ANALYSIS OF SKILL COMMUNICATION AND MORAL EDUCATION 
MENTAL RETARDATION STUDENTS

Candra Dewi
Universitas PGRI Madiun
candra@unipma.ac.id

Melik Budiarti
PGSD, FKIP, Universitas PGRI Madiun
melik@unipma.ac.id

Abstract
Communication skills and moral education are key in social interaction with others. Mentally retarded students experience a disruption in developing communication and the need to provide moral education to retarded mental students. This study aims to analyze the communication skills and moral education of mental retardation students in elementary schools. This research is a descriptive study with a qualitative approach. This study used three types of data collection techniques, including observation, documentation, and interviews. The technique used to analyze data in this study is interactive data analysis consisting of the stages of data reduction, data presentation, and conclusion drawing. Based on the implementation of the study in addition to experiencing learning difficulties, mental retardation students also experience a disruption in communication. Retarded mental students have difficulty communicating with their friends and also with their teachers. The mentally retarded Shiva also has not received the maximum moral education.

Keywords: communication skills, moral education, mental retardation

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A. INTRODUCTION

Students with mental retardation have different characteristics with normal students in their learning activities. Students mentally retarded learning by imitating others, they had an academic disability characterized by intellectual or cognitive function retarded mental students below average compared to normal students, accompanied by limitations on their adaptive functions so that mentally retarded students had difficulty adapting with the surrounding environment. This adaptive behavior has a role that is as important as intellectual or cognitive abilities. Mental retardation or intellectual disabilities or developmental retardation are the developmental retardations of children's behavioral
functions caused by intellectual damage to the child. IDEA (Individual with Disabilities Education Act) defines that mental retardation, in general, has a level of intellectual ability below the average normal child and simultaneously experiences obstacles to adaptive behavior during its development which results in detrimental performance (performance) of children's education (Heward, 2009: 132) From these difficult adaptive abilities, students also find it difficult to communicate with others.

Not all mental retardation children have the same characteristics. Heward (2009: 138) describes the characteristics and education of mental retardation children, among others:

1. Cognitive function is the characteristic of weakness in cognitive and learning functions including weak memory, slow learning process, problems with attention, difficulty generalizing in learning and lack of motivation in learning.

2. Behavioral adaptation is mental retardation students substantially experience weaknesses in behavior adaptation. This limitation in social skills creates difficulties in obtaining opportunities to participate in their environment.

Characteristics of children who experience mental retardation lie in weakness in the academic field. Retarded mental children have difficulties in the field of academic performance. These difficulties can be seen from various fields of student teaching. Academic ability is influenced by weak attention, memory, motivation, language development and the process of generalizing the language. The social characteristics and behaviors of mental retardation children will influence them in adapting to the surrounding environment, which will relate to the ability of retarded mental students in communicating and interacting both in and outside the classroom.

Cognitive aspects of mental retardation students will affect their communication and social skills and vice versa. A person's cognitive function includes basic academic
knowledge, reading, writing, recognition functions of numbers, time, currency and measurement. According to Efendi (2001: 9) communication is an interaction that takes place between individuals because of the similarity of meaning about what is being said. Communication will occur if someone delivers a message to another person with a specific purpose and purpose which is supported by the presence of components of the message/source/communicator, the recipient of the message (communicant) media, messages and effects (Cangara, 2008: 21).

Communication done by a person includes receptive language and expressive language. This communication is important and it is necessary for individuals to interact with other human beings, both individuals, and groups, and the person uses information obtained to connect with the environment and others. The purpose of communication is to change behavior, change opinions, change attitudes, and change social (Cangara, 2008: 9). Communication disorders are one of the characteristics experienced by mental retardation students, these disorders can be mild disorders and severe disorders. This condition will become increasingly difficult if the social environment of mental retardation students does not provide communication skills for mental retardation children. Mental retardation conditions have placed children in difficult conditions to learn communication skills, especially for complex communication.

B. METHODS

This research was carried out in elementary schools. This research was carried out in grade 1 elementary school. This research is a descriptive study that uses a qualitative approach and presents it in the form of data in the form of words and descriptive language. Qualitative research is a research shown to describe and analyze phenomena, social
activities, attitudes, beliefs, perceptions, thoughts of individuals as well as groups (Sukmadinata, 2007: 60).

Subjects for this study were retarded mental students in elementary schools. As a triangulation, researchers utilize School Principals and Class 1 teachers. The research is based on that the Primary School has implemented an environmental education that is integrated with each learning theme. In research data collection techniques used include observation, interviews, and documentation.

The instrument used is the researcher himself. Data analysis in qualitative research was carried out when data collection was being carried out and after the completion of data collection. Activities in analyzing qualitative data of other children: (a) Data reduction, is a process of selecting, separating, paying attention and simplifying, abstracting and transforming crude data that arises from the records found in the field; (b) presentation of data, carried out to facilitate the researcher in seeing the picture in the last or only certain parts of the research; (c) drawing conclusions, is a continuous verification as long as the research process takes place during the data collection process. The conclusion is done by taking the essence of a series of research results based on observation, interviews and documentation.

Data validity techniques used are using triangulation. This technique checks the validity of the data by utilizing something other than data for checking purposes or as a comparison to the data. This study uses two types of triangulation namely source triangulation and technical triangulation. Source triangulation was used by researchers to check data obtained from grade 1 students, class teachers and principals. While technical triangulation is used by researchers after getting the interview results which are then checked by the results of observation and documentation.
C. RESULT AND DISCUSS

1. First Respondent

AS was born in Ngawi on September 1, 2007 the daughter of Misdi and Kasini. Her parents worked as farmers (farm laborers). Mr. Misdi was 42 years old and only graduated from elementary school while her mother was 32 years old and graduated from elementary school. AS's medical history from birth to now has never experienced very worrying pain, but only heat, flu or coughing. At the time of pregnancy the mother's AS also did not experience any problems, such as a pregnant person in general, never taking drugs sold in the market and often feeding the womb in the midwife. According to the midwife, there is no normal pregnancy. Her birth was normal through the midwife, her baby was also big. AS in the IQ test has less intelligence. Intelligence classifications include Intellectual Defective with the interpretation of children having difficulty adjusting to relationships, difficulty learning new things and requiring a longer time in learning. In terms of communication, AS experiences problems or communication disruptions both from expressive language and receptive language. A receptive language disorder is indicated by the ability to digest questions raised by researchers that are not clearly understood even though the question is very easy.

2. Second Respondent

ARP was born in Ngawi, September 1, 2003, from Suparno and Wagiyem. His father was 45 years old, graduated from elementary school and worked as a farmer. While his mother was 35 years old, his last education never graduated from elementary school and worked as a farmer. ARP medical history, when in the womb had no complaints, normal as pregnant women in general and also experience morning sickness.
During pregnancy never experience bleeding or consume drugs sold in the market. At the age of 4 years, ARP once experienced high heat up to step and that was also experienced at the time of grade 1 elementary school, around the age of 7 years experienced a step to come in the hospital for 7 days and recovery for one month at the hospital. ARP in IQ tests, intelligence classification including below average, grade IV with the interpretation of intellectual abilities under children of his age, sufficiently able to learn new things, have less memory and less able to understand new information. ARP experiences problems or communication disorders both from expressive language and receptive language. A receptive language disorder is shown by the ability to digest questions posed by researchers that they do not clearly understand even though the question is very easy.

3. Analysis of Communication Ability and Moral Education of Mental Retardation Students

In learning, especially in mental retardation students can be known from the results of initial observations and interviews. Before carrying out the research process researchers conducted observations and interviews to find out the real conditions in the field and find information about social inactivity and mental retardation student communication in schools. In following the teaching and learning process in the US class is different from his friends in the classroom. The child is more passive in attending classes in class. The results of this observation combine direct observation by researchers and the results of cross-checks from the class teacher. The US learning process requires a longer time than his friends and requires frequent repetition to understand it. Observations are carried out at the time of the respondent's resting activity. The US does not play outside the classroom with other friends, he is only in
class while holding a pencil and a book. The US is always seen together with his friend Silvi. The US is not seen communicating with friends. When invited to talk with his friend he just kept quiet. Moral Education has not been maximally given to the US. This is because the US is difficult to communicate with and he only mimics the activities of his friends. for example, imitating his friend to put money in the charity box and not his own awareness.

ARP has the ability to think less and this happens also in the ability to understand. The habit factor is to make this child do it but for new material or things that have just been learned, the child experiences difficulty in learning it so that it needs the help of others to make it easier to understand the material both from his teacher and from his peers by working in easy steps or step by step. ARP is seen communicating with peers. When playing he often played with kindergarten students. ARP Moral Education also cannot run well. ARP also only mimics the activities carried out by friends. When a friend falls while playing, ARP is silent and does not help.

D. CONCLUSION

Disruption of communication and moral education faced by mental retardation children in the regular class must be resolved. The disorder is located in the academic field of students, the ability to do social interaction, communication skills and motive skills (fine motor skills associated with writing activities) and less optimal education. Besides this, the problem faced is the memory of a weak child. To improve the ability of children both in academic, social, communication, motorbike, and memory, it is necessary to strive for repeated exercises. Training for respondents to improve their abilities requires support from the family, teachers, and peers.
E. SUGGESTION

Based on the above conclusions, the following suggestions can be submitted:

1. For teachers, they should always provide motivation and service to mental retardation students, especially to train their communication skills and moral education. In addition, the teacher should increase insight in describing support for parents who have mentally retarded children so parents will also train students' communication skills while at home.

2. For schools, they should be able to facilitate and channel the talents of mental retardation students.

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