

TOUCH

Suggestions for Touching a Person with Changes in Cognitive Abilities

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TO KEEP IN MIND

1. All touch is a form of **communication** and can cause a variety of reactions, even when it is careless or unintentional.
2. When a person has an unusual brain or is experiencing changes in the brain and resulting changes in their cognitive abilities (their ability to think and process information), their responses to touch will include **physical, emotional, and neurological** (that is, brain related) reactions. Their reactions may or may not be obvious.
3. While **most people**, whether or not their brain is unusual or they are experiencing changes in their brain and cognitive abilities, have reactions to touch that are similar to those in this handout, the intensity of the reactions will vary from person to person.
4. **This handout** addresses how a person's brain and body may respond to touch and suggested ways to help this person feel comfortable. While these suggestions can be **useful** with **anyone**, they are especially important with a person with many cognitive needs and changes in their cognitive abilities.
5. The information and suggestions here refer to **all touch** a person experiences, including touch while you are communicating with this person or assisting them with a task.
6. This person's sensitivity may be to a touch from: you or **someone** else, **water** (still or moving), **air** (especially moving, such as wind or a fan), **cloth** (such as clothing, washcloths, towels, fabric on a chair), or any **surface** (such as a wall, table, carpet, grass, smooth surface, toilet seat).
7. Information with more detail and specifics is available in the other **CAIS Handouts** and in the *Cognitive Abilities and Intervention Strategies (CAIS): Intervention Strategies* the *Cognition* part in the **Sensory** section (Questions I through N) and **Motor** section (Questions G and H) and the *Communication* part in the **Body Language** section (Question I) by S Weaverdyck. These are all on the Michigan **website** called Improving MI Practices at <https://www.improvingmipractices.org>

SOME POSSIBLE REACTIONS TO TOUCH

8. This handout focuses on a person's physical and neurological reactions. But a person's **emotional** reactions are very important, particularly if in their remote or recent past they experienced an emotional, physical, or sexual encounter that was uncomfortable, painful, or traumatic. Any touch can easily trigger distress or a reliving of this experience. In such cases, it is even more important to **move slowly**, be **gentle**, **ask permission** to touch, and **show compassion** and **respect**. Avoid any touch, movement, words, or tone of voice that might be interpreted as careless, aggressive, or sexual. Many of these suggestions below can be helpful.
9. Any person might be **sensitive** to touch. A touch from you, a surface, cloth, water, or moving air could create various physical reactions such as chronic or acute **pain** from a new or old **injury** or illness, or **neurological reactions** such as **discomfort** due to nerves or the brain's misinterpretation of the touch. Discomfort due to the nerves or brain's misinterpretation could include, for example:
 - a. Hypersensitivity
 - b. Startle reaction (for example, this person jumps, makes a noise, or gets irritated),
 - c. Itching
 - d. "Pins and needles"

- e. Tickling
- f. “Bugs crawling” on or under the skin
- g. Extreme hot or cold temperature
- h. Intense pain or discomfort
- i. Increased pain or discomfort in a part of their body that wasn’t even touched
- j. Heightened sense of pressure, so that a soft touch feels like a hit or a soft spray of water from a faucet or shower nozzle feels like sharp pricks or pellets hitting their skin

Sometimes a person has experienced these sensations all their life so it may not occur to them that most people don’t experience these sensations for example, when taking a shower. When someone informs this person that most people are not as uncomfortable as they are in the shower, this person can begin to understand why they resist showers or baths more than most people do. For a person who has just recently experienced new changes in the brain (such as a stroke), these sensations might be especially surprising or frightening.

10. This person **may not know** you are touching a part of their body. For example, they may not feel your touch, may think you’re touching a different part of their body, or they may not recognize the body part you are touching as theirs so they think you are touching someone else.
11. The length of time there is contact and the movement of touch may result in a **change** in the level of sensitivity. For example, their sensitivity to your touch may decrease or increase as your hand rests on their arm over a period of five minutes. When you move your hand on their arm, their sensitivity may also change.
12. The ability to feel touch, or the level and type of sensitivity to touch may be **unpredictable**. Each part of this person’s body or each side of this person’s body may have a different level or type of sensitivity to touch, and may change from one moment to the next.
13. **Evidence** of discomfort with touch might include:
 - a. Words or sounds this person makes.
 - b. Changes in this person’s breathing.
 - c. Visible evidence of pain or discomfort in their face and body such as stiffening, jerking, withdrawal, going very still, a frown, wince, shifting their eye gaze, tears, or a startled response.
 - d. Eyes darting, blinking, widening, or closing.
 - e. Accusations that you hit them (when your soft touch felt to them like a hit).
 - f. This person scratching their skin (when they seem to be trying to reduce itching).
 - g. Trying to remove clothing or anything that touches certain parts of their body.
 - h. Insisting on wearing one particular shirt or pants and refusing to change.
 - i. Resisting baths, showers, washing their hair, haircuts, or other “contact” tasks.
 - j. Resisting contact with surfaces, such as sitting down on a toilet seat or shower chair.
 - k. Distress when a fan moves air over their skin or ruffles their clothing.
 - l. Pulling away or trying to prevent you from touching particular spots on their body.
 - m. Frequent references to parts of the body when they talk.
 - n. “Freezing” or an apparent lack of response to your touch, such as going very still or staring at you, or avoiding eye contact (when they are overwhelmed with pain or anxiety).
 - o. Verbal or nonverbal reactions in an exaggerated way to touch (or events, certain people, or words they hear). They may raise their voice or try to push you away by striking out.
 - p. Distressing situations or behavior that distresses this person or others. The situations or behavior may not appear to be related to touch.

INTERVENTION SUGGESTIONS

GENERAL AND WHEN TOUCH IS COMFORTABLE

14. Use touch frequently to communicate **respect, comfort, and reassurance** and to help calm this

person.

15. Touch as appropriate, to help this person **understand** what you are saying or doing.
16. Touch this person's **body part** when talking about that part of their body, for example, when asking them to lift their arm or when asking if their arm hurts.
17. Use touch to get and keep this person's **attention**. For example, touch their arm or hand.
18. Touch **gently, slowly, ask for permission** before touching, and **give** this person **time** to prepare for your touch.
19. Touch this person to **feel their reaction** to what you say or do, for example to feel stiffening or an increased tension in a part of their body.
20. **Watch** this person's face and body, and **listen** to what they say, to discern how they **respond** to touch. Look for the evidence of discomfort listed above. If there is no reaction, try to discern if they are actually feeling your touch, by asking or by moving your hand on their skin to see if there is a response. Sometimes a person may be so frightened or in such pain, they feel overwhelmed and "freeze", so they don't appear to be reacting to the touch.
21. **Note** various parts of this person's body **frequently** to recognize changes in their sensitivity to touch.

WHEN SENSITIVE TO TOUCH

22. If this person is sensitive to touch, **avoid touching** them or avoid touching the spots on their body that are sensitive to touch.
23. **Ask permission** or tell this person before touching, so they can prepare emotionally and reduce the physical discomfort. Avoid surprising them.
24. Go **slowly** enough to allow this person time to prepare for your touch or for contact with cloth, water, or a surface.
25. Maintain **eye contact** when touching this person, if this person is comfortable with eye contact. Talk about something to distract them.
26. **Reassure** this person you will be careful and will respond to their requests to stop or wait.
27. Touch parts of their body that aren't as sensitive first, or the peripheral parts of their body (such as legs and arms) before moving your hand toward their torso, to help them get used to being touched at this time.
28. Minimize the number of times your hand leaves and returns to their body, since they may have difficulty adjusting to the initiation of touch.
29. Use the **palm** of your hand rather than fingers to touch, to minimize the number of contact points. For example, to grasp this person's arm, settle your palm onto their arm, then keep your fingers together and gently roll your fingers onto more of the arm to reduce the discomfort of initiating touch to new parts of skin.
30. Use **gentle firm pressure** when touching, if light touch seems to be uncomfortable. Slowly increase pressure until this person feels comfortable. Maintain this same amount of pressure throughout the time you are touching. Avoid applying so much pressure that your touch hurts or harms the skin and other tissue or joints.
31. Avoid moving your hand back and forth. Move your hand on their skin only when necessary, or when you are trying to avoid the removal of your hand and reinitiation of contact.
32. Touch through a **barrier**, such as a shirt sleeve or towel. For example, in the shower, cover the shower nozzle with a washcloth or put a towel over their skin to avoid direct contact of the water spray with their skin. When lifting a person's arm, for example, first drape a soft towel between your hand and their arm.
33. Avoid moving cloth, water, your hand, or a surface over their skin or over the parts of their body that

are sensitive to touch. For example, use dry shampoo, use a damp cloth to wash instead of a water spray from a faucet or shower nozzle, **pat** a person's wet arm with the towel rather than moving the towel on their arm, encourage this person to take a bath rather than a shower, avoid fans or wind that might blow a person's sleeve over the skin on their arm.

34. Remove or **loosen clothing** (including seams, and tight fitting or scratchy material) or surfaces that are rough or uncomfortable against their skin. For example, wear socks inside out or put a sheet between a blanket and a person's skin.
35. Provide **preferred clothing** (for example, have several sets of the same sweatshirt if they have one they insist on wearing consistently or refuse to take off), and **soft** towels and washcloths that feel comfortable to them.
36. **Watch** this person's face and body constantly, and listen to what they say to discern how sensitive or uncomfortable a part of their body is with touch at this moment.
37. **Try again later** if they are too sensitive to touch now.
38. Try to discern triggers or causes of **distressing situations** or behavior that is distressing to this person or to others. Search for pain or discomfort due to sensitivity to **touch** as a **possible cause** or trigger for apparently unrelated distress.
39. Take this person's feelings and behavior seriously and respond with kindness and calm patience. Remind yourself **this person has reasons** for reacting to touch or acting in this way, which we may not recognize or understand.
40. Consult a **health professional** to identify the source of pain or discomfort and appropriate treatment.

WHEN LESS AWARE OF TOUCH

41. If they have difficulty feeling your touch, **draw their attention** to your touch by telling them ahead of time and while you are touching.
42. Go **slowly** enough to allow this person time to prepare for your touch or for contact with cloth, water, or a surface.
43. Maintain **eye contact** when touching this person (if this person is comfortable with eye contact). Talk about your touch to keep them aware of it.
44. Touch the parts of their body where they recognize touch first, then move your hand toward other parts of their body. Or touch the torso or shoulder before moving your hand toward the peripheral parts (for example, arms and legs) of their body, to help them get used to being touched at this time.
45. Use **gentle firm pressure** when touching, if light touch seems to be unrecognizable. Touch lightly first, then slowly increase pressure until this person recognizes your touch. Maintain this same amount of pressure throughout the time you are touching. Avoid applying so much pressure that your touch hurts or mars the skin or tissue and joints.
46. **Move** your hand back and forth on their skin to focus attention on your touch. Move your hand gently and carefully since their skin may be dry or fragile and tear easily. Examine the skin where you are touching.
47. **Check their entire body** to make sure there aren't sores or painful or uncomfortable areas that are unnoticed by this person. Note especially the peripheral or distal areas such as fingers and toes.
48. **Watch** this person's face and body constantly, and listen to what they say to discern how aware they are of touch to a part of their body at this moment.
49. **Try again later** if they are unaware of touch now.