

# Roleplay Method to Enhance Self-Protection Awareness Against Sexual Abuse in Children with Down Syndrome

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**Abstract:**

Children with Down syndrome are at heightened risk of sexual abuse due to cognitive, communication, and social limitations, while self-protection education remains insufficiently integrated into special education practice. This study aims to examine the systematic implementation of the roleplay method in enhancing self-protection awareness against sexual abuse among children with Down syndrome. A qualitative case study design was employed in two special schools in Indonesia. Participants included students with Down syndrome, teachers, school principals, and parents. Data were collected through in-depth interviews, participant observation, and document analysis, and analyzed using the interactive model of Miles, Huberman, and Saldaña. The findings indicate that structured roleplay, implemented through careful planning, collaborative organization, guided simulation, and continuous evaluation, significantly improved students' ability to recognize private body parts, differentiate between safe and unsafe touch, assertively refuse inappropriate behavior, and identify trusted adults for reporting. Repetition and contextual variation of scenarios facilitated behavioral internalization and increased student confidence. The involvement of teachers, school leaders, and parents strengthened the sustainability of the intervention and supported skill transfer beyond the classroom setting. This study contributes theoretically by integrating experiential learning principles with instructional management in special education contexts and practically by offering a structured and replicable model for self-protection education. Roleplay emerges as an effective pedagogical strategy for promoting safety awareness and protective competencies among children with Down syndrome.

**Keyword:** Down syndrome; experiential learning; roleplay method; self-protection awareness; sexual abuse prevention; special education

## Introduction

In facing the global challenges of the 21st century, education is required not only to produce academically competent learners but also individuals who are capable of self-protection, understanding social boundaries, and developing awareness of bodily rights and personal safety (Ofita & Sururi, 2023). This demand becomes even more critical in the context of special education, particularly for children with Down syndrome, who are at higher risk of sexual abuse due to cognitive, communication, and social limitations. Teachers therefore play a crucial role in delivering effective self-protection education, which requires adaptive pedagogical competence, including the ability to design, implement, and evaluate learning

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strategies tailored to the characteristics of students with intellectual disabilities (Hartwig & McMullen, 2021; Nirwaningtyas & Nuriadin, 2025; Ortega, Walsh, Bódi, Hawkins, & Bright, 2023).

Special schools, as formal institutions providing education for children with special needs, bear significant responsibility for ensuring students' safety and well-being through not only academic instruction but also protective education. In this context, the implementation of participatory and experiential learning methods such as roleplay becomes a strategic instrument to enhance self-protection awareness among children with Down syndrome. International studies indicate that school-based sexual abuse prevention programs are effective in improving knowledge and protective skills, particularly when interactive and simulation-based approaches are employed (Celik & Lithari, 2026).

Roleplay is no longer viewed merely as a recreational activity but as a structured learning process that allows children to practice protective skills within safe and guided social simulations (Van Ments, 2015). Systematic reviews focusing on individuals with intellectual disabilities reveal that roleplay is a dominant component of sexual abuse prevention programs because it facilitates concrete behavioral responses such as saying "no," withdrawing from unsafe situations, and reporting incidents to trusted adults (Chen & Martin, 2015). However, experimental findings also suggest that increased knowledge does not automatically translate into protective behavior in real-life situations, indicating the need for contextualized and sustained pedagogical implementation (Tompkins, 1998).

In Indonesia, self-protection education for children with Down syndrome has not yet been optimally integrated into curriculum design and instructional management. Challenges such as limited teacher training, lack of operational guidelines, and cultural perceptions that consider sexual education a sensitive issue hinder systematic implementation. Consequently, children's protective skills remain underdeveloped despite their heightened vulnerability.

Previous studies have demonstrated that school-based interventions can improve awareness and protective skills among children with intellectual disabilities (Wanasinghe & Dissanayake, 2024). Muccigrosso (1991) emphasized the importance of adaptive preventive strategies for individuals with developmental disabilities (Muccigrosso, 1991). Warraitch et al. (2021) found that school-based prevention programs for children with intellectual disabilities showed positive outcomes in terms of knowledge acquisition and protective responses (Warraitch, Amin, & Rashid, 2021). Nevertheless, these studies tend to focus on general program effectiveness, while the systematic pedagogical implementation of roleplay covering planning, organizing, implementing, and evaluating the method within special school contexts remains underexplored.

The urgency of this study lies in the need to develop a structured, practical, and sustainable model of self-protection education for children with Down syndrome. Considering their heightened vulnerability to sexual abuse and the necessity for concrete and comprehensible learning strategies, the application of roleplay becomes a critical component of special education systems.

Despite the increasing recognition of the importance of self-protection education for children with Down syndrome, its implementation in special education settings in Indonesia remains fragmented and insufficiently structured. Existing practices are often limited by the absence of clear pedagogical guidelines, inadequate teacher preparation, and cultural sensitivities surrounding sexual education. Furthermore, previous studies have primarily focused on the effectiveness of intervention programs in general, without providing a comprehensive explanation of how roleplay is systematically planned, organized, implemented, and evaluated within instructional practice.

Therefore, the research problem of this study is how the roleplay method can be systematically implemented within instructional management to enhance self-protection awareness against sexual abuse among children with Down syndrome.

This study aims to examine and describe the systematic implementation of the roleplay method covering planning, organizing, implementation, and evaluation in enhancing self-protection awareness against sexual abuse among children with Down syndrome in special education settings.

## Literature Study

Research consistently shows that children and individuals with intellectual and developmental disabilities (IDD), including those with Down syndrome, face a disproportionately higher risk of sexual abuse compared to their non-disabled peers. Cognitive limitations, communication barriers, social dependence, and difficulties in interpreting social cues contribute to increased vulnerability. Large-scale reviews and safeguarding reports emphasize that prevention efforts must move beyond reactive protection mechanisms toward proactive educational strategies that equip children with self-protection competencies. Studies indicate that when children with IDD are explicitly taught how to recognize inappropriate behavior, assert boundaries, and report unsafe situations, their awareness and response capacity significantly improve, although the translation of knowledge into real-life behavior requires repeated practice and contextual reinforcement (Reis, Häbler, Daubmann, & Chodan, 2022)

Within this framework, sexuality and personal safety education has emerged as a critical component of inclusive education. Systematic reviews of school-based child sexual abuse prevention programs demonstrate that structured interventions can improve children's knowledge of body ownership, safe and unsafe touch, and help-seeking behavior. However, the effectiveness of such programs depends heavily on the instructional design and the inclusion of active learning strategies rather than passive information delivery (Celik, 2024; Che Yusof, Norhayati, & Mohd Azman, 2022). For learners with intellectual disabilities, adaptations are essential to ensure that abstract concepts such as consent, privacy, and bodily autonomy are presented in concrete, developmentally appropriate ways.

Experiential learning approaches, particularly roleplay, have been widely recommended in the literature as effective tools for teaching protective behaviors. Roleplay allows learners to rehearse specific responses such as saying "no," moving away from unsafe situations, and reporting to trusted adults within a structured and supportive environment. This method aligns with social learning theory (Bandura & Walters, 1977), which emphasizes modeling, imitation, and reinforcement in skill acquisition, as well as (Vygotsky & Cole, 1978) concept of the Zone of Proximal Development, where guided interaction facilitates cognitive and social growth. Empirical evidence indicates that roleplay-based interventions enhance not only knowledge acquisition but also behavioral rehearsal, which is particularly crucial for children with intellectual disabilities who benefit from repetition and concrete practice (Stobbe, Scheffers, van Busschbach, & Didden, 2021).

Theoretical and practical guidance from key educational texts further strengthens this pedagogical foundation. Briggs (1995), in *Developing Personal Safety Skills in Children with Disabilities*, argues that children with disabilities require explicit, repetitive, and scenario-based instruction to internalize personal safety concepts effectively (Briggs, 1995). Similarly, Wehmeyer and colleagues (2017) emphasize that self-determination and autonomy skills must be intentionally cultivated in students with intellectual disabilities through structured, participatory learning environments (Wehmeyer, Shogren, Little, & Lopez, 2017). These perspectives highlight that self-protection education should not be incidental but systematically integrated into the curriculum. When combined with collaborative involvement from teachers, school

leaders, and families, roleplay becomes not merely an instructional technique but a strategic educational approach that strengthens agency, self-advocacy, and long-term protective competence among children with Down syndrome.

Although previous studies consistently highlight the effectiveness of school-based sexual abuse prevention programs for children with intellectual disabilities, important limitations remain. Studies by Celik (2024) and Che Yusof et al. (2022) primarily emphasize improvements in knowledge and awareness through structured interventions; however, they provide limited explanation regarding how such knowledge is translated into consistent protective behavior in real-life situations. In contrast, Chen and Martin (2015) as well as Stobbe et al. (2021) underline the importance of roleplay in facilitating behavioral rehearsal and skill acquisition, yet their focus remains on the general effectiveness of the method rather than on its systematic implementation within instructional practice.

Furthermore, while theoretical perspectives such as social learning theory and experiential learning support the use of roleplay, there is still a lack of empirical explanation on how these principles are operationalized by teachers in real classroom settings, particularly for children with Down syndrome. Most existing studies do not explicitly describe how roleplay is planned, organized, implemented, and evaluated as part of instructional management in special education contexts.

Therefore, a clear research gap exists in understanding the comprehensive and systematic implementation of roleplay within instructional practice, particularly in enhancing self-protection awareness against sexual abuse among children with Down syndrome.

## **Methods**

This study employed a qualitative approach with a descriptive case study design. A qualitative approach was chosen to enable an in-depth understanding of the implementation of the roleplay method in enhancing self-protection awareness against sexual abuse among children with Down syndrome within their natural educational setting. Qualitative inquiry allows researchers to explore meanings, lived experiences, and contextual dynamics that cannot be captured through quantitative measurement alone (Creswell & Clark, 2017). The case study design was selected because it facilitates comprehensive examination of a contemporary phenomenon within its real-life context, particularly when the boundaries between the phenomenon and its context are not clearly evident (Adrias & Ruswandi, 2025; Yin, 2017)(Yin, 2017). The study was conducted at two special schools in Indonesia: SLBN B Garut Kota and SLB YPDP Kota Bandung. These schools were purposively selected based on their implementation of instructional activities addressing self-protection education for students with Down syndrome. Research participants included students with Down syndrome, classroom teachers, special education teachers, school principals, and parents who were directly involved in the learning process.

These schools were purposively selected based on specific academic considerations relevant to the research objectives. Both institutions have actively implemented self-protection education practices for students with Down syndrome and demonstrate variations in instructional management, allowing for a comparative and in-depth exploration of roleplay implementation. Additionally, the selection was guided by the principle of information-rich cases in qualitative research, where the chosen sites provide meaningful insights into the phenomenon under investigation. This purposive selection enables the study to capture contextual, pedagogical, and organizational dynamics that are essential for understanding the systematic implementation of the roleplay method.

Data were collected through methodological triangulation, consisting of in-depth interviews, participant observation, and document analysis. In-depth interviews were conducted with teachers, principals, and parents to explore planning, implementation strategies, perceived challenges, and observed learning outcomes. Participant observation was carried out during roleplay sessions to document student engagement, behavioral responses, and instructional interactions. Document analysis included lesson plans, teaching modules, student progress reports, and relevant school records. In qualitative research, the researcher functions as the primary instrument (human instrument), as interaction with participants and the field context forms an integral part of the inquiry process (Lincoln & Guba, 1985). Supporting instruments included interview guides, observation checklists, field note templates, and document analysis matrices to ensure systematic data collection.

Trustworthiness of the data was established using the four criteria proposed by Lincoln and Guba (1985): credibility, transferability, dependability, and confirmability. Credibility was strengthened through data triangulation and member checking with key informants to validate interpretations. Transferability was ensured by providing rich, thick descriptions of the research context and instructional processes. Dependability and confirmability were reinforced through maintaining an audit trail, systematic documentation, and peer debriefing to ensure transparency and consistency of the analytical procedures (Merriam & Tisdell, 2015; Miles, Huberman, & Saldaña, 2014; Shenton, 2004).

Data analysis followed the interactive model of Miles, Huberman, and Saldaña (2014), which includes three concurrent stages: (1) data reduction, involving selection, coding, categorization, and simplification of raw data; (2) data display, in which organized information was presented in narrative form, matrices, and thematic tables to facilitate interpretation; and (3) conclusion drawing and verification, conducted iteratively to ensure analytical rigor and coherence of findings. The analysis process occurred simultaneously with data collection, allowing adaptive refinement of emerging themes. The research was conducted from February to April 2025, encompassing preparation, field data collection, data analysis, and report writing. Through this qualitative case study design, the study aims to provide substantive contributions to the development of context-sensitive and evidence-based instructional strategies for self-protection education among children with Down syndrome in special education settings.

## **Results**

### **Planning of the Roleplay Implementation**

The planning stage of the roleplay method was conducted systematically to ensure that self-protection education was delivered in a structured, developmentally appropriate, and context-sensitive manner for children with Down syndrome. Based on document analysis of lesson plans and instructional modules, teachers designed learning objectives focusing on four core competencies: recognizing private body parts, distinguishing safe and unsafe touch, expressing refusal assertively, and reporting incidents to trusted adults. These objectives were translated into simple, concrete, and repetitive roleplay scenarios tailored to students' cognitive and communication levels. The planning process also involved adapting language use, incorporating visual supports, and determining clear behavioral indicators for evaluation.

From the documentation reviewed, the lesson plans explicitly included scenario scripts, teacher prompts, and expected student responses. Teachers prepared short situational dialogues such as: a peer attempting inappropriate touch, a stranger offering gifts, or a family acquaintance asking for secrecy. Each scenario was structured with three stages: introduction of context, enactment of response (e.g., saying "no," moving away), and reporting to a trusted adult. Visual cue cards and body diagrams were prepared to reinforce conceptual understanding. The integration of visual and verbal cues was intended to minimize abstraction

and maximize comprehension, consistent with the developmental needs of students with intellectual disabilities.

Interview data revealed that teachers deliberately simplified instructional language and repeated key protective phrases during the planning phase. One teacher stated:

“We cannot explain concepts like ‘sexual harassment’ directly. So, we break it down into simple messages such as ‘This is your private part,’ ‘No one may touch here,’ and ‘If someone tries, say no and tell your teacher or parents.’ The scenarios are written in very simple steps.” (Teacher A, interview, March 2025)

The school principal further emphasized the importance of structured preparation:

“Roleplay must be planned carefully. It is not spontaneous acting. We review the lesson plan together to ensure that the scenario is safe, age-appropriate, and aligned with students’ developmental levels.” (Principal, interview, March 2025)

Observational findings during the preparatory stage showed that teachers rehearsed the roleplay flow before classroom implementation, sometimes practicing with fellow teachers to anticipate possible student reactions. Teachers also arranged seating and classroom space to create a safe simulation area. Field notes indicated that students were introduced to body-part visuals prior to engaging in the simulation, suggesting that cognitive priming was embedded into the instructional design.

The planning structure can be summarized in the following table:

<b>Component</b>	<b>Description of Planning Activities</b>
Learning Objectives	Identifying private body parts; distinguishing safe/unsafe touch; refusal skills; reporting mechanisms
Scenario Design	Short, concrete, repetitive scripts tailored to cognitive level
Instructional Media	Visual cue cards, body diagrams, simplified dialogue prompts
Behavioral Indicators	Ability to say “no,” move away, identify trusted adult
Stakeholder Involvement	Lesson plan review by principal; coordination with parents

Overall, the planning phase demonstrates that the implementation of roleplay was not incidental but strategically designed through documented lesson planning, collaborative review, and adaptation to learners’ developmental characteristics. The triangulation of interviews, observations, and documentation confirms that careful instructional preparation served as the foundational stage in fostering effective self-protection learning among children with Down syndrome.

### **Organizing and Multi-Stakeholder Involvement**

The organization of the roleplay-based self-protection learning was characterized by collaborative coordination among teachers, school leaders, and parents to ensure consistency and sustainability of implementation. Based on document analysis and school program records, the roleplay activities were not conducted as isolated classroom practices but were integrated into the broader instructional framework of the school. The principal assigned specific responsibilities to classroom teachers and special education teachers in preparing scenarios, monitoring student progress, and communicating learning outcomes to parents. This organizational structure reflects an intentional effort to embed protective education within the school’s instructional management system.

Interview findings revealed that teachers regularly coordinated with each other before conducting the sessions. One teacher explained:

“Before starting the roleplay sessions, we discussed the students’ readiness. Some children are more verbal, others respond better through gestures. So we divided roles accordingly and supported each other during the simulation.” (Teacher B, interview, March 2025)

The principal also highlighted the institutional commitment to safeguarding:

“We consider this program part of our responsibility to protect students. Therefore, teachers are encouraged to collaborate and report progress during regular staff meetings.” (Principal, interview, March 2025)

Observational data showed that during classroom implementation, one teacher often acted as facilitator while another observed and documented student responses. This division of roles allowed for more focused interaction and accurate monitoring of behavioral changes. In several sessions, teachers adjusted the grouping of students to maintain a supportive environment, particularly for those who required additional prompting. Field notes indicated that when a student hesitated to respond during a refusal scenario, the assisting teacher gently modeled the expected response before encouraging the student to repeat it. This coordinated approach reflects structured classroom management and collective responsibility.

Parental involvement also emerged as a critical organizational component. Interviews with parents revealed that teachers communicated key messages and protective phrases for reinforcement at home. A parent stated:

“After the class, the teacher told us what they practiced. At home, we repeated the words ‘No, don’t touch’ and reminded our child to tell us if something feels uncomfortable.” (Parent, interview, April 2025)

Supporting documentation included communication logs between teachers and parents, as well as notes in students’ progress reports. This indicates that organizational management extended beyond classroom boundaries, fostering continuity between school and home environments.

The organizational structure of implementation can be summarized as follows:

<b>Organizational Aspect</b>	<b>Implementation Description</b>
Role Distribution	Facilitator teacher and observing teacher during sessions
Leadership Support	Principal oversight and integration into school program
Teacher Collaboration	Pre-session coordination and post-session reflection
Parent Involvement	Communication of learning content and home reinforcement
Monitoring Mechanism	Documentation in progress reports and staff meetings

Overall, the findings demonstrate that the effectiveness of the roleplay method was supported by a structured organizational framework involving coordinated teacher roles, leadership oversight, and parental collaboration. The triangulation of interviews, observations, and documentation confirms that multi-stakeholder engagement strengthened both the consistency and sustainability of self-protection education for children with Down syndrome.

## Implementation of Roleplay in Classroom Practice

The implementation phase demonstrated that roleplay was conducted through structured yet flexible classroom simulations designed to foster active participation and experiential learning among students with Down syndrome. Based on classroom observations, each session began with a brief review of previously introduced concepts, such as identifying private body parts using visual aids. Teachers then introduced a simple scenario, clearly explaining the context before assigning roles. Students alternated between acting as the “child” and the “other person” in the scenario, while the teacher guided and modeled appropriate responses when necessary.

During the simulation, students were encouraged to demonstrate three key protective actions: verbally refusing inappropriate touch, physically moving away from the situation, and identifying a trusted adult to report to. Field notes indicated that most students responded positively to the structured repetition embedded in the activity. For example, when presented with a scenario involving inappropriate physical contact, several students confidently said, “No, don’t touch,” while stepping back as previously practiced. One observation record noted that a student who initially remained silent began to respond verbally after observing peers and receiving gentle prompting from the teacher.

Interview data further illustrate the experiential nature of the implementation. A teacher explained:

“When we act out the situation, the children understand better. If we only talk, they forget. But when they practice saying ‘no’ and stepping away, it becomes something they remember.” (Teacher A, interview, March 2025)

Another teacher emphasized the importance of repetition:

“We repeat the scenarios several times in different contexts. Sometimes it is a stranger, sometimes someone familiar. The repetition helps them internalize the response.” (Teacher B, interview, March 2025)

Observation findings also revealed emotional engagement among students. In certain scenarios, students displayed facial expressions of discomfort or assertiveness consistent with the enacted situation. Teachers provided immediate reinforcement when students demonstrated appropriate protective responses, praising them and briefly explaining why the response was correct. This reinforcement appeared to strengthen students’ confidence and willingness to participate in subsequent simulations.

Documentation in students’ progress notes indicated gradual improvement in response consistency over multiple sessions. Early sessions showed hesitation and reliance on teacher modeling, whereas later sessions reflected more spontaneous and independent protective responses.

The key implementation outcomes observed during classroom practice are summarized below:

<b>Observed Behavior</b>	<b>Description of Student Response</b>
Verbal Refusal	Students said “No” or similar assertive phrases when prompted
Physical Withdrawal	Students stepped back or moved away from simulated threat
Reporting Behavior	Students identified teacher or parent as trusted adult
Emotional Expression	Displayed appropriate expressions (firm tone, serious face)

Overall, the implementation phase confirms that roleplay functioned as an experiential pedagogical strategy enabling students to rehearse protective behaviors in a safe and guided environment. The convergence of observational data, interview narratives, and documentation suggests that repeated simulation and teacher

scaffolding were central to fostering practical self-protection awareness among children with Down syndrome.

### Evaluation and Impact on Self-Protection Awareness

The evaluation phase focused on assessing changes in students’ understanding and behavioral responses following repeated roleplay sessions. Evaluation was conducted through continuous observation, informal performance assessment during simulations, and review of student progress documentation. Rather than using formal written tests considering the cognitive characteristics of students with Down syndrome teachers employed authentic assessment strategies, emphasizing observable behavioral indicators such as the ability to refuse inappropriate touch, withdraw from unsafe situations, and identify trusted adults.

Classroom observations indicated a gradual improvement in students’ responsiveness and confidence. In earlier sessions, several students required direct modeling before expressing refusal. However, over time, students began to respond more spontaneously. Field notes recorded instances in which students independently said “No!” without teacher prompting when a simulated unsafe situation was introduced. One observation entry described how a student who had previously remained passive demonstrated assertive body language and clear verbal refusal during a later session. This progression suggests internalization of protective responses through repeated experiential practice.

Interview data further support these findings. A teacher reflected:

“At first, they were shy and confused. But after several practices, they started to react faster. Some of them even reminded their friends to say ‘no.’ That was a significant change.” (Teacher A, interview, April 2025)

A parent also reported behavioral transfer beyond the classroom setting:

“One day at home, my child said ‘Don’t touch’ when a cousin tried to joke around physically. That surprised us, but it showed that the lesson stayed with them.” (Parent, interview, April 2025)

Documentation in student progress records indicated incremental development across four observed domains: recognition of private body parts, differentiation between safe and unsafe touch, refusal skills, and reporting behavior. Teachers noted that while cognitive understanding varied among students, behavioral rehearsal appeared to strengthen response consistency.

The evaluation outcomes can be summarized as follows:

<b>Evaluation Domain</b>	<b>Observed Impact</b>
Recognition of Private Areas	Increased accuracy in identifying protected body parts
Safe vs. Unsafe Touch	Improved differentiation through verbal explanation and gesture
Refusal Skills	More confident and spontaneous verbal and physical responses
Reporting Behavior	Clear identification of trusted adults (teacher/parent)

Overall, the evaluation findings demonstrate that the roleplay method contributed positively to the development of practical self-protection awareness among children with Down syndrome. The triangulation of observational data, interview testimony, and documentation confirms that structured simulation, repetition, and supportive feedback facilitated measurable behavioral change. While individual progress levels varied, the consistent pattern of improvement across sessions indicates that roleplay serves as an effective pedagogical strategy for strengthening protective competencies in special education settings.

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## Discussion

The findings of this study demonstrate that the systematic implementation of roleplay contributes significantly to enhancing self-protection awareness among children with Down syndrome. The planning stage, characterized by structured scenario design, simplified instructional language, and the integration of visual supports, reflects principles of developmentally appropriate practice in special education. This aligns with Vygotsky's (1978) concept of guided learning within the Zone of Proximal Development, where structured adult scaffolding enables children with cognitive limitations to internalize new concepts through social interaction. The deliberate simplification of protective messages such as identifying private body parts and practicing refusal responses indicates that abstract notions of consent and bodily autonomy were translated into concrete, comprehensible learning units.

The organizational findings highlight that the effectiveness of roleplay was not solely determined by classroom execution but by coordinated collaboration among teachers, school leaders, and parents. This supports inclusive education frameworks emphasizing whole-school responsibility for safeguarding vulnerable learners. The involvement of multiple stakeholders ensured continuity between school-based instruction and home reinforcement, strengthening skill retention. Such findings resonate with Wehmeyer's (2017) perspective on fostering autonomy and self-determination through structured environmental support. When self-protection education is embedded within institutional planning and communication systems, it transitions from a temporary intervention into a sustainable safeguarding strategy.

The implementation phase confirmed that experiential rehearsal plays a critical role in behavioral skill acquisition. Observational data showing progressive improvement in spontaneous refusal and reporting behaviors reinforce Bandura's (1977) social learning theory, which posits that modeling, imitation, and repeated practice enhance behavioral competence. Consistent with findings from Stobbe et al. (2021), roleplay allowed students to rehearse protective actions in a safe and guided context. Importantly, this study extends previous research by demonstrating that repeated contextual variation in scenarios such as involving strangers versus familiar individuals supports deeper behavioral generalization. This addresses concerns raised by Reis et al. (2022), who noted that knowledge gains do not always translate into real-life protective behavior without sufficient practice and contextual reinforcement.

Evaluation results further indicate that measurable behavioral change occurred over time, particularly in the domains of verbal refusal and identification of trusted adults. The progression from teacher-dependent responses to increasingly independent reactions suggests that experiential learning contributed to internalization of protective scripts. This finding supports Briggs' (1995) argument that children with disabilities require explicit, repetitive, and scenario-based instruction to internalize personal safety concepts effectively. Moreover, the reported transfer of learned behaviors to home environments demonstrates that roleplay can facilitate not only cognitive understanding but also practical self-advocacy.

From a theoretical standpoint, this study contributes to the literature by integrating experiential pedagogy with instructional management in special education contexts. While prior international research has emphasized the effectiveness of school-based prevention programs, fewer studies have documented the structured planning and organizational processes underlying successful implementation. This study shows that the impact of roleplay is strengthened when embedded within systematic instructional planning, collaborative organization, and continuous evaluation.

In summary, the discussion confirms that roleplay functions not merely as an instructional technique but as a strategic pedagogical approach capable of enhancing protective competencies among children with Down syndrome. By combining structured planning, collaborative organization, guided simulation, and

continuous evaluation, roleplay-based self-protection education addresses both cognitive and behavioral dimensions of vulnerability. These findings reinforce the importance of integrating experiential, context-sensitive approaches within inclusive and special education systems to promote long-term safety and empowerment for children with intellectual disabilities.

## Conclusions

This study concludes that the systematic implementation of the roleplay method effectively enhances self-protection awareness against sexual abuse among children with Down syndrome. Through structured planning, collaborative organization, guided simulation, and continuous evaluation, roleplay provides a concrete and developmentally appropriate learning approach that enables students to recognize private body parts, distinguish between safe and unsafe touch, express refusal, and identify trusted adults.

From a practical perspective, this study offers several specific implications. For teachers, roleplay can be adopted as a structured instructional strategy by developing simple, repetitive, and context-based scenarios aligned with students' cognitive characteristics. Teachers are encouraged to integrate visual supports, consistent verbal cues, and repeated simulations to strengthen behavioral internalization. For schools, the findings highlight the importance of institutional support through curriculum integration, teacher collaboration, and continuous monitoring of students' protective skills. Schools should also establish structured communication with parents to ensure reinforcement of protective behaviors beyond the classroom. For policymakers, this study underscores the need to develop clear guidelines, training programs, and policy frameworks that support the integration of self-protection education into special education systems in a systematic and sustainable manner.

In terms of future research, more specific investigations are recommended. Future studies should examine the long-term effectiveness of roleplay interventions through longitudinal designs to assess behavioral retention over time. Quantitative or mixed-method approaches are also needed to measure the impact of roleplay on specific behavioral outcomes. Additionally, further research could explore the integration of digital or technology-assisted roleplay simulations to enhance accessibility and scalability. Comparative studies across different types of disabilities or educational settings are also recommended to expand the generalizability of findings and refine instructional models.

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