



THE COMMUNICATION STRATEGIES OF CHILDREN WITH AUTISM SPECTRUM DISORDERS' COMPANIONS IN TEACHING SEXUAL EDUCATION

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INFORMASI ARTIKEL

Diterima: August 3, 2023
Direvisi: February 6, 2023
Tersedia: online: February 2024

KATA KUNCI

Autism; communication; companions; sexual education; strategies

KORESPONDENSI

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ABSTRAK

Peran pendamping bagi individu berkebutuhan khusus penyandang autisme sangatlah penting. Kesulitan berinteraksi dengan lingkungan sosial di sekitarnya yang dialami para penyandang autisme, harus dapat dijemput dengan bantuan pendamping. Autism memiliki spektrum yang sangat luas dengan ciri yang berbeda pada setiap individu. Dalam memasuki masa pubertas yang ditandai dengan perubahan fisik dan masalah seksualitas, kesulitan yang dialami individu penyandang autisme bertambah sehingga pendamping perlu memberikan edukasi tentang seksualitas yang tepat. Penelitian ini akan mengkaji bagaimana strategi komunikasi yang dilakukan para pendamping dalam memberikan pendidikan seksual bagi individu penyandang autisme yang memasuki masa pubertas. Penelitian ini menggunakan pendekatan kualitatif dengan metode deskriptif, dengan 7 informan yang terdiri dari guru siswa autis dan orang tua yang diwawancarai. Selain itu dilakukan observasi non partisipan melalui zoom saat guru memberikan pelajaran yang terkait dengan seksualitas dan pubertas kepada siswa dan saat orang tua berkomunikasi dengan anaknya. Hasil menunjukkan bahwa guru dan orang tua menggunakan strategi komunikasi yang sama dalam membantu menjelaskan tentang seksualitas dan pubertas, yaitu dengan cerita sosial. Cara berkomunikasi mereka juga sangat bervariasi. Cara yang bervariasi ini bergantung pada tingkat kemampuan anak dalam komunikasi dan pemahaman serta kebiasaan komunikasinya serta kemampuan dan kecepatan anak menyerap informasi, termasuk dinamika emosi pada anak.

INTRODUCTION

Family has an important role in the growth and development of a child, both intellectually and socially. In building a child's social skills, parents and families have an obligation to build their communication skills according to the way their parents or family members of the child were raised and formed before. The values that are instilled and the communication skills taught are adapted to various aspects of social life and the norms of community life that apply in

everyday life, especially for children with special needs (Susanto, 2011; Bahri, 2018; Florian, 2021).

As everyone knows, there are certain conditions that hinder the development of a child's communication skills, both physiologically and psychologically. One of the psychological disorders that interfere with the development of a child's communication skills, among others, is an autism spectrum disorder abbreviated as ASD.



People with ASD experience developmental disorders in the function of the central nervous system due to abnormalities in brain structure that result in barriers to communication, socialization, and behaviour ranging from mild to severe levels of autism. In psychological terms, this level is known as the autism spectrum. Disorders experienced by individuals with autism include disorders in communication, both verbal and non-verbal communication, social interaction, behaviour, feelings or emotions, and sensory perception (Rahayu, 2014). So that individuals with ASD always have problems in their social interactions with the people around them.

Individuals with autism spectrum disorders in Indonesia are classified as individuals with special needs, and in Indonesia, children who have this disorder are included or grouped as 'children with special needs' or CWSNs. Because of the difficulty in social interaction to understand verbal communication and express opinions and emotions correctly, even in pursuing education, the CWSNs are included in special classes in inclusive schools, or even special schools specifically for students with autism spectrum disorders.

Therefore, they can develop optimally and adapt well to their social environment, good cooperation between assistants such as families and teachers is very important. This is especially true when CWSN begin to be able to recognize and see the differences between boys and girls and experience growth before the age of puberty. For this reason, education regarding sexuality must be introduced to CWSNs as early as possible and adapted to their abilities and development of thinking.

The urgency to teach children with autism spectrum disorder Learning about sexuality and biological growth, of course, cannot be communicated directly to CWSNs, like other children in general, because it requires a special strategy in its delivery (Puspita, 2016). Specific strategies to provide sexual education to children with special needs with autism spectrum disorders not only include biological changes in the male and female bodies or male-female relationships but also explain aspects of

development experienced by a person, such as anatomical changes, body, reproductive system, personal abilities, gender roles, reproductive health and self-care (Azis, 2015). These aspects are abstract and very complex for children with special needs with autism spectrum disorders and difficult to understand.

For people with autism spectrum disorders, sexual education concerns various things related to the physical changes that occur during puberty, the concept of public and private areas, ways to recognize touch and reject sexual touch, and recognizing sexual feelings and urges in oneself (Rustamadji, 2008). Moreover, the lack of communication and social skills of children with autism reduce the opportunity for them to acquire lessons on sexuality, building relationship and closeness with other people through the natural environment and general learning process (Travers & Tincani, 2022).

Sexuality education for children with autism spectrum disorders usually makes it easier to catch messages in certain ways according to their interests, for example, with short explanations, pictures, and videos that catch their attention. The way the teacher delivers educational content is also different from the learning process in general. Even in developed countries, the mechanism of teaching students with autism spectrum sexuality has its own dynamics and difficulties. Therefore, this research wanted to describe and analyze the way teachers and parents as students' companions teach sexuality in the setting of Indonesia, a developing country, in which knowledge and experience about handling individuals with autism spectrum are still new and not known by people in general.

LITERATURE REVIEW AND METHODOLOGY

The Understanding of Autism Spectrum Disorder

Autism comes from the Greek word *autos*, which means "alone." Autistic children prefer to be alone and even avoid and do not respond to social contact around them. Autism is a condition related to neuro-developmental problems. The problem that appears is the

typical characteristics of people with autism disorders with limitations in three areas, namely limited communication skills, social interaction, and the repetition of behaviour patterns (Hallahan & Kaufman, 2006). Berk (2003) defines autism as absorbed in the self, which means preoccupation with oneself or one's own world. Children with autism have difficulty communicating with other people (Tsiloni et al., 2015).

Thus, individuals with special needs, both children and adults, are usually people who are awkward in communicating or interacting with those around them if they have a light spectrum or even have their own world/nature to think, so they don't care about other people around them for those in their life, moderate to severe spectrum. They also find it difficult to express their feelings or ideas in the form of words, and some even don't speak at all or speak in words that are incomprehensible to those on the non-verbal autism spectrum. This communication difficulty is also followed by a reluctance to look into the eyes of the other person who invites you to communicate. Individuals with autistic spectrum disorders also perform an activity that is repeated over and over again, for example, shouting, nodding, shaking their heads, running around, walking to and from, asking or talking about the same thing over and over, and other repetitive actions.

Communication Strategy

Some definitions of communication strategy were collected during the research. The United States Environmental Protection Agency (n.d.) states that communication strategy is "plans for communicating information related to a specific issue, event, situation or audience." Mariani (2010) said that communication strategies are "the ways and means we employ when we experience a problem in communication, either because we cannot say what we would like to say or because we cannot understand what is being said to us." Cangara (2013) states that the communication strategy is the best combination of all communication elements, such as communicators, messages, channels, and application of messages that the communicant has understood. Several definitions of communication strategy have been quoted, showing that communicators carry

out this strategy to achieve certain new goals with communication methods that use all communication elements so that the communicant can understand them well.

There are several other understandings of communication strategy and its objectives. Blues Intergovernmental Council or BIC (2022) mentioned that understanding communication strategy is a guide to describing the objectives of organizations or communities in order to increase engagement aimed at helping an organization or community be more effective in communication. Trihastuti & Zamzani (2018) quoted a statement from Tarone about communication strategy as a mutual attempt used by two interlocutors to agree on a meaning in a situation.

The use of communication strategies has a purpose and a message to be conveyed to the communicant, so the communicator must really understand the message and information to be conveyed to the communicant. An important factor that needs to be in the communicator is the credibility and attractiveness of the source. Teachers and parents are parties who are considered to have credibility for children with autism disorders because they are companions in the daily lives of these children.

Rhetorical Sensitivity

Rhetorical sensitivity is a measure of one's attitudes toward encoding messages (Hartzell, 2005). Rhetorical sensitivity theory was first proposed by Roderick Hart, which states that effective communication arises from sensitivity or sensitivity and attention in adjusting and completing what the communicator says to the communicant (Littlejohn, 1996). There are 5 (five) elements initiated by Hart and Burks (Dilbeck and McCroskey, 2008), namely (1) trying to accept role-taking as part of the human condition, (2) efforts to avoid certain verbal behaviors, (3) typically or uniquely willing to undergo the tension that occurs in an adaptation situation, (4) trying to distinguish or sorting out all information so that the information that will be carried out can be received (by the communicant), (5) trying to understand that ideas can be given in various ways.

This theory is supported by a humanistic point of view that emphasizes openness, empathy, supportive attitude, positive attitude,

and equality that creates meaningful, honest, and satisfying interactions (Devito, 2016). It begins with the common qualities that will determine the creation of dominant human relationships. These qualities produce a series of behaviours: openness, empathy, support, positive attitude, and equality. Hart and Burks in Dilbeck and McCroskey (2008) also state that individuals who use rhetorical sensitivity theory as their habit of interacting will become more socially productive. In this case, a sense of humanity and a positive attitude as well as equality need to be put forward because interacting with special needs children with autism disorder who have the characteristic of being more sensitive in interacting with other people even though they cannot express their feelings specifically, both verbal and non-verbal individuals.

Research Methodology

Carol Gray created social stories as a strategy used so children with autism can understand the behavior of others or respond to certain situations (Hersinta, 2020). A social story is a simple form of a story that can help people with autism understand other people's behaviour or respond to certain situations using pictures (Alitani, 2018). The social story, in this case, is used by the teachers and parents to give children with autism a better understanding of puberty and sexuality by using pictures. Parents and teachers, as companions for children with autism spectrum disorders, play an important role in providing qualified explanations about sexuality and not only relying on social stories alone. They must be able to convey the correct understanding of sexuality to children with special needs with the right and targeted communication strategies. Therefore, this study wants to examine the communication strategies used by the assistants of children with autism in providing sexual education. The communication strategy of the companions of ABK children with autism can be said to be successful if the messages and information provided can be conveyed properly to these ABK children. An effective communication strategy can result in the delivery of messages and information that can be easily understood.

Practically, the purpose of carrying out this study is to provide a deeper understanding of

the practice of learning sexual education for students in the category of ABK with autism spectrum disorders. While theoretically, this study is expected to provide a more in-depth picture of how rhetorical sensitivity theory can be used to guide in explaining the communication strategies carried out by the assistants of children with special needs children with autism spectrum disorders in their efforts to provide sexual education.

Based on research conducted by Sullivan and Caterino (2008), as many as 75% of people with autism show sexual behavior in public and are often reported by the public for their actions. Based on research conducted by Azis (2015), persons with disabilities are also 1.5 times more susceptible to sexual harassment. Therefore, children with autism need to be given sexual education that is in accordance with their ability to understand.

The approach used to examine this problem uses a qualitative approach based on an interpretive paradigm. Data was collected through in-depth interviews with 7 (seven) informants and non-participant observations. This study is a descriptive study that aims to describe the situation or situation according to the facts when teachers and parents interact in the classroom and at home to provide an understanding of sexuality to children with special needs with autism disorders. The results of interviews and non-participant observations will try to be linked to provide a detailed, comprehensive picture of a specific situation (Neuman, 2018). Data obtained from in-depth interviews and observations are primary data for this research, while literature sources from various electronic journals, articles on various pages, and videos on social media such as YouTube become secondary data sources.

Informants in this research were 2 (two) special education teachers and 5 (five) parents of children with special needs children with autism spectrum disorders who were included in the mild to moderate category and had verbal communication skills they were children with special needs children with an age between 8 (eight) to 12 years. The key informants in this study were 4 (four) people, namely HF and FN, who worked as teachers in special schools for children with special needs with autism and RS (a mother) and SA (a father) as parents of

children with special needs with autism. Other informants are 3 (three) people, namely CS, DL, and MAN, who are parents of children with special needs.

RESEARCH RESULT AND DISCUSSION

The results showed that there was a common view between special school teachers and parents of children with special needs children with autism, namely an agreement that learning or sexual education should start early, no different from other children. The informants agreed that the method and method of delivery were appropriate and adapted to the conditions of the children with special needs, which was the key to sexual education for these children was successful and the children could have the correct understanding. However, there is a slight problem between the teacher's opinion and the condition of parents taking care of their special needs children at home, which becomes additional work for teachers in teaching at SLB, as disclosed below:

"... in my opinion, it's actually from the family. It's just that sometimes, because parents feel they have children with special needs, toilet training independence is not taught from an early age. So, in the end, children are not mature, not independent in themselves. This means that there are thoughts and feelings like this in parents, "He can't talk, he doesn't understand" (HF)

"...children with autism are also parents who will teach. However, because these autistic parents think that sex education is not too important to introduce to their children, it may be the other way around. They forget to teach that to their children." (FN)

"We really try to introduce children to the most basic way, yes, like washing our own hands, flushing the toilet... but it does take longer, doesn't it, if the child is cranky and keeps tantrums... we also have to take it slow" (RS)

"We've been teaching you at home. In fact, he's been in kindergarten since he was four years old... like my son is a girl, but the older brother is a boy, so start with basic things, like saying "girl sister, big brother," and then we show the cards that there is a different explanation for boys and girls" but yes the

teachers at school sometimes we catch someone who wants it fast, the children understand quickly, they can do it quickly." (MAN)

From the statements above, it can be seen that the different views are related to the expected time or speed for children with special needs to absorb knowledge about basic things such as personal hygiene (toilet training) and gender differences, as stated by key informants HF. This difference raises the assumption among teachers that parents forget to teach, as stated by the FN informant, while among parents, there is an assumption that teachers at school only want it to be as fast as the MAN informant stated. Due to the limitations of children with special needs with autism who need more time to understand, as stated by the RS informant.

"It's like a child, but biologically, he developed like a child in general, so it is necessary to treat him like a child his age. What happens to most parents is that when they have children with special needs, these children are always treated like children. This child is always served, assisted" (HF)

"Children like ours are treated differently, but that doesn't mean we will let them remain ignorant of things that are natural in nature. We introduce them, just adjust them to their natural thinking... my wife and I use the film method because children I like watching cartoons. Yes, I continue to download and edit here and there for our own consumption. I'll tell you, starting with introducing men as papa and women as moms, and then which family members are male and female, then use YouTube. Videos explaining women and men... I'll show you guys have (gender) like us, pee like this... I teach you that in public places, men pee in a room with a picture like this, pee like this...yes and that, you have to be patient the key After a long time, he can be released, hehe hehe.... now it's been three years he can pee himself when he goes to the mall or to a restaurant, sometimes I just follow him to check" (CS)

"My husband is part of teaching our children because it's easier for both boys. I'm

just telling you that they are told to do this at school, so his father understands and gets involved in teaching things that I can't...now our homework teaches us restrictions when you hang out with female friends... it's almost 11 years old, so it really needs to be taught because there are also girls at school. They're getting bigger, starting to menstruate, and so on, so don't let our children not understand the boundaries of socializing.... He still has not really scored, and he's still asking questions. Luckily, our son is verbally autistic, so he still understands. Even though he's tired of asking questions, he doesn't stop hahaha..." (DL)

From the statements above, it can be seen that parents realize that it is very important for their children to be given education about sexual education, and as parents, they have a method or strategy that they know can be applied to their children. Sexual education is given by parents so that children know their body parts and know what is going on inside them. This is because children with autism will experience hormonal changes just like children in general, so they need to prepare themselves so that when they reach puberties, they know what to do. Children, in general, can cope with the turmoil that arises in themselves, while children with autism find it difficult to control it because they don't know what to do, so it can make them frustrated. This can be seen in how parents teach social restrictions between boys and girls, as did informants DL.

Moreover, sexual education is abstract and considered a new thing for autistic children, so a special strategy is needed so that it can be easily understood. Sexual education can not only be done once or twice. But it must be sustainable. Hence, the strategy used is to make habituation repeatedly, discipline, and be consistent in carrying out and setting rules, as well as collaborate with parents to be re-applied at home so that children get used to the habits that have been taught at school.

The cooperation of parents and teachers to familiarize children. For example, when children show sexual behaviour in public places because their curiosity and libido increase, such as holding the genitals, penis, or chest, the teacher gives understands the child not to do it in a public space while moving the child's hand

to temporarily stop the activity he is doing while being told that such an act can only be done in a private room, not in a visible public with other people.

"...we ask, "What do you think when you see it?" This is to communicate with children who have the ability to communicate. But for children who don't communicate, we emphasize "may" and "no." "You can't, son... because it's dangerous and not a good thing to do. If you want anything, just call the teacher" (HF)

"They also have sexual arousal, like someone hugging the opposite sex. An understanding of sexual education must be given. We immediately convey it in concrete words, not forbid him to do it. For example, if he puts his hand in his pants, don't prohibit it like, "Eh, don't hold it," but tell him, "Hey, keep his hands in his pockets" (FN)

For children who have not experienced puberty, the child's reaction will be more indifferent or show an expression as if he understands it. Even though the child listens to the teacher's explanation, the child does not necessarily understand it, so one-on-one communication is carried out again in the therapy room. In the end, children who do not understand will really understand it when the child has experienced puberty itself. This is also recognized by the parents of children with special needs with autism themselves.

"Yes, my daughter, after experiencing her first menstruation period a year ago, did not really understand what a sanitary napkin is, how to wear it and how to sit it should be more polite...When I am at home, I try to make her remember my message: that she is a big girl now, and she has to keep from letting her skirt open. Boys are not allowed to hold or touch her chest and bottom (said that by pointing to the genital area and bottom)" (RS)

"Since my child has been able to pee on his own, I told him that in the morning he will definitely feel the urge to pee and his penis... I gave the term 'penis' as it is so that he can understand more easily. ...I'm still "racking my brain" now. I have to give an understanding of

wet dreams haha haha.... even though my son is still eight years old, he needs to be taught about it as soon as possible” (DL)

According to the informants HF and FN, an addition for people who never deal with special needs children with autism, the children with autism usually do not know shame. Therefore, it is very important to be given education about sexual matters as early as possible. Sexual education is given so that children know their body parts and know what is going on inside them. This is because children with autism will experience hormonal changes just like children in general, so they need to prepare themselves so that when they reach puberty, they know what to do.

The difficulties in explaining by parents are bridged by using social stories, which parents, teachers, and assistants can use to explain and provide information about certain situations, events, or activities so that children with autism spectrum disorder can understand the behaviour of others and respond certain situations to reduce anxiety when the child faces an event or situation changes. Usually, parents and teachers carry out strategies to change children's attention from anxiety, which can lead to the emergence of angry emotions or tantrums with other activities.

“Okay, now let's take a break (study) this one, let's try something else first, what do you want?” For example, if he wants to play a puzzle, if he is asked again, “Are you done with the puzzle? Can we try again which were? I'll help you later.” So the instructions from us are not imposed, but we offer them. “Can we try again?” So these instructions as well or the words we use can motivate children.” (FN)

“I usually transfer it by giving a promise or reward, like if you are finished studying, you can watch the movie that you didn't finish yesterday...let's study first. What's this thing on your little brother's body called?” (MAN)

“Come on, how do you do to keep the body clean? Let's do it again. I'm with Mom. I'll help you remember later who's working on it... after this, you can play again...because their understanding is minimal, so something that is

taught must be repeated, continuously and consistently.” (DL)

“With limitations that make it difficult for them to understand, so when they enjoy doing things such as holding their breasts, penis or inserting their index finger into the vagina, they like the opposite sex, that's when we explain in detail. Because understanding through the game, for instance, is difficult since these children can easier to understand by saying the real name (of the parts of the human body) and real practice (by pointing or picture)” (SA)

This method is considered easier to instill the values and learning process in special needs children with autism because they are given a sense of security and are convinced of the importance of knowing their bodies and their differences from other people's bodies and functioning to carry out basic care for their bodies without being forced to do so. Repeated communication strategies about something with great patience and the ability to direct fluctuating emotions are the keys to success.

For special education teachers, classical classes are still the best method of face-to-face learning procedures, just like regular classes. In every classical class at a special education school, a teacher with one or two assistants or shadow teachers has the rule that there can be no more than ten students. The teacher can find out with a limited number of students like that, whether during classical class, the child listens and understands the information given when teaching one by one.

The tone used by the teacher in teaching the material must sound cheerful but still firm and must be explained repeatedly, such as by writing, listening, or reading. Teachers must also be creative in teaching children with autism, such as by accompanying pictures, photos, and videos, because children with autism can more easily digest and understand information if accompanied by visuals. Due to this, the use of social stories will help teachers a lot in special education classes.

CONCLUSION

From the discussion, it can be concluded that there are differences in the way teachers

and parents teach sexual education to students/ children with special needs on the autism spectrum. In this study, researchers found that sexual education lessons provided by teachers were motivated by differences in the thoughts of parents of autistic children that teachers always wanted to be done quickly and did not take into account the child's ability to absorb information about sexuality, especially changes that occur in the body and differences between men and women, as well as basic body care for hygiene such as toilet training. Meanwhile, according to the teacher, parents think too much that ABK children with autism spectrum are small children who are always served, so parents forget to teach sexual education because they are considered not too important so that when they enter puberty, children feel frustrated because they cannot cope with turmoil, in him.

The purpose of the sexual education program in special schools is so that children know the boundaries of the opposite sex, behave according to their place, and understand self-change so that they are able to take care of themselves and prepare children for puberty. In achieving its goals, teachers use social stories as a communication strategy in delivering sexual education to autistic children. Meanwhile, parents use more communication methods, for example, with edited films or videos on social media sites like YouTube. This is an effort to get attention from the communicant, namely children with special needs with autism. Therefore, it can be said that this is part of the attention process.

In the next process, namely retention, the teacher will help the child to remember the information that has been conveyed by conveying the material and giving short questions as confirmation on an ongoing and consistent basis so that it enters the memory of the autistic child. While parents use the same method to check whether their children have a memory of the things they have been taught, often by provoking children through their favourite pictures or films that the parents have edited or even songs that were taught previously. In motor reproduction, the children can follow the teacher's instructions, and the teacher needs to give examples and simple explanations first.

To motivate children to behave, the teacher provides information about the risks of

the actions taken so that children feel threatened and do not dare to do so. Meanwhile, in motoric reproduction, parents provide stimulation to children so that they can explain what they know about some body parts and gender differences along with the characteristics that accompany and distinguish each of them, including the use of various facilities such as small rooms and bedrooms that must be different.

In delivering social stories to autistic children, the teacher uses a combination of verbal and nonverbal communication. In verbal communication, the teacher uses actual word explanations, not connotations, so that children can understand more clearly. In addition, the language used is a language that is familiar or commonly heard by children so that children can more easily understand it and can imply it in everyday life.

The teacher also uses songs so that children can follow the song's instructions. This strategy is exactly the same as the strategy used by parents; the only difference is in the scope explained by the teacher and parents, which is slightly different. Parents tend to explain more in a longer time, while the teacher approaches by explaining more specific things in one meeting or unit of study and repeating in the next few days.

For those who have verbal abilities and can read, the teacher will use picture story books so that children can read and process word for word but remain under the guidance of parents to provide understanding. For the purpose of teaching CWSNs, creativity of caregivers in delivering messages which easily understood is paramount

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