Positive Touch Policy

Central Hub Brighton

The Connected Hub and Brighton and Hove Pupil Referral Units

Approved by:	Date: July 2023
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Note: Central Hub Brighton operates with a Management Committee as its governing body. For all references to Governing Body and Governors in this document, the duties and responsibilities will be carried out by the CHB Management Committee and its members

National Curriculum Keeping Children Safe in education September 2021 The DfE - Use of Reasonable Force – Advice for Head teachers, Staff and Governing Bodies' July 2013 Margot Sunderland "The Science of Parenting" ISBN 1-4053-1486-9 Crying and Comforting | The Attached Family. [online] Theattachedfamily.com. Available at: http://theattachedfamily.com/?p=1255 [Accessed 21 Jul. 2016]. United Nations Convention on the Rights of the Child (1989) (UNCRC)

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1. Statement of intent

We understand that many of our young people may associate touch with negative experiences or indeed as a punitive response to their own behaviours. As such we are anxious to ensure that touch children are given positive experiences of touch and that educating them will allow them to safeguard themselves now and in their future lives. Our procedure on touch reflects our shared understanding that touch is essential to child development and has been developed with due consideration of neuro-biological research and child development studies that identify safe touch as positively contributing to brain development, mental health and the development of social skills. At Central Hub Brighton, we have adopted an informed, evidence based decision to allow safe touch on some sites as a developmentally appropriate intervention that will aid healthy growth and learning.

We therefore ensure that all staff know the difference between appropriate and inappropriate touch. Staff need to demonstrate a clear understanding of the difference and feel confident to teach accordingly. Equally, when a child is in deep distress, staff are trained to know when and how sufficient connection and psychological holding can be provided without touching. Through this proactive approach we intend that young people are empowered to identify, communicate about and respond to both appropriate and inappropriate touch It should be stressed that there is a marked difference between positive touch and positive handling. The former is used to nurture, calm and support positive learning experiences. The latter to ensure that dysregulated young people are kept safe.

2. Aims

- To promote the well-being of children in the knowledge that nurturing touch is a basic need and a powerful tool to help children develop into healthy, well balanced human beings.
- To give children the chance to experience nurturing touch at school across the waking day curriculum, in a safe and creative way.
- To promote an ethos of respect of self and others, as children request permission before they begin, and say thank you to each other when they finish the routine.
- To give the children a voice those who do not wish to receive/give a massage can say no and sit and relax / observe, or do an air massage.
- To develop positive communication children are encouraged, while practicing the massage routine, to express their preferences regarding the strokes. The can say what they like or dislike, and how much pressure and at what pace the massage should be done for them.
- To encourage a sense of unity throughout the school, children will share in a full massage at least once a week.

3. Touch and development

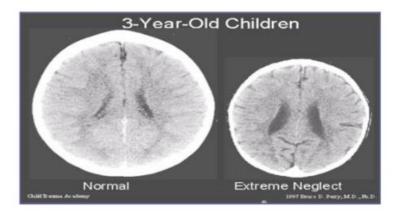
"Everything that newborns and infants know about the universe they learn through their physical sensations." (Bar-Levav, 1998, p.53)

- Biologically, touch is the first sense to develop and the last to leave us. By the 7th week of pregnancy, the baby reacts to touch.
- Feel good chemicals are released in the brain through caring interactions.
- The body and brain will stop growing if there is a lack of touch some animals even die!
- Families and cultures that express warm physical affection have fewer issues with anger and aggression.
- Many children often learn best through touch and movement.

There is a biological need for touch, an actual hunger for touch that can be met only in contact with another human being. This was first discovered during the nineteenth century, when children who had been abandoned at birth and transferred to foundling homes died by the thousands. Despite the fact that they were fed, kept clean, and protected from danger. We now understand that abstinence of touch is inhumane, unkind and potentially psychologically or neurologically damaging to a young person.

More recent research shows that babies who stop crying because their cries go unanswered continue to experience activated pain centres in the brain and their levels of stress hormones remain elevated. The reason they stop crying is because they seemingly 'give up'. In young people, during prolonged bouts of crying and distress, stress hormones can reach toxic levels, pain circuits are activated and there is an agonising withdrawal from the hormones that promote positive feelings. Young people who experience intense uncomforted distress can develop a shrunken hippocampus, a part of the brain involved in long term memory and verbal reasoning. Moreover, brain scans of Romanian orphans, subject to touch deprivation, clearly evidence the massive damage this can cause.

Lack of Touch and Interaction on the Brain



During periods of distress, touch can often be the only means of maintaining a connection with the young person when he or she can no longer hear or make use of words or soothing tone/eye contact and therefore is in danger of dissociating, with all the detrimental effects that this can bring. Research also suggest that people who are deprived of touch early in life may have a tendency toward violent or aggressive behaviour.

'it is not illegal to touch a pupil' (DfE, p8)

'schools should not have a 'no contact' policy. There is a real risk that such a policy might place a member of staff in breach of their duty of care towards a pupil' (DfE, p6).

For many of our young people, there are times where they are unable to regulate their own emotions and may act out their emotions physically. Limits and boundaries in such circumstances can be a vital corrective experience, moreover, without such an intervention, the young person can be left at risk of actual physical or psychological damage. At these times restrictive physical intervention, in the form of guidance, holding or physical management, may be necessary to calm a young person who is emotionally dysregulating and to keep them safe. The staff at Central Hub Brighton are trained in different levels of physical intervention in order to minimise risk and to ensure staff are empowered to act in the best interests of the child at all times. (see Behaviour Management Policy and Procedure).

Instances of restrictive physical intervention can be traumatic for both the young person and staff involved and so we recognise the importance of effective debriefing. We also know that there may be occasions where young people have actively seek physical containment in the only way they know how. Research shows that physical proximity can calm a child. Sometimes it really helps to hold a distressed child as long as the adult remains calm and in control. Being next to a calm body will bring an over aroused body and brain system back into balance and release natural, calming hormones. (Margot Sunderland)

4. The impact of positive touch

"Where human beings have not been satisfied by good nurturing in infancy, there remains an intense need for holding and touch." (Vereshack 1993).

Access to physical proximity and positive touch has been shown to:

- improve concentration
- improve co-operation
- increase a stronger sense of self and higher self-esteem/confidence
- reduce aggressive behaviour
- encourage a calmer classroom environment
- encourage empathy and respect for their peers
- enable the children to recognize difference between good and bad touch
- encourage a more relaxed and focused feeling in the school
- discover differences between people
- · encourage and develop the imagination
- improve communication

5. Children's rights and appropriate touch

All children have the same rights. These rights are listed in the UN Convention on the Rights of the Child. A recurrent theme throughout is that of respect. Except during physical management, all physical contact should involve upmost respect and be with the young person's consent.

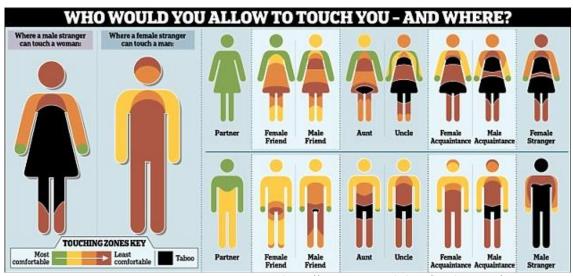
Our procedure adheres to the belief that every individual needs to appreciate the difference between appropriate and inappropriate touch. There are a number of factors that can affect how we interpret 'appropriate' touch. Social rules that say what behaviour is appropriate around other people can be difficult for some children to pick up. Many of us learned these social rules by observation but some children will not be able to do this and they will need to be actively taught this skill. 'Appropriateness' is dependent on relationships, situation, past experiences and gender as well as specific special needs including sensory sensitivity, attachment.

Heslin (1982) categorises touch on a continuum from impersonal to intimate. Touch is seen as positive when it reflects the level of intimacy we think fitting for the context and relationship. Staff must be mindful of the assumptions they make. The adult's and young person's perceptions of a relationship may not match which can lead to relationship inappropriate behaviour. Young people's misreading can also make them vulnerable to inappropriate behaviour from other people and to, unintentionally, behave in inappropriate ways towards others. Similarly, touch that may be appropriate in one situation may not me appropriate in another.

Research on touch in psychotherapy also shows that those who were abused in childhood generally evaluate touch in therapy as positive and beneficial when working through feelings of shame, fear, self-loathing and mistrust. However, therapeutic holding can both provoke and heal trauma. Young people will come to us with from a variety of backgrounds, both positive and negative. This is why it is vital that staff are aware of a child's history and utilise information contained within SEN and safeguarding documents (see policies)

Tomita et al. (2000) developed the concept of Touch Zones (Public, Discretionary, Private) to reflect student beliefs about the level of "touch acceptability" of body parts. The touch zones were mapped on the body and colour coded as a traffic light: Public (green), Discretionary (yellow), and Private (red). In western culture it is generally accepted that appropriate places to touch are the shoulders, arms and back. However, we need to be aware that there are considerable cultural differences that may be applicable to both young people and staff in the school a different times and we should not make assumptions about

this. We also know that touch zones vary according to the gender of both parties. Again, staff need to show an awareness of this in their interactions with the young people in their care.



http://www.gosocial.co/body-map/

Some forms of touch are generally agreed as tools and intentionally and strategically used to enhance a sense of connection with a young person to sooth, greet, relax, quiet down or reassure them. The following are examples of different types of touch in therapy:

- 1. **Greeting and departure gestures:** handshakes, greeting or departing embraces. These gestures vary from culture to culture.
- 2. **Conversational Markers** such as a light touch on the arm, hand, back or shoulder to enhance other forms of communication.
- 3. **Consolation touch:** providing a comforting hug, holding hands or shoulders in response to grief, sorrow, distress, anguish, agony, sadness or upset.
- 4. **Reassuring touch:** a pat on the back or shoulders encourages and reassures
- 5. **Grounding or reorienting touch:** touching the hand or arm to help reduce anxiety or dissociation by helping a young person be aware of his or her physical body.
- 6. **Task-Oriented touch:** offering a hand to help someone stand up or stopping the young person from falling.
- 7. **Instructional or modelling touch** such as demonstrating how to give a firm handshake or how to respond to unwanted touch.
- 8. **Celebratory or congratulatory touch:** "high-fives," a pat on the back or a congratulatory hug for the young person who has succeeded with a goal or good effort toward a goal.
- 9. **Inadvertent touch:** This refers to touch that is unintentional or involuntary.

Taking a therapeutic lead, by 'Appropriate Touch' we mean touch that <u>is not invasive</u>, <u>hostile</u>, <u>punishing</u>, <u>humiliating or could possibly be considered as eroticising or flirtatious</u>. Naturally, staff are also fully aware of touch that is invasive or which could be confusing, traumatising, or experienced as eroticising in anyway whatsoever. Should any such touch be used it would be deemed as the most serious breach of the Code of Conduct warranting the highest level of disciplinary action. Our Safeguarding Policy outlines the necessity to ensure all young people are safe in their bodies and their feelings and how the staff work together to ensure this is the case. Where staff are acting in the best interests of the young person, they will be supported by the school.

6. Teaching young people about appropriate touch

On sites that use positive touch, staff will initiate and respond warmly to appropriate touch from all young people. Each morning the students are both greeted into the school and then again into their individual classrooms. Interactions in the corridor or at the above times may include a physical interaction. This creates the nurturing, warm, caring environment that is so enabling for the young people attending Central Hub Brighton. Our procedure adheres to the belief that every individual needs to appreciate the difference between appropriate and inappropriate touch. Staff are highly aware of both damaging and unnecessary uses of touch e.g. touch as an avoidance of the young person's feelings and emotional pain, as an avoidance of real contact, as a block to painful memories, as a block to important therapeutic work and conflict resolution. Equally, when a young person is in deep distress, staff are aware when sufficient connection and psychological holding have been established without touching.

Relaxation is a skill that can be learnt and the great news is, it gets easier with practice! Relaxation can take many forms and there are plenty of approaches to choose from, the most important thing is to find what works for you. By learning to recognise your own states of tension and relaxation you can begin to control them at will. We believe that every child attending school should experience positive and nurturing touch every day. This belief shapes our whole school approach to promoting the physical, social, spiritual, mental and emotional wellbeing of all pupils and staff.

7. Safeguarding

Staff should always consider and abide by the Staff Code of Conduct. All staff have a responsibility to ensure that all practice is safe and ensures that the best interests of the young person is the paramount consideration. We should all expect to be observed by others and be prepared to discuss any concerns we have in a professional manner. Any member of staff who is concerned about another member of staff's practice should discuss their concerns with the Safeguarding lead or another member of the safe guarding team. Where staff are acting in the best interests of the child, they will be supported by the school.