

TEACHERS' AND STUDENTS' PERCEPTIONS OF THE IMPLEMENTATION OF DIAGNOSTIC ASSESSMENT IN INDONESIAN LANGUAGE LEARNING IN GRADE III ELEMENTARY SCHOOL

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ARTICLE INFO	ABSTRAK
Diterima: 02 Februari 2026 Direvisi: 21 Februari 2026 Disetujui: 25 Maret 2026 Tersedia Daring: 30 April 2026 Keywords: <i>persepsi guru, persepsi siswa, asesmen diagnostik, Bahasa Indonesia, Kurikulum Merdeka</i>	Cara pandang guru dan siswa terhadap pelaksanaan asesmen diagnostik memiliki peran yang menentukan dalam keberhasilan implementasinya di kelas. Penelitian ini hadir untuk memotret secara kuantitatif bagaimana guru dan siswa kelas III UPTD SD Negeri 122384 Pematangsiantar memaknai praktik asesmen diagnostik yang mereka jalani dalam pembelajaran Bahasa Indonesia, sekaligus melihat apakah pandangan keduanya selaras. Penelitian menggunakan desain survei deskriptif kuantitatif. Responden terdiri dari 2 guru Bahasa Indonesia kelas III (total sampling) dan 20 siswa kelas III (purposive sampling). Data dikumpulkan lewat kuesioner Likert yang sudah diuji validitasnya (r lebih besar dari atau sama dengan 0,444) dan reliabilitasnya (Cronbach alpha guru = 0,921; siswa = 0,941). Analisis mengandalkan statistik deskriptif berbasis Mean Ideal (Mi) dan Standar Deviasi Ideal (SDi). Hasilnya cukup menggembirakan: persepsi guru masuk kategori sangat positif dengan skor terkonversi 80,47/100, sementara persepsi siswa berada di angka 81,50/100. Dari 20 siswa, 60% berkategori sangat positif dan sisanya 40% berkategori positif. Selisih antara keduanya hanya 1,03 poin pada skala 0 sampai 100, mencerminkan keselarasan yang nyata. Satu catatan penting: dimensi konatif guru (konsistensi tindak lanjut) lebih rendah dibandingkan dua dimensi lainnya, mengisyaratkan perlunya penguatan pada aspek implementasi. Temuan ini mendukung penyediaan template instrumen asesmen standar dan program coaching antar guru di tingkat sekolah dasar.
	ABSTRACT

Keywords: <i>teachers' perception, students' perception, diagnostic assessment, Indonesian language, Merdeka Curriculum</i>	The way teachers and students perceive diagnostic assessment plays a decisive role in how effectively it is implemented in real classrooms. This study was designed to quantitatively capture how Grade III teachers and students at UPTD SD Negeri 122384 Pematangsiantar make sense of the diagnostic assessment practices they experience in Indonesian Language learning, while also examining whether their perspectives align. A quantitative descriptive survey design was employed. Respondents consisted of 2 Grade III Indonesian Language teachers (total sampling) and 20 Grade III students (purposive sampling). Data were collected using Likert-scale questionnaires tested for validity ($r \geq 0.444$) and reliability (Cronbach alpha: teachers = 0.921; students = 0.941). Analysis relied on descriptive statistics based on Ideal Mean (Mi) and Ideal Standard Deviation (SDi). The results are encouraging: teachers' perceptions fall in the very positive category with a converted score of 80.47/100, while students' perceptions stand at 81.50/100. Of the 20 students, 60% are in the very positive category and the remaining 40% in the positive category. The gap between both groups is only 1.03 points on a 0-to-100 scale, reflecting genuine alignment. One notable finding: the teachers' conative dimension (consistency in assessment follow-up) scores lower than the other two
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dimensions, signaling the need to strengthen implementation. These findings support the provision of standardized assessment instrument templates and peer coaching programs at the elementary school level.

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1. INTRODUCTION

Education is inextricably linked to the effort to develop holistic, competent, and adaptable individuals. In the Indonesian context, one of the latest breakthroughs that reflects this spirit is the Independent Curriculum. In it, learning is no longer designed uniformly for everyone, but rather responds to the actual circumstances of each student. To respond accurately, teachers need a clear map of the classroom's initial conditions. This is where diagnostic assessments come into play (Supriyadi et al., 2022).

Diagnostic assessment is a process conducted before or at the beginning of a learning unit to identify students' initial competencies, strengths, weaknesses, and learning needs. The Ministry of Education, Culture, Research, and Technology ((Lenny Kurniati & Ratih Kusumawati, 2023) defines its primary objective as quickly mapping the abilities of all students so teachers know who has already understood, who has somewhat understood, and who has not at all. Without such a map, teachers run the risk of presenting material that is either too easy or too difficult, ultimately weakening learning motivation in both directions (Hamsa Ramadhan et al., 2022).

In Indonesian language learning in third grade, this challenge is palpable. Students aged 9 to 10 are transitioning from beginning reading to reading comprehension. Some are already fluent in summarizing text content, while others still struggle to construct simple sentences (Kemendikbudristek, 2022). This range of abilities makes a uniform approach both ineffective and unfair.

Perception is an often overlooked but crucial factor. How teachers interpret diagnostic assessments will influence how seriously and consistently they implement them. If viewed merely as an administrative obligation, they risk becoming an empty routine (Kusuma, 2025). How students perceive them is equally important: those who understand the purpose of assessments and feel safe are more likely to demonstrate their true abilities, resulting in more authentic data for teachers (Agustin, 2019).

Several previous studies have examined the implementation and effectiveness of diagnostic assessments (Purnawanto, 2023). However, studies that simultaneously examine perceptions from both teachers and students in the context of Indonesian language learning in elementary schools are still rare. This study aims to fill this gap with a measurable, quantitative approach (Munaroh, 2024).

Three main questions were answered: how do teachers perceive diagnostic assessment in Indonesian language learning for grade III of UPTD SD Negeri 122384, how do students perceive the same practice, and whether there is alignment between

the two that can produce practical, data-based recommendations.

2. THEORETICAL STUDY

2.1 Perception

Perception is an active cognitive process in which individuals select, organize, and give meaning to stimuli received from the environment. Robbins and Judge (2017, p. 166) define it as the process by which a person organizes and interprets sensory impressions in order to understand their environment meaningfully. Walgito (2010) adds that this process is personal and subjective: two people can observe the same situation but produce different images, depending on their respective backgrounds, experiences, and psychological conditions (BSKAP, Kemendikbudristek, Aditomo, 2022).

In this study, perception is operationalized into three interconnected dimensions. The cognitive dimension encompasses the extent to which a person understands the purpose, benefits, and procedures of a diagnostic assessment. The affective dimension reflects the feelings and attitudes that arise, such as feeling helped, interested, or burdened (ARBAVIONITA, 2025). The conative dimension refers to the tendency to act based on one's understanding and attitudes, such as conducting the assessment routinely and following up on the results concretely.

2.2 Diagnostic Assessment

Diagnostic assessment is a form of formative assessment specifically designed for the early stages of learning. The Ministry of Education, Culture, Research, and Technology (2022) divides it into two complementary types. Non-cognitive diagnostics target students' psychological and emotional states, learning styles, interests, and social backgrounds. Cognitive diagnostics, on the other hand, focus on identifying academic competency attainment that students have and have not yet mastered in specific topics. Brookhart and Nitko (Sitorus & Dalimunthe, 2024) emphasize that this type of assessment goes beyond simply placing students on a continuum of ability, but rather truly explores the root causes of learning difficulties so teachers can design targeted interventions (Hikmah, 2021).

The implementation of an effective diagnostic assessment includes three stages that should not be skipped: preparation of instruments that are appropriate to the learning objectives, implementation in an atmosphere that makes students feel safe and not judged, and follow-up in the form of learning differentiation, namely flexible grouping, remedial for those who have not completed, and enrichment for those who have exceeded the target.

2.3 Indonesian Language Learning in Elementary Schools

Indonesian language learning in elementary schools is oriented toward developing communicative competencies, encompassing four language skills: listening, speaking, reading, and writing (Solehat, 2020). In the Independent Curriculum, a text-based approach places students in language learning through various text genres relevant to their real lives (Matthews et al., 2018).

In grade III, based on Phase B Learning Outcomes, students are expected to be able to read and understand texts using increasingly diverse strategies, express opinions orally, and write simple, coherent paragraphs (Akademik, 2023). The wide range of initial abilities among students makes diagnostic assessment not merely a policy recommendation but a concrete, practical necessity for teachers who want to teach effectively (Maryam, 2020).

3. RESEARCH METHODS

This study used a quantitative approach with a descriptive survey design. Sugiyono (2019) explained that this approach aims to describe existing conditions systematically and objectively based on measurable numerical data. The research location was the UPTD SD Negeri 122384, Jalan Kol No. 36, Pematangsiantar City, North Sumatra, which was chosen because it had implemented the Independent Curriculum, including diagnostic assessments. Data collection took place in April 2026.

The population consists of two groups: all third-grade Indonesian teachers totaling 2 people, and all third-grade students totaling 20 people in the 2025/2026 academic year. Considering the very small number of teachers, the total sampling technique (saturated sample) was applied according to Arikunto's (2010) principle which recommends that all members of the population be sampled if the number is below 100. For students, purposive sampling was used by considering their active involvement in Indonesian language learning that has implemented diagnostic assessments (Nayak et al., 2022).

The research instrument was a questionnaire in two versions: a teacher questionnaire (16 items, 5-point Likert scale) and a student questionnaire (10 items, 4-point scale). Both were structured based on three dimensions of perception, namely cognitive, affective, and conative, and had undergone content validation by the supervising lecturer and a readability test on 3 students from different schools (Suryani, 2024). The trial was conducted on 20 respondents from other equivalent schools, with the results: all items were declared valid (r -calculated greater than r -table = 0.444), Cronbach's alpha of the teacher instrument was 0.921 (very high), and Cronbach's alpha of the student instrument was 0.941 (very high) (Aditomo, 2024).

Data were analyzed using descriptive statistics based on Ideal Mean (M_i) and Ideal Standard Deviation (SD_i) with the formula M_i = half times (ideal maximum score plus ideal minimum score) and SD_i = one-sixth times (ideal maximum score minus ideal minimum score). Perception categories were determined based on the score range: Very Positive if X is greater than M_i plus 1.5 times SD_i ; Positive if M_i plus 0.5 SD_i is smaller than X is smaller or equal to M_i plus 1.5 SD_i ; Quite Positive if M_i minus 0.5 SD_i is smaller than X is smaller or equal to M_i plus 0.5 SD_i ; Negative if M_i minus 1.5 SD_i is smaller than X is smaller or equal to M_i minus 0.5 SD_i ; and Very Negative if X is smaller or equal to M_i minus 1.5 SD_i .

Since the scales of the teacher and student questionnaires were different, comparisons between groups were made through conversion to an equivalent scale of 0 to 100 using the formula: Converted Score equals [(Actual Score minus Minimum Score)

divided by (Maximum Score minus Minimum Score)] multiplied by 100 (Murtisari et al., 2019).

4. RESULTS AND DISCUSSION

4.1 Teacher Perceptions of Diagnostic Assessment (V1)

The teacher perception questionnaire consists of 16 items with a minimum ideal score of 16 and a maximum of 80, resulting in a $M_i = 48.00$ and $SD_i = 10.67$. Analysis of two teacher respondents yielded an empirical mean of 67.50, equivalent to $80.47/100$ after conversion. This figure exceeds the Very Positive threshold set at M_i plus $1.5 SD_i = 64.01$. Details per dimension are presented in Table 1.

Table 1. Description of Teacher Perception Dimensions (V1)

Dimensions	Noodles	Average	Category
Cognitive (Understanding)	18.00	26.00	Very Positive
Affective (Attitude)	15.00	22.00	Very Positive
Conative (Action)	15.00	19.50	Positive
TOTAL	48.00	67.50	VERY POSITIVE

Source: Primary data, 2026

The cognitive dimension scored the highest average (26.00 out of a maximum of 30), reflecting that both teachers already had a strong understanding of the purpose and benefits of diagnostic assessments. They understood that the results were not included in report cards and were useful as a roadmap for designing differentiated learning based on student characteristics. This finding aligns with Nissa et al. (2024) who concluded that elementary school teachers generally view diagnostic assessments as an important tool for student-centered learning.

The affective dimension (22.00 out of 25) indicates that teachers felt helped and supported the assessment. However, the item measuring administrative burden revealed a feeling of burden that did not completely disappear, confirming Aditya and Rosyidi's (2023) findings that administrative constraints are a real obstacle.

The most interesting aspect is the conative dimension (19.50 out of 25), which only falls into the Positive category, one level below the other two dimensions. This indicates a gap between understanding and actual practice, particularly in the consistency of routine implementation and assessment follow-up. This pattern is consistent with Astuti et al. (2023), who found that diagnostic assessment follow-up remains a common challenge in the field, even though teachers already have a good understanding.

4.2 Student Perceptions of Diagnostic Assessment (V2)

The student perception questionnaire consists of 10 items with a minimum ideal score of 10 and a maximum of 40, resulting in $M_i = 25.00$ and $SD_i = 5.00$. The Shapiro-Wilk normality test on $N=20$ data yielded $W = 0.941$ with a significance of 0.257 (greater than 0.05), confirming a normal distribution. The empirical mean of students

reached 34.45, or equivalent to 81.50/100 after conversion, exceeding the Very Positive limit (32.50). Details per dimension are in Table 2.

Table 2. Description of Student Perception Dimensions (V2)

Dimensions	Noodles	Average	Category
Cognitive (Understanding)	5.00	6.90	Very Positive
Affective (Feelings)	10.00	13.20	Very Positive
Conative (Participation)	10.00	14.35	Very Positive
TOTAL	25.00	34.45	VERY POSITIVE

Source: Primary data, 2026

Unlike teachers, all three dimensions of student perception were unanimously in the Very Positive category. The frequency distribution showed that 60% of students (n=12) were in the Very Positive category and 40% (n=8) were in the Positive category, with no students having negative perceptions.

The cognitive dimension (6.90 out of 8) indicates that students understand that the initial test is not a report card assessment, but rather a way for teachers to get to know them. This understanding creates a sense of security that allows them to be more open and authentic during the assessment, precisely the primary goal.

The affective dimension (13.20 out of 16) revealed that although a handful of students still occasionally felt anxious, overall they enjoyed the assessment process, especially when the teacher asked about their condition and feelings. Aulia and Mansur (2022) found a similar pattern: non-cognitive assessments were perceived positively because students felt cared for (Nasution, 2019).

The most prominent dimension was the conative dimension (14.35 out of 16), reflecting that students consistently completed assessment questions seriously, independently, and honestly. This significantly benefits teachers because the collected data becomes more reliable in terms of validity.

4.3 Comparison of Teacher and Student Perceptions

To compare two variables using different scales equally, the scores for each were converted to a scale of 0 to 100. The results are presented in Table 3.

Table 3. Comparison of Converted Scores (0-100 Scale)

Group	Actual Score	Converted Score	Category
Teacher (V1)	67.50	80.47	Very Positive
Students (V2)	34.45	81.50	Very Positive
Difference		1.03	Equivalent

Formula: $[(Actual - Min) / (Max - Min)] \times 100$. Source: Analysis results, 2026

A difference of only 1.03 points on a scale of 0 to 100 reflects very high alignment. Both are in the Very Positive category. This alignment cannot be ignored. Sugianto et al. (2023) noted that when teachers and students both view an evaluation practice

positively, the implementation process tends to be more authentic and effective. This provides strong social capital for the UPTD of SD Negeri 122384 to further develop diagnostic assessment practices (Supriyadi et al., 2022).

However, there's an asymmetrical pattern that needs to be examined. On the teacher side, the cognitive dimension is prominent, while the conative dimension lags behind. On the student side, the conative dimension is actually the highest. This means that students are ready and willing to participate actively and honestly, while teachers still face challenges in ensuring consistent follow-up (Susanty et al., 2021). This gap is the focus of recommendations for improvement.

5. CONCLUSION

Three main conclusions can be drawn from this research.

First, teachers' perceptions of the implementation of diagnostic assessments in Indonesian language learning in grade III of the UPTD of SD Negeri 122384 in the 2025/2026 academic year were in the Very Positive category (converted score 80.47/100). The cognitive and affective dimensions were both very positive, while the conative dimension remained Positive due to challenges in consistent follow-up.

Second, student perceptions also fell into the Very Positive category (converted score 81.50/100). All three dimensions—cognitive, affective, and conative—were all at the very positive level, with 60% of students categorized as Very Positive and 40% as Positive.

Third, a comparison of the two perceptions shows significant alignment, with a difference of only 1.03 points on the equivalent scale. The asymmetry, with teachers' conative dimensions being lower than students', indicates an implementation gap that needs to be prioritized for improvement.

Based on these findings, four recommendations are proposed. Teachers need to improve the consistency of assessment follow-up through flexible grouping, targeted remediation, and meaningful enrichment. Schools need to provide standard templates for assessment instruments and facilitate coaching programs among teachers. Education offices need to design training that specifically strengthens teachers' conative dimensions in implementing diagnostic assessments. Future researchers are advised to expand the scope to more schools and use a mixed methods approach to produce a richer and more comprehensive picture.

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