

Self-efficacy in Children with Reading Disorder

Marcelina Rizkyati Suganda, Nanik, and Ktut Dianovinina

Faculty of Psychology
Universitas Surabaya

Nowadays early primary school children are demanded to be able to read well. This condition becomes a threat for those who are not ready or those who have reading disorder. The inability to read influences children's psychological condition. The purpose of this study was to examine children's self efficacy in those who have reading disorder. A quantitative and qualitative descriptive approach was conducted to visualize psychotest data in which the quantitative data was interpreted qualitatively. This study used two children 6-7 years of age who still could not read fluently. Results of this study show that self efficacy of those children is low. Factors that become the cause of this condition are parent tolerance and indiscipline in educating their children. Other factors that contribute to this low self efficacy are no successful experience, no appropriate modeling in learning as well as the important role of the child emotional factor.

Keywords: self efficacy, reading problem

Dewasa ini anak sekolah dasar dituntut sudah mampu membaca dengan baik. Kondisi ini menjadi ancaman bagi mereka yang tak siap termasuk mereka yang menderita kesulitan membaca. Ketakmampuan membaca memengaruhi kondisi psikologis anak. Tujuan penelitian ini adalah menggali keyakinan diri anak yang menyandang kesulitan membaca. Pendekatan kuantitatif dan kualitatif dipakai untuk memvisualisasikan data psikotes dengan menginterpretasi data kuantitatif secara kualitatif. Studi ini mempelajari dua orang anak berusia 6-7 tahun yang belum mampu membaca dengan lancar. Hasil studi ini menunjukkan bahwa keyakinan diri anak-anak tersebut rendah. Faktor yang menjadi penyebab kondisi ini adalah toleransi dan ketakdisiplinan orang tua dalam mendidik anaknya. Faktor lain yang berkontribusi pada rendahnya keyakinan diri tersebut adalah mereka tak pernah mengalami keberhasilan bermakna, tak adanya pemodelan belajar yang tepat maupun peran penting faktor emosional anak.

Kata kunci: keyakinan diri, masalah membaca

Nowadays the educational demand is higher than years ago. This high demand applies not only in junior or senior high school, but also in elementary school. Nowadays, even to get to elementary school, children need to take a test consisting of reading and writing ability and mathematic ability. Children are expected to be able to read before entering elementary school. Some children can not do that and unprepared to meet the demand. If the child already has experience in practicing the child's reading or writing abilities, it will also help them emotionally when they enter school in a formal academic setting (Halimah & Kawuryan, 2010). According to Nevid, Rathus and Greene (2005), reading disorder in children appears at

the age of 6-7 years old when they enter elementary school.

In four provinces in Indonesia, children who suffer reading disorder reached 9% of the population. Development of reading problem in Indonesia is not as many as in other English speaking countries because the phonemes of Indonesian language are easier and simpler (Paramita, 2011).

Reading disorder is one kind of learning disorder which basically is reading ability less than average. Reading disorder is not connected with dysfunction in neurology or sensory or even other disorders like mental retardation. This reading disorder is more linked with late in speaking, silent reading or lessening the meaning of the reading itself. This disorder can inhibit children's performances or daily life (APA, 2006).

Correspondence concerning this article should be addressed to Nanik, Faculty of Psychology Universitas Surabaya, Jalan Raya Kalirungkut, Surabaya 60293, Indonesia. E-mail: nanik @ubaya.ac.id

Reading disorder can not be detached from several reading stages in children during playgroup. Stages of reading development in playgroup or kindergarten are understanding structures like circle, rectangle and other forms, as children foundation to train visual perception of other forms or structures. After that, children are introduced to alphabet and words by giving *Qashcard* with pictures. For example, letter a accompanied with picture of *ayam* (in Indonesian), letter b with *bunga* (in Indonesian). After that children are taught to associate several letters, for example letter *be-u-de-i* to form the word *budi*. Later on using complex words with consonants like *lalat* and *semut*. Several words would form a sentence that should be read in sequence (Hardy, M, Heyes, S, Rookes, S & Wren, K., 1993). If a child failed in one stage of development, that child would tend to experience reading disorder.

Reading disorder could influence psychological development of the children. Ridsdale (2004) stated that children who had reading disorder were frequently linked with low self esteem and behavioral or emotional disorder. Haager and Vahn (in Ridsdale, 2004) added that children who had reading disorder experienced low social relation compared with their classmates. Brown and Heath (in Ridsdale, 2004) also added that even if children had average class performance, their teachers and classmates still perceived them as having less social ability. This condition explained why reading disorder was usually accompanied by rejection, worries or even depression. Pennington, et al (in Nevid, Rathus and Greene, 2005b) stated that adolescence who had reading disorder tended to be more vulnerable to depression, having low self-worthiness, feeling academically

incompetence and showing symptoms of ADHD.

These studies showed that children with reading disorder felt that they were not competent academically, and this in return would affect motivation, cognitive resources to behave accordingly on challenging situation as defined by self efficacy (Bandura, 1997). High or low self efficacy depends on the belief of the children on their efficacy. The self-system, that is the self-efficacy in this research, provides the individual the capacity to alter the individual's environment and influences the individual's subsequent performance. The belief that the individual has of himself is the key element in exercising control and personal efficacy (Mahyuddin et al, 2006).

Based upon those previous studies, self efficacy of children with reading disorder becomes the subject of interest. There is also the fact that despite the amount of evidence from teachers and academic practitioners over the past two decades, researchers have given little attention to self-perceptions, including self-efficacy, in children with dyslexia (Humphrey, 2002). Adding to the problem, there is a tendency for academic motivation researchers to struggle in deciphering distinctive characteristics of highly analogous construct, self-efficacy included, showing that re-searches in this particular area is still highly desired (Skaalvik & Bong, 2003).

It was assumed that in children, reading disorder had some influence on self efficacy in academic activities, so if it is true, then parents as well as institution should be aware of it and could take necessary precaution to deal with them. If they were not taken care of appropriately, they would develop a bad self concept until they were grown up. It is possible that the children would label themselves as stupid, useless, and so on.

Table 1

Comparison Reading Disorder Between EA and ER

Comparison	Subject EA	Subject ER
Physical factor causing reading disorder	Sinusitis acquired since the age of 5 years old	Myopic and cylindrical Eye
Environmental factor causing reading disorder	Parenting pattern was too tolerant because EA had certain illness	Parenting pattern was too tolerant and indiscipline because guilty feeling in the past and too busy
Psychological factor causing reading disorder	Memory, perceptual and visual problem	Perceptual visual, concentration, and attention problem
Dominant characteristics causing learning disorder	Memory problem	Perceptual visual problem

Bad label or self concept would have a bad impact on human development in doing their tasks in life. Self-efficacy is important to the psychosocial adjustment of everyone, including those with disabilities. Researches have shown that de-pression and anxiety are both related to low self-efficacy expectancies (Miller, 2009).

Method

Study was focused on searching self efficacy of children who had reading disorder. Self-efficacy was correlated with the children's understanding that they had reading problem. Variables in this study were self efficacy and reading disorder. Self efficacy is individual confidence about his ability to organize and implement action to reach the goal, especially academic achievement. Reading disorder is reading ability less than children of the same age. Reading disorder is not linked to neurological

disorder.

It was a case study using qualitative and quantitative descriptive. Quantitative data would be discussed further through qualitative approach. Quantitative data was acquired from psychotest score, interpreted further using qualitative method, aimed at issue developed in the society, not on specific subjects. Research subjects were children of 6-7 years of age, attending first grade, with normal IQ, suffering from reading disorder or not being able to read fluently according to age or educational experience.

Data was collected through observation and interview using *self-efficacy questionnaire for children* made by Muris (2001), and measuring reading ability. Psychological testing was done with Frostig test to explain the relation between visual perception skills with maturity (Jacobs, 1968), NST was used to know about the school readiness among the children (Sulistyaningsih, 2005), and CPM. Quantitative data was collected from psychotest and interpreted further. Quantitative data was analyzed using interpretation

Table 2

Comparison of Self-Efficacy Between EA and ER

Comparison	Subject EA	Subject ER
Level dimension	Efficacy level was low because given any task he gave up right from the start	Efficacy level was high, he was enthusiastic in the beginning, lowering in the middle when he began bored
Generality dimension	EA was dependent on his mother because his mother was too tolerant and she helped him too much	Parents educated ER but education was not followed by real examples. Giving ER just advices did not make him change his behavior
Strength dimension	Successful experience was minimal	Successful experience was also minimal so that it could not change his behavior
Performance accomplishment factor	EA seldom had successful academic experience so that he did not have lesson to change his performance for the better	ER did not have successful academic experience to be used as a parameter to change his behavior to get a better experience
Vicarious experience factor	EA did not have a good model for successful academic performance	ER had a wrong model in measuring his academic performance and tended to see less performance of his classmates
Verbal persuasion factor	His environment did not give him verbal persuasion factor needed to perform well. Parents only gave him suggestion leading to help him doing his homework voluntarily	ER got lead, suggestion, and evaluation verbally from his parents, but the lead was not supported by his environment so that he did not change his behavior
Emotional arousal factor	EA was not emotionally stable. He was not comfortable. He was afraid being kidnapped, afraid of height, afraid to ride a bike. This paranoia hindered his performance	ER was not comfortable with his neighborhood such as friends and teachers so that he could not perform well academically

guide from the test itself, to be suited with characteristics of test result from the two subjects. Data from psychotest was analyzed qualitatively together with result of the interview with subjects and families by giving classes to interview results and seeing themes in each of the subjects (Lyons & Cole, 2007).

Results and Discussion

From Table 1, it was obvious that reading disorder of the two subjects could be caused by different physical and psychological factors. Subject EA had memory problems whereas subject ER had perceptual visual problem. But those two subjects had the same environmental cause of children learning pattern. Bad children performance because of physical and psycho-logical limitation could be minimized through good parenting pattern. Piaget (in Crain, 2007) stated that in seven years of age children entered into concrete operational stage. In this stage, children developed the ability to think systematically and referred to concrete activities.

If children were told not to learn in certain ways without concrete activities, that would not be internalized by the children in order to change their behavior. Parenting pattern of parents could cause psychological conditions of the children not to develop well, and this was linked with self efficacy. The following was the comparison between self efficacy of EA and ER. Table 2 showed that self efficacy of EA and ER was not good especially in academic activities. Parents respond by becoming over tolerance made the children not be required from academic standards (Mattison R., Hooper S., Glassberg L., 2002 in Voeller K. and Sundheim S., 2004). Too much tolerance and too much help to the children, and inconsistent parenting made low self efficacy. EA and ER were children with special limitation in reading, and this eventually affects their academic activities. Smith (in Bandura, 1997) proposed multi faceted treatment to overcome anxiety at school. This treatment was aimed at many facets such as situation, cognitive and affective state and ability. Children were taught to have effective self instruction, time arrangement and better academic activities, to make conducive environment and to motivate them-selves to reach the objectives by using self incentives.

This treatment proved to increase efficacy and decrease anxiety in children who had disorder. This treatment should be supported by the environment where they lived. Parents play an important role in

motivating and accompanying their children to get acceptable behavior. If parents do not support or just giving advice without accompanying, it will be useless. The same with parents who can not let go their children to do their own work, and then their children will be dependent upon their parents.

There are three factors causing children to get reading disorder, namely: physical, environmental, and psychological factors. Those three factors interact with each other with the result: the children get reading disorder. Reading disorder influences academic performances at school. In research subjects, there are factors that cause their self efficacy not to develop. The first factor is linked to no experience of success that can be used as teaching learning process of how to be successful. The second factor is linked to inappropriate learning or no learning model to be studied to achieve certain success. The third factor is verbal persuasion from environment not to be followed by real action and environmental support so that the children could develop their performance. The fourth factor is anxiety to certain things.

If those four factors consistently show up, the behavior of the children can not develop well, and their self efficacy to face academic activities is low. The interaction of those multidimensional factors makes up low or high self efficacy. Based on the above explanation, it can be seen that children with reading disorder have a low self efficacy, although it depends on stimulating environment in order to develop good performance in academic activities since reading disorder is closely linked to academic activities at school.

Conclusion

Self-efficacy of those two subjects with reading disorder is low although it shows up differently. In subject EA, he gives up before starting to do a task while ER gives up when he finds it difficult to do the task. Self-efficacy also depends on environment. Stimulating environment will help them much, while on these case studies, the disorder is not given stimulation from environment to show the successful experience in the past. The appreciation of successful environment is so minimal so that self efficacy can not grow optimally. Parenting pattern plays a role in developing self efficacy in children. Stimulating experience from parents will be used to develop their efficacy. Too tolerant parenting pattern without lead and evaluation does not result in children to study well in

connection with successful experience to overcome certain difficulty.

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