

## Personal guidance for students with special needs through self-care programs

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### Abstract

This study examined the implementation of a self-care development program integrated within a personal guidance framework for students with special needs, focusing specifically on dressing skills. This research uses a qualitative descriptive design. Participants were purposively selected, including one special education assistant teacher, two students with intellectual disabilities, three classroom teachers, and three parents. Data were collected through semi-structured interviews, observations, and documentation. Data were analyzed using thematic analysis with data triangulation. Findings indicate that the self-care program, which includes role-playing, demonstrations, and assignments, effectively encourages student independence, particularly in dressing. The success of this program depends on collaboration between families and schools, including special education teachers and classroom teachers who act as counselors. Although limited parental time and social stigma pose challenges for inclusive schools, the self-care program has the potential to instill sustainable behavioral reinforcement. Through this research, educational practitioners and policymakers can consider developing a self-care program, and school counselors in special schools can collaborate with special education teachers and classroom teachers to facilitate educational services for children with special needs.

**Keywords:** *personal guidance, self-care program, intellectual disabilities, inclusive education.*



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### Introduction

Inclusive education, particularly in Indonesia, emphasizes learning opportunities for all students without discrimination of any kind. This approach integrates children with special needs into the same learning environment as those without special needs, ensuring equal quality of education for both groups. In such an environment, students with special needs have the same

rights and obligations as other students (Darma & Rusyidi, 2020). Within this framework, schools strive to fulfill the rights and obligations of all students, including those with special needs, one of which is through self-care programs.

A self-care program can be defined as a form of effort provided by educational schools, particularly inclusive schools, that focuses on developing abilities or skills that support the learning process. More broadly, a self-care program can also be defined as a special education service designed to develop the abilities of students with special needs to meet their daily needs independently according to their characteristics and abilities (Wulandari, Susilawati, & Kustiawan, 2019). In other words, a self-development program is only provided to children with special needs to support their limitations. The development of self-care abilities not only enhances functional independence but also contributes positively to self-confidence, social adjustment, and overall quality of life for individuals with intellectual disabilities (Wehmeyer & Shogren, 2017). Support from special needs teachers and counselor school plays a crucial role in the learning process (Safaruddin et al., 2019, Hadiansyah et al., 2021).

One of the goals of guidance and counseling services in schools is to develop students' abilities to achieve independence in accordance with their characteristics. Children with special needs face various obstacles that cause them to require ongoing guidance and counseling services. One major obstacle is difficulty adjusting to the family, school, and community environment. These limitations often lead to feelings of fear of rejection, low self-esteem, lack of confidence, and even excessive anxiety (Sambira, 2020). If left untreated, this anxiety can lead to learned helplessness and significant regression in behavioral change.

During self-care programs, particularly dressing skills training, students with intellectual disabilities often experience intense performance anxiety due to repeated task failures, cognitive delays, and fear of social evaluation. This is reinforced by initial interviews with special needs teachers who explained that "ABK can't button his shirt precisely according to the button sequence..." If left untreated, this problem has the potential to cause anxiety and significant regression in behavioral change. This also presents a particular challenge for school counselors in facilitating students with special needs. Therefore, school counselors and special needs teachers need to collaborate to optimize learning services for children with special needs (Hadiansyah et al., 2021).

Intellectual disability, is classified as a condition affecting children with special needs, in which cognitive abilities fall significantly below the average range. As outlined in the Diagnostic and Statistical Manual of Mental Disorders (DSM-5), this disorder emerges during the developmental period and is defined by impairments in intellectual capacity, adaptive behavior, social skills, and practical functioning. Individuals diagnosed with MR often encounter challenges in physical activity, sensory processing, and may exhibit distinct physical abnormalities (Wulandari et al., 2019). Other developmental delays commonly accompanying this condition include delays in achieving motor milestones such as sitting, crawling, standing, and independent walking. Furthermore, individuals with intellectual disabilities often require structured support and self-management training to improve independent functioning in daily activities (Sandjojo et al., 2019). The attainment of independence for children with Intellectual disability cannot be equated with that of typically developing children. As a subgroup of children with special needs, They exhibit deficits in various areas, particularly in self-care skills, which are primarily due to their lower intellectual functioning. These limitations often prevent them from engaging in basic self-care activities, especially during the elementary school stage.

Due to delays in cognitive development, children with Intellectual disability face multiple barriers in meeting daily needs, with the extent of achievement varying depending on the severity of the disability and the level of support provided by their environment. Intellectual disability is characterized by significant intellectual limitations that impact both learning abilities and the capacity to carry out everyday activities. Individuals with intellectual disabilities, previously referred to as Mental Retardation (MR), experience cognitive limitations that necessitate the formulation of

independence goals aligned with their existing potential (American Psychiatric Association, 2013; Schalock et al., 2010). In this context, fostering independence becomes a crucial developmental goal to enable optimal social functioning.

Raising awareness of the importance of independence from an early age is crucial for children with intellectual disabilities, as it enables them to perform daily tasks and responsibilities with minimal guidance, appropriate to their developmental stage and abilities. Independence, in this sense, goes beyond simply distinguishing right from wrong; it also includes the ability to distinguish between good and bad, comply with established prohibitions, and understand the consequences and risks associated with breaking rules (Sa'dyah, 2017). Independence refers to an individual's ability to perform daily activities without relying on assistance from others. Enhancing independence among individuals with intellectual disabilities not only improves their quality of life but also contributes to strengthening their self-confidence and self-esteem. Individuals with disabilities who achieve higher levels of independence are more likely to experience a greater sense of life satisfaction.

According to Wantah as cited in, (Ramadhani & Sudarsini, 2018), self-development is an educational process for children with special needs aimed at fostering essential abilities such as self-care, personal hygiene, eating, drinking, independent toileting, addressing clothing-related tasks, tying shoelaces, interacting with others, and socializing both with peers who have special needs and with typically developing children. Self-care refers to a set of activities performed by an individual to maintain personal well-being. In the context of intellectual disability, this may include skills such as bathing, dressing, and maintaining personal hygiene. These activities enable individuals with intellectual disabilities to learn and practice the skills necessary to improve their independence.

Observations show that children with intellectual disabilities enrolled in special needs schools often demonstrate limited independence in performing basic dressing tasks. This is largely due to a lack of parental support. This is evident when children with intellectual disabilities are neatly dressed when they arrive at school, but when asked to tidy their own clothes, they experience difficulties. Parents, especially mothers, often help them dress so they appear neat, but they do not teach them how to tidy their own clothes. These findings indicate that children with intellectual disabilities are still highly dependent on the help of others.

Although numerous studies have demonstrated the effectiveness of structured interventions, self-management training, and social support in enhancing self-care skills among individuals with intellectual disabilities (Asri & Afifah, 2020; Pesau et al., 2020; Sandjojo et al., 2019) most have predominantly focused on home or community settings. Research specifically examining the implementation of self-care programs in SLB which possess distinct characteristics, resources, and learning dynamics remains limited. This is a critical gap, as SLB serve not only as centers for academic learning but also as hubs for the continuous development of functional life skills (Ibrahim et al., 2021)

Furthermore, while there is scientific evidence that collaboration between inclusive schools and family involvement can reduce stigma and promote healthy behaviors for children with special needs (Lee et al., 2023), the specific case of implementing a self-care development program for students with intellectual disabilities using a guidance and counseling service approach is rarely explored. Factors such as the ratio of school counselors to students, the availability of adaptive learning media, and parental involvement are likely to influence program success, but these aspects have not been comprehensively integrated into existing research frameworks (Nurhidayah & Kusumastuti, 2022). Although (Zahro, 2018) found that self-care development programs can increase independence, they only used statistical calculations rather than the process. Therefore, this study aims to discuss self-care development programs for children with special needs from the perspective of guidance and counseling services, and provide a specific overview of how guidance and counseling services can collaborate with special needs teachers, classroom teachers, and parents.

## **Method**

The research design used in this study was a qualitative descriptive design. This design was chosen in accordance with the research objective, which was to explore the implementation of a self-care development program for students with intellectual disabilities in a special needs school. This study focused on several indicators, including: (1) instructional strategies used in teaching self-care skills in dressing for students with intellectual disabilities, (2) student independence in dressing at school, (3) parental involvement in supporting self-care practices at home, (4) challenges encountered during program implementation (5)

The selection of research subjects was based on the research objective. The primary participants consisted of one GPK and two students with intellectual disabilities. Both students were categorized as having moderate intellectual disabilities. To provide contextual clarity, the two primary student participants had distinct behavioral and cognitive profiles. Student 1 was a 9-year-old boy who exhibited fine motor coordination difficulties, particularly difficulty buttoning shirts. Student 2 was a 10-year-old girl with mild intellectual disabilities who frequently refused assignments due to concerns about dressing neatly and social ridicule.

Data validity was systematically validated using two types of data triangulation: method triangulation and source triangulation. Method triangulation was conducted by cross-verifying data obtained through various data collection techniques; while source triangulation was applied by systematically cross-checking narratives and perspectives across different participant groups. Specifically, the researcher compared the results of data analysis from different participants with data from parents and observations of classroom teachers' teaching implementation. This dual triangulation strategy effectively minimized subjective bias and ensured a comprehensive and objective evaluation of the self-care program. The researcher obtained informed consent from all participants.

Data were collected through semi-structured interviews, observations, and documentation. Interviews were conducted face-to-face at school and at home, depending on the participants' availability and convenience. Each interview lasted approximately 30–60 minutes and was recorded with the participants' permission. The interviews explored participants' experiences, perceptions, and challenges related to the implementation of the self-care program. Observations were conducted during learning and self-care activities, particularly during dress-up practice sessions, to examine student participation, teacher strategies, and classroom interactions. Documentation included student progress reports, lesson plans, and school program notes relevant to the self-care program.

Data were analyzed using thematic analysis, strictly following the six-phase framework proposed by Braun and Clarke (2006), which includes data identification, initial coding, theme discovery, theme review, theme definition, and report creation. To ensure data validity, source triangulation was conducted by comparing findings obtained from interviews, observations, and documentation. Additionally, information from teachers, parents, and students was cross-checked to ensure consistency and credibility of the findings.

## **Findings**

The findings of this study are derived from document analysis, observations, and interviews conducted at SLB. First, based on documentation from the DAPODIK page (Data Pokok Pendidikan), the school has not formally adopted an inclusive education curriculum. However, empirical findings from interviews and direct observations reveal a different reality. The empirical findings of this study are categorized into several distinct themes, including.

Instructional strategies in dressing for students with intellectual disabilities

Self-care programs are a central component of the practical implementation of inclusive education in schools. Students with intellectual disabilities require specialized assistance with basic daily skills. Observations during the learning process indicate that the self-care program encompasses personal hygiene, mealtime routines, and dressing. These competencies are introduced gradually, starting with simple tasks and progressing to more complex activities. Teachers use a combination of role-playing, demonstrations, and structured tasks to ensure students understand and effectively practice each skill. The learning process is iterative and consistent, allowing students to internalize routines over time.

In the specific context of dressing skills, a structured instructional sequence is evident. The learning process begins with modeling by the teacher, often delivered through role-playing activities. The special assistant teacher demonstrates each step, such as holding clothing correctly, tucking arms into sleeves, and buttoning buttons. Interviews with special assistant teachers (GPK) revealed that "children with intellectual disabilities need concrete examples that they can immediately practice" (interview, GPK, January 20, 2026). This suggests that through modeling activities, students feel more comfortable and less anxious because they can imitate actions rather than relying solely on verbal instructions.

After the modeling phase, students with intellectual disabilities are given the opportunity to try dressing themselves. During this phase, teachers only observe and do not directly correct. This aims to maintain student dignity and avoid potential embarrassment. Teachers carefully monitor each student's performance, noting specific difficulties such as incorrect order, mismatched buttons, or incomplete dressing steps. These observations are systematically documented and then used as the basis for assignments, evaluations, and feedback.

The final step in the self-care program is assignments. The assignment phase serves as an extension of learning outside the classroom. Parents or guardians are actively involved in reinforcing the skills taught in school. The assignment material is explained by the GPK to parents based on documentation from the GPK. This aims to foster synergy between the school and parents. Based on interviews, parents are instructed to guide and supervise their children in completing daily self-care tasks. One participant said, "I was asked to give a checklist and explanation of my child's progress, when they were trying to get dressed, and interestingly, I was asked to pretend to be their teacher." (Interview, Parent A, January 21, 2026)

#### Parental Involvement In Supporting Self-Care Program.

Collaboration between schools and families is a key factor in the success of self-care programs. Schools actively encourage this collaboration by maintaining regular communication with parents and involving them in monitoring student progress. Furthermore, the establishment of community support groups through the school committee provides a platform for parents to share experiences, challenges, and strategies in supporting their children. This network not only benefits the students but also strengthens parents' capacity to provide appropriate care and guidance. One parent with an intellectual disability said, "...I feel less alone in raising our child because there are others experiencing the same thing, and we share and discuss things..." (interview, parent B, January 20, 2026). In other words, parents also need systemic support in educating and raising children with special needs.

#### Challenges encountered during program implementation.

Research findings indicate that students show gradual progress in developing independence, although the rate of improvement varies among individuals. One classroom teacher explained, "Before participating in the self-help program, AR couldn't distinguish between taking off a shirt and a T-shirt, so he often unbuttoned it..." Some students demonstrated the ability to follow instructions accurately and complete dressing tasks with minimal assistance, while others still required repeated guidance and supervision. Observations revealed specific challenges, such as

students focusing on counting buttons rather than fastening them, inserting buttons into the wrong holes, or failing to align clothing correctly. This variation highlights the need for an individualized approach to teaching self-care skills.

In addition to dressing, the self-care program also includes comprehensive training in personal hygiene. Students are taught essential routines such as washing their hands, bathing, brushing their teeth, washing their face, and maintaining toilet hygiene. The instructional process is tailored to each student's abilities, with teachers adjusting the sequence, pace, and level of assistance provided. In many cases, students may not be able to verbally explain the steps they perform, but they demonstrate understanding through habitual actions developed over time.

Personal guidance for students with special needs through a self-care program.

Research findings indicate that personal guidance for students adapts to their limitations. In the context of this study, students with intellectual disabilities received direct guidance, both verbally and non-verbally. Although student responses can sometimes be difficult to predict, the focus of personal guidance for students with intellectual disabilities is their comfort during the learning process, so they don't feel pressured to learn. One special needs teacher explained, "Teaching students to dress isn't an instant process; it requires process, consistency, and close attention to ensure the student's acceptance. Most importantly, we, as teachers, need to sincerely accept the student's condition..." (Interview, GPK, February 15, 2026)

## **Discussion**

This study focuses on personal guidance for students with special needs through a self-help program. Based on the research findings described, the implementation of self-help in the context of dressing. Students with intellectual disabilities are taught to dress by first showing an example, a method known as role-playing. According to interviews with special education teacher assistants (GPK), providing examples while engaging in role-playing helps children feel understood about their condition, and they subconsciously participate in activities as demonstrated by the teacher. This finding is supported by previous research showing that role-playing has a significant impact on the self-development of students with intellectual disabilities (Astiani & Anggrellanggi, 2024). From another perspective, role-playing is used to teach dressing skills, in line with proven approaches such as video modeling (Susilowati et al., n.d.). The teacher, as a good dress model, provides an example of how to dress correctly, then students are asked to observe and try it out. This is known as a modeling technique from the perspective of school counselors. This aims to enable students to emulate the role models they have observed. Furthermore, the application of modeling techniques significantly improved children's self-care skills, with the average level of student independence increasing from 63% to approximately 82% after the intervention (Bahroni, Udhiyanasari, & Nurhadiyati, 2025).

After the role-play, students are asked to demonstrate the skills themselves. To maintain ethical considerations, teachers do not require students with intellectual disabilities to practice dressing in front of others. Instead, teachers closely observe the process and record observations for later evaluation with parents. Assignment is the final stage, where parents or guardians are involved to help monitor students' progress at home. Parents play a crucial role in encouraging, raising awareness, and providing understanding to their children (M. Sari et al., 2023). The assignment phase involves parents or guardians monitoring skill acquisition at home. Parental involvement plays a crucial role in reinforcing learned behaviors and building self-confidence. This reflects findings in self-management training, where the involvement of support networks improves outcomes (Sandjojo et al., 2019). Teachers and special education assistants provide parents with progress data that is noteworthy. The collaboration between these two elements significantly supports students in gaining the confidence to develop important daily living skills, such as dressing.

Beyond family and school, community support also plays a crucial role. Schools establish community support groups through school committees, which not only assist students with intellectual disabilities but also provide a mutual support network for parents of children with special needs. This synergy between educational institutions, families, and the community helps students overcome their limitations and develop talents and skills (Ningsih et al., 2025). Furthermore, collaborative school committees encourage mutual support among parents and strengthen inclusive education (K Arya, 2021).

Self-care programs gradually address students' limitations related to daily activities, although progress varies by individual. Academically, students with disabilities are assisted by special education assistants, while non-academic materials are tailored to the student's needs and development. In non-academic education, the focus is on establishing habitual routines, even when the student cannot verbally explain them. For example, some students may have difficulty buttoning a shirt, counting buttons instead of fastening them, or misplacing buttons. The self-care program demonstrates the same errors before correcting them, allowing students to observe the solution (Bahroni, Udhiyanasari, & Nurhadiyati, 2025). In addition to dressing, students are also taught personal hygiene skills, such as handwashing, bathing, brushing teeth, washing their face, and cleaning up after using the toilet. The sequence and methods used vary depending on the context and needs of the students. Future research could further explore the implementation of self-care in personal hygiene training in more detail.

## Conclusion

Personal guidance for children with special needs through self-care training programs, particularly in developing dressing skills among students with intellectual disabilities, effectively fosters independence through a structured combination of role-playing, demonstrations, and task-based activities. The active involvement of parents, support from the school community, and collaboration among stakeholders significantly contribute to the success of the program. Despite ongoing challenges, such as parents' limited time to provide intensive guidance and supervision, as well as the lack of broader community involvement, the program has demonstrated positive changes in helping students with intellectual disabilities perform activities of daily living. Strengthening systemic support and enhancing public awareness should become a shared priority to sustain and support self-care training programs. Future research may focus on other self-care domains, such as personal hygiene, laundry, and cooking skills, which will be essential for maintaining and expanding the positive impact of these programs.

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