
ANALYSIS OF LEARNING BARRIERS TO PHYSICAL EDUCATION OF SPORT AND HEALTH FOR CHILDREN WITH MENTAL RETARDATION IN INCLUSIVE SCHOOLS

¹Nur Laily Irmawati, ²Abdul Salim, ³Dwi Aries Himawanto

¹Sebelas Maret University
irmalaily1@gmail.com

²Sebelas Maret University
salimchoiri@fkip.uns.ac.id

³Sebelas Maret University
dwiarieshimawanto@gmail.com

Abstract

The purpose of this research is to know the implementation of physical education of sport and health in children with mental retardation in inclusion school. The study was conducted at 2 inclusive schools located in the city of Surakarta. In this study using data collection techniques in the form of interviews conducted on physical education teachers sports and health in schools inclusion, observation, and documentation. The data analysis technique used descriptive qualitative. Based on the result of the research, it can be seen that the implementation of physical and sports education for the children with mental retardation in inclusion school has several obstacles, that is: 1) the teacher's difficulty in teaching the children with mental retardation, 2) the teacher difficulties in understanding the characteristics of the children with mental retardation, 3) the teacher difficulties in modifying the learning and make the RPP for the children with mental retardation. This is because the physical and physical education teachers who are in inclusive schools do not have extraordinary educational backgrounds so that they have difficulty in understanding the character of the children with mental retardation. As well as training on the teaching strategies of children with mental retardation in inclusive schools for physical and health education teachers.

Keywords: learning physical education sport and health, children with mental retardation, inclusive school

INTRODUCTION

Inclusive education is an educational service system that includes children with special needs to be able to learn together with normal children in regular schools close to where they live (Wahyudi and Kristiawati, 2016). Article 1 Permendiknas Number 70 of 2009 states that inclusive education is an education system that provides opportunities for all learners who have abnormalities and possess the potential of intelligence and/or special talents to follow education or learning in an educational environment together with learners in general.

Under the Ministerial Regulation No. 32 Year 2008 on standard Academic Qualifications and Competencies Special Education Teacher mentioned that "Inclusive education is education that provides an opportunity for learners with special needs because of physical, emotional, mental, intellectual, social, and have the potential of intelligence and or talent privileged to study together with other learners in public education units and vocational education units, by providing means, educators, education personnel and curriculum adapted to the individual needs of learners ". Education inclusions such an implementation system of education in which students with special needs to be part of society. Inclusive education provides an opportunity

for students with special needs to be able to obtain an education in public schools. With the inclusion education is expected special needs students can develop their potential together with other normal students.

Implementation of learning in inclusive schools is basically the same as the implementation of learning in public schools, only in inclusive schools the ability of students is very heterogeneous, because in addition there are normal students also there are students with special needs which students with special needs also have diversity both intellectual, emotion, and social. Thus inclusive school must be able to accommodate all the needs of any students, situation and needs, including children with intellectual or abnormalities in children with mental retardation.

Children with mental retardation are children who experience obstacles and mental-intellectual development underdevelopment under the average, so have difficulty in completing tasks (Garnida, 2015). Children with mental retardation have significant intelligence below average and are accompanied by an inability to adopt behaviors that appear during their development (Kustawan, 2013).

Ministry of Education and Culture (2013) divides the characteristics of children with mental

retardation intelligence into three, namely:

- a. A mild mental disorder with an IQ of 50-70 (from WISC), two consecutive no classes, still able to read, write and count simple and not abstract.
- b. Children with mental retardation who has an IQ of 25-50 (from WISC), cannot think abstractly, only able to read a single sentence and have difficulty in counting even simple.
- c. Severe mortality with IQ 25 down (from WISC), only able to read a single word, cannot think abstractly at all.

The Directorate of Special School Development (2009) mentions that there are five learning activities that must be implemented by teachers, namely: 1) Communicating with students, 2) Implementing methods, learning resources and materials appropriate to the learning objectives, 3) Encouraging the self actively involved, 4) Demonstrate the mastery of the material and its relevance in life, 5) Manage the time, space, materials and teaching equipment. These five learning activities should be implemented in all subjects, not least in the subjects of Physical Education Sport and Health.

In the implementation of inclusive schools which accommodate regular students and students with special needs, there should be adjustments (modifications) of curriculum and teaching materials, the role of teachers, facilities and teaching and learning activities (Salim, 2010). One of the tasks of subject teachers in inclusive schools is to prepare a learning program with a modified curriculum (Kemendikbud, 2013). This is in line with the opinion of Tarmansyah (2007) which suggests that the curriculum used in inclusive schools is a regular curriculum that is adjusted (modified) with the initial ability and characteristics of students, to fit the physical education goals for children with special needs that is to encourage students to correct conditions can be improved and invites students to participate in recreational sports and physical activities, and make social adjustments and develop feelings of confidence (Abdullah, 1996).

Physical Education Sport and Health is one of the subjects in which contains the basic skills that every child should have, not to mention the children with mental retardation. For that, whether in the implementation of the physical education of Sports and Health Education in inclusion schools located in the city of Surakarta has been running optimally or even there are obstacles in the learning process. For that, we need to be studied more deeply about the implementation of learning Physical Education

Sport and Health in inclusion schools, so this research will provide benefits in providing services for children with mental retardation.

RESEARCH METHOD

The The type of research used in this study is descriptive qualitative, ie research that aims to understand the phenomenon of what is experienced by research subjects either in the form of behavior, perception, motivation, action, and others holistically, in the form of words and discussion on a special, natural context (Moleong, 2009). In qualitative descriptive research does not give treatment and more describe the condition as it is (Sukmadinata, 2011). Sampling technique using purposive sampling, that is taking samples with certain consideration (Sutopo, 2002). The consideration is that saddle is a sports teacher who teaches of children with mental retardation at inclusion school for more than 3 years. The sample in this study is 4 physical education teachers of sport and health in 2 inclusive schools in Surakarta city. Data collection techniques in this study are interviews, observation and documentation. The technique of collecting data in descriptive research at 2 Inclusion schools in Surakarta City as follows:

1. Interview

The interview is a conversation conducted by two parties, ie between the interviewer who asked the question and the interviewer who gave the answer to the question (Moleong, 2009). Interviews can also be interpreted as meeting two people to exchange information through question and answer, in a particular topic (Sugiyono, 2016). In this research, the researcher uses a structured interview type because in conducting the interview, the researcher has prepared the research instrument in the form of written questions that have been done (Sugiyono, 2016). The interview instrument in this study consisted of 6 questions given to 4 physical and health education teachers.

2. Observation

Observation is a direct observation of what is being investigated (Sutopo, 2002). In observation conducted, researchers are directly involved in activities observed or called participative observation so that data obtained more complete, sharper and to know at the level of meaning of any behavior that looks (Sugiyono, 2016). This observation is done when the learning process starts from the moment the teacher initiates the learning, the giving of the material, the use of the method, the use of instructional media, the learning

evaluation, to end the learning process of physical education of sport and health.

3. Documentation

Data collection techniques are documentation supplementary data in qualitative research (Sugiyono, 2016). Documentation can be books, magazines, documents, regulations, diaries studied (Arikunto, 2006). Documentation used to complete this study a syllabus and Learning Implementation Plan (RPP) which was created by a physical education teacher and sports health.

Data analysis techniques used in this research is a qualitative descriptive model of Miles and Huberman (Sugiyono, 2016) which includes data reduction, data presentation and conclusion/verification.

1. Data reduction

Data obtained by researchers in the field through interviews, observations and documentation are reduced by summarizing, choosing the main points, focusing on the important things and discarding the unnecessary, thus the data has been reduced to give a clearer picture so easy in collecting further data (Sugiyono, 2016) and in accordance with the objectives of the study. At this stage the researchers do data reduction that comes from the way interview, observation and documentation.

2. Data display

After data reduction, the data will be presented in the form of a short description, charts, relationships between categories, flowcharts and the like, through the presentation of the data, then the data is organized and arranged in a relationship pattern that will be more easily understood, and most often use is with text that is narrative (Sugiyono, 2016). In this study the presence of data from interviews, observation and documentation is done in text form.

3. Conclusion / verification

The third step in qualitative analysis according to Miles and Huberman is the conclusion and verification. From the data that has been reduced and presented, the researchers make conclusions. Thus the conclusions in this study can answer the formulation of problems that have been established.

RESULT AND DISCUSSION

The Based on interviews with 4 sports teachers in 2 the inclusive school in the city of Surakarta Indonesia, found some obstacles in the learning of

sports in children with mental retardation in inclusive schools, namely:

1. Teacher 1

Teachers have difficulty in teaching children with mental retardation because children are lazy and easy to get bored, they are also often late in following the lesson. Such characteristics of children with intellectual challenges that make the teachers have difficulty in understanding and provide treatment to children with intellectual challenges. Differences in the characteristics of children with mental retardation compared with regular children require teachers to make learning modifications according to their characteristics. But in fact the teachers have difficulty in modifying the learning and make Lesson Plan (RPP) for children with mental retardation that should have become a teacher obligation.

2. Teacher 2

Children with mental retardation who is in school A has a characteristic unruly, lazy, less fluent and hard concentration, so teachers have difficulty in teaching children with mental retardation. The wide variety of children with mental retardation in school A causes teachers to have difficulty in understanding the characteristics of each child. The number of children with mental retardation in school A also makes teachers have difficulty in learning modifications. Teachers argue that it is important for the child to be mentally instructed even without modifying the lesson and making the Lesson Plans of the Lesson Plans (RPP).

3. Teacher 3

At school B there are only a few children with mental retardation in the lower classes, they are easy to communicate, easy to understand instructions but very difficult to manage, teachers have difficulty in teaching and understanding children with mental retardation in school. Teacher 3 also difficulties in making RPP modifications.

4. Teacher 4

Difficulties experienced by teachers 4 is not much different from teacher 3, and teacher 4 hopes for training on teaching children with mental retardation and training of making RPP so that learning for children with mental retardation more optimal.

CONCLUSION AND SUGGESTION

Based on the result of the research, it can

be concluded that physical education teacher of sport and health in inclusive school experience some obstacles, that is 1) teacher difficulty to teach children with mental retardation, 2) teacher difficulties in understanding the characteristics of children with mental retardation, 3) teacher difficulties in modifying learning and make RPP for children with mental retardation. This is because the physical and physical education teachers who are in inclusive schools do not have extraordinary educational backgrounds so they have difficulty in understanding the characteristics of the children with mental retardation. As well as lack of training on the teaching strategies of children with mental retardation in inclusive schools for physical and health education teachers.

REFERENCES

- Abdullah, A. 1996. *Pendidikan Jasmani Adaptif*. Jakarta: Departemen Pendidikan Kebudayaan, Direktorat Jendral Pendidikan Tinggi, Proyek Pendidikan Tenaga Akademik.
- Arikunto, S. 2006. *Prosedur Penelitian: Suatu Pendekatan Praktik, Edisi Revisi VI*. Jakarta : PT Rineka Cipta.
- Direktorat Pembinaan Sekolah Luar Biasa. 2009. *Pedoman Khusus Penyelenggaraan Pendidikan Inklusi*. Jakarta: Direktorat Jendral manajemen Pendidikan Dasar dan Menengah. Departemen Pendidikan Nasional.
- Garnida, D. 2015. *Pengantar Pendidikan Inklusif*. Bandung: PT. Refika Aditama.
- Kementerian Pendidikan dan Kebudayaan. 2013. *Modul Pelatihan Pendidikan Inklusif*. Jakarta: Direktorat Jendral Pendidikan Dasar. Direktorat Pembinaan Pendidikan Khusus dan Layanan Khusus Pendidikan Dasar.
- Kustawan, D. 2013. *Manajemen Pendidikan Inklusif*. Jakarta: Luxima.
- Moleong, L. J. 2009. *Metode Penelitian Kualitatif Edisi Revisi*. Bandung: Remaja Rosdakarya.
- Peraturan Menteri Pendidikan Nasional Nomor 32 Tahun 2008 tentang Standar Kualifikasi Akademik dan Kompetensi Guru Pendidikan Khusus.
- Salim, A. 2010. *Pengembangan Model Modifikasi Kurikulum Sekolah Inklusif Berbasis Kebutuhan Individu Peserta Didik*. *Jurnal Pendidikan dan Kebudayaan*. Vol 16. Juni.
- Sugiyono. 2016. *Metode Penelitian Pendidikan (Pendekatan Kuantitatif, Kualitatif dan R&D)*. Bandung: Alfabeta.
- Sukmadinata, NS. 2011. *Metode Penelitian Pendidikan*. Bandung: PT Remaja Rosdakarya.
- Sutopo, H.B. 2002. *Metodologi Penelitian Kualitatif*. Surakarta : UNS Press. Hessel Nogi .S T. 2005. *Manajemen Publik*. Jakarta : PT. Grasindo.
- Tarmansyah. 2007. *Inklusi Pendidikan untuk Semua*. Jakarta: Depdiknas.
- Wahyudi & Kristiawati R. 2016. *Gambaran Sekolah Inklusif Di Indonesia*. Jakarta: Kementerian Pendidikan dan Kebudayaan. Pusat Data dan Statistik Pendidikan dan Kebudayaan.