The Relationship between Peer Social Supports with the Resilience of Blind Adolescents in Surakarta

Anis Noviatun*, Hermawan Hermawan, Mahardika Supratiwi

Sebelas Maret University, Surakarta, Indonesia

*E-mail: anisn@student.uns.ac.id

Abstract: This study aims to determine the relationship between peer social support with the resilience of blind adolescents in Surakarta. This research is included in the type of quantitative research with a correlational research design. The subjects in this study were 30 blind adolescents in Surakarta who were selected by purposive sampling technique. Data collection is done by distributing online scale. The instrument used in this study consisted of the Scale of Resilience of Blind Adolescents (α = 0.900) and the Scale of Peer Social Support (α = 0.846). The data were analyzed using simple linear regression analysis techniques with the significance level \( \alpha = 0.01 \). The results of data analysis obtained the value of \( t \text{count} > t \text{table} \) is 3.504 > 2.7632 with \( p = 0.002 \) (\( p < 0.01 \)). Based on data analysis, it is also known that the correlation coefficient is 0.552. The coefficient of determination (R squared) is 0.305 or the effective contribution of the predictor variable to the criterion variable is 30.5%. Based on these results it can be concluded that there is a significant relationship between peer social support and the resilience of blind adolescents in Surakarta. It means that if the social support of peers goes up, the resilience of blind adolescents goes up. Conversely, if the social support of peers goes down, then the resilience of blind teenagers also falls.

Keywords: peers social support, resilience of blind adolescents.

INTRODUCTION

Vision is a very important channel of information for humans. According to Sunanto (2005), 80 percent of human experience is obtained from information through the sense of sight. In general, humans who have normal vision can enrich their experience, but there are some people who experience disturbances in their sense of sight or are known as blind. According to Hallahan, Kauffman, and Pullen (2009), blind people are individuals who have visual acuity of less than 20/200 feet in eyes that have been corrected with visual aids, and have a very narrow field of view, which is less than 20 degrees. Lowenfeld (in Sunanto, 2005) states that the limited condition of the blind causes serious problems in aspects of variety and type of experience (cognition), orientation and mobility, and social emotions in the form of difficulties in interacting with their environment. The various obstacles experienced by the blind cause the blind to experience feelings of sadness, stress, and frustration.

On the other hand, adolescence is a period or phase in the span of human life. Hall (in Jannah, 2016) calls adolescence 'a time of storm and stress' or a period full of storms and mental stress because at this time there is a process of identity formation where adolescents will experience major physical, intellectual, and emotional changes that cause sadness and doubt or conflict in the individual with his environment. Like young people with vision, blind teens also face various challenges and problems during their teenage years. According to a study conducted by Zegeye (2019), blind adolescents face more severe challenges than alert adolescents because blind adolescents must face obstacles due to blindness and parallel developmental tasks.

Resilience according to Reivich and Shatte (in Hendriani, 2018) is an individual's ability to deal with adversity or trauma in a healthy and productive way. In general, resilience is
characterized by several characteristics, namely the ability to face difficulties, resilience to deal with stress, and the ability to rise from the trauma experienced. To be able to develop this resilience ability, blind adolescents need a resilience driving factor. Herman, Stewart, Diaz-Granados, Berger, Jackson, and Yuen (2011) state that there are three factors driving resilience, namely: 1) Personality, including self-efficacy, self-esteem, internal locus control, optimism, and demographics; 2) Biological, including neurological in the individual; and 3) Environment, in the form of social support from family, school, community.

Peer social support according to Weiss (in Sinaga and Kustanti, 2017) is a system of giving and receiving with the principles of mutual respect, sharing of responsibilities, agreement to help each other, mutual understanding and empathy to be able to go through and share emotional and emotional experiences. experienced psychology. Peers are one of the most influential social environments during adolescence. Research from Staminirovic, Mijatovic, and Dimoski (2014) states that during adolescence, the influence of peers is much greater than that of parents. The existence of social support from peers is expected to encourage blind teenagers to respond positively to problems in order to be able to become resilient individuals.

The hypothesis about the relationship between peer social support and the resilience of blind adolescents in Surakarta is supported by several previous studies. One of them is Zeeshan and Aslam's (2013) research on resilience and social welfare between congenitally blind, acquired blind, and visually impaired individuals. This study states that socio-economic support can affect individual resilience, both visually and visually impaired individuals. Individuals who have social support (including from peers) tend to have high resilience as well.

METHOD
This research is included in the type of quantitative research with a correlational research design. The subjects in this study were 30 blind adolescents in Surakarta who were selected by purposive sampling technique based on two criteria, namely: 1) blind adolescents who live in Surakarta with ages between 11-24 years; 2) does not experience intellectual, social, and communication disorders. The measuring instrument or instrument used in this study is a Likert Scale, which consists of the Peer Social Support Scale and the Resilience of Blind Adolescents Scale. The validity test technique used in this study is content validity through expert judgment and item analysis or different tests. The reliability test technique used is the Alpha Cronbach technique.

<table>
<thead>
<tr>
<th>Variable</th>
<th>Pearson Correlation</th>
<th>Information</th>
<th>Reliability</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Valid</td>
<td>Invalid</td>
</tr>
<tr>
<td>Resilience of Blind Adolescents</td>
<td>0.105 – 0.749**</td>
<td>26 items</td>
<td>12 items</td>
</tr>
<tr>
<td>Peer Social Support</td>
<td>0.068 – 0.689**</td>
<td>21 items</td>
<td>10 items</td>
</tr>
</tbody>
</table>

Data collection is done by distributing the scale online. The data were analyzed using a simple linear regression analysis technique with the help of SPSS version 25.

RESULT AND DISCUSSION
Result(s)
Based on the results of research on 30 subjects, the score for the level of peer social support and resilience of blind adolescents in Surakarta is shown in table 2. Simple linear regression analysis was carried out after ensuring that the prerequisite tests which included normality test, linearity test, and heteroscedasticity test were met. The results of simple linear regression analysis of predictor variables and criterion variables in Figure 1 show that there is a relationship between peer social support and the resilience of blind adolescents in Surakarta.
Based on this statement, it can be said that the higher the peer social support, the higher the resilience of the visually impaired adolescent will be. On the other hand, the lower the peer social support, the lower the resilience of blind adolescents will be.

<table>
<thead>
<tr>
<th>Variable</th>
<th>Very good (13.3%)</th>
<th>Well (66.7%)</th>
<th>Pretty good (16.7%)</th>
<th>Not good (3.3%)</th>
<th>Average</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Peer Social Support</td>
<td>4 (13.3%)</td>
<td>20 (66.7%)</td>
<td>5 (16.7%)</td>
<td>1 (3.3%)</td>
<td>72.03</td>
<td>8.11</td>
</tr>
<tr>
<td>Resilience of Blind Adolescents</td>
<td>3 (10%)</td>
<td>17 (56.7%)</td>
<td>8 (26.7%)</td>
<td>2 (6.7%)</td>
<td>69.69</td>
<td>10.25</td>
</tr>
</tbody>
</table>

Table 2. Level of Peer Social Support and Resilience of Blind Teens

Discussion(s)

Resilience is one of the main factors for individuals to be able to adapt to various changes in the environment that trigger stress (Rahmasari, Jannah, & Puspitadewi, 2014). Fuster (in Mar'atannisa, Rusmana, and Budiman, 2019) also mentions that resilience is needed to help individuals bounce back from adversity and successfully adapt to the demands of stressful situations, including when facing adolescence with various upheavals experienced. During adolescence, the visually impaired experience more severe challenges than the visually impaired because blind adolescents have to face challenges due to blindness and parallel developmental tasks (Zegeye, 2019).

Peer social support is a system of giving and receiving with the principles of mutual respect, sharing of responsibilities, an agreement to help each other, as well as mutual understanding and empathy to be able to share emotional and psychological experiences experienced (Weiss in Sinaga and Kustanti, 2017). During adolescence, peer influence is greater than that of parents (Staminirović, Mijatović, & Dimoski, 2014). Support from peers is expected to encourage blind teenagers to respond positively to problems. Murphy and Carbone (2008) add that the benefits of peer social support for children with special needs (including the visually impaired) are that it can help reduce stress, self-control and be more patient and relaxed, and improve skills. Based on the results of the study, it is known that blind adolescents in Surakarta have good peer social support. These results are in line with research conducted by Savitri and Hartati (2018) which states that 86% of the blind have social support in the moderate category.

This study also shows that the most needed peer social support in increasing the resilience of blind adolescents is support in the form of reassurance of worth (recognition of competence and self-assessment). This social support contributes 28%. Peer social support is also provided in the form of attachment, namely feelings of intimacy, peace, and security. Social support in this form contributes 16%. Other social support in the form of reliable alliance, guidance, and
opportunity for nurturance also contributed 14% each. Furthermore, social support in the form of social integration (a sense of belonging in a group) contributes 13%.

Social support that occurs between peers can have an effect on the resilience (resilience) of an individual in the face of all pressures or problems that occur in the individual. Social support is the extent to which individuals feel that the provisions of social relations are available to them. Allen (in Salami, 2010) says that social relationships may be in the form of providing emotional, informational or tangible support from significant others, family members and friends. A study revealed that there is a relationship between peer support and resilience, which means that peer support can affect an individual's resilience (Ekasari & Andriyani, 2013).

Johnson & Johnson (in Mufidah, 2017) understands social support as something that provides benefits for adolescents including improving psychological well-being and adjustment, as well as clarifying self-identity, increasing self-esteem and reducing stress, as well as improving and maintaining physical health. The higher the social support an individual receives, the greater the individual's resilience. Based on the results of research on 30 blind adolescent subjects in Surakarta, it can be seen that there is a significant relationship between peer social support and the resilience of blind adolescents in Surakarta. This is in line with the research of Zeeshan and Aslam (2013) which states that social support (including from peers) is directly proportional to the resilience of the innate blind, acquired visual impairment, and visually impaired individuals. This means that the higher the social support, the higher the individual's resilience.

Based on data analysis, it is also known that the resilience of blind adolescents is influenced by the variable of peer social support by 30.5%, while the rest is influenced by other variables. The results of this study are in line with Amiliah's research (2017) which states that social support and religious factors are the two factors that most support the emergence of blind resilience in Yogyakarta. This opinion is also supported by research by Mar'atannisa (2017) and Masna (2013) which states that the resilience of the blind is supported by three factors, namely I am, I can, and I have (which includes social support from peers).

CONCLUSION

During adolescence, the visually impaired face more difficult challenges and problems than the visually impaired. This happens because blind teenagers have to face obstacles due to blindness and parallel developmental tasks. To prevent the emergence of negative responses due to facing obstacles and developmental tasks, visually impaired adolescents need resilience abilities. In general, resilience is characterized by several characteristics, namely the ability to face difficulties, resilience to deal with stress, and the ability to rise from the trauma experienced. To be able to develop this resilience ability, blind adolescents need resilience driving factors, one of which is the social support of friends from peers as a very influential social environment during adolescence.

The results showed that there was a relationship between peer social support and the resilience of blind adolescents in Surakarta. Based on this statement, it can be said that the higher the peer social support, the higher the resilience of the visually impaired adolescent will be. On the other hand, the lower the peer social support, the lower the resilience of blind adolescents will be.

REFERENCE

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