



JURNAL PENGABDIAN MASYARAKAT DALAM KESEHATAN

Vol. 6 No. 2, October 2024

<https://e-journal.unair.ac.id/JPMK>

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THE PSYCHOEDUCATION OF LANGUAGE DISORDERS IN EARLY CHILDHOOD FOR PARENTS AND TEACHERS AT ECC DEWI SARTIKA MOJOKERTO

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ARTICLE HISTORY

Received: February 18, 2023

Accepted: September 30, 2024

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ABSTRACT

Introduction: Based on an initial survey conducted among parents, prospective parents, and educators at ECC Dewi Sartika, Mojokerto, it was found that 19% of people did not know about language disorders in early childhood. In addition, 29.3% of respondents did not know about the impact and urgency of handling language disorders in children. A total of 36.2% of respondents did not know about the symptoms or indications of language disorders in children, and as many as 58.6% of respondents did not know about how to treat children with language disorders, especially in early childhood. The purpose of giving psychoeducation is increasing knowledge and attitude of those directly involved in the child's growth and development process, so they can find out an overview of the development of language and speech in children.

Methods: The psychoeducation program is in the form of an interactive talk show conducted online through one of the video conference platforms. The target participants consisted of 8 teachers, 30 parents or caregivers, and 10 other parties who are directly or indirectly involved in the care and guidance of early childhood. Participants were given a pretest and post test to measure their knowledge and attitude towards language disorders in early childhood. The results obtained will be analyzed using a t-test with the Jamovi version 2.2.5 application.

Results: The difference in the mean score is 16,842 (CI95 = [∞, 14,135]), the delivery of promotive interventions in the form of psychoeducation has a significant effect on increasing knowledge and attitudes towards language disorders in early childhood ($t(48) = 10,495, p < .001$, Cohen's $d = 1,702$).

Conclusion: This psychoeducation program is able to increase participants' understanding and attitude towards of language disorders in early childhood.

KEYWORDS

attituded; early childhood; knowledge; language disorder; psychoeducation.

Cite this as:

Aisyati, W. W., Nurmaulidiya, I. A., Aulia, R., Rohmadhani, W. S., & Fardana, N. A. (2024). The Psychoeducation of Language Disorders in Early Childhood for Parents and Teachers at ECC Dewi Sartika Mojokerto. *J. Pengabdian Masyarakat dalam Kesehatan*. 6(2). 41-46. Doi: [10.20473/jpmk.v6i2.36769](https://doi.org/10.20473/jpmk.v6i2.36769)

1. INTRODUCTION

Language disorder is a disorder associated with language comprehension. According to the International Classification of Disease 10th edition (ICD-10), language disorder itself is divided into two, namely receptive language disorder and expressive

language disorder (ICD-10 Version:2010, 2010). Receptive language disorder is a disorder in children's language comprehension below the normal limit for their mental age, usually, this disorder is called language delay. Then there is expressive language disorder which is a developmental disorder

in which the child's ability to express language is below the normal limit for their mental age, but language comprehension is at the normal limit, this is commonly referred to as speech delay. In developmental Milestones, each age category of children has a generality to reach a certain level of development. Developmental delay is diagnosed when the child cannot reach the developmental milestones at the expected age (Sunderajan & Kanhere, 2019).

According to The Cambridge Language and Speech Project (CLASP), the prevalence of speech and language delay is around 5-8% in children aged 2-4.5 years in 1936 parents who provided data for the preschool language checklist (PCL). In Indonesia, the prevalence of expressive language disorder with less than 50 words or no word combinations can be estimated at 15% in children aged 24-29 months (Airlangga, 2019). Based on data obtained from a child growth and development clinic from Dr. Kariadi Hospital in 2019, it shows that as many as 21.5% of 330 visits with speech delay disorders and as many as 3.08% with disorders regarding language delay in children (Safitri et al., 2021).

Carr's (2015) study shows that more than 17 percent of 2-year-olds, 8 percent of 3-year-olds, and 3 percent of 5-year-olds have language delays. The male:female ratio is between 3:1 and 5:1. The majority of children with specific language delays recover by the age of 5 years. Phonological disorders affect 2 to 3 percent of children aged 6-7 years, while the prevalence of children with stuttering is around 1 percent and is 3 times more common in boys than girls. Behavioral problems generally also occur in children who have specific language delays, especially children with receptive-expressive disorders. Baker & Cantwell (1982 dalam Carr, 2015) found that behavioral problems occur in about 95% of cases of specific receptive-expressive language disorders, 45% of cases of expressive language disorders, and 29% of cases in articulation disorders.

Although cases of speech and language delay in children are a common phenomenon, it is important for parents to conduct early detection of their children who have indications of experiencing speech and language delays in order to immediately receive appropriate treatment. Unfortunately, the level of awareness of parents regarding this matter is still considered minimal. Parents tend to consider speech and language delay as a normal condition that is usually experienced in the process of child development and perceive that their children are just quiet or shy, so they don't talk much. Especially for boys, parents sometimes assume that their sons carry the characteristics of their fathers who are also known to be quiet or normalize boys who do not speak at an early age of development (Liu, 2021). These things can be an indication of language disorders or speech delays in their children.

The language development of each child is different and can be influenced by the surrounding environment, especially parents. Therefore, children's language development must be stimulated by parents so that children can grow and develop optimally. Stimulation is one way to stimulate children's abilities (Putra et al., 2018). Providing stimulation in the first three years of a child's life or can be referred to as the golden age is very important to do because at that time the brain develops very rapidly. Lack of stimulation can cause disruption in children's language development. It can also threaten the emergence of other problems such as disorders in cognitive and emotional development as well as abnormalities in communication behavior and social interactio (Safaria, 2005 dalam (Putra et al., 2018).

Other problems that can interfere with children's language development are early gadget provision and bilingualism. Problems arising from the provision of gadgets are that we cannot see feedback because gadgets are one-way communication tools, which can cause disruption in children's language development (Yulsoyfriend et al., 2019). Although bilingualism can

have positive impacts such as being more cognitively flexible, superior in attention processing, and superior in other subjects, it also has negative impacts. One of the negative impacts of bilingualism is that children may forget their first language if their first language is underused (Kennison, 2013).

Based on a survey conducted among parents, prospective parents, and educators, 81% knew about language disorders in children, while the other 19% did not know about language disorders in children. In addition, 70.7% of respondents knew about the impact and urgency of treating language disorders in children, but 29.3% of respondents did not know about the impact and urgency of treating language disorders in children. A total of 36.2% of respondents did not know about the symptoms or indications of language disorders in children, while 63.8% knew about the symptoms or indications of language disorders in children. In addition, 58.6% of respondents did not know about how to treat children with language disorders, while 41.4% knew about how to treat children with language disorders.

Empirical data shows that the absence of treatment at an early age causes language and speech delays to persist 40%-60% in children. This can also have implications in increasing the risk of social, emotional, behavioral, and cognitive disorders that can persist into adulthood (Sunderajan & Kanhere, 2019). Therefore, it is important to introduce parents as early as possible about language disorders so as not to fall into misconceptions that lead to delays in providing treatment. In addition, the attitudes towards language disorders in early childhood shown by parents and teachers based on the survey results are low. Parents admitted that they did not know how to detect language impairment in their children. Some of them did not know what to do after a child's language disorder was detected.

One method used to introduce language disorders to teachers and parents is psychoeducation. Psychoeducation is a humanistic approach to

changing behavior patterns, knowledge, behavioral interpretations, and individual views of one's psychological condition (Lukens & McFarlane, 2004). This method has proven effective in increasing the knowledge of caregivers, parents and teachers about early detection and how to deal with inclusive children from an early age (Arman & Kurniawati, 2019). The purpose of this community service activity is so that parties who are directly involved in the process of child development - such as parents, families, teachers, caregivers - can know the general description of language and speech development in children, an overview of language disorders in children, break myths related to language disorders in children, and know the urgency of handling language disorders and steps to stimulate children's language and speech development.

2. MATERIAL AND METHODS

Community service activities are divided into 3 stages, the preparation stage, the intervention stage, and the evaluation stage.

Preparation Stage

At this stage, the team conducted an initial survey to determine the level of understanding of the 70 target participants, including 32 teachers, 30 parents, and 8 prospective parents on the topic of language disorders. An online survey in the form of a Google Form was distributed for a week through social media, such as WhatsApp and Instagram. The team also approached related partners, namely Dewi Sartika ECC (Kindergarten, Playgroup, and TPA), who are potential participants of the talk show activities held online later.

Intervention Stage

The intervention activities carried out in the form of online talk shows through the Zoom video conference platform for 2 hours long. The theme raised in this psychoeducation program is "Recognizing Language Disorders in Early Childhood". The intervention activities were attended by 48 people, including 8

teachers, 30 parents or caregivers, and 10 people who have a role to be involved in the process of child development, such as the family at ECC Dewi Sartika Mojokerto. The activity began with giving a pretest to measure the participants' initial knowledge and attitude towards language disorders in early childhood. The talk show's keynote speaker was a psychologist interested in clinical studies and child development. The material provided is related to the general understanding of language disorders, causes, types, and indications of language disorders, to how to stimulate children who experience barriers to communication. There was also a brief consultation session with a psychologist and interactive Q&A with all participants. Participants were also asked to be active and turn on the camera to ensure mindful attendance.

Evaluation Stage

The evaluation was carried out by giving a post-test through a Google Form link to participants after the talk show was completed on May 28, 2022 and 48 participants were involved in this evaluation process. Indicators of the success rate of the program can be known from the participants' responses. Based on the Kirkpatrick evaluation model (Valamis Contributor, 2022), a posttest questionnaire will be designed to measure the reaction and knowledge dimensions of participants. The results obtained will be analyzed using a t-test with the Jamovi application version 2.2.5. In addition, we open a discussion and follow-up session to the participants through whatsapp group 2 weeks after the talkshow to find out whether the participants can do early detection on the language development that their children go through.

3. RESULTS

This community service activity was carried out online through the Zoom platform on Saturday, May 28, 2022, attended by 48 people consisting of 8 teachers, 30 parents or caregivers, and 10 other parties who are directly or indirectly involved in the care and guidance of early childhood. 78% of the

participants were female and 83% were from Mojokerto, East Java. In addition, 70% of parents are workers, so they only have time to play with their children on weekends and holidays. Community service activities have been carried out smoothly according to initial planning. Pre-test was conducted before providing material to participants to determine the level of knowledge and attitudes of participants towards language disorders in early childhood. The material delivery was designed like an interactive talk show, so that participants could ask questions directly and discuss with the speaker at the end of each material session. Most participants were actively involved in the question-and-answer process and discussion with the speakers. Not a few participants also consulted related material presented based on their experience. This shows the participants' enthusiasm for the material that has been delivered. After the discussion, participants were asked to do a post-test with the aim of finding out whether there were changes in the knowledge and attitudes of the participants towards language disorders in early childhood.

Table 1 shows that the results of the normality test where the sample is normally distributed ($W=0.908$, $p=0.770$). The average post test score (see table 2) after being given the material ($M=72.632$, $SD=7.947$) was higher than the pretest score before the material was given ($M=55.789$, $SD=8.584$). With a difference in mean score of 16.842 ($CI95 = [\infty, 14.135]$), the delivery of the promotive intervention in the form of psychoeducation had a considerable effect on improving knowledge and attitudes towards language disorders in early childhood ($t(48) = 10.495$, $p<.001$, Cohen's $d=1.702$). We also opened a discussion session 2 weeks after the talk show was conducted. The results of the discussion showed that all participants, especially parents and teachers, had conducted early detection on their students or children and found indications of speech delays in 6 children. After knowing this, they immediately

Table 1. Normality Test Results

		W	p
Pretest	Post test 2	0.908	0.770

Table 2. Pretest and Posttes Results

	n	Mean	Median	SD	SE
<i>Pretest</i>	48	55.789	60.000	8.584	1.393
<i>Post Test_2</i>	48	72.632	70.000	7.947	1.289

applied some treatment suggestions to children who indicated language disorders that had been delivered by the speaker during the talk show. This shows that parents and teachers have a good understanding of language disorders in children after participating in this activity.

4. DISCUSSION

A language disorder is an impairment in the processing of linguistic information that affects a person's ability to receive and/or express language. According to the DSM-V, it involves persistent difficulties in the comprehension or production of spoken, written, sign language, or other forms of language. Data from the Indonesian Pediatric Association shows that the prevalence of language disorders in pre-school children aged around 2-4.5 years reaches 5-8% (Suparmiati et al., 2016). In connection with this, parents and teachers need to know the language disorders that can occur in early childhood. So that later they can make preventive and curative efforts when facing these conditions. Psychoeducation is a training approach in psychology that focuses on improving individuals' attitudes, understanding and knowledge (Bearss et al., 2015). This psychoeducation activity is aimed at the general public, especially those who have a role in the process of child development such as families or parents, caregivers, and teachers. Psychoeducation materials for parents and teachers include several important elements based on theories and empirical evidence found by the authors with key speakers. It involves group sessions and interactive discussions during the activities.

Psychoeducational program delivered by experts can improve the understanding and attitudes of participants who take part in activities regarding language disorders in early childhood. This is evidenced by the interactive discussions between participants and speakers and warm responses from participants, as well as evaluation results through pre-test and post-test. Comparison of participants' pre-test and post-test results also showed an increase in knowledge and attitudes towards early childhood with language disorders after participating in psychoeducation activities. In addition, participants and the general public can also re-read the material that has been delivered through recordings and material files distributed after the event.

The results of this psychoeducation activity support the findings of several previous studies. Parents as the closest individuals to children with special needs (including children with language impairment) have an increased understanding of the concept and definition of special needs, facts and myths, and the attitudes that should be shown to children with special needs after participating in psychoeducation activities (De Boer & Munde, 2015). Parents and teachers also have an important role in providing learning assistance for children with language disorders. In addition, psychoeducation activities have been shown to be effective in encouraging parents, teachers and the environment around children with special needs to better understand their conditions and needs (Beckett, 2009). Other findings show that psychoeducation activities also play a role in helping parents and teachers to take appropriate actions in parenting and

managing tantrum behavior in children with special needs (Yuliani et al., 2024).

Based on the evaluation of the implementation of activities, it can be seen that this program can run smoothly due to supporting factors, namely the participants who take part in this activity are very interactive and responsive. The teachers and parents had many statements related to language disorders in children so that they could spark discussions. In addition to this activity running smoothly, there are inhibiting factors, namely the participants who participated did not match the initial target and some participants were also unable to turn on the mic feature on the zoom application due to signal constraints. Suggestions for future researchers are expected to conduct in-depth socialization in advance to target participants so that they are more interested in participating in community service activities and before the activity can ensure that the audio feature on the participant's software functions properly when carried out online.

5. CONCLUSION

Implementing a community service program in the form of an interactive talk show about language disorders in early childhood, there was an increase in participants' knowledge and attitude towards language disorders in early childhood. The suggestions for organizers of similar programs are that activities should be carried out face-to-face to be more effective.

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