KEBUTUHAN PROGRAM PADA TUNAGRAHITA

PRINSIPNYA

1. SIAPA YANG DIMAKSUD TUNAGRAHITA
2. BAGAIMANA KARAKTERISTIKNYA
3. KATEGORI APA RINGAN, SEDANG, ATAU BERAT
4. LAKUKAN ASESMEN SEBELUM MELAKUKAN PENANGANAN
5. BUATLAH DESKRIPSI KONDISI ANAK
6. KONDISI ANAK BANDINGKAN DENGAN NORMA PERKEMBANGAN NORMAL DALAM ASPEK SENSORIS, MOTORIK, MOBILITAS, BAHASA, KOGNITIF, SOSIAL, DAN KEPRIBADIAN, BANTU DIRI
7. SETIAP ASPEK YANG LAMBAT ITULAH SEBAGAI DASAR UNTUK MENENTUKAN KEBUTUHAN PROGRAM
8. SELANJUTNYA BANDINGKAN DENGAN LANGKAH SEPERTI YANG ADA PADA PENDEKATAN PORTAGE UNTUK PROGRAM USIA DINI.


Educational programming for elementary school-age children with mental retardation is concerned with decreasing dependence on others while concurrently teaching adaptation to the environment. Therefore the educational curriculum must concentrate on those skills that facilitate the child’s interaction with others and emphasize independence in the community. Programs for mentally retarded children generally include skill areas such as motor development, self-care, social skills, communication, and functional academics.

Motor Skills. The acquisition of motor skills is a fundamental component of the developmental process and prerequisite to successful learning in other content areas, including self-care and social skills. Moon and Bunker (1987) suggest that:

Both fine and gross motor skills are involved in the accomplishment of almost all activities within every domain. A general rule of thumb should be to train fine and gross motor skills within the context of functional activities. Walking can be instructed during community activities such as learning to use the neighborhood grocery store or traveling independently to school or work (p.232).

Gross motor development involves general mobility, including the interaction of the body with the environment. Gross motor skills are developed in a sequence ranging from movement that make balance possible, to higher order locomotor patterns. Locomotor patterns are intended to move the person freely through the environment. Gross motor movements include head and neck control, rolling, body righting, sitting, creeping, crawling, standing, walking, running, jumping, and skipping. Fine motor development requires more precision and steadiness than the skills developed in the gross motor area. Fine motor skills include reaching, grasping, and manipulation of objects. The development of fine motor skills is initially dependent on the ability of the child to “visually fix” on an object and “visually track” a moving target (Mori & Masters, 1980). Coordination of the eye and hand is an integral factor in many skill areas as well as in fine motor development. Eye-hand coordination is the basis of social-and leisure time activities and is essential to the development of the object-control skills required invocational situations.
**Self-Care Skills.** The development of self-care skills is another important content area related to independence. Self-care areas include feeding, dressing, and personal-hygiene skills. Feeding skills range from finger-feeding, drinking from a cup, and proper table behaviors such as the use of utensils and napkins, to serving food and etiquette. Dressing skills include buttoning, zipping, buckling, lacing, and tying. Personal-hygiene skills also range on a continuum from rather basic developmental skills to high-level skills relevant to adult behavior. Basic skills include toileting, face-and hand-washing, bathing, toothbrushing, hair-combing, and shampooing. Skills associated with adolescent and adult years include skin care, shaving, hair-setting, use of deodorants and cosmetics, and menstrual hygiene.

**Social Skills.** Social-skills training is closely aligned with the self-care area in that it relates many of the self-care concepts to the development of good interpersonal relationships. Social-skills training emphasizes the importance of physical appearance, proper manners, appropriate use of leisure time, and sexual behavior. The area of social skills may also focus on the development of personality characteristics to successful integration into society.

**Communication skills.** The ability to communicate with others is also essential to growth and development. Without communication there is no interaction. Communication systems for children with mental retardation take three general forms: (1) verbal language, (2) manual communication, such as sign language or language boards, or (3) a combination of the verbal and manual approaches. The approach employed depends on the child’s capability. If he or she is able to develop the requisite skills for spoken language, everyday interactive skills will be greatly enhanced. Manual communication must be considered when a child is unable to develop verbal skills as an effective means of communication. What is important is that the individual develop some form of communication.

**Functional Academic Skills.** A functional academic curriculum is intended to expand the child’s knowledge in daily living, recreation, and vocational areas. Functional academics are taught only when a child has acquired the prerequisite skills. When teaching functional academic skills, the classroom teacher uses instructional materials that are realistic and part of the context of the child’s environment. Browder and Snell (1987), reviewing the literature related to learning functional reading skills, reported that students with mental retardation, including those with moderate to severe problems, can learn to read sight words and acquire reading comprehension or decoding skills (p.437). A functional reading program contains words that are frequently encountered in the environment, such as labels or signs in public places; words that warn readers of possible risks; and symbols such as the skull and crossbones on poisonous substances. A functional math program involves such activities as learning to use a checkbook, shop in a grocery store, or operate a vending machine.