

# 9A\_CAPICITY BUILDING FOR WOMEN WITH DISABILITY CHILDREN.pdf

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## CAPACITY BUILDING FOR WOMEN WITH DISABILITY CHILDREN

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Based on the UNICEF report (2015) around 80% of children with disabilities are found in developing countries, where they are part of 15% to 20% of the poor. Selanjutnya, UNESCO (2016) reported that more than 90% of children with disabilities in developing countries do not attend school. How about in Indonesia? In Indonesia, data on children with disabilities is still very minimal, because there is no up-to-date data on the number and condition of children with disabilities. Based on the results of the 2012 National Socio-Economic Survey, the estimated number of children with disabilities in Indonesia is 532,130 people or 0.63% of all Indonesian children. If seen by place of residence, children with disabilities in rural areas are higher than those in urban areas (0.64% in rural areas and 0.61% in urban areas).

Based on 2012 Susenas data, the number of children with disabilities (85.6%) is in the community. This is because some people still consider children with disabilities to be a family disgrace so parents / families tend to hide and pay little attention to the needs of children according to children's rights both in education and health. Only a small proportion of children with disabilities (14.4%) are in institutions such as schools, nursing homes, and the Child Social Welfare Institution (LKSA). In addition, the National Statistics Agency's National Socio-Economic Survey in 2016 showed that of the 4.6 million children who were not in school, 1 million were children with disabilities.

From various problems summarized from various online news, UNICEF Annual Report, National Human Rights Commission, Save The Children Report, Sayangi Tunas Cilik Foundation Report, Republika, 2013 Children's Situation Report, CNN News, Global Every Last Child Report, tempo magazine concluded that children persons with disabilities have problems originating from 1). family problems (discrimination, neglect, not getting attention, torture, not guaranteed nutrition, being hidden, considered as a family disgrace, embarrassing, and not having a bargaining position in issuing opinions); 2). peer problems (ridicule, physical violence, isolation, and verbal and non verbal bullying); 3). problems with the community (negative stigma such as poor children, need to be pitied, burdensome, troublesome, jinxed child, and bearer of curses); 4). problems with the government (difficulties in access to infrastructure and public services)

The role of a mother in caring for and preparing for the future of a child with disabilities is very important. But there are still many mothers who feel embarrassed and even stressed when faced with the fact that they must have children with disabilities. The problem of a mother with a disability child is one of the country's problems but has not been a concern. Caring for children with disabilities is certainly a very difficult challenge for a mother, because they have to face a very different situation. This can cause a mother with a disability child to be stressed, depressed, angry, or desperate. As a result, mothers do not take care of their children properly but are abandoned. According to Kompas Daily Journal (kompas.com daily www 03/12/2015) that 25% of neglect of children with disabilities who are less than two years old include economic crush of childbirth often occurs in families who have many economic problems, are pregnant out of wedlock, do not want accept the situation. Based on data reported by Republika, Femina, Kompas, and National Commission on Human Rights, the problems faced by women with children with disabilities are shame, anger, despair, discrimination from the community, closing themselves out, feeling isolated, broken hearted, not confident, mentally down, unwilling to accept reality, and many other problems

Once the importance of the role of a mother in caring for a child with disabilities, a woman with a disability child must be strong and be able to solve the problem first. Therefore, special empowerment efforts are needed for them to be able to prepare themselves as a mother who must care for a child with disabilities. The Nganjuk District Social Service has made efforts to increase capacity for women / mothers with children with disabilities. One of them is in Duren Hamlet, Sawahan Subdistrict, Nganjuk Regency. Since two years ago, capacity building has been carried out for mothers with disabilities. The number of participants was sixteen with the characteristics of having children with disabilities namely; 4 people have physical disabilities (deaf, blind, speech impaired), as many as 5 people have mentally disabled children, as many as 7 people have multiple disabilities (physical and mental)

This study aims to describe the capacity building of women with disability children and what is the role of government in the process.

This study used descriptive qualitative methods that tend to be based on textual context that this use to gain an understanding of underlying reasons and motivations for social phenomenon (Dann & Neuman, 2016). The technique of collecting data through three ways, namely observation, interviews, and documentation (Yin, 2011).

This study find two things, first that there are five process<sup>2</sup> in the capacity building according the United Nations Development Program (UNDP, 2009), namely : engage stakeholders on capacity development; asses capacity assets and needs; formulate capacity development and program; implement a capacity development; and evaluate capacity development. Engage stakeholders on capacity development begins with the involvement of women with disability children to convey their wants / needs. They need friends to share or to strengthen one another. Capacity assets and needs are carried out by identifying their various potentials and needs. These women are willing to finance all activities in the form of time, energy, thoughts, and money. Formulate capacity development and programs are carried out by making suitable programs that are in the form of social gathering. In this social gathering activity will be filled with various activities such as sharing, counseling from the Social Service, announcements or important information for them. Implement a capacity development by carrying out activities every month attended by Social Service officials. Finally, evaluating capacity development is carried out by asking the opinions of women about the benefits of the activities and the proposed next activities.

The second finding is the role of the government (Dinas Sosial), namely in the form of regulators, dynamists and facilitators. Role as a regulator, the Social Service creates a capacity building program for women with disabilities. All stages of the capacity building process are given the power of the legal umbrella in a program. The role as a dynamicator, the Social Service mobilized and encouraged the community to continue to participate in the activities, one of which was by providing various activities they wanted. Role as a facilitator, the Social Service provides facilities in the form of financial assistance and assistance from extension workers.

The conclusion<sup>5</sup> obtained from this study is that the success of capacity building is strongly influenced by the commitment of women with disability children to have a community where they share and strengthen each other

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