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A Qualitative Course-Based Inquiry into the Perceptions and Lived Experiences of Relational-Centered Educated Child and Youth Care Students of Adult-to-Child/Youth No-Touch Policy Practice Settings

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ABSTRACT : This qualitative course-based inquiry explored the perceptions and lived experiences of relational-centered educated child and youth care (CYC) students of no-touch policy in practice settings. Given that the course-based study aimed to explore the perceptions and lived experiences of relational-centered educated CYC students of adult-to-child/youth no-touch policies with a focus on the "meanings" and "interpretations" ascribed to their CYC practice experiences, the qualitative research design was guided by the interpretive research paradigm. Methodological triangulation was employed through the utilization of multiple data collection strategies. A reflective thematic analysis revealed four significant themes: a) understandable but harmful, b) understandable but necessary, c) are we protecting ourselves or restricting opportunities?, and d) turning to comforting alternatives.

KEYWORDS: *child and youth care, course-based, no-touch policy, students, qualitative*

I. INTRODUCTION

The scientific evidence overwhelmingly shows that from cradle to grave, the need for interpersonal human touch is a basic primal need and an integral part of human relations (Cekaite & Goodwin, 2021; Feldman, 2011; Heimler & Amedi, 2020). From a developmental standpoint, human touch is fundamental to physical and mental wellbeing (Packheiser et al., 2024). For example, touch is commonly used to convey positive intentions such as reassurance, comfort, kindness, and support (Hertenstein et al., 2006). American psychiatrist and neuroscience researcher Bruce Perry (2006), a specialist in children's mental health, maintains that safe and loving touch is a core human need. According to Ferber, Feldman, and Makhoul (2008), human skin-to-skin contact in the first hour after birth has been shown to help regulate newborns' temperature, heart rate, and breathing.

The Absence of Touch

Over 30 years ago, images of dirty and emaciated children abandoned in Romanian orphanages shocked the world and revealed the heartbreaking toll paid by children deprived of responsive care, stimulation, and human interaction (Carlson & Earls, 1997). Professor Nathan Fox, who then directed the child development lab at the University of Maryland and who followed these Romanian children for 14 years, reported that "the most remarkable thing about the infant room was how quiet it was, probably because the infants had learned that their cries were not responded to" (Weir, 2014). The Romanian infants bore similar effects to psychologist Harry Harlow's infamous "maternal deprivation" experiments in which rhesus monkey infants were removed from their mothers and raised in a laboratory setting in cages. His work essentially conveyed that when presented with a choice, baby monkeys preferred the comfort of the cloth mother as opposed to a cold wire one that provided milk (Harlow, Dodsworth, & Harlow, 1965; Kobak, 2012). Additional research also links the absence of human touch in childhood to aggression, attachment disorders, and mental health issues (Barnett, 2005; Cascio, Moore, & McGlone, 2019; Rutter et al., 2007). Nonetheless, many child and youth residential settings and community support programs have instituted adult-to-child/youth no-touch policies. Proponents of adult-to-child/youth no-touch policies argue that touch presents opportunities for boundaries to be crossed, leaving agencies, children, and staff open to inappropriate and harmful relationships (Warwick, 2017). The aim of this course-based inquiry is

hence to explore the impact of blanket adult-to-child/youth no-touch policies on CYC practitioners' relational opportunities to develop meaningful therapeutic relationships with vulnerable children and youth.

Undergraduate Course-Based Research: A Pedagogical Method to Promote Criticality, Reflectivity, and Praxis

Unlike the conventional didactic approach to research-methods instruction, undergraduate course-based research presents students the opportunity to grasp introductory research skills by conceptualizing, designing, administering, and showcasing small minimal-risk research projects under the direction and mentorship of the course instructor—commonly, a professor with an extensive background in research and teaching (Auchincloss et al.,2014; Hensel, 2018). The benefits derived from a course-based approach to teaching research methods are significant for CYC students. First, there is value in providing students with authentic learning experiences that enhance the transfer of knowledge learned in traditional education practice. For example, former students have reported that their engagement in course-based research enabled them to deepen their scientific knowledge by adopting new methods of creative inquiry. Second, course-based research offers students the opportunity to work with instructors in a mentoring relationship; one result is that a greater number of students express interest in advancing to graduate studies. Third, results generated through course-based research can sometimes be published in peer-reviewed journals and online open-access portals and thereby contribute to the discipline's knowledge base. The ethical approval required to permit students to conduct course-based research projects is granted to the course instructor by the university's research ethics board (REB). Student research groups are then required to complete an REB application form for each course-based research project undertaken in the class; each application is reviewed by the course instructor and an REB committee to ensure that the project is completed in compliance with the ethics.

II. RESEARCH DESIGN

Because interpersonal touch represents the primal sensory experience between humans, the aim of this qualitative course-based study was to understand CYC students' lived experience related to their exposure to adult-to-child/youth no-touch policies. Answering the research question required data collection strategies that focused on the "meanings" and "interpretations" participants ascribe to adult-to-child/youth no-touch policies within their CYC practice experiences. Thereby, we selected a qualitative research design guided by the interpretive research paradigm. The interpretive research paradigm asserts that "meaning" is not discovered but rather socially constructed through multiple realities and interpretations of a single phenomenon in distinct ways (Creswell, 2013; Merriam & Tisdell, 2016). That is, individuals construct meaning as they engage in the world (Crotty, 2015).

Research Question

What is the impact of adult-to-child/youth no-touch policies on relational-centred educated CYC students?

Sampling Strategy

Participants in this course-based study were recruited using a non-probability purposeful sampling strategy. Purposive sampling intentionally targets selected participants based on their characteristics, knowledge, and experiences as these relate to the research topic of inquiry (Maxwell, 2013; Merriam & Tisdell, 2006). As we exclusively chose MacEwan CYC students for our research sample, our sample was not random. We opened our study to all four years of CYC students, as everyone has different experiences within the field and varied perspectives on how personal touch could play a role in their practice and in building therapeutic relationships. Focusing on and exploring all CYC participants' experiences and perceptions allowed for a detailed and holistic collection of data that fit well with our qualitative research design. The predefined criterion used to select participants was enrollment in the CYC program at MacEwan University. Seventeen CYC students participated in the study.

Data Collection Strategy

Data was collected using a triangulation data collection strategy that included a short open-ended questionnaire, a Zoom conversational-style open-ended interview, and an optional arts-based activity. According to Halcomb and Andrews (2005), methodological triangulation has the potential to yield more comprehensive, insightful, and authentic data. These data collection strategies were appropriate for this study because they allowed participants to provide a rich description of their lived experiences of the phenomena of inquiry.

Open-Ended Questionnaire

The open-ended questionnaire included four open-ended questions, which were forwarded to participants via their university email accounts. As Swain and Spire (2020) explain, the open-ended questionnaire allowed participants to provide more in-depth responses. Schober, Gerrish, and McDonnell (2016) also note that thought-

provoking, open-ended questions have the potential to enrich the study with experiences and accuracy based upon participants' ability to freely express their thoughts.

Zoom Conversational Style Interview

The conversational-style interview consisted of the same four questions that comprised the open-ended questionnaire but involved a less-structured conversation with the participants—a two-way conversation where both the researcher and participants freely exchanged questions and information (Richey et al., 2024). Deakin and Wakefield (2013) assert that the use of remote video tools as a data collection method allows participants greater flexibility and convenience. In a study conducted by Mabragaña, Carballo-Diéguez, and Giguere (2013), participants preferred video conferencing over other forms of data collection methods.

Data Analysis

The open-ended questionnaires and conversational-style interviews were analyzed following Braun and Clarke's six-phase approach to reflexive thematic analysis (Braun & Clark, 2021). The coding approach was inductive and involved developing themes from the data content and semantics, staying close to participants' terms, and presenting a descriptive account of their CYC adult-child/youth no-touch practice experiences (Braun & Clark, 2021).

Findings

The reflective thematic analysis revealed four major themes that are presented under the three sub-questions that were put forward to the participants: a) understandable but harmful, b) understandable but necessary, c) are we protecting ourselves or restricting opportunities?, and d) turning to comforting alternatives.

Sub-question 1: Have you experienced any policy restrictions on adult-youth/child touch in your field practicums or work settings? If so, please describe. How do you feel about those restrictions?

a) *Understandable but Harmful*

The majority of participants expressed an awareness of the intention behind adult-youth/child no-touch policies to protect staff as well as children and youth but voiced objection to blanket adult-youth/child no-touch policies. For example, one participant gave the following response:

> "While working in a group home with kids aged 4–11 years old, I was told we were not to hug the children and not to sit too close to them. I was reprimanded for reading a bedtime story to a 5-year-old little girl because I had sat propped up against her headboard next to her. I felt sick when I was reprimanded because it felt like I was being accused of doing the most natural thing. I have a child close to her age, and to me, it felt like the most natural, nurturing thing to do for a child that age. I felt saddened that children this young were being denied safe and supportive love and affection while in such a fragile state. Though I understand there are predators, I felt the fear that the agency had over allegations was preventing children from having their basic needs met. These kids were very obviously starving for affection, and it seemed cruel and almost military to deny them of that."

Other similar comments included, "In my own work we are not supposed to have physical contact, but I do not agree with this because a lot of the kids we work with do not get any sort of affection so just giving a kid a hug can mean a lot to them"; "At my current work location, my boss has strict restrictions on no touch. I do not fully agree with the policy, as I believe that with a safe and strongly developed relationship with young people, finding opportunities to apply personal touch can establish a deeper connection"; and "At a previous work setting (daycare ages 1-5) we were told to keep touching to a minimum. This meant affection and help. We were told to only pick the children up if they needed help and not for any play-related games. I felt this lowered the chances for connection, play, and affection. Children, especially at this age, who I saw every day need affection and physical play, as they don't always have the language to speak their needs and emotions. We were able to build connection without it, but any hugs or physical games I was supposed to say no to."

b) *Understandable but Necessary*

The other not-as-dominant yet competing theme that emerged from this sub-question was an acceptance of adult-youth/child no-touch policies to protect themselves from accusations of inappropriate touch and the children and youth they encounter in their work from being touched inappropriately or experiencing emotional distress. This group of participants, however, did not address the scientific evidence and theoretical arguments that suggest that human touch is an essential aspect of social interaction, emotional regulation, and healthy development and that it plays a critical part in meaningful relationship building, conveying empathy, and promoting feelings of safety and trust.

Sub-question 2: How do adult-youth/child touch policies (i.e., your ability to engage in adult-youth/child touch or restrictions over your ability to engage in adult-youth/child touch) impact your mental wellness and contentment as a CYC practitioner?

c) *Are We Protecting Ourselves or Restricting Opportunities?*

In their first year of study, CYC students are taught the difference between boundaries and barriers. The difference is that boundaries are healthy limits that individuals establish to safeguard their personal space, emotional well-being, and relationships that are necessary in maintaining a professional and supportive environment. The barriers disguised as boundaries that block the way to a strong connection or engagement are physical, emotional, or psychological and are manifestations of fear, mistrust, or previous negative experiences. Barriers impede the building of proper relationships and reduce opportunities for strengthening oneself or getting support. While participants did not make specific reference to the barriers versus boundaries distinction, most participants expressed an intuitive sense that touch was essential to CYC practice despite the rational arguments put forward in support of adult-youth/child no-youth policies. For example, one participant stated,

> "Adult-youth no-touch policies have mixed effects on my mental wellness and contentment as a CYC practitioner. On the one hand, they provide clear guidelines that help prevent potential misunderstandings or conflicts, which can reduce anxiety and allow me to focus on building relationships in other ways. On the other hand, the restrictions can sometimes feel limiting, especially when I sense that a child/youth might benefit from a comforting touch, like a hug during a difficult moment."

Another participant noted,

> "As I am concerned that a lack of touch can negatively impact the human and brain development of the children and youth, especially those in government care. While I would not say that it impacts my mental wellness or practice, the awareness itself does lower my morale and contentment as a practitioner."

Additional comments in support of this theme include,

> "For me, I feel low and helpless not being able to show appropriate affection to the kids. I broke the rules and did it anyway because it did not align with my values, and I felt it violated everything I knew about development. Because I knew I could back everything up with theory, I chose to follow my values instead and left places that couldn't get on board"; "I feel incredibly bad about being in workplaces that have a no-touch policy in place, because I find that there is a barrier between the connection between the youth and the worker. I feel as if the people who are making the policies do not understand how much touch can increase a connection in distress"; "Not being able to have any personal touch with a child or youth does put a toll on you in the long run. When a child is begging you for a hug, but you have to turn them away repeatedly, it can make you feel like you are not doing your job at supporting children, placing mental strain on yourself.".

Sub-question 3: How do you navigate situations where the no-touch policy conflicts with your instinct to offer comfort or reassurance to a child or youth in your care?

d) *Turning to Comforting Alternatives*

CYC is considered a creative practice because it requires practitioners to constantly adapt and adjust their approach to form connections with children and youth. While several participants did not accept the premise that there was a substitute to touch, participants who did offer alternative approaches to human touch suggested the use of comforting options such as the use of stuffed animals for children. For example, one participant stated, "I would get two teddy bears, and they could high-five or hug. And I would explain we have the bears because, unfortunately, we can't hug or high five, and it is to keep each other safe." For older youth, the consensus was to present a calm and empathetic demeanour through active listening, using supportive language and body posture, and demonstrating a genuine interest in their feelings. Comments made by participants included, "Providing a space where they can be free to talk about their situation and giving them the opportunity to lead the conversation and what may be happening or bothering them." Another common response was, "I would try to use empathetic body language, like eye contact, hand movements and positioning my body as open as possible as to make a statement that I am present and there without having to engage physically, but I am here for that when they make the move and are comfortable with a hug or physical comfort."

Figure 1. Public research poster presentation at MacEwan University November 26, 2024
Left to right Denae Weiss, Wade McGowan, Turner O'Keefe, and Brenna Hein

Limitations

This course-based study was conducted using purposive sampling. It includes the perspectives of CYC students from one university and, as such, likely reflects those students' educational, cultural, and social norms. The participants were young and had little practical experience in the field, which should be considered when interpreting students' responses.

III. DISCUSSION

This course-based study was formative in its intent. It was conducted primarily to gather information and insights, with the goal of informing and improving the learning experience of CYC students regarding the importance of delivering the type of support to children and youth informed by credible evidence-based research about the nature of healthy human development. Adult-to-youth/child no-touch policies have serious implications for CYC students whose primary mission is to form therapeutic relational alliances with children and youth. The findings of this course-based study revealed that the majority of the participants expressed an uneasiness and, in certain instances, emotional distress over having to work in practice settings that employ adult-to-youth/child no-touch policies, while others accepted the adult-to-youth/child no-touch policies as being out of their control and sought alternative ways to demonstrate support and care. Fostering CYC students' ethical development requires them to grapple with the complex ethical considerations surrounding adult-to-youth/child no-touch policies, including developing the necessary knowledge, skills, and personal reflection to navigate the moral complexities involved in CYC practice while upholding their ethical obligation to compassionate care. The findings of this course-based study will be presented to the CYC team of educators at MacEwan University to reflect upon from a curriculum perspective and potential further research into the topic.

REFERENCES

[1] Auchincloss, L.C., Laursen, S. L., Branchaw, J.L., Eagan, K., Graham, M., Hanauer, D.I., Lawrie, G., McLinn, C.M., Pelaez, N., Rowland, S., Towns, M., Trautmann, N.M., Varma-Nelson, P., Weston, T.J., & Dolan, E.L. (2014). Assessment of course-based undergraduate research experiences: A meeting report. *CBE Life Sciences Education, 13*(1), 29-40.

[2] Barnett, L. (2005). Keep in touch: The importance of touch in infant development. *Infant Observations, 8*(2), 115-123.

[3] Braun, V., & Clarke, V. (2021). *Thematic analysis: A practical guide.* Sage.

[4] Carlson, M., & Earls, F. (1997). Psychological and neuroendocrinological sequelae of early social deprivation in institutionalized children in Romania. In C. S. Carter, I. I. Lederhendler, & B. Kirkpatrick (Eds.), *The integrative neurobiology of affiliation* (pp. 419–428). New York Academy of Sciences.

[5] Cascio, C. J., Moore, D., & McGlone, F. (2019). Social touch and human development. *Developmental Cognitive Neuroscience*, 35, 5-11.

[6] Cekaite, A., & Goodwin, M. H. (2021). Touch and social interaction. *Annual Review of Anthropology*, 50, 203–218.
[7] Creswell, John W. (2013). *Qualitative inquiry and research design: Choosing among five approaches*. Google Books. https://books.google.com/books/about/Qualitative_Inquiry_and_Research_Design.html?id=Ykruxor10cYC
[8] Deakin, H., & Wakefield, K. (2014). Skype interviewing: reflections of two PhD researchers *Qualitative Research, 14*(5), 603-616.
[9] Feldman, R. (2011). Maternal touch and the developing infant. In M. J. Hertenstein & S. J. Weiss (Eds.), *The handbook of touch: Neuroscience, behavioral, and health perspectives* (pp. 373-407). Springer Publishing Company.
[10] Halcomb, E., & Andrew, S. (2005). Triangulation as a method for contemporary nursing research. *Nurse Research, 13*(2), 71-82.
[11] Harlow H. F., Dodsworth R. O., & Harlow M. K. (1965). Total social isolation in monkeys. *Proceedings of the National Academy of Sciences of the United States of America.* Retrieved from
[12] https://www.ncbi.nlm.nih.gov/pmc/articles/PMC285801/pdf/pnas00159-0105.pdf
[13] Heimler, B., & Amedi, A. (2020). Are critical periods reversible in the adult brain? Insights on cortical specializations based on sensory deprivation studies. *Neuroscience & Biobehavioral Reviews,* 116, 494-507.
[14] Hertenstein M. J., Verkamp J. M., Kerestes A. M., & Holmes R. M. (2006). The communicative functions of touch in humans, nonhuman primates, and rats: A review and synthesis of the empirical research. *Genetic Social and General Psychology. Monograph,132*(1), 5–94.
[15] Ferber, S. G., Feldman, R., & Makhoul, I. R. (2008). The development of maternal touch across the first year of life. *Early Human Development, 84*(6), 363–370
[16] Hensel, N. H. (2018). Crazy observations, audacious questions. In Hensel, N.H. (Eds.), *Course-based undergraduate research: Educational equity and high-impact practice* (pp. 1-11). Sterling, Virgina: Stylus Publishing, LLC.
[17] Kobak, R. (2012). Attachment and early social deprivation: Revisiting Harlow's monkey studies. In A. M. Slater & P. C. Quinn (Eds.), *Developmental psychology: Revisiting the classic studies* (pp. 10–23). Sage Publications Ltd.
[18] Mabragaña, M., Carballo-Diéguez, A., & Giguere, R. (2013). Young women's experience with using videoconferencing for the assessment of sexual behavior and microbicide use. *Telemedicine and e-Health, 19*(11), 866–870.
[19] Merriam, S. B., & Tisdell, E. J. (2016). *Qualitative research: A guide to design and implementation* (4th ed.). Jossey Bass.
[20] Packheiser, J., Hartmann, H., Fredriksen, K. Gazzola, V., Keysers, C., & Michon, F. (2024). A systematic review and multivariate meta-analysis of the physical and mental health benefits of touch interventions Systematic. *Nature Human Behaviour, 8*(6), 1088-1107.
[21] Perry, B. D. (2006). Applying principles of neurodevelopment to clinical work with maltreated and traumatized children: The neurosequential model of therapeutics. In N. B. Webb (Ed.), *Working with traumatized youth in child welfare* (pp. 27–52). The Guilford Press.
[22] Richey, J., Eich-Krohm, A., deMarrais, K., Rauf, Dr. A., Wergin, J., Dingus-Eason, J., Hargraves, D. L., Skulmoski, M. L. K., Hedin, D. N., & Smith, M. L. (2024). *Interviews: learning the craft of qualitative research interviewing.* SAGE Publications. https://us.sagepub.com/en-us/nam/interviews/book239402
[23] Rutter, M. (2000). Resilience reconsidered: Conceptual considerations, empirical findings, and policy implications. In J. P. Shonkoff & S. J. Meisels (Eds.), *Handbook of early childhood intervention* (2nd ed., pp. 651–682). Cambridge University
[24] Schober, M. M., Gerrish, K., & McDonnell, A. (2016). Development of a conceptual policy framework for advanced practice nursing: an ethnographic study. *Journal of Advance Nursing, 72*(6), 1313-24.
[25] Swain, J. M., & Spire, Z. D. (2020). The Role of Informal Conversations in Generating Data, and the Ethical and Methodological Issues. *Forum Qualitative Sozialforschung Forum: Qualitative Social Research, 21*(1).
[26] Warwick, L. M. (2017). *Touching matters: An ethnographic study of adult-child relationships and the use of touch in residential child care.* PhD thesis, University of Nottingham.
[27] Weir, K. (2014). The lasting impact of neglect. *Monitor on Psychology, 45*(6), 36–40.