

## **Principles for safe, positive physical contact 'touch'**

**(Based on discussion in training with residential care staff run by Take Two and Westcare in 2008)**

### **Underlying Principles**

- Human contact is a core human need that begins at birth and is with us throughout our life. It is essential for life at the beginning and essential for wellbeing for as long as we live.
- All children and young people need human contact and this is especially important when they have experienced trauma and deprivation.
- All children and young people need human contact but it can sometimes be harder to meet this need in a way that feels and is safe and understood for children who are in foster care or residential care. For example,
  - Some children's experience of touch has been one of physical or sexual abuse, and so touch may trigger bad memories (in their body and their mind) and feel like the abuse is still happening.
  - Some children don't know what nurturing touch feels like and so may react to the 'unfamiliar' as something strange and frightening or just sheer confusion as to what is expected of them.
  - Some children may distort their experiences based on their past and misinterpret appropriate touch as sexual or as a call to initiate sexual behaviour. This can not only make them feel unsafe but also lead to their carers feeling unsafe.
  - Some residential care staff or foster parents may feel more exposed to providing regular, physical contact if they have had past experiences with other children where there has been one of the above mentioned difficulties.
- If children and young people do not get safe, positive touch from us, they are at much higher risk of getting touch in other ways that are not safe, such as sexual behaviour, sexual exploitation and violence. They are also more at risk of not learning to recognise safe, positive touch as a good thing.
- This is both a simple and complex aspect of practice. Simple because it is ordinary day to day expectations of what children need. Complex because some children need us to think and plan together how to meet this need as part of their overall 'therapeutic' plan.



## Practice Principles

- For most children and young people in care, positive, safe contact can happen through casual, every day moments that are important because they are not extraordinary. It is the ordinary moments that these children grow to expect as normal that is the real gift.

For those children and young people who require a more careful, planned approach to meeting this need due to their past or current difficulties the following are suggested ways forward:

- Develop an agreement within the care team about who, how and when such positive contact should be happening and how it will be reviewed and adjusted as needed. This also works best if sensitive but accurate information is shared regarding history and risks.
- Look for day to day moments that are less likely to trigger a trauma response or a misunderstanding, e.g. a High Five, a hand shake, sporting activity, taking their pulse, brushing hair, etc.
- Base the plan on relationships and rapport – e.g. if the child is new to the placement or the staff member is new or a reliever, then touch would be less often and less personal than with staff or carers who are well known to the child.
- Ask the child/young person, e.g. 'you look like you need a hug is that okay?'
- Keep gathering information and thinking about the child/young person's reaction to touch and how to build this in to a more positive interaction.
- Understanding what may trigger a startle 'unsafe' response in child/young person.
- Document the contact in notes if it has been meaningful, problematic, if you are uncertain, etc.
- Tell others, discuss. If you're feeling nervous about talking about it, it is even more important to discuss, e.g. in supervision, with child's worker, etc.
- Be natural - true to self and how you're feeling. Don't be forced into a situation that doesn't feel okay.
- Listen to your own sense of safety and talk with others if feeling unsafe.
- Keep safe boundaries. E.g. gently reinforcing to children/young people if they are seeking to touch you in ways that are not okay, e.g. 'no that is a private place, we don't touch there' 'how about a high five instead.'
- Be honest with child/young person if no or limited contact is the only appropriate option, at least for the time being.
- When there are specific concerns, look for opportunities of contact when other adults are present, so as to reassure both the child/young person and the carer/ staff member.
- Understanding what may be different in different cultures in terms of expectations and style of touch (relevant both to child and to carer).
- Plan might include using other types of contact, e.g. professional therapeutic massage, hairdresser, sports team, etc. This may include the carer being trained by a therapeutic massage specialist in how to provide different types of massage, eg massaging hands.
- If not appropriate for carers or staff to provide physical contact it is imperative to find someone in the child's life who can, e.g. grandparents, etc.
- Remember to gather information, plan, act as part of a team, and review.