

CURRICULUM INNOVATION AT ART THERAPY CENTER FOR DISABILITIES

Fegy Lestari, fegylestari@gmail.com, Universitas Pasundan
Effy Mulyasari, effy@upi.edu, Universitas Pendidikan Indonesia

Abstract

The research is entitled Curriculum Innovation at Art Therapy Center Bandung for Disabilities. The purpose is to enhance people's information for the existence and the need of curriculum for students with disabilities. In some countries, teaching these students using art therapy is common, but in Indonesia is still new and needs to be innovated. This is a qualitative research to help practitioner practices in developing and evaluating the program and the data gathered by interview, observation, field notes and artifacts from Art Therapy Center in Bandung Indonesia. There were two interviewees, and 8 observers. This research is designed to illustrate the innovative curriculum development found at Art Therapy Center Bandung that can be inspirative for both government and private sectors to create and collaborate education for disabilities.

Keyword: curriculum innovation, disabilities, Art Therapy Center Bandung

1. INTRODUCTION

Facing the 21st century, all sectors need to improve and enhance the quality in order to fulfilling the society needs and one of the sectors is education. There are many areas of education that need some innovation into their curriculum. Time to time, there are many changes in education and become crucial if there is no improving especially the curriculum.

So far, the government has given some efforts to develop the curriculum, and 2013 curriculum and *the KKNi* (Indonesia National Qualification Framework) are the answer for today's century. However, there is lack of attention into education for disabilities. Nevertheless, that situation can evocative individual, private institution or organization to take part in succeeding government's education program. Eventhough, entering the disabilities world is not easy, but *Art Therapy Center* has broken everybody's thought by its existence and try to share that art can be one of the solutions for disabilities treatment.

2. LITERATURE REVIEW

The American Art Therapy Association (2011) states:

"Art therapy is a mental health profession in which clients, facilitated by the art therapist, use art media, the creative process, and the resulting artwork to explore their feelings, reconcile emotional conflicts, foster self-awareness, manage behavior and addictions, develop social skills, improve reality orientation, reduce anxiety, and increase self-esteem. A goal in art therapy is to improve or restore a client's functioning and his or her sense of personal well-being. Art therapy practice requires knowledge of visual art (drawing, painting, sculpture, and other art forms) and the creative process, as well as of human development, psychological, and counseling theories and techniques." (Neighbors, 2017)

How Do Art Education and Art Therapy Differ?

Neighbors (2017) differentiates Art Education and Art Therapy simply. In schools, the intent of art *education* is to develop knowledge, skills, and attitudes about art. With specific respect to producing art, the emphasis is on what is produced and not the experience of creating the work. Some have stressed that art education focuses on the art, rather than on the individual producing the art.

In contrast, the intent of art therapy is treatment. Art therapy focuses on the individual and uses the act of creating art as a therapeutic process. The underlying intervention rationale is that, because art is a form of nonverbal communication, it facilitates expression of unconscious and conscious thoughts and feelings. The act of creating art in and of itself is seen as having a therapeutic effect.

In addition, the therapist can use the product as a stimulus in efforts to help address personal factors that may be impeding a student's learning, performance, and general functioning. Art therapy has also been used as part of efforts to assess underlying problems. Professional art therapists can also contribute to the professional development of teachers and student support personnel by clarifying how art can be therapeutic and can promote healthy student development. (Neighbors, 2017)

A. DISABILITY

Browder et. all (2014) explain the term *significant cognitive disabilities* was introduced with the 1997 Amendments to the Individuals with Disabilities Education Act (IDEA, 2004) to refer to the disabilities of students who needed an alternate assessment to participate in the states' assessment systems. The term was retained in the No Child Left Behind Act (NCLB, 2008) and the reauthorization of IDEA (2004) to refer to this assessment group. In contrast, the term is not categorized as a disability category in IDEA. The term *intellectual disability* has now replaced *mental retardation* in IDEA. Handleman (1986) proposed the term *severe developmental disabilities* as an umbrella term to refer to the disabilities of individuals with autism, severe intellectual disabilities, and multiple disabilities. A *developmental disability* is one that (a) is manifested before the age of 22, (b) is chronic and severe, (c) can be attributed to a mental or physical impairment or both, (d) results in substantial functional limitations in major life activities, and (e) requires a lifelong need for special services that are individually planned and coordinated (Handleman, 1986). With appropriate supports over time, the life functioning of the person will improve (American Association on Intellectual and Developmental Disabilities [AAIDD], 2010). In their research summary, they have used the shorthand severe disabilities to refer to severe developmental disabilities. While describing individual studies, they were as specific as possible about the participants' disabilities (e.g., intellectual disabilities).

In practices, they used textbooks and articles on personnel preparation in severe disabilities and then cross-referenced these recommendations with the research literature. In this section, they have identified the practices using these resources. They also reviewed research on each practice to consider whether there is an evidence-base. Their practices can be grouped into the categories of (a) how to teach, (b) what to teach, and (c) how to support. In a survey of experts, Meyer, Eichinger, and Park-Lee (1987) identified five best practices for educating students with severe disabilities, including

- Inclusion,
- home-school collaboration,
- staff development,
- data-based instruction, and

- the criterion of ultimate functioning (i.e., preparing students for their current and future environments).

Although much has changed since 1987, the quality indicators still hold true. (Browder et..all, 2014)

Darewych (2015) mentions that in recent years a number of art therapists have been facilitating therapeutic sessions with children and adolescents with developmental disabilities, especially young clients with autism spectrum disorders (Betts, 2013; Brancheau, 2013; Epp, 2008; Gabriels, 2003; Martin, 2009) for the reasons that art therapy provides a multi-sensory setting for individuals to create, gain artistic mastery, establish self-awareness and develop communication, socialization and imagination thinking skills. (American Art Therapy Association, 2011; Betts, 2005). Most recently, art therapists have been reflecting upon the necessities of incorporating digital technology as relevant and contemporary art media and intervention tools in clinical sessions (Carlton, 2014; Choe, 2014; Malchiodi, 2009; Orr, 2012; Peterson, 2010). In the last decade, a handful of clinicians have taken the challenge in applying digital technology with their clients in art therapy (Alders, Beck, Allen & Mosinski, 2011; Austin, 2010; Malchiodi & Johnson, 2013; Mosinski, 2010) and more are developing related skills and interests each year. (Darewych, 2015)

There are many disabilities around us, among others: autism, vision loss & blindness, learning disability, memory loss, physical disability, hearing loss and deafness, intellectual disability, or mental illness. Disability Students' in the Art Therapy Center (ATC) more referred to hearing loss and deafness, intellectual disability and autism that known as developmental disability as offered by IDEA, (1986, Browder et all,, 2014) .

Autism is a disability with characteristics that vary across a wide spectrum. While persons with autism can't be identified by their physical appearance, they usually have difficulties with language or communication, social skills, and behavior, often due to sensory difficulties.

The different levels of autism range from mild to severe. Individuals with severe autism may be nonverbal and seem to be unaware of other people. Those with mild autism

can appear to be incredibly smart but may seem odd in social interactions. Most people with autism are somewhere in the middle.

Individuals with Autism Have Difficulty in Three Main Areas

a. Communication

- * Repeating words or phrases, sometimes out of context
- * Less responsive to requests
- * Laughing or crying for no apparent reason
- * Takes communication literally—does not understand social or verbal innuendos
- * Inability to follow multiple instructions

b. Social Interactions

- * Difficulty in telling others how they feel or what they need
- * Awkward social skills or a preference for being alone
- * Difficulty making eye contact or using nonverbal communication
- * No sense of danger

c. Behavior

- * Difficulty with changes and a preference for routines
- * Very susceptible to sensory overload. Easily upset by noise, crowds, too much happening at once, or touch.
- * Unusual play, spinning of objects, or unusually strong attachment to objects
- * Intense interest in a particular topic (for example, trains, movies, dinosaurs, or animals)
- * Excessive physical over-activity or under-activity

Hearing Loss and Deafness

Hearing loss can vary from slight loss to complete deafness. Some individuals may wear hearing aids. Some persons with hearing loss use sign language to communicate, others read lips and are able to speak, and some use a combination of both methods.

People with hearing loss face challenges in communicating, particularly in crowds. This difficulty may result in feelings of loneliness, frustration, anger, low self-worth, hopelessness, and depression.

Vision Loss and Blindness

Visual problems range from blurred or fuzzy vision to total blindness. Individuals with visual problems differ widely in their needs, skills, personalities, and attitudes.

Intellectual Disability

Intellectual disability refers to significant limitations in learning, thinking, solving problems, making sense of the world, and developing everyday life skills. All people with intellectual disabilities are capable of learning and can live a worthwhile and happy life. Individuals with intellectual disabilities can still feel the influence of the Spirit.

Some people may require support in only a few specific areas, and others require support in almost every area of life. An intellectual disability often affects a person's communication, social, and self-care skills. It also affects a person's ability to learn and remember. Common causes include head injuries, down-syndrome, and fetal alcohol syndrome. Intellectual disability is often associated with other disabilities as well.

Eid (2017) as the executive Secretary of KN4DC Project, UN-ESCWA, Chairmain of Studies Center for Handicapped Research and Consultat in ICT for inclusion and development PwDs in MENA (Middle East & North America) region mentions that one of the disabled students at an information technology (IT) course answered, when asked why he was doing the course, *"I want to show the world that, though it may be true that I am disabled, I am not disqualified."* "Disabled but not disqualified" – this is the motto under which governments, organizations, non-governmental organizations (NGOs) and private sectors are working together to enable persons with disabilities (PwDs) to become integrated into mainstream society so that they may realize their full potential. With the advent of information and communications technology (ICT), new hopes are emerging for PwDs. Despite the huge challenges, sincere efforts are being undertaken to implement the use of ICT to counter obstacles related to disability. The information society represents at once significant opportunities but also potential new barriers for the social inclusion of disabled people. Information and communications technology and assistive technology offer new opportunities for everyone, but these opportunities are specifically more significant for PwDs, who use assistive technology for their daily activities to a higher extent than people in general. Today's assistive technology, which is

adapted to everyone's abilities, means that disabled end users are able to participate in all aspects of social life on more equal terms than ever before. It is vital that people are able to benefit on an equal basis from the rapid development of ICT, to enable them to partake in an inclusive and barrier-free information society.

B. INNOVATIVE CURRICULUM DESIGN

Problem-Centered Designs is a curriculum design, focuses on real-life problem of individual and society. This curriculum intended to reinforce cultural traditions and address unmet needs of the community and society. They are based on social issues (Ornstein, 2014: 172). This curriculum developed based on the students' capability (Sukmadinata, 2016: 120).

The curriculum in Art Therapy started with The Grass-Roots Model Curriculum offers by Zais (1976: 448) supports by Rusman (2012: 78) initiated by teacher in individual school. This curriculum can be successfully implemented only if the teachers have been intimately involves in the construction and development processes, that not only professional personnel, but students, parents, and other lay members of the community must be included in the curriculum planning process.

Post-Modern Curriculum (Slattery, 2006: 18-22) predicts the curriculum of art and science will become the center school discussion in the future. Post modernism has become more than a social condition and cultural movement, it has become a world view. Postmodern philosophy provides an option for understanding the current debates in education and society. He is convinced as well that the postmodernism offers the best theoretical paradigm for exploring curriculum development.

Innovative Curriculum Design must suitable with society needs. In Art Therapy Center Curriculum was started to help a person with disability to support him-self/her-self. The founder was started with the grass-roots model curriculum. Ongoing process, it was not only developed from these principles, but also adjusted with the needs of the students and the society as offered by problem-based design curriculum. The curriculum innovation developed in Art Therapy Center is integrated between the grass-root model curriculum, problem-based design curriculum and also supported by the post-modern curriculum, which

art and science will become the center school discussion. As mention earlier, that Art Therapy Center focus on Art as therapy.

KKNI as the National Qualification of Human Resources



Figure 1. KKNI (Indonesia National Qualification Framework)

The curriculum development for ATC is based on KKNI (*Kerangka Kualifikasi Nasional Indonesia* or Indonesia National Qualification Framework) accordingly to President Regulation number 8/2012 and the constitution number 12/2012 about higher education. It has 9 levels of qualification. KKNI is a statement of the quality of Indonesian human resources whose level of qualification is based on the level of ability level expressed in the formulation of learning achievement (learning outcomes). Universities as producers of educated human resources need to measure graduates, whether the graduates produced have 'capability' equivalent to 'ability' (achievement learning) that has been formulated in the qualification level of KKNI. As a national agreement, the lowest graduates of undergraduate programs should have "capability" which is equivalent to "learning achievement" formulated at level 6 of KKNI, Masters equivalents to level 8, and so on.

The program of Art Therapy Center Bandung, referred to level 5 as Diploma 3 Program. The students working competence should finish the job with broad scope, choose

the appropriate method from various methods by analyzing the data and able to show measurable performance and mutual quality. (KKNI Curriculum, Dirjen Dikti, 2014)

3. METHOD

This is a qualitative research to guide practitioner practices in developing and evaluating the program (Strauss & Corbin, 1990:21). The data gathered by interview, observation, field notes and artifacts. This qualitative research is a grounded theory. The finding may be used to clarify and illustrate quantitative findings, build research instruments, develops policy, evaluate program, provide information for commercial purposes, guide practitioners, and serve political ends, as well as scientific purposes such as the development of basic knowledge.

It was taken from Art Therapy in Bandung Indonesia. There were two persons as interviewee, and 8 observers.

4. RESULTS AND FINDINGS

A. The Origins of Art Therapy Center Bandung

The establishment of Art Therapy Center Bandung (ATC) was conceived from Dr. Anne Nurfarina, M.Sn who completed her doctoral degree at ITB Bandung. Her dissertation was related to the education of art method known as the “sensation method”. In the year of 2010 Dr. Anne Nurfarina, M.Sn was invited to join Widyatama University as Dean of Communication and Visual Design. The owner of Widyatama Foundation namely Prof. Kusbandiyah wanted to build a university that is not only for regular program but also for non-regular program. What is meant by non-regular program here is the program for children with special needs. There are missions that have not been delivered until Prof. Kusbandiyah passed away and then the job passed on by his son Laks (Ret.) T. Ontowiryo Abdoelkadir who became chairman of the foundation. Then he met Dr. Anne Nurfarina, M.Sn and it turns out what is being disseminated in the dissertation on the sensation method accordingly and leads to what became one of the missions of the late Prof. Kusbandiyah and then Dr. Anne Nurfarina, M.Sn was challenged to create an institution for children with special needs. Art Therapy Center (ATC) was created on February 15th, 2015 with the field of graphic

design. Art Therapy Center has two programs: Working Training Institute and Special Treatment. This institution is supervised by the Municipal Representative of the Manpower Ministry and now is in the process of becoming *Akademi Disabilitas Widyatama Indonesia* (ADWI). The working training or internship program duration is three years and the enrolled students must have completed the SLB High School, Inclusion or equivalent. Special Treatment Program is for children who are in mental illness that still need to be accompanied by the age of 6-20 years. ATC do not accept over the age of 20 because it is related to passing productive age.

In 2017, ATC has opened a new department of Music Arts and in 2018 plans to open Craft Department. Associated with the naming of this institution "Art Therapy Center" derived from the word art and therapy which means *seni* and *terapi*. This institution wants to prove that through the art of science using the method of sensation has a positive impact facing children in need. Although other countries has been using therapy through this art but in Indonesia is still relatively new. This in in line with Darewych (2015) discussion that art therapy provides a multi-sensory setting for individuals to create, gain artistic mastery, establish self-awareness and develop communication, socialization and imagination thinking skills.

The process of becoming an ATC student is certainly not very different with the University entrance exam, it is just that they do not have tests like math, English, and so on, but there is still an entrance exam in three stages. First, a talent interest test, to see students' abilities, interests and talents of graphic design or the art of music. If students have no interest and talent then they cannot join ATC. Second, Child Communication, how children can receive instruction and carry out instruction. From its affective aspect, during this test there is advisory and assessment from the field observer, to see if the child can receive and implement instructions and provide feedback. Third, interview with parents and this stage is considered to have a very important role to see whether the pattern of parenting is right or not. It is to see the relationship whether the information from their children is appropriate or not with what is delivered by their children and it is as one of consideration for the institution to be able to accept joining the ATC. Review from the management side, education for

children with special needs is very specific and interrelated. ATC information is not inseparable from the empirical history and experience of Dr. Anne Nurfarina, M.Sn who originated from her experience who had an autistic sister and tried to apply her findings. Before completing her dissertation she taught in several inclusion schools and SLB as well.

The curriculum was developed by the ATC team and received full support from Widyatama Foundation that they believe that every human being has the right to get an education. Art Therapy Center focuses on being a vocational academy in which the learning process is simulated in nature, from entry to graduate. Since the beginning the children and the students have been trained to face the client. Therefore, learning is more to be practical and the focus on the learning in ATC is Social Behavior and Skill.

B. Curriculum Innovation Development at Art Therapy Center Bandung

In creating and developing a curriculum, ATC was involving experts and stakeholders or users. This is in line with what has implemented by Meyer, Eichinger, and Park-Lee (1987 in Browder et al, 2015). The ATC team builds professional associations engaged in art design and directing children to be absorbed in the industry in accordance with the expertise and in line with the mission of ATC that disable children can work. The Curriculum change is similar to other universities conducted every 4-5 years, but it is conditionally can be changed or adjusted anytime, depending on the needs of students, changes in rules, changes in mission and vision (internal), or also the needs of society or industry, the development of science and technology and the tendency his (external) future. For the teachers requirement are from the design department or in accordance with the interests and talents of students. In addition, teachers who graduated from the Special Education Department are placed on learning into the affective domain.

The ATC team always performs periodic analysis, which are daily recorded and related to affective sector. The process of developing curriculum is pure made by ATC team which refers to KKNi (Indonesia National Qualification Framework) that the target is at least operator level. The preparation of the curriculum is through

workshops by inviting experts or stakeholders, industry or users, lecturers and the ATC Team. So it is expected that this curriculum can accommodate the needs of students with special needs so that they can work in the industry. It is clear that the curriculum development is referred to the Grass-Root Model Curriculum as mentioned by Zais (1976 and in Rusman, 2016) that involves professionals, students, parents and community. It is also integrated with Problem-Centered Design Curriculum, which solves the real life problem (Ornstein, 2014 & Sukmadinata, 2016) and Post Modern Curriculum (Slattery, 2006) which predicts the curriculum of art and science will become the center school discussion in the future. As 2013 curriculum, digital technology used as one of inevitable tool that cannot separated from the field, therefore ATC provides computer as supporting tools in helping students needs developing their skills besides other tools, which is supported by Darewych (2015).

The ongoing learning process is recorded on a diary conducted by a field-note as its empirical process. After the seventh meeting, they do a midterm evaluation that will be their learning evaluation and at their 16th meeting do the final evaluation of the semester. Children take 3 years to complete their studies. In this ATC program they took a working training or internship program for 2 months. Students who have completed an internship get an award from the company or industry where they are involved. The assessment process is the same as regular lectures, it is not just a midterm exam or final exam semester but mid-term semester evaluation and final evaluation. After the final evaluation of the semester, ATC invites teachers to deliver a one-semester learning evaluation. From the problems encountered to the findings during the learning process are recorded and documented to facilitate the ATC Team in developing the curriculum. The graduation criteria are made by the ATC team

5. CONCLUSION

Education is very important for human life. Every one has the right to sit in school and get the study experiences. It means that not only regular students but also non-regular students with special needs have the experiences. Indonesia is one of the biggest country in

the world that prioritize education. However, it needs more attention into the education for disabilities, so they can be part of industry and have the competence to work. The innovation of curriculum for disabilities will continuously improved at Art Therapy Center Bandung. The ATC Bandung is confident, there will be advantages for both government and private institutions that continue to collaborate with Art Therapy Center or other disability institutions to develop educational curricula for children with disabilities, so that they have greater and more probable opportunities for education and can be absorbed by more industries or users.

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