

Samin Foundation Therapeutic Communication Process to Children Victims of Violence to Return Children's Public Space in Sleman District DIY Year 2018-2019

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ABSTRACT

This study examines the therapeutic communication method carried out by the SAMIN Foundation in Sleman Regency, Yogyakarta Special Region (DIY). According to the head of the KPAI, cases of violence against children in Indonesia are caused by the weak knowledge of the community and parents about the meaning of child protection. DIY is a province that ranks 4th at the national level for cases of violence against children. DIY is a child-friendly area program that is a sustainability program and is related to other programs so that the programs initiated by the DIY Children's Forum are more numerous than Papua, DKI Jakarta, and Central Java. The Sleman Regency Government is aware of the importance of protection rights to be given to children. This is evidenced by the existence of a more systematic program to empower and protect children, and several awards that have been won. The purpose of this study is to describe the therapeutic communication process by the SAMIN Foundation to children who are victims of violence to restore children's public spaces in Sleman DIY. This research uses descriptive qualitative. The data collection process was carried out by interviewing and observing two therapist informants, two-child informants, and government agencies in collaboration with the SAMIN Foundation. The results showed that the stages in conducting therapeutic communication were the pre-interaction phase, the interaction phase, the work phase, and the termination phase. In the pre-interaction phase, the therapist also analyzes the problems experienced by the child. The method used is data mining by assessment or mapping, through direct question and answer, drawing method, Thematic Apperception Test (TAT), and Children Apperception Test (CAT). While the methods used are the drawing method, the writing method, the therapy with songs, the therapy with the film, and the playing method.

Keywords: children's public space, stages of therapeutic communication, analysis of children's problems, playing methods, termination phase.

INTRODUCTION

The world of children is essentially learning and playing. However, many of them are used for certain purposes, causing violence against children. According to the United Nations Children's Fund (UNICEF) on the Tirto.id page, the impact of violence on children is a physical health risk, mental health risk, the output of violence, impact on education & employment. According to the chairman of the Indonesian Child Protection Commission (KPAI), cases of violence against children in Indonesia are caused by the

weak knowledge of the community and parents about the meaning of child protection. Although many regulations talk about violence against children, they are not effective enough to solve the problem.

The SAMIN Foundation is one of the non-governmental organizations working on issues related to children's rights in Yogyakarta. The SAMIN Foundation, which was established on May 20, 1987, has developed various programs to overcome and prevent the problem of violence against children through empowerment and learning processes. One of the focuses of SAMIN's work is Sleman Regency. Sleman also has a program to empower and protect children which is more systematic than other districts in DIY. It can be said that Sleman is indeed more advanced because in other areas in DIY no one has implemented such an intensive program as in Sleman. One of the villages in Sleman Regency has been included in the 2018 national best village nomination for the category of village initiative and innovation through its smart school program. From 2018 until now, Sleman is developing 69 Child-Friendly Villages.

The SAMIN Foundation has several therapeutic methods that are used to restore public spaces for children who are victims of violence. There are two program divisions, namely advocacy and child protection programs. The advocacy program is carried out in several activities regularly and is a sustainability program carried out by cooperating with village cadres and other communities. The methods that have been carried out include the regeneration of village communities to understand the development of children from the age of 0-18 years. In addition, it also formed forums to tackle violence against children, made guide books on children, urged local regulations (Peraturan Daerah) for child protection in several regions, campaigns for Kespro (reproductive health), and collaborating with local entrepreneurs to participate in assisting. fund. The child protection program is carried out in several activities, namely through the Community-Based Integrated Child Protection (PATBM) movement in the village, the ECPAT movement to eliminate violence against children, invite children to speak as outlined in pictures, establish informal learning forums, form children's character schools, visit a special rehabilitation house for children so that they can still interact and respect others, practice making crafts, play, take advantage of the potential around them, take children on field trips. Some of the activities provided have an irregular schedule, depending on the child's wishes

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The purpose of this study was to describe the therapeutic communication process of the SAMIN Foundation to children victims of violence to restore children's public space in Sleman Regency, Yogyakarta Special Region in 2018-2019. This research is expected to be able to develop a study on therapeutic communication carried out on children who are victims of violence. In practical terms, this research is expected to be a guide in determining effective strategies and programs in increasing the attractiveness of children to victims of violence for the SAMIN Foundation. For the community, it can be a determination of community communication behavior for children who are victims of violence.

LITERATURE REVIEW

In a study, it is necessary to support the results of research that has been done related to research on therapeutic communication in children. According to research from Nelko Tewuh, Greta Wahongan, Frankly Onibala with the title *The Therapeutic Communication Relationship between Nurses and Hospitalization Stress in School-Age Children 6-12 Years At Irina E Blue RSUP Prof. Dr. R. D. Kandou Manado* that nurse therapeutic communication for school-age children 6-12 years at IRINA E BLU Prof. RSUP. DR. R.D. Kandou Manado is mostly good. The stress of hospitalization experienced by children aged 6-12 years mostly shows a sense of not being anxious and the child does not lose control. The results also show that there is a harmonious relationship with the use of nurse therapeutic communication with hospitalization stress in school-aged children 6-12 years at IRINA E BLU RSUP Prof. DR. R.D. Kandou Manado. The Effect of Therapeutic Communication on Compliance in Nursing Actions in Children aged 4-12 written by Iis Suwanti in 2017, stated that as many as 70% of children aged 4-12 years at Sidoarjo Hospital were not obedient during the therapeutic communication process because of understanding of instructions and age factors. Older children certainly have thoughts and understandings about communicating that are much easier to understand. Researchers noted that the quality of ineffective instruction can also determine non-compliance because the quality of instruction is a form of interpersonal skills possessed by nurses or other health workers in communicating. *Therapeutic Communication of Parents with Children with Specific Phobias*, written by Rachmaniar in 2015, states that the stages of the method used by parents to overcome children with specific phobias can be seen from verbal therapeutic communication techniques that are carried out non-routinely and directly. This will produce noticeable experience models (original or real media) and playing experience models (game media), while nonverbal therapeutic communication techniques produce vicarious experience models (representative media that includes video clips and storybooks), and parents' reasons regarding the technique. His therapeutic communication focuses on the child (prioritizing empathy, looking for something that the child likes, looking for something that can attract the child's attention) and focuses on the parents' personal experience (prioritizing interpersonal communication between parents and their

colleagues as well as the parents' own experiences regarding the object of the child's phobia).

Therapeutic communication is a form of communication that aims to heal (Rachmat, 1999 in Suciati, 2016: 213). Therapeutic communication is carried out in four stages according to Stuart G.W (in Damaiyanti, 2010), namely:

1. Pre-interaction phase

In this phase the counselor collects data, explores feelings, fantasies, and fears and makes plans for meetings with clients

2. Orientation or introduction phase

This phase begins at the first meeting between the counselor and the client. The main thing the counselor does is explore the reasons the client asks for help

3. Working phase

In this phase the counselor provides opportunities for clients to ask questions, ask complaints, arrange activity plans, and start activities well

4. Termination phase

This phase is divided into two, namely temporary termination and final termination. The termination phase is the termination of interaction activities carried out by the counselor.

Social learning theory according to Albert Bandura explains that children will exactly imitate the aggressive behavior of the adults around them (Salkind, 2004 in the Rifka Media Team, 2016). This theory explains human behavior in the context of continuous reciprocal interactions between cognitive, behavioral and environmental influences. Because the family is the closest person to the child, the child will first imitate what his family does.

According to the Rifka Media Team (2016), in the process of conducting therapeutic communication there is usually one session that focuses on exploring the experience of violence experienced. This session will usually cause emotional reactions, such as crying and screaming. Therapists are also not recommended to limit the time of counseling per session or the number of meetings. In addition, there are several ways that counselors can give to children in helping the healing process of child victims of violence:

1. When children become victims of violence, the attention, support, and affection of those around them are very important to help recover their psyche
2. Conducting discussions between counselors and victims
3. Doing meditation exercises to reduce anxiety
4. Watching films related to the topic of counseling discussion
5. Using the drawing method to invite children to express their feelings. Through pictures, children will tell the events they have experienced and their social conditions
6. Recovery therapy through a creative process together by forming new handicrafts that can be useful to support activities
7. Provide full support for children to carry out positive activities that they will do
8. Therapy using music
9. Implement play programs
10. Encourage children to keep interacting with others.

RESEARCH METHODOLOGY

This study uses a descriptive type of research. While the approach used is qualitative. So, this research is included in qualitative descriptive research. Qualitative descriptive research is a research method that interprets an event by describing or analyzing research results with conclusions that are not broad in natural objective conditions. Qualitative descriptive research seeks to describe all existing symptoms or conditions, namely the state of symptoms according to what they were at the time the research was conducted. In this study, the author intends to describe the strategies used in the therapeutic communication process by the SAMIN Foundation for children who are victims of violence in Sleman Regency. To obtain complete, accurate, and accountable data, the authors use interview and observation data collection techniques. This study uses an informant retrieval technique with snowball sampling. This technique is the taking of informants from what was initially a little bit later became big. The principle is to take several problems through the relationship of one person to another or one problem to another, then look for the next relationship through the same process. The researcher started by meeting one of the therapists of the SAMIN Foundation who was devoted to doing therapy in Sleman Regency who could then give researchers advice for other informants. The interview process with the informant is considered to have been completed if the data obtained has reached a saturation point or shows similarities with the others.

The measurement of the validity of the data is based on the triangulation technique. There are several types of triangulation, namely source triangulation, method triangulation, researcher triangulation, and theory triangulation. This study uses triangulation of data sources, which means that all data checking is carried out using more than one informant and triangulation of methods, namely using interviews and observations. In the next step, the data that has been generated is analyzed and will produce research conclusions.

DISCUSSION

Therapeutic communication is a form of communication that aims to heal. According to the purpose of therapeutic communication, namely the awareness, acceptance, and self-esteem of the client increases; increased understanding of self-identity and self-integration; the ability to build close relationships, personal interdependence, skills to receive, and to give affection increased; and the fulfillment of self-needs and realistic goals increases.

The informants of this study were therapists from the SAMIN Foundation, PUSPAGA KESENGSEM, and children who were victims of violence. There are four stages of the therapeutic communication phase and several methods used in therapeutic activities. The first is the pre-interaction phase. The therapeutic communication stage begins with the pre-interaction stage, which is when the therapist first comes to the child and conducts a process of analyzing the problem of violence against children. The first way is to give a smile as a form of non-verbal communication. At this stage, the therapist analyzes the

problem first for the child, through mapping, direct question and answer, drawing method, CAT (Chemical Apperception Test), and TAT (Thematic Apperception Test). They also observe the conditions around the home environment, where children play, the character of parents as well. In the pre-interaction stage, it is hoped that the therapist will be able to obtain data on the factors that cause violence committed by children and the forms of violence they experience for a problem analysis process to be carried out. Thus the therapist can adjust the behavior to the child's condition in the next stage to be carried out. At this stage, the child is still shy and tends to be afraid to meet the informant. They are accompanied by their closest people and therapists also get help with approaches through reporters such as local government. This pre-interaction time is also not fixed, depending on the condition of the child and the supportive environment.

The second is the interaction phase. This stage is carried out when the therapist first begins to get acquainted with the child. The conversations carried out were limited to small and casual chats. At this stage, the therapist has not discussed directly with the child the problems faced by the child. At this stage, the therapist introduces himself first, then asks the child to introduce himself. If the child does not want to, then the therapist will use light questions related to the child's biodata and daily activities. The therapist tries to build a trusting relationship with the child. After that, form an agreement for the next meeting. In the introductory stage, it is hoped that the therapist and the child will know each other by knowing the name, age, and background of the child's life. In addition, the purpose of the therapist also needs to be communicated so that the child does not wander and feel afraid. Thus the child will feel more secure and can communicate with the therapist even if not supervised by the person closest to him directly. The third is the working phase. In this phase, the therapist begins to carry out activities related to the strategies that have been designed. After the therapist conducts the introduction stage as well as an agreement with the child, the therapist begins to make a schedule with the child and the activities to be carried out. When it is formed, the activity is carried out together with the children. Activities will be carried out if it has been approved by the child and his/her closest people. If there is no agreement, the child will be lazy and seem forced. The therapist must also adhere to the norms that apply in the community where the child lives. More often they will start the activity by playing first. The goal is for children to have fun. After that, they can draw, sing, write, and do any activity that can make children learn with pleasure. On other occasions, the therapist also provides deeper learning. The therapist will also ask if your child is sick or how he or she felt that day. The therapist will invite the child to continue to socialize with the surrounding environment. If children cry or scream, they will let it be. Whatever it is, as long as it doesn't hurt himself or the people around him, allow the child to express his emotions because it will make the child calmer.

The last stage is the termination phase. In this phase, the therapist provides tests and special rewards for the child. The award is given as a form of encouragement so that children feel that they have succeeded in their efforts. Meanwhile, the test was conducted to determine the child's development. Children can be said to have completed therapy when compared to their initial condition, the child

is much better, such as being ready to socialize with anyone, able to introduce himself, and most importantly, child is willing to show himself, dares to talk to anyone, and has awareness that he's a great kid. In addition, the most common mark is how to speak. When you are no longer stammering, there are no bad effects with all the words of others, you are no longer screaming when you see violence, and you are willing to help your friends. The therapist always says "you are great! You are extraordinary! And you definitely can!" The importance of giving awards to children because it is a form of communication that they are great at completing their assignments, making works, and most importantly so that children feel they have been able to take responsibility for themselves. The awards given vary, such as raising two thumbs or giving small gifts such as books, snacks, and toys. The final step is to do a small test by asking questions, such as, "Who are you? are you feeling better than yesterday?"

The therapist also performs several methods of therapy. The drawing method is done because according to the SAMIN Foundation, drawing is an activity that is also a visual communication process. After all, pictures can unite spoken and written language in explaining the existence of an object. Drawing can be done in a relaxed and fun way for children to express their feelings, thoughts, creativity, and uniqueness. The pictures presented by the child are an integral part of the whole writing. Pictures are emotions that participants express non-verbally with their eyes closed. So, children can freely spill all their emotions and draw freely. Therapists use this method for the healing process because it can invite children to socialize, tell stories or learn public speaking. In the process, it will also motivate children. The therapist also observes the child's behavior and how it responds. Then through the picture, the child can pour out all his annoyance, all his hatred, and all his emotions. When the child finishes drawing, he will be calmer. Children will find it easier to talk, and not shut down anymore. In this method, children will draw related to their ideals, daily life, daily activities. When you have finished drawing, the therapist will also ask the child to tell the results of the drawing with the aim that the child will practice speaking in public. The implementation of this method is that the therapist gives one sheet of HVS paper, drawing tools, and colored pencils. Then the therapist instructs the child to draw whatever they want or instructs them to doodle on the given paper. When the child is ready, the therapist will keep the child's eyes open and over time will make the child's eyes close. So, they do not know how the drawings or scribbles are made. After doodling, the therapist gave another blank HVS paper to describe the goals or daily activities of the child at school or home. Finally, the therapist will stop the drawing process and slowly ask how he feels. The therapist will also slowly ask about the problem he is experiencing. For example, for a child who experiences violence in the family realm, the question asked is "when was the last time you met your mother/father?"

The method of writing is done because according to the SAMIN Foundation, writing is one of the activities that children like to sharpen their brains. Through his writings, children can express their feelings and emotions. Written work is a form of verbal communication that is not spoken. Not much different from the drawing method, only the results of creativity are different. However, the goal remains the same, namely as a form of verbal communication as

outlined on a piece of paper without the child having to speak. This method is only an alternative method because if there are children who do not like to draw, they will be treated by writing. The time given for children is about 10 to a maximum of 15 minutes. The therapist will be free in the use of language so that they can use spoken language so that it is easy to understand. Therapy with songs is done because according to the SAMIN Foundation, singing can describe a person's situation whether he is sad or happy. Since a person is born, must have been given a song by his parents, especially when going to sleep. When the child has started talking, parents will teach them to sing to generate a sense of pleasure. In every activity, singing is always inserted because so that children are not bored, sleepy, and make them happier. The therapist does not only invite children to sing songs that already exist. However, they also teach them how to compose songs to be sung together. The purpose of this method is to make the child's mind happy, fresh, and can make the child more enthusiastic. The lyrics of the songs sung contain stories from experiences. This means that the therapist wants the child to remember, tell what events have happened so that the incident continues to ring in his head. The song is directly or indirectly absorbed by the mind which means it enters the brain. The brain will transform positive things into the body if the songs presented are positive.

The film screening method is used by the therapist to showcase studies through fact stories that are not portrayed by the original characters and have gone through a censorship screening process based on film ethics. Through this case study, it is hoped that the audience will be able to know what actions should not be taken and what should be done in dealing with children so that they avoid violence. In addition, to find out what factors are the causes of acts of violence against children and what to do when experiencing violence and see violence in the surrounding environment. The purpose of showing a case study is so that someone can be more touched by his feelings because if someone has experienced or is experiencing, seeing, or getting a story and knowing the impact, he will usually cry. Through films, the therapist will also indirectly awaken the audience who may not be aware that they are experiencing violence. The films presented are short because if the films are long, they tend to be boring if the time is not devoted to watching films. After watching the therapist will explain how the story in the film is related to the real story. Then the data related to the cases in the film will be presented. The goal is for children to know that many of their friends are also experiencing the same thing, but they can also be released from the problems they are experiencing. The play method is done because traumatic experiences often result in children not having confidence in themselves and being afraid. This makes it difficult for children to socialize and feel inferior to their friends. This method of playing is very popular with children. The use of this method teaches them to socialize and increases self-confidence. Thus, this method is carried out by the SAMIN Foundation as one of the therapies. Play is one of the methods that must and must be done in the healing process because children love to play. They are tired of activities at school and home. However, apart from just having fun, it is also used to train children's abilities. Especially the ability to socialize, solve problems, train leadership skills because they play in groups. The games can vary, such as traditional outbound games such as jumping rope, snakes and ladders, and the like.

CLOSING

The relationship between the therapist and client is an interpersonal relationship that is intentionally made like a friendly relationship to establish trust between the two. In carrying out activities, the SAMIN Foundation collaborates with PUSPAGA KESENGSEM and the P3AP2KB Office of Sleman Regency. There are four phases, namely the pre-interaction phase, the interaction phase, the working phase, and the termination phase. The methods used by the SAMIN Foundation are drawing methods, writing methods, song therapy, film therapy, and playing methods.

The pre-interaction phase is where the therapist analyzes the child's problems and observes the child. In analyzing children's problems, the therapist uses several strategies, namely mapping, direct questioning, drawing methods, TAT, and CAT. The interaction phase is the stage where the therapist introduces the child to explore personal data, further daily life, build a trusting relationship, and make a schedule to meet with the child. The working phase is the stage where the therapist begins to carry out the strategies that have been designed from the results of the analysis in the pre-interaction phase and also the interaction phase. The termination phase is the final stage where the therapist ends the activity if the terminology of the child's public space has been fulfilled, namely when the child can introduce himself, wants to show himself, dares to talk to anyone, and has the awareness that he is a great child. However, according to the therapist, it depends on the child's initial condition at the time of therapy. Standards are generally marked by how the child speaks. Like not stammering, there is no bad effect with all the words of others, does not scream when he sees the violence he has experienced and has the awareness to help his friend.

Therapeutic activities with drawing and writing methods are continuous activities. Both can be alternative methods if the child does not like one of them. Therapy with songs is carried out at each therapy activity, it can be done in conjunction with other activities or as a scheduled activity. The activity of watching films is carried out to showcase studies/analytical data on the mapping of the problem analysis process. While the playing method is done so that children are not easily bored, can socialize, and are always carried out in every therapeutic activity.

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