

## **The Relationship between the Level of Knowledge and Readiness of Parents of Students with Special Education Needs with Visual Impairment Related To Sexual Education**

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### **KEYWORDS**

Special Education,  
Visual Impairment,  
Sexual Education,  
Readiness of  
Parents Parents  
Knowledge,  
Education.

### **ABSTRACT:**

In this study, there are several models that have been identified and adapted as the basis of this study. The main model studied is Epstein's Parental Involvement Model (1995, 2001). According to studies, activities at home can also use this technique introduced by Epstein because it is very effective for all parties including parents. Epstein's model also shows that educating MBPK is a shared responsibility between parents, the school and the local community. Parents can contribute their involvement in any way at any time. There are six types of parental involvement constructs in this model, namely Parenting, Communication, Volunteering, Home Learning, Decision Making and Community Involvement.

### **1. Introduction**

Amylee et al's (2021) study in the United States found that disabled men and women aged 12 to 65 were targeted as victims of more serious sexual violence compared to ordinary people. Lakshmi and Arul (2021) found that parents and guardians are the first teachers who teach sexual education for their children. They serve as a primary resource for imparting values and educating youth about sexuality. But parents and guardians often feel inadequately prepared to educate their children on the subject of sexuality. In general, they tend to have an approach that focuses on negative aspects rather than positive aspects such as fun, love, and healthy relationships. The results of the study by Rani et al. (2023) found that 18,000 children aged 11-16 years believed that their parents and guardians should be their main source of reference to learn about sexual education followed by teachers and lastly through healthcare professionals. Based on this study, the researcher has targeted the group of parents and guardians of MBPK as the target group of this study. A study by Lakshmi and Arul (2021) also suggests that some techniques are applied depending on the nature and needs of a MBPK person and the tasks being taught. Visual media can be used in evidence-based practice where parents can use a pictorial communication system (PECS) based on behavioral principles. PECS can help improve communication especially in MBPK with speech development disorder as a visual medium to educate them about sexuality education. The researcher has also adapted Al-Ghazali's Philosophy of Education model as a reference in terms of parenting according to the Islamic religious views of Imam Al-Ghazali. Imam Al-Ghazali or Abu Hamid Muhammad ibn Mohammad al Ghazali was one of the famous Islamic scholars of the 11th century (1058-1111 C.E.). According to Jamiah and Sidek (2016), this philosophy contains four main constructs, namely knowledge, relationship with God, relationship with children and relationship with society. Each of these constructs is related to each other in completing the parenting task in educating their children about sexual education from an Islamic perspective.

## 2. Literature Review

At the age of 6-12 years, children's development including MBPK, develops consistently including physical-biological, cognitive and socio-emotional aspects. It covers the health of sexual development of gender identity, interpersonal relationships, love, intimacy and adolescent body shape (Rejab et al., 2022). A study by Piaget and Inhelder (1969) found that children at this age are very active and have a high sense of curiosity, especially about hidden and forbidden things such as body parts. During this concrete period, children learn by seeing and touching and this cognitive, affective and social development cannot be separated. The World Health Organization (WHO) defines adolescents as individuals in the age group of 10–19 years. Adolescence is a stage of transition from childhood to adulthood, characterized by physiological, psychological and social changes. In addition, adolescence is the time to consider health efforts to reduce negative sexual risks, teenage pregnancy and sexually transmitted infections.

With the development of today's technology where all information can be found at the fingertips, children including MBPK have become victims of cybercrime through the development of social media and pornographic web pages that freely show these uncensored videos. Furthermore, it is easily navigated by anyone without restrictions of age, religion and race (Nur Qamarina & Hilwa, 2021). Breuner and Mattson (2016) found that all children and adolescents need to receive accurate education about sexuality to be understood so that they can practice healthy sexual behavior. This unhealthy and high-risk sexual activity can cause health and social problems such as unwanted pregnancy, infectious infections (STIs), including gonorrhea, Chlamydia, syphilis, hepatitis, herpes, human papilloma virus (HPV), HIV infection and AIDS. In Malaysia, data released by the Malaysian Ministry of Education (KPM) in 2021 recorded a total of 97,220 MBPK people compared to 93,951 people in 2020. Based on these statistics, it can be expected that the number of MBPK is increasing and it is expected that this number will continue to double in the future.

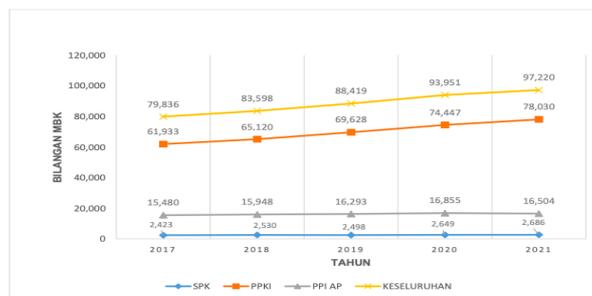


Figure 1: Number of Pupils with Special Educational Needs (MBPK) by Program

Table 1: Number of Pupils with Special Educational Needs (MBPK) by Program From 2017 to 2021

	2017	2018	2019	2020	2021
SPK	2,423	2,530	2,498	2,649	2,686
PPKI	61,933	65,120	69,628	74,447	78,030
PPI AP	15,480	15,948	16,293	16,855	16,504
<b>KESELURUHAN</b>	<b>79,836</b>	<b>83,598</b>	<b>88,419</b>	<b>93,951</b>	<b>97,220</b>

Table 2: Number of Students with Special Education Needs (MBPK) According to Schools and Special Education Programs in 2021.

PROGRAM	MBK			JUMLAH
	PRA	REN	MEN	
Sekolah Pendidikan Khas	151	1,476	1,059	2,686
Program Pendidikan Khas Integrasi	1,100	43,029	33,901	78,030
Program Pendidikan Inklusif (PPI Penuh di Arus Perdana sahaja)	170	7,762	8,572	16,504
<b>JUMLAH</b>	<b>1,421</b>	<b>52,267</b>	<b>43,532</b>	<b>97,220</b>

Table 3: Number of Schools, Teachers and Pupil Management Assistants (PPM)

PROGRAM	PERINGKAT PERSEKOLAHAN	SEKOLAH	GURU	PPM
SPK	PRA	28	38	31
	REN		796	225
	MEN	6	479	100
	<b>JUMLAH (a)</b>	<b>34</b>	<b>1,313</b>	<b>356</b>
PPKI	PRA	1,671	198	199
	REN		8,656	4,338
	MEN	915	6,225	2,499
	<b>JUMLAH (b)</b>	<b>2,586</b>	<b>15,079</b>	<b>7,036</b>
PPI TANPA PPKI	PRA	2,611		
	REN			
	MEN	1,163		
	<b>JUMLAH ©</b>	<b>3,774</b>		
<b>JUMLAH KESELURUHAN (a + b + c)</b>		<b>6,394</b>	<b>16,392</b>	<b>7,392</b>

Referring to the two tables above, there are a total of 45,532 MBPK people in secondary school and 52,267 MBPK people in primary school who need to be educated about sexual education. If you look at the number of special education teachers of 16,156 people and student management assistants (PPM) of 7,162 people, the number is quite small for them to devote their full attention to guiding and educating MBPK in education. A study by Habibie et al (2018) found that parents and guardians are the best people in providing spiritual needs to MBPK. They have been entrusted to provide religious, faith and moral education and it includes sexual education for their MBPK children.

Previous studies have revealed that the participation of parents and guardians in matters of education contributes to the success of MBPK. Parental involvement is also emphasized by modern studies such as those conducted by Joyce Epstein (Epstein et al., 2009). Based on the evaluation of Epstein's six engagement constructs, it can be concluded that communities and families not only need to get the right information but they also need to participate in their child's progress in learning and collaboration must be seen as an important element in planning or organizing the education system. (Epstein, 2011).

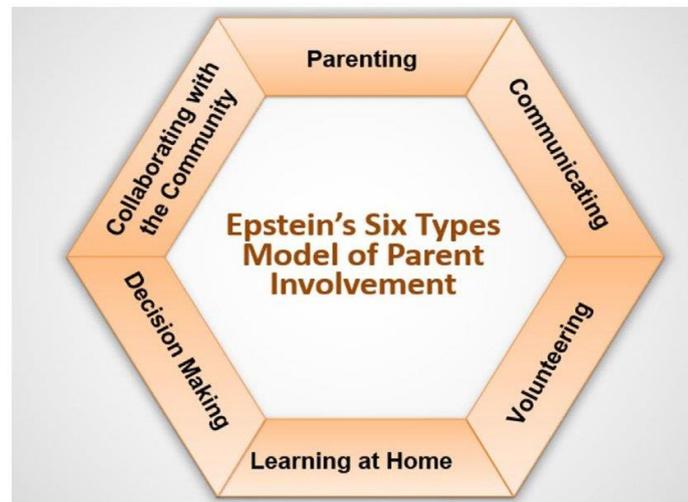


Figure 2: Epstein's six types of parental involvement model. Source: Epstein et al. (1997).

### **Parental**

Parenting is a process of encouraging and supporting the physical, emotional, social, and intellectual development of children from infancy to adulthood. Parenting refers to aspects of raising children other than biological relationships. Parents' involvement in raising and educating children is a lifelong responsibility (Vance, 2018). Osama and Lucy's study (2021) found that the perception of responsibility for parental involvement may differ between cultural contexts; views on the role of the family, the amount of trust placed in teachers and the degree of centralization of the education system can all affect whether, for example, students themselves, teachers, or centralized administrators are seen as responsible for encouraging parental involvement. In the MBPK sexual education situation, the support of schools and teachers in terms of providing various information such as parenting skills, psychological counseling and knowledge about MBPK sexuality is very necessary. Schools can also share with parents how to prepare an environment suitable for MBPK to make it easier for children to receive this new knowledge better at home. As a result of this type of educational program, the school can help parents by providing knowledge and awareness about sexuality to their children.

### **Communication**

Trust-based communication is held between teachers or schools and parents for the purpose of determining any problems that arise, finding ways to deal with problems and providing students with assistance throughout the learning process (Fatma et al., 2016). There are many options for how families and schools can relate to each other. Epstein (2009) suggested that schools send periodic notices and flyers about any important school activities. Parents are also encouraged to share any health reports and educational history of their child with the teacher. Schools are also advised to update their web pages to provide the latest information and sexual education reference resources for parents and families. The school also holds meetings with parents and guardians at least once a year to discuss further the child's academic and behavioral progress. In this sophisticated and online age, since 2011, the Malaysian Ministry of Education has provided a platform for parents and guardians to see their children's progress at school through the School Examination Analysis System (SAPS). Parents and guardians can obtain the latest scores of their child's achievement and based on this information they can have further discussions with the teacher for improvement

purposes. Huang Hua's (2017) study found that the use of online communication such as email and online chat, with the capacity to disseminate information, has been adopted by many teachers in their relationship with parents. The use of online communication has the potential to reduce some communication barriers and enable immediate resolution of issues in parent-teacher collaboration. This technology can also make both parents and teachers feel more comfortable when communicating because it is more personal because it is more text-based and there is a screen behind it to hide any emotions or reactions. Communication between schools and parents should be done through two-way communication so that it becomes more effective (Epstein, 2009). The school can start an initiative to start an online bulletin to parents in imparting knowledge about sexual education and parenting knowledge as one of the training methods for parents to impart this knowledge to their MBPK children. There are times when parents themselves do not know the source to find this knowledge let alone how to convey it to their children effectively. With this online parenting bulletin, parents can use it as a reference source.

### **Volunteer**

According to Epstein (2009), there are three basic ways for individuals to do voluntary activities in education. First, parents can volunteer at school to help teachers and administrators as tutors or classroom assistants. Secondly, parents can help in terms of fundraising for any event or help by sharing about school activities on social media or even in their community. Third, they can participate as supporters and attend any program held at school. Being a volunteer, it provides different types of learning that can increase human and social capital as well as personal and collective efficacy. Carmel (2021) asserted that learning includes the development of instrumental skills and the ability to work with others and that learning is also based on experience in the voluntary sector in society. MBPK parents who have experience or even expertise in the field of sexuality, for example a doctor can become a volunteer by imparting his knowledge through training or even a webinar session with other MBPK parents. Schools can also get volunteer services from NGOs or hospitals to convey sexuality knowledge either directly to MBPK or through training to parents and guardians.

### **Learning at home**

According to Epstein (2009), schools can help parents in sharing information and ideas on how to help students do homework and activities and planning related to the curriculum. Through this activity, it encourages parents to constantly communicate with the school about the curriculum and helps parents plan learning activities at home. The involvement of parents together in student learning activities at home can improve their relationship in addition to providing motivation for students to complete the assigned work. It indirectly makes parents aware of the importance of support, encouragement and guidance to their children. Parents and caregivers who are involved in children's homework believe this activity will make a positive difference for children (Bandura, 1997). Parent and guardian involvement activities are more specific on children's homework effort, completion and accuracy. Parents can use specific approaches to reinforce desired behaviors, including giving praise and extrinsic rewards. They may focus on increasing students' self-perceptions of their abilities and the value of effort (Aysegur et al., 2009).

Daniel and Joseph (2016) reported that the collaboration of parents and guardians with children led by the school through shared reading, communication with the school and parent-teacher partnership programs produced the greatest impact on student achievement. The reading program between parents and children greatly influences the development of

children's literacy during the beginning of school. Therefore, when parents and guardians together with their children are learning at home, they can insert this sexual education in a relaxed way and give advice to their children on how to face any situation.

### **Making decisions**

As part of the Parent and Teacher Association committee (PIBG) or the Parent Support Group (KISB), parents can together give opinions and ideas in making any school decision for their children (Epstein, 2009). The school can appoint parents as collaborative partners in decision-making and also channel their expertise, for example in organizing programs such as scientific programs, career transitions, motivational talks or talks related to sexuality.

### **Community Engagement**

The involvement of school community cooperation involves various parties to find ways to share or transfer resources between schools and local companies; NGOs; religious, cultural and other groups. There are two benefits of this collaborative community involvement. Resources from the community can be used to help schools, families and students while the community can also benefit from the activities from the same groups and individuals. (Epstein, 2009). Deborah et al. (2020) stated that collaboration between schools and the community is a necessity nowadays because students need to be equipped with various competencies. Involvement from the community can encourage the development of children's learning in various places including at school and at home.

Schools and parents can work with companies such as sanitary pad companies to hold talks on self-management during menstruation and also related to sexual problems. The results of the study by Jane et al. (2021), a campaign titled "The Bishesta campaign" was conducted in Nepal where it is a self-management campaign (menstrual hygiene management) for female students with special educational needs that is conducted together with their guardians or family members. This collaborative program has received a warm welcome from students and family members.

### **3. Methodology**

This study is a quantitative survey study that aims to identify the extent of the relationship between the level of knowledge and willingness of MBPK parents and guardians in sexual education. The use of this survey method was chosen because it saves time and the data obtained can be collected more effectively. Nuruaslizawati et al. (2022) stated that survey methods are very suitable for measuring attitudes to obtain original data from a large population. Researchers can show trends, attitudes, opinions, behavior or character based on the sample or study population (Creswell, 2018). The study of sexual education is seen as very important to understand and deepen a problem or issue as explained by Creswell (2010). The researcher used a questionnaire that was administered to 175 parents and guardians who have MBPK children who study at PPKI secondary schools around Zon Keramat, Federal Territory of Kuala Lumpur. This questionnaire helps the researcher gather information about the level of knowledge and readiness of MBPK parents in sexual education. The data obtained from the questionnaire on "Google Form" represents the population of parents and guardians in the two selected schools. Each measurement of the variable is made based on responses to all the statements contained in the questionnaire.

#### 4. Findings and Discussion

Ho1: There is no significant relationship between the level of knowledge and the level of readiness of parents and guardians of students with special educational needs in sexual education

Pearson Correlation Analysis was conducted to identify the relationship between the level of knowledge and the level of readiness of parents and guardians of students with special educational needs in sexual education. The results of the Pearson Correlation analysis of the relationship between the level of knowledge and the level of readiness of parents and guardians of students with special educational needs in sexual education are as shown in Table 4 below:

Table 4: The third research question

		Knowledge Level	Readiness Level
Knowledge Level	Pearson Correlation, r	1	0.555**
	Sig. (2-tailed)		<0.001
	N	175	175
Readiness Level	Pearson Correlation, r	0.555**	1
	Sig. (2-tailed)	<0.001	
	N	175	175
** 0.01 (2-tailed)			

The results of the Pearson Correlation Analysis in Table 4 show the test results that found  $r = 0.555$  with a value of  $p < 0.001$ . This shows that the statement that there is no significant relationship between the level of knowledge and the level of readiness of parents and guardians of students with special education needs in sexual education in the first null hypothesis (Ho. 1) was successfully rejected. The positive value of  $r$  explains that there is a significant positive relationship between the level of knowledge and the level of readiness of parents and guardians of students with special education needs in sexual education. In fact, this significance value of less than 0.001 explains that the probability of a correlation occurring accidentally or by chance is extremely low or may not occur at all. Therefore, it can be concluded that there is a significant relationship between the level of knowledge and the level of readiness of parents and guardians of students with special education needs in sexual education. The correlation coefficient value of 0.555 shows that the level of correlation between the two variables as a whole is high (Davies, 1971).

Variant  $r^2 = 0.308$  shows that 30.8% of the level of knowledge of parents and guardians of students with special education needs in sexual education is due to the level of readiness of parents and guardians. While 69.2% of other changes in the dependent variable may be caused by other factors. This result explains that the level of knowledge of parents and guardians of students with special education needs in sexual education has a good relationship with the level of readiness of parents and guardians, where the relationship is strong with  $r = 0.555$ . Pearson's correlation shows that there is a significant relationship between the level of knowledge and the level of readiness of parents of students with special

education needs in sexual education. The correlation coefficient value of 0.555 shows that the level of correlation between the two variables as a whole is high.

A study by Nawal et al (2022) found that the willingness of parents regarding sexual education is closely related to their level of education. In general, the higher the academic level of the parents, the higher the level of knowledge and the more prepared they are to impart sexual education to their children. This is in line with a study by Xin Jin (2021) in the Chinese parents' community which shows that parents' educational background has a significant effect on their knowledge and readiness regarding sexual education. Parents who have a low academic level have a negative attitude towards sexual education because they lack knowledge. Inadequate knowledge related to sexual education often causes embarrassment when discussing sexuality with MBPK. This finding is consistent with some previous studies that state that knowledge is the main key for MBPK sexual education to be successful. Frank and Sandman (2019) in their study found that training related to sexual education and workshops for parents can reduce parents' negative attitudes about their children's sexuality and increase their own ability to discuss this topic of sexuality. A study by Kok and Akyüz (2015) found the effect of a training program for parents related to MBPK sexual education showed a significant increase in knowledge observed after the training.

## **5. Conclusion**

The findings of this study, it can be concluded that all the research objectives stated in this study can be explained in detail. By using descriptive analysis according to the analysis protocol, it has been found that the level of knowledge of parents and guardians of students with special educational needs in sexual education is at a moderate mean score interpretation level. Based on the findings using descriptive analysis, it was found that the level of readiness of parents and guardians of students with special education needs in sexual education obtained a high level in the interpretation of the mean score. The research findings for the third research objective using Pearson's Correlation analysis found that the level of correlation between the two variables as a whole is high. Interpretation of the mean score and the high Pearson correlation shows that parents and guardians have knowledge and readiness in the sexual education of their children.

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