

APPROPRIATE AND INAPPROPRIATE CONTACTS

PURPOSE OF THE EXERCISE:

This exercise can serve different purposes. It may help to show differences between participants in how they perceive physical contacts with different target groups. It can also show the importance of the context in which physical contact can take place. Most importantly, it may show that people have different backgrounds and values concerning physical contact.

TIMING:

1 or 2 hours, depending on the time spend in exploring the differences.

NEEDED MATERIAL:

Copies of the table.

HOW TO CONDUCT THE EXERCISE:

Each participant individually fills in the list (see below). Participants then join in small groups to discuss the differences they find, and to explore the reasons for these differences. Finally the results are discussed with the whole group.

It is likely that there are big individual differences in the perception of what is “appropriate” and what is “inappropriate”. Some participants consider every contact as “inappropriate”. Two reasons they give: the first being the cultural background of the participant, the other is the perception that within society there is no acceptance of physical contact between social worker and client.

It is important to accept all answers of the participants, so that they feel free to answer as they feel.

SUGGESTIONS:

After discussing the differences between participants, one can take a different approach. The first question then is, whether different target groups have the “right” to intimacy/ physical contact/ sexual experiences. The answer can be found in the Universal declaration of human rights (1948), the framework of “quality of life” (Schalock et al., 2008), etc.

Without judging the answers of the participants to the list of “appropriate and inappropriate contacts”, the coach then asks how social workers can combine the right to intimacy/ physical contact/ sexual experiences with the believe that physical contacts are inappropriate.

(“If the goal of social care workers is to provide a good quality of life, and when interpersonal relationships, with intimacy as an indicator, is one of the dimensions, then how will you provide this quality of life?”)

A last part of the exercise then may be to refer to the comfort-stretch-panic model (by Ryan and Markova, see “background for teaching”). Participants may consider physical contacts as inappropriate now, but how can they “learn” to look at it in a different way?

REFERENCES:

Heemelaar, M. (2013). *Seksualiteit, intimiteit en hulpverlening*. Houten: Bohn Stafleu Van Loghum.

Indicate, on a scale of 3 possibilities, what your opinion is concerning the degree of desirability of the following intimate contacts between a social worker and a client. Use the following codes: A= appropriate, D= doubt and I= inappropriate.

Action	Child	Youngster	Adult with mental disability	Adult with physical disability	Elderly	Adult with psychiatric problems
Kiss the client on the cheek as a greeting.						
Put your arm around the client when in grieve.						
Have a romp with the client.						
Have a client lean on you when looking at the TV.						
Massaging the client before going to bed.						
Give the client, if requested, the address of a video shop with porn movies.						
Show a client how to masturbate						
Shower and dry off the client						
Hug the client						

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