THE OPTIMIZATION OF CHILDREN’S AUTISM PSYCHOSOCIAL SERVICE ON ONLINE SCHOOL LEARNING

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Abstract
The study aimed to describe and analyze APA psychosocial conditions during online schooling and learning strategies at SLBB. This research was conducted at SLBB & Autis TPA Jember by monitoring the psychosocial situation of autistic children while studying at home to find out what programs or services can support children’s psychosocial support even though it is implemented online. This type of research uses descriptive with a qualitative approach—determination of location using the purposive area. The informant determination technique uses purposive sampling. The data collection techniques were applied with observations, interviews, and documentation. Data analysis techniques include data collection, reduction, presentation, conclusion, and verification. Data validity techniques use source triangulation and methods. The study results show a tendency for psychosocial disorders to occur in children while studying online, but it can be overcome with psychosocial services. This disorder affects the behavioral and emotional conditions of children who are increasingly out of control at home. Therefore, to overcome this difficulty, the teacher provides services that can improve psychosocial disorders in autistic students. The services provided include educational suggestions not to consume foods that cause excessive activity, education for independent living so that students can be trusted not to violate rules, and wearing soft clothes. The function of these services is to control emotions by selecting the right teacher so that students want to obey positive commands that are good for them, and students also consume herbal drinks so that emotions can be controlled more. Then the psychosocial services strategies that are used online is to overcome difficulties experienced by students while at home, including selecting or changing homework assignments that can develop students’ interest and talents, home visit, and valuable educational content on TV so that children’s development continues to run optimally and is ready to interact out on time.

Keywords
Autism, Psychosocial, Social Function

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INTRODUCTION

The COVID-19 pandemic, which began in 2020, is experienced worldwide, including in Indonesia, causing various problems. The Indonesian government’s policies that inhibit the spread of COVID-19 have impacted multiple sectors, including the economy, tourism, education, and others. The Ministry of Education and Culture implemented a policy for Learning From Home (BDR: Belajar Dari Rumah) through the Minister of Education and Culture Circular Letter 4/2020 (Kemendikbud, 2020). Teaching and learning activities are no longer carried out face-to-face. Still, they are carried out online and are attended by all students at various levels, both regular and students with special needs, including students with autism. Covid-19, or Coronavirus Disease 2019, is a new type of virus first discovered in Wuhan, China. The initial symptoms of this virus are similar to pneumonia, so it is not immediately detected as a dangerous type of virus. Along with the development of research conducted by experts, on January 8th 2020, the CDC (Chinese Disease Control) announced this virus as a new coronavirus that had never existed before (Yuzhen et al., 2020).

Online school for Autism students is not an easy thing to have due to the barriers that autistic kids possess (Kartini, 1989, p. 60). That autism is an abnormality that happens who does not have normal development, particularly in the socialization process. During the Covid-19 pandemic, everything was limited. This resulted in all children being affected; the most prominent thing from this restriction was socialization with the outside environment. This is not easy and disrupts the stability of the development of children without exception. Inclusive children who have difficulty socializing will be increasingly isolated. Therefore, even though it is online, the development of psychosocial services must be pursued by teachers at SLBB and carried out optimally so that the social development of autistic children is not disturbed. Efforts to develop services for SLBB can be guided by The Ministry of Education and Culture Regulations Number 70 of 2009, article 8 states that learning in Inclusive Education considers learning principles adapted to students’ learning characteristics (Permendikbud, 2009). This meant that inclusive children who were especially socially challenged, both before the pandemic and who were getting worse during the pandemic, could get services according to their characteristics, namely what these inclusive children needed. Seeing from Permendikbud No. 70 of 2009 article 8, it is only appropriate for the teacher to develop a treatment for inclusive children if, in a pandemic, the limitation is socialization with the outside environment, then teachers must provide services that follow these characteristics so that miss-psychosocial mishaps do not occur in children.
Students with autism are children in need of treatment, specifically from teachers and parents, to help overcome the symptoms of autism that arise due to the food consumed or from changes in schedules and habits carried out by the child because children with autism have spectrum disorders and have a tendency to follow specific patterns in carrying out activities. If the child has been doing this pattern that has been formed for a long time, it will be difficult to change it (Aguiire & Sastry, 2012, p. 69). The process of face-to-face schooling with teachers and also assistance from parents is something that children with autism need. However, the COVID-19 pandemic requires children with autism to attend online schools where the role of parents at home must replace the part of teachers at school by helping children with autism learn and helping control autistic symptoms that can appear by children with autism.

In online learning, limitations to communicating face-to-face directly between students and teachers are a problem experienced by most inclusive students at SLBB & Autis TPA Jember. Also, students who are used to studying with teachers at SLBB & Autis TPA Jember are suddenly required to study online, and they will experience difficulties in studying because they do not study as usual. Students tend to learn more quickly if they face or meet directly with the teacher. This happens because one of the teacher’s roles is the teacher as a source of learning. Students in learning will imitate what the teacher does; when experiencing difficulties, the teacher will quickly give an example, answer, and explain something in a way that is easier for students to understand (Yestiani & Zahwa, 2020). This is what is meant by the role of the teacher as a source of learning, namely being able to master all fields according to the characteristics of students.

The change in study schedule at SLBB & Autis TPA Jember from offline to entirely online was caused by the covid 19 pandemic. The coronavirus causes the covid 19 pandemic, this disease can be transmitted, and anyone infected will experience an infection in the respiratory tract (Manullang, 2022). Apart from that, because there were many things to consider, such as contracting a virus if you were outside for too long and socializing with many people, a decision was made to study online for inclusive children at SLBB & Autis TPA Jember.

Online learning for inclusive children does not necessarily ease the teacher’s teaching burden. Instead, teachers at SLBB & Autis TPA Jember have homework to provide services under the characteristics of students formed during the Covid-19 pandemic. The pandemic makes students rarely interact socially, making them prefer to be alone and stay at home because of limited interaction, and it is only done with those closest to them (Norkhalifah, 2020). The COVID-19
The pandemic has made it difficult for most students in regular and inclusive classes to socialize because not doing social activities outside has become a culture since the COVID-19 pandemic. Being able to carry out social interactions well is one way to achieve optimal development for children naturally. This is because, with social interaction, a person will be individually connected, eventually leading to a reciprocal relationship. (Walgito, 2003). Therefore, this research is interested in examining efforts to overcome students’ anti-social attitudes formed due to the pandemic because at SLBB & Autis TPA Jember service psychosocial for inclusive students. This psychosocial service is sought because what happens in the field is that children become anti-social. If this is not addressed immediately, there will be fears that optimal child development will be hampered due to the lack of children’s willingness to learn and get to know the outside world.

Changing schedules in learning models that students have never experienced before indirectly causes autism symptoms in children with autism to appear more often when done at home, so children need psychosocial treatment. When associated with psychosocial aspects, according to Turner (Roberts & Greene, 2002) which explains that psychosocial is a critical science related to the perspective of the person in a situation or the perspective of the person in an environment which will affect the condition and also a physical, psychological and social development of that person. Children with autism who attend online schools must adapt again to new situations and habits for children with autism, while the conditions for children with autism require face-to-face teachers because the school process in Inclusive Education for children with autism applies several patterns. Which makes children with autism disciplined. During online school, there are psychosocial changes for children with autism resulting from changes in online school practices.

Parents, as well as teachers who handle online schools, also make sure that autistic children can attend online schools and can also control themselves independently so that autistic children can position themselves socially (Suharto, 2006). Suharto explains that Social is the ability of people (individuals, families, groups, or communities) and social systems (institutions and social networks) to meet/respond to basic needs, carry out social roles, and deal with shocks and stresses. Everyone has their function and including children with autism, who have their duties and roles as individuals. Parents and teachers try to help children with autism to be independent so that the functioning of children with autism can function like other children at their age.
This article aims to discuss parental involvement in children’s learning during the COVID-19 pandemic. To gather information, the authors conducted a literature study by reviewing some of the literature discussing online education, the role of parents in parenting, and the role of teachers in the learning process at school. This article’s main result highlights the need to understand better how parents should be involved and work with teachers so that children continue to get optimal learning during a pandemic like this. Teachers and parents need commitment and clear communication with each other so that parents understand the achievements that need to be developed by children and school programs are well achieved (Luhung et al., 2021).

Autism is a developmental disorder resulting in socialization, communication, and behavior barriers. The condition ranges from mild to severe. Symptoms of autism generally appear before the child reaches the age of 3 years. In general, people with autism ignore sounds, sights, or events that involve them, and they avoid or do not respond to social contact, for example, eye contact, affectionate touch, and playing with other children. Disturbances experienced by children with autism are disturbances in the field of social interaction, disturbances in the field of communication (verbal-non-verbal), disturbances in the field of behavior, disturbances in a lot of feelings/emotions, and disturbances in the field of sensory perception. Handling autistic children aims to overcome developmental delays in themselves by their age development. The sooner you know a child has autism, the quicker the effort to control it will be. Early detection and intervention are essential for autistic children so that treatment can be done more quickly and does not require a relatively long time. Therapy for autistic children must start early and be directed at the obstacles and delays generally owned by every child (Rahayu, 2014).

Autism is a pervasive developmental disorder that causes thinking, feeling, hearing, speech, and social interaction disturbances. For this reason, autistic children need special training to improve their ability to learn new skills and knowledge. This study aims to propose an alternative learning model using augmented reality by applying training techniques Picture Exchange Communication System (PECS). This system helps teach children with the help of pictures or objects and appropriate related keywords or phrases with fast interaction. They are making this system using the system development method with Unified Modelling Language (UML) tools to design the system. Testing uses alpha and beta tests to see the system’s suitability for user needs. The alpha test results using the black-box method indicate that all functions in the system are running well, according to the application design. The results of beta testing can be summarized as follows: (1) the AR multimedia
development has a good appearance and is easy to use; (2) the user quickly follows the instructions provided; (3) the system can provide the information needed by the user. The results showed that the average ability level in communication at the beginning before treatment was 47%, while during the treatment, the intermediate class was 65%. In the phase after the intervention, there was an average increase of 70% (Taryadi, 2017, p. 29).

The purpose of this study is to describe and analyze the changes in the psychosocial condition of children with autism while attending online school and also before attending online school and to discuss service strategies used by parents and teachers. In contrast, children with autism attend online school at home when the COVID-19 pandemic is ongoing.

**METHOD**

This qualitative research approach uses a case study as a research model. The research location was at *SLBB & Autis TPA Jember*, with the determination of informants using the purposive technique. The informants in this study were divided into two types: the main and the additional. The primary informants are two teachers at *SLBB & Autis TPA Jember*, then two students’ guardians with autism. Different informants in this study were one autistic student in the 1st grade of junior high school and one autistic student in the 2nd grade of senior high school. The data collection techniques used non-participant, semi-structured interviews where the researcher was assisted by an interviewee guide when completing the interview process and supporting documentation from the internet, books, journals, and school archives. Data analysis uses the model stages proposed by Miles Huberman, described in (Sugiyono, 2018, pp. 163–172). The steps in this study included data collection, which was carried out by collecting data from interviews, observations, and documentation related to psychosocial services for inclusive children at *SLBB & Autis TPA Jember*. Then after the data was obtained, the reduction was carried out from the raw data obtained during the study. Raw data from research on psychosocial services at *SLBB & Autis TPA Jember*, which has been reduced, is then presented in written form, and graphs or tables, the data is presented descriptively, and the results show that psychosocial services at *SLBB & Autis TPA Jember* can overcome students’ anti-social attitudes during a pandemic through online learning. The final step was taken after finding a relationship between psychosocial services capable of dealing with anti-social behavior in children with autism, then drawing conclusions and verification of the findings found. The data validation technique in this study uses the Triangulation Method. The method in
The research at SLBB & Autis TPA Jember was carried out by comparing the results of interviews with observations, observations with related documents, and documentation with interviews.

FINDINGS AND DISCUSSION

Findings

This study discusses the optimization of services for the psychosocial condition of students with autism at SLBB & Autis TPA Jember with the type of autistic person with ADHD, as explained by McCandless (2003) describing the classification of children with Autistic Spectrum Disorder (ASD) is a group of child development disorders that range from classic autism such as Attention Deficit Disorder (ADD), Attention Deficit Hyperactivity Disorder (ADHD) A child who is diagnosed with ADD has difficulties when maintaining the ability to focus his attention, a hyperactive child with ADD is usually labeled as having ADHD too. The focus of this research is on changes in the psychosocial condition of children with autism during online schooling which examines the behavioral, emotional, communication, and motivational aspects of children with autism.

Informant Characteristics

<table>
<thead>
<tr>
<th>No.</th>
<th>Name</th>
<th>Age</th>
<th>Level</th>
<th>Talent-Passion</th>
<th>Autism Variety</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>AW</td>
<td>13</td>
<td>Junior High School</td>
<td>Painting and counting</td>
<td>Having Autism with ADHD that tends to be active and expressive</td>
</tr>
<tr>
<td>2.</td>
<td>FD</td>
<td>20</td>
<td>Senior High School</td>
<td>Cooking and drawing</td>
<td>Having Autism with ADHD, he/she tends to be active and harm himself</td>
</tr>
</tbody>
</table>

The table above explains that the AW and FD informants are autistic with the same type, namely ADHD, and attend different schools. However, AW and FD both have active and expressive behavior, but FD is emotionally prone to hurting himself/herself.

The AW informant went to school for the first time at the age of 3.5 by joining a playgroup. AW began to show unusual behavioral habits at that age, such as playing with the water faucet, being alone, arranging things in neat rows, etc. AW’s parents were taken to a public clinic, and AW was sentenced to experience Attention Deficit Hyperactivity Disorder, also known as ADHD. The condition of children with ADHD is a condition where children experience developmental disorders in increasing children’s motor activity, causing children’s activities to tend to be excessive (Baihaqi & Sugiarmin, 2006). People with ADHD are characterized by excessive motor activity, and people
with disabilities cannot focus on attention (Naevi, 2005).

The FD informant is also a child with autism with ADHD who tends to be active, and his FD emotions cannot be controlled. The parents knew that FD had autism when he/she was two. Sleep time was only two hours a day. Apart from that, he/she continues to work. FD will sleep anywhere when his/her body feels tired, either under the table or on the floor at home. FD was taken to a pediatrician and then given a referral to Surabaya Hospital, and then FD declared a child with autism who had an active tendency and could not be quiet. FD became a child with autism when he/she was in his mother’s womb. FD follows intensive care from the hospital to catch up on delays in care for children with autism. In terms of several steps to optimize services for children’s psychosocial conditions, they include:

**The Service Optimization on Psychosocial Condition for Autistic Children**

Referring to the psychosocial described by Turner (Roberts & Greene, 2002) explains the perspective of the person in the situation or the perspective of the person in an environment which will affect the condition and also the physical, psychological, and social development of that person. This research focuses on looking at the behavior, emotions, communication, and motivation of students with autism at SLBB & Autis TPA Jember, including:

**Table 2. Service Optimization Based on Psychosocial Condition for Autistic Children**

<table>
<thead>
<tr>
<th>No.</th>
<th>Name</th>
<th>Actions</th>
<th>Service</th>
<th>Emotions</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>AW</td>
<td>Offline: The child tends to be active, so the service provides a glutamate diet and minimizes food consumption.</td>
<td>Offline: Having mood swings, the service provides counseling to minimize the food that affects emotions and is received by AW from his/her favorite and understanding teacher.</td>
<td>Online: Due to the learning condition that changed, this kid was not accompanied by the teacher, and he/she was required to be independent through the online learning platform called “Toilet Training.”</td>
</tr>
<tr>
<td>2.</td>
<td>FD</td>
<td>Offline: Because he likes to behave actively and uncontrollably, even one particular day when he feels annoyed, he/she does not hesitate to bang himself/herself against the wall so he/she harms himself/herself. The services provided are the provision of cloth or clothes</td>
<td>Offline: Because he/she likes to behave expressively and uncontrollably, his/her happiness or sadness emotions influence him to act uncontrollably, which can endanger himself/herself, so the teacher should take a blanket and hug FD to comfort him/her and any time if FD hits</td>
<td></td>
</tr>
</tbody>
</table>
made of soft material so that he/she is not easily injured if something similar happens and consuming foods that are sedatives. Something, the blanket can reduce the risk of his/her injuries.

Online: Because they often break parental rules to stop eating anything that can influence his/her actions, FD still make rebels. So, the services provided are online counseling to make him/her independent and encourage him/her to obey the rules and select learning devices that can distract him/her from food and let FD in check by wearing soft clothing so he/she does not get hurt easily.

Online: Still unable to control his/her emotions, the service provided is counseling to parents by the teacher so they can mix aromatic drinks to make FD feel comfortable and manage his/her feelings.

1. Autistic Children’s Behavior Condition During Offline Learning

AW is a child who tends to be active, so the doctor who diagnosed AW as autistic with ADHD advised AW to go on a gluten diet by reducing sugar, flour, and so on. AW will walk back and forth and cannot sleep when AW eats foods forbidden to him/her. Being parents with children with special needs, AW parents have a lot of homework to educate children so that children know their conditions and also make children understand what children need and what is not suitable for children. One of the efforts made is by educating. Education from AW’s parents is to limit AW’s food so that AW knows that he/she eats foods that contain flour and chocolate in a limited manner. For example, their parents' education is to give them only three pieces of wafers or only one piece of chocolate. In addition, AW is prohibited from eating noodles because noodles contain MSG and flour, which will hold back emotions and make you unable to sleep. As a substitute for noodles, AW is allowed to eat vermicelli.

Similarly, FD has an active tendency, but FD’s sense of taste will not function when he/she eats foods prohibited for children with autism, such as sugar, flour, chocolate, and so on. So, FD should go on a gluten diet to control his/her behavior, emotions, and senses of feeling to function normally. The consequence when FD violated the prohibited food was that FD could laugh uproariously for an entire week. Besides that, FD could also get angry without any particular reason. When FD got angry, he would punch himself against a wall or injure himself. This is one of the behavioral characteristics of autistic children, including hyperactivity, obsession, and self-harm (Sitimin et al., 2017). The FD class teacher, who
knows about these conditions, advises FD’s parents to provide soft clothes or cloth so that FD does not injure himself. Apart from preparing soft clothes, the MD as a parent also prepared herbal medicines that were sedatives for FD, such as pandan and spices.

Children with autism must also be educated about what they need, such as foods to avoid and independence, one of which is self-care and “Toilet Training.” “Toilet Training” will be able to have a positive impact on children’s development in the social, motor, and independent aspects of their own needs (Francis et al., 2017). So, to perform psychosocial services can be done with “Toilet Training” because this is related to social interaction, making children more independent and ready when in the outside environment. Parents of students with autism teach “Toilet Training” to their children, as does AW, who does “Toilet Training.” He/she was assisted by his/her father, mother, and grandmother. AW cannot yet be independent to take care of himself, so the parents and grandmothers are ready to help AW. So, FD was trained in “Toilet Training” by their parents. MD will help him/her with defecating in the toilet. In the beginning, MD would only take FD to the bathroom when he/she was going to defecate, and he/she would be left alone. However, FD still could not be independent, so MD trained FD so that he/she could squat in the toilet by inviting him/her to squat and holding his/her shoulders. Squatting made FD spend more and more time defecating. It takes about one hour to 2 hours for an FD session.

2. Autistic Children’s Behavior During Online Learning

The implementation of online schools has changed the schedule of students with autism. Previously, schools were held at school premises, but during the COVID-19 pandemic, students had to study at home with the assistance of their respective parents. Besides that, inevitably, new habits must be followed by students with autism and also parents, such as not leaving the house unless it is urgent, wearing a mask, staying away from crowds, and so on.

The long-lasting COVID-19 pandemic caused AW to feel bored at home. Besides that, AW was used to going home during Eid. As long as the online school AW’s family did not go home to his/her hometown, AW became sulky and just cried all day long and hit things around him/her and would scream a little that he/she was already feeling uncomfortable. Likewise, FD often steals opportunities to violate food which is forbidden for FD. His/her autism symptoms will reappear due to the offense he committed. His/her parents always provide foods that are soothing for FD so that when FD symptoms appear, FD symptoms are not too excessive.
Apart from having a destructive impact, online schooling also has a good effect, namely when AW becomes independent in caring for himself/herself. AW has been taught since the age of three years not to use diapers as a first step in “Toilet Training” and instructed to urinate in the bathroom or can be said as “Toilet Training,” but AW is still unable to be independent, so since AW has attended online school in the 1st grade of this junior high school, AW has been able to urinate and take care of himself/herself independently. Likewise, with FD, during online school, FD has been able to take care of himself/herself alone, wearing clothes independently without parents' help, and also by taking care of MD, namely parents, when sick by preparing food that parents want. In its development, the optimization of services carried out in online learning so that AW takes part in the service lessons provided by teachers during online education is very optimal, such as services on devices used in learning at home.

3. Autistic Children’s Emotional Condition During Offline School

AW is a child whose mood changes very quickly, so he is advised to diet and choose food so that it does not affect his behavior and emotions. AW will learn to regulate and control his/her feelings at home with his/her mother, while at school, he/she will study with his/her teacher. However, AW is a picky child, he/she can socialize with other people, but when he/she is taught something, he/she chooses to learn with a teacher who can understand him/her so that AW becomes comfortable with the teacher because they already understand AW and how to deal with him/her. AW's compatibility with the teacher makes him/her enjoy going to school. If AW is handled by someone else, clearly, AW does not want to. If AW is fuss, AW’s habit is to scream and get angry when he/she feels uncomfortable. Whether it is because of a changing schedule or because he feels uncomfortable with other people, either because AW is not comfortable with new people or that person also experiences tantrums.

Whereas FD, FD is an expressive child. When FD feels happy about something, FD will jump up and down with joy. This is an expression of the feelings felt by him/her. FD tends to self-harm when he/she feels angry. FD will hit the back of the head until the head is bruised. For this reason, BN, as a teacher, provided a method to save him/her from the desire to hurt himself/herself. MD must prepare a blanket and cover FD with a blanket so that FD does not injure himself/herself. When FD hits his head on the wall, the blanket will make it soft, and FD’s body will not hurt or bruise. Apart from injuring himself/herself, FD will damage things...
around him/her when angry.

4. Autistic Children’s Emotional Condition During Online School

AW has a habit when on Eid, he has to go home to grandma’s house in Madura. However, it was hampered due to the current pandemic that is currently happening in Indonesia. So, AW became cranky and cried all day because he/she was used to going home during the holidays. BY has a vital role in AW. BY already understands AW, and he/she is also comfortable with BY, so the one who can provide understanding to AW besides his/her mother is the teacher, namely BY. AW’s parents and AW teachers have more duties to explain to AW that during the COVID-19 pandemic, going home is not allowed anywhere. This made AW confused because he/she changed AW’s habits, which on Eid al-Fitr, his/her habit was going home. But then, they did not go home to their grandmother’s house in Madura. Negotiation and communication with children become essential when there is a change in habits in children.

Likewise, with FD, while implementing online schools, FD’s autism symptoms often appear because FD deliberately eats foods that are prohibited for FD, and FD violates his forbidden food. MD has one way to prevent FD from becoming aggressive: giving food containing nutmeg or aromatic pandan to drink as wedang. The way to make it is to cut the saw into small pieces, add warm water, and put it in a glass. Then the aromatic pandan water is drunk and will give peace to FD.

Table 3. Service Optimization through Online Learning Strategy

<table>
<thead>
<tr>
<th>No.</th>
<th>Difficulties</th>
<th>Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Task Deadline</td>
<td>The task replacements are based on students’ likable characteristics and can develop students’ talents.</td>
</tr>
<tr>
<td>2</td>
<td>Face-to-face with teachers</td>
<td>Home visit&lt;br&gt;Private Class&lt;br&gt;Watching TVRI Channel has educative content&lt;br&gt;APE giveaways that they like and can increase their talents and passions, such as in school.</td>
</tr>
</tbody>
</table>

During online school, the tasks the teacher gives are video assignments of daily activities, such as religious activities as well as prayer, taking wudhu, and reciting short surah in the Qur’an. When teachers provide deadlines for parents and students when school is online, however, AW cannot always do and collect assignments on time. The school is conditional with the condition of
children implementing online school. AW does not like the works of video forms, which contain model problem assignments in the textbook the school has provided for students at SLBB & Autis TPA Jember. In addition, the teacher also does home visits to students. In addition, FD, who is a child who has difficulty studying at BN’s home as FD’s teacher, offers MD several options for implementing online schools, namely being given a substitute assignment where FD develops his/her interests and also FD is given a private class together with BN as the class teacher.

The learning method used by AW’s parents is by being introduced through watching videos with CDs. Apart from that, parents also take advantage of the learning videos that are being aired on TVRI about learning school materials. AW’s parents use various methods to understand together with AW. In addition to these learning methods, AW also uses a voice recorder as a learning tool. MD also provides learning methods by exemplifying or telling the object being studied, for example, by introducing objects. MD will show objects, both inanimate objects and living things, as knowledge for FD. Apples, toy figures, frogs, plates, and rice are examples of items introduced by MD to FD. FD’s parents provide facilities to FD so that he/she can develop his talents and interests at home. Facilities include cooking tools and finding a container for FD to get food orders from neighbors so that FD can keep his/her skills.

Discussion

Autistic Children’s Behavior on Online Learning

Autistic students at SLBB & Autis TPA Jember with congenital ADHD have active behavioral symptoms. Tend to be less able to be quiet, and do things that make the child comfortable, take walks or asking other people. Even when angry, autistic students with this symptom tend to hit things around them. It is common to beat his/her own body because the child is annoyed with other people. It can be done with a diet and choosing food. The foods prohibited for children with autism contain chocolate, flour, MSG, sugar, and so on. This is in line with the explanation (Nugraheni, 2008) explaining that giving and choosing food is the key to alleviating the symptoms of autism. One recommended diet therapy is a gluten-free and casein-free diet. The diet has been used since students were at an early age. As long as an online school has a good impact, the first is when a child’s symptoms of autism appear, namely when their emotions are high. Children with autism can reduce behavior that is harmful to themselves or destructive.

Second, students with autism become more aware of shame and independence. Students will wear their clothes in their room without the need for the help of their parents, who help them put
on clothes every day. Sometimes they also help their parents to take out the trash, cook, clean dishes, and are independent in caring for their parents when they are sick. This child’s independence is obtained from imitating the behavior of parents and siblings as the closest people to children with autism, in line with the explanation from Gabriel Tarde (Ahmadi, 2007), which explains that “Everyone has a strong tendency to match (equal or even exceed) the actions of those around them. He argues that it is impossible for two individuals who interact long enough not to show increased reciprocal imitation of behavior. This imitation behavior occurs because idol figures are used as models to be imitated”. Children with autism become independent when their parents and siblings set good examples of behavior at home.

**Autistic Children’s Emotions**

Habitual changes happen during online school, which is carried out at home. Learning is no longer carried out in schools but in their homes. In the early weeks of implementing online schools, it was not a problem for some students with autism because they considered that online schools were school holidays, where children would be free to play and have vacations with their families. The COVID-19 pandemic has limited everyone’s outward movement with a travel ban as long as it is unnecessary. Some students with autism who mistakenly interpret online school as a holiday make children cranky and angry—explained that children with autism with spectrum disorders tend to follow specific patterns in carrying out activities (Aguire & Sastry, 2012, p. 69). If the child has been doing this pattern that has been formed for a long time, it will be difficult to change it.

Children with autism can express boredom due to online schooling and new habits with restrictions on leaving the house. The feeling of boredom expressed by children with autism is a form of reaction to a condition. William James and Carl Lange explained this in (I. R. Adi, 1994), which demonstrates that emotions will grow. When a person is in a particular situation, a person will have a perception of the surrounding environment. The reaction from this situation causes a change in the body or body activity with unique characteristics. The perception of these body changes can be felt by the emotions in a person, which varies according to action or the body’s reaction resulting from a situation. When children with autism are fussy and angry during online school, there is a change for the better. Namely, children with autism understand that hurting themselves and damaging things around them is not a good thing. So that when children have tantrums, they no longer hurt themselves and damage something. This is caused by parents who are prepared to prepare herbal medicines for children with autism.
The Optimization Procedures to Provide Online Learning Strategy for Teachers and Parents

The school is a flexible and conditional party to the situation and students' situation at home. The teacher has the task of controlling the child’s condition during online school. When states at home do not allow it, the school must adjust it. The existence of communication, coordination, and commitment between teachers and parents, and students can help implement online schools carried out during a pandemic. Education is complicated during a pandemic, but maintaining health is essential. Family conditions must maintain health, so they can carry out activities as usual even though they are in a pandemic.

The presentation explained online learning strategies for teachers. Namely, teachers can use facilities such as video conferencing to conduct learning for autistic children with moderate and high functioning, which will help. These facilities can give assignments, direct learning, see children’s development, control children’s social-emotional relationships during learning situations, and make contact with parents. While carrying out online schools, the teachers at SLBB & Autis TPA Jember try to always communicate with parents by using the WhatsApp Group and also via private messages.

Not all students can do online schooling at home because they are not used to learning academic lessons. Several teachers visited students' homes, but students with autism immediately refused to study at home. For this reason, students have problems not wanting to learn academic subjects at home with their teachers or parents. The teacher provides various options for parents of students so that learning and school final exams at that time run smoothly. The possibilities are that the assignments collected by parents to teachers are in the form of videos of the daily activities of children with autism while at home. The next option is for children with autism to study through home visits. If they do not want to, it will be carried out privately at school. The home visit was carried out because during the pandemic, even though studying at home, a student still had to receive study assistance from a teacher. Assistance here is not just accompanying but more than parenting, which means fostering, teaching, directing, or controlling (Muzaqi, 2005). Assistance is a parenting style that is in line with the individual intervention stages described by Zastrow (Isbandi Rukminto Adi, 2013), namely the exploratory stages of problem-solving strategies, namely exploring ways that can be used as ways to overcome the problems being faced, and also the stages selection of problem-solving strategies, namely discussing various methods that have been found to overcome the issues being faced by clients. This option is given because students need additional tutors besides their parents when studying online. This is due to the position of parents where they
have to do all the daily household chores but also have to be educators and even therapists for their children. Therefore, the role of the teacher as an additional tutor is crucial (Parenteau & Stephen, 2020). The parents then approve the options proposed by the teacher to the student’s guardians.

**CONCLUSION**

Based on the results of the research description described in the previous chapter, it can be concluded that during the implementation of online schools during the COVID-19 pandemic, three important things have happened for students with autism at *SLBB & Autis TPA Jember* as well as families and teachers, namely: behavioral conditions for children with autism are progressing. Children with autism are independent and able to care for themselves. There is a change in habits when autistic symptoms appear, namely being able to behave safely and not hurt yourself. The emotional conditions for children with autism while attending online school have been influenced by three things: there are changes in habitual patterns and schedules for children with autism; these changes cause autistic symptoms in children to appear due to changing conditions; and lastly is the herbal medicine provided by the parents of children with autism. Learning strategies by teachers at *SLBB & Autis TPA Jember* during online schooling for students with autism that are effective during online learning are to control remotely through messages with student guardians on social media, optimize home visits to students with autism, and carry out the preparation of learning strategies for students together with student guardians. The teacher’s method will not work effectively if these stages are not carried out in stages. The guardians implement learning strategies for autism students at *SLBB & Autis TPA Jember* during online schools. The technique parents use tend to be effective because parents understand the habits and preferences of children with autism, for example, by providing herbal medicines so that the symptoms of autism do not reappear. In addition, they provide facilities for children to study academically and hone skills and provide examples for children with autism so that children can imitate good habits practiced by parents and families.
REFERENCES


