Abstract

Language disorders are delays in the language sector experienced by a child. A child can be said to have a delay in speaking if the child's level of speech development is below the level of quality of normal child's speech development in general according to his age, this can be seen from the correct use of words. The subject in this study with the initials MDE is 3 years old, this patient underwent routine therapy as much as twice a week. According to therapists who treat MDE, MDE is a child who has speech delay. The following are the results of researchers' observations of MDE who have speech delay. In this research, the phonics method is used, where the phonics method is "a method of teaching reading that is related to sound". Where these letters consist of vowels and consonants which are combined into syllables and sentences. This research uses experimental research methods, experimental research consists of pre-test and post-test. The post test showed an increase in the subject, on the first day the subject got a score of 8, on the second day 14, on the third day 16, and on the fourth day 18, where this score showed an increase. In conclusion, this phonics method is functional and can be used on research subjects of children aged 3 years.

Keyword: Speech Delay; Phonics Method; 3 year old child

1. Introduction

Language and speech play an important role in human life because they are communication tools. Through speaking, someone can interact, convey messages so that other people understand what they want or hope for. According to Hurlock (2005), language is communication by symbolizing thoughts and feelings so that other people understand, such as writing, speaking, symbolic language, facial expressions, pantonyms and art. This is in accordance with what Upton (2012) stated that language is a system of spoken symbols, but can be written or signed. Different from speaking, it is a form of language used to convey meaning.

Language disorders are delays in the language sector experienced by a child (Soetjiningsih, 1995). Speech disorder (speech delay) is a delay in language or speaking. Language disorders are delays in the language sector experienced by a child (Soetjiningsih, 1995). A child is said to be late in speaking if at that age his ability to produce sounds and communicate is below the average for children his age. In essence, speaking is an aspect of a child's development that starts from birth. A child's ability to communicate begins with his reaction to the sound or voice of his mother and father, even at the age of 2 months the child is already showing a social smile to everyone who interacts with him. At the age of 18 months, children are able to understand and produce around 20 meaningful vocabulary words. Meanwhile, at the age of 2 years, he is able to say 1 sentence consisting of 2 words, for example "mama went away", "I peed". If the child does not experience this, it can be categorized as having a speech delay.

Children with speech delays can be identified by the correct use of words, which is characterized by unclear pronunciation and when communicating they can only use sign language, so that parents and people around them are less able to understand the child's wishes, even though the child can actually understand what people are saying. (Anggraini, 2011).
According to the Siloam Hospital article (2023), parameters that can be used as a reference for observing whether the child experiences speech delay is as follows:

1. Age 2 years: Inability to pronounce at least 25 words or unable to name objects correctly
2. Age 2.5 years: Inability to use two-word phrases or noun combinations or unable to name body parts correctly.
3. Age 3: Not able to use 200 words, difficulty understanding what he is saying, unable to ask for things by name, or unable to construct a sentence.
4. Age over 3 years: Unable to imitate or pronounce previously learned words or unable to say the full name correctly.

Research conducted by Wahyu Ardyanti (2015) shows that after using the phonics method, students’ initial reading abilities have increased. It is difficult to describe the exact number of speech disorders, but it can be estimated that the incidence ranges from 1% to 32% in the normal population. In general, 60% of children who experience speech disorders will improve spontaneously at the age of less than three years. Aini (2022) stated that the research results have shown that there are 11 factors influencing speech delay that occurred in the subject of this case. The 11 factors are the concept of multilingualism, good models to imitate, lack of opportunities to practice speaking, lack of motivation to speak, guidance, encouragement, peer relationships, adjustment, classification into sex roles, gender, and large numbers family. Apart from that, there were also 3 factors found in this research, namely the child’s habit of watching television, the sibling system, and the knowledge of people around the subject who did not understand these obstacles. Speech disorder (speech delay) is a delay in language or speaking. Language disorders are delays in the language sector experienced by a child (Soetjiningsih, 1995).

Children aged three years will begin to recognize the symbols and writing around them (Pinter, 2006). The subject in this study with the initials MDE is 3 years old. This patient undergoes routine therapy twice a week. According to therapists who treat MDE, MDE is a child who has speech delay. The following are the results of researchers’ observations of MDE who have speech delay.

**Speech Delay Type**

According to Tiel (2011: 34) there are several types of speech delay disorders, including:

1. Speech and Language Expressive Disorder is a child who experiences problems with language expression.
2. Specific Language Impairment is a language disorder which is a primary disorder caused by developmental disorders themselves, not caused by sensory disorders, neurological disorders or cognitive (intelligence) disorders.
3. Centrum Auditory Processing Disorder, namely this speech disorder is not caused by problems with hearing, hearing function or the ears functioning properly. It's just that you have difficulty processing information in the brain.
4. Pure Dysphatic Development is a developmental disorder of speech and expressive language which has weaknesses in the phonetic system.
5. Gifted Visual Spatial Learner, namely these characteristics both in their growth and development, their personality, and the characteristics of their own giftedness.
6. Disynchronous Developmental, namely the development of a gifted child, basically there is a deviation in development from the normal pattern. There is a lack of synchronization between internal development and external development.

**Speech Delay Factor**

One of the reasons why children are late in talking is because their speech organs are not yet ready. These speech organs include: respiratory organs, phonation organs or vocal cords, and articulation organs which include the lips, tongue, teeth, jaw, palate and throat. Another cause of children experiencing delays in speaking is incomplete preparation processes such as chewing, swallowing or sucking (Cristina, 2018). According to Papalia (2008), children who are late in speaking are when they are 2 years old, who tend to make mistakes in pronouncing words, then at the age of 3 years the child has a poor vocabulary or lacks vocabulary. At the age of 5 years children...
experience difficulty in naming or labeling objects. And this will affect your reading ability. One of the most common and most serious causes is the inability to encourage a child to talk, even when the child starts babbling.

**Phonic Method**

Sadjaah and Sukarja (1995) stated that the originator of this phonics method was Graham Bell’s father, namely Melvin Bell, with the term Visible Speech Method, which means a symbol of the sounds produced by the speaking apparatus. The phonics method is “a method of teaching reading that is related to sound”. Where these letters consist of vowels and consonants which are combined into syllables and sentences. Phonics in the Big Indonesian Dictionary (KBBI) is a method of teaching reading using simple phonetic concepts. So, what is meant by phonetics is the part of linguistics that studies the sounds of language acquired by humans without looking at the function of phonics as a differentiator of meaning in a language. The phonics method emphasizes word recognition through the process of listening to letter sounds. Initially, children are invited to recognize letter sounds, then synthesize them into syllables and words. Letter sounds are introduced by associating them with nouns, for example the letter “a” with the image “chicken”. Thus, this method is more synthetic than analytical.

The phonics method for reading emphasizes (a) understanding the relationships of letters and sounds in words, and (b) applying these relationships to analyze and interpret unknown words. In a phonics method of reading, children are explicitly taught how the letters of the alphabet and groups of letters are applied to the sounds in words. These are referred to as code-based or code-based lessons, words that are difficult to pronounce because they do not follow sound rules are also taught using the phonics method. According to Ardyanti (2015), the phonics method provides a basis for children in different pronunciations of each letter symbol.

**Purpose of Applying the Phonic Method**

In general, the aim of the Phonics Method is to develop and optimize language skills by using phonetic concepts (recognition of language sounds) (Thahir, 2012). According to Ardyanti (2015), the phonics method provides a basis for children in different pronunciations of each letter symbol. In this research the author used the phonics method, because this phonics method is suitable for use with children who experience speech delays as in previous research mentioned by Ardiyanti (2015).

**Advantages and Disadvantages of the Phonics Method**

**a. Advantages**

According to Thahir (2012), the advantages of the Phonics Method are as follows:

1. Teaching phonics in accordance with the work of the brain.
2. Easy to implement (with simple demonstrations that you can do yourself).
3. In accordance with the language character.
4. Improve readability.
5. Teach the language thoroughly.

**b. Disadvantages**

Dhieni (in Rianto, et al, 2016) said that this phonics method has several weaknesses, namely:

1. Not appropriate when used as a first approach to reading.
2. Children must really concentrate their thoughts and the sound of words.
3. Learning this method takes a long time, if the child is not familiar with learning the alphabet before.

**Types of Phonic Method**

According to Thahir (2012), of these two types, phonics has several stages, namely listening, speaking, writing and reading.

1. Listening at this stage, learning is done by telling stories and singing. There is a song guide from A to Z.
2. Talking Learning is done by giving children a series of picture books and critical questions. 1. Listening At this stage, learning is done by telling stories and singing. There is a song guide from A to Z B. Disadvantages The aim of these 2 stages is for children to practice listening, concentrating and enriching their vocabulary.

3. Writing is motor preparation, knowledge of sounds and letter shapes. The goal is for children to be able to concentrate, coordinate eyes and hands and develop perception.

4. Reading At this stage children learn language from the smallest language order to the most complex level (namely from phonemes, syllables, words, phrases and sentences) and starting from concrete objects to abstract objects.

2. Research Methods

This research uses a type of experimental research which consists of a pre-test and post-test. Pre-test is a stage carried out before giving a test or assessment using the Phonics method to the child, usually this stage will start from conducting interviews with therapists and parents then observing the child who will be given intervention or assessment. The post test is a final evaluation in the form of questions that the author gives to the subject after the lesson/material has been delivered. The type of test used is an objective test. This research focuses on 1 subject with the initials DA aged 3 years who is undergoing therapy at the Grha Husada Gresik Hospital. The stages of the Phonics method in this research are as follows:

a. Implementation of the Assessment

This assessment will be carried out by observing one child who has a speech delay.

b. Providing Intervention

This intervention will be provided after all assessments have been carried out. This intervention will be adjusted to the development results of the child being assessed. The intervention will be carried out for 4 days. At the first meeting, children are given flash cards for introduction. After the introduction, children are invited to recognize the vowel letters "a, i, u, e, o". This introduction to vowel letters is the beginning of an introduction to the phonics method. At the second meeting, children are given flash cards and are invited to repeat what they have learned previously, and then children are invited to recognize syllables such as "ba, bi, bu, be, bo". Table 1. Pretest Next, in the third meeting, children were invited to arrange two syllables into one word, such as “photo, dice”. At the fourth meeting, children are given flash cards which are then used to repeat what they have learned from the first meeting to the end and see their improvement.

c. Evaluation of the Assessment and Interventions Provided

This evaluation is after the entire series of assessments and interventions have been carried out, an evaluation will be given regarding the implementation of the assessments and interventions. The evaluation is carried out for one day.

3. Results and Discussion

a. Implementation of the Assessment

Pre Test (Before Intervention is given)

This stage is the stage that is carried out before giving a test or assessment using the Phonics method to the child. Usually this stage will start from conducting interviews with therapists and parents then observing the child who will be given intervention or assessment.

Table 1. Personal Information

<table>
<thead>
<tr>
<th>Name</th>
<th>MDE</th>
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<tr>
<td>Date and Place of Birth</td>
<td>Gresik, August 21 2019</td>
</tr>
<tr>
<td>Age</td>
<td>3 Years Old</td>
</tr>
<tr>
<td>Gender</td>
<td>Men</td>
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According to Stainberg (in Yusuf, 2011)

<table>
<thead>
<tr>
<th>No</th>
<th>Indicator</th>
<th>Criteria</th>
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</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>TM</td>
</tr>
<tr>
<td>1.</td>
<td>Children can sound letter vocals (a,i,u,e,o)</td>
<td>✓</td>
</tr>
<tr>
<td>2.</td>
<td>Children can sound letter consonant</td>
<td>✓</td>
</tr>
<tr>
<td>3.</td>
<td>Children are capable mention sound designated letter</td>
<td>✓</td>
</tr>
<tr>
<td>4.</td>
<td>Children can combine letters become terms say</td>
<td>✓</td>
</tr>
<tr>
<td>5.</td>
<td>Children can combine syllable to be say</td>
<td>✓</td>
</tr>
</tbody>
</table>

<table>
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<tr>
<th>Ability</th>
<th>Abbreviation</th>
<th>Score</th>
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<tbody>
<tr>
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<td>SM</td>
<td>4</td>
</tr>
<tr>
<td>Capable</td>
<td>M</td>
<td>3</td>
</tr>
<tr>
<td>Less Fortunate</td>
<td>KM</td>
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</tr>
<tr>
<td>Unable</td>
<td>TM</td>
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</tr>
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</table>
b. Implementation of Intervention

This intervention was carried out for 4 days, according to the AD subject's therapy schedule.

**First Day**

On this first day, March 6 2023 at 13.15, the subject was introduced to the vowels first using flash cards. Based on the results of the observation and pre-test, the subject showed that he was able to recognize the letters of the alphabet in sequence, but not the vowels. The introduction of vowel letters to the subject was carried out in one meeting, on the first day the subject showed that the subject quickly understood and memorized the vowel letters.

![Picture 1 Day 1](image1)

**The Second Day**

At the intervention stage on the second day, on March 9 2023 at 10.00, subjects began to be taught to recognize several syllables such as "Ba, Bi, Bu, Be, Bo" with a flash card. The second day The third day Figure 2. Implementation of intervention on day 2 Figure 1. Implementation of intervention on day 1 For the introduction of these syllables, the subject responded with a little difficulty, and it took several repetitions for the subject to understand and memorize some of the syllables.

![Picture 2 Day 2](image2)
The Third Day

On the third day, March 13 2023 at 12.00, the intervention started with repeating vowels, repeating the pronunciation of syllables, and a little teaching to combine syllables into nouns, such as "Photo, Dice" using flash cards, the subject responded a little slowly because of At first the subject had not really memorized how a syllable was read, especially after it was made into a word, the subject was a little confused. However, on the third day the subject was slightly diverted with "play therapy" to make the mood good again, and the subject would be easier to memorize. After "play therapy" was carried out, the intervention continued and the subject began to appear to have taken the initiative to try to read even though some syllables were read incorrectly.

![Picture 3 Day 3]

The Fourth Day

On the fourth day, March 14 2023 at 10.00, the subject began to like using flash cards, so that when the intervention was carried out the subject automatically took out flash cards, but the flash cards were more likely to be made for playing. After the subject was satisfied playing, the intervention was implemented. On the last day the subject showed that the pronunciation of the vowels was pronounced correctly, starting from "a, i, u, e, o". This development looked good. In this last intervention, the subject also began to be able to read with syllables that had been formed into nouns. So the subject shows progress using this phonics method.

![Picture 4 Day 4]
Post Test (After being given the Intervention)

Tabel 4 Post Test

According to Stainberg (in Yusuf, 2011)

<table>
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<th>Criteria</th>
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</thead>
<tbody>
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<td></td>
<td></td>
<td>Day 1</td>
</tr>
<tr>
<td>1.</td>
<td>Children can sound letter vocals (a,i,u,e,o)</td>
<td>2 (KM)</td>
</tr>
<tr>
<td>2.</td>
<td>Children can sound letter consonant</td>
<td>2 (KM)</td>
</tr>
<tr>
<td>3.</td>
<td>Children are capable mention sound designated letter</td>
<td>2 (KM)</td>
</tr>
<tr>
<td>4.</td>
<td>Children can combine letters become terms say</td>
<td>2 (KM)</td>
</tr>
<tr>
<td>5.</td>
<td>Children can combine syllable to be say</td>
<td>2 (KM)</td>
</tr>
<tr>
<td></td>
<td>Total Score</td>
<td>8</td>
</tr>
</tbody>
</table>
Development Diagram

The diagram above shows that this phonics method is able to improve the reading ability of speech delayed children at the age of 3 years. It can be seen from the first meeting to the last meeting that the subject has improved in terms of reading and recognizing letters according to developments appropriate to his age.

4. Conclusion

Speech delay is a delay in a child's ability to convey something or speak. In this condition, the child is unable to convey the contents of his thoughts well, so his words are difficult to understand. Children with speech delay are able to pronounce words, but have difficulty connecting them. This condition is often ignored by parents because it is considered something normal and can go away on its own (Siloam Hospital article, 2023).

This research is aimed at how to overcome speech delay in 3 year old children using the phonics method. Phonics learning method developed by Marilyn Jager Adams (2012) is one of the initial reading learning methods implemented in the world of basic education. The phonics method is an alphabet lesson that is given first to children learning the names of letters and their sounds. After learning the sounds of letters they start combining several letters to form words. The use of the phonics method for a 3 year old speech delayed child looks quite effective using flash card media. Where flash cards that have colors will make children more interested and put them in a better mood, as can be seen from the subjects given by this method.
5. References


