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THE INFLUENCE OF EDUCATION ON TOILET TRAINING ABILITY IN MENTALLY RETARDED JUNIOR HIGH SCHOOL CHILDREN

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ABSTRACT

This study aims to determine the effect of education on toilet training skills in mentally retarded children at SLB Dharma Wanita Kesatuan Bengkulu Province. This type of research is quantitative with a pre-experimental sampling technique with a pretest-posttest group design. The average result of toilet training skills in mentally retarded children before education was 4.85, there were 6 people or (42.85%) who were unable and there were 8 people (57.15%) whose toilet training skills were able. The average toilet training skills in mentally retarded children after education was 8.35, there were 14 people or (100%). The results of the statistical test obtained a p value = 0.000. Conclusion, there is an effect of education on increasing toilet training skills in mentally retarded children at SLB Dharma Wanita Kesatuan Bengkulu Province.

Keywords: Education, Mental Retardation, Toilet Training

INTRODUCTION

According to the World Health Organization (2016), the number of people with mental retardation is estimated to exceed 247 million people. The prevalence in children under 18 years in developed countries is estimated to be between 0.9-2.7%, while in developing countries it ranges from 1-7.9% of the total population categorized as mentally retarded with characteristics of an IQ below 70, as well as experiencing learning delays and adaptive disabilities. Mental retardation in Indonesia ranges from 1-3% and an estimated 30 million people experience this condition. Mental retardation with mild criteria is 80%, moderate 12%, and severe 1%. Prevalensi anak retardasi mental di Indonesia diperkirakan 1-3% dari jumlah penduduk Indonesia mengalami retardasi mental atau sekitar 6,6 juta jiwa, dari jumlah tersebut anak yang terkena retardasi mental berat sebanyak 2,8%, retardasi mental cukup berat sebanyak 2,6%, dan anak retardasi mental ringan atau lemah pikiran sebanyak 3,5% dan sisanya anak dungu 2,5% (Perwitasari, 2023.

Children with mental retardation are children who experience problems with intellectual function that cause them to have low intellectual abilities, so they face difficulties in carrying out their developmental tasks. Children with Mental Retardation are the most compared to other limitations, have a low IQ below 70, so they have difficulty communicating and carrying out their activities independently (Dewi, 2017). Mental Retardation is a major issue in developing countries. In the United States, there are around 3000-5000 children with mental retardation born (Tawurutubun et al., 2022; Iswanti et al., 2019).

Children with special needs such as mental retardation are given more attention to their independence in terms of mental development. Toilet training for mentally retarded children needs to pay attention to the child's condition, considering the limitations in abstract thinking skills and low intellectual abilities they have (Prawesti & Hartati, 2019). From the characteristics of mild mental retardation to their mental age which is equivalent to the development of a normal child aged 12 years, they are able to be independent in caring for themselves, but in sensorimotor skills they are still slow, and can do simple tasks. In moderate mental retardation, mental abilities equivalent to normal children are developed around 7 years old, they can take care of and care for themselves but it takes a long time and depends on others, the ability to coordinate their body movements is still limited. Severe mental retardation has a maximum mental ability that can be achieved in less than three years, they are unable to care for themselves and are completely dependent on the help of others (Anisa et al., 2022).

In children with mental retardation, various problems that arise are weakness or inability in children under 18 years of age accompanied by limitations in the ability to be independent, such as in terms of self-care (dental hygiene, bathing, dressing), and independence in toilet training. The advantages of toilet training for mentally retarded children are that it accustoms children to control urination (BAK) and defecation (BAB) properly in the toilet and teaches children to put on and clean their own pants without the help of others. Children with mental retardation experience challenges in development that usually require support from others, especially parents. One of the challenges faced by children with mental retardation is the lack of independence in toilet training (Suryani et al., 2023; Suryani et al., 2016).

Toilet training is crucial during toddlerhood. There are two important things to consider in toilet training children. First, teach children until they successfully complete toilet training. Second, children can interact with their parents when they want to use the toilet. Generally, children tend not to like the sensation of being wet if their pants or clothes are damp. There are several challenges that children will face when undergoing toilet training. Some toddlers will feel calm and happy when they have to undergo toilet training. Children are individuals who experience changes in development from babies (0-1 years), playtime or toddlers (1-2.5 years), pre-school (2.5-5 years), school (5-11 years), and adolescence (11-18 years) (Pohan et al., 2018; Faikoh et al., 2014).

There are several methods to overcome the problem of child guidance in toilet training, namely parents continue to carry out toilet training guidance, but with the hope that the child will feel that the guidance is their own initiative. Another thing that can be done is to continue toilet training exercises at different times if the child is in a good mood. A child can give a surprise after they are used to it and are trained in m toilet training, because toilet training for children is a method to train children to be able to control urination and defecation. Its success depends on the child and family which includes physical, mental, and intellectual readiness (Latifah & Wulansari, 2020).

Based on the initial survey conducted by researchers on 5 people with mental retardation, it was found that 4 people had poor toilet training skills marked by lack of ability to control urination and 1 person was able to go to the bathroom to urinate independently. Based on the background above, researchers are interested in examining how education influences toilet training skills in children with mental retardation at SLB Dharma Wanita PBB Bengkulu Province.

RESEARCH METHODS

This type of research is qualitative using pre-experimental sampling technique with pretest-posttest group design to determine the effect of education on toilet training skills in mentally retarded children at SLB Dharma Wanita Persatuan Bengkulu Province. The research location was conducted at SLB Dharma Wanita Persatuan Bengkulu Province from December 2017 to January 2018. The population of this study were all junior high school students at SLB Dharma Wanita Persatuan Bengkulu Province in the 2016/2017 academic year who experienced mental retardation totaling 14 people.

The sample in this study was with the criteria of junior high school children who experienced mental retardation at SLB Dharma Wanita Persatuan Bengkulu Province totaling 14 people, the sample in this study used purposive sampling technique is a sampling technique where the researcher determines the desired sample criteria. The samples taken in this study must meet the inclusion and exclusion criteria. This study was conducted at SLB Dharma Wanita Persatuan Bengkulu Province by measuring the toilet training ability of mentally retarded children 2 times before and after education. Measurement of toilet training ability in mentally retarded children using a checklist sheet carried out on respondents.

RESEARCH RESULTS

Univariate Analysis

Frequency Distribution of Toilet Training Ability in Mentally Retarded Children Before Education

Table. 1
Frequency Distribution of Toilet Training Ability
in Mentally Retarded Children Before Education

Toilet Training Skills	Frequency	Presentation
Unable	6	42,85
Capable	8	57,15

Based on table 1 above shows the frequency distribution of toilet training ability in mentally retarded children before education was carried out at SLB Dharma Wanita Persatuan Bengkulu Province, there were 6 people or (42.85%) who were unable and there were 8 people or (57.15%) who were able to toilet training.

Average Toilet Training Ability in Mentally Retarded Children after Education Was Carried Out

Table. 2
Frequency Distribution of Toilet Training Ability
in Mentally Retarded Children after Education Was Carried Out

Toilet Training Skills	Frequency	Presentation
Unable	0	0
Capable	14	100

Based on table 2 above shows the results of the frequency distribution of toilet training abilities in mentally retarded children after education was carried out at SLB Dharma Wanita Persatuan Bengkulu Province, there were 0 people (0%) who were unable and there were 14 people (100%) who were able to toilet train.

Bivariate Analysis

The Effect of Education on Improving Toilet Training Abilities in Mentally Retarded Children

Table. 3
The Effect of Education on Improving Toilet Training Abilities
in Mentally Retarded Children

Toilet Training Skills	Mean	SD	SE	P-Value	N
Before	4,85	1,027	0,274	0,000	14
After	8,35	0,841	0,225		

Based on table 3 above, the results of the analysis showed that the average toilet training ability of mentally retarded children before education was carried out at SLB Dharma Wanita Persatuan Bengkulu Province was 4.85 with a standard deviation of 1.027. While in the second measurement, the average toilet training ability of mentally retarded children after education was carried out at SLB Dharma Wanita Persatuan Bengkulu Province was 8.35 with a standard deviation of 0.841. The results of the statistical test obtained a p value of 0.000 <α 0.05, so it can be concluded that there is an effect of education on increasing the ability to toilet training in mentally retarded children at SLB Dharma Wanita Persatuan Bengkulu Province.

DISCUSSION

Univariate Analysis

Toilet Training Ability in Mentally Retarded Children Before Education

Based on table 4.2, the average toilet training ability in mentally retarded children before education at Dharma Wanita Persatuan Special School, Bengkulu Province is 4.85 with a standard deviation of 1.382, indicating the frequency distribution of toilet training ability in mentally retarded children before education at Dharma Wanita Persatuan Special School, Bengkulu Province, there were 6 people or (42.85%) who were unable and there were 8 people or (57.15%) who were able to toilet train.

Based on the results of the study, it was found that the toilet training ability in retarded children before education was carried out was that children knew when to urinate (BAK), children used the word pipis or other terms when they wanted to urinate. However, children sometimes do not urinate in the right place. This shows that it is necessary to educate children with mental retardation to improve their ability to do toilet training.

In children with mental retardation, some problems that occur are weakness or inability in children under 18 years of age accompanied by limitations in the ability to be independent, for example in terms of taking care of themselves (oral hygiene, bathing, dressing), and independence in terms of toilet training. In the past, when people's understanding of mental retardation was still limited, children or individuals who experienced this condition were often isolated or isolated from social interactions. They were often isolated or isolated from the social environment. They often did not

receive proper treatment because they were considered crazy and did not receive proper education because of their limited intellectual abilities. However, along with the increasing knowledge and understanding of mental retardation, institutions or education that were tailored to them also developed.

The educational process implemented emphasizes that giving sanctions or punishments can hinder the growth of independence. However, if the educational process focuses more on positive potential such as giving rewards, it will facilitate the development of independence. Toilet training is not a simple thing to teach to children, especially children with mental retardation. One external factor is the parenting pattern of parents who scold children, which can cause discomfort and interfere with the toilet training process; therefore, toilet training really needs good parenting patterns from parents (Tawurutubun et al., 2022).

Toilet Training Ability in Mentally Retarded Children after Education

Based on table shows the average results of toilet training ability in mentally retarded children after education at SLB Dharma Wanita Persatuan Bengkulu Province is 8.35 with a standard deviation of 0.841. The results of the frequency distribution of toilet training ability in mentally retarded children after education at SLB Dharma Wanita Persatuan Bengkulu Province there are 0 people or () %) who are unable and there are 14 people or (100%) who are able to toilet train.

The results of the study show that by educating children with mental retardation, their abilities can increase. This can be seen from the results of the study after educating children with mental retardation, after educating children, children can use the word pee, children can know when to urinate, children are used to cleaning themselves without help, but children still ask for help when they want to urinate, and children still ask for help after urinating.

Level of independence in toilet training Refers to the child's ability to go through the stages of toilet training according to their age. Toilet training is not a simple task to teach children, especially for children with mental retardation. The level of independence in toilet training is in the dependent category because children with mental retardation experience intellectual dysfunction which results in low intellectual levels, making it difficult for them to carry out developmental tasks such as toilet training (Dewi, 2017). Children with mental retardation have a level of independence in toilet training that is classified as dependent because children who experience intellectual dysfunction make it difficult to teach them to do toilet training (Pohan et al., 2018). Children with mental retardation face challenges in development, so they usually need support from others, especially parents, in directing and teaching children to do toilet training consistently (Suryani et al., 2016).

The results of the study showed that a small portion, namely 13 (23.6%) of child respondents, had independence in toilet training that was included in the independent category. This proves that children with mental retardation have the potential to be independent in toilet training, so there needs to be support in the form of stimulus or parenting patterns from parents, especially in teaching children toilet training consistently. Research Meysialla & Alini (2018) revealed that children's independence in toilet training is driven by consistent stimulation or parenting methods from parents when teaching children. The level of independence of children with mental retardation in toilet training still depends because the child has intellectual dysfunction and delays in activity, especially during toilet training (Hasibuan et al., 2021).

This makes children dependent on urinating and defecating in the toilet, often wetting their pants, and not being able to remove and open their own pants before and after urinating or defecating. Effective toilet training is to provide an example to children with mental retardation on how to use the toilet through direct roles. This is done so that children are more capable and understand that using the toilet is a habit that must be applied. The toilet training steps that need to be taken include introducing children to the use of the toilet when defecating, teaching children to enter the toilet, training children to sit on the toilet, and explaining to children the function of the toilet (Tawurutubun et al., 2022).

Bivariate Analysis

The Effect of Education on Improving Toilet Training Ability in Mentally Retarded Children

Based on table 4 above, the results of the analysis obtained an average toilet training ability in mentally retarded children before education was carried out at SLB Dharma Wanita Persatuan Bengkulu Province with a standard deviation of 1.382. While in the second measurement, the average toilet training ability in mentally retarded children after education was carried out at SLB Dharma Wanita Persatuan Bengkulu Province was 8.35 with a standard deviation of 0.841. The results of the statistical test obtained a p value of 0.000 <α 0.05, so it can be concluded that there is an influence of education on improving the ability of toilet training in children with mental retardation at SLB Dharma Wanita Persatuan Bengkulu Province.

Toilet training children is not a simple thing, especially for children with mental retardation. One of the external factors related to parenting patterns that often scold children can cause discomfort, which leads to toilet training failure. Therefore, the success of toilet training is greatly influenced by good parenting patterns from parents (Tawurutubun et al., 2022; Meysialla & Alini, 2018).

Based on Komariah et al., (2019) important things in implementing toilet training are giving rewards to children when they successfully hold their bowel movements or urination, not scolding children when they cannot hold their urine, and explaining to children that at their current age they should be able to defecate in the right place without using disposable diapers. Paying attention to children's bowel movement cycles is very necessary so that guidance can take place properly and smoothly without any coercion from parents.

Bedwetting in children under 2 years of age is normal, there are even some children who still wet the bed at the age of 4-5 years and occasionally occurs in children aged 7 years. Children under 2 years of age wet the bed because their bladder control or toilet training is not yet perfect. At the age of 1 to 3 years, the ability of the urethral sphincter to control the urge to urinate and the anal sphincter to control the urge to defecate begins to develop. Around 90 percent of babies begin to develop bladder and bowel control at the age of 1 to 2.5 years

CONCLUSION

In concluded that there is an influence of education on improving toilet training skills in mentally retarded children at SLB Dharma Wanita Persatuan Bengkulu Province.

SUGGESTION

The results of this study indicate that education is carried out on improving toilet training skills in mentally retarded children at SLB Dharma Wanita Persatuan Bengkulu Province so that it is expected that students can be used as a reference for learning and practice in conducting toilet training on mentally retarded children at SLB Dharma Wanita Persatuan Bengkulu Province so that they can influence education on improving toilet training skills in mentally retarded children at SLB Dharma Wanita Persatuan Bengkulu Province.

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