

Efforts to Improve the Social-Emotional Development of Speech Delay Through Hug Therapy (Gentle Empathic Massage for The Expression of Relief)

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Abstract

Purpose – This study aims to explore the effectiveness of *Hug Therapy* or *Gentle Empathic Massage for Expression of Relief* in improving the social-emotional development of children with speech delay. The research seeks to provide a deeper understanding of how affective-based physical interaction, in the form of gentle and empathetic touch, contributes to emotional regulation, self-confidence, and social interaction among early childhood learners who experience speech delay.

Design/Methodology/Approach – This research employs a qualitative approach with a case study design. The subjects consist of early childhood students diagnosed with speech delay who participated in *Hug Therapy* sessions conducted within the school environment. Data were collected through direct observation, interviews with teachers and parents, and documentation of children's behavioral changes before and after the therapy. The data were analyzed descriptively to identify patterns of emotional and social development improvement resulting from the therapy intervention.

Findings – The findings indicate that the consistent application of *Hug Therapy* significantly enhances children's ability to regulate emotions, reduces aggressive and tantrum behaviors, and increases acceptance of physical touch. Moreover, children demonstrated improved focus, willingness to interact with peers, and greater self-confidence. These outcomes suggest that *Hug Therapy* provides a nurturing emotional environment that supports children's readiness for communication and learning.

Originality/Value – This study offers a novel contribution by emphasizing the therapeutic role of empathetic touch as an affective intervention for children with speech delay. Unlike conventional language-focused interventions, *Hug Therapy* addresses emotional readiness as a foundation for language and social development. The findings enrich the theoretical framework of early childhood holistic education and provide practical implications for educators, parents, and institutions in implementing emotionally responsive approaches to child development.

Keywords: Cuddling Therapy, Children with Special Needs, *Speech Delay*, Social-Emotional, Empathic Massage

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I. INTRODUCTION

Human beings as social creatures naturally need interaction with others. In daily life, social skills are an important aspect that determines an individual's ability to foster harmonious social relationships (Rahmadhani & Diana, 2025). Social skills are defined as a person's ability to interact in a social context in a positive, acceptable, and mutually beneficial way for both parties. Individuals with good social skills are generally more acceptable in their environment and are able to make a positive contribution to their social life (Shofira & Khuluq, 2023).

For every parent, the presence of a child is a much-awaited gift. Children not only become the successors of the offspring, but also strengthen the affectionate relationship in the family (Suparmas et al., 2025). Every parent certainly wants their children to grow and develop optimally, both physically, socially, emotionally, and intellectually (Ummah & Nadhirah, 2024). However, not all children can develop according to expectations. Some children show differences in developmental aspects known as Children with Special Needs (ABK). ABK are children who have unique characteristics that distinguish them from children their age, both in terms of physical, emotional, social, and mental (Kurniawati et al., 2022). These differences do not necessarily mean shortcomings, but rather demand the right approach and stimulation so that their potential can develop optimally. One form of educational support for children with disabilities is through Early Childhood Education (PAUD) institutions that provide inclusive education. Inclusive education provides equal opportunities for normal children and children with disabilities to learn together in an atmosphere of mutual acceptance and respect (Lenny et al., 2023).

One of the categories of ABK that is often found in the PAUD environment is children with *speech delay*. *Speech delay* is a condition in which children experience obstacles in the development of speech and language skills according to their chronological age (Aminah & Priyanti, 2024). Children who experience *speech delay* tend to have difficulty pronouncing words, understanding instructions, or expressing their thoughts and feelings. This condition can be caused by intrinsic and environmental factors, such as lack of verbal stimulation, lack of social interaction, and weak emotional support from the surrounding environment (Zia & Harsiwi, 2025; Kumari et al., 2023).

Speech delays in children not only affect verbal communication skills, but also have a significant impact on their social and emotional development. Children who have difficulty communicating often experience frustration because their desires are not understood by others. As a result, negative behaviors such as crying, getting angry, snatching friends' toys, tempers, and even aggressiveness towards teachers and peers appear. The results of a preliminary study in Kober Labibul Barkah, Handapherang Village, Cijeungjing District, showed that some children experienced communication barriers, difficulty expressing themselves, low levels of learning focus, and aggressive behaviors such as attacking friends and teachers. This condition indicates a delay in the social-emotional development of children which is closely related to communication barriers.

To overcome these problems, a learning strategy is needed that is not only cognitive, but also stimulates the social and emotional aspects of children as a whole. One approach that can be applied is Hug Therapy (Gentle Empathic Massage for Expression of Relief). This therapy is a form of nonverbal stimulation that is carried out through gentle, loving, and empathetic touch to the child. Empathetic hugs and massages serve as emotional communication mediums that help children feel safe, accepted, and loved. Through this therapy, children with *speech delay* are invited to channel their negative emotions positively, reduce psychological tension, increase confidence, and strengthen social relationships with teachers and peers.

This research is important to be carried out in Kober Labibul Barkah, Handapherang Village, Cijeungjing District for several main reasons. First, to support the social-emotional development of early childhood optimally through the application of therapy that is in accordance with the needs of *speech delay children*. Second, providing alternative solutions for PAUD teachers in designing a more empathetic and effective learning approach for children with communication barriers. Third, increasing awareness and the role of parents in providing positive stimulation at home, so that there is continuity between education at school and in the family environment. Through the application of Hugging Therapy, it is hoped that the social and emotional development of *speech delayed* children can increase significantly, and help create an inclusive, harmonious, and compassionate learning environment.

II. METHOD

This research is conducted in Kober Labibul Barkah, Handapherang Village, Cijeungjing District. The research approach uses a qualitative approach and the method used is a descriptive method. The purpose of this research was 1 child of ABK, data collection with observation and interviews as well as documents. The research instrument is in the form of observation and interview guidelines, then qualitative data analysis is carried out.

III. RESULT AND DISCUSSION

Based on the results of observations, interviews, and diary notes during the implementation of the research in Kober Labibul Barkah, Handapherang Village, Cijeungjing District, an overview of the condition of children with special needs (ABK) before and after hug therapy (gentle empathic massage for an expression of relief) was obtained.

SOCIAL-EMOTIONAL DEVELOPMENT OF ABK BEFORE THE IMPLEMENTATION OF HUG THERAPY (GENTLE EMPATHIC MASSAGE FOR AN EXPRESSION OF RELIEF) IN KOBER LABIBUL BARKAH, HANDAPHERANG VILLAGE, CIJEUNGJING DISTRICT

Before the implementation of hug therapy, children show various obstacles in social and emotional aspects that are quite complex. Emotionally, children often cry loudly and scream for no apparent reason, sometimes even showing outbursts of anger when their desires are not understood by those around them. This condition shows difficulties in regulating emotions and expressing feelings naturally. Children are unable to control themselves when faced with situations that make them uncomfortable. This form of excessive emotional reaction illustrates the existence of emotional regulation disorders that need to receive serious attention through an empathetic and compassionate approach.



Figure 1
Child's Social-Emotional Condition Before
Cuddle Therapy (Gentle Empathic Massage for Expression of Relief)

In addition to crying and screaming, children also often show aggressive behaviors such as hitting or attacking friends and teachers when they feel frustrated. This behavior arises due to the child's inability to channel feelings of disappointment appropriately. Children seem to have difficulty understanding the limits of socially accepted behavior. This condition indicates low self-control and low social awareness of others. In the context of early childhood education, this aggressive behavior becomes an obstacle in the learning process and disrupts the comfort of the classroom environment. Therefore, this condition shows that children need a targeted emotional handling strategy and full of empathic touches.

When faced with frustration, children tend to be unable to calm themselves down and take a long time to calm down. This shows the child's weak ability to manage stress and low adaptability to situations that are not in accordance with his wishes. Children easily lose emotional control over even small things they don't like. Such a condition shows an imbalance between the stimulus and the emotional response that is released. In the context of social-emotional development, the ability to calm down is very important because it is the basis for the formation of children's independence and emotional stability in the future.

From the social aspect, children show withdrawal behavior from their social environment. He seems reluctant to interact with his peers and prefers to play alone. When in class, the child does not show interest in sharing or participating in group activities. He also tends to grab friends' toys without understanding the concept of taking turns or sharing. This attitude shows that children are not able to

build healthy social relationships. These limitations illustrate the difficulties in understanding simple social norms, such as empathy and cooperation, that should begin to develop at an early age.

In daily interactions, children are also not able to make eye contact consistently. He often avoids gazes when talked to and does not respond to invitations to play from friends or teachers. This condition indicates a barrier in nonverbal communication and a lack of social sensitivity to the surrounding environment. The inability to make eye contact also indicates that there is a strong emotional distance between children and others. This closed attitude has an impact on the inhibition of children's ability to build warm social relationships, which should be the main foundation in early social-emotional development.

In addition to social and emotional barriers, children also experience disturbances in communication skills. He only makes sounds like "ah" or "euh" without a clear meaning, making it difficult for others to understand what he wants. This low language ability causes children to often get frustrated because they are unable to express their needs and feelings verbally. As a result, children more often use physical behaviors such as crying or yelling to attract attention. This communication difficulty has an impact on the emergence of maladaptive behavior that further worsens his social interactions. Thus, communication barriers are one of the main factors in children's emotional instability.

In addition to emotional, social, and communication aspects, children also show hyperactive behavior and an inability to focus on learning activities. He often runs around in the classroom, fiddles with toys, and has difficulty sitting still for long periods of time. In fact, children refuse to be touched or hugged by their teachers or parents, indicating emotional tension and discomfort with physical contact. This attitude of rejection shows a great emotional distance and an unfulfilled need for a sense of security. This condition is a clear picture that before hug therapy is carried out, the child's social-emotional development is still at a very low stage.

SOCIAL-EMOTIONAL DEVELOPMENT OF ABK AFTER THE IMPLEMENTATION OF HUG THERAPY (GENTLE EMPATHIC MASSAGE FOR AN EXPRESSION OF RELIEF) IN KOBER LABIBUL BARKAH, HANDAPHERANG VILLAGE, CIJUNGJING DISTRICT

After the implementation of hug therapy, there were significant changes in the social and emotional development of children with special needs. Children begin to show better ability to regulate emotions. When frustrated, he can calm down in less than five minutes without the need to cry as loudly as before. His body movements seemed more relaxed, and his facial expressions showed calmness. Children also begin to be able to accept distractions from teachers when signs of tension appear. This ability signifies that cuddling therapy helps the child understand the safe and comfortable sensations that arise from gentle touch, thereby reducing the tendency for tantrums and excessive emotional reactions.

The frequency of children's tantrums is significantly reduced after the implementation of cuddling therapy. Previously, children often screamed and got angry for no reason, but now their facial expressions are more cheerful and calm. He began to show the ability to express feelings more adaptively. For example, when he wants something, the child tries to make a simple sound or use hand gestures to show his intentions. This process is the initial form of the development of healthier emotional communication. The positive response shows an increase in self-regulation and increasingly stable emotional control, so that children are able to interact with the environment without causing behavioral disorders as before.



Figure 2

Social-Emotional State of Children After Cuddle Therapy (Gentle Empathic Massage for Expression of Relief)

In the social aspect, children show quite a noticeable improvement in the ability to interact with others. Children begin to make eye contact with the interlocutor, respond to the teacher's greeting, and smile when they are talked. He also began to engage in simple group activities such as playing with peers. Although they still need guidance, children begin to understand the concept of sharing and taking turns in the game. This increase shows that a touch of affection through hug therapy provides a sense of security and fosters trust in the social environment. With less fear and awkwardness, children become more open to interpersonal relationships in the classroom and at home.

In addition to increasing social skills, children also show changes in learning behavior. He began to be able to sit quietly and focus on learning activities for a certain time without having to be constantly directed by the teacher. Children are easier to direct and are able to complete simple activities with minimal assistance. Aggressive behaviors such as hitting, grabbing toys, or yelling are becoming less noticeable. The classroom environment becomes more conducive because children show positive participation in learning activities. This shows that through consistent empathic touch, children feel accepted and safe, thereby reducing negative behavioral impulses and increasing learning concentration.

Teachers and parents reported major changes in the child's emotional relationships after hug therapy was performed. If previously the child refused to be touched, now he shows a more open attitude towards physical proximity. Children look comfortable when they are hugged or gently stroked by teachers and parents. In fact, several times children spontaneously hug their closest people as a form of expression of affection. This shows an increase in trust and emotional attachment which is an important basis for children's social-emotional development. A loving touch given consistently helps the child understand what it means to be safe, loved, and accepted by his or her environment.

Children's confidence also increases after hug therapy is carried out regularly. Children begin to show initiative in interacting, such as calling the teacher in a quiet voice, smiling at friends, or giving objects to others as a form of social communication. He no longer shows tension or fear when in a crowded environment. This improvement suggests that gentle empathic massage is able to stimulate the relaxation nervous system, thereby reducing stress and anxiety that previously inhibited social-emotional development. Thus, hug therapy is one of the effective interventions to build emotional balance for children with special needs.

Overall, the application of hug therapy in Kober Labibul Barkah has a real positive impact on the social-emotional development of children with special needs. Children become calmer, more responsive, communicative, and able to adapt to their social environment. This change shows the success of therapy in fostering a sense of security, emotional attachment, and better self-regulation skills. The interaction between teachers, children, and parents has become more harmonious. These findings confirm that cuddle therapy is not just a physical approach, but also an effective form of empathic communication in helping children develop an overall social and emotional balance.

Table 1. Comparison of Children's Social-Emotional Development Before and After Hug Therapy

Aspect	Before Hug Therapy	After Hug Therapy	Description of Improvement
Emotional Regulation	Frequently cried, screamed, and had tantrums for minor reasons; unable to calm down.	Able to calm down within a few minutes; tantrums reduced significantly; facial expressions more cheerful and relaxed.	Emotional stability increases and the child shows better self-regulation.
Aggressive Behavior	Often hit or grabbed toys from peers; attacked teachers when frustrated.	Aggressive behaviors decreased drastically; able to express needs without violence.	The child learns to channel frustration in acceptable ways.
Social Interaction	Avoided peers, preferred to play alone; lacked eye contact and response to greetings.	Began to engage in group play, made eye contact, responded to greetings and smiled.	The child becomes more open and develops social trust.
Communication Skills	Only produced unclear sounds like	Began to make simple sounds or hand gestures to express	Early development of nonverbal and pre-

	'ah' or 'euh'; unable to convey needs verbally.	wishes; more responsive to verbal instructions.	verbal communication observed.
Response to Physical Touch	Rejected hugs or touch from teachers/parents; showed tension.	Accepted gentle touch comfortably; sometimes initiated hugs spontaneously.	Shows increased sense of security and emotional attachment.
Learning Focus	Often ran around the class; difficult to sit still and follow activities.	More focused and cooperative during learning activities; less distraction.	Improved attention span and participation in class.
Self-Confidence	Showed fear or withdrawal in social situations.	Displayed initiative, such as greeting peers and offering toys.	Confidence and initiative significantly improved.

IV. CONCLUSION

Based on the results of the above research, it can be concluded that:

Before the implementation of hug therapy in Kober Labibul Barkah, Handapherang Village, Cijeungjing District, the social-emotional development of children with special needs showed quite heavy obstacles. Children often cry, scream, get angry for no reason, and show aggressive behavior towards teachers and friends because of difficulty controlling emotions. Socially, children tend to withdraw, are reluctant to interact, and do not understand the concept of sharing. Communication skills are also very limited, just in the form of sounds without a clear meaning. Children have difficulty focusing, are hyperactive, and reject physical touch, indicating a large emotional distance. Overall, this condition describes the weak ability to regulate emotions, social interactions, and communication before being given hug therapy.

After the implementation of hug therapy in Kober Labibul Barkah, Handapherang Village, Cijeungjing District, the social-emotional development of children with special needs showed a significant increase. The child is able to calm down faster, his facial expressions become cheerful, and the frequency of tantrums is drastically reduced. He began to make eye contact, respond to greetings, and show a willingness to share and take turns playing. In learning activities, children are more focused and aggressive behavior decreases. Children also begin to receive physical touch, even showing initiative to hug teachers and parents. This change indicates that cuddling therapy is effective in fostering a sense of security, strengthening emotional attachment, and improving children's social skills and emotional regulation.

The results of this study have important implications both theoretically and practically. Theoretically, the findings of the study enrich the study of child developmental psychology and early childhood education by confirming that affect-based interventions such as *hug therapy* or *gentle empathic massage* can have a significant impact on improving the social-emotional abilities of children with *speech delay*). This research expands the understanding that therapy for children does not only focus on linguistic and cognitive aspects, but must also touch on emotional aspects and attachment as the basis for children's readiness to communicate and socialize. Thus, this research contributes to the development of a holistic therapy model that combines affective and communication approaches in early childhood intervention.

Practically, the results of this study provide concrete guidance for educators, parents, and early childhood education institutions in supporting children's social-emotional development. For teachers, *hug therapy* can be applied as a learning strategy that fosters children's sense of security and confidence in the school environment. For parents, the results of this study provide an understanding that hugs are not just a form of affection, but also a means of emotional therapy that is able to strengthen inner relationships while helping children channel emotions in a positive way. As for educational and child therapy institutions, this research can be used as a basis for designing teacher training programs and parental counseling based on a *touch-based emotional approach*. In addition, the results of this study also open up opportunities for further research to examine the relationship between children's emotional development, attachment, and communication skills more broadly and measurably.

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