

Conference Paper

The Correlation between Parental Involvement and Social Competence Behavior of Adolescents with Intellectual Disability

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Abstract

Five percent of the world's children population, have significant mental disabilities. Riskesdas research in Indonesia mental retardation at the age of 24-59 months is the third highest percentage to the disability rate. One of the problems with an intellectual disability is social competence. Parental involvement is an important role in the psychosocial development of children. This research goal is to determine the correlation between parental involvement and social competence behavior in adolescents with intellectual disability in the SLB Negeri Bogor. This study was correlational analytical with cross sectional approach. The population of the study was parents with intellectual disability adolescents who have age of 12-21 years, were 42 respondent, taken with total sampling technique. The instrument used is Alabama Parenting Questionnaire (APQ) 42 item and social competences questionnaire 20 item. Validity test for social competences instrument using product moment Pearson and reliability with alpha Cronbach was carried out on 24 respondents on September 30, 2018. Data retrieval was conducted on November 9-12, 2018. Data analysis used univariate and bivariate tests with Chi Square test. The results showed that from 42 respondents as many as 22 (52,4%) had a high parental involvement and 22 (52,4%) respondents with high social competences with p value = 0.032 (<0,05). There is correlation between the two variables and the OR value is 3.980. Adolescent with intellectual disability had high parental involvement will result high social competence behavior.

Keywords: parental involvement, social competence, intellectual disability

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1. Introduction

According to Erikson, adolescents are in the fifth stage of Identity versus Confusion characterized by the development of self-identity. The development of self-identity in adolescence is based on the efforts of adolescents to test their abilities and increase their independence [1]. But intellectual disability or commonly known as mental retardation will be different, related to their low Intellectual Quotient (IQ). The incidence of

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mental retardation in various developing countries generally ranges from 1-3% population [2].

According to 2011 data from WHO, around 15% of the world's population 785 million people have significant mental disabilities, including 5% of children. Central Bureau of Statistics Data (BPS) in 2010, the number of people with disabilities in Indonesia was around 2,126,785 people. Mental retardation alone amounted to 345,815 people, or around 0.016%. Based on SUSENAS data in 2011, of the 82,980,000 Indonesian children as many as 9,957,600 children were children with special needs. The latest research in Riskesdas, in Indonesia mental retardation at 24-59 months is the third highest percentage is 0.14% according to the disability number and this result is still recorded from 2010-2013 [3].

The term mental retardation is changed to intellectual disability, because it seems more human, and this term has been agreed upon by educators in America. Mental retardation, often referred to as mental retardation or intellectual disability is a state of stalled or incomplete mental development, which is mainly characterized by the existence of skill constraints during the development period, so that it affects all levels of intelligence, namely cognitive, language, motoric, and social abilities [4].

Mental retardation rates according to the American Association of Mental Retardation (AAMR) are divided into four namely mild (IQ 50-70), moderate (IQ 35-50), severe (20-35), and very severe (IQ <20) [1]. Based on its definition, there are two important characteristics of intellectual disability contained in it, namely limited intellectual function and limitations in adaptive behavior such as communicating, caring for oneself, and social skills. One of the problems with intellectual disability is social skills. People with intellectual disability tend to be limited to building positive relationships with their friends. Therefore, attention is needed in building social skills in persons with intellectual disability. In Law No. 11 of 2009 concerning Social Welfare, social welfare is a condition of fulfilling social, material, spiritual and social needs for citizens to be able to live properly and be able to develop themselves, so that they can carry out their social functions [5]. Social functioning is closely related to social welfare It can be said that intellectual disability people who have limitations in social skills have not been able to function optimally because they have not been able to carry out social roles according to their social status. Although they have limitations in social skills, they also need to establish social relationships with others. So the need for involvement during the period of psychosocial development [6].

Social competence according to Gresham and Elliot consists of two aspects, social skills and adaptive behavior [6]. There are several factors that can influence social competence according to Smart and Sanson, namely, individual characteristics, environment and relationships with peers [7]. In addition to these three factors, Tjia also concluded that the factors that influence social competence are: age, education level, socio-economic status, parenting patterns, and emotional maturity [8]. Families, especially parents, play an important role in the psychosocial development of children [9]. Parents are a common understanding of father and mother, but parents are not always in the sense of giving birth. Parents are also defined as someone who has given life to each individual [10]. According to Hawes and Jesney parental involvement is defined as parents' participation in their children's education and experience [11]. Parents play a very important role in the psychosocial development of children, because at this time school-age children will have an increase in various things, including interactions and learning achievements to produce a work based on one's own abilities. Achieving this ability will make him proud. Obstacles or failures for this cause children to feel inferior so that in adulthood they will experience obstacles in socializing [12].

The results of the preliminary study through interviews with 3 teaching teachers at the SLB Negeri Bogor on November 6, 2018, there were 12 children who experienced social competence problems such as not cooperating, not being able to be responsible, lack of self control, empathy for others which is still lacking, as well as the existence of maladaptive behavior. This maladaptive behavior occurs a lot in male students in the middle school level, this maladaptive behavior is related to sexual development namely high libido. The case in question is that there are 3 children who show their dicks to their classmates. As well as the results of interviews with parents of students who have mentally retarded children, information was obtained that most parents were involved in all aspects of their children's lives, but there were only a few who paid little attention or were involved in their children's lives due to work reasons. The results of the preliminary study present the problem of social competence in intellectual disability adolescents, so researchers are interested in examining whether there is a relationship between parental involvement and the intellectual competence of intellectual disability.

2. Methods

2.1. Design and sample

This study was correlational analytical with cross sectional approach. The population of the study were parents with intellectual disability adolescents who have age of 12-21 years, were 42 respondent, taken with total sampling technique. This research was conducted at SLB Negeri Bogor. The population of this study were 42 students with intellectual disability in the 12-21 year age range. Retrieval of data in this study was carried out on November 9 to 12, 2018. This research was conducted at 8:30 a.m. to 12:00 p.m. In this study researchers used a survey method that collected information by compiling a list of statements to be submitted to respondents. Respondents in this study were parents with intellectual disability children in the age range of 12-21 years who attended the SLB Negeri Bogor. In collecting data, researchers were assisted by a school committee chair and 4 teachers who were given an explanation in advance of how to fill out the questionnaire provided by researchers regarding parental involvement and the social competence of intellectual disability children.

2.2. Measurement

The instrument used is Alabama Parenting Questionnaire (APQ) 42 item and social competences questionnaire 20 item (Elgar, F. J., et.al, 2007). The questionnaire to find out parenting involvement with Likert scale: Never (1), Almost Never (2), Sometimes (3), Often (4), Always (5). The nominal rating scale is categorized as follows: (1) Low if the value < 98, (2) Medium if the value 98-154, (3) High if the value > 154. The questionnaire to find out social competences with Likert scale: Never (1), Sometimes (2), Often (3), Always (4). The nominal rating scale is categorized as follows: (1) Low if the value < median, (2) High if the value > median. Validity test for social competences instrument using product moment Pearson and reliability with alpha Cronbach were carried out on 24 respondents on September 30, 2018. The validity test results are declared valid because $r_{table} > r_{count}$ (0.404). The reliability test result 0.914 (> 0.6) (Sunyoto, 2012).

2.3. Data collection procedure

Data collection procedure with signing informed consent to be research respondent (Sugiono, 2011). Data retrieval was conducted on November 9 to 12, 2018. The data used in this study are data on parental participation, as well as social competence in adolescent with intellectual disabilities in SLB Negeri Bogor. Data is collected by

sending a questionnaire and filled out directly by parents or guardians who have children with intellectual disabilities in Bogor Public SLB. The following are the steps taken by researchers in collecting data: preparation phase, research implementation stage, and post research phase. Furthermore, from the data that has been collected, the researcher checks the list of statements shortly after the questionnaire is collected by checking the number of questionnaire sheets, completeness of the answers to the questionnaire, and the accuracy of the writing or filling. Researchers do the coding in this study to parental involvement variable (1 = Low, 2 = Medium, 3 = Height), social competence variable (1 = Low, 2 = Height). In this study, researchers entered data by entering answer data related to parental involvement and social competence in adolescent intellectual disability. Furthermore, it is done by entering data into computer program. The final stage of this study, researchers do the cleaning by checking the data that has been entered to avoid errors in research results and misinterpretations.

2.4. Data analysis

In this study data were analyzed using computer program assistance which included univariate and bivariate analysis. Univariate analysis is used to define the characteristics of each of the variables studied and to find a picture of the concentration of data in the form of a frequency distribution table. This study presents categorical data that includes parental involvement and social competence of adolescent intellectual disability. In this study the bivariate analysis used is the relationship between parental involvement and social competence of adolescent intellectual disability. The type of data in this study is categorical, therefore the data uses a non-parametric Chi-Square test. To decide whether there is a relationship between the dependent variable and the independent variable, the p value is compared with the error rate (alpha) of 5% or 0.05. If p value ≤ 0.05 , then H_0 is rejected and H_a (research hypothesis) is accepted, which means there is a relationship between the dependent variable and the independent variable. If p value > 0.05 , then H_0 is accepted and H_a (research hypothesis) is rejected, which means there is no relationship between the dependent variable and the independent variable.

3. Result

Characteristics of respondents in this study are illustrated in the following table:

TABLE 1: Characteristics Of Respondents in SLB Negeri Bogor.

No	Category	Total	
		f	%
1	<i>Age of Adolescent</i>		
	12-17 years	26	62
	18-21 years	16	38
	Total	42	100
2	<i>Gender of Adolescent</i>		
	Male	23	54,8
	Female	19	45,2
	Total	42	100
3	<i>Parents</i>		
	Father	4	9,5
	Mother	34	81
	Others	4	9,5
	Total	42	100

Source: Primary data processed

Based on data from the characteristics of the research respondents, from 42 adolescent respondents, the average respondents were aged 18-21 years (38%), with 54,8% of whom were male. Characteristics of research subjects based on the category of parents who answered, from 42 parents, the average respondents were mothers (81%).

TABLE 2: Frequency distribution of involvement of parents and social competence of intellectual disability in SLB Negeri Bogor.

No	Variable	Category	Total	
			f	%
1.	involvement of parents	Low	0	0
		Medium	20	47,6
		High	22	52,4
		Total	42	100
2.	intellectual disability	Low	20	47,6
		High	22	52,4
		Total	42	100

Source: Primary data processed

Based on the table above, it can be concluded that of the 42 respondents in the study, the frequency distribution of the highest number of parental involvement was in the category of high parents as many as 22 parents (52,4%) and social competency was in the category of high social competence of 22 children (52.4%).

TABLE 3: Correlation between parental involvement and social competence of adolescent intellectual disability in SLB Negeri Bogor.

No	Parental Involvement	Social Competence				Total		OR	p-value
		Low		High		f	%		
		f	%	f	%				
1.	Medium	13	31,0	7	16,7	20	47,6	3,980	0,032
2.	High	7	16,7	15	35,7	22	52,4		
	Total	20	47,6	22	52,4	42	100		

Source: Primary data processed

Based on the analysis of the correlation between parental involvement and the social competency of intellectual disability in SLB Negeri Bogor as many as 15 respondents (35.7%) with high parental involvement and high social competence.

The results of the statistical test using the Chi-Square non-parametric test, the results obtained p value as wide as 0.032 (<0.05). Because p value ≤ 0.05, Ho is rejected and Ha is accepted, it can be concluded that there is a correlation between parental involvement and social competence of intellectual disability in SLB Negeri Bogor. Ods Ratio will have a value of 3,980 times to the high social competence of intellectual disability adolescent.

4. Discussion

4.1. Parental Involvement

According to Hawes and Jesney, parental involvement is defined as parental participation in their children’s education and experience [11]. One factor that influences parental involvement is gender, Grolnick and Slowiaczek found that mothers are more involved than fathers in the following three aspects: behavior (caring behavior mothers to participate in children’s educational activities at school and at home), cognitive, and personal (know and keep abreast of child development in school) [15].

Based on table 1 of 42 respondents, there were no respondents (0%) parents with low parental involvement categories, 20 parents (47.6%) with moderate parent involvement categories, and 22 parents (52.4%) with high parent involvement category. Based on the theory and the results of the above research there is harmony. In this study the highest distribution in the category of parents who answered was the category of mothers who filled out questionnaires as many as 34 people (81.0%), so that the gender of parents is one of the factors that influence parental involvement, which participation is giving His

children's education and experience, it is clear that mothers are very involved in their children's education because they want to send their children to SLB Negeri Bogor as well as parents' participation in giving their children experience in school while socializing in the school environment.

This is in line with previous research about the correlation between psychological wellbeing and parental involvement in the education of children with intellectual disabilities in childhood (4-11 years) by Cyntia Rusdian in 2012 who reported that 44 respondents were 32 (72.72 %) respondents with moderate parent involvement category, 8 (18.18%) respondents with high parent involvement category [15].

4.2. Social Competence

Raven and Ziegler state that social competence is the ability to feel positive and able to adapt to the environment in a positive relationship with family and peers (Prabowo, 2010). Tjia concluded that age and parental involvement can be factors that influence social competence [12]. According to Hurlock social skills are learned gradually from experience in all social situations and from practice in a long period. This means that the more age increases a person experiences various kinds of social experiences in various situations [8] At school age (6-20 years) intellectual disability children can be guided towards social interaction and can learn some social abilities (Surna and Pandeiro, 2014). Parents are very important in psychosocial development of children [17].

The involvement of parents is a basic principle in the education of children with special needs Based on table 2 of 42 respondents, 20 children (47.6%) with low social competency categories and as many as 22 children (52.4%) with high social competency categories. According to the analysis of the researcher, there is harmony between the theory and the results of the study. This can be seen from the results of the questionnaire on the characteristics of the research subject based on the age of the child. It was found that children aged 18 years had the highest distribution of 8 people (19.0%). As well as the results of the questionnaire on parental involvement by obtaining the category of involvement of high parents who have the highest distribution, so this can affect children's social competencies because parents play an important role in the psychosocial development of children. This is in line with previous research on the relationship of the role of parents with the socialization capabilities of mentally retarded children in Pekalongan City State SDLB by Diana Anggorowati in 2015 who reported 49 children with retarded children, 24 children with low social skills (49.0%) and 25 children with high social skills [17].

4.3. Bivariate Analysis

According to Hawes and Jesney, parental involvement is defined as parental participation in their children's education and experience (Lestari, 2013). Raven and Ziegler state that social competence is the ability to feel positive and able to adapt to the environment in positive relationships with family and peers (Prabowo, 2010). Tjia concludes that age, and parenting parents can be factors that influence social competence. As explained, the purpose of this research is to find out whether there is a correlation between parental involvement and the social competence of adolescent intellectual disability in SLB Negeri Bogor. Based on table 3, it was found that the value of the p value relationship between the involvement of parents with intellectual disability adolescent social competence was 0.032 or p value (<0.05).

It can be concluded that there is an association between the involvement of parents with the social competence of adolescent intellectual disability. According to the analysis of researchers, from the quotations of these theories there is harmony with the results of the study. This can be seen from the results of the questionnaire on the characteristics of the research subject based on the age of the child. It was found that children aged 18 years had the highest distribution of 8 people (19.0%). As well as the results of the questionnaire on parental involvement by obtaining the category of involvement of high parents who have the highest distribution, so that this can affect children's social competencies because parents play an important role in the psychosocial development of children. parents with intellectual disability social competency of 0.032 or p value (<0.05) which states that there is a correlation between the involvement of parents with intellectual disability social competence. This is in line with previous research about the relationship between parents' attention to the social development of children aged 4-5 years in Birit village, Wedi sub-district, Klaten district in 2015 by Mamik Mahanani. The second hypothesis test results that the correlation coefficient between parental attention and social development is 0.558 with r_{table} 0.3008 ($r_{count} > r_{table}$) and significance value p : 0.000 ($p < 0.05$). Thus the alternative hypothesis (H_a) reads that there is a positive and significant relationship between the attention of parents and the social development of children in the Birit village of Wedi sub-district, the 2015 Klaten district is accepted.

These results are in line with the research conducted by Cynthia Rusdian in 2012 with the title of the relationship between psychological well-being and the involvement of parents in the education of children with intellectual disabilities in childhood (4-11 years). In this study, what is meant by psychological well-being includes a range of wellness

that includes being able to give a positive assessment of oneself and his life in the past (self acceptance), the desire to have quality relationships with others, the feeling of being independent, the capacity to control life and the environment effectively, the belief that one's life has a purpose and meaning, and a feeling to continue to grow and develop personally. From the results of the study concluded that there is a significant positive relationship between psychological well-being and parental involvement in the education of children with intellectual disabilities in childhood (4-11 years) [12]. And this study is supported by research conducted by Eka Imirlia et al. In 2015, the relationship between parents' role in psychosocial development of school-age children showed that there was a significant relationship between the role of parents and psychosocial development in school-age children.

5. Conclusions

Based on the discussion as described previously, then conclusions can be drawn from this study as follows the results of the study show that of the 42 respondents in the study, 22 parents (52.4%) parents were found with the category of high parental involvement. The results of the study show that out of 42 research respondents, there were 22 adolescents (52.4%) with high social competency categories. Based on the results of the bivariate analysis using the Chi-Square non-parametric test, the result of p value is 0.032 (<0.05) with an OR value of 4 so that H_0 is rejected and H_a is accepted, it can be concluded that the involvement of high parents will have value 3,980 times the high social competence of intellectual disability children.

Recommendation

From this research it is expected to be an evaluation material for SLB teachers in providing motivation, training, and guidance to parents as an effort to develop social competence in adolescent intellectual disability. For example by conducting a seminar on the importance of social competence in adolescent intellectual disability.

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