

A MULTIPHASE THERAPEUTIC COMMUNICATION APPROACH TO ENHANCING INCLUSIVE SUPPORT FOR CHILDREN WITH SPECIAL NEEDS

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ABSTRAK

Inclusive education for children with special needs (CSN) in Indonesia remains hindered by limited professional resources, inadequate inclusive infrastructure, and low public acceptance. This community-development based activities aim to address these barriers by implementing a structured therapeutic communication training program to the key stakeholders of Lentera Cita Karya Foundation, an inclusive school in Jakarta. The program targeted teachers, in-house therapists, and parents, through focus group discussions (FGD) designed to explore communication challenges and collaboratively build effective strategies. Over two months, trainings were delivered to 15 CSN, 4 therapists, 4 parents, and 4 teachers. In addition to communication training for adults, children participated in basic public speaking and photography sessions to strengthen their cognitive, affective, and psychomotor skills. The program concluded with a public seminar titled "ACT" (Acceptance, Caring, and Tolerance) attended by approximately 80 people, featuring expert speakers and community engagement sessions to promote inclusive dialogue. The seminar also showcased photos taken by the CSN during the training. Results from the intervention highlight that acceptance emerged as the most significant factor influencing CSN development. The findings underscore the importance of integrative, community-based therapeutic communication in supporting inclusive educational environments.

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INTRODUCTION

The management and support systems for children with special needs in Indonesia continue to face significant challenges, particularly in terms of limited human resources, insufficient infrastructure (inclusive schools), and the unequal distribution of inclusive education understanding across diverse regions. Despite policy advancements and advocacy efforts, systemic readiness within educational institutions remains inadequate (Lourenço et al., 2025). A substantial proportion of schools and community-based learning are not fully prepared to accommodate the complex and varied needs of children with special needs, leading to their marginalization in the formal learning process (Fernandez-Villardón et al., 2020). These deficiencies are exacerbated by the lack of inclusive acceptance among stakeholders, limited teacher competence in providing specialized services, and environments that fail to support accessibility for individuals with special needs. As highlighted by Suryadi (2023)), these structural barriers not only hinder academic development but also perpetuate social exclusion.

In the current context, several critical variables contribute to the persistence of negative stigma toward children with special needs (Widhiati, Malihah, & Sardin, 2022). Chief among these are the insufficient competencies of therapists and educators within inclusive educational settings and the general public's limited communication capacity when interacting with children with special needs. The scarcity of inclusive schools across the archipelago further substantiates the argument that systemic support is still lacking (Pratiwi, 2016). The intersection of health sciences, particularly medicine, and communication

science presents a crucial opportunity for developing an interdisciplinary framework that enhances therapeutic interaction. Therapists who are equipped with both clinical expertise and effective communication skills can improve the quality of intervention outcomes for children with special needs. Nevertheless, this professional capacity must be complemented by a supportive microenvironment, especially the family and the surrounding community.

In response to these challenges, structured therapeutic communication training is imperative to improve the communication competencies of therapists and healthcare professionals working with children with special needs (Triwardhani, 2020). The ability to deliver medical and psychological interventions effectively hinges not only on technical proficiency but also on the capacity to engage empathetically and clearly with children who present diverse neurodevelopmental profiles (Alfarizi, 2019). By implementing such training programs, clinicians can tailor therapeutic strategies based on the child's individual communication style, thereby fostering greater compliance, trust, and therapeutic alliance (Prakoso, 2021).

Furthermore, therapeutic communication training should extend beyond clinical professionals and include family members, caregivers, and household companions of children with special needs (Sarfika et al., 2020). The developmental trajectory of these children is significantly influenced by the quality of day-to-day interactions within their immediate environment. When parents and caregivers are equipped with foundational communication tools that align with the principles of therapeutic engagement, they become active facilitators of cognitive, emotional, and behavioral development. This approach ensures that therapeutic gains achieved in clinical settings are reinforced at home, thereby promoting continuity of care and holistic development.

Moreover, broader community sensitization is necessary to combat societal stigma and promote inclusion (Shields, 2022). Community-wide outreach and educational programs that focus on the nature, capabilities, and potential of children with special needs are vital to foster empathy and dismantle misconceptions (Mosleh, 2025). Through public education efforts, individuals and institutions can be encouraged to adopt more inclusive attitudes and behaviors. Consequently, the social acceptance of children with special needs will not solely depend on formal institutions but will be embedded within the societal fabric (Cridland, 2014).

To operationalize this multidimensional framework, three core phases of therapeutic communication training are proposed (Radin, 2006). The first phase involves training healthcare professionals and therapists in therapeutic communication tailored for children with special needs. The second phase focuses on educating parents and family members in employing effective communication techniques at home. The third phase encompasses public outreach initiatives aimed at enhancing community acceptance and interaction skills with children with special needs. These phases function synergistically and require coordinated efforts from stakeholders including the medical community, educational professionals, families, and civil society (Panjaitan, Suryani, & Chairunisak, 2017).

To further support the credibility and consistency of public messages, children with special needs themselves should be involved in basic communication training. Programs that introduce public speaking skills and fundamental psychomotor activities such as camera operation not only build self-confidence but also enhance cognitive, affective, and psychomotor domains (Surianto et al., 2024). This empowerment approach promotes autonomy and encourages children with special needs to express themselves and contribute meaningfully to society. By nurturing their communicative capacities, these children are better positioned to share their narratives, showcase their talents, and participate in social and professional spheres (Surianto et al., 2025).

The integration of medical sciences and communication disciplines in therapeutic interventions represents a progressive and necessary shift in managing the needs of children with special needs. It recognizes the centrality of personalized, empathetic interaction in fostering developmental outcomes and ensuring social inclusion. As Indonesia continues to develop its inclusive education framework, these strategies must be institutionalized through national policy, professional training standards, and community-based participatory models.

In conclusion, a comprehensive therapeutic communication approach that includes healthcare providers, families, and communities, while empowering children with special needs through

communication training, holds transformative potential. It not only enhances the efficacy of medical and educational interventions but also supports the broader goal of social inclusion and equal opportunity for all children, regardless of their developmental differences (Hermanto, 2024).

One of the inclusive education institutions that actively supports children with special needs in Jakarta is the Yayasan Lentera Cita Karya, which operates a dedicated inclusive school. Although the foundation itself does not specialize in therapeutic services, it facilitated a structured training program focused on therapeutic communication for key stakeholders, namely teachers, therapists employed at the school, and families of children with special needs. Over a two-month period, this program provided holistic training to 15 children with special needs, 4 in-house therapists, 4 teachers, and 4 parents. The primary aim was to enhance communication competencies among those most directly involved in the children's daily development. The training concluded with a public seminar titled "ACT," an acronym for Acceptance, Caring, and Tolerance, intended to raise broader societal acceptance of effective communication practices with children with special needs, attended by 60 people.

The ACT seminar was designed as an open public forum to promote inclusive dialogue and engagement. It featured the chairperson of the Lentera Cita Karya Foundation, a child psychologist with significant research on special needs children, and a professional public speaker who served as moderator to reinforce the event's credibility. The seminar was divided into two key sessions: the first offered general knowledge about the developmental characteristics of children with special needs, while the second introduced practical strategies for therapeutic communication aimed at non-specialist community members. This initiative demonstrates a comprehensive, community-driven approach to inclusion, positioning communication as a fundamental bridge between educators, families, and society in supporting the overall development of children with special needs.

IMPLEMENTATION METHOD

The methodological approach included conducting Focus Group Discussions (FGDs) structured into three distinct sessions, each involving a specific stakeholder group integral to the education and care of children with special needs (CSN). The first session engaged therapists working within the inclusive school to discuss their experiences and perspectives on therapeutic communication practices with CSN. The second session focused on inclusive education teachers, exploring their role in providing cognitive training and the challenges they face in supporting CSN development. The third session involved parents of CSN, aiming to gather insights into their perceptions of daily activity routines and its impact on their children's cognitive growth. Each FGD was designed to facilitate open dialogue, encourage the exchange of experiences, and identify barriers and facilitators within their respective roles. The discussions were guided by semi-structured questionnaires to maintain focus while allowing flexibility for participants to express nuanced views. Data from the FGDs were recorded, transcribed, and subsequently analyzed to inform the development of therapeutic communication interventions involving therapists, educators, and families.

Following the Focus Group Discussions, the research team prepared a public seminar titled "ACT" (Acceptance, Caring, and Tolerance), which was developed in alignment with key insights obtained during the FGD sessions. The seminar theme was directly informed by the therapeutic communication training approach applied throughout the program. As part of the intervention, two foundational soft skill trainings, photography and public speaking, were conducted to enhance the cognitive and psychomotor abilities of children with special needs. Each training session was supported by two facilitators: one professional practitioner representing either photography or public speaking, and one familiar school teacher to ensure emotional comfort and continuity.

The ACT seminar was conducted as a public event, attended by approximately 80 participants, including general audiences, families of children with special needs (CSN), parents, teachers, and therapists. The seminar featured two main sessions. The first session focused on clarifying misconceptions about CSN, particularly autism, which is often misunderstood by the general public. It emphasized that autism is not a disease to be cured, but a neurodevelopmental condition where a child's growth and potential can be optimized through proper support. The second session addressed effective communication strategies

with CSN, highlighting the importance of public understanding due to the widespread stigma that often surrounds them.

In addition to the sessions, the seminar included a talent showcase featuring CSN participants. Activities such as storytelling performances, a photo exhibition displaying their work during training, and a fashion show were conducted. These simple yet meaningful events aimed to challenge negative public stereotypes and demonstrate that CSN are capable of creativity, self-expression, and developmental growth when given inclusive opportunities.

RESULTS AND DISCUSSIONS

Focus Group Discussions (FGD) were conducted separately with therapists, teachers, and parents of children with special needs (CSN), revealing contrasting perspectives on the role of family involvement in CSN development. Therapists and teachers agreed that the cognitive, affective, and psychomotor development of CSN is heavily influenced by parental and familial support at home. Therapists highlighted that therapy sessions, which typically last between 30 to 120 minutes depending on the child's readiness, are too brief to produce substantial developmental outcomes on their own. Teachers supported this view, emphasizing that effective cognitive training in school depends largely on consistent parental involvement outside the classroom. Both groups identified parents and family members as the most critical contributors to the child's overall growth.



Figure 1. FGD of Therapists and Teachers of Yayasan Lentera Cita Karya.

Conversely, parents expressed that therapists and teachers, due to their professional expertise, should have a greater impact on their children's development. Many cited time constraints and busy schedules as major obstacles to their active participation. Furthermore, some parents admitted to feeling apprehensive about interacting with their children, fearing that incorrect engagement might adversely affect their development. This discrepancy underscores a crucial gap between professional expectations and parental perceptions, highlighting the need for programs that enhance parents' confidence and communication skills to better support their children's growth.



Figure 2. FGD of Parents of CNS.

The soft skills training sessions were successfully attended by children with special needs (CSN) and their supporting teachers. Activities were conducted at the laboratories of Universitas Bunda Mulia to

optimize the availability of appropriate training facilities. During the photography training, CSN participants were divided into two roles: photographers and models. Under the guidance of a professional practitioner and a supporting teacher, children learned to operate digital cameras. Three out of five children demonstrated effective camera-handling skills, while four out of five were able to follow instructions when modeling. The session effectively enhanced the children's psychomotor and visual coordination skills through applied photography tasks.



Figure 3-4. Photography training sessions for CNS.

The public speaking training utilized hand puppets and picture books as visual stimuli to support CSN in processing and expressing information. These tools were selected to stimulate the visual senses and promote narrative ability. However, only three children were able to confidently engage in basic storytelling exercises. This outcome suggests that while the intervention provided initial exposure, public speaking skills among CSN require more sustained and individualized support to develop communicative confidence and verbal expression.



Figure 5. Public Speaking (Story-telling) training sessions for CNS.

The final phase of the program involved a public seminar titled “ACT” (Acceptance, Caring, and Tolerance), aimed at disseminating insights from the FGDs while maintaining the confidentiality of therapists, teachers, and families. The acronym “ACT” was intentionally selected to emphasize the importance of fostering public acceptance, compassion, and tolerance toward children with special needs (CSN). The seminar featured the chairperson of Yayasan Lentera Cita Karya, a child psychologist actively researching CSN, and a professional moderator specializing in public communication. Their presence significantly enhanced the credibility of the event and encouraged interactive engagement from a predominantly lay audience.



Figure 6. Moderator, Child Psychologist, & Chairperson of Yayasan Lentera Cita Karya.

The opening session, led by the community service team, addressed common misconceptions about CSN. It emphasized that special needs are not a disease but a biological condition that requires societal acceptance. The session challenged prevailing stigmas and highlighted the vital role of parents and surrounding communities in creating supportive environments through empathetic and effective communication. Before the second session, CSN participants performed storytelling, a fashion show, and presented photographs from previous training sessions. This segment aimed to reinforce positive public perceptions by showcasing CSN capabilities. The final session introduced practical therapeutic communication strategies, advocating that inclusive interaction is a shared societal responsibility, not solely that of medical professionals. The seminar, attended by 80 diverse participants, received overwhelmingly positive feedback and calls for similar future events to raise awareness on CSN inclusion.

CONCLUSION AND RECOMMENDATION

Parental acceptance of their child's status as a child with special needs (CSN) and increased parental involvement in daily accompaniment are essential for optimal development. Soft skills training tailored appropriately for CSN can significantly enhance their cognitive and psychosocial abilities. Moreover, the presence of supportive individuals who demonstrate caring and tolerance plays a crucial role in fostering the overall growth and development of CSN.

Parents are encouraged to actively listen to and collaborate with healthcare professionals and practitioners to better support the developmental needs of CNS. Society must begin to dismantle negative stigma surrounding the perceived limitations of CSN by increasing awareness and promoting positive narratives. Regular training programs aimed at enhancing the quality of life for CSN should be expanded. Public seminars and educational outreach need to be intensified to effectively combat societal misconceptions. Most importantly, communication must be recognized as the fundamental key, where all stakeholders, including families, educators, therapists, and communities, collaborate closely to achieve the most optimal developmental outcomes for children with special needs.

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REFERENCE

- Cridland, E. K., Jones, S. C., Magee, C. A., & Caputi, P. (2014). Family-focused autism spectrum disorder research: A review of the utility of family systems approaches. *Autism*, 18(3), 213-222.
- Fernandez-Villardón, A., Alvarez, P., Ugalde, L., & Tellado, I. (2020). Fostering the social development of children with special educational needs or disabilities (SEND) through dialogue and interaction: a literature review. *Social Sciences*, 9(6), 97.

- Girsang, L. R. M. (2018). 'Public Speaking' Sebagai Bagian Dari Komunikasi Efektif (Kegiatan Pkm Di Sma Kristoforus 2, Jakarta Barat). *Jurnal Pengabdian dan Kewirausahaan*, 2(2).
- Lourenço, I. M., Herrera Cantorani, J. R., & de Oliveira, M. R. (2025). Teaching practices for autistic children: a narrative review of the literature. *Dialogia*, (52).
- Mosleh, I., Safitri, A. V., Fitrayani, U. M., Pare, N., Setiawati, D., & Naqiyah, N. (2025). DUKUNGAN PSIKOSOSIAL MELALUI LAYANAN BIMBINGAN DAN KONSELING KOMUNITAS PADA ANAK BERKEBUTUHAN KHUSUS (ABK). *FOKUS: Kajian Bimbingan dan Konseling dalam Pendidikan*, 8(3), 403-411.
- Panjaitan, T., Suryani, I., & Chairunisak, S. (2017). Interaction of verbal communication of the teacher from the Philippines in the teaching activity for nursery II students at the Singapore international school, Medan. *International Journal of Scientific & Technology Research*, 6(7), 33-40.
- PRAKOSO, C. B. (2021). *PENGARUH INTENSITAS KOMUNIKASI TENAGA MEDIS DENGAN PASIEN RAWAT INAP TERHADAP PENINGKATAN PELAYANAN DI RUMAH SAKIT BHAKTI ASIH BREBES* (Doctoral dissertation, Universitas Pancasakti Tegal).
- Pratiwi, J. C. (2016). Sekolah inklusi untuk anak berkebutuhan khusus: tanggapan terhadap tantangan kedepannya. *Prosiding Ilmu Pendidikan*, 1(2).
- Radin, P. (2006). "To me, it's my life": medical communication, trust, and activism in cyberspace. *Social Science & Medicine*, 62(3), 591-601.
- Sarfika, R., Maisa, E. A., Yuliharni, S., Putri, D. E., Erwina, I., Wenny, B. P., ... & Novrianda, D. (2020). Pelatihan komunikasi terapeutik guna meningkatkan pengetahuan perawat dalam caring. *Jurnal Hilirisasi IPTEKS*, 3(1), 79-87.
- Shields, N., Epstein, A., Jacoby, P., Kim, R., Leonard, H., Reddihough, D., ... & Downs, J. (2022). Modifiable child and caregiver factors that influence community participation among children with Down syndrome. *Disability and Rehabilitation*, 44(4), 600-607.
- Surianto, G. R. M. K., Destri Sari Gunarti, F., & Fensi, Y. C. L. Program Pendampingan dan Pelatihan: Implementasi Ragam Komunikasi pada Sivitas Akademika SMA Kristoforus II Jakarta.
- Surianto, S., Panjaitan, T. N., Subandi, Z. E., & Janeardie, S. C. (2025). PELATIHAN RAGAM KOMUNIKASI DI SMK SANTA THERESIA PENJURUSAN PARIWISATA DAN PERANGKAT LUNAK. *GANESHA: Jurnal Pengabdian Masyarakat*, 5(1), 305-313.
- Suryadi, I. (2023). Dampak pendidikan inklusif terhadap partisipasi dan prestasi siswa dengan kebutuhan khusus. *Jurnal Pendidikan West Science*, 1(08), 517-527.
- Triwardhani, I. J. (2020). Komunikasi Terapeutik Pada Anak Berkebutuhan Khusus (Abk) Di Sekolah. *Kinesik*, 7(3), 232-244.
- Widhiati, R. S. A., Malihah, E., & Sardin, S. (2022). Dukungan sosial dan strategi menghadapi stigma negatif anak berkebutuhan khusus dalam pendidikan. *Jurnal Paedagogy*, 9(4), 846-857.