The Role of Social Skill and Parental Involvement in the Quality of Life of Working Individuals with Intellectual Disability

Paramita, Devi Ariya  
Faculty of Psychology Tarumanagara University Jakarta, Indonesia  
deviariya1994@gmail.com

Atmodiwirjo, Ediasri Toto  
Faculty of Psychology Tarumanagara University Jakarta, Indonesia  
ediasria@fpsi.untar.ac.id

Soetikno, Naomi  
Faculty of Psychology Tarumanagara University Jakarta, Indonesia  
naomis@fpsi.untar.ac.id

Abstract — This research was conducted to find the role between social skill and parental involvement toward quality of life of working intellectual disabilities. Quality of life in intellectual disability require special attention hence the increase amount of intellectual disability. Social skill was measured using an instrument called Social Skill Rating System (SSRS) (Gresham & Elliot, 1990) and parental involvement was measured using Alabama Parenting Questionnaire (APQ) (Frick, 1990). Quality of life was measured using WHOQOL-DIS (WHO, 2007). The participant of this research are 66 working intellectual disabilities at the age of 20 to 62 years old. The result of this research show that parental involvement positively correlated significantly with quality of life ($r = 0.432$ dan $p = .1 < 0.05$). This means that the higher the parental involvement, the higher the quality of life of intellectual disabilities. However, there is no significant correlation between social skill and quality of life ($r = 0.265$ dan $p = .015 > 0.05$). Based on these research, it is advisable for parents to become involved in their child’s life particularly in individuals with intellectual disability.

Keywords: social skill, parental involvement, quality of life, intellectual disability

I. INTRODUCTION

Data on the number of individuals with disabilities is increasing every year, intellectual disabilities is one of the various other disabilities. Intellectual disability is a disorder that occurs during the development period which includes a decline in both intellectual function and adaptive functions in the conceptual, social, and practical domains [1]. Someone with intellectual disability has a number of difficulties in various ways, namely communicating, remembering, understanding social rules, understanding cause and effect on everyday events, solving problems, thinking logically, social functioning problems and also reacting and interacting according to his age [2]. With the lack of intellectual, adaptive functions and the difficulties they have, these individuals get bad treatment and negative stigma from the environment that affects the quality of life of these individuals. This is reinforced by previous research that the high negative stigmas are related to depressive symptoms and lead to a lower quality of life [3]. The research was strengthened by the existence of a study in America showing that 220 adolescents with special needs had a lower quality of life compared to adolescents who did not have special needs [4].

The concept of quality of life for individuals with intellectual disability emerged in the 1980s at the end of the century which became a sensitive phenomenon and then distributed services emerged for these individuals. It becomes clear that with appropriate support, the quality of life of individuals with intellectual disabilities will improve [5]. Quality of life has a broad concept and includes the complexity of individuals, such as physical health, psychological conditions, personal beliefs, social relations and relationships between individuals and their environment [6]. Quality of life is defined by the World Health Organization [6] as a perception possessed by an individual regarding his position in life encompassing a cultural context and a value system that applies to himself, it is also related to goals, expectations, standards and concerns. Quality of life itself has several influencing factors, namely age, education, marital status, family and financial. Regarding the quality of life of individuals with intellectual disabilities, there is an assumption that...
parental involvement can improve the quality of life.

Parental involvement is important to ensure that individuals with intellectual disability receive opportunities to achieve a good quality of life after school [7]. A researcher named Tim Smith from Brigham Young University stated that parental involvement in children with disabilities using positive parenting can reduce the severity of a child's disability over time [8]. His research also explained consistently that the involvement of parents with consistent positive parenting causes better children's development. In contrast, the involvement of parents who use too much control on their children can cause lifelong psychological damage and the researchers found low scores on the happiness and welfare survey [9]. In a study conducted by Medvedev & Landhuis [10] happiness and well-being have a high relationship to the quality of life of an individual. It can be said that parental involvement seems to have an impact on individuals to achieve the quality of life of these individuals.

In addition to parental involvement, there are social skills that can contribute to the quality of life of individuals with intellectual disabilities. This is because the quality of life of an individual with intellectual disability can be increased by the existence of social interaction and can affect the life satisfaction and well-being of the individual. With the increase of social interaction, the social skills possessed also increase because social interaction is part of social skills [11]. Combs & Slaby states that social skills are abilities possessed by an individual to interact with others in a social context. The interaction is done in a specific way that is socially acceptable and socially valuable and at one time will be beneficial for oneself or others [12]. Social skills contribute greatly to social relations, how an individual handles a problem in his environment, including overcoming personal conflicts [13].

The quality of life of individuals with intellectual disabilities needs to be considered given the number of individuals who are not small but they also have the right to live according to others. In this study it seems that parental involvement and social skills are predictors of quality of life in individuals with intellectual disabilities, especially individuals who have worked. The working status of intellectual disability individuals is a separate requirement so that it does not distinguish between individuals with intellectual disabilities or not.

Based on the background described above, it is known that there is a role for social skills and parental involvement in the quality of life of individuals with intellectual disabilities. Furthermore, the limited research that addresses the quality of life of intellectual disability individuals in Indonesia is of particular concern to the authors conducting research related to quality of life in individuals with intellectual disabilities.

II. RESEARCH METHOD

A. Research Participants

The participant of this research are 66 working male and female with intellectual disabilities at the age of 20 to 62 years old. This research does not limit by ethnicity, culture, race and religion. In addition, this study also does not limit subjects to certain socio-economic levels. Samples were taken using purposive sampling.

B. Measures

WHO develop the World Health Organization Quality of Life-Disability to measure the quality of life of individuals with intellectual disabilities [7]. The WHOQOL-DIS consists of 13 items (1 item with general questions and 12 items with more specific questions). This scale is rated on a 5-point Likert scale from ‘Never’ (1) to ‘Very Often’ (5). An example of quality of life variable statement is “Do you feel that a number of people treat you unfairly”. The result of the analysis show that this scale has adequate internal validity and reliability (Cronbachs Alpha = 0.845)

The questionnaire for measuring social skills is a Social Skill Rating System (SSRS) developed by Gresham & Elliott [14]. This measuring instrument consists of three separate questionnaires for teachers, parents, and students. The form of SSRS used in this study is the SSRS student version is a form in the form of a checklist containing various statements about the behavior of children that are filled by themselves regarding their social skills. This measuring instrument consists of 21 items and uses a Likert scale with three scale points (1 = Never; 2 = Sometimes; 3 = Very Often). Variable social skills include 4 dimensions, namely empathy, responsibility, self control, and assertiveness. The dimensions of empathy have 6 statements. An example of a statement of dimensions of empathy is: “I try to understand my friend’s feelings”. The dimensions of responsibility are 5 items. An example of a statement of responsibility is: “I do my homework on time”. The dimensions of self-control there are 6 items. An example of a statement of dimensions of self-control is: “I ask permission before using someone else’s property”. The dimensions of
assertiveness have 4 statements. Examples of assertiveness dimensions are: "I tell others when I'm sad". Internal reliability testing shows that this measure of social skills is a reliable measurement tool. The cronbachs alpha value in each dimension ranges from .64-.76, with the total corrected item value on each item more than .20 so that no items are discarded.

The Alabama Parenting Questionnaire (APQ) questionnaire developed by Frick [15]. This measuring instrument is arranged based on five dimensions namely parental involvement, positive parenting, poor monitoring / supervision, inconsistent discipline and corporal punishment. In this study, researchers only used items from the parental involvement dimension to measure parental involvement which had a total of 16 items. Basically, this measuring instrument uses a Likert scale with five scale points (1 = Never; 2 = Ever; 3 = Sometimes; 4 = Often; 5 = Very Often). An example of a variable statement of parental involvement is: "I have friendly talks with my parents". Through the results of the reliability test, it is known that the measure of parental involvement has adequate internal validity and reliability of $\alpha=.826$.

C. Statistical Analysis

Collected data are processed by SPSS software. First, we check for the reliability of the three scales used by using Cronbach's Alpha. The validity of each item is measured by item-total correlation and content validity. WHOQOL-DIS correlation testing with SSRS and APQ.

III. RESULTS AND DISCUSSION

Testing the correlation between social skills and quality of life using the Spearman correlation calculation. The calculation results show that $r (66) = 0.265$ and $p = .15>0.05$. Thus there is a positive and not significant relationship between social skills and quality of life. This means that there is a relationship between social skills and quality of life but does not play a role between them. The correlation between parental involvement and quality of life show that $r (66) = 0.432$ and $p = .000 <0.05$. Thus there is a positive and significant relationship between parental involvement and quality of life. This means that the higher the involvement of parents, the higher the quality of one's life. Likewise, vice versa, the lower the involvement of parents, the lower the quality of social life that is owned.

Based on the results of the study on the social skills and quality of life variables there are positive but not significant relationships that indicate a relationship between social skills and quality of life but do not play a role. This is a result that is not in accordance with previous research. Based on the results of research conducted by Daly & Kinsella, it is said that the importance of having knowledge about the skills to communicate is social skills because it can have a profound effect on a person's quality of life [16]. The results of this study are explained by other studies that the perceptions of individuals with adult intellectual disabilities differ from other populations individuals with disability intellectuals have a positive and optimistic view of their own lives and they are less critical of the environment so they can be satisfied with their own lives [17]. Based on data processing variables of parental involvement and quality of life, the results of a positive and significant relationship between the two variables were obtained. This shows that the higher the involvement of parents, the higher the quality of life of a person. These results support other studies that show the same results that parental involvement including family support can determine a person's quality of life [18].

This study has several limitations. The first limitation is that it is difficult to get multiple research participants simultaneously because the status of the participants is already working so the researcher must visit the participants one by one. The second limitation is the lack of participants who are willing to participate in filling out the questionnaire because individuals with intellectual disabilities who have worked and can adapt to the community do not want to be considered intellectual disabilities. Third, there are still limited studies in journals that discuss topics related to this research directly.

IV. CONCLUSION

The results of this study indicate a significant role of the parental involvement variables on quality of life in working individuals with intellectual disabilities. However, the role given by the social skills variable to quality of life in working individuals with intellectual disabilities is not significant. So that it can be said that the greater the role of parental involvement, the higher the quality of life of the individual. Therefore the involvement of parents has an important role in determining the quality of life of working individuals with
REFERENCES

[1] American Psychiatric Association (APA). “Diagnostic and Statistical Manual of Mental Disorder Edition-DSM-5”, Washington DC: American Psychiatric Publishing, Washington DC, 2013.

[2] The American Association on Intellectual and Developmental Disabilities. Intellectual and Developmental Disabilities: August 2010, Vol. 48, No. 4, pp. 307-309.

[3] D. Rao, W. T. Chen, C. R. Pearson, J. M. Simoni, K. Fredriksen- Goldsen, K. Nelson, F. Zhang, “Social support mediates the relationship between HIV stigma and depression/quality of life among people living with HIV in Beijing, China,” in International Journal of STD & AIDS, vol. 23(7), pp. 481-484, 2012.

[4] D. A. Novita, R. Novitasari, “The Relationship Between Social Support and Quality Of Life In Adolescent With Special Needs” in Jurnal Psikodimensia, 2017

[5] M. A. Verdugo, P. Navas, L. E. Gómez, R. L. Schalock, “The concept of quality of life and its role in enhancing human rights in the field of intellectual disability,” in Journal of Intellectual Disability Research, vol. 56(11), pp.1036–1045, 2012.

[6] The Work Health Organization Quality of life in who.int., 2018

[7] M. M. Griffin, E. D. McMillan, R. M. Hodapp, “Family perspectives on post-secondary education for students with intellectual disabilities, in Education and Training in Autism and Developmental Disabilities, 2010.

[8] M. Diamant, “Parenting style has big impact on kids with disabilities” in Disabitiescoop.co, 2012.

[9] C. Cooper, “Overly controlling parents cause their children lifelong psychological damage, says study” in Independent.co., 2015.

[10] O. N. Medvedev, C. E. Landhuis, Exploring constructs of wellbeing happiness and quality of life. PeerJ, 2018.

[11] D. Abells, J. Burbidge, P. Minnes, “Involvement of adolescents with intellectual disabilities in social and recreational activities,” in Journal of Developmental Disabilities, 2008.

[12] K. W. Merrel, G. A. Gimpel, “Social skills of children and adolescents conceptualization, assessment, treatment,” NY: Psychology Press, 2014

[13] K. R. M. Smith, J. L. Matson, “Social skills: Differences among adults with intellectual disabilities, comorbid autism spectrum disorders and epilepsy,” in Journal of developmental disabilities, 2010.

[14] F. M. Gresham, S. N. Elliott, M. J. Vance, C. Cook, “Comparability of the Social Skills Rating System to the Social Skills Improvement System: Content and Psychometric Comparisons Across Elementary and Secondary Age Levels,” in School Psychology Quarterly 2011.

[15] P. J. Frick, “The Alabama Parenting Questionnaire,” Unpublished rating scale, University of Alabama, 1991.

[16] M. Daly, W. Kinsella, “A System Approach to Social Skills Training for Adults with Intellectual Disability: An Irish Perspective,” in International Journal of Technology and Inclusive Education (IJTIE), 2014.

[17] C. Simoes, S. Santos, “The quality of life perceptions of people with intellectual disability and their proxies” in Journal of Intellectual and Developmental Disability, 2016.

[18] H. Kaur, H. Kaur, M. Venkateasahn,“Factors determining family support and quality of life of elderly population,” 2015.