


Original Article


The Role Of Parents In Meeting The Basic Physical Needs (Love, Nurture, Hone) Of Children With Down Syndrome In Tunge Village


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
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ARTICLE INFO	ABSTRACT
<p>Article History: Submit : Dec 17, 2022 Revised : Dec 18, 2022 Accepted : Dec 26, 2022</p>	<p>Background: Down syndrome is the retardation of physical and mental growth caused by the developmental abnormalities of chromosome 21 that impact physical and mental barriers that experience the barriers of intellectual development and difficulty in adapting to the environment in everyday life. Children with Down syndrome have distinctive acceptable motor characteristics and other characteristics based on the degree of obstacles it has, which are coarse-hand fingers, stiff, weak muscles, emotional conditions that are difficult to guess and poorly restrained, dependence on adults, and often reject others. The research aims to know the parents' role in fulfilling the basic needs of physical (love, nurture, hone) of children with Down syndrome in Tunge village.</p> <p>Methods: The design of this study uses descriptive, a research population of 16 respondents, and a large sample of 16 respondents with the technique of "total sampling." This research was conducted using a single variable, that is, the role of the parent in fulfillment of basic physical needs (love, nurture, hone) in children with Down Syndrome in village T with instruments in the form of questionnaires then the data is analyzed with percentage and interpreted quantitatively</p> <p>Results: The results of the study gained that of 16 respondents, half respondents had a good role, eight respondents (50%), nearly half of the respondents had a sufficient role of 7 respondents (44%), and a small fraction of the respondents had a less than one respondent (6%).</p> <p>Conclusion: It is influenced by several factors namely age, gender, occupation, last education. The results of this study are expected that parents can improve their role in fulfilling the physical basic needs (love, nurture, hone) in children with Down syndrome, and add insight in the process of fulfilling basic physical needs (love, nurture, hone)</p>
<p>Keywords: Roles, Parents, Physical Basic Needs, Down Syndrome</p>	

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Introduction

Down syndrome is retarded physical and mental growth caused by abnormal development of chromosome 21, which impacts physical and mental barriers so that intellectual development is hindered and difficulties in adapting to the environment in everyday life. Children with Down syndrome have distinctive acceptable motor characteristics and other characteristics based on the degree of inhibition, namely rough, stiff fingers, weak muscles, unpredictable emotional states and lack of reasonable control, dependence on adults, and often rejecting people. Others (De Clercq et al., 2019; Taiyeb, 2016). Fulfilling basic physical needs is inseparable from fine motor development, which is the development of coordination in small muscles because small muscles play a significant role in fine coordination (Soetjningsih, 2013). Holding a toy, using a spoon, buttoning a shirt, or reaching for something that requires dexterity of the fingers shows fine motor skills (Bussolari et al., 2021; Jonh W, 2007; Sosteric & Raktovic, 2020) So that acceptable motor barriers can affect mental health, education, socialization, and academics. This condition is a disturbance of the brain's perceptual center, related to mentality and intelligence (Taiyeb, 2016).

Parents who have children with Down syndrome, mothers show high stress and react negatively to the child's disability. This is because the time spent by mothers caring for their children is twice as much as that of fathers (Larkin et al., 2021; Organization, 2018; Susanandari, 2009). According to the World Health Organization (WHO). Disorders of children with Down syndrome often occur in various countries in the world. It is estimated that 15% of the world's population, or up to 785 million people. Prevalence of Down syndrome in

the United States every year, 3000-5000 children are born with Down syndrome disorder. Meanwhile, the incidence of Down syndrome in Indonesia is more than 3000-5000 people. Data from the 2010 Riskesdas in children aged 24-59 months with Down syndrome was 0.12 percent, the 2013 Riskesdas increased to 0.13 percent, and the 2018 Riskesdas increased to 0.21 percent. Meanwhile, in the province of East Java, children with Down syndrome accommodated in special schools in 2013/2014 totaled 6,633 people, or 61.21% of all children with Down syndrome in East Java, which numbered 10,836 (Ahmad, 2014).

According to Olds (Ladewig et al., 2006), the characteristics that appear in children with Down syndrome range from being completely invisible and appearing minimal to having a distinctive sign. The most characteristic sign in children with Down syndrome is the retardation of mental and physical development. People with Down syndrome usually have the characteristics of a short body and stumps, arms or legs sometimes crooked, broad head, round face, mouth always open, large tongue tip, wide and flat nose, both nostrils wide apart, the vast distance between the two the eyes, the eyelids have epicanthic folds, so they are similar to the oriental, the irises are sometimes mottled, which is called "Brushfield."

The impact of disruption of the role of parents in fulfilling basic physical needs in children with Down syndrome is that children are not independent in meeting their daily routine needs. Apart from that, they do not feel isolated and can socialize, teaching them to live happily (Gabel & Kotel, 2018; Taiyeb, 2016). In early childhood with Down syndrome using physical therapy. (Wiyani, 2014) explains that the physical therapy used is treadmill therapy, by training mothers, caregivers, and PAUD

educators for children with Down syndrome. In order to be able to walk and be able to train in motor skills. Based on the description above, the problem formulation is "What is the description of the role of parents in fulfilling basic physical needs (love, care, sharpening) in children with Down syndrome?"

Methods

The research design used is descriptive research which aims to describe (describe) events that are happening in the present. So, in this study, the researchers wanted to know the role of parents in stimulating fine motor development in children in Tunge Village. This study's population was all parents with Down syndrome children in Tunge Village. This study's sample was parents with Down syndrome children in Tunge Village. The sample size is a provision for determining the size or number of samples in a study depending on two things. First, some sources can be used to determine the maximum sample size limit. Second is the need for an analysis plan that determines the minimum sample size limit (Notoatmodjo, 2012). In this study, the sample selection was carried out using total sampling. The variable in this study is the description of the role of parents in meeting the physical needs (love, care, and sharpening) of children with Down syndrome in Tunge Village. The measurement used in this research is a questionnaire. In this study, the method of data collection according to the method of data collection is a cross-section, namely data collected only at a particular time. Ethical Clearance No. 501/EC/LPPM/STIKES/KH/VIII/2021.

Results

The results of the study took 16 respondents from parents who have children with Down syndrome. The results of data collection on "Description of the Role of Parents in Fulfilling Basic Physical Needs (Asih, Fostering, Sharpening) in Children with Down Syndrome in Tunge Village.

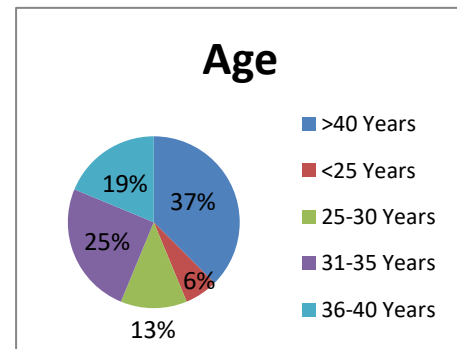


Figure 1. Respondent criteria based on age

Pie chart one above shows that of the 16 respondents, almost half were over 40 years old, with six respondents (37%), and a small portion of the respondents aged less than 25 years, with one respondent (6%).

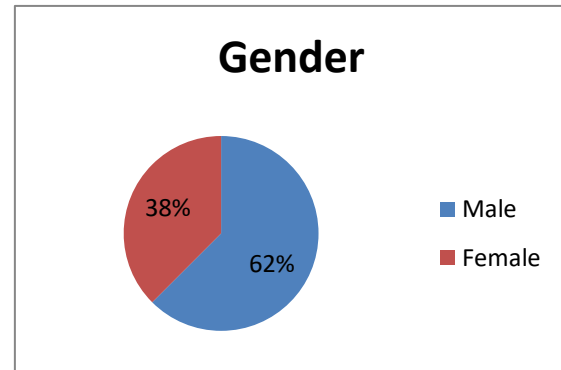


Figure 2. Respondent criteria based on parents' sex

Pie diagram 2 above shows that of the 16 respondents, the majority were female, as many as ten respondents (62%), and almost half of the respondents were male, as many as six (38%).

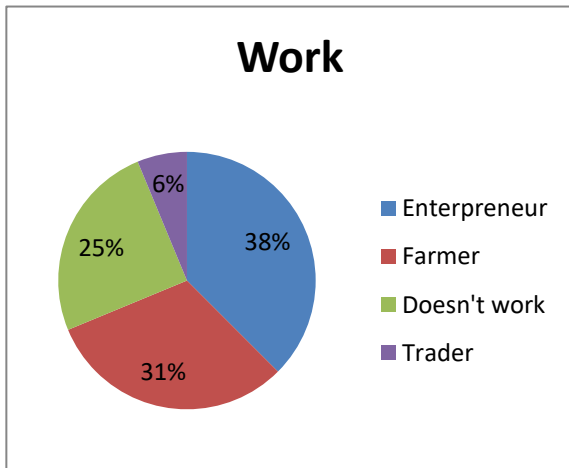


Figure 3. Respondent criteria based on work

Pie chart three above shows that of the 16 respondents, almost half of the respondents were six (38%), and a small portion were one (6%).

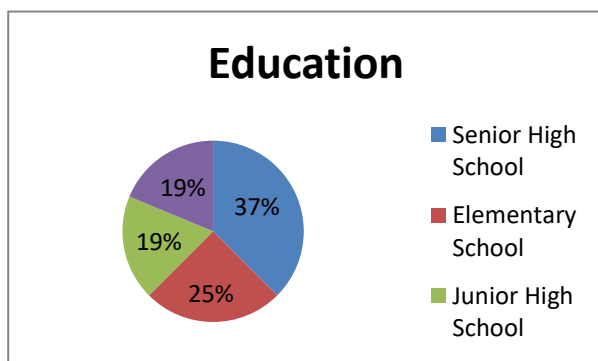


Figure 4. Respondent criteria based on recent education

Based on Pie chart four above shows that of the 16 respondents, almost half were six respondents (37%), and a small portion was three respondents (19%).

Table 1. Special Data on the role of parents in fulfilling basic physical needs (love, care, teaching) for children with Down syndrome in Tunge Village.

Number	Criteria	Frequency	%
1.	Well	8	50%
2.	Enough	7	44%
3.	Not Enough	1	6%
Total		16	100%

Based on the table above, the 16 respondents showed that half of the respondents, namely eight respondents (50%), had good parental roles, while a small portion of the respondents, namely one respondent (6%), was in the less category.

Discussion

From the results of research conducted in Tunge Village, it was found that of 16 respondents, half of the respondents, namely eight respondents (50%), had a good parental role, and almost half of them, namely seven respondents (44%) had an adequate role, and a small portion of the respondents had a role fewer parents, namely one respondent (6%).

Parents are the family component consisting of the father and mother, resulting from a legal bond that can form a family. Parents have the task of educating, nurturing, and guiding their children to reach a particular stage that prepares them for social life (Soetjiningsih, 2014). Parents consist of fathers and mothers, each of whom has a role and function. Mother is a woman, and most of the family has a role as a health leader and caregiver (Friedman, 2010). According to Yusuf (2002) parents have a significant role in efforts to develop children's personalities. The care of parents full of love and the education of life values, both religious and socio-cultural, is a conducive factor in preparing children to become healthy individuals and members of society. The role of parents in fulfilling basic

physical needs (asih), for example, parents provide children's needs such as eating and drinking, giving children proper clothing the same as other family members, providing children with basic health care needs, such as routinely bringing children health checks, providing physical fitness children, bathing and brushing children's teeth (Amirudin.K.HI.Majid, 2020; Soetjningsih, 2014). While the role of parents in fulfilling physical and emotional (custodial) for example, parents introduce children as part of their family, provide a sense of security for children to carry out their activities, motivate children to get along with their friends, can accept disabilities, do not treat children differently. with other family members. While the role of parents in fulfilling physical stimulation (sharpening), for example, parents teach children to communicate verbally, teach children about academic knowledge, teach children how to dress, teach children to practice their own bowel movements and urination, teach children how to hold a pencil, persuade children when they behave different from other family members.

Down syndrome is retarded physical and mental growth caused by abnormal development of chromosome 21, which impacts physical and mental barriers so that intellectual development is hampered and difficulties in adapting to the environment in everyday life. Children with Down syndrome have distinctive acceptable motor characteristics and other characteristics based on the degree of inhibition, namely rough, stiff fingers, weak muscles, unpredictable emotional conditions, and lack of reasonable control, and dependence (Taiyeb, 2016).

At the time of the study, several factors were found that could influence them, namely age, gender, last education, occupation, number of children, and currently how many children. These factors

can influence the role of parents in fulfilling basic physical needs (love, care, and sharpening) in children with Down syndrome. From the study results, it was found that half of the respondents, namely eight (50%), had good parental roles. As indicated by the 15 questions, the average respondent could answer correctly. Several factors, including recent education, may influence this good role. Education can also influence the role of parents. From the study results, it was found that almost half of the respondents had a percentage of SMA 6 education (37%). Following the theory, the level of education is one of the essential factors that can describe social status and be the basis for making decisions and acting. The higher the education, the easier it is for someone to receive information and be more responsive to the problems they face to determine the best alternative to something (Sugiyono, 2015). Even though parents have a high school education, parents know how to care for their children with Down syndrome.

The study results found that half of the respondents, namely seven, responded. As indicated by the 15 questions, the average respondent could answer correctly. Several factors, including age, may influence this sufficient role. From the results of the study, it was found that almost half of the respondents were aged over 40 with a percentage (37%). Following the theory, the more mature the level of maturity and strength of a person will be more mature in thinking (Wawan & Dewi, 2011). Even though half of the respondents are over 40 years old, parents can care for their children sufficiently.

The study results found that half of the respondents, namely 1 respondent (6%), had a less parental role. As indicated by the 15 questions, the average respondent could answer incorrectly. Several factors, including work, may influence this role. In

addition, work can also affect the role of parents. From the study results, almost half of the respondents were self-employed 6 with a percentage (38%). Following the theory of work-family conflict as role conflict that occurs in employees, where on the one hand, he has to do work in the office and on the other hand, he has to pay attention to the family as a whole, making it difficult to distinguish between work waiting for family and family interfering with work (Frone et al., 1994). Work interferes with the family, meaning that most of the time and attention is devoted to doing work, so there is less time for the family.

Conclusion

Based on the results of research on the role of parents in fulfilling basic physical needs (love, care, sharpening) in children with Down syndrome in Tunge Village, it was found that half of the respondents had a good role. Respondents who have not been able to meet their basic physical needs are expected to improve their abilities by seeking complete information through books, the internet, health workers, and other sources of information. It is hoped that researchers can further deepen their knowledge of nursing by finding other newer references either from the internet or the latest books. It is expected that educational institutions in order to cooperate with community institutions in the health sector can be carried out through community service activities by providing counseling about meeting the basic physical needs of children with Down syndrome. It is hoped that future researchers can conduct more in-depth research on the role of parents in meeting the basic physical needs of children with Down syndrome.

Authors Contributions

The author carries out tasks from data collection, data analysis, making discussions to making manuscripts

Conflicts of Interest

All research teams agree with the final results of this study, and there is no conflict of interest in this study.

Acknowledgment

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