Method and Media of Health Promotion in Adolescents with Disability in Kupang City

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Abstract

Adolescents with disability are unable to access health promotion service due to the absence of specific method and media of health promotion to meet their needs. This research aims to know the appropriate method and media for disability adolescent according to their impairment. Using qualitative approach with the purposive sampling method, the informant in this research was 8 disability adolescents (physical disable, deaf/speech impairment and intellectual disable). The result shows that reproductive health, hygiene, and healthy lifestyle are the preference topics while health workers and teachers are the preferable sources. Methods and media was selected based on their impairment: adolescents with physical disability choose discussion and playing games with the media learning in the form of moving image; adolescents with intellectual disability choose a method of sharing and discussion with media learning in the form of illustrated books and moving image (film/video); deaf/speech impaired adolescent did not choose any specific methods, but they asked to use the sign language in delivering the information. Therefore, planning and selection method of health promotion has to involve an adolescent with a disability as well as the teacher and parents, who know and understand the needs of each disable adolescent.

INTRODUCTION

Every human being in various groups of society and has rights that must be respected also protected. But in reality, there are many human rights violations that arise and afflict marginalized people, such as people with disabilities. The social condition of people with disabilities is generally considered to be vulnerable. Both from the aspects of economy, education, skills, and society. Most people see the shortcomings of people with disabilities regardless of other prominent potentials in them. The stigma against people with disabilities, makes it difficult for them to develop their potential to the fullest. So, they can not be independent and become dependent on others (Winurini, 2011).

Data from the World Health Organization (2011) states that the number of people with disabilities in Indonesia reaches 15-20% of the total population. Which means that 2 of 10 people in Indonesia have disabilities. The need for health services for people with disabilities is the same as people non-disability. However people with disabilities have experience inability to find adequate health services (Mitra et al., 2013). Most people with disabilities are...
eventually denied health facilities and are more badly treated in the health care system. Based on these conditions, the Government of the Republic of Indonesia signed a Convention on the Rights of Persons with Disabilities. Which was later passed into Law No. 29 of 2011. Concerning the Ratification of the Rights of Persons with Disabilities. This regulation then became a legal protection for the government, to issue other regulations to fulfill the rights of people with disabilities in Indonesia. Various efforts to protect the rights of people with disabilities, were increasingly carried out in their work programs, both at the national and regional levels. As published in the general newspaper of Victory News. The efforts of the Government of the Republic of Indonesia in protecting the rights of persons with disabilities in each region are, reflected in the implementation of service programs and social welfare. Through business skills activities held in Central Malacca, East Nusa Tenggara.

The data regarding the number of persons with disabilities, is still very difficult to obtain. Because the family cover up their situation, which inhibits recording and different methods of data collection in clarifying each type of disability. The number of people with disabilities in East Nusa Tenggara that was successfully recorded based on the SUSENAS 2012 data was 2.62. Social agency data from Kupang City shows that the number of severely disabilities in 2015 was 114 peoples. This data has not accommodated the overall number of persons with disabilities in Kupang City, including teenagers with disabilities.

An easy place to find teenagers with disabilities is in Special School. In the city of Kupang, there are three Special Schools, one of Special Schools is Asuhan Kasih. Asuhan Kasih Special School has 153 students in the 2015/2016 academic year and has 44 teachers. The situations of Asuhan Kasih Special School show that every few months, students get health services in the form of dental care and medical check-up. This information indicates that students get curative services compared to promotive services. This reason made the researcher interested in researching at the Asuhan Kasih Special Schools.

Promotive efforts that are not implemented, can cause various health problems that will directly or indirectly affect the adolescent and also for the next life (McPherson et al., 2017). The aim of doing promotive efforts using media and health promotion methods, is to make it easier for adolescents to gain knowledge and skills related to health information provided (Notoatmodjo, 2012).

Lack of health information causes similar problems, between adolescents with disabilities and non-disabled adolescents. Like other adolescents, adolescents with disabilities also have biological changes and sexuality problems. Such as body image problems, lack of access to information, and sexuality education (Barnard-Brak et al., 2014), feeling sexual sensations, obtaining sexual and reproductive rights, the right to become pregnant, and being subjected to higher exploitation than other general adolescents (Haydon et al., 2011). Some adolescents with disabilities, have communication difficulties, which are more vulnerable to being subjected to exploitation including physical and sexual violence (Better Health Chanel, 2016). The statement was also emphasized, based on preliminary interview data for adolescents with disabilities named Dn. It was found that the problems related to this were very high, especially because the promotive and preventive efforts. It did not directly relate to the adolescents with disabilities, but directed the accompanying activities or parents of the adolescents.

Health promotion methods and media that are right on target show that certain inputs (education targets) must use certain methods (Notoatmodjo, 2012). This is in accordance with the results of recommendations from the Base Line Survey report (2015), stated about understanding the right to reproductive health for adolescents with disabilities in Indonesia (research in 5 districts / cities in Indonesia). The special needs of adolescents with disabilities for education and health services, must be tailored to the needs and the type of disability. Health promotion efforts for adolescents with disabilities are considered very difficult. Because health promotion officers must adjust the methods and media used to suit the needs of adolescents with these disabilities (Mulligan et al., 2017).

The lack of methods and media, specifically for adolescents with disabilities in health promotion efforts. It is an important aspect that wants to study in this research. The purpose of this study is to explore information from adolescents with disabilities at the Asuhan Kasih Special School, as an effort to determine appropriate health promotion methods and media, for adolescents with disabilities in Asuhan Kasih special school, Kupang city.

**METHOD**

This research was conducted at the Asuhan Kasih Special School. The only public Special Schools located in Kupang city. Conducted with qualitative research design. In addition, the researcher also intends to know social situations in depth, finding patterns, hypotheses, theories in understanding appropriate health promotion methods and media for adolescents with disabilities at the Asuhan Kasih Special School.

The populations in this study were all ado-
lescents with disabilities, who were studying at the Kupang City of Asuhan Kasih Special School in the academic year 2015/2016 which amounted to 153 students. Informants in this study were adolescents with disabilities, determined by using purposive sampling technique. The selection of this sampling technique is based on certain considerations, held by the researcher on the sample data. As for the researchers’ consideration of the selection of informants were: teenagers with disabilities aged 16-24 years; adolescents with low vision / blind disabilities; teenagers with Down syndrome; adolescents with mild to moderate levels of disability without difficulty communicating; adolescents with hearing impairments and/or speech without communication difficulties, can be accompanied by sign language translators; teenagers with disability type of disability (daesa); easily adapt to new people and there are no obstacles in interpersonal relationships; and willing to be interviewed.

Based on the consideration of the researcher, 8 informants were obtained in this study. Informants in this study included 1 teenager with physical disabilities, 2 teenagers who have hearing impairments, and 5 adolescents with intellectual disabilities. Data was collected through in-depth interviews to gather information on adolescents with disabilities. The information obtained, was tested for its validity through technical triangulation and source triangulation. Namely by clarifying the results of interviews, with other informants and teachers, also caregivers from informants.

Data analysis was carried out after completing data collection through the process of reduction, data presentation, and conclusion / verification.

RESULTS AND DISCUSSION
Profile of SLB of Asuhan Kasih in Kupang City

Asuhan Kasih Special School is located on Jl. Pendidikan II No. 16 Kota Baru, Kelapa Lima District, Kupang City. The vision of Asuhan Kasih Special School is going to be the optimal provider of education for children with special needs in order to be faithful, devoted, independent and environmentally friendly. The mission is to implement learning programs effectively and maximally; developing active, innovative, creative, effective and fun learning; developing activities related to improving religious insight; improving skills in an integrated and continuous manner; also realizing that Asuhan Kasih Special School has a good environment.

Exposure to Health Promotion for adolescent with Disabilities

Health promotion is present as a revitalization of health education. If health education is not supported by supporting factors (for example: the availability of healthy latrines, clean water, nutritious food, immunization facilities, health services, etc.) then it is difficult for people to realize these healthy behaviors (Notoatmodjo, 2012; Marmi, 2014).

Research conducted by Oullette-Kuntz et al. (2010) indicated that people with disabilities were never provided by health promotion and disease prevention efforts such as those obtained by non-disabled people in general (The Special Olympic Ireland, 2012). People with disabilities do not get access or opportunities to participate in health promotion or health education programs (Heller et al., 2011).

Based on the results of interviews conducted by researchers with the Head of Asuhan Kasih Special School and several teachers. The researchers concluded that, there was no visit from the community health center that protects the Asuhan Kasih Special School in its working area. Researchers confirmed the reason, the community health center was not providing medical check-up services at Asuhan Kasih Special School. Because of a shortage of health workers, so, it was not possible to go to the field. While, the people who came to the community health center every day reached hundreds of people. Visits will still be made to the Asuhan Kasih Special School, when in the School Child Immunization Month.

The results of the study, found that only 1 of 8 key informants claimed to have received health promotion. This is evidenced in the results of the following interview:



"Pernah dapat, topiknya waktu itu tentang alat reproduksi laki-laki dan perempuan. Pas itu juga anak-anak dikumpulkan di parkiran sekolah waktu jam istirahat, itu ju sonde lama..." (IKG2).

“I once got, at that time the topic was about male and female reproductive organs. At that time friends were gathered in the school parking lot, during school hours to listen to the health information, the time to receive health information was not long” (IKG2).

All children have the right to a high standard of health. Thus, children with disabilities also have the same rights and opportunities to obtain reproductive health information also services as they grow up. But in reality there are no specific methods and media to help them obtain the health information. The services provided are still in the form of health screening services.

One of the important aspects in health promotion is communication. Communication is done verbally that can be understood by both parties. If
I saw no smoking campaign as well as no using illicit drug campaign. But I mostly saw no smoking campaign through the internet” (IKD1).

“Kalo cuma baca lewat internet pernah, tentang iklan rokok, soalnya sering main komputer di ruang ICT” (IKRW2).

“I once read in the internet about cigarettes advertisement, it is because I usually using computer in the ICT room” (IKRW2).

The internet has positive things, that can be used as a medium of long-distance communication, information, and data media. As a media to explore science, as a source of learning, as an information media for education and culture, etc. (Baeten et.al 2010). Whereas negative things from the use of the internet, include pornography that is easily accessible to users, fraudulent actions, addiction, irresponsible plagiarism, and causes children to forget to learn. So, they spend time with playing a games.

Active internet users will often receive various types of advertisements, one of which is health advertisements. Health advertisements found on the internet, do not have a major impact on young people with disabilities. Health advertisements usually appear as pop-ups, with a less attractive appearance and relatively small size. So, that the advertisement is often ignored.

Selection of Topics and Communicators
Health Promotion for Adolescent with Disabilities

The results of interviews conducted by researchers regarding the willingness. To obtain health information in the form of health counseling for adolescents with disabilities. Showed that all key informants, wanted to obtain the health information. This is evidenced from the results of the following interview:

“I want to get direct counseling to increase my knowledge” (IKD1).

Delivering of health information, requires a topic that is adjusted to the target. In this study, adolescents with disabilities expressed their desire to get a health topic, as evidenced in the following interview:

“Tapi saya pernah lihat iklan larangan merokok, iklan jangan menggunakan narkoba, pokoknya paling sering lihat iklan rokok di internet” (IKD1).
“Topik yang saya mau bahaya merokok, karena dari saya sendiri merokok itu menyebabkan penyakit dan rokok itu seperti mengandung narkoba, saya sendiri tidak merokok karena tidak suka, saya juga memilih topik informasi kesehatan seperti kesehatan reproduksi, karena seumuran remaja suka bebas melakukan seks. Contohnya seperti teman perempuan saya yang tuli bisu dan dihamili oleh laki-laki yang tidak bertanggung jawab dan orang tersebut orang normal” (IKG2).

“The topic that I want is the danger of smoking, because from my own smoking. It causes illness and cigarettes such as containing drugs. I myself do not smoke, because I do not like it. I also choose the topic of health information, such as reproductive health. Because a teenager likes to have sex freely. For example, like my female friend who is deaf and dumb. Being pregnant by irresponsible man and that man is a normal person” (IKD1).

In addition to stating a topic, the key informant also stated the facts that happened to the teenagers with disabilities. The statement was supported by Better Health Chanel (2016) regarding the health problems of teenagers with disabilities. Namely exploitation that occurred due to difficulties in communicating. Adolescents with disabilities are very vulnerable to sexual harassment to immoral crimes, that lead to pregnancy in young people with disabilities (Mahoney & Poling, 2011).

The results of interviews conducted with mentally disabled youth informants, showed diversity of topics according to their priority needs. Some key informants choose personal hygiene and/or reproductive health. This is evidenced from the results of the following interview:

“Beta pilih kebersihan diri karena pulang sampai malam, trus badan beoli semua karna ikut bantu kerja jadi konjak oto. Yang lain mangkali ju kesehatan reproduksi, soalnya ada perubahan tubuh seperti ada jakun, ada kumis, ada rambut-rambut ju” (IKG1).

“I choose the topic of personal hygiene, because I came home late at night, sometimes my body was full of oil. Because I worked as minibus driver assistants. Another topic might be reproductive health, because there are changes to the body such as Adam’s apple, there are fine hairs too” (IKG1).

“Tentang kebersihan diri” (IKG3).

“About personal hygiene” (IKG3).
Both statements from teenagers informants with deafness / speech disability are very limited. Because of the little vocabulary and how to convey that is difficult for researchers to understand. To assist researchers in interpreting the sign language, researchers are assisted by peer translators.

Topics chosen by key informants include reproductive health and its problems and Clean and Healthy Life Behavior (Perilaku Hidup Bersih dan Sehat / PHBS). The choice of this topic is due to the lack of information that they get, about the health information needed. The statement of researchers is supported by the Executive Summary of Children with Disabilities. Which states that adolescents with disabilities, are almost entirely ignored in sexual and reproductive health programs and HIV / AIDS programs. Because of the presumption that teenagers with disabilities are not sexually active. In fact, many young people with disabilities do not get basic information about their body’s development and changes. As a result, they are at risk for HIV infection (Jose et al., 2013).

Delivering health information requires a communicator. That is, the person who deliver the message or information to the communicant. The following is the result of interviews from key informants, regarding the right communicator to deliver health information:

- “Yang bisa kasih sapa sa, yang penting bukan beta pung sapa-sapa, bukan kawan juga, nanti malah main gila banyak” (IKG1).
- “Those who convey the health information can be anyone, the important thing is not my friend or family, because later they will joke more than be serious” (IKG1).
- “Dokter ju bisa, guru ju tapi bukan teman sendiri” (IKG2).
- “It can be doctors or teacher but not our own friends” (IKG2).

The results of interviews with these key informants, showed that most wanted doctors or teachers as communicators in the process of delivering health information. Separately, researchers find out, why teachers are used as communicators by most key informants. The results of the study, showed that teachers were the people closest to adolescent with disabilities in school and did not choose peers. Because informants considered their peers to be less competent in delivering health information.

**Health Promotion Method for the Adolescent with Disabilities**

The following are the results of interviews with adolescents with disabilities, regarding the right method for themselves to receive health information:

- “Cara yang saya pilih adalah dengan diskusi, bermain game dan drama” (IKD1).
- “The way I choose is by discussion, playing games and drama” (IKD1).

The reason for the key informant choosing the method is proven in the results of the following interview:

- “Karena dengan diskusi kita bisa bertukar pikiran dan tidak dengan menulis terlalu banyak, soalnya membosankan” (IKD1).
- “Because with discussion we can exchange ideas and not by writing too much, because writing is boring” (IKD1).

Discussion is a method that focuses on students (student-centered learning method). The discussion method chosen by the informant, shows that in the discussion process there is an interaction between two or more individuals, exchanging experiences, information, solving problems, and in the discussion process all members will be actively involved (Baeten et al., 2010).

Other learning methods that are in demand by physically disabled adolescents are playing games and drama. Both of which are intended in the learning process using simulation techniques. Simulation learning means a person’s behavior to behave like the intended person. With the aim, that the person can learn more deeply about how that person feels and acts as he is. The simulation method is also a way of presenting learning materials, through direct practice activities about the implementation of the values of applying knowledge and skills. That take place in everyday life. Simulation means imitation or act that is only pretending or acting, as if for the purpose of the intended learning (Baeten et al., 2010).

As long as the researcher interacts with the physically disabled adolescent as one of the informants. The researcher found no difficulty in communicating and asking, about health promotion methods and media for them. Adolescents with physical disabilities only have problems with self-confidence and inferiority. To overcome this, an environmental conditions that is capable of accepting the impairment, they have as a whole is needed.

Adolescents with disabilities, like key informants. Prefer something active through their invol-
The method favored by mentally disabled adolescents in delivering health messages is lectures. The lecture method is a way of delivering learning materials, with oral communication (Notoatmodjo, 2012). The researcher considers that the selection of this method, will be quite difficult for mentally disabled teenagers. If it is not supported by the right media to generate interest in learning for adolescents. When using the lecture method. The presenter can combine with several media, according to the choices of mentally disabled adolescents who rely on visual strength.

Teaching a health information to adolescents with disabilities requires consistent, continuous and gradual time. Adolescents who are mentally disabled have difficulty in learning. If the understanding is conveyed with complicated and long words. Adolescents who are mentally disabled, learn better by using visual powers such as using posters, graphics and so on. Shortly after receiving the information, the communicator should immediately ask for feedback from the mentally disabled adolescents. This is intended, so that, there is a feedback relationship between the communicator (messenger) and the mentally disabled adolescents as the communicant (recipient of the message). If there is a delay in the feedback process, the learning content points cannot be conveyed (Reynolds et al., 2013). The results of the interview indicate that key informants, namely adolescents with hearing impairments, do not provide statements or information about the desired learning method. The two deaf-speaking adolescent impairments informants, provide conditions for the delivery of health information as evidenced through the results of the following interviews:

“Cara mengajar dengan becerita langsung yang santai” (IKG1).
“The way to teach stories is to relax” (IKG1).

“Suka dengan becerita, supaya sonde tegang” (IKG3).
“we like to tell/share, so we do not get tense” (IKG3).

The selection of health promotion media must be adjusted to the target. The main objective of the availability of media is to ensure, that every child with special needs gets quality health promotion in accordance with their abilities. Thus, the media can help students master and understand the material / concepts of learning provided.

Specific criteria for the use and selection of media are the criteria set forth in the form of media specifications. Which usually include the forms/shapes, sizes, materials, and colors of the educational media. That are adjusted to the needs of students. Media selection must be adapted to the ability of adolescents with disabilities, to receive the information provided (Grove et al., 2018). Key informants of disabled adolescents provide statements about the media, that are right for themselves as evidenced in the results of the following interviews:

“Alat bantu yang cocok untuk saya bisa berupa alat peraga atau benda asli” (IKD1).
“The tools that are suitable for me can be props or original objects” (IKD1).

The use of props / artificial objects in the learning process for disabled adolescents, can increase understanding of the topic being studied. The results of a study conducted by Sakrani (2013) regarding the improvement of learning outcomes of disabled people, using torso media. Showed that in the first cycle the average score of students was 66.67 and in the second cycle it increased to 80. These results indicate that the use of torso media, can improve student learning outcomes. Which means, it is effective to assist in the learning process for students (Sakrani, 2013). Media education also acts as a stimulant of learning and can foster learning motivation. So, students do not feel bored in learning. Key informants for mentally disabled adolescents, choose a variety
of media to support the delivery of health information to themselves. Two key informants, chose artificial objects as learning media. This was evidenced in the results of the interview as follows:

“Pake benda palsu ju bisa” (IKG1).
“It can also use artificial objects” (IKG1).

“Belajar dengan benda buatan. Dengan itu, belajar lebih cepat dipahami dan nantinya kamu bisa memainkan permainan pertanyaan bagus “ (IKG4).
“Learning with artificial objects. With that, learning is faster understood and later you can play games of good questions” (IKG4).

In addition there are also key informants, who prefer learning media in the form of picture books and motion pictures (films). Both types of media are based on visual strength, to help the process of understanding the material received. This is evidenced from the following statement:

“Allatnya pake buku, soalnya kalo dengan buku beta masih bisa mengerti daripada bicara langsung, film juga boleh kalo ada” (IKG2).
“The tool can (to learn) use books because with books I can still understand rather than speak directly, movies can also be if there are any” (IKG2).

“Dibantu pakai buku bergambar, bisa gampang diingat” (IKG3).
“Helped with a picture book, it can be easily remembered” (IKG3).

“Belajar dibantu nonton video begitu” (IKG5).
“Learning can be helped by watching videos (IKG5)”.

During the interview process, the researcher found that complicated words would be difficult to understand for the mentally disabled. So, the selection of straightforward, easy-to-understand words must be presented during interaction with the mentally disabled adolescent. Optimizing learning media that relies on sound strength, has a good impact on the mentally disabled adolescent in accepting the learning topics they get. Stimulus images make better learning outcomes for tasks. Such as remembering, recognizing, recalling and connecting facts and concepts. While the verbal stimulus, makes learning outcomes more if the learning involves sequential memories, especially for adolescents with disabilities (Wang & Gathercole, 2013). The selection of picture books, screening of films and artificial objects, is a recommendation for the selection of making health media, for mentally disabled adolescent.

Unlike the case with key informants of disabled and mentally disabled adolescents, the two key informants of deaf/speech adolescents choose sign language to help their learning process. The statement of choosing health promotion media for deaf/speech adolescents can be proven from the results of the following interview:

“Belajarnya pake bahasa isyarat sedikit” (IKRW1).
“Learning must use a little sign language” (IKRW1).

“Nonton film, tidak tau ceritanya kalo tidak ada bahasa isyarat, kalo sudah nonton semua bisa tau” (IKRW2).
“If we watch a movie, we do not know the story if there is no sign language, if we have all watched we can know” (IKRW2).

Information provided and received by adolescents with hearing impairments were very limited. This is due to the very limited vocabulary that they understand. Therefore, special media is needed for their learning needs. Sign language is chosen to be inserted, into the promotional media used. The ability to understand material in deaf/speech teenagers, can be done by stimulating it through visual media. This is evidenced through the selection of film media, as one of the selected media.

The power of visual media in adolescent with hearing impairments, can be done by familiarizing this special need adolescents, to read lip movements or lip language. In addition, the use of poster media, films, picture books also affects their understanding of the material presented.

In general, the selection of media for adolescents with disabilities, can be done by analyzing the level of needs and characteristics of the adolescent. Then formulating instructional objectives rationally, formulating detailed items that support the achievement of goals, developing measuring instruments for measuring success, writing scripts media used, and conducting tests, also revisions. The purpose of the test and revision is to determine the level of success of the media, in delivering the message. So that, it can be seen the benefits of using certain media in supporting learning for young people with disabilities.

Optimizing sensory devices possessed by
adolescents with disabilities, is needed in the teaching-learning process. So that, learning process is successful. The most concrete thing, that can be done in the learning process is the use of artificial objects, observation and direct experience. Which means that young people with disabilities experience the topic directly discussed (Duhaney et al., 2015). This experience can stimulate for young people with disabilities, to develop a topic of conversation so that the learning process runs well.

CONCLUSION

Disability adolescents at the Asuhan Kasih special school, have never received direct health counseling in their schools and all informants want to receive health education. The health topics desired by Adolescents with disabilities at Asuhan Kasih special school are: reproductive health, individual hygiene, and PBHS. Adolescents with disabilities at Asuhan Kasih special school: select health workers and/or teachers as the intended delivery of health information. The right method in delivering health messages, according to the needs of adolescents of each type of disability. Likewise the right media for adolescents is in accordance with the type of disability.

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