# PROCEEDING 2014 EDUCATION INTERNATIONAL SEMINAR

"Strengthening Teachers & Education Personnel Competence in Scour Change"



Universitas Negeri Padang in collaboration with IPG Kampus Ilmu Khas Cheras supported by: Union of Faculty of Education/Department of Education, Indonesia, and Union of Faculty of Education, Malaysia

PADANG.



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## PROCEEDING

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DITERBITKAN OLEH : FAKULTAS ILMU PENDIDIKAN UNIVERSITAS NEGERI PADANG

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#### INCREASING SOCIAL SKILLS THROUGH PEER-MEDIATED INTERVENTIONS AT THE CHILDREN WITH LEARNING DISABILITIES AT INCLUSIVE ELEMENTARY SCHOOLS

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#### Abstract

A variety of peer-related strategies to improve the social functioning of children with learning disabilities have been developed and empirically tested. Peer-mediated interventions typically involve the use of socially competent peers to model and reinforce appropriate social behavior. Promoting peer effort is an important component of such interventions and can be accomplished by altering peer expectations regarding their classmates with learning disabilities. The study used a single-subject design with multiple baseline across subject models. Five (5) children with mild learning disabilities as a target child and five (5) trained peer mediator to apply PMI in the lessons Indonesian (repeated reading). The results showed that PMI was effective for improving the listening, following directions, discussion, and asking questions skills for the children with learning disabilities respectively are the TS's average baseline was 4,73 increased to 9,33; the KY's average baseline was 4,07 increased to 9.05; the HL's average baseline was 3,88 increased to 8,12; the RA's average baseline was 3,36 increased to 7,81; and the KA's average baseline was 3.14 KA increased to 7.5.

Keywords: Peer-mediated intervention, children with learning disabilities, inclusive elementary schools.

#### INTRODUCTION

Having a good social competence is the basic for a healthy and lead a normal life (Robertson, et al, 2003; Miller, et al, 2005). Inadequate social skills will lead to (1) increase in behavioral problems caused by a lack of social interaction skills, (2) increased likelihood of maladaptive behavior later in life, and (3) reducing the positive support of learning opportunities to build peer relationships harmonious (Meadan & Monda-Amaya, 2008). Children with learning disabilities problematic social interactions due to their failure to replicate and understand the social situation surrounding the activity entering play together, and they are difficult to interpret social initiations made by other children (Klavina & Block, 2008).

Social skills consist of the ability to relate to others with strong reciprocity, and the ability to adapt to social behavior in different situations (Gresham, et al, 2004). Gresham, et all (2004) suggested that children learning disabilities do not experience a

total failure in reciprocal social relations, the social interaction skills they need to be improved. Experts argue that the problem of social interaction stretcher occurs because in the process of social learning in which skills have been learned and acquired applied in different contexts. Other experts also confirmed that when children are learning disabilities want the social interaction, the skills required for such interaction is lost (Fenty, et al, 2008). Previous studies by Lovaas (1993), using the principles of behavior Skinner (1953), shows that the behavior of children with autism can be modified if the environment is setup in such a way to form and reinforce certain behaviors. Lovaas proving that autistic children can be taught to face others, making eye contact, and respond to others. Armed with the success required teach social skills, then the actual social skills in children with learning disabilities can also be taught and trained (Kennedy & Shukla, 1995). At first, the approach is done by adults in mediating the teaching of social skills (Rogers, 2000) which is an approach that involves the teacher to manipulate the environment by using social reinforcement of appropriate social behavior in children-child with special needs (Kennedy & Shukla, 1995). However, there is also criticism of the approach to social skills mediated by adults (teachers), namely the existence of a disregard for the child's social interactions in the natural environment and social skills are taught is the desire of adults not run in the absence of children playing with their peers (Rogers, 2000).

The strategy is eventually transformed into a strategy that involves peers, which uses peer (normal children) to teach social skills by interacting directly with children learning disabilities. The ability of social peer can be used as a model for children and can also strengthen the social behavior (Harris, et al, 2009). This is consistent with the notion of social learning theory to learn that a behavior was modeled and reinforced (Bandura, 1977).

Based on that idea, inclusive education for children with learning disabilities and children with special eduction needs has become a necessity (Kamps, Barbetta, Leonard, & Delquadri, 1994; Kohler, Strain, Hoyson, & Jamieson, 1997). Although the opportunity to replicate and interact with peers there, but the quality of their interaction is less well developed. For example, Harris, et al (2009) in a study of children with special needs in integrated classes showed that there was no significant increase social interaction behaviors of children with special education needs.

There are several reasons why children with learning disabilities in inclusive schools are less able to model the social behavior of their peers. Bandura (1977) stated that the failure to match the behavior of the model in the following aspects: not observe relevant activities, coding of events are modeled quite right, failed to retain what they have learned, the inability to physically display, or have inadequate incentives.

Although Bandura (1977) states that modeling as a form of learning, learning that he thinks it will not happen if the model is learned perceived inaccurate. He argues that the personal and environmental factors are interrelated, resulting in mutual interaction constant between the person and situation. Children with learning disabilities who inclusive schools, will have problems if the modeling peers without specific retardation, and other disorders syndrome). The students grade VC numbering 36 people, 15 men and 21 women. Based on the school documentation of the 36th students have the intelligence level of the average (normal). All 36 students were charged IICLD, and obtained the subject of as many as 5 people. Peer mediators (PM) is a normal children classmates, with the following criteria: (1) has the ability to mediate learning to peers based Peer Mediator Identification Instrument (PMII); and (2) obtain the best nominations through sosiometric (Harris, et al. 2009). PMII analysis results obtained by eight (8) children, three (3) children should be aborted due to lack of interest in helping children with learning disabilities.

#### Teachers Participant dan Research Setting

Teachers involved in this research that classroom teachers and special teacher. The role of the classroom teacher are: (1) together with the authors determine peer mediator, (2) consider the interest of the peer mediator, (3) joint author of charged social skills prepare lesson plans, (4) facilitate the implementation of PMI through peer mediator. Special teacher role is to help the authors to identification and assessment children with learning disabilities, as well as being an observer in the data collection. This research was conducted in the class VC SDN 03 Alai Padang, by applying PMI in learning Indonesian, for 3 days a week. The focus of research on five pairs of children (children with learning disabilities and peer mediator selected).

#### Target Behaviors, Handbook of Treatment and Measurement

The target behavior is the social skills to classroom survival skills, among others: (1) hearing, (2) follow the order, (3) discussion, and (4) asking questions. The guide book treatments and materials prepared by the authors and validated by experts, which consists of 4 parts. Section I introduction, section II application procedure through rereading PMI, PMI monitoring part III, and part IV of social skills teaching materials. Measurement of the target behavior using the Rubric of Frequency Data Recording Social Skills (RFDRSS), filled out by the authors, classroom teachers and special teacher during the baseline, intervention and maintenance phase. Scale of Social Skills and Self Report, completed by classroom teacher and special teacher at the end of intervention. While self-reports completed by children with learning disabilities and peer mediator.

#### **Experimental Designs**

Experimental design using *single subject designs* models of multiple baseline designs across subjects design with A-B-A' (Barlow & Hersen, 1984; Creswell, 2012). Phase A is baseline (before treatment), Phase B is the intervention with the peer-mediated intervention, and A' is the maintenance.

interventions to improve socialization. In addition, several studies have found that without specific intervention, the child's social behavior are not well developed because children do not have the concept and the pattern of socially desirable behavior.

In a meta-analysis of social skills in children with learning disabilities, Kavale & Forness (1996) found approximately 75% of children with learning disabilities gain rating lower than children who has not learning disabilities. In the classroom, children with learning disabilities also lack social skills so that they are often ignored and even rejected by his friends normal. The lack of social behavior towards teachers and peers will affect children's achievement both academic and social (Robertson, et al, 2003.).

Social skills appropriate behavior towards teachers and peers will facilitate academic engagement (such as following orders, listening to the teacher, and so on); not interfere with the authority of the teacher (such as slumber, disruptive in class). One form of social skills and interpersonal skills to develop friendships (such as helping a friend, answering questions, and discussion skills) (Miller, et al, 2005; Nowicki, 2003).

Based on the assessment results in inclusive elementary schools in Padang found five things that form the basis of this study. *First*, the use of learning strategies that focus on the teacher (teacher-oriented), the predominant use of lectures and assignments, as well as a lack of understanding of how to learn children with learning disabilities, resulting in teachers tend to let the difficulties of the students in the class. *Second*, these conditions resulted in the potential of children so that the less developed academically and socially problematic. *Third*, the social problems they face affect academic, so it requires a learning strategy that helps the duties and responsibilities of the classroom teacher. *Fourth*, the main problem they are experiencing is related to social skills. *Finally*, there has been no involvement of peers in teaching children with learning disabilities in the development of the learning process.

One way to teach social skills is the peer-mediated intervention (PMI), which is a teaching strategy in which the peer teaching social skills to peers that children with learning disabilities. PMI consists of three types, namely, peer proximity, peer prompting and reinforcement, and peer social initiation. Peer Proximity done with the closeness between children with learning disabilities a peer mediator. Peer prompting and reinforcement is done by teaching them how to initiate social interaction (Harris et al, 2009). Departing from these problems, the authors propose the formulation of the problem: "What is the effective application of the PMI to improve social skills in children with learning disabilities in inclusive elementary school?"

#### METHOD

#### Subjects (Children with Learning Disabilities and Peer Mediators)

The research subject is determined by: (1) the Instrument of Identification Children with Learning Disabilities (IICLD) adopted from Westwood, (2004) and Wong (2004), (2) difficult to complete the tasks of academic and social behavior, (3) is not impaired comorbidities (such as visual impairment, hearing impairment, mental

#### **RESULTS AND DISCUSSION**

#### PMI Effectiveness of Peer-Mediated Intervention of Children with Learning Disabilities Social Skills

Visual analysis graphic of data improving listening skills are presented in figure 1 below. Graph 1 shows the change in the HL frequency of hearing skills tend to be stable at a low baseline phase. Once applied PMI, there is a significant increase, as well as the maintenance phase. Estimated tendency toward increased intervention phase. Subject KA. listening skills tend to be stable at a low baseline phase. Concentration KA listen RY big enough for KA prefer recited rather than read it myself. Once applied PMI, rose sharply. Estimated tendency toward the intervention and maintenance phases increases. Listening skills and asking for help TS at low baseline phase, after application of the PMI rose sharply and remained elevated in the maintenance phase. Estimated tendency toward increased intervention phase. Listening skills and asking for help RA at baseline tended to stabilize the low phase. Once applied PMI, rose sharply and dropped back to the maintenance phase. Listening skills and asking for help KY on low tend to be stable baseline phase. Once applied PMI increases and decreases in the maintenance phase. Estimated tendency toward the intervention and maintenance phases tend to increase. Based on the analysis of the visual graphic of data in graph 1 can conclude that the effective application of the PMI to improve listening skills on the subject HL, RA, TS, KA and KY.

Visual graphic of analysis data improving of following the orders skills improvement are presented in graph 2 below. Skills of HL following the orders in the baseline phase tends to be low. Once applied PMI, there is increased until the maintenance phase. The rate of change of data after application of the PMI improved. Subject of KA, there is an increased skills to following the orders after application of PMI. This increase lasted until the maintenance phase. On the subject TS, the increase is very sharp skills of following the orders, but decreased in the maintenance phase. Estimated tendency toward the intervention and maintenance phases tend to increase. Phase baseline in subjects with RA also tends to be low. Once applied PMI, experienced a sharp increase and decrease in maintenance phase. Estimated tendency toward the intervention phase increased and decreased maintenance phase. Although KY less likely to asking for help and the help of friends, but KY faster appreciate any assistance given by the MFN learn quickly asking thank you. In the baseline phase thanked skills and follow orders KY tends to be low. Once applied PMI, rose sharply even increasing the maintenance phase. Based on analysis of the graph 2 can be concluded that the application of PMI effective to improve following the orders skills on the subject HL, KA. TS. RA, and KY.



Graph 1. Frequency of Listening Skills Subject HL, KA, TS, RA and KY in Baseline, Intervention and Maintenance Phase



Graph 2. Frequency of Following Directions Skills Subject HL, KA, TS, RA and KY in Baseline, Intervention, and Maintenance Phase

Graph 3 shows the HL's discussion skills at low stable baseline phase. There is an increased after application of PMI. Estimates increased tendency toward intervention phase. Skills applied discuss TS after PMI has increased and remains constant for the maintenance phase. Estimated tendency toward the intervention phase increases, and decreases the maintenance phase. Estimated tendency toward the intervention and maintenance phases increases. Skills discussing RA in the baseline phase tends to stabilize low and after application of PMI, increased and decreased again in the maintenance phase. Estimated tendency toward the intervention phase increases, and decreases the maintenance phase. So is the subject of KY, discussion skills tend to be stable at a low baseline phase. Once applied the PMI, increased and decreased in the maintenance phase. Estimated tendency toward the intervention phase increased and decreased in the maintenance phase. Based on the analysis of the graph 3 it can be concluded that the application of PMI is effective to improve discussion skills on the subject HL, RA, TS, KA and KY.

Graph 4 shows the asking questions skills during the baseline phase of HL in 4 sessions tend to be low. Once applied PMI, rose and remained elevated in the maintenance phase. Estimated tendency toward the intervention and maintenance phases increases. On the subject of trains, the skills to ask questions on the baseline phase tends to be low. Once applied PMI, rose to the maintenance phase. In subjects with RA, asking questions on the skills tend to be stable baseline phase low that directly applied the PMI. There is an increased skills to ask questions during the intervention phase, but decreased in the maintenance phase. Skills asking questions KY on low stable baseline phase that directly applied the PMI. There is an increased during the intervention phase and decreased in the maintenance phase. Based on the analysis of the graph 4 it can be concluded that the application of PMI is effective to improve asking questions skills on the subject HL, RA, TS, KA and KY.

The successful implementation of inclusive schools requires good collaboration between the various components, including teachers and children (Rudiyati, 2013). Good interaction is the key to successful social integration of children in inclusive schools (Cook & Cameron, 2010). The social skills of the children with learning disabilities before PMI applied by peer mediator are low category. HL, in the learning process a lot more silent, less express an idea, so it is often scolded by the teacher for not answering when asked, and if asked to ask HL silent. HL often mocked classmates, and resigned to the condition. The presence of the author in the classroom, gives a new insight for HL. Unlike the case with the subject of trains, he is more open. less skilled in listening to the conversations, difficulty concentrating, passive in class discussions. KA class teacher scolded more often than HL, as they often do not pay attention when the teacher explains the lesson, like excuse me out of the classroom, which makes teachers become bored, so the behavior of HL and KA left alone. Subject TS, have properties moody, sometimes he is very jolly in the classroom, sometimes silent, is not known what causes it. TS is more open than HL and KA, in the classroom he was chirpy, only the teacher's attention should be directed to him. TS is often less than polite to both the

teacher and the classmates. His behavior is rude, bossy, so classmates are less liked. Teachers overwhelmed by the desire TS, the teacher finally let the selfish behavior. Subjects with RA and KY have almost the same properties, namely mischievous to a friend. Like it aside by a friend, a teacher often scolded by works nosy.

These findings related to the study Arntzen & Halstadtro (2003) that the negative behavior in interacting with peer will make the interaction process as an activity that saturate for others. Cook & Cameron (2010) states in the inclusive classroom. children in accordance with their social environment is getting positive reception.



Graph 3. Frequency of Discussion Skills Subject HL, KA, TS, RA and KY in Baseline, Intervention, and Maintenance Phase



Graph 4. Frequency of Asking Questions Skills Subject HL, KA, TS, RA and KY in Baseline, Intervention and Maintenance Phase

Listening skills in five subjects after application of the PMI increased significantly. Subject TS, characteristics like interrupts and answers before questions have been completed given. So is the case with RA, although peer mediators have been warned many times but nosy attitude difficult to remove. Attitude nosy RA will be reduced each peer mediators provide rewards and reinforcements. Harris, et al (2009) that in inclusive schools, reward and reinforcement by peers strongly supports academic and social success of children with special needs, as well as provide a special experience for the children in learning.

Subjects TS in discussion and asking questions skills improved more than the other four subjects. Initially, five subjects were less active asking questions and discussion skills, after gradually peer mediators do peer proximity (by physical proximity, language, and interests). KY and TS subjects showed liveliness. While KA, RA. and HL actively discussing if the peer mediators do peer proximity followed by peer prompting and reinforcement (as an example of how to ask, how to answer politely, along with the positive reinforcement). This finding is supported by Morrison, et al. (2001) that the child's success in starting a social skills will improve if given the support and reinforcement from peers. Skills following orders in this study more significant increase in TS. HL, and KY. This finding is related to the ability of the three subjects is more prominent in some of the basic concepts required to follow orders, such as the number. sequence (order). section, size. social emotional circumstances, characteristics, texture, time, spatial relationships and position (Nowicki, 2003 ). Helping friends skills at the most elevated in KY and HL. While the skills to making a correction for the error itself more increased in KA, TS and KY. If the child is accustomed to correcting its own error learning, the critical thinking skills of children will increase as well (Westwood, 2004; Shepherd, 2010). Skills most increases are asking questions, and the least increase was asking for help. The highest level of achievement of skills to asking questions, discussion, helping friends, and making the correction of the error itself is TS, but TS is also the lowest in the achievement of the following the orders skills.

These findings suggest that the type of PMI is often used peer mediators are peer prozimity and peer prompting and reinforcement. The principle of proximity, not only physically, but the closeness of language and interest can improve rapport between peer mediators and children with learning disabilities. They feel uncomfortable because of his want to approach him. If children feel comfortable learning disabilities, then established a relationship of mutual empathy, which will facilitate the peer mediators teach social skills. These findings are relevant to the study of Harper, et al (2008) that a peer mediator in PMI provide benefits to the subject, namely: (1) provide motivation. (2) feel comfortable on the attention given. (3) a model of behavior. (4) increase communication between them, and (5) make learning a fun activity.

#### CONCLUSION

Application of PMI effective to improve the child's social skills learning disabilities in SDN 03 Padang Alai. Improved social skills for all items more increased in TS, then KY, HL, RA and KA. This is evident from the average frequency for each item of social skills increased during the intervention PMI. Improved social skills for each item from highest to lowest are the skills: (1) listening (HL), (2) asking questions (KY), (3) making correction the error itself (TS), (4) asking thankyou (KY), (5) asking questions (KY), (6) helping friends (TS), (7) discussion (KY), and (8) following the orders (KY).

Teachers are advised to apply the PMI in other subjects. To further research, in order to examine the effect of the PMI to increase social skills in other categories, in the new situation, involving peer mediators of children with special needs and normal children. Suggested to the next researchers also examine the type of PMI as independent variables separately, to determine the effect of PMI independently to increased social skills.

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