected 9 as an experimental group and 9 as the control group. For selected as an experimental group then to their parents will be trained as a guide to conduct psycho-education about sexuality at home. As for the control group, the parents were not given training.

5.3 Procedures and Measurement

A. Researchers conducted research on the knowledge scale preparation of sexuality in adolescent with mild mental retardation Scale arranged to determine the level of knowledge of adolescent mental retardation in materials related to:

1. The organs of the body and reproductive organs;
2. Gender male and female;
3. Gender and social roles;
4. The characteristics of the growing maturity of the physical;
5. The views and attitudes toward physical changes in the body;
6. The way of expression, aspirated, and relate to the opposite sex.

Considering that teens with the condition of mild mental retardation have limitations in intellectual then to enable them to understand a given statement, then the statement is given with a brief statement on the scale consists of two options True or False. An item favorable for a positive answer was given a score of 1; whereas for a negative answer, while for item Unfavorable positive answer rated 0 and negative answer rated 1.

B. The process of psycho-education

a. Training for parents with regard to provisioning to parents how to submit material related to sexual knowledge as a guide to the implementation of the structured training modules in use by parents. Includes materials on:

1. The organs of the body and reproductive organs. Organs include knowledge about organ from head to foot and the main function of these organs, while the reproductive organs are knowledge of the genital organ that serves as the reproductive organs;
2. Gender male and female. Is the knowledge of understanding the gender of men and women, and the gender differences between men and women;
3. Gender and social roles covering knowledge on gender issues and social role in the community, knowing and understanding gender roles and gender differences and social roles;

4. The characteristics of maturity physical growth. I.e. knowledge about the characteristics of sexual development and physical changes experienced with regard to her sexual maturity.
 5. The views and attitudes toward physical changes in the body. I.e. knowledge about their body changes physically and showed the right attitude on the part of the body that should not be touched or held by other people, parts of the body that should not be opened or seem open by another person, the body that can only be seen with certain reasons, such as having examined when sick.
 6. The way of expression, aspirated, and relate to the opposite sex. I.e. knowledge of how expression, aspire and relate to the opposite sex as well as knowledge about how the proper attitude of expression, aspire and relate to opponent
- C. Psycho-education at home: psycho-education done by parents at home with the guidance given by the researcher's modules. Parents are given a worksheet that is a daily activity sheet, a sheet of monitoring the implementation of psycho-education at home. Modules are for both parents includes material about the knowledge of sexuality, namely: reproductive organs, sex, men and women, gender and social roles, characteristics of maturity and of the growing physically, views and attitudes towards changes in the physical body, the way of expression related to the opposite sex. The module also includes a method, time of execution, duration of psycho-education, and juvenile response upon knowledge of sexuality expressed by parents.

6. Results and Discussion

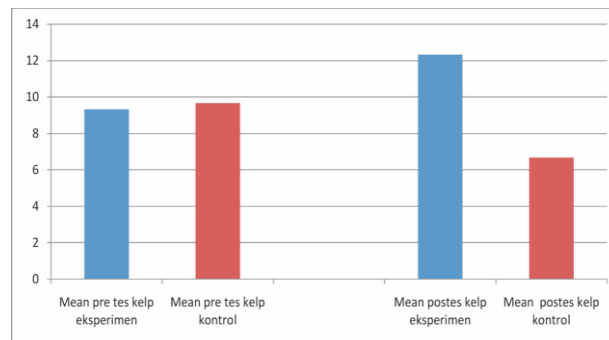
6.1 Results

Sexuality Increased knowledge on the subject of this study include the activity of the subject participation in following the process of psycho-education from parents. Matters relating to the study criteria cannot be separated from the right delivery method in accordance with the level of understanding of the subject as mentally retarded teenager teen mild mental retardation can receive information when accompanied with instructions that are real light. This is in accordance with the level of their thinking is concrete.

So methods such as Methods Research & Development with Model Socio Sexual them very interesting and more quickly understood because it is accompanied by real examples and tasks. The samples and observations that exist after the psychoeducation intervention of parents showed a significant difference between the control group and the experimental group ($p = 0.024$). The research data at the time of the posttest for the

experimental group showed an average score higher (mean = 24.67) compared with the average of the control group (mean = 19.22).

This strengthens the Wilcoxon test results of t-test between the experimental group and the control group during the posttest showed significant differences ($p = 0.012$). A significant increase in knowledge of adolescent's mild mental retardation is given psycho-education by parents than youth who were not given psycho-education by the parents.



Picture 1: Ccomparisons between the study group Mean sexuality experiments with a group control of adolescent autism

The results of the comparison of the mean knowledge of sexuality experimental group with a control group of adolescents who have mental disabilities / children with autism as follows:

Based on the above chart is known that the mean score of the experimental group during the posttest mean score higher than the control group. These differences indicate a significant difference. These results are in line with the Mann Whitney U stating there are significant differences between the experimental group and control group in the knowledge of sexuality ($p = 0.024$).

This shows that the research results psycho-education of parents proved effective in increasing knowledge of sexuality with their children who are teenagers with mild mental retardation. There was a significant increase in knowledge of adolescents mild mental retardation are given psycho-education by parents than youth who were not given psycho-education by the parents.

6.2 Discussion

Based on data obtained in the above it can be concluded that the hypothesis that psychoeducation of parents to be effective in improving knowledge of sexuality in adolescents mild mental retardation proven or acceptable results individually showed their subjects with increased knowledge of sexuality after being given psychoeducation by his parents in the house number three person. Subjects were decreased knowledge of

sexuality after being given psychoeducation by her parents at home amounted to two people. a subject that does not change the knowledge of sexuality possessed a number of 4 people consisting of 2 people have knowledge of sexuality in the medium level both before and after given psychoeducation by parents at home and two people have a level of knowledge in the low category either before or after the given psychoeducation in adolescents with mental retardation.

Research conducted in Turkey by Aysegul, Fatma, Dile and Zayneb (2009) conducted in mild mental retardation adolescents aged 15 to 20 years showed low sexual knowledge possessed teenager mild mental retardation. A total of 51.7% said bahwamereka never given the knowledge of sexuality by people who are professionals, while 46.7% said they never discuss sexuality with their parents. Their knowledge level is low. Some teens do not know the difference between the sexual organs of men and women. Most of the teenagers mild mental retardation illustrates that sexuality is only limited to the activity of kissing and intercourse. Therefore, it is very important to do a program to increase knowledge about adolescent sexuality mild mental retardation.

So based on the data analysis methods used is the model Socio-Sexual Behavior using U Mann Whitney test and the Wilcoxon test comparing subject scores on the pretest and posttest of the control and experimental groups. Both results showed that the experimental group psycho-education on effective parenting to improve knowledge on adolescent sexuality mild mental retardation Mann Whitney U ($p = 0.024$) and the Wilcoxon test ($p = 0.012$).

7. Recommendations

Based on the results obtained from this study, it is advisable for parents to be able to continue the process of providing knowledge to children by looking at the needs of children. The child's need for knowledge of sexuality will continue to develop in accordance with increasing of the chronological age, so expect the parents who were first able to explain to a child remembers the parents are the key figures for children Besides the parents in order to continue to gain knowledge and insight into the sexuality including how to treat children appropriately in accordance with the level of development.

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