

2024

EMPATHETIC TOUCH



Social Survey Report

Experience and need for massage / empathetic touch during illness



Empathetic touch should be considered an essential part of medical communication



Agnieszka Kawula's latest report on the role of touch in healing provides convincing evidence that empathetic touch and elements of gentle massage can significantly support therapeutic processes in sick people. The author and the results of her study clearly indicate that touch is necessary for patients, providing them with important emotional and physical support. These findings suggest the need of promoting and spreading about therapeutic touch among medical personnel and caregivers.

Touch that is mindful and empathetic can improve patients' well-being, reducing stress, anxiety and pain. Introducing guidelines and standards for empathetic touch in facilities such as hospices, hospitals and nursing homes could significantly improve the quality of care. Education of professionals in this area is crucial to make touch an integral part of a holistic approach to the patient. It is also worth noting the importance of empathetic touch in the context of medical communication. In situations where verbal communication is insufficient or inadequate, the patient may feel reduced to the role of a body that is merely the object of medical action. Absolute errors in providing touch, such as mechanical and impersonal caregiving, can lead to the feeling of being dehumanised, where the patient sees themselves as 'flesh'.

For this reason, empathetic touch should be considered an essential part of medical communication. Through proper training and standards, it is possible to ensure that every patient receives care that is not only medically effective, but also respectful and empathetic. This report is an excellent starting point for further efforts to introduce empathetic touch into everyday medical practice.

Zbigniew Kowalski

Patient engagement designer

Polskie Towarzystwo Komunikacji Medycznej
(Polish Society for Medical Communication)

A new perspective on the role of touch



I remember accompanying my grandmother in dying and thinking to myself that I wish every dying person would experience such closeness of other people. I feel that a good death is a grace both for the dying person and those accompanying them. At one point, when verbal contact became very difficult, I simply massaged my grandmother's hands.

Empathetic touch is the most primal language of safety and love. My grandmother died, and the paths of fate directed me not to palliative support, but to caregivers of people with disabilities.

Observing how soothing touch can be for those deprived of it due to loneliness or illness, I organized massage sessions for friends – mothers of people with disabilities. It was wonderful to watch them leave relaxed, smiling, completely buoyantly.

Currently, my association gives psychological, logistical and respite care, but no less important project is the Flying Spa, which reaches with massages to caregiving relatives, mainly mothers.

I believe that Ms Agnieszka Kawula's work adds a whole new quality to the supportive care – in a broad sense, giving a new perspective on the role of touch. We have already observed that untouched children die, that baby monkeys prefer a fluffy dummy mother who doesn't give them food to one who feeds but is made of wire.

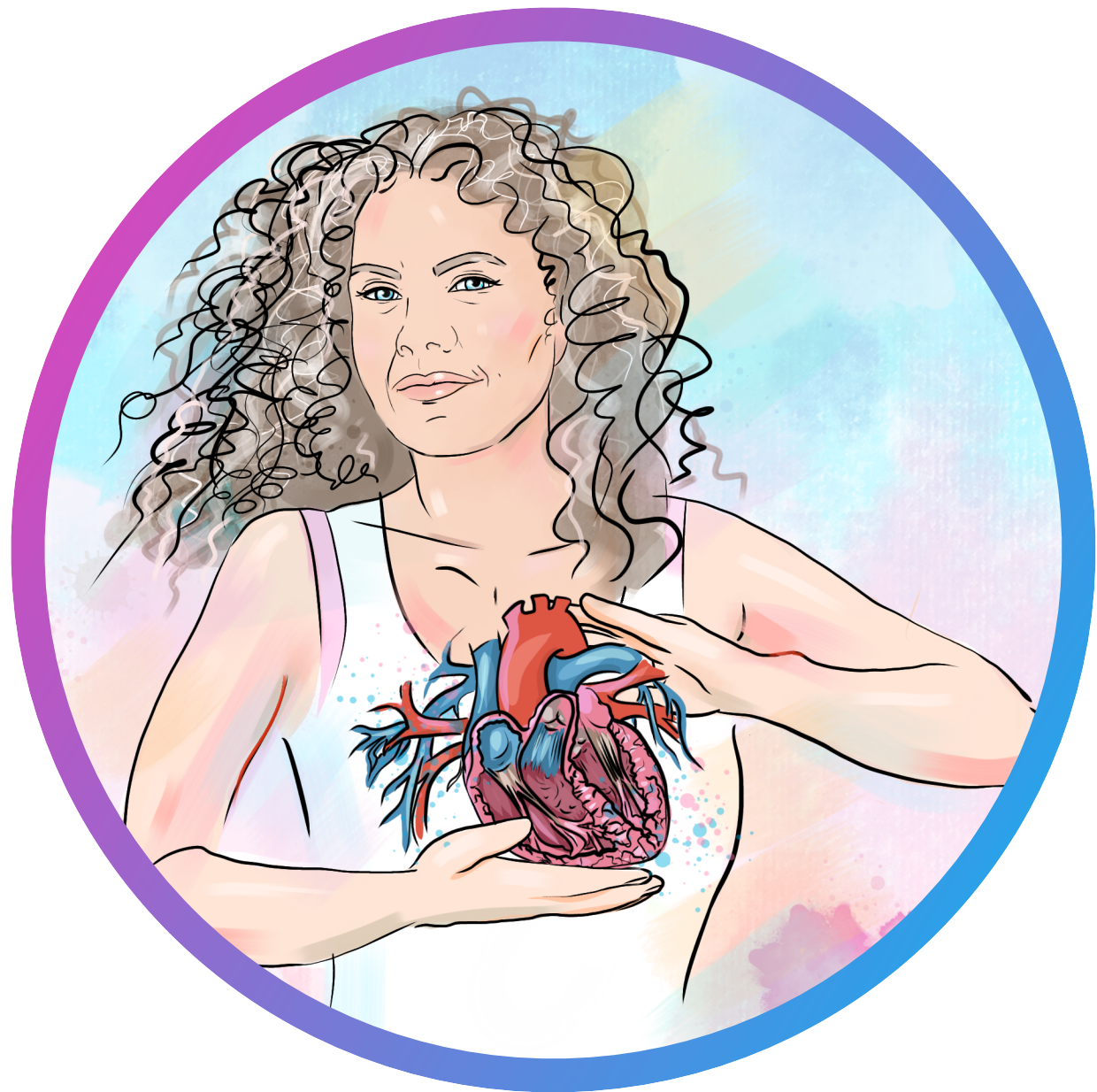
It is thanks to the touch that levels of oxytocin – the happiness hormone – increase. We know all this, but in institutional care we rarely enjoy these benefits. We are afraid of crossing boundaries.

That is why this study – compiled with care, backed by years of experience – is extremely important. I hope that this work is the beginning of a revolution in the support on offer.

Olga Ślepowrońska

Vice President of Mudita Association,
psychologist

AGNIESZKA KAWULA



Therapist and teacher of Hawaiian Lomi Lomi Physio massage

Founder of the Institute of Touch and Massage, author of the podcast *Anatomy of Touch*

Creator of touch-massage voluntary service

Author of the report *Massage – Awareness, Needs, Expectations*

Researcher of the effects of massage and touch on a person



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ABOUT THE RESEARCH



01

The report is a result of a survey conducted by the Institute of Touch and Massage between November 2023 and January 2024.

02

The purpose of the study was to verify the hypothesis of the supportive role of massage during illness or recovery, as well as to educate on the need for and importance of empathetic touch / massage elements in situations of physical debility.

03

The survey included 212 respondents from around the country of Poland.



METHODOLOGY



The study is based on an analysis of available statistical data, which was collected through a quantitative survey conducted using the CAWI (Computer Assisted Web Interview) method. The interview was carried out via computer, and respondents independently read the survey questions at their convenience and answered the questionnaire available online. All respondents' answers (N = 212) were automatically recorded and summarized collectively in a database.

A set of 62 detailed questions was prepared to not only explore what respondents' experiences of touch are during illness, but also to find a way how to introduce it into the treatment process in such a manner that it does not produce bad experiences and makes the massage therapist aware of those moments in which the touch can be supportive on various levels.

METHODOLOGY



Respondents to the described study were people who personally experienced the effects of empathetic touch / massage elements, and those who had an opportunity to observe the effects of applying these during illness or recovery of the person under their care.

This is the kind of exploratory study that has been conducted to describe a phenomenon that has so far been recognized with little information about it. And even though the importance of touch has been much talked about, there are no studies that present a broader understanding of the effects of its use and describe the experiences of people who provided such support or received it themselves, especially during illness or recovery.



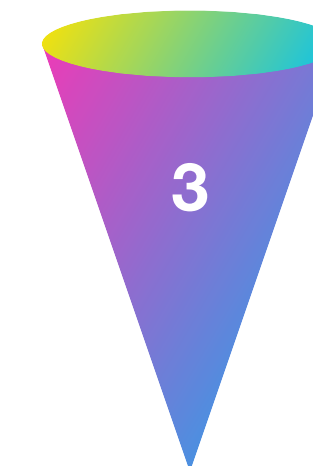
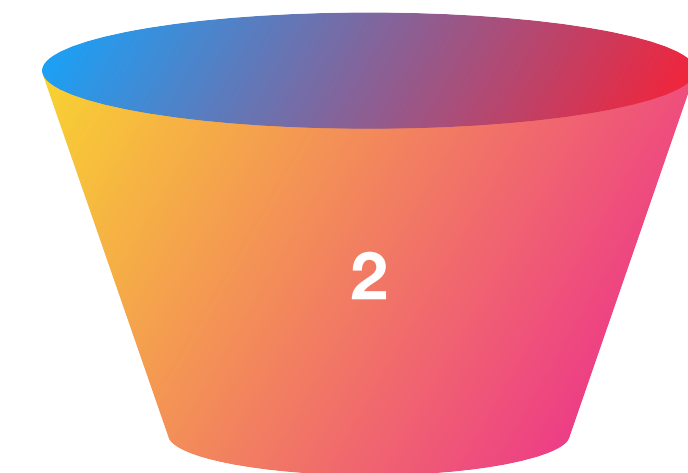
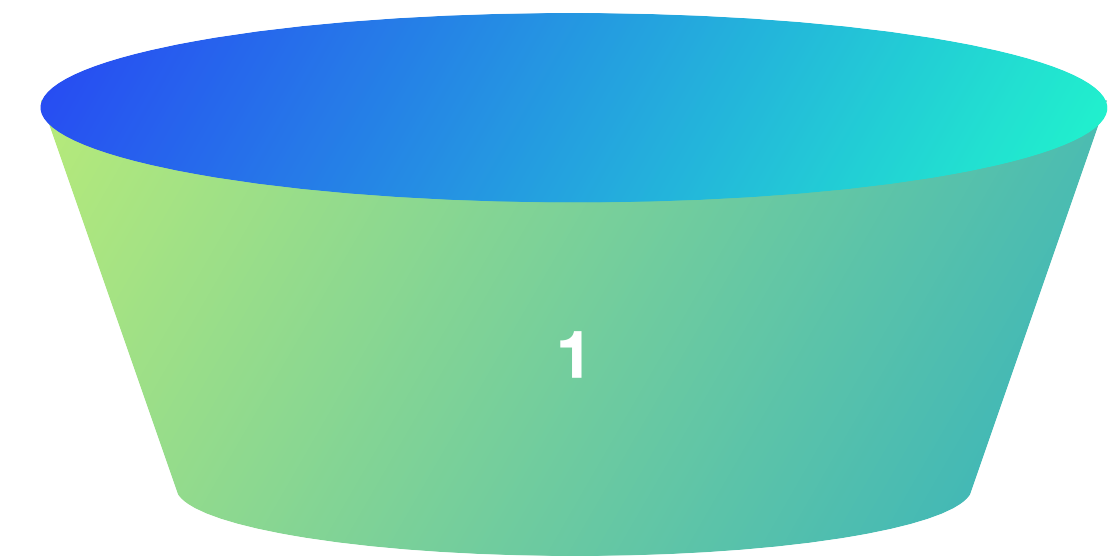
RESEARCH HYPOTHESES



A patient has a need for physical closeness, empathetic touch or elements of gentle massage during illness.

We can use touch to comfort people who are physically suffering and who are sick (both chronically and with minor ailments like tonsillitis or flu).

The inclusion of touch / empathetic massage in the treatment process can shorten the duration of the disease and have a positive impact on its course.



THE SURVEY WAS DIVIDED INTO 4 BLOCKS

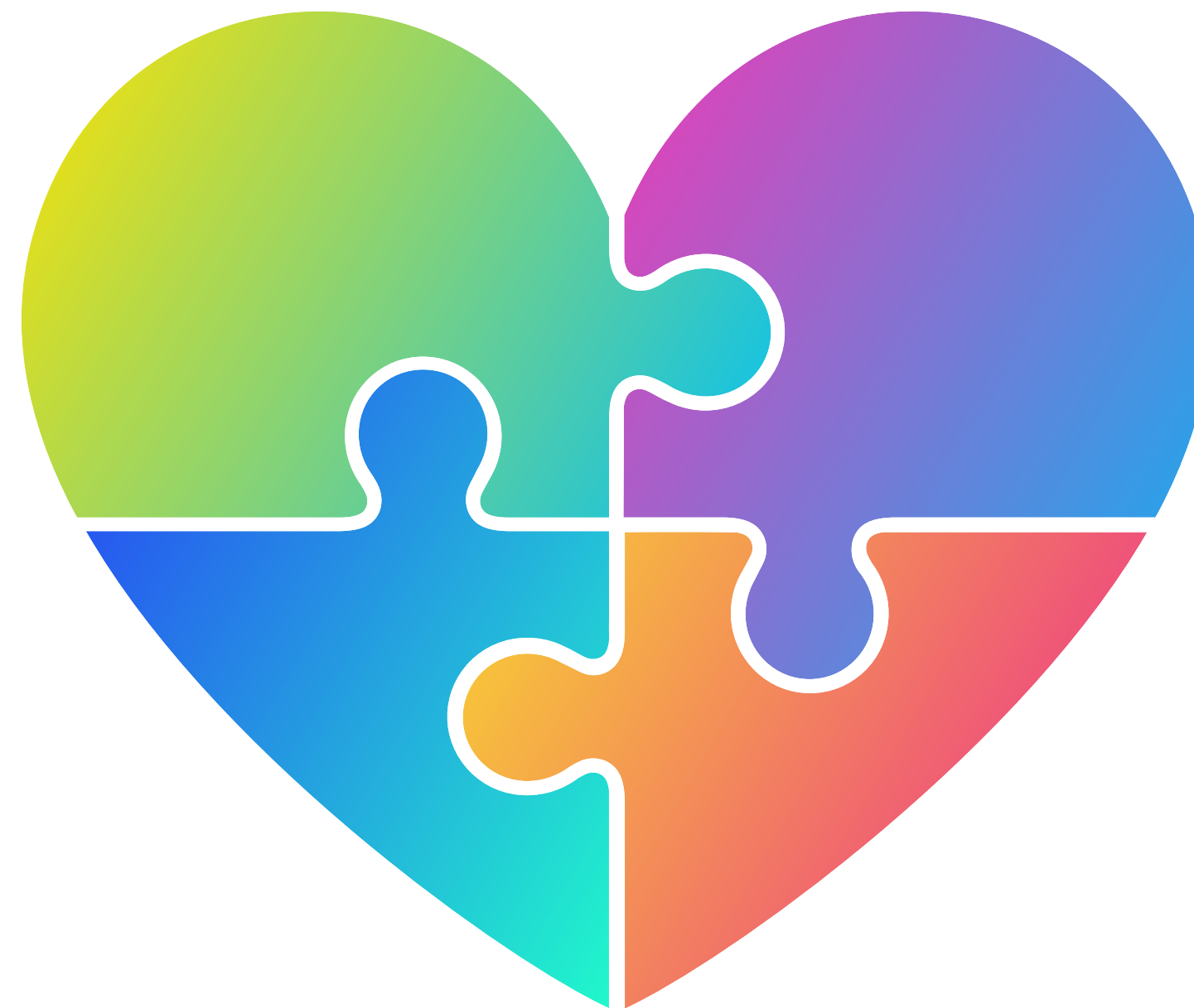


BLOCK A

Empathetic touch / massage during illness

BLOCK B

Self-experience of people providing support with empathetic touch / gentle massage during illness



BLOCK D

Good habits and tips, i.e. how to take care of a patient professionally without neglecting tenderness and empathy

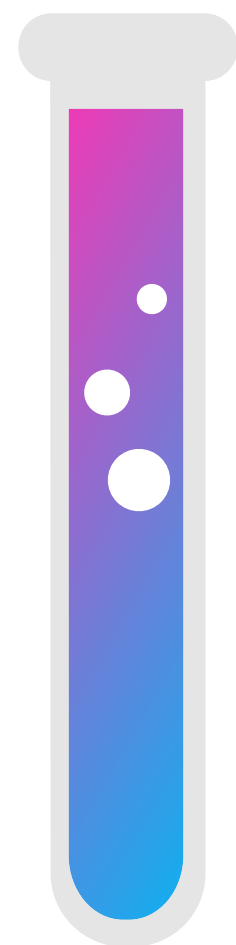
BLOCK C

Self-experience of people receiving support via empathetic touch / massage during illness

KEY FACTS

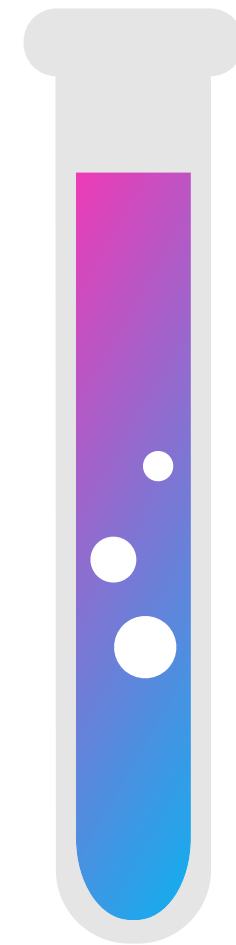


99%



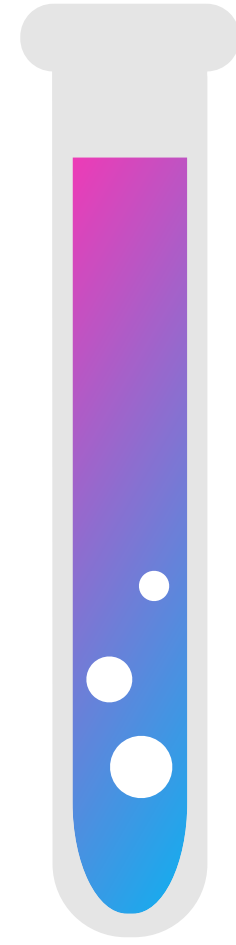
According to almost all (99.5%), the touch of a loved one has a huge impact on the course of disease.

95%



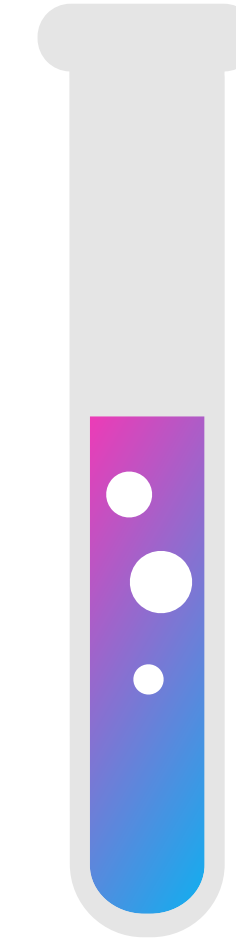
Nearly 95% think they may also be necessary to people with whom they have no communicational contact or awareness.

96%



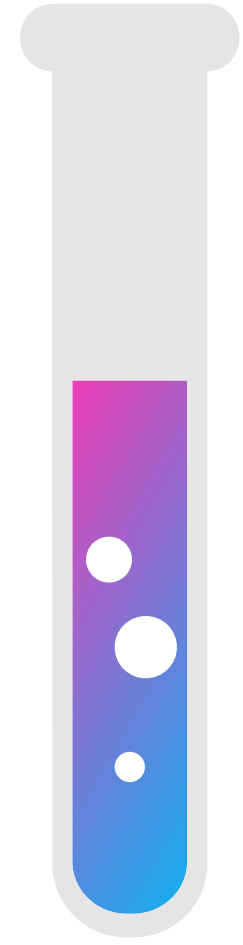
Ponad 96% ankietowanych twierdzi, że chorym potrzebny jest empatyczny dotyk i że może go dawać bliska osoba, a nie tylko ktoś z profesjonalnym przygotowaniem.

56%



As many as 56% of respondents strongly denied that empathetic touch could have any negative effects on the patient.

59%

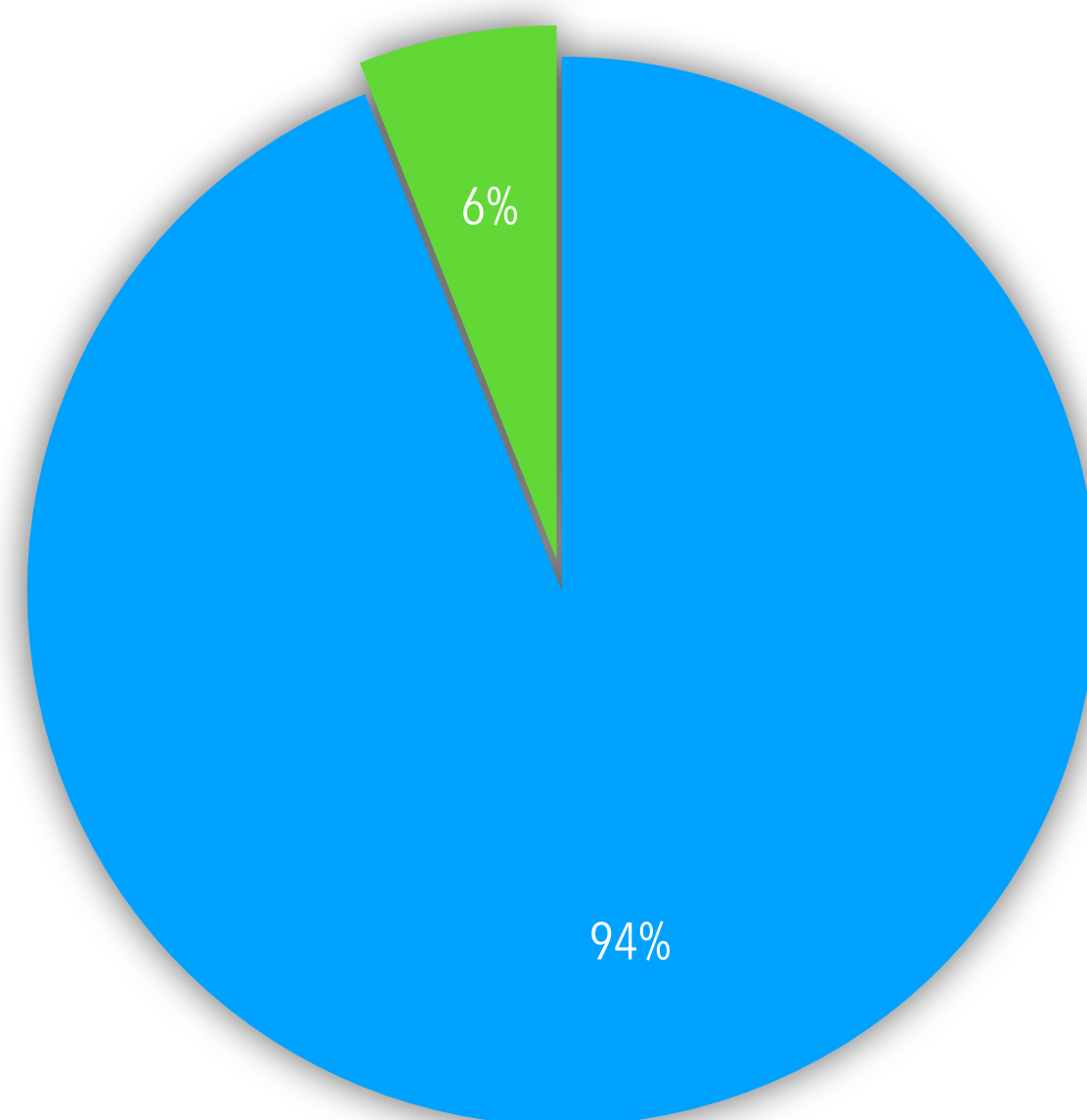


More than 59% of respondents believe that empathetic touch provides the patient with better mental well-being.



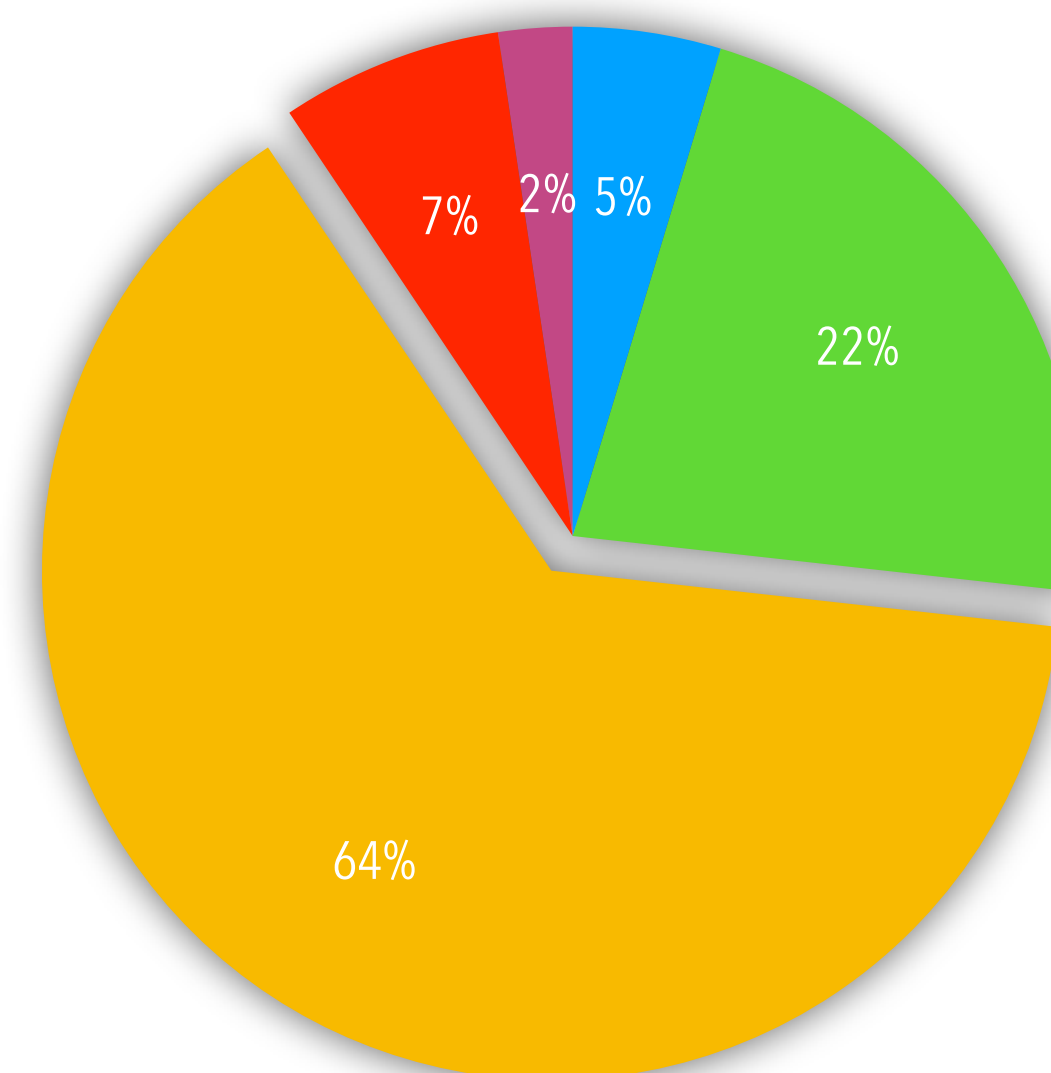
METRICS

Sex



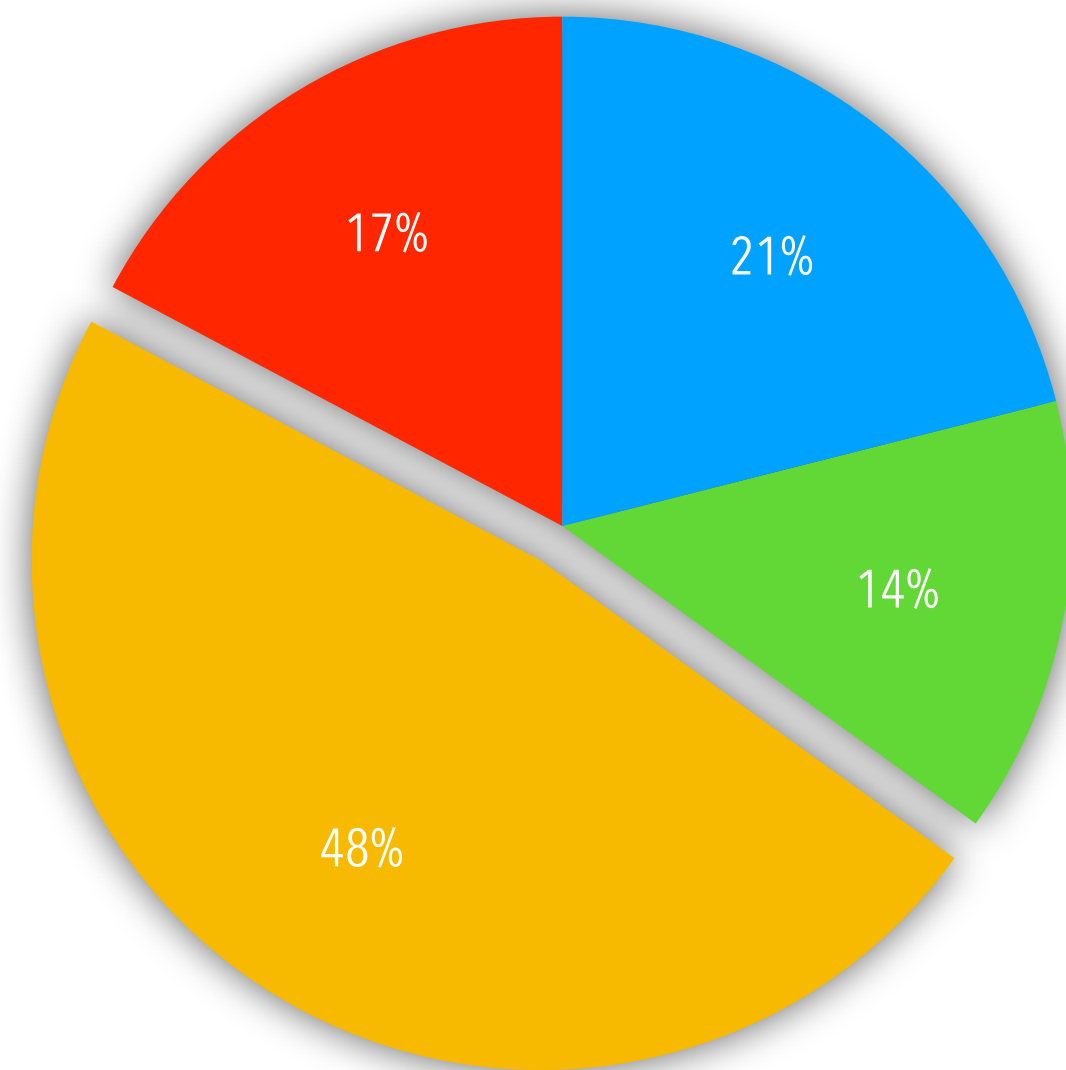
● Women ● Men

Age



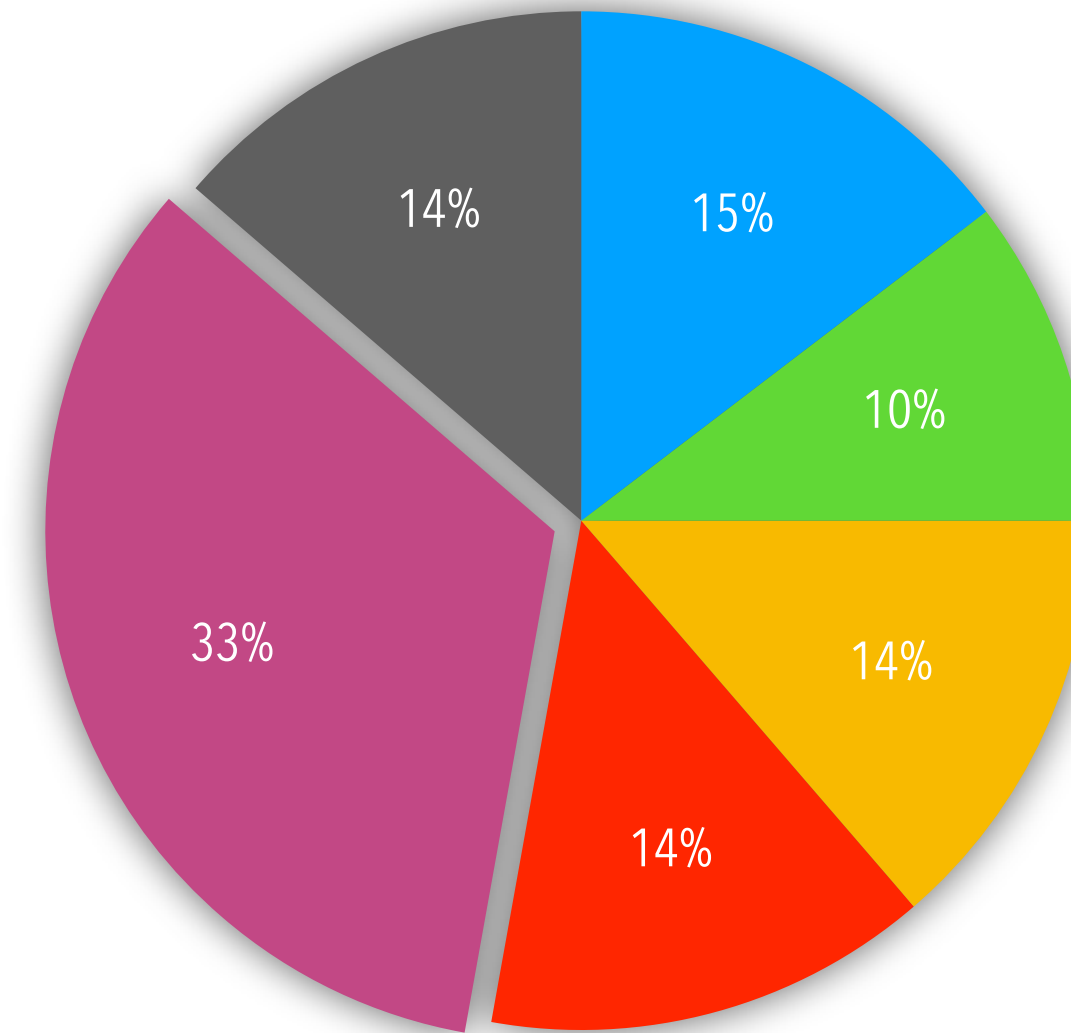
● 18-25 ● 26-35 ● 36-55
● 56-65 ● 66-75

Education

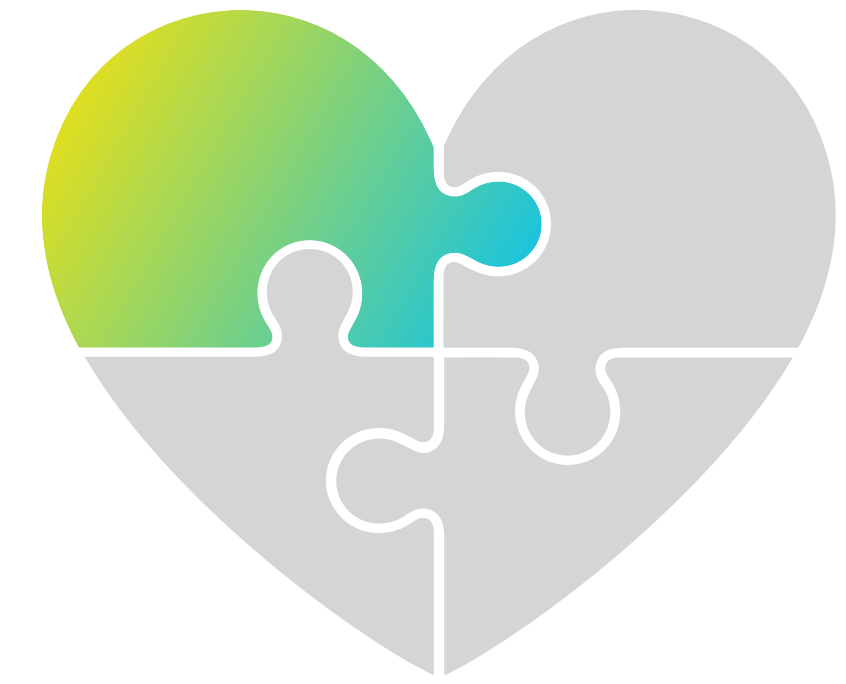
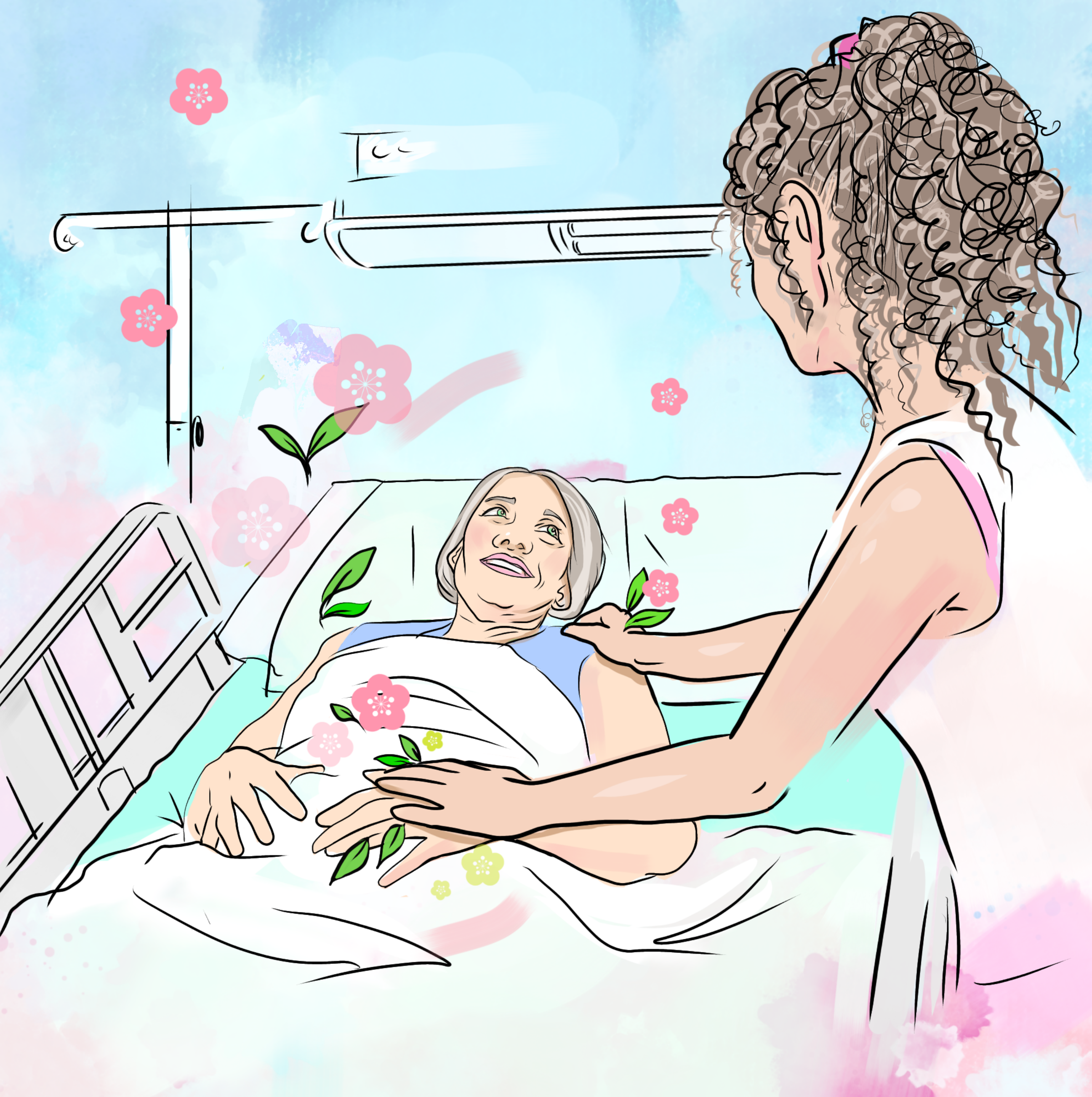


- Secondary school
- Bachelor's degree
- Master's degree
- Doctorate (phd) / postdoctoral

Place of residence



- Urban area up to 20,000 inhabitants
- Urban area 20,000-50,000
- Urban area 50,000-150,000
- Urban area 150,000-500,000
- Urban area above 500,000
- Countryside



BLOCK A

Empathetic touch /
massage during illness

Touch as basic support in medical care



Recently, while preparing to speak at the Congress of the Polish Society of Palliative Medicine in Gdansk, I have had some self-reflection about my approach to patients.

So, I was preparing a lecture on recommendations in the treatment of a patient with dyspnea (shortness of breath) under palliative care by an expert palliative care nurse.

To my surprise, but also in spite of the daily routine, I found in the European recommendations a lot of advice on non-pharmacological approaches.

In addition to breathing exercises, education on how to care for the patient during dyspnea, I also found recommendations for aromatherapy massage, meditation, yoga, music therapy and acupuncture and acupressure. These methods, after all, are nothing more than therapeutic touch to relieve shortness of breath.

In addition to this, it is important to remember that it is not uncommon for dyspnea to be fuelled by anxiety, and this is reduced by the presence of another person, composure, hand-holding or simply touch which provides a sense of security and improves the patient's comfort.

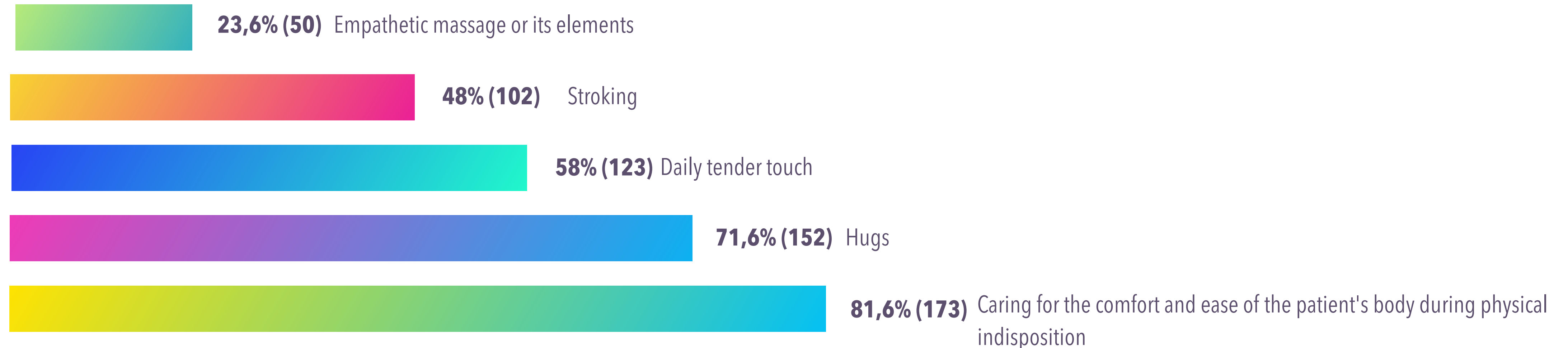
Especially we, qualified medical personnel, nurses and doctors, should remember that pharmacotherapy is more effective if we add to it complementary methods, which are mainly based on various touch techniques. However, let this basic support that each of us can implement on a daily basis, while giving a patient an injection or an oral medication, be an empathetic touch, it does not cost us much at all, and the benefits will be invaluable.

Michał Milewski

Anaesthesiology and intensive care nurse, Pomeranian voivodship consultant in palliative care nursing



How can you show closeness and physical support to the patient during illness?



% of indications (number of respondents) – N = 212

Respondents' own indications:

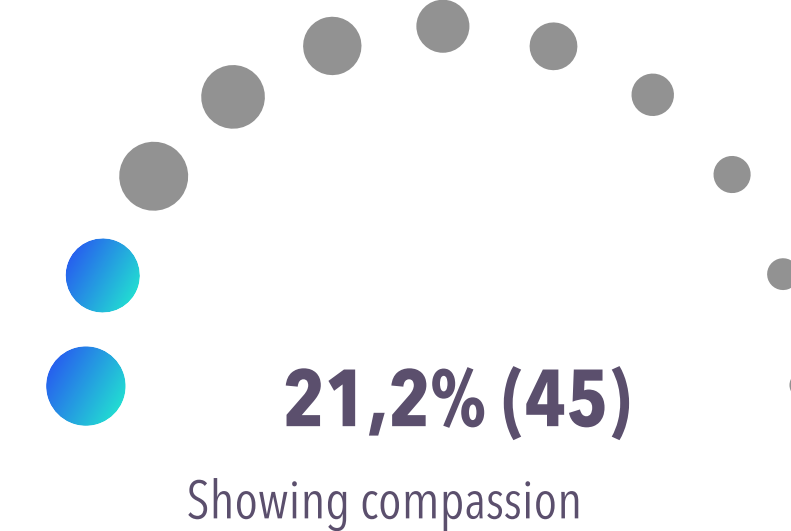
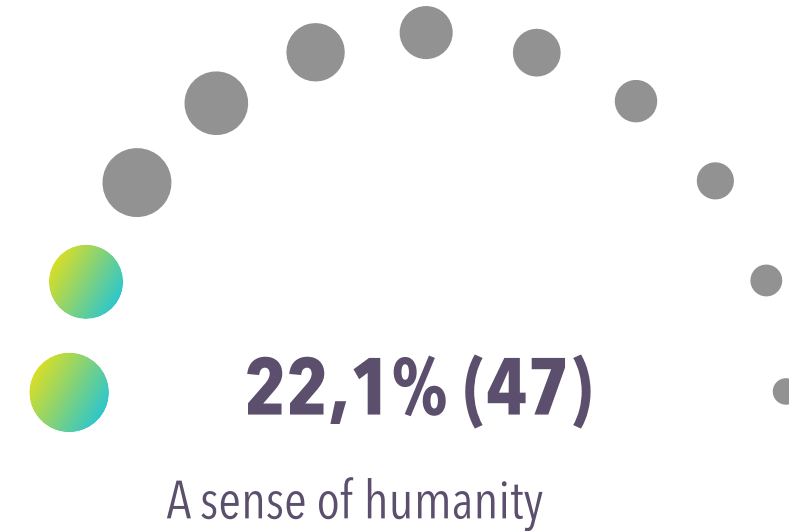
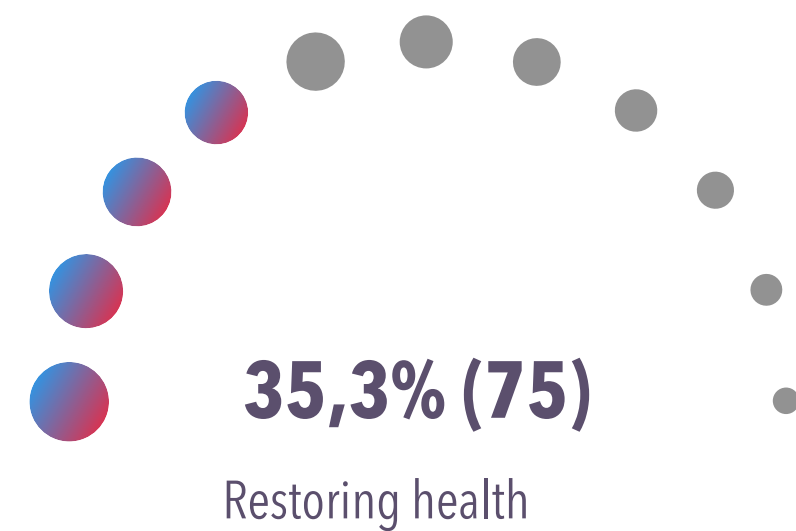
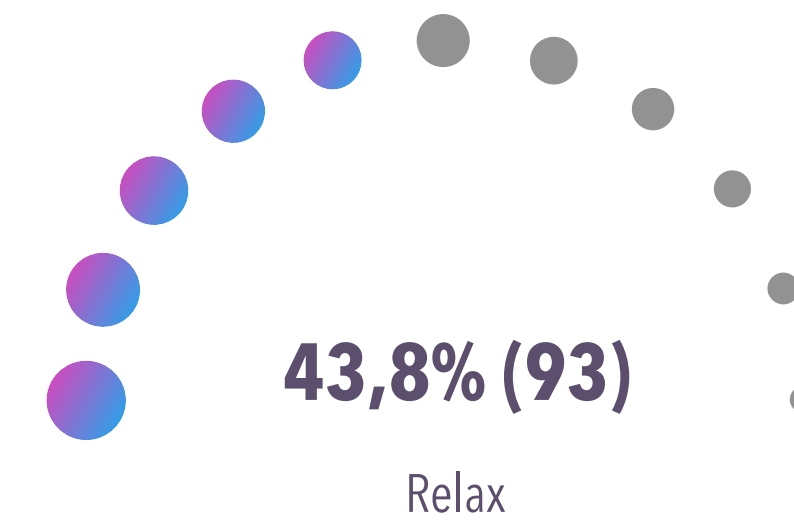
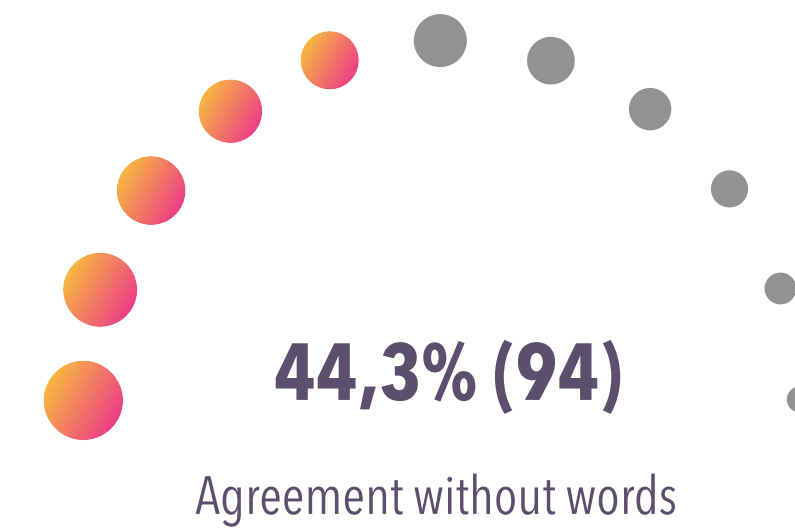
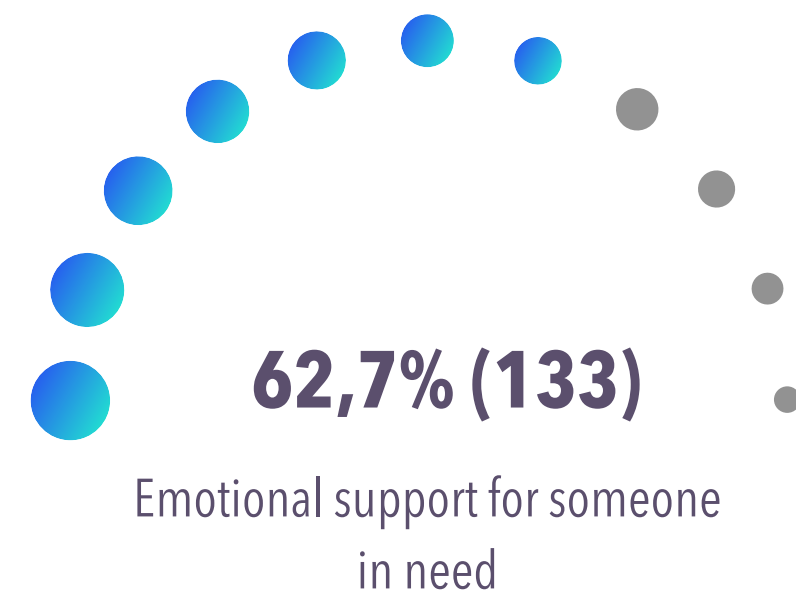
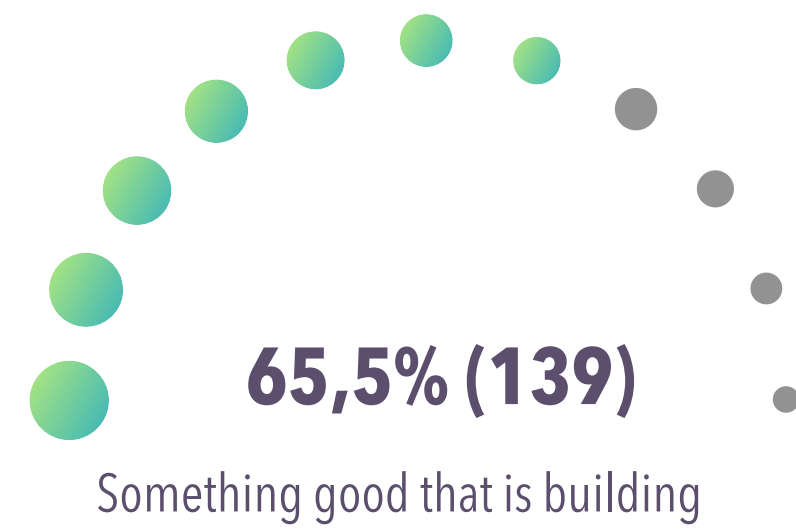
hand holding, walking, bathing, aromatherapy care, foot reflexology, conversation, presence, tender words, warm tea and fulfilling the patient's culinary wishes.

Another point of view:

sometimes touch can be difficult to endure for a sick person, not everyone can accept it. Tender touch, holding a hand - only and solely with the consent of the sick person.



What do you associate empathetic touch with?



The most common associations given by respondents:

restoring emotional balance, giving a sense of security, strengthening the patient with good energy, bringing relief from suffering, and sustaining faith in the possibility of recovery.

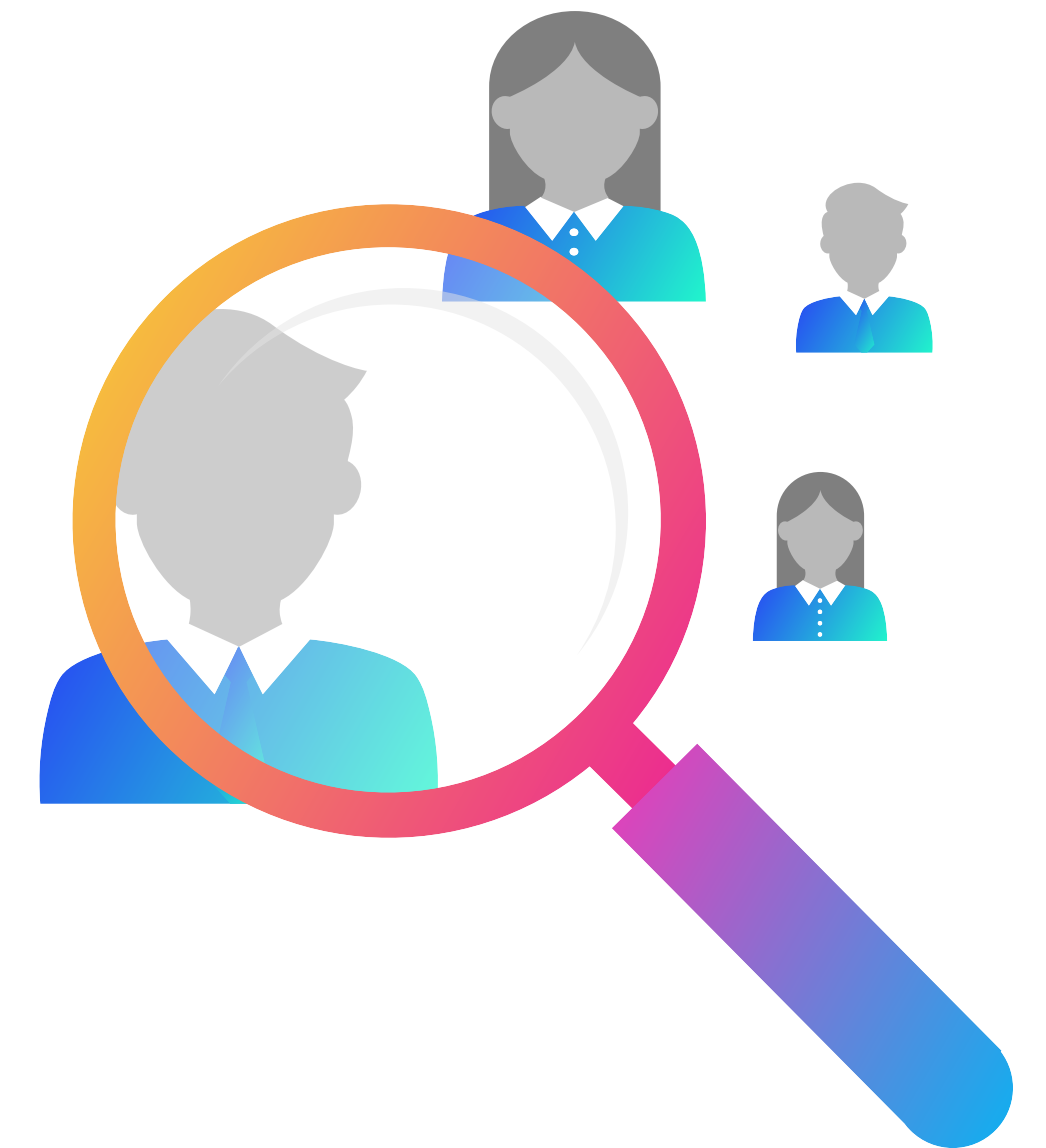
% of indications (number of respondents) – N = 212



CLOSER LOOK

The respondents' answers show that they perceive the essence of empathetic touch in a similar way. In their view, the quality of touch is important, so that the patients do not feel that they are being treated in an object-like manner - because, after all, they are more than the disease.

The patient can be shown closeness and physical support by caring for the comfort and ease of their body (81.6%), but also by simply hugging them (71.6%). The respondents' reflections on touch are not only about physicality, but seamlessly move into the realm of emotions. They associate empathetic touch primarily with something good that is building closeness (65.5%) and with emotional support for someone in need (62.7%). It is important to recognize that empathetic touch makes the patient feel accepted and that despite periodic indisposition, they still remain important to us.





List the three most important, in your opinion, features of empathetic touch.



% of indications (number of respondents) - N = 212

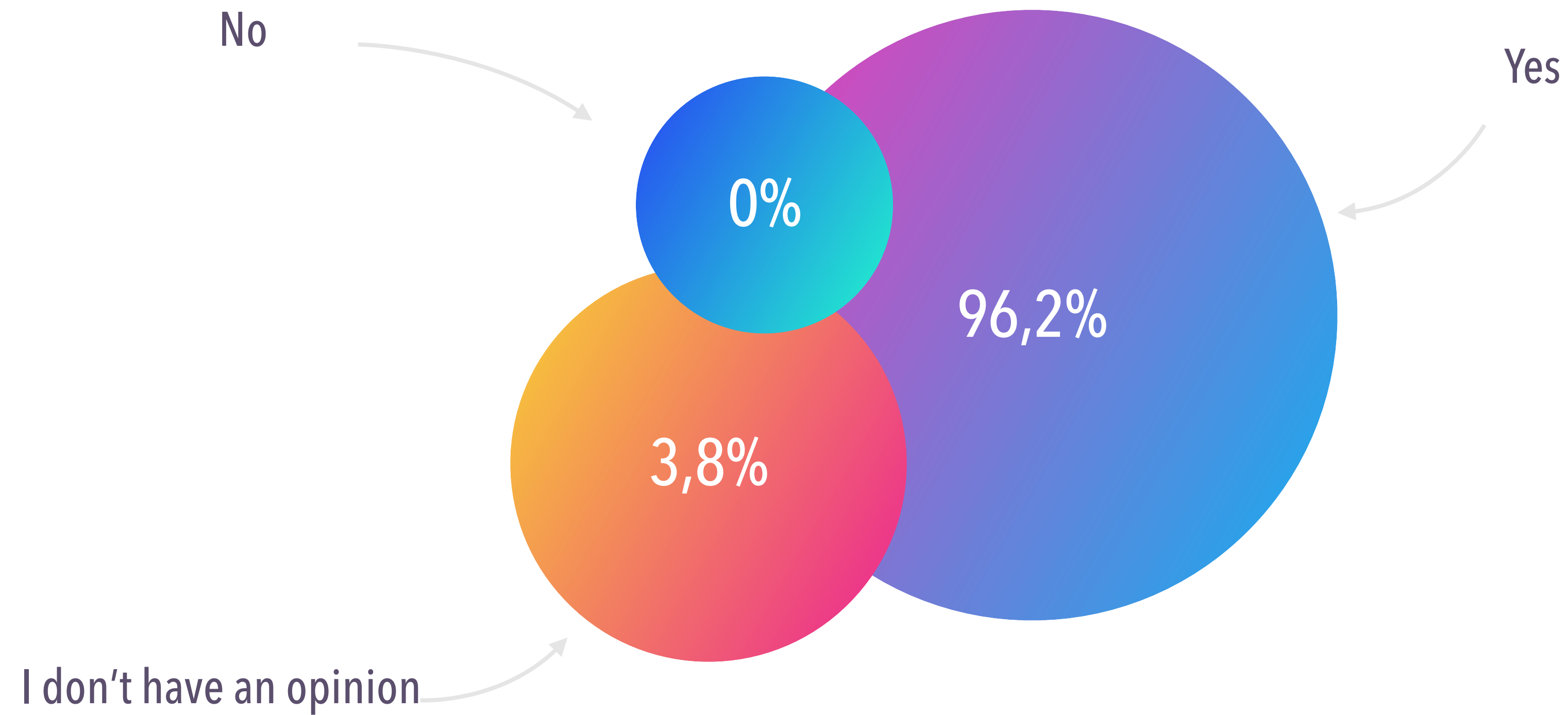
Respondents' own indications:

it alleviates anxiety,

allows the patient to feel noticed – despite an illness that excludes them from their typical way of being present in life.



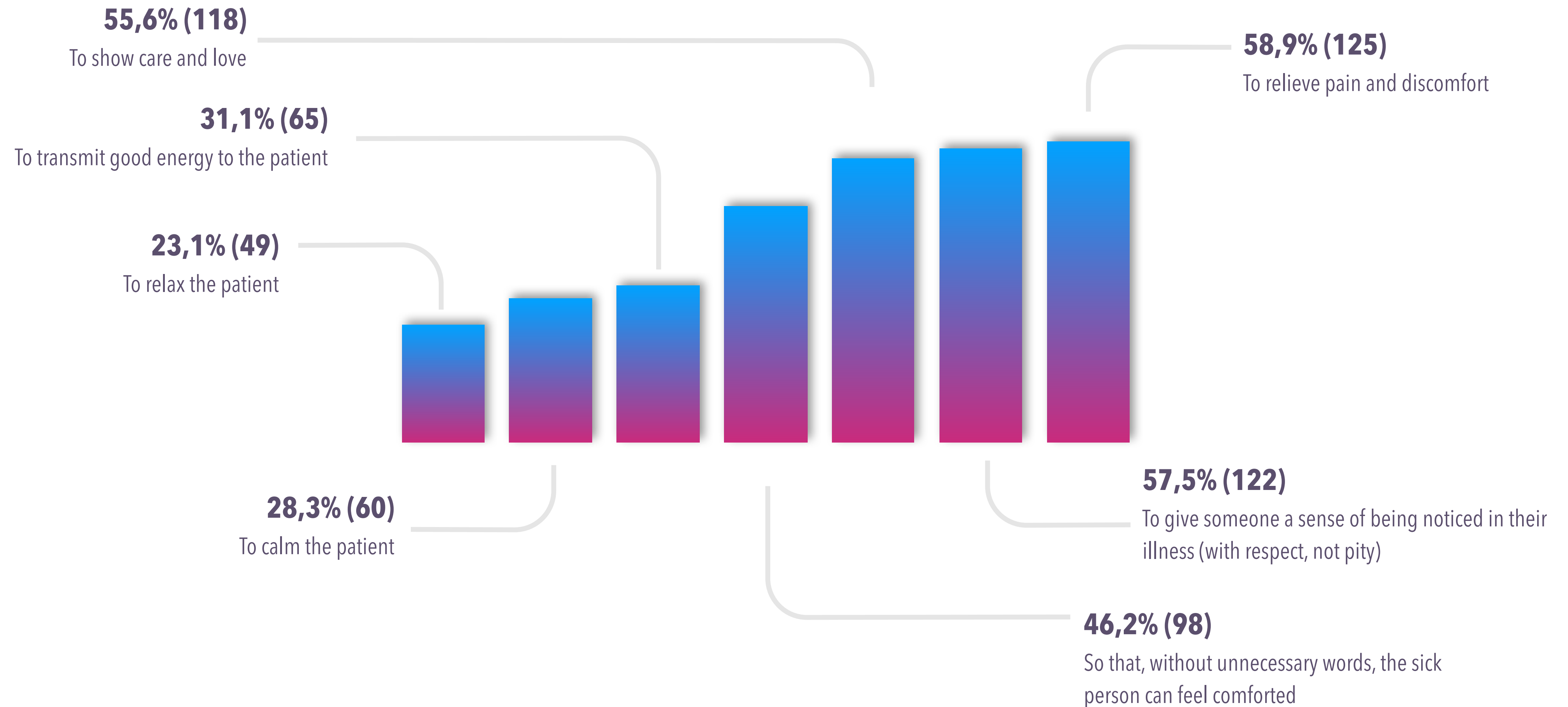
Do sick people, those in physical indisposition need physical closeness / touch / empathetic massage / hugging?



% of indications – N = 212



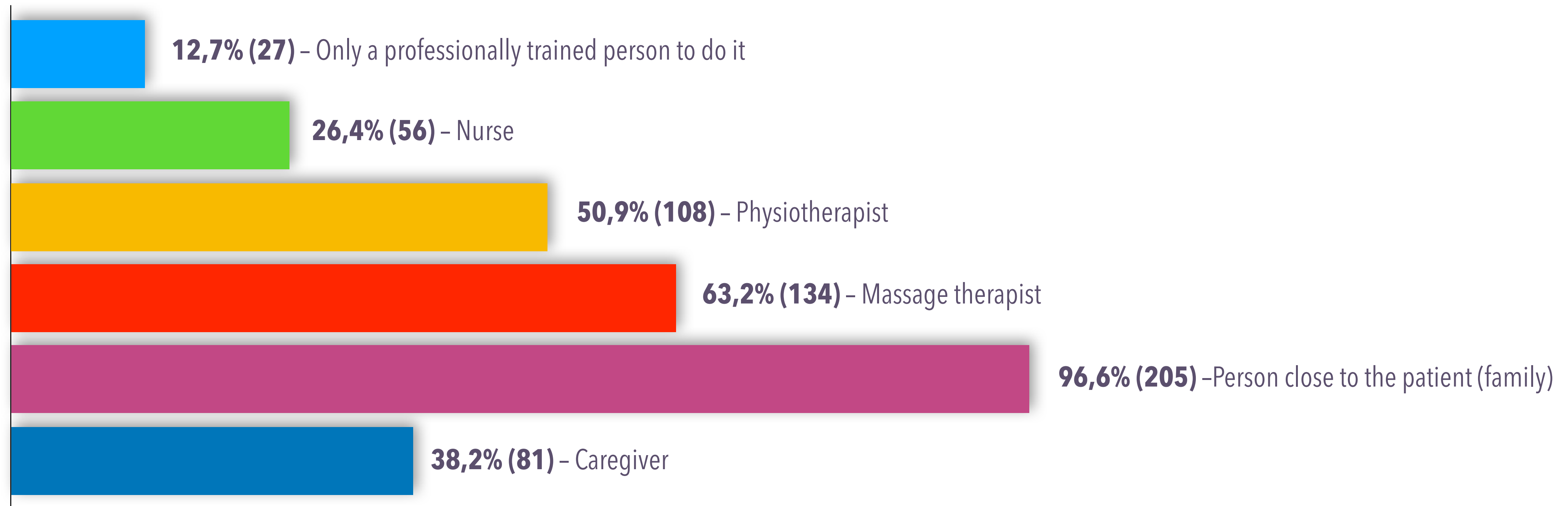
What purpose can empathetic touch / massage serve during illness?



% of indications (number of respondents) - N = 212



Who do you think could give empathetic touch / elements of gentle massage to a person who is ill?





% of indications (number of respondents) – N = 212



Who else could give empathetic touch / elements of gentle massage to a sick person?

Respondents' own indications:



anyone with whom the sick person feels safe;
anyone whom the sick person accepts;
a friend of the sick person, anyone who is close to the sick person;
anyone who feels comfortable around the sick person, has time and peace of mind;
anyone who knows how to touch and has good intentions;
in fact, any person who has the energy to do so;
anyone who has a lot of empathy, patience and gentleness;
the dog / cat of a sick person;
anyone who feels they want to give such a touch.

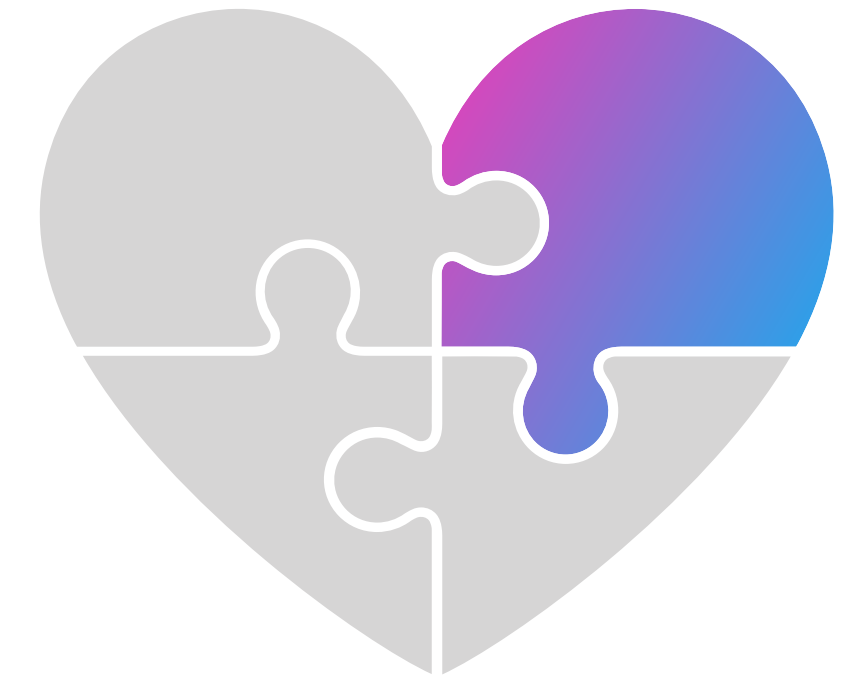
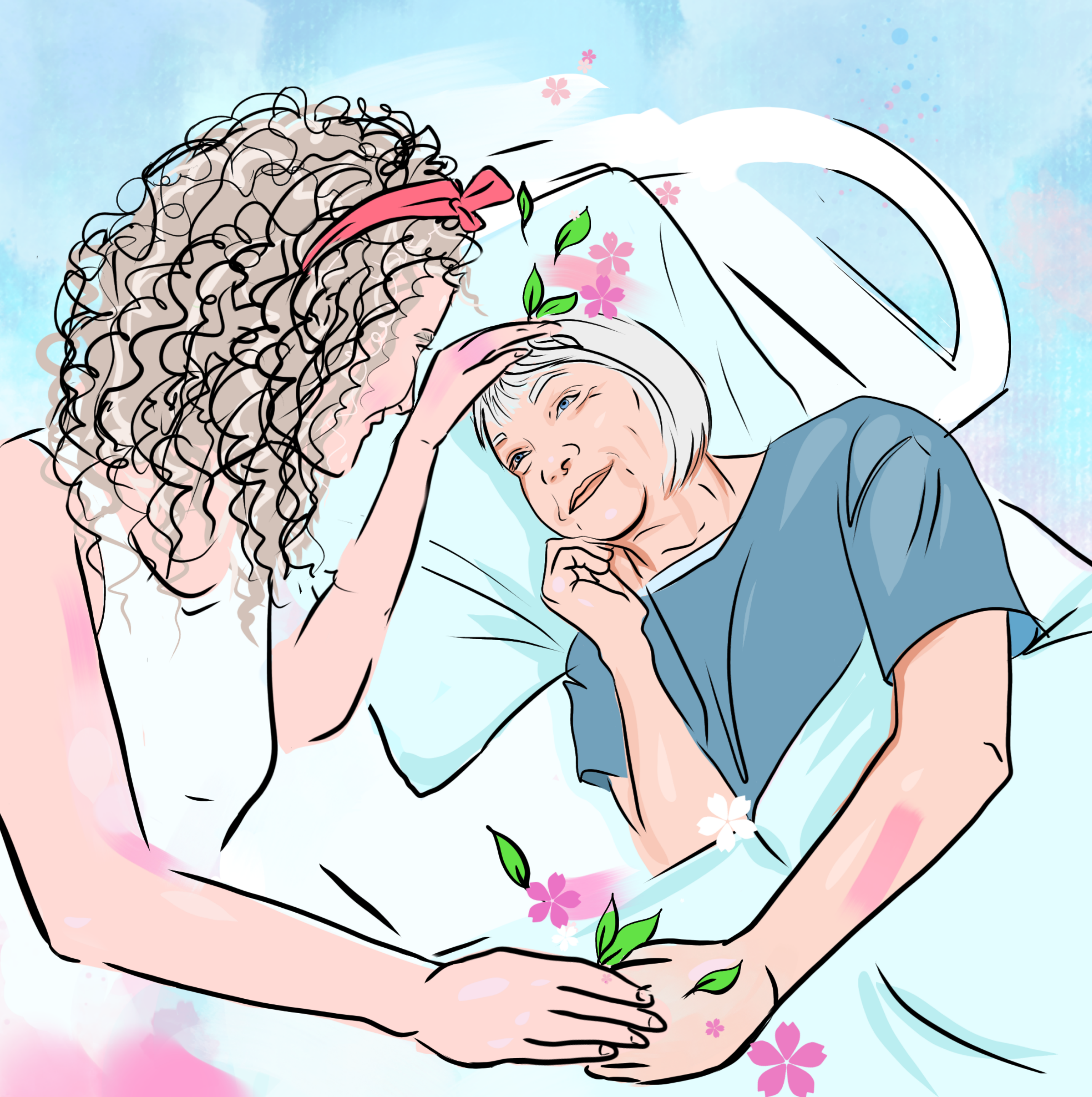


CONCLUSIONS



More than 96% of respondents say that empathetic touch is definitely needed by the patient, as it gives them emotional support (64.6%) and a sense of the other person's presence (52.8%). According to respondents, empathetic touch is mainly used to relieve pain and discomfort (58.9%), but also to give the patient a sense of being noticed (57.5%).

Understanding touch goes beyond technical issues and is not reduced to making trained, mechanical movements. As many as 96.6% of respondents believe that empathetic touch during illness could be given by someone close to them, while only 12.7% pointed to a professionally trained person. Respondents do not make the possibility of supporting with empathetic touch dependent on whether someone has specific qualifications. Of paramount importance are the intentions and empathy of the person who applies the touch or gentle massage, and his or her willingness to establish a good relationship with the patient.



BLOCK B

Self-experience of people
providing support with empathetic
touch / gentle massage during
illness

Happiness is sometimes the mere touch of hands



Agnieszka got in touch with me in early 2024, and we were to talk about the impact of touch on patients' health. I remember the day of our first meeting. It was a gray January morning, rain was drizzling outside the window. Suddenly, a smiling girl in a colorful sweatshirt appeared on the doorstep of our retirement home where I have the pleasure of working. I never imagined that this petite person would bring so much light and joy to our institution.

I have a master's degree in physiotherapy, and for many years I have observed the beneficial effects of massage on accelerating the healing and rehabilitation process. What I lacked, however, was research to confirm my observations. I was glad that finally someone really decided to address this issue and study the effect of massage on improving health.

As a person who works with the elderly on a daily basis, I can observe the beneficial impact that Agnieszka's visits and also other volunteers' who have joined her and are involved in the touch-massage voluntary service have on our residents.

In our home there are seniors who survived the war, lived through communism and who were always required to stand firm. At first, they were reluctant to agree to have their hands, backs, feet massaged. After a while, magic began to happen.

Those skeptical about massage or hugging now look forward to Thursday meetings with Agnieszka and her volunteers. Comatose seniors responded to touch with smiles, grimaces, as if they recognized Agnieszka's hands. The spasticity started to disappear, and it could be clearly observed that under the influence of gentle touch, patients calmed down and calmed down. After the sessions of massage, there was clearly an improvement in well-being and a reduction in pain. The need for touch is so great that recently we have had a welcoming ritual with hugs.

Agnieszka, thank you for your work, commitment and the light you bring.

You reminded us that happiness is sometimes a simple touch of hands and gratitude, which can be seen in the eyes of my dear seniors.

Iwona Ostrowska

Director of the Retirement Home *Senior* in Rumia, Poland



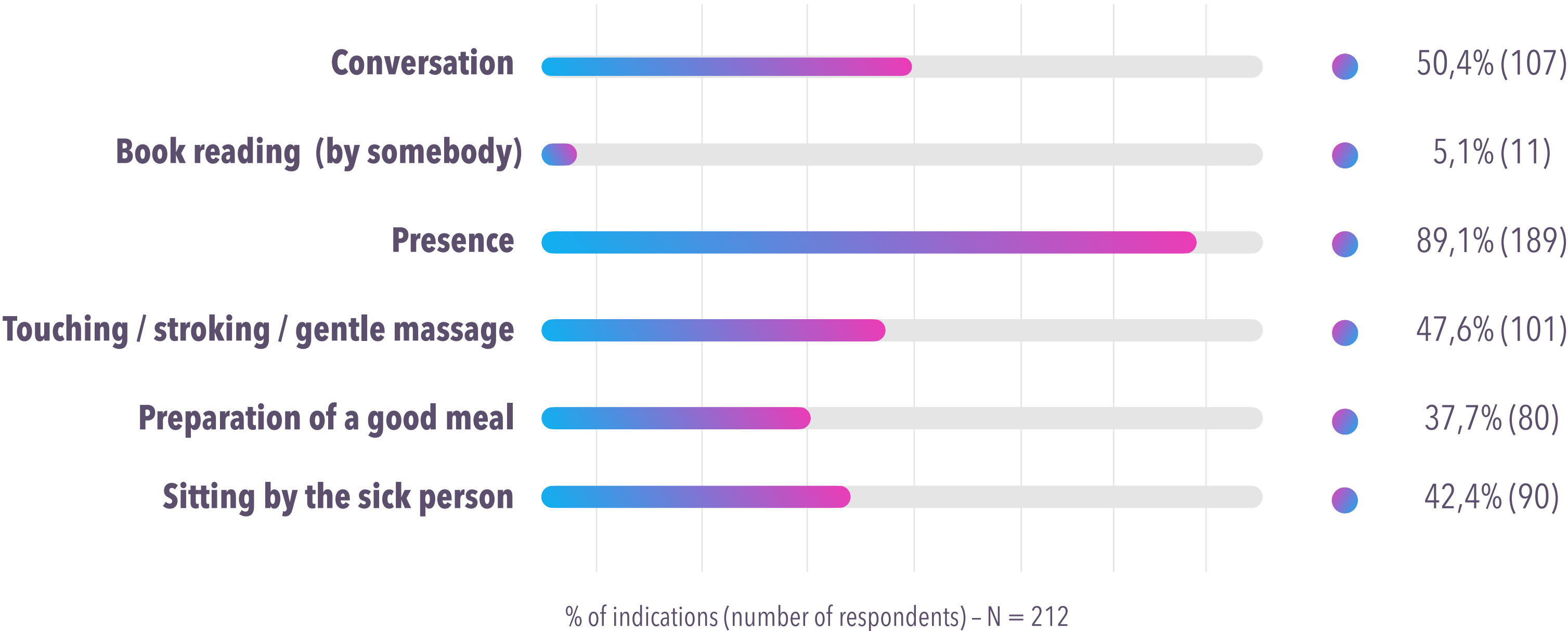
For this part of the study, it was important to ask these key questions:

1. How much do our traumatic or very good experiences influence the perception of massage in general?
2. What is the relation between what we have personally experienced in the disease process and our tendency to reach for non-medical support, such as empathetic touch / massage?



Besides professional medical care, what does a sick person need?

The question applies to short-term illnesses (e.g., flu, bronchitis, joint sprain), as well as chronic conditions where recovery and regaining mobility takes a long time or is not possible at all (e.g., diabetic foot, cancer, open wounds, injuries).

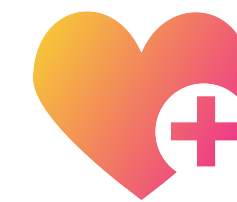


It should be added that in their own indications, almost 24% of respondents additionally mentioned (regardless of the standard choice) touch, stroking and massage as an important need for the sick to be satisfied.



In addition to professional medical care, a sick person needs...

Respondents' own indications:

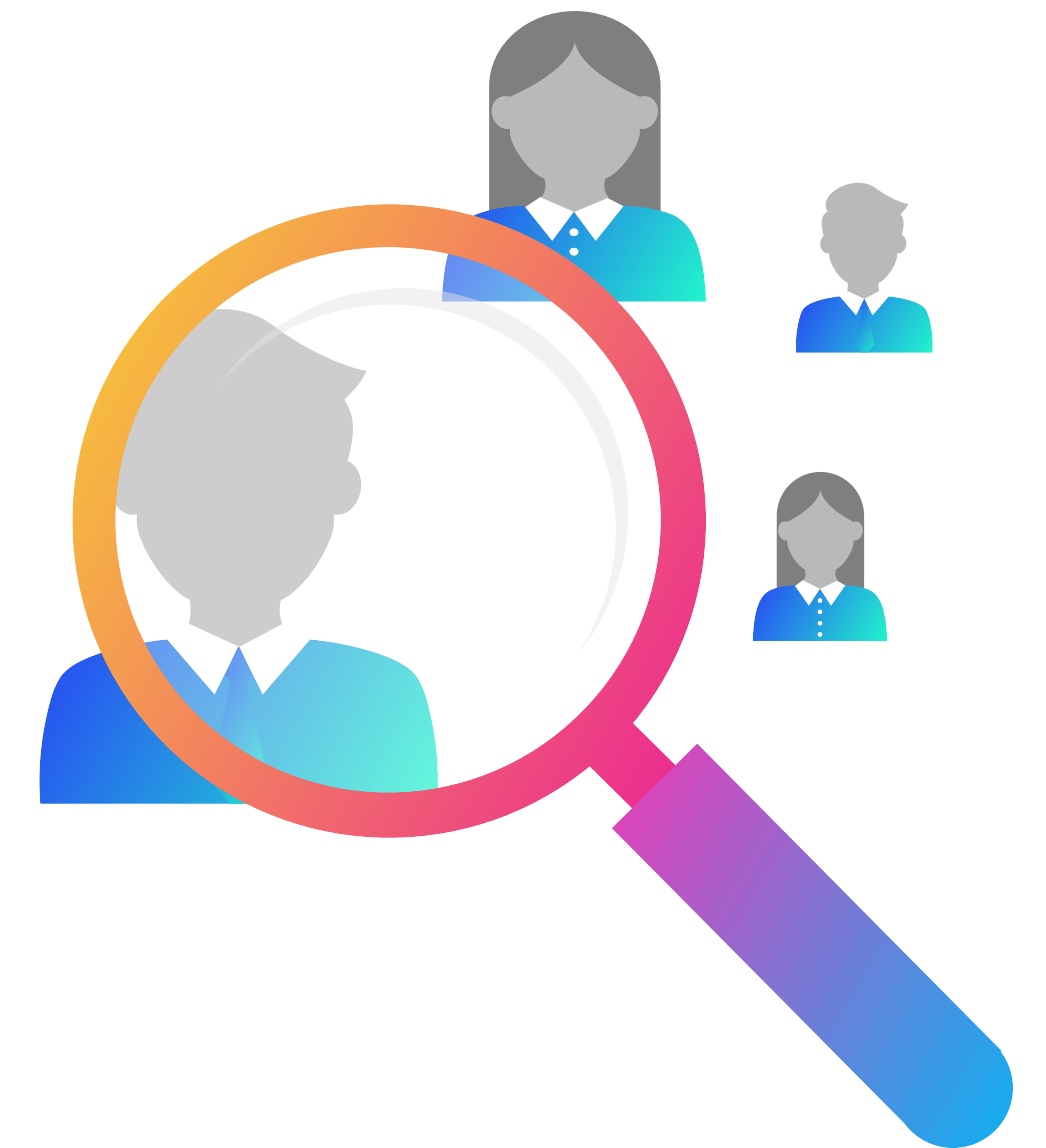


to be listened to and be heard, watch a movie, rest, be in clean bedding, be able to wash themselves, have their tears wiped, interact with an animal, sleep, satisfy food cravings, to have somebody's hand put on their shoulders, listen to their favorite music; also some peace and quiet, acceptance, gentle movement.



CLOSER LOOK

More than 89% of those surveyed believe that in addition to professional medical care, the patient needs first and foremost presence. For more than 50%, the most important thing is a conversation, and according to more than 47%, touch, stroking, and gentle massage are significant.





What kind of touch might a person who is ill or in physical indisposition, and who is expected to rest or stay in bed for most of the day, need?



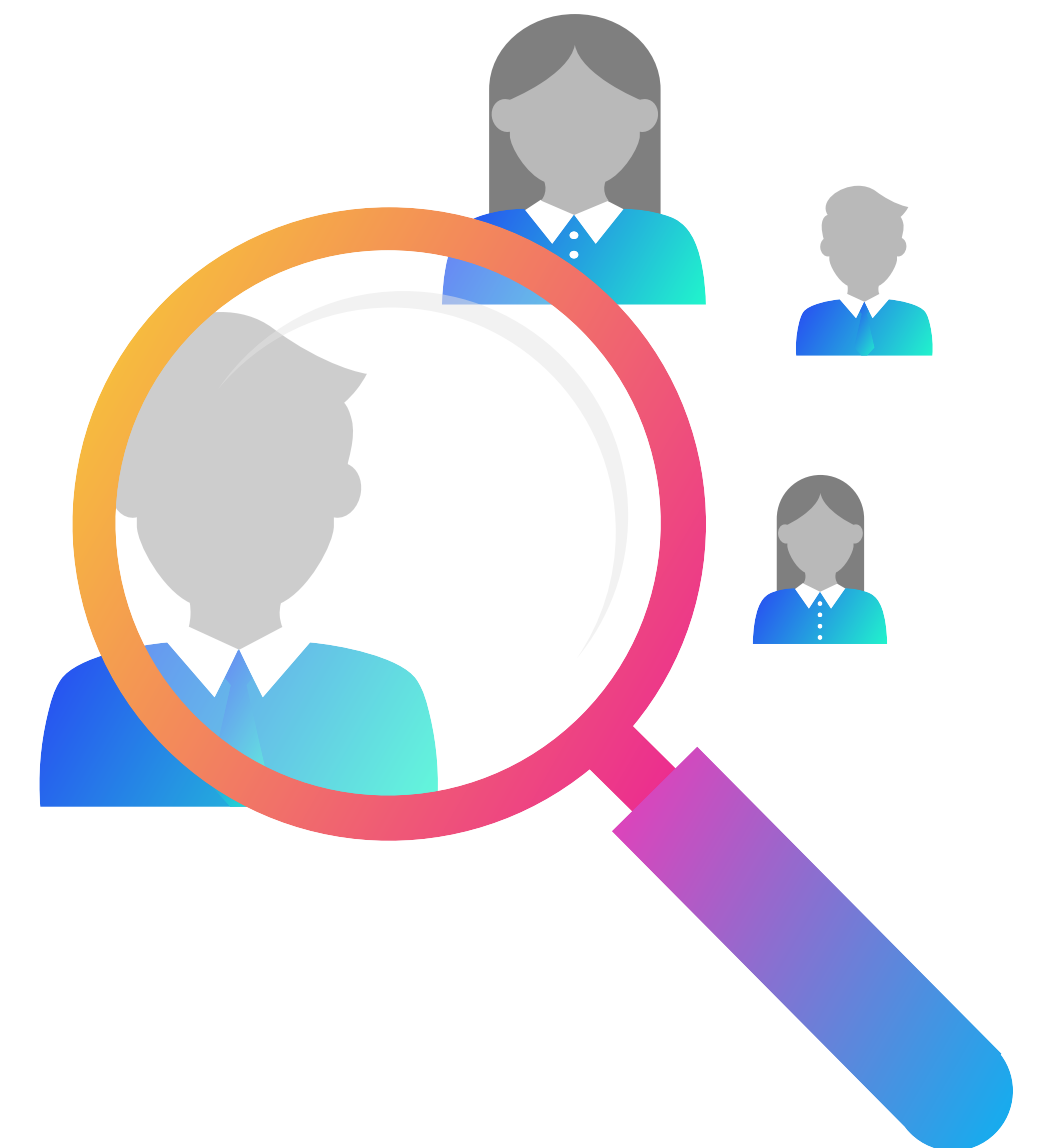
% of indications (number of respondents) – N = 212



CLOSER LOOK

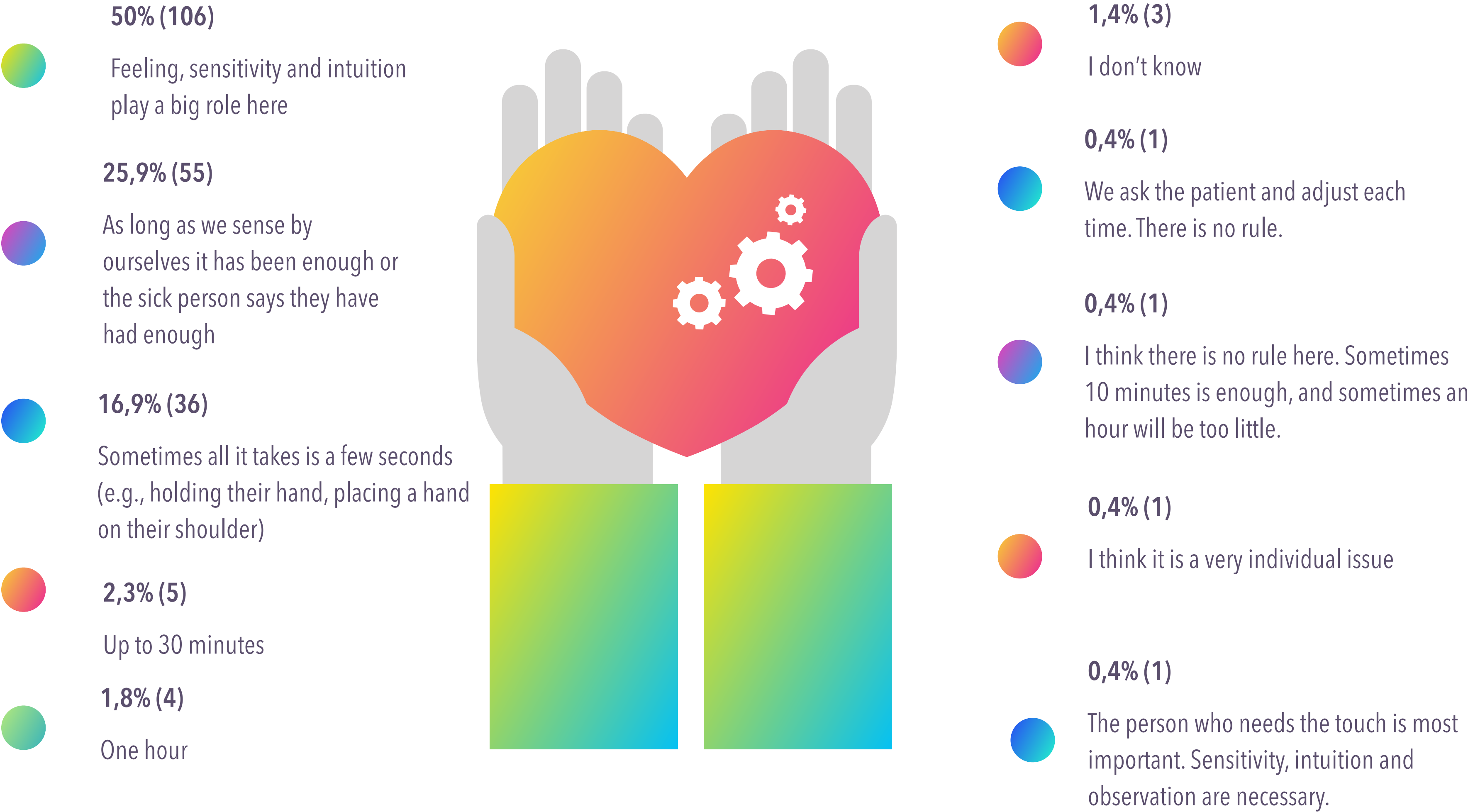
According to more than 63% of those surveyed, what the patient may need most is gentle, calm, non-mechanical treatment of the body during medical and nursing activities. According to nearly 55%, stroking the head (a gentle head massage) and putting a hand on the shoulders is the most important.

In their open statements, respondents indicated that touch has the potential to support the healing process, as long as the patient allows it and if, for example, there is no high sensitivity to touch nor other contraindications.





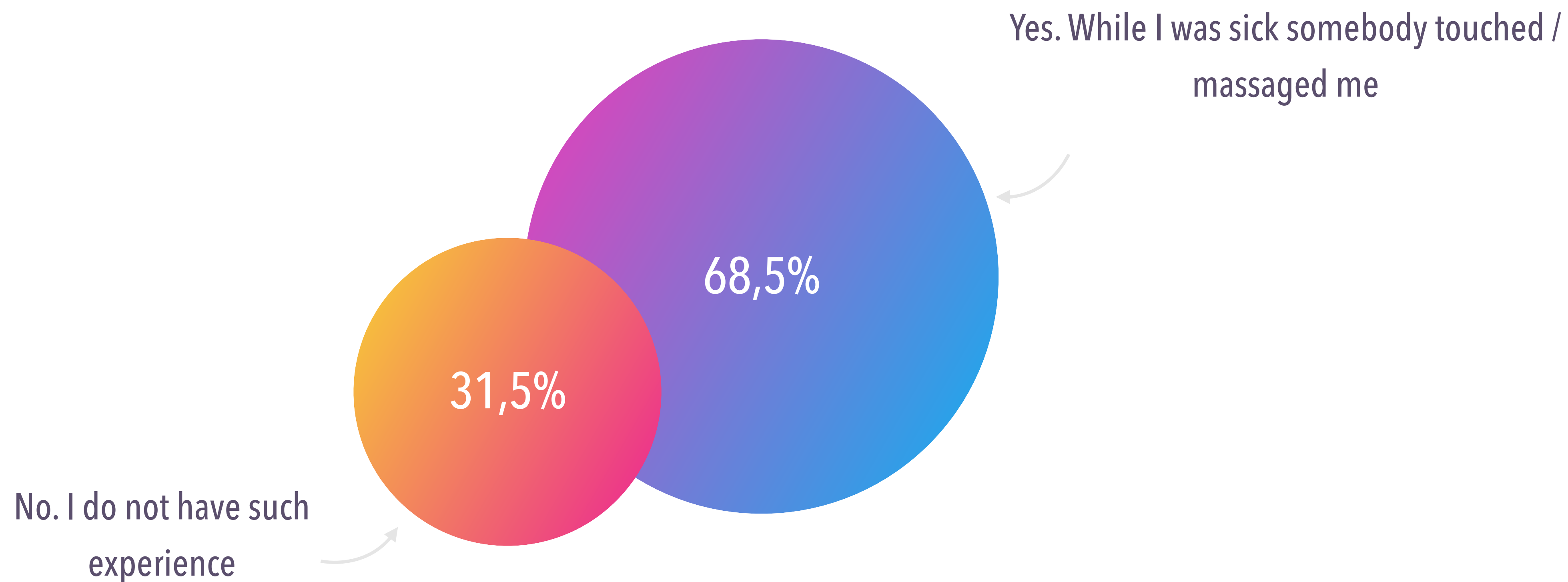
How long do you think a touch / empathetic message should last to have a good effect?



% of indications (number of respondents) – N = 212



Have you ever been touched / massaged by someone (amateur or professional) during your illness or incapacity?



% of indications - N = 212

Empathetic touch is a sign of acceptance



While ill, we become lonely. No one can feel and experience the suffering and helplessness that accompany us then. And they are not able to understand these feelings. When ill, we become like children. Children whose bruised knee is best taken care of if kissed by mom, dad, kindergarten teacher. Gently sticking a band-aid, stroking, and finally a tender hug will dry the tears.

Sometimes we know that the pain from a small scratch is inadequate to the big cry and scream of our toddler. But it's also a cry of helplessness, fear, a need for immediate attention and support. We then cradle the little child in our arms, stroke them gently, wipe their wet cheeks.

When a child is sick, has a fever, parents sit on the kid's bed, cuddle, are as close as possible.

As we get older, more and more comes across well and more and more doesn't. We're big now – we should be able to handle our problems on our own.

But the tall, bearded gentleman in the bed across the hospital room used to be a little boy whose older sister cuddled him when he fell off his bike. And today he is that boy again. And he's very lonely, because no one hugs him, strokes his head or gives him a "brave patient" sticker as a reward.

Maybe if we saw a child in every sick person, it would be easier to break stereotypes, give up fears to show tenderness and empathy. There still exists a taboo related to touch.

Maybe we would feel as special as a mother who knows that only in her arms her son or daughter will find relief, peace and closeness.

And that it is the tender, empathetic touch that is the subtle sign of acceptance and special closeness, expressed between or instead of words.

Because closeness is a natural exchange that enriches both parties.

Paula Rettinger-Wietoszko

President of the Foundation *Zostaw Swój Ślad* (Leave Your Trace), director of *Festiwal Wrażliwy* (the Sensitive Festival)



There were several open-ended questions in this part of the survey. The first was about **how empathetic touch could be included in the daily care of a sick person**, in what specific situations and activities. The respondents gave very different answers. They can be grouped as follows:





AROUND MEDICAL ACTIVITIES

Based on respondents' own indications:

Empathetic touch can be incorporated into the daily care of a sick person...

- when administering medication, you can stroke the back or shoulders, also when adjusting the bedding;
- when changing dressings, blood collection, measuring blood pressure, temperature, applying ointment, examining the wound and gently touching the wound area;
- when helping a sick person get up or move around;
- during rehabilitation the patient can sometimes be gently touched and empathetically encouraged to exercise.



NURSING CARE

Based on respondents' own indications:

Empathetic touch can be incorporated into the daily care of a sick person...

- tenderly helping during a change of clothes;
- during grooming activities, such as washing or combing;
- helping with feeding; it is important that activities are not done hurriedly and with impatience;
- during hygiene activities, such as changing a diaper; it is crucial to regard the patient's intimacy and be respectful.



RELAXING

Based on respondents' own indications:

Empathetic touch can be incorporated into the daily care of a sick person...

- when relaxing together, watching TV, during daily grooming, such as washing the body or lotioning, which can be an opportunity for a gentle massage;
- handing anything, approaching a sick person, you can touch the shoulder;
- in the moments between activities like feeding, washing, administering medications; you can simply designate a specific time to focus only on touching / massaging the sick person;
- holding the hand while talking; stroking the back / head / hand to lull the patient to sleep so that sleep is peaceful; warming the patient's body – if necessary – with your body (hugging).



EMPATHY AS A SIGNPOST

Respondents paid particular attention to the manner and quality of care provided to the patient:

- In every situation – whether serving a meal, putting on pajamas or giving massages – when we perform these actions with empathy and love, the other person gains a sense that they are important to us. Every time we take care of another person, it is how we touch that matters.
- In a natural way, with the consent of a patient or – if necessary – observing their reactions.
- When the patient asks for it.
- In any situation, if the person wants it.
- When you find the time or you can see that the person in need is listless, when there is need, and as a result of two-way communication.
- For some, it may feel as natural as taking care of a child when they are sick. Holding hands, stroking, being present.



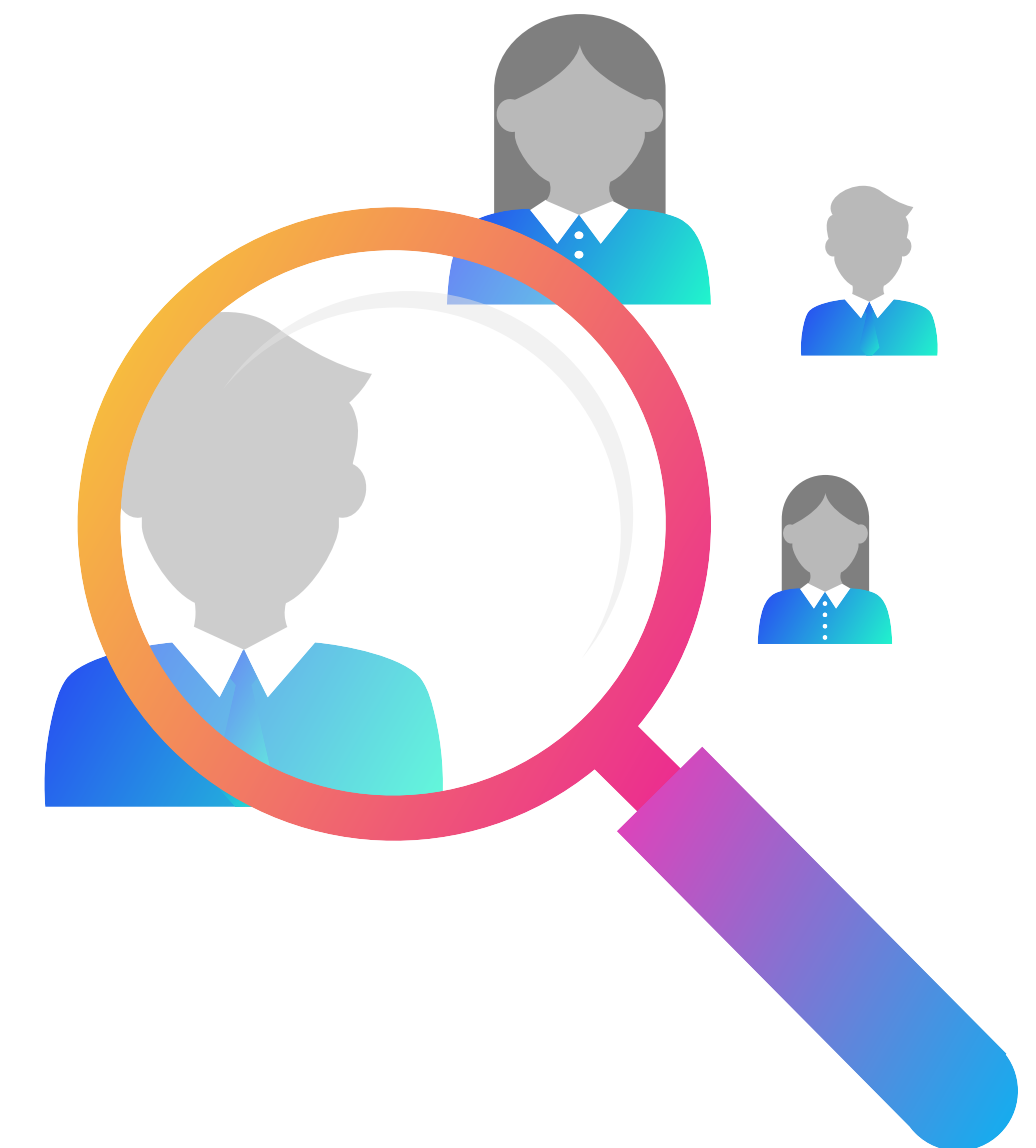
CLOSER LOOK

68.5% of respondents experienced touch/massage during their illness. When answering the question of how long the touch should last in order to have a good effect, 50% of respondents expressed the belief that time is not crucial. Feeling, sensitivity and intuition play a big role.

By indicating in the responses to the open-ended questions various ways to incorporate empathetic touch into the daily care of a sick person, several areas with considerable potential in this area have emerged.

According to respondents, the use of empathetic touch during care-nursing activities is important for the patient, and relaxation supported by massage / touch can contribute to earlier recovery.

Empathetic touch, used even in the course of daily care, helps maintain the feeling that the sick are still important to someone, that they are still human beings who need to be treated with tenderness and dignity.



Touch, as a work tool of first necessity



When I established the Community Hospice Cordis Society more than 30 years ago, I was guided by a deep conviction of the importance of closeness and quality in caring for the most seriously ill, dying patients. Even then being close to the patient meant for me not only attentive focus on physical symptoms, selection of treatment, but also, to a great extent, literally being with the patient: gentle touch with hands, hugging, stroking.

Similarly, with regard to families – during their accompaniment of the patient, as well as during mourning after the death of a loved one, touch, embrace or hug have always been with me, the doctor, as tools of first necessity.

In the course of my professional work, for many years now, I have only reaffirmed my conviction that the sphere related to tactile perception strongly strengthens the overall assessment of the quality of care and quality of life among the residents of Hospice Cordis.

Touch while accompanying, taking care of a wide range of grooming (facial moisturizing, body lotioning, careful manicure and pedicure, makeup, haircuts, etc., performed at the request of the residents), selecting fabrics that are pleasant to the touch (linens, towels, underwear, bathing props); encouraging families through expert instruction from physiotherapists and medical caregivers as to what type of touch will be beneficial in each individual case – this is a style of care that we effectively carry out in accordance with high, self-imposed standards.

The report provided demonstrates the effects of sensitive touch transparently, very clearly and aesthetically. I agree with most of the conclusions.

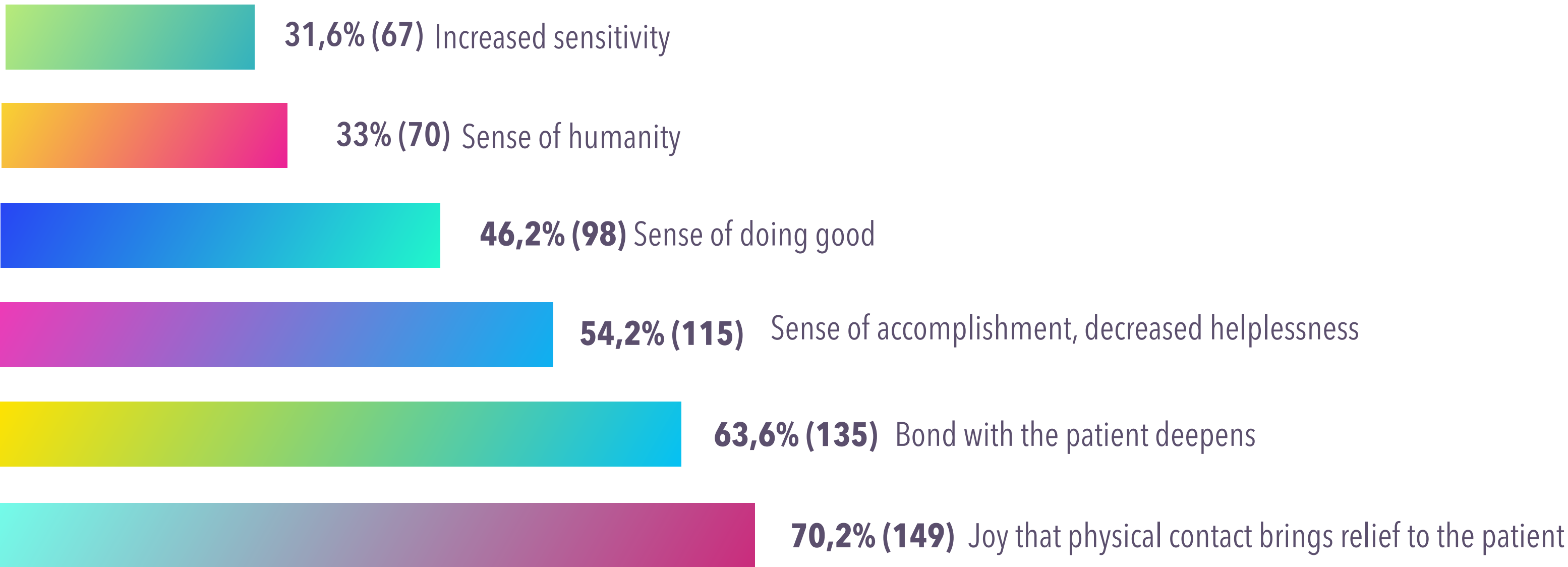
In my opinion, it is also important, and this could be expanded to include substantive research and studies for the future, to pay attention to "givers of touch" and their comfort in remaining in physical closeness with the person they are caring for, to ensure that they are able to containerize emotional experiences and sensations, which – despite even the most noble motivation and good intentions – can be extremely different and can affect the way they perceive themselves in their professional role.

MD Jolanta Grabowska-Markowska

President of Spółeczne Towarzystwo Hospicjum Cordis (*Community Hospice Cordis Society*)



What might a person who applies an empathetic touch / gentle massage to the patient feel?



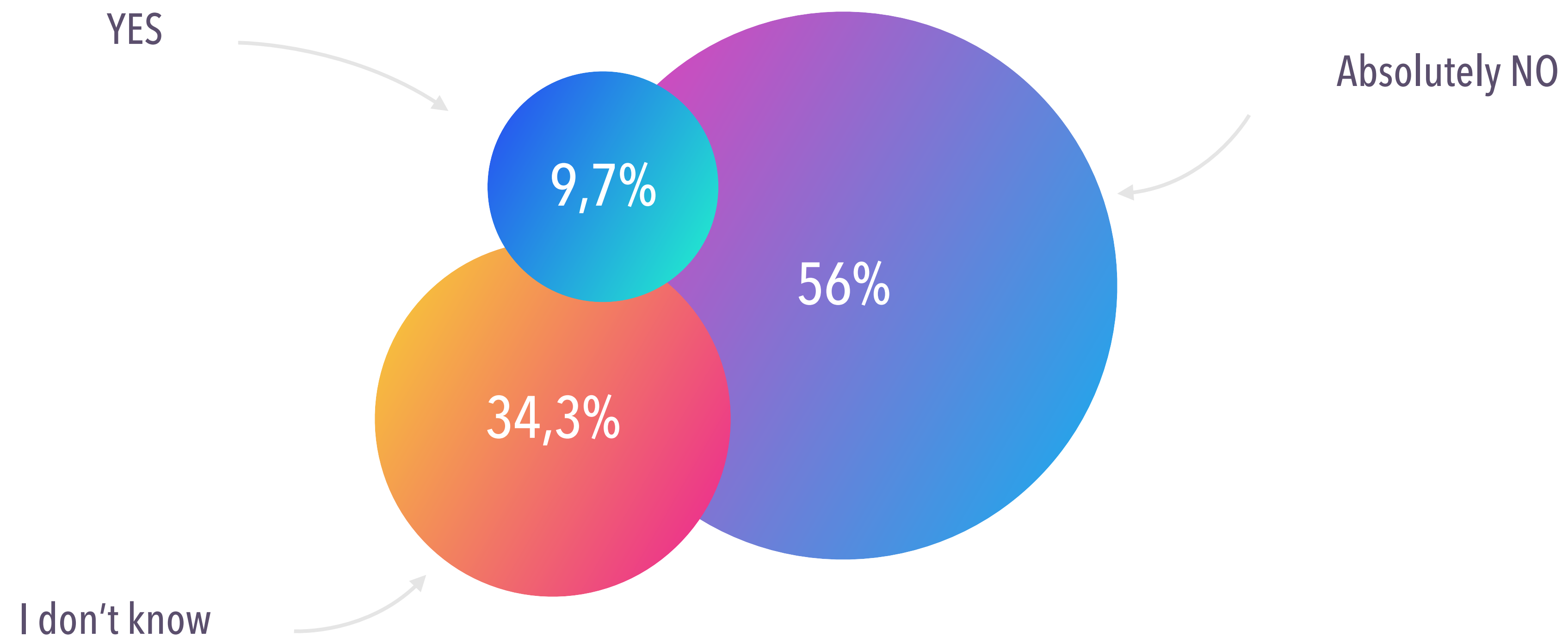
Other feelings mentioned by respondents:

A sense of energy flow, companionship, joy, peace, hope for recovery, a sense of meaning, dignity, satisfaction, fulfillment, support, the ability to influence the improvement of the patient's mental and physical state and bring relief from the disease, acceptance of the condition the patient is in.

% of indications - N = 212



In your opinion, can empathetic touching of the sick have any **NEGATIVE** effects on them?



% of indications – N = 212



Dissenting voices of those who claim that empathetic touch may have some negative effects

01

Infliction of physical pain, worsening of health condition

- It is possible to cause pain / cause discomfort to the one we touch.
- Patients with hyperaesthesia or other diseases may experience touch as pain.
- Everyone is different; my husband, for example, says he prefers everyone to leave him alone when he's sick. So, I conclude that for people like him, touch, even empathetic, can be irritating. A sick person may not want any touch in some cases. I feel like this in the acute stage of my illness. I am hypersensitive and everything irritates me then.
- During my dad's oncological illness, under no circumstances did the doctor allow any massages for fear of reported suspicions of spreading the cancer. I repeatedly encountered this opinion that a person with cancer should not be massaged. In the meantime, I looked for help of a massage therapist for my dad, but most refused, having heard about his illness, and said that it was a contraindication to massage.



02

Mental disorders, being on the autism spectrum, experiencing trauma

- When a person does not feel ready to be touched, it can trigger him, it is best then to talk about it and step by step, with the consent of the patient, introduce such touch.
- When a person does not feel ready to be touched, it can trigger him, it is best then to talk about it and step by step, with the consent of the patient, introduce such touch. I think there are situations when the patient is not ready for touch, they can't always say so, or can't accept such touch from everyone, such as my son on the [autism] spectrum.
- I think it may be a very unique situation. E.g., a person struggling with a mental disorder or who has experienced a trauma related to touch. I'm thinking of a situation with some kind of negative reaction to the emotions associated with touch, which can trigger bad memories or mental disorders, despite the best intentions of the one touching.
- Medical procedures, especially invasive ones (like surgeries, painful tests), can traumatize. I have such an experience myself, when for some time after medical procedures I did not wish to feel any touch. I felt that even a firmer and longer hug was too much for me. Touch, even gentle, could at that time upset me unnecessarily.

Overinterpretation (connecting touch with sexuality, invitation to a closer relationship)

- The patient may become attached and expect more, interpret empathetic touch as a sign of intimacy or love related to sexuality.
- I'm afraid that the patient, after receiving such positive reinforcement for a long time, especially from one person, could mistakenly perceive it as romantic interest and become infatuated.



03

Frequent issue of shame related to one's physicality and helplessness (serious concerns about one's body)

- Some people may feel reluctant to be touched, especially by a stranger; for some, this may be due to discomfort with their own physicality, physical nature of illness; if the touch comes from a stranger, it may be perceived as instrumental rather than an expression of affection and empathy.
- Not every person can accept touch. Many people lost confidence, may be afraid of being used or suspect it is out of pity. I think it is important to ask, for example, "Can I hug you?". Also, sometimes someone smiles, while inside they are experiencing a lot of difficult emotions, tensions that they are hiding.

Fear of crossing individual boundaries, unpreparedness to touch

- You have to be sure that the person wants it and is ready for the touch. You have to respect the boundaries so that you don't overstep and make them feel uncomfortable / or cause harm.
- If the patient perceives it as crossing boundaries and feels worse after [the touch / massage].

Lack of informed consent to touch

- I think it must be with the consent of the sick person.
- Some patients do not always wish for this touch, but they do not want to make others uncomfortable, and for this reason may not inform about the reluctance, and then we achieve the opposite of our goal.
- A person who has trust issues and has no habit / experience of touch may feel too embarrassed. One must be observant, as the patient may not always express this. Each time, ask the patient if they want us to touch them.



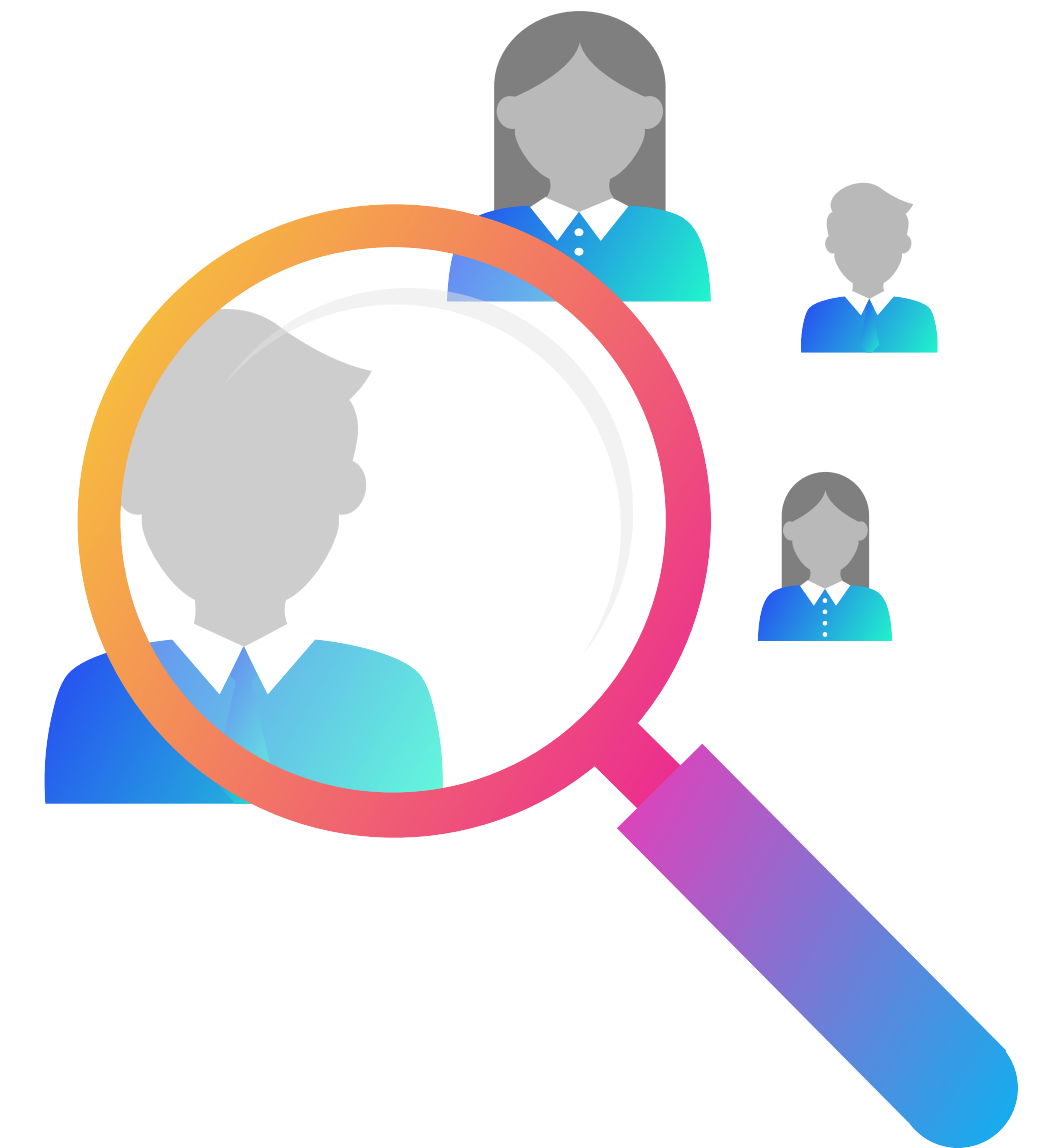
CLOSER LOOK

The awareness of providing relief to the sick person – and thus improving their psycho-physical condition – makes the touch-giver feel joy. Empathetic touch deepens the bond with the patient, gives loved ones a greater sense of empowerment and reduces their helplessness in the face of disease.

As many as 56% of respondents strongly deny the claim that empathetic touch may carry any negative consequences for the patient. 34.3% of respondents are unsure, and 9.7% express and justify their concerns.

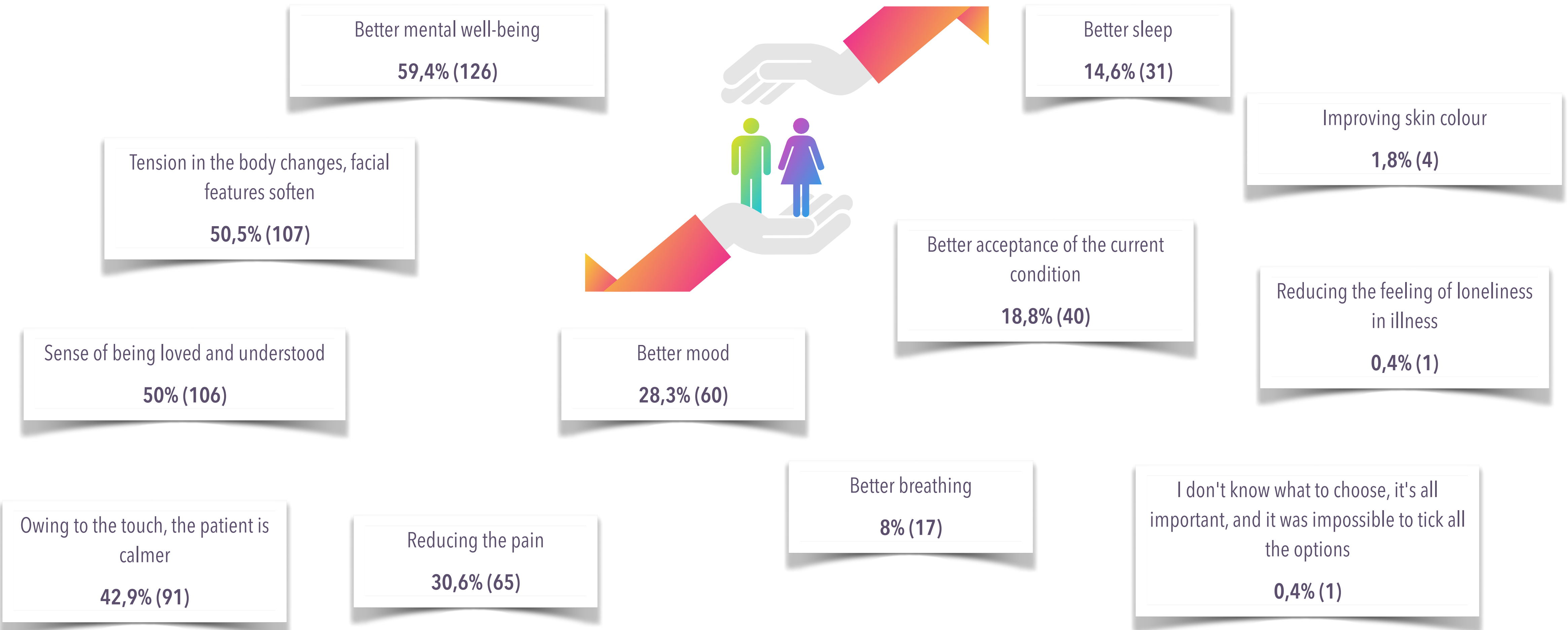
After analyzing the statements of respondents who raised objections to supporting sick people with touch, it can be concluded that their concerns stem from a high degree of empathy and sensitivity, rather than a belief that touch can realistically harm. If we follow simple rules of communication with the sick and respect their decisions, touch will not really harm anyone.

Touch should also not be denied to some seriously ill patients (especially when they consciously ask for it, feeling they need it).





If you were to describe what effect empathetic touch can have on a patient? What do you think the touch helps?



% of indications (number of respondents) – N = 212



According to those surveyed, how might a patient respond to unempathetic, mechanical, impatient, nervous, formal touch?

01

PSYCHO-PHYSICAL REACTIONS

- The patient may feel anxious and mentally worse because of this, and may feel like a burden.
- They feel like an object, an unnecessary person, unloved; such touch causes emotional pain.
- The patient may experience stress, have low self-esteem, and feel dehumanized.
- They may feel insignificant, neglected.
- The patient may feel more anxious, bitter, lonely. As a result, they may also be unfriendly to the person touching them.
- It may have an opposite effect, i.e. cause tension, annoyance, worsening of the patient's mood.
- The patient may react by shutting down, feeling humiliated, helpless, depressed, worsening the somatic symptoms of the disease or acquiring further health complications.



PHYSICAL REACTIONS

- [The patient] shows a grimace of displeasure.
- When they feel discomfort or touching causes pain, the muscles may tremble, the jaw clenches tighter.
- The patient may be scared, very much so, because they don't know what to expect. They may feel pain. The patient then reacts with reluctance or aggression, and with a lot of fear - with passivity and shutting down to cooperation.

02

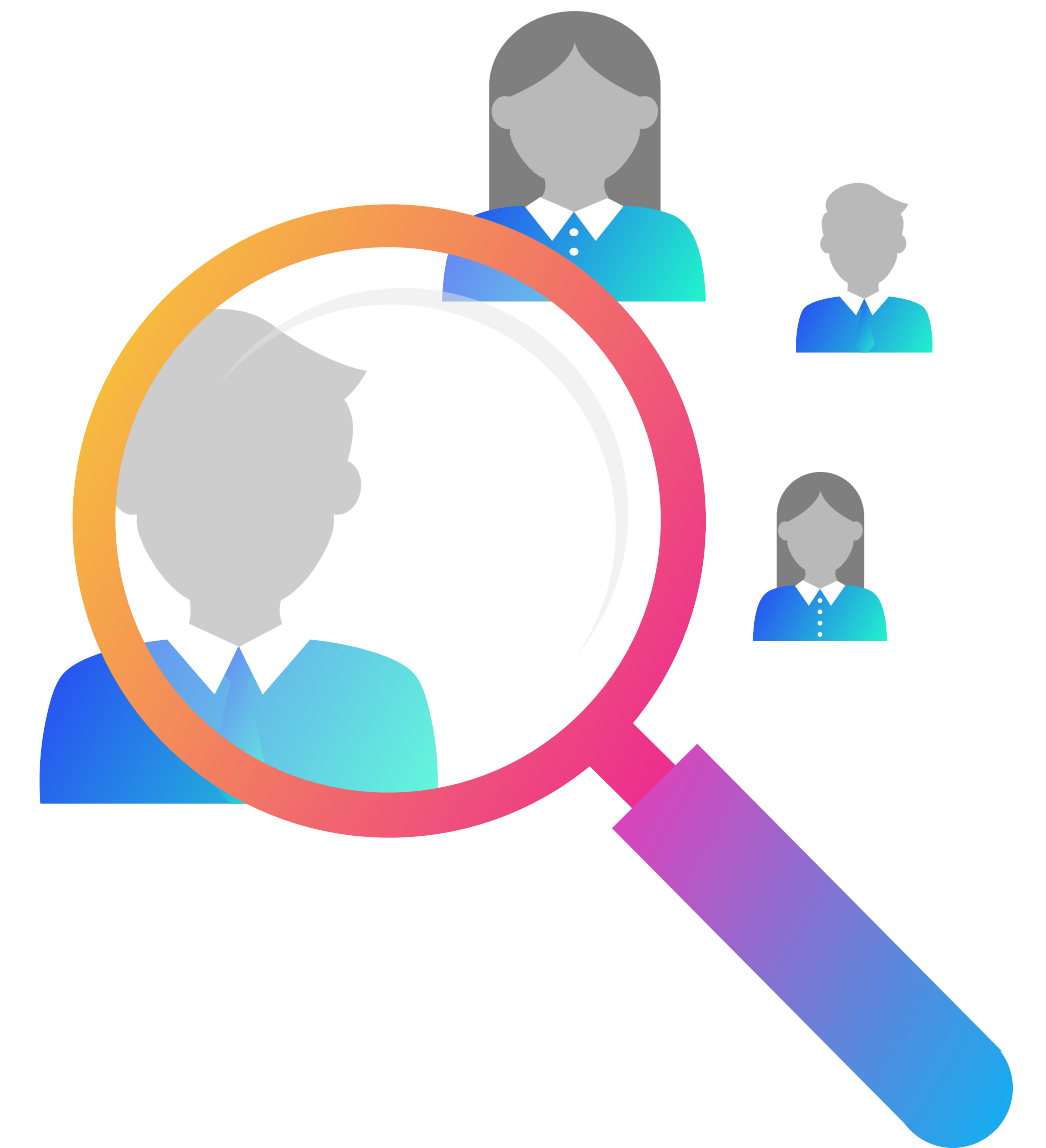
OTHER

- Mom experienced this kind of touch during a routine at the hospital, and it was a traumatic experience for her. She said she would never go back there again. And it's scary to think what she will go through mentally when it's necessary.
- Annoyance, being humiliated by having to use such help.
- [The patient] may feel guilty, unnecessary, taking up space and time, rejected, unworthy. Unfortunately, in my experience, this is how patients are most often affected – due to the lack of time and pressure of responsibilities.

CLOSER LOOK



When it comes to touch, quality is the key. Empathetic touch can have a positive impact on a patient's physical and mental health, providing a better sense of well-being (59.4% of respondents) or relieving tension in the body (50.5%). And the contrary, non-empathetic touch triggers negative reactions from both the body and – above all – the psyche.



We can't live without the sense of touch



„There is nothing more beautiful between people who love each other, except hugging. There is nothing more wonderful if we can say, *I love you, I am close*”, – said Jan Kaczkowski, the priest.

These words came to me repeatedly while reading the study report on empathetic touch during illness, initiated by Agnieszka Kawula.

The basic human senses are hearing, taste, sight, smell, touch. Only without one of these senses, we cannot live - without TOUCH.

Patients very often ask me to hug them, hold their hand. The results in the report only confirm what I experience in my psycho-oncology practice.

I encourage everyone to read the report's findings and recommendations. The empathetic touch has tremendous power.

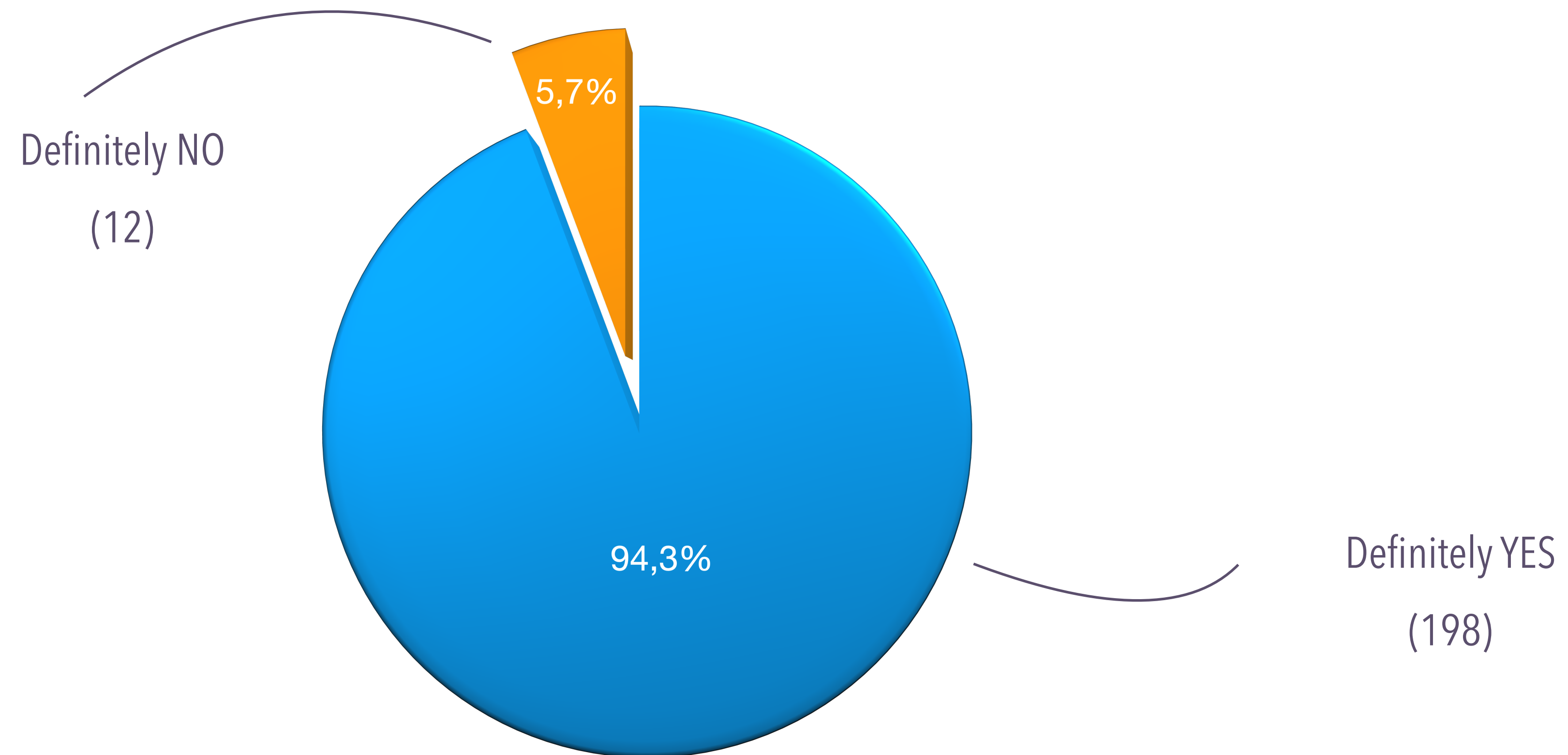
Małgorzata Ciszewska-Korona

Psycho-oncologist

Foundation *Rak'n'Roll. Wygraj Życie!*
(Rak'n'Roll. Win Your Life!)



Do you think empathetic touch / partial gentle massage might be necessary for a patient who is not aware of what is happening to them or with whom there is no logical contact?



% of indications (number of respondents) - N = 210



Those responding that touch may be needed by a sick person with whom there is no logical contact were asked to justify their choice.

01

- Empathetic touch alone is good for the body and the patient. The fact that the patient may not be conscious or there is no logical contact with them, will not make the body not feel empathetic touch.
- I believe that even if someone is unable to communicate with, for example, a massage therapist, it does not mean that their body will not receive the stimuli. Even a sick person without any contact is not a machine. They are a living being who feels and whose body will respond to touch.
- Lack of perception at a high level does not mean lack of sensation. Love and respect shown to a patient with whom there is no logical contact opens up possibilities for hidden forces of nature and communication on a very subtle level.
- There may be no contact from the direction of patient-supporting person, but still the patient may feel the touch. It seems to me that it can be some kind of support for the sick person – letting them know that someone cares about them despite their difficult situation, that they have not been left alone. Such touch can stimulate the body to fight for life. Without touch, the body may give up.



02

- Human beings are creatures that perceive information from the environment through the basic senses: smell, taste, hearing, sight and touch. There are receptors all over the body that are responsible for many of the body's vital functions. Receptors on the feet, hands or ears are connected to specific organs and parts of the body. Regular compression, massaging can improve the functioning of the body. It has a relaxing and detoxifying effect on the body.
- I believe that touch is essential for everyone to maintain health and well-being, not only physically but also mentally, and for a person who is ill especially, even if there is no contact, and perhaps especially then.
- The skin as an organ is very sensitive to stimuli, there are receptors feeling pain, heat, cold, pressure, touch, among others. So I believe that even if there is no logical contact with the sick person, it does not mean that they do not receive these sensations. If the patient is able to perceive specific stimuli, they are also able to process them to the greatest extent possible at that particular time. Tender, soothing touch can be received very positively by this person, which will influence their mental well-being in a better way, even if physically not much may change. We must not forget about everyone's psyche, it is just as important as the physicality, even if it cannot be seen.
- Because [the patient] is still likely to feel the stimuli that the brain is receiving, processing – and this can have a positive effect on the healing process.
- No logical contact does not mean no contact.
- Through touch we influence the whole body, even without the patient's involvement. Muscle tension is lowered, blood circulation improves, breathing deepens, and the endocrine system is regulated.



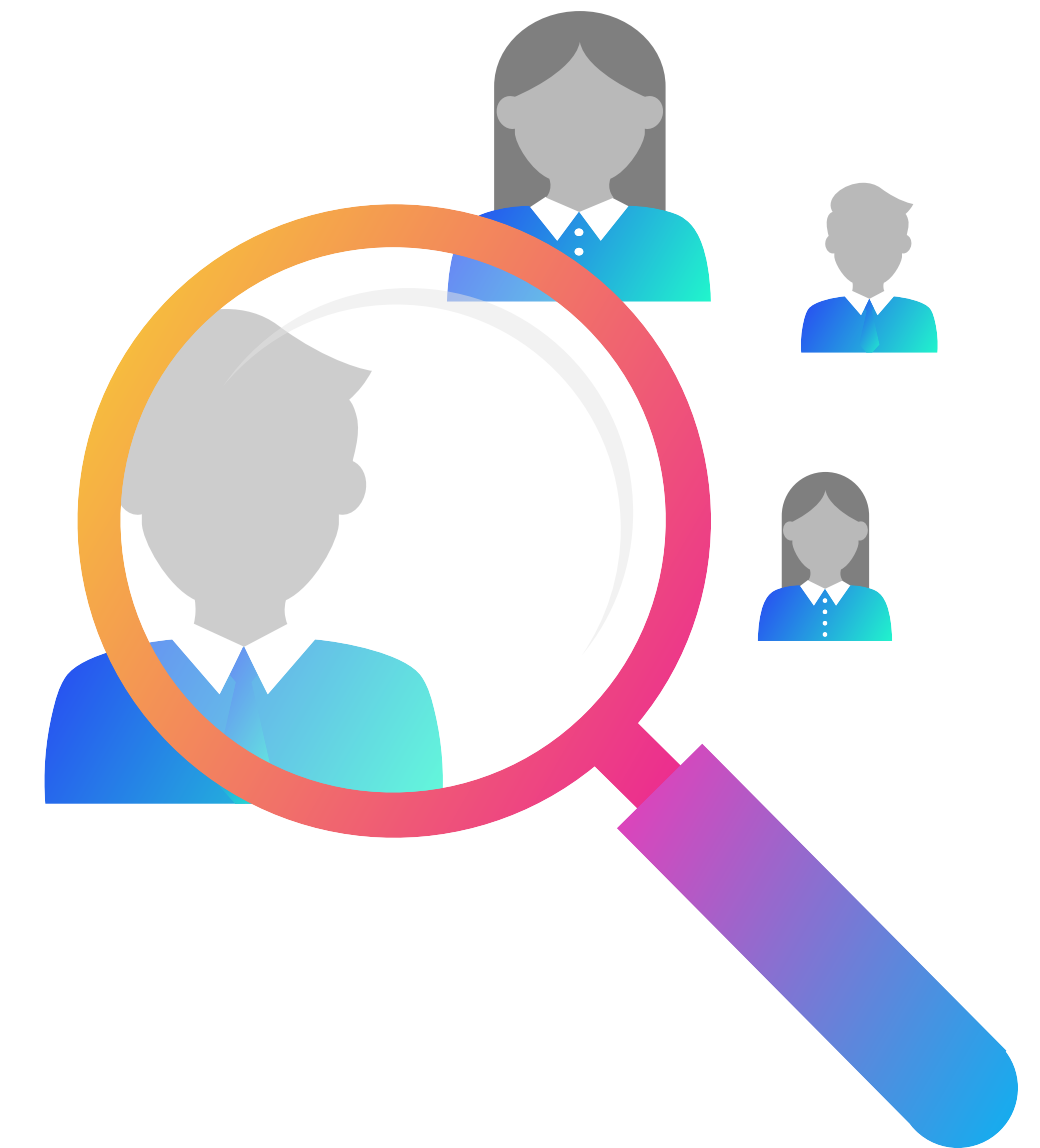
03

- My dad was in a coma, I, completely unexperienced, did not know how to accept and deal with this situation. Fortunately, I came across a wonderful staff at the hospital, these ladies simply just made me realize that for such a patient, touch, conversation are really significant. Despite the fact that there was a lady who would come and massage my dad, I, being in the hospital every day, inexpertly massaged, touched, stroked and talked, and when there was a lack of topics for my monologue, I read books. It's strange, but after waking up, after a few months, as my dad recovered, during some conversation he told me that he remembered me coming to see him in the hospital. How not to believe in touch and conversation?
- My grandmother had Alzheimer's disease – even though the illness progressed and was very long-lasting, every touch was defined in her memory. Every good and bad touch. Despite her lack of conscious thinking, she reacted nervously to bathing and washing her intimate places. And contrariwise, she remembered what a heartfelt stroking of her hand, cheek or head was. She reacted to them with a smile, sometimes an incoherent word of appreciation. I also believe that a person who has no contact with those around due to physical dysfunctions, for example a paralyzed patient, is all the more in need of touch that is beneficial to the body and spirit. Such people cannot ask for help out loud by themselves. And it seems to me that this kind of touch is precisely the help they need – in the spiritual and bodily matter.
- My friend suffered a serious accident at work, the diagnosis was dramatic, he is in a vegetative state. His partner is struggling for his return. It turned out that Peter hears everything, follows orders, gets nervous in stressful situations. However, there is no other contact with him, he is unable to communicate. His partner's touch calms him down immediately, gives him energy and strength to exercise, which requires a huge effort from him. The touch of his 5-year-old son makes him cry. I believe that every touch matters. Peter is able to distinguish who is touching him. I think people without logical contact need this kind of touch. We do not know what feelings these people have, whether they have emotions, or if they can hear us. But always the sense of closeness of the loved ones is something irreplaceable.



CLOSER LOOK

The vast majority of respondents (94.3%) are of the opinion that empathetic touch may also be needed by those patients with whom there is no logical contact. In justifying their opinion, respondents refer to both facts about human biology and personal, sometimes very intimate experiences.





Those responding that touch is not necessary to a patient with whom there is no logical contact were also asked to justify their choice.

01

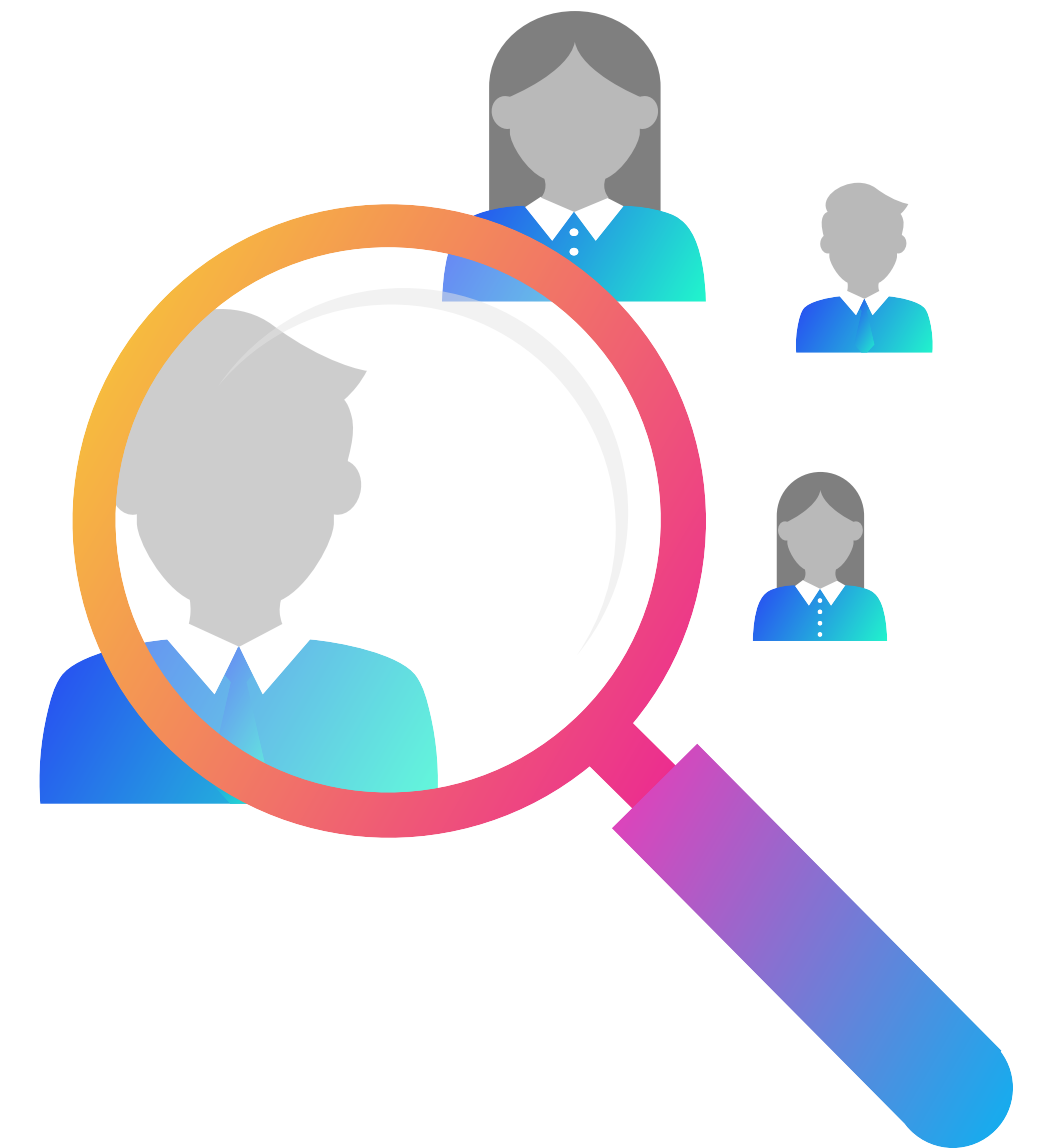
Survey responses can be summarized into the main concerns:

- We don't know how our touch is perceived by the patient, because they can't let us know if it is pleasurable or repulsive to them.
- It could be abusive to the patient, who has no way to signal that they do not wish to be touched or that it is uncomfortable to them. This is especially true about the touch of a stranger.



CLOSER LOOK

We can observe that there is a low (5.7%) percentage of respondents who, whether due to their own experience or observing others', were against touching patients with whom there is no logical contact. In such cases, it is necessary to draw from our special resources of empathy and the ability to pick up non-verbal signals coming from the patient.





What non-verbal signals indicate that the patient may need touch and closeness? (And for a variety of reasons, they won't ask for it or don't know that they may need touch).



Other responses indicated by respondents:

the sick person seeks our hand on their own and does not want to let go for a long time; the sick person tries to massage something on their own; the sick person rubs the bed linen with their fingers; they may also arrange themselves in the bedclothes in a strange manner, as if they are more comfortable in that position.

% of indications (number of respondents) - N = 212



To what extent do you think the touch of a loved one can be a support to the patient during treatment and recovery (even if it is not as professional as a massage or physiotherapy)?

It has a huge impact on the course of the disease

99,05% (210)

% of indications (number of respondents) – N = 212



Restoring humanity in the time of illness, feeling safe and being loved

Individual responses from respondents on how a loved one's touch can be a support to the patient during treatment and recovery.

01

- The sick person feels that they are human, that they are perceived not only through their illness; there is a feeling of care; touch builds a sense of security and the body recovers faster.
- We maintain a bond with a loved one through touch. As the close ones to them, we know the person better than the staff (although the patient sometimes behaves quite differently than we would expect – we can sometimes be surprised, as they are unrecognizable), we can gradually try to shorten the distance in touching, and it brings results: the patient feels better, is calmer, with time begins to cooperate in nursing activities, a smile appears, even a subtle one is a great success.
- I think such touch supports the way of coping with the disease. The patient feels noticed by loved ones, important. This psychological aspect is of great importance here – in my opinion.
- Because it will be the touch of a close person. Known to the sick person, and even if it is not by a professional, it will be a valuable touch, because it's someone's they accept. I am a massage therapist, and when my daughter was very feverish for a week, I was by her side, touching her, stroking her head. She breathed calmly. She felt safe.



- This kind of touch certainly allows the patient to go through treatment and recovery more smoothly. It also gives the patient the feeling that they are not alone in this difficult situation, and there is this sense of support and security thanks to the touch of a loved one.
- I feel the lack of touch as abandonment, disapproval, rejection, staying alone with problems, loneliness. Through good touch, the patient can feel love, support, involvement, understanding. They can be sure that a close person is there for them, does not distance themselves from the patient's weaknesses. It can motivate to heal, to fight for oneself, give hope, reassure. It can help with pain by relaxing the body and speeding up rehabilitation. It can improve the patient's appetite, sleep.
- Empathetic touch is an expression of love, it gives the patient the feeling that they are a loved and important person. Sometimes it gives strength and sometimes it gives comfort in the process of passing away. Touch is like a non-verbal "I love you and I am here with you".
- For as long as I can remember, hugging me in sickness or in a difficult situation has been a good, supportive thing.
- Better well-being, more positive attitude towards the treatment / rehabilitation process, increased level of endorphins, decrease of cortisol levels, reduction of inflammation, improvement of blood supply to tissues, improvement of metabolism, improvement of immune system functioning.



03

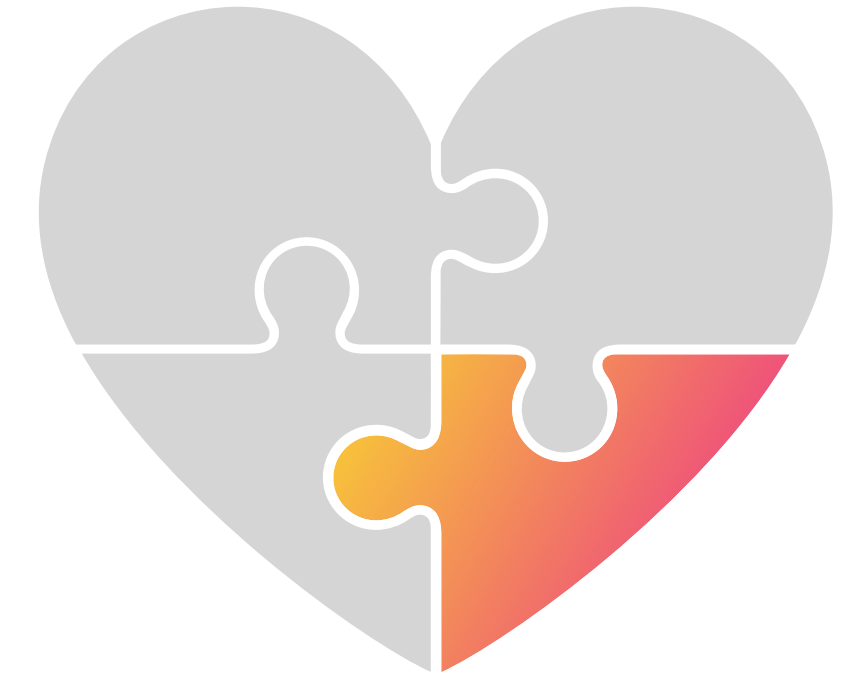
- The touch of a loved one during treatment and recovery can provide many benefits. Gentle touch can be a form of expressing emotional support, helping the patient feel understood and loved. It can also reduce the feelings of isolation that often accompany illness.
- Sometimes trying to talk is too much effort or is impossible. Sometimes words can make things worse instead of better. Touch is beyond words. One can be at odds with someone, while through touch they can convey understanding. One can fail to comfort with words, and do just that with touch – proving their attention to the sick person.
- [Touch] is associated by most of us with security, love. It lets you know that you are important, loved. The sense of touch is the first sense by which we communicate with the world and others, appealing to it in illness can help build a sense of safety, trust, which results in the speed / quality of recovery.
- For me [touching] was a huge support. It's the feeling of being loved, of being loved and accepted in spite of one's appearance, because that person is not disgusted to touch me.
- [Touch gives] Physical tranquility, bliss, supports mental strength, the will to fight, gets you out of negative thinking.



CONCLUSIONS



Almost all respondents (99.05%) agree that the touch of a loved one has a great impact on the course of the disease. It is clear that they understand the need for the support with empathetic touch in illness. Indeed, they list many associated benefits - both on the physical level (improved immune system function, lowered cortisol levels, increased endorphins, relaxed muscle tension, reduced pain, better appetite and sleep) and in the area of emotions (sense of humanity, importance, safety, calmness, strengthened bonds, attentiveness, love, reduced sense of isolation).



BLOCK C

Self-experience of people receiving
support via empathetic touch /
massage during illness

Empathy expressed through touch can support the fight for life



As a person who suffered an extreme traffic accident, underwent more than a dozen surgeries and spent six months in hospitals, I especially appreciate Agnieszka Kawula's contribution to developing awareness and spreading knowledge about the role of empathetic touch in illness and the healing process. From my own experience, I know how much empathetic touch, being close to family and friends and having the support of medical personnel mean to a person who is fighting for their life and health. I also know how

devastating the lack of it can be to the body and psyche.

Empathy expressed in the form of touch can support in the fight for life, strengthens physical and mental health, stabilizes, can awaken vitality and, which is equally important, can prevent trauma or at least reduce its effects. Empathetic touch can have a preventive effect. It can be a tool that tremendously supports recovery from trauma.

I am glad that Agnieszka Kawula's study proves that as for this issue most of us feel and think alike. On the other hand, I appreciate that the study captures certain difficult and painful points that empathetic touch can be associated with by some people. Agnieszka Kawula's work joins together and gives insight into such important, in crisis sometimes determining, dimensions of our physicality, spirituality and emotionality, and reminds us to respect their boundaries.

I admire Agnieszka Kawula's consistency and dedication to carrying what she has discovered. I admire her passion and dedication to the other person and the cause.

I hope that her work and research will contribute not only to the discussion, but also and most importantly, bringing real help, to the implementation of the practice of empathetic touch in hospitals, nursing homes, hospices and other centers where there are particularly vulnerable people.

I am grateful for spreading awareness of the role and action of empathetic touch. For reminding us of it in a world where such a quiet and subtle message often escapes our attention, is often lost and, despite its critical role, forgotten.

dr Agata Norek

Founder of *Agata Norek Institute* (Switzerland), author of the podcast *Chirurgia duszy* (Surgery of a Soul), creator of the method ARTrauma®

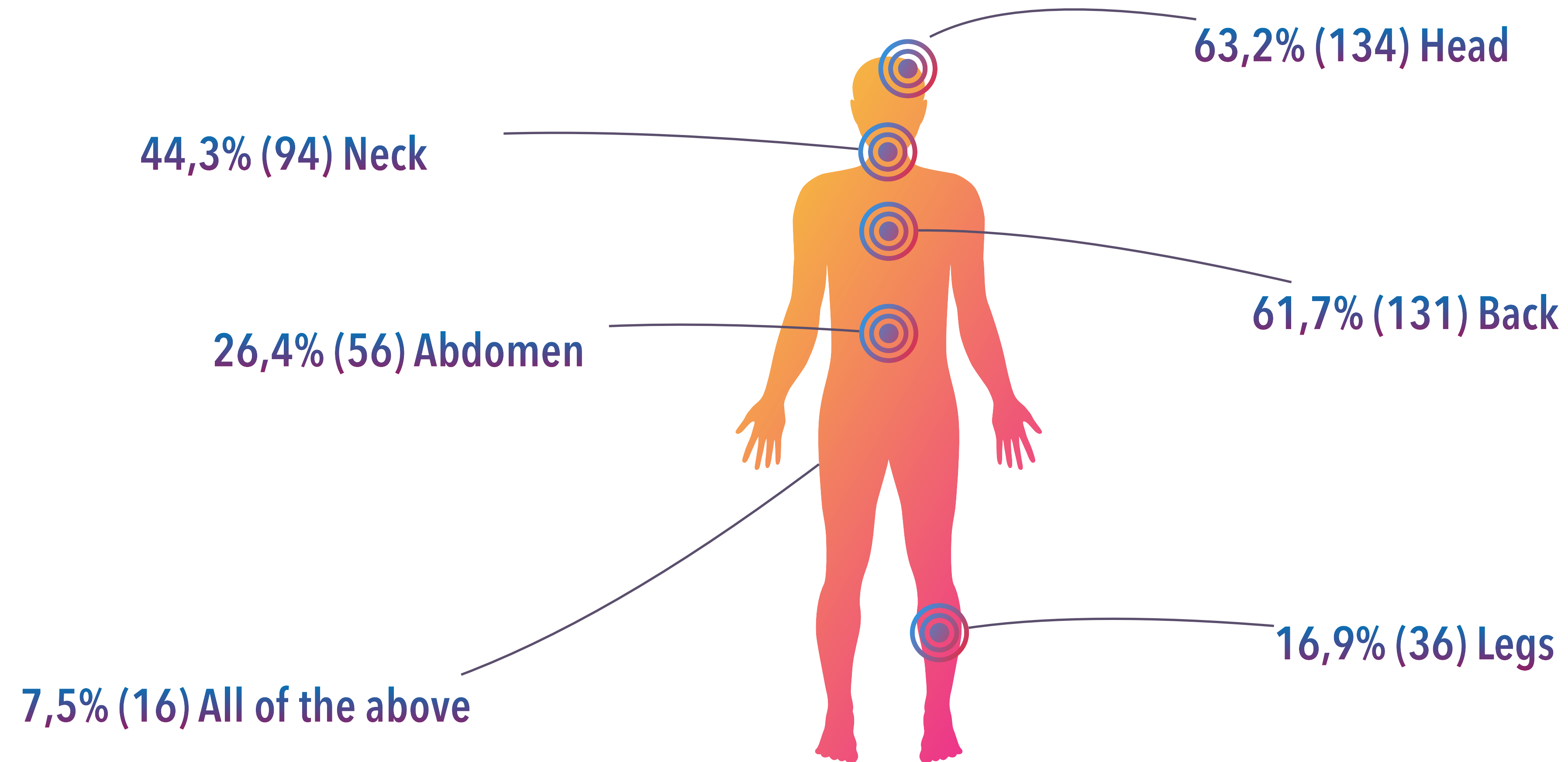


For this part of the study, it was important to ask these key questions:

1. How do you perceive your body when you are sick, and could good touch be of support to you then?
2. When you were sick, did you experience empathetic touch, and if not, did you feel you could use it?
3. Has anyone sick ever asked you for any kind of empathetic touch in their physical indisposition?



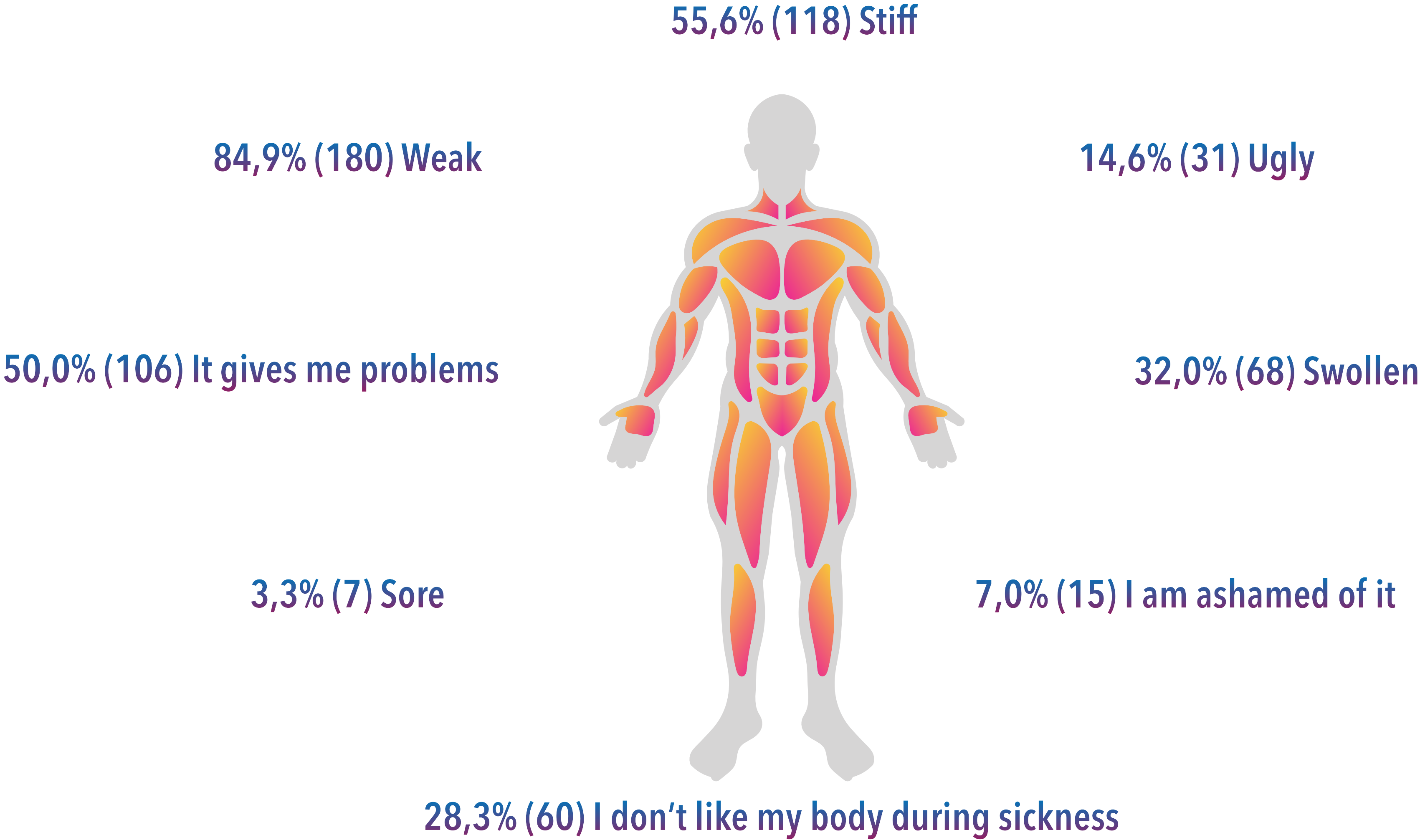
What hurts you most often when you are sick?



% of indications (number of respondents) – N = 212



How do you usually find your body when in sickness?



% of indications (number of respondents) – N =212



How do you usually find your body when in sickness?

(individual indications)

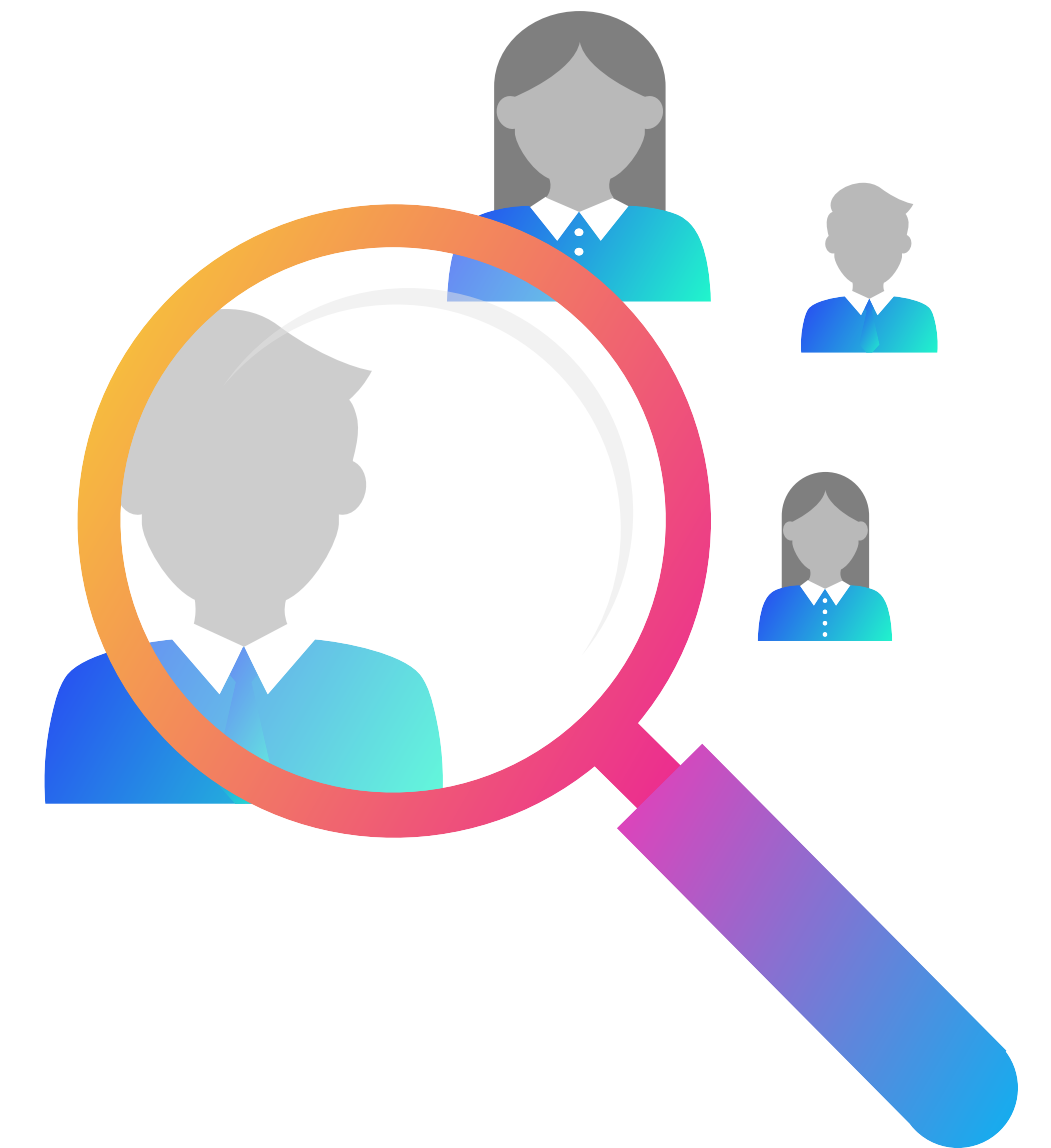
fragile
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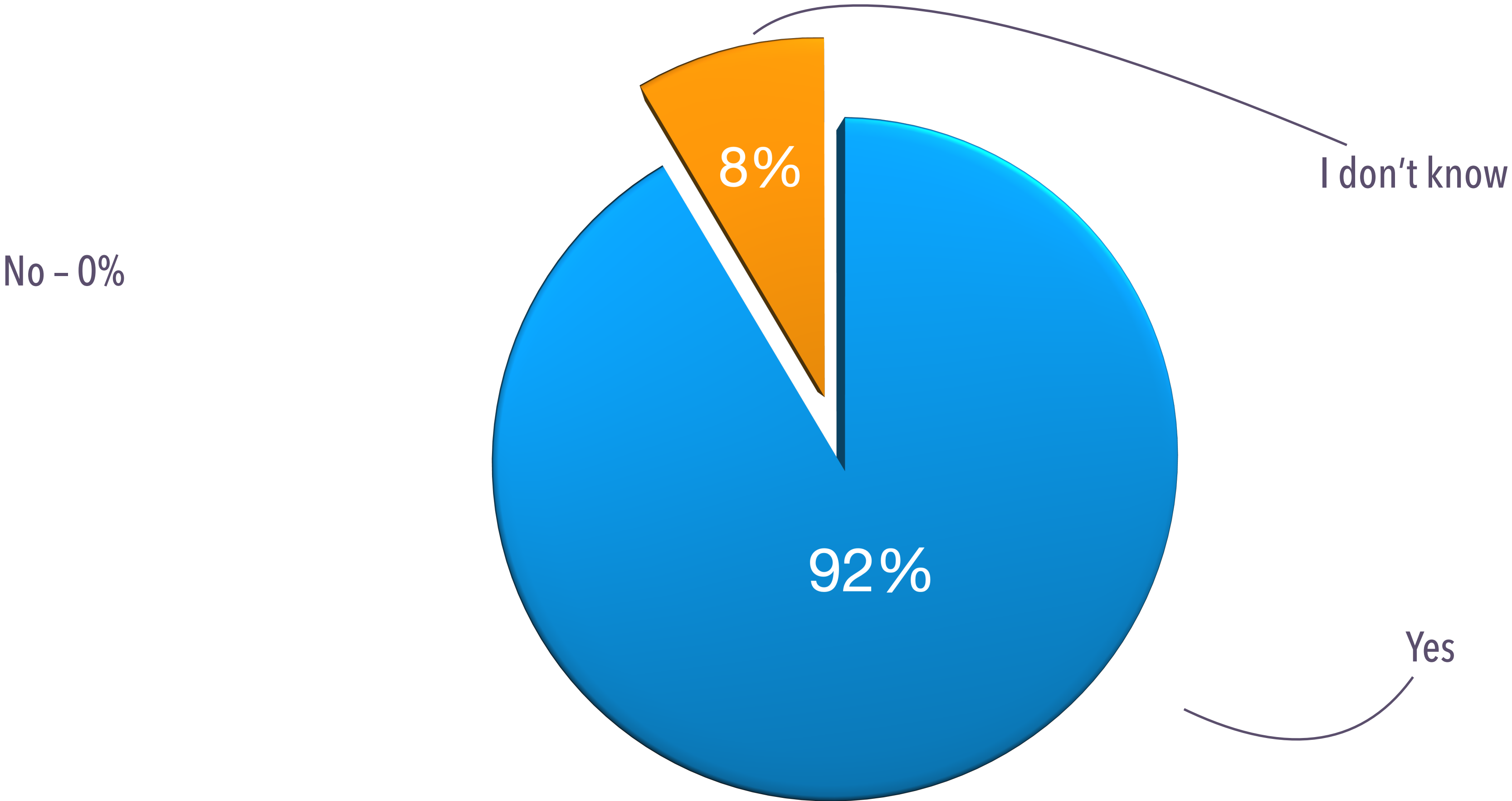
CLOSER LOOK

It is worth pointing out that the list of body parts where patients most often feel pain is strongly correlated with the areas that are dealt with during massage (61.7% of respondents indicated the back, 44.3% the neck).

What's more, the descriptions of how respondents feel about their own bodies during illness also match those for which people seek contact with a massage therapist (55.6% – stiffness, 50% – the body gives problems).



Do you suppose that elements of gentle massage / good touch (e.g., holding your hand, stroking your head, long, calm strokes on your back or shoulders, etc.) could be a support for you when you are sick?



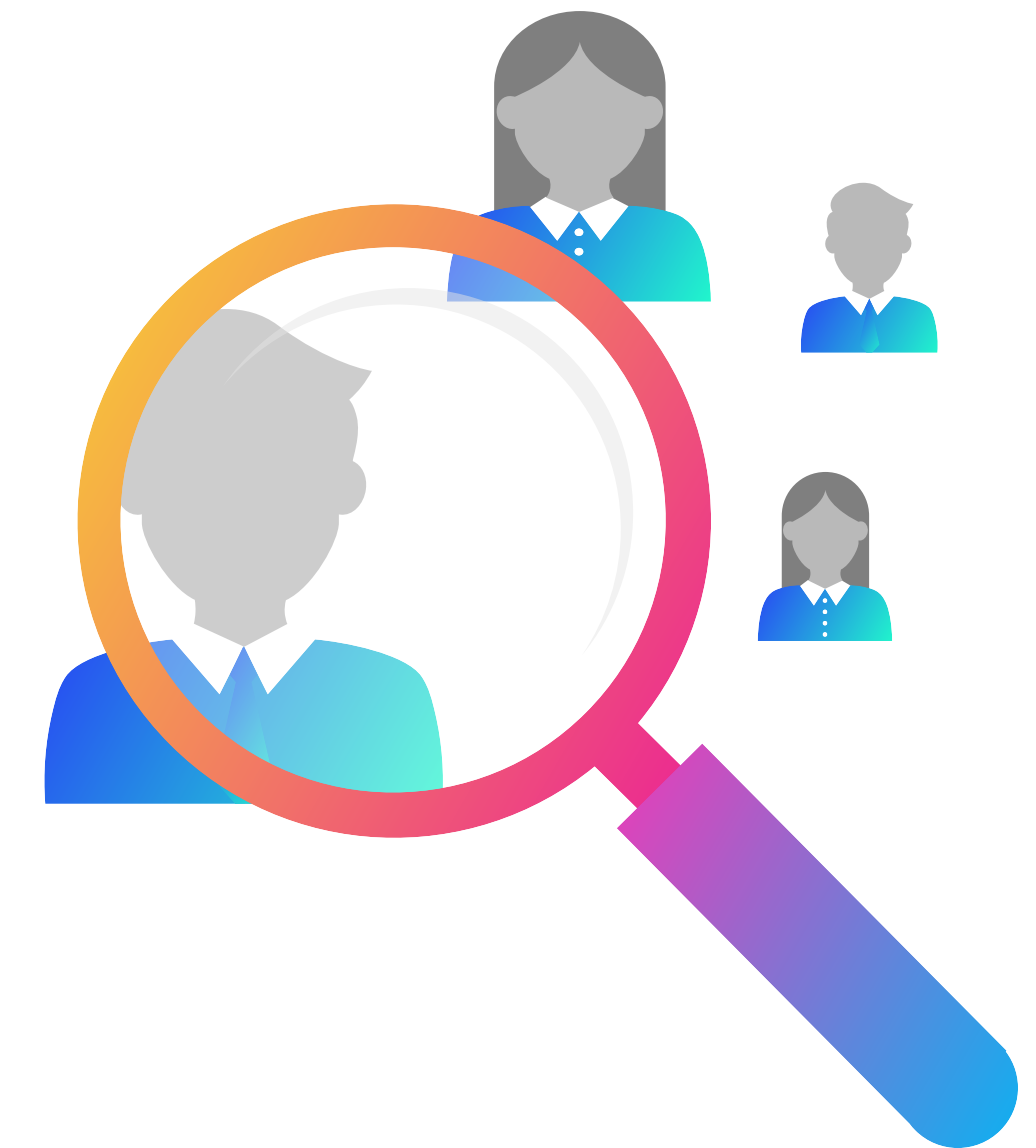
% indications - N = 212



CLOSER LOOK

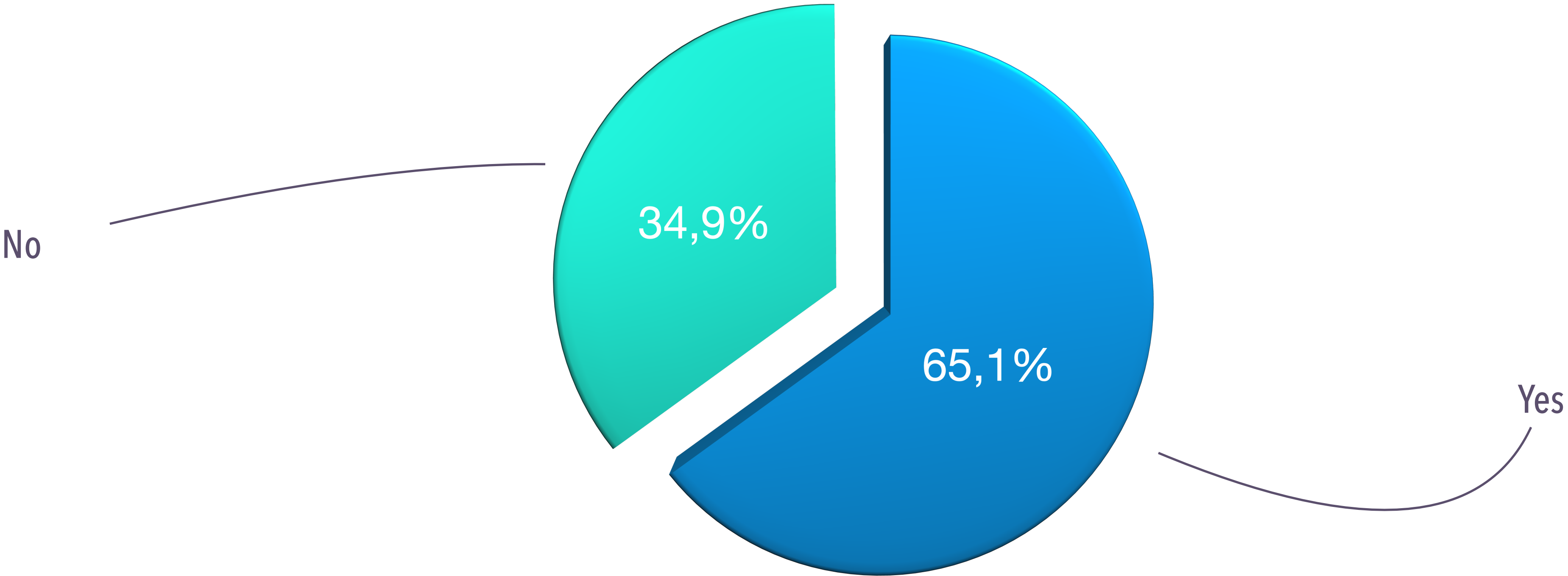
Some respondents indicated that they are ashamed of their own bodies in illness. So, it is quite likely that they may then be less inclined to ask for any help in the form of massage or touch.

It is significant, however, that even these people at the declarative level agree that massage could be a support for them during this difficult time. No respondents marked a negative answer.





When you have been ill yourself, have you had any experience with any form of massage / touch other than nursing / medical activities during your physical incapacity?



% of indications - N = 212

Suffering people, more than medicine, expect empathetic touch and closeness



The results of the study indicate a great need for touch in the time of illness. This does not surprise me, since as a doctor I was in the habit of touching the hands of seriously ill patients and patients who were traumatized. I always observed then a slight smile on the patient's face and a feeling of relief. Patients at that moment trusted me more, opened up to me and told the most private stories.

I am convinced that this way of communicating with the patient is beneficial to both the patient and the doctor. At this point, a strong bond is formed, which is so important in the treatment process. However, we must remember that it is always the patient who decides whether they want the touch or not. In all cases when they do not mind, I believe that empathetic touch is even vital.

The idea of promoting empathetic touch when caring for the sick is by all means worthy of support and should be spread. In hospitals, hospices, nursing homes and many other places, suffering people, more than medicine, expect empathetic touch and closeness.

Jadwiga Joško-Ochojska, prof. MD

Internal medicine physician, neurophysiologist, public health specialist

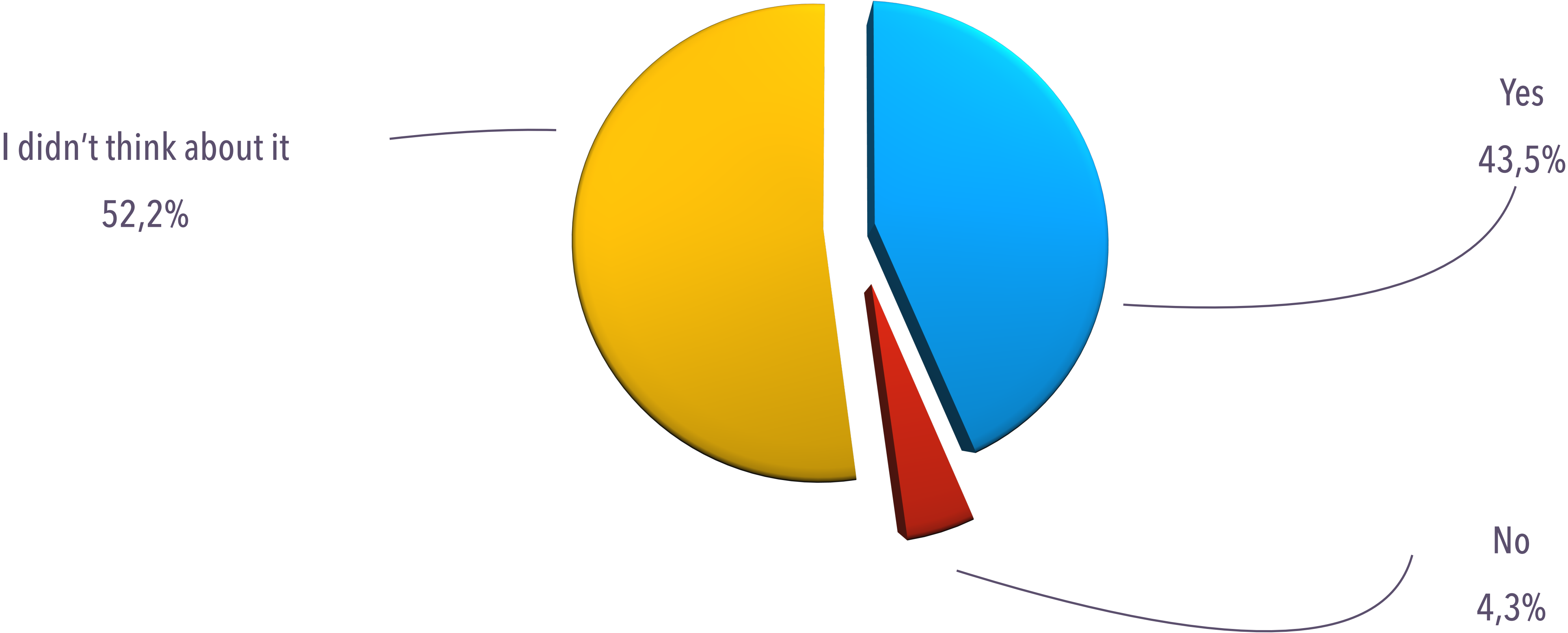


Respondents who were supported by touch / massage during their illness indicated the most frequently touched / massaged areas of the body.





Respondents who were NOT receiving touch or massage support at particular stages of illness / treatment, when asked if they had felt they could use the touch at that time, stated:



% indications – N = 212



Respondents' stories about their experience with empathetic touch / massage

What do you remember the most? Why was it good and important to you?

- I massaged my husband when he was sick with COVID-19, he fought off the disease better, recovered faster, and, I must admit, it was very bad with him.
- During the flu, my joints ached and lightly massaging my knees, legs, elbows or hands gave relief from the pain.
- My partner would massage me when my back muscles were very tense when we were building our house. It gave me great physical relief, but I also remember how just the suggestion that he could do it made me feel good. In many other situations, when I was in a bad mood, asking about my needs or offering a massage was valuable and soothing to me. During hard times, a hug or hand-holding always brought me great relief.
- When I was little and would get sick, my mother used to massage my feet. I simply liked it.
- . After blood collection (for a very important medical test), the nurse stroked and shook my hand – a simple gesture that was very supportive and expressed better than words that she understood how important this test was for me and what an emotional time it was. She didn't have to say anything, and I felt comforted and lifted.

01



02

- My husband touched my back with great care when it hurt a lot. I was moved by both this sight and his hands on my back. It gave us a sense of unity and support.
- Having my husband hold my hand after surgery in the hospital, having my husband touch my head with his hand to make it hurt less, and thus transmitting good energy – at my request. When my husband had an injured hand, I would change his bandages, touch him gently, try to be very precise, show love and care in this way. When my son is unwell, we touch him if he wants, hug, stroke, massage, kiss. This calms both parties, allows us to express feelings, build closeness and trust, show support, give the sick person a sense of security.
- Empathetic touch accompanied me in the last days of my grandmother's life. Her body and then her mind stopped functioning properly, and she needed comforting with touch. It was the only thing we could do, and it was soothing.
- In my case it is very difficult to find a vein to draw blood or insert a catheter, and it is always a long and painful procedure. Once a nurse stroked my hand while doing it, it was very nice and soothing.
- When I had a panic attack and a stiffening chest, all it took was for a close person to start stroking my hand, and the pain was gone and I calmed down faster.



03

- As a recipient: a gentle touch and an empathetic approach during the medical examination (due to my rather high sensitivity, I often react with anxiety to various types of examinations and this approach allows me to relax and not feel like a problematic patient). As a giver: gently stroking the sick person's body and feet when they needed it, simply being by the sick person's side and holding their hand, being present even when the sick person is asleep, so that when they wake up, they know they are not alone (this allows to feel that the sick person is being given the support, that they are not being left alone during a difficult time, that they know they are important).
- During my first natural childbirth during the pandemic, when I was the only one in the labour room, the midwife gave me encouragement by stroking, rubbing my face with dampened towels.
- Taking care of an elderly person – after bathing, I applied cream to the visually impaired lady's face, and now I know that it was not the cream she wanted, but a form of touch, a massage.
- After the accident, when I had a massacred face and felt disgusted with myself, every touch told me that I wanted to live despite everything.
- I massaged the hands of my grandmother, who was in a vegetative state, just daily hygienic routines, after which the massaged hands seemed less stiff.
- The most important memory is of my grandmother and my grandfather's. My grandfather had a stroke at the age of 80, he lay in bed completely paralysed for 6 years, my grandmother massaged his back, hands and feet every day – he didn't have the slightest bedsores. He died peacefully in his own bed. Nobody taught my grandma to do this. She did it just because she felt that way.

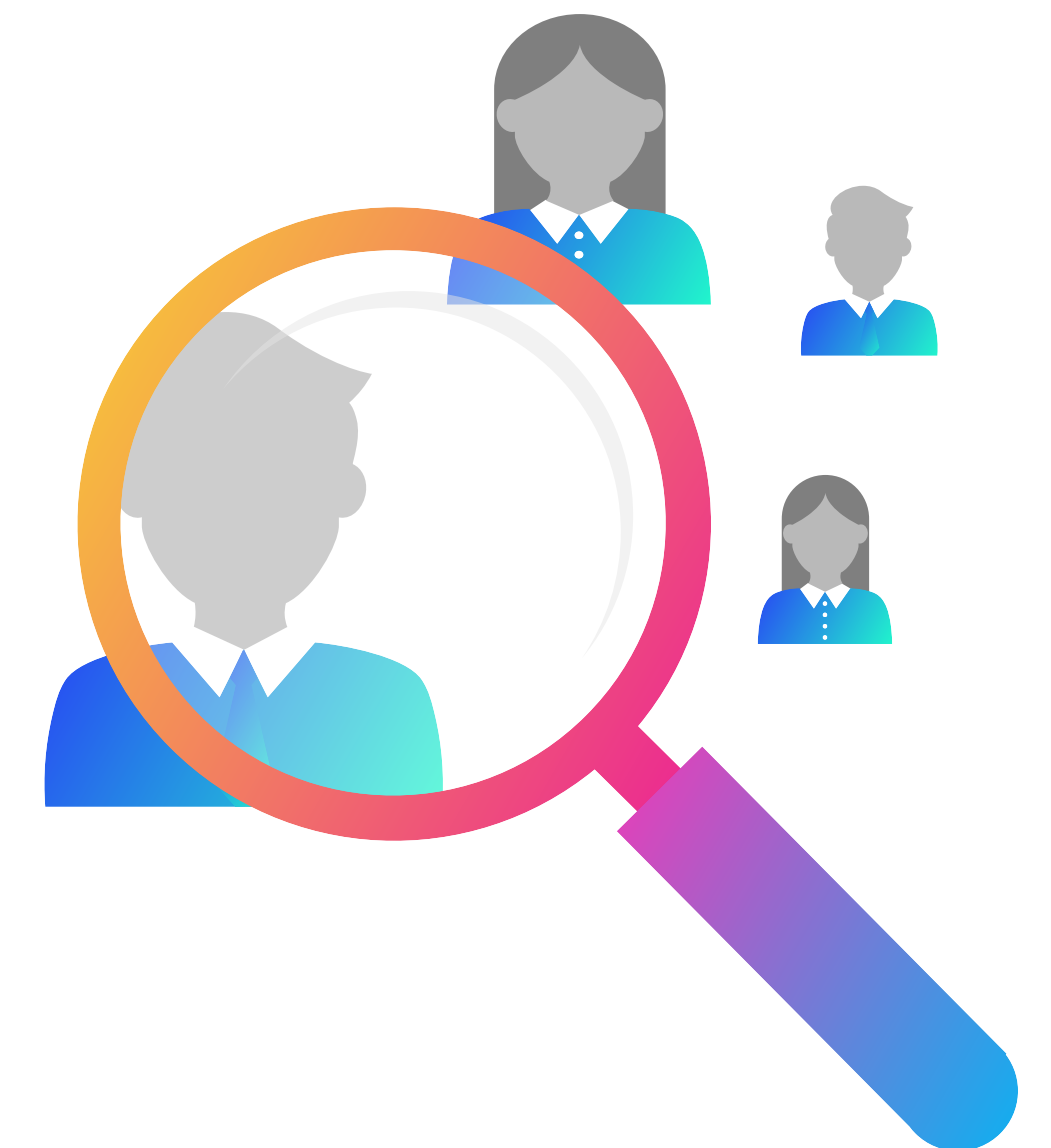


CLOSER LOOK

The majority of respondents (65.1%) confirmed when asked if they had personal experience of any form of massage / touch other than nursing and medical activities while ill. At the same time, respondents identified a number of specific forms of touch they seek or experience during physical indisposition – and, significantly, the word "massage" kept reappearing in their statements.

An analysis of all the stories submitted leads to the conclusion that we often have a good experience of supportive touch during illness and most often associate it with our loved ones.

Among those who did not experience touch during their illness, only 4.3% did not find the lack of touch bothering. But interestingly, as many as 52.2% did not think about it at all. This just goes to show how little we experience empathetic touch and how little we know about its therapeutic effects.



Touch contributes to increasing our vital energy



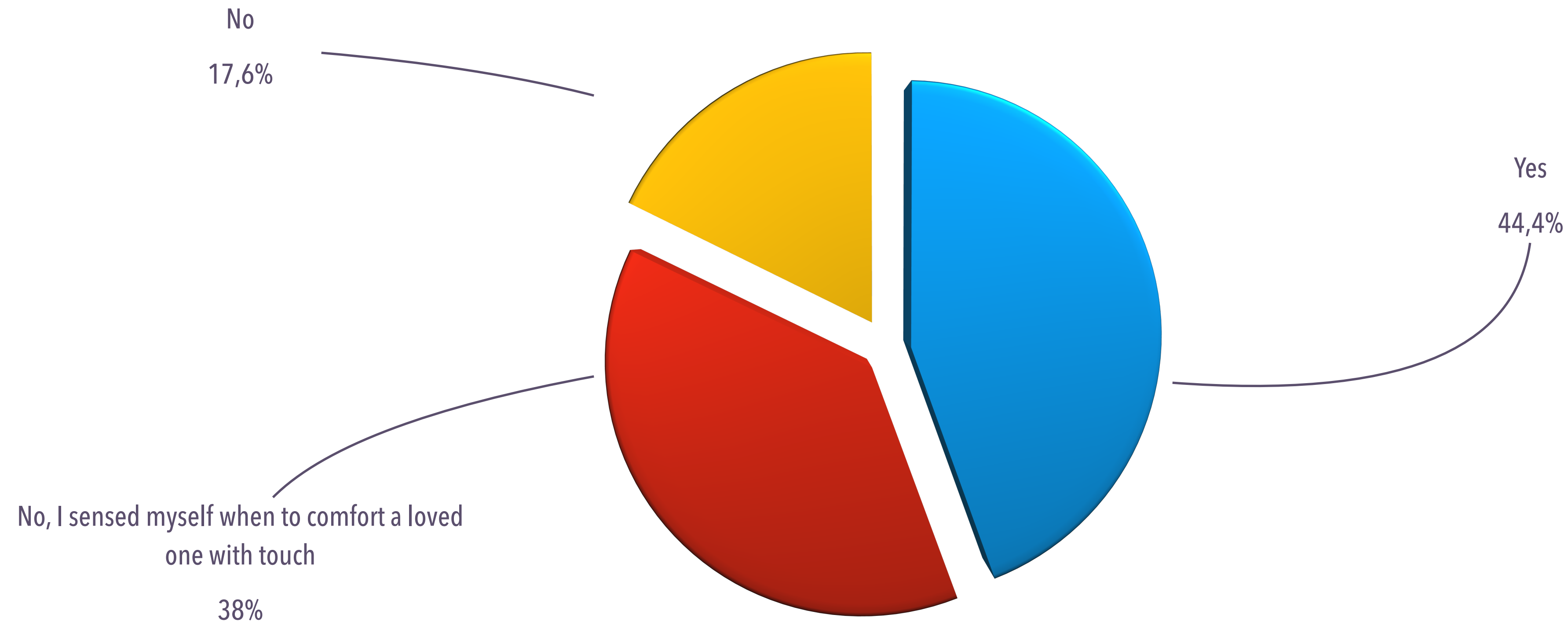
It creates a sense of closeness, community, belonging, increases security and satisfaction with life. It introduces relaxation and unwinding, promotes physical fitness (strengthens muscles, improves circulation). TOUCH. From the report we learn of its extraordinary power in disease and prevention. Used regularly in a complementary health approach: mind-spirit-body, it contributes to increasing our vital energy.

Orina Krajewska

President of Małgosia
Braunek's Foundation *Bądź*
(Be!)



Have you ever had someone ask you, while they were sick, to hug them, stroke them or to provide any other form of empathetic touch?



% indications - N = 212



Have you ever asked someone to hug you, stroke you or provide you with any other form of empathetic touch during your illness?

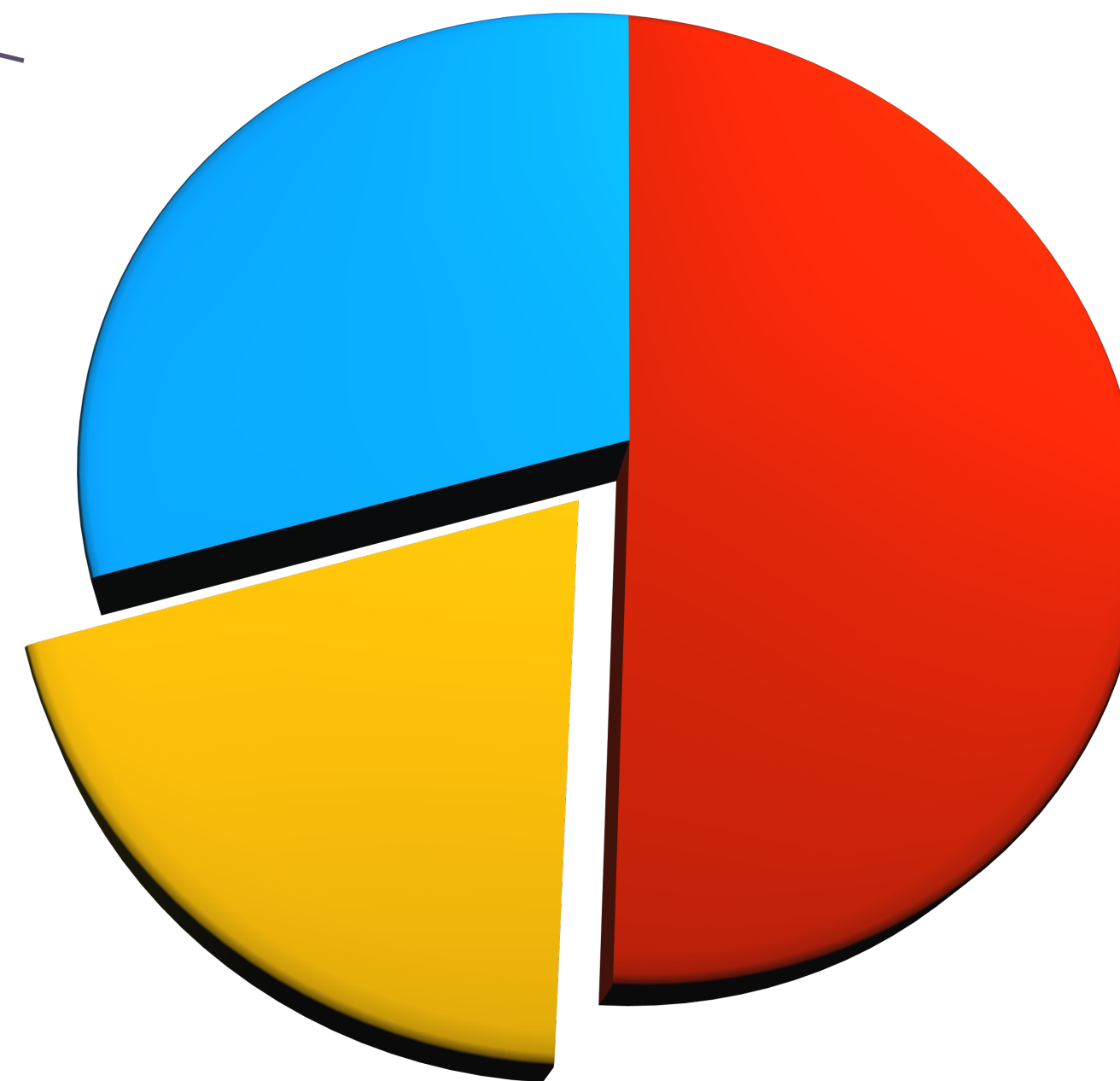
No, they sensed it themselves and comforted me with their touch

30,4%

I would like to, but I'm too embarrassed, I don't know how to ask

19,2%

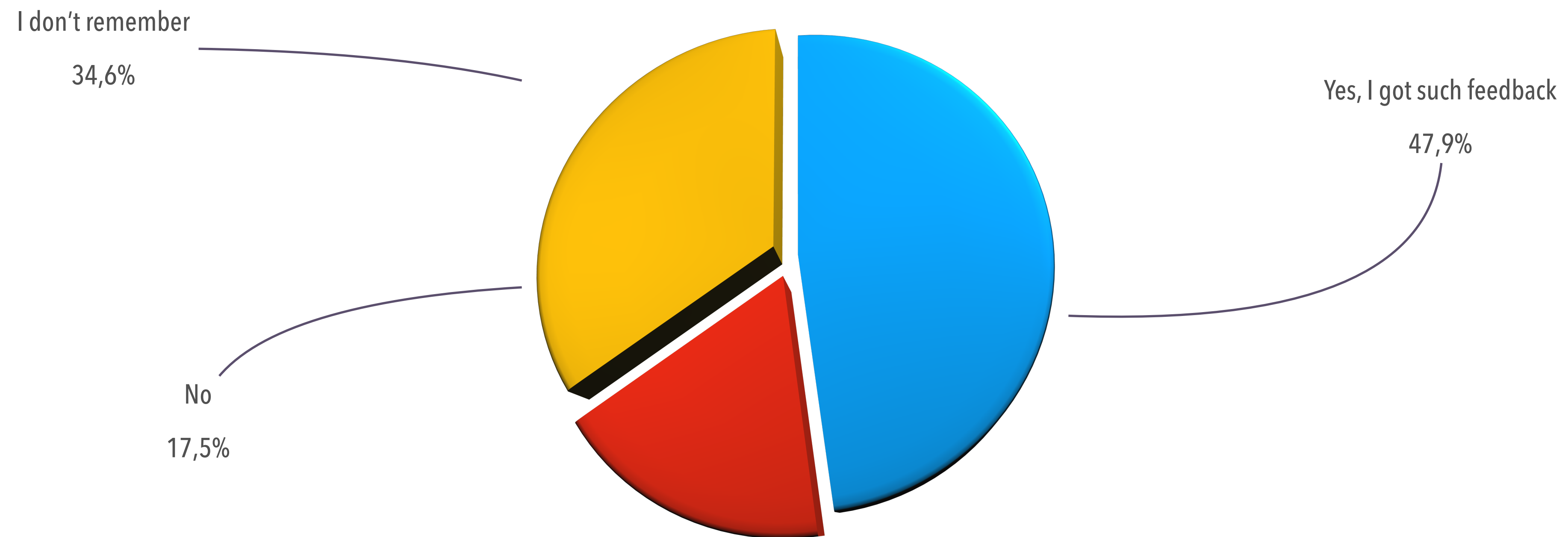
Yes
50,5%



% indications - N = 212



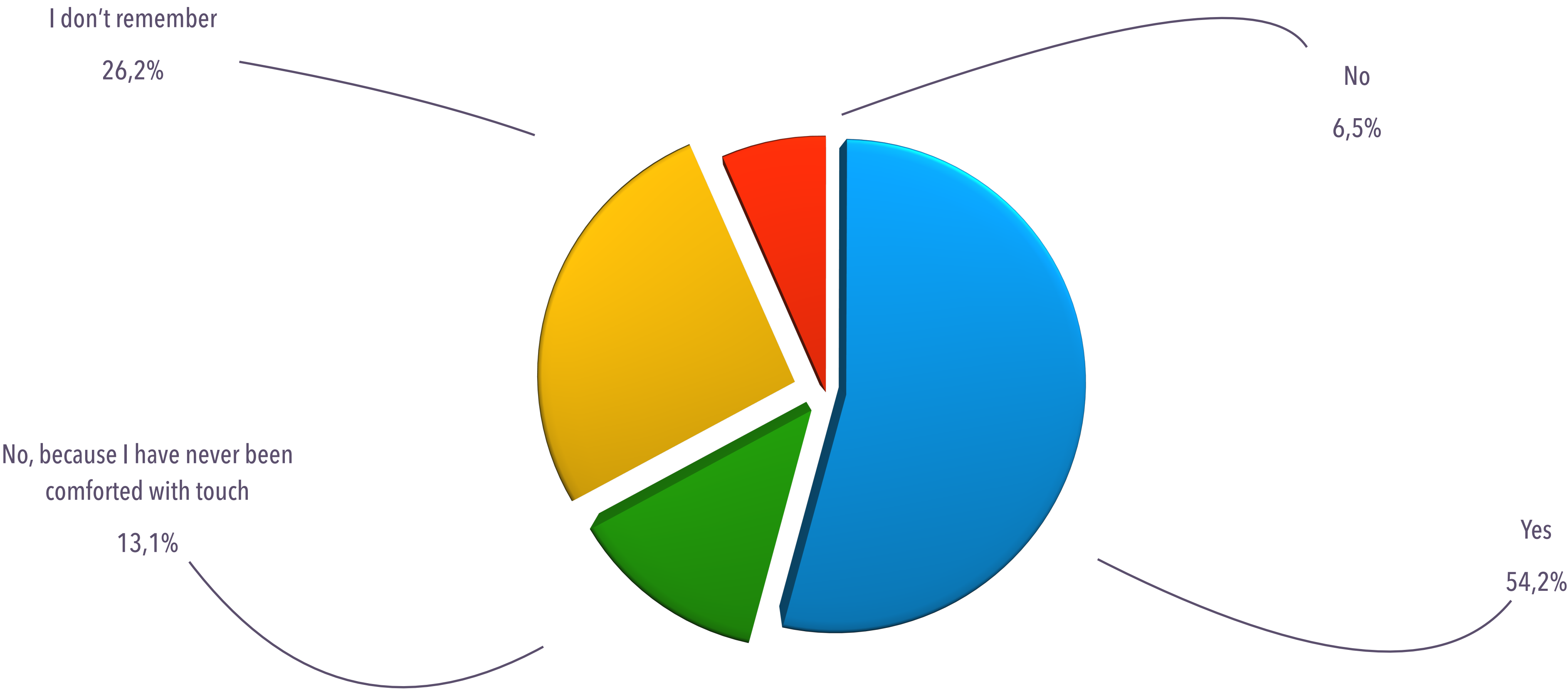
When you comforted someone with touch, did the sick person tell you afterwards that it was important / necessary for them and /or helped them with something?



% of indications - N = 212



When you were sick yourself and you were comforted with touch / massage, did you happen to give feedback later to the person who took care of you?



% of indications - N = 212



Respondents' stories about the quality of touch feedback

- The elderly, sometimes sick, people with whom I come in contact, whom I have approached to hold their hand, stroke or hug, now during meetings they demand such actions, what's more, they have even begun to reciprocate such behavior. I have the impression that they also feel when I am having a worse day (although I try to leave my sorrows and problems at home), then they themselves come up and grab my hand to stroke it. I would like to mention that they are strangers, unrelated. I will describe a situation that moved me very much: it was summer, beautiful weather, the caregiver is sitting on a bench, next to her the elderly lady Lodzia is lying on the bench with her head in the caregiver's lap and submits to tender stroking of her head. Priceless.
- While massaging in the parlor, I heard from an elderly lady with chronic pain that she "had more life in her body" after the massage.
- I heard from my husband that he felt taken care of, that I changed his dressings in the best manner of all, that he was grateful to me.

And when I became mentally unwell shortly thereafter, my husband was attentive and helpful towards me, as if through my care he had observed how to help a sick person, and wanted to act in the same way.

01



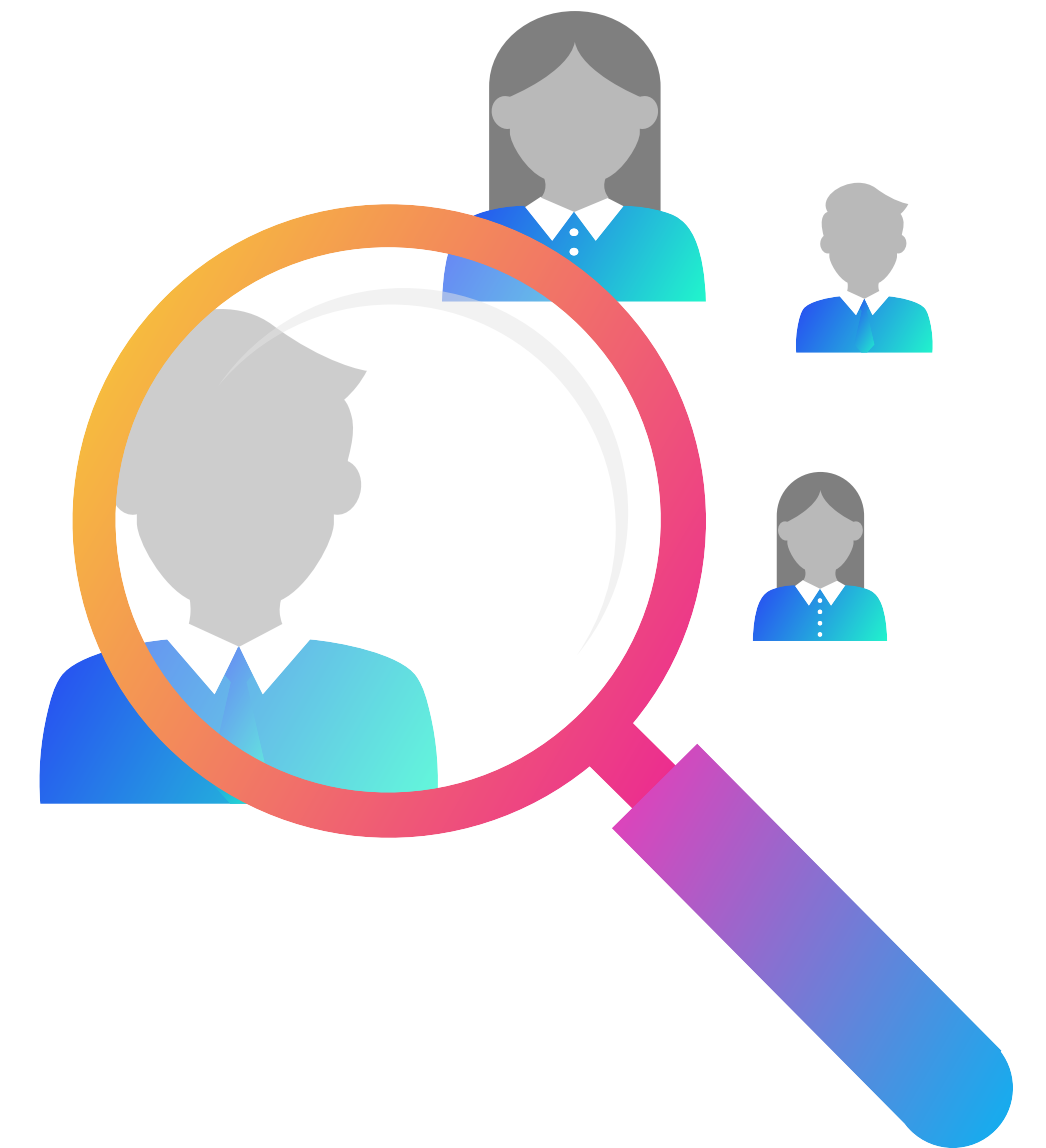
CLOSER LOOK

Feedback is often expressed with a gesture, a single word. They are sometimes accompanied by terms like: gratitude, nice, pleasant, wonderful, good. These expressions, even though they may encourage such support in the future, they do not provide enough scientific insight for loved ones who act intuitively.

Respondents were also asked why they did not give feedback. In their responses, they pointed to a lack of appropriate circumstances, lack of need or opportunity. Some respondents could not find the reason why this was the case.

There was also an interesting reflection on this topic from one of the interviewees:

I assumed that our job as family members is to take care of each other. I never thought about it: to thank my mom, my dad for their help and support during my illness... I feel strange now... They never thanked me either, I guess it's some subconscious assumption that it's just the way it's supposed to be, but the fact is, it would be much nicer to say thank you and hear such a "thank you" back!





CONCLUSIONS



The vast majority of respondents, when ill, perceive their bodies as weak (84.9%), stiff (55.6%) and one that gives problems (50%). Whereas more than 28% don't like their bodies at all at the time.

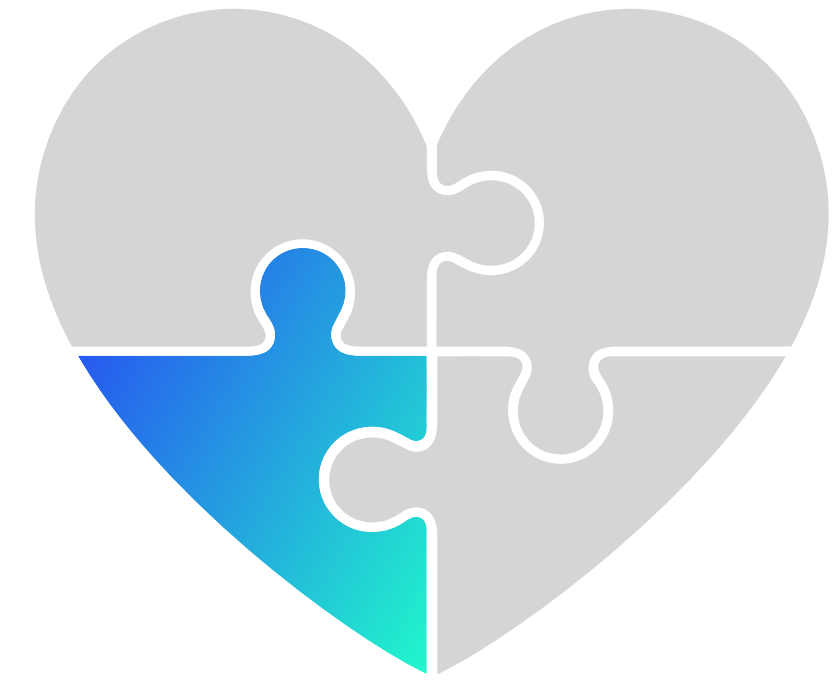
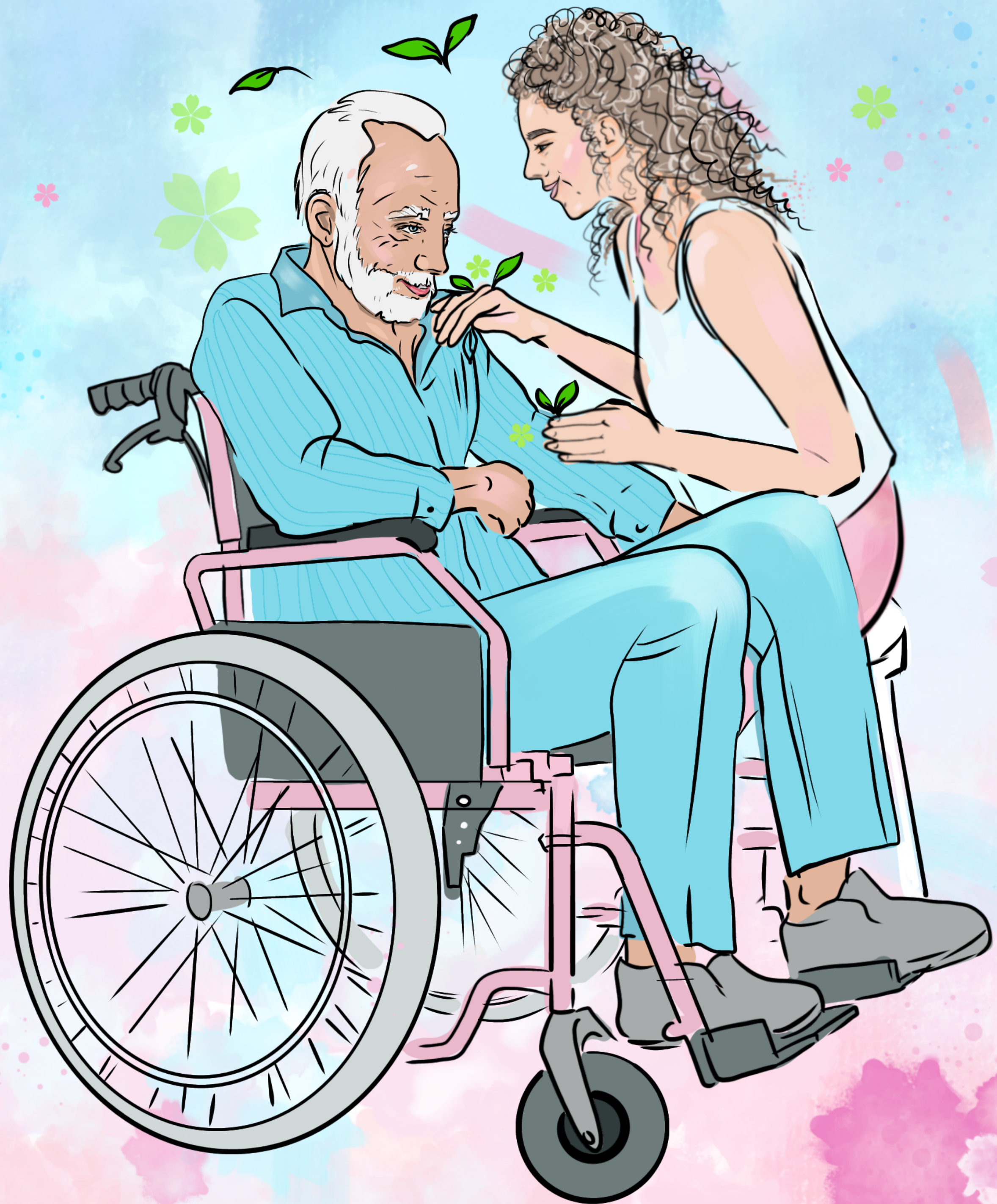
92% of those surveyed admit that elements of massage and empathetic touch would then be a good support for them.

Requests for empathetic touch or comforting with a gentle massage during illness were most often about simple stroking or a hug, and they came from the closest family members. Respondents mentioned a spouse, child, grandmother / grandfather. Patients had the need for touch and were able to ask for this form of support.

Nearly half (44.4%) of those surveyed confirm that they have happened to be asked by someone ill to hug, stroke or in any manner touch them. But – particularly heartening – as many as 38% said they had sensed for themselves when to comfort a loved one with supportive touch.

High (close to 20%) is the rate of respondents who feel embarrassed about wanting to articulate their need for empathetic touch support, or not knowing how to do so – which effectively prevents them from expressing such requests.

Analysis of the responses to the question about feedback from a patient whom respondents have supported with empathetic touch leads us to reflect that we are often not in the habit of giving feedback after we have received help. Perhaps if we were able to thank for being comforted with empathetic touch and report what impact it had on us, we would receive it more often.



BLOCK D

Good habits and tips, i.e. how to take care of a patient professionally without neglecting tenderness and empathy

Touch should be learned



What does a dying person need? This is a question we seek answers to with the *Hospice Pomerania for Children's* team every day.

In hospice care, there is a concept of total pain, which means physical, psychological and spiritual pain. Among the many medical procedures, touch frequently comes to the rescue.

First, physiotherapy to alleviate persistent symptoms, improve quality of life, and ease breathing. Secondly, relaxation, helping to relieve the mental tension which strongly signals its own existence in the body as well. But there is something else...

I am grateful for this report raising an issue often overlooked in the process of becoming sick and passing away. The science of non-erotic touch, which creates closeness and allows the patient and family members to open up also psychologically at a later stage. It's a great chance to be with the other person even without verbal contact, especially when they are suffering so much that the pain cannot be expressed in words.

Touch should also be learned. We should allow ourselves to be guided. To learn the map of our body and someone's beside us. So many children in hospice care, without verbal-logical contact, have guided us to this truth.

I remember a boy who did not want to be touched near his head and face, someone else found it fun to have his feet gently massaged, or his aching tummy stroked. Tender, empathetic touch also helps in the grieving process, when, after a loss, we are confident that we have done all we could, to establish a warm contact that can provide relief.

Above all, I hope that the presented results of the study will give courage to the families of sick people to establish close contact, which is like cure, and make medical teams aware of the important role of the empathetic touch in the entire clinical and therapeutic process.

Ewa Liegman

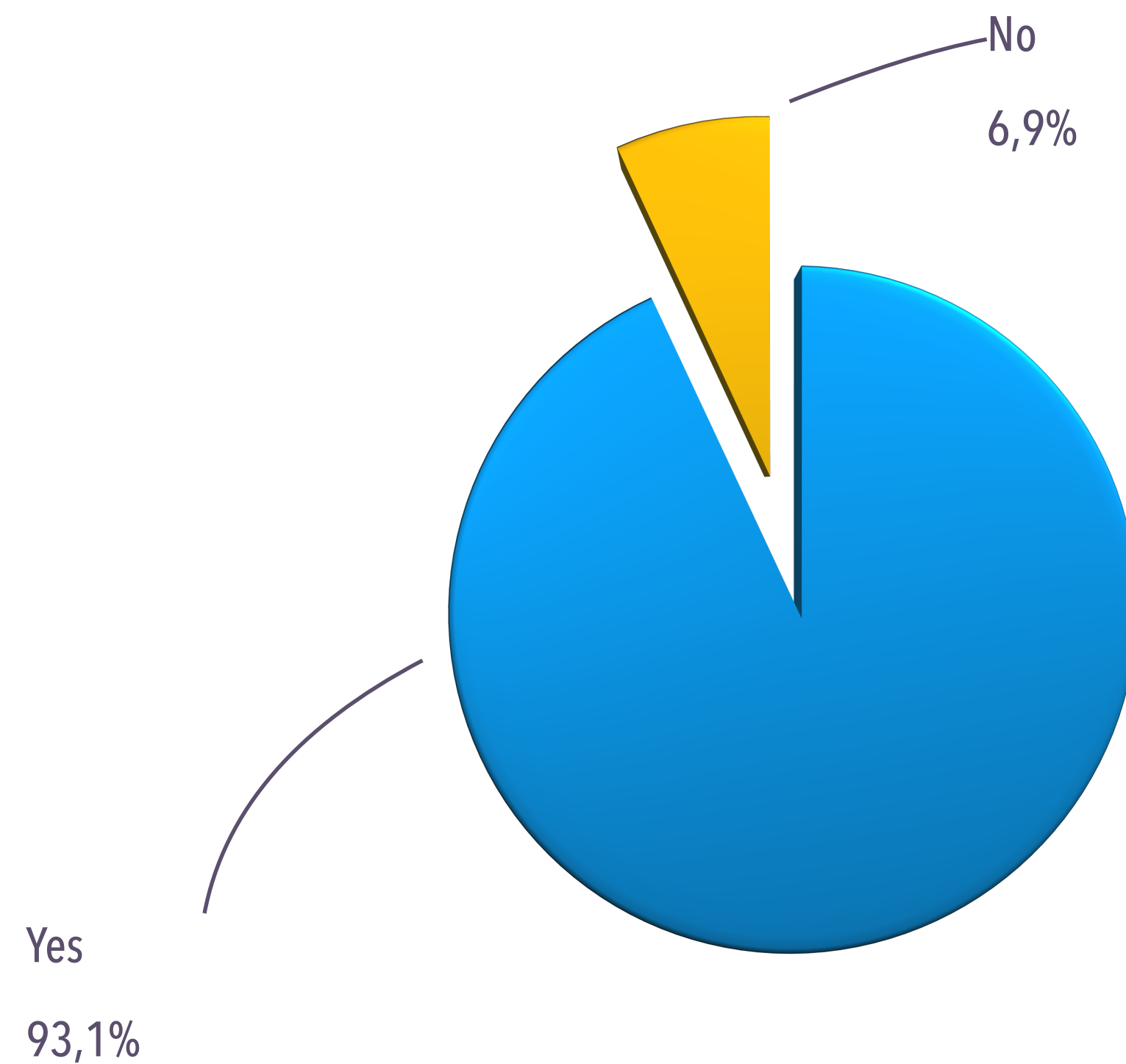
President of the Board of the *Hospice Pomorze Dzieciom* (Pomerania for Children)



In this section medical care was studied, including especially hospital care. An attempt was made to scrutinize respondents' experiences in this area and get an idea of how the issue of empathetic touch is approached during institutional treatment.

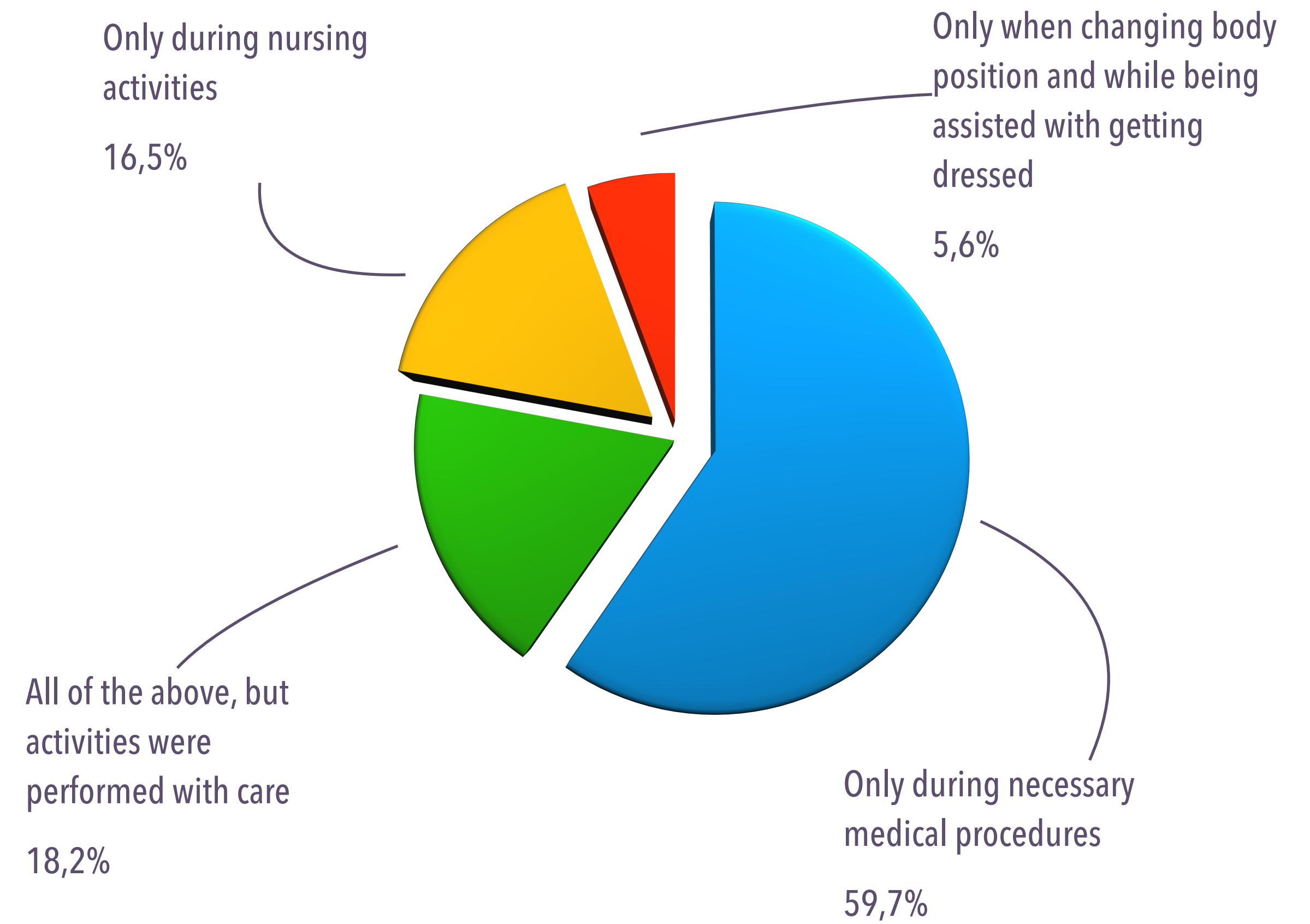


Have you or someone close to you ever been a patient in a hospital?



% of indications - N = 212

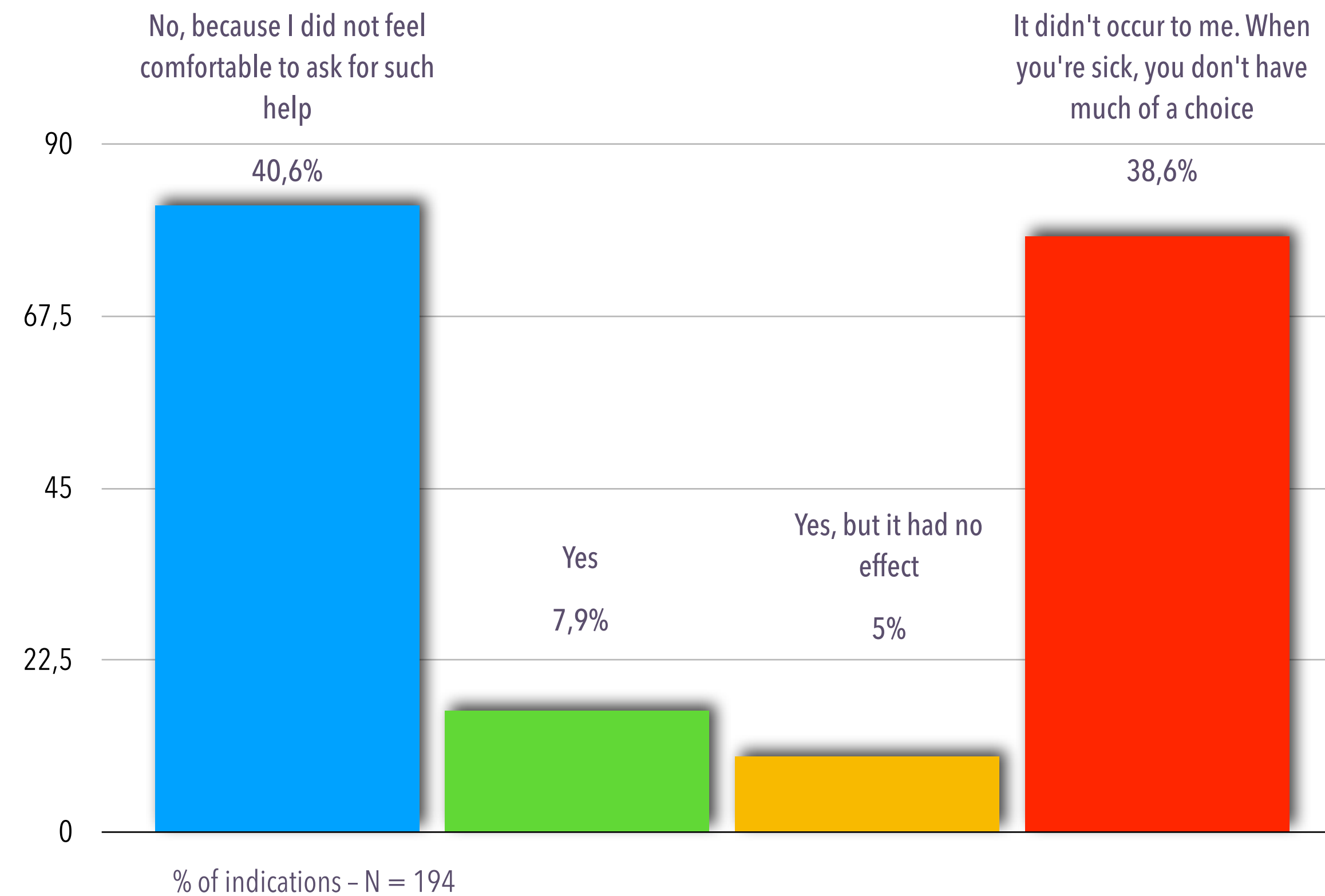
If you answered YES to the previous question, indicate in what situations you experienced touching from medical personnel.



% of indications - N = 212



Have you ever reprimanded someone who took care of you and told them not to do things routinely, but with more sensitivity?



Other answers of the respondents:

- I was not taken care of.
- No, everything was done with great sensitivity.
- I was only in the hospital for diagnostic reasons, I didn't need the touch at that time.
- I was not in such a situation, my experience was positive.
- No, fortunately I received fantastic hospital care.
- No, I don't care about receiving touch from strangers.
- No, I had no such need.

Reprimanding the medical personnel (patients' stories)



01

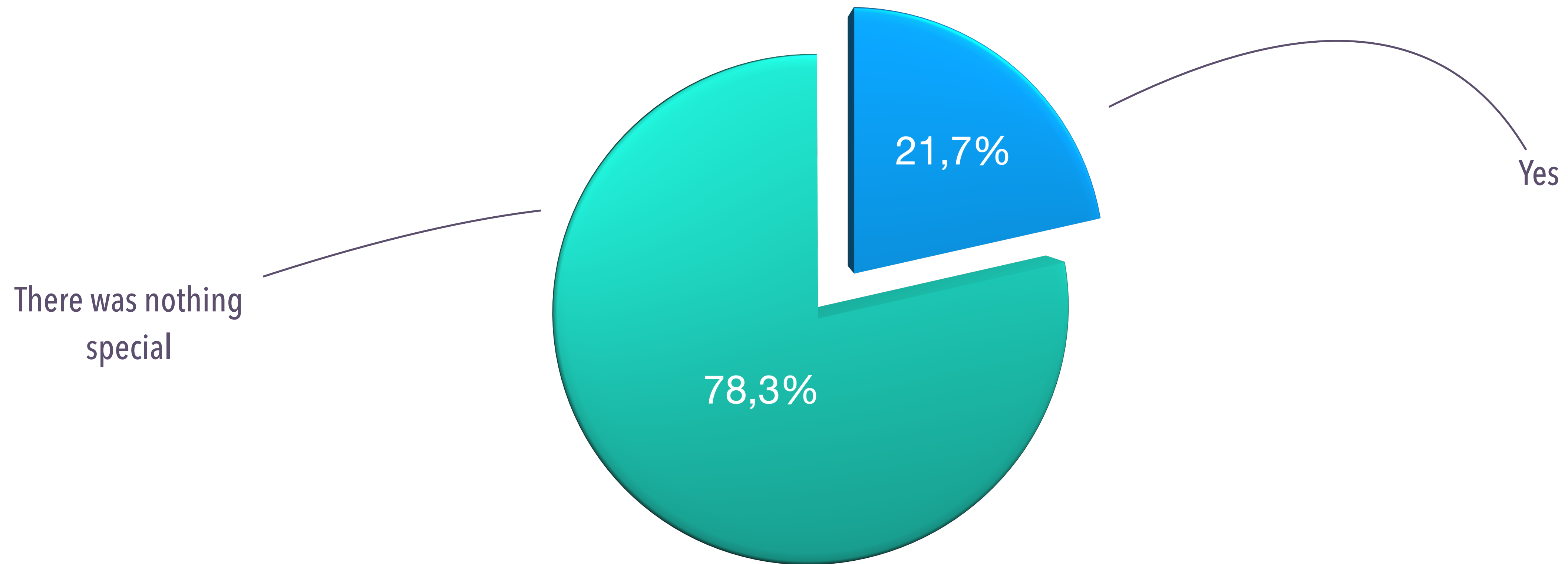
- I once brought this to the attention of the staff at the nursing facility where my dad was. One of the ladies was extremely inconsiderate and approached the patients very harshly. I had the impression that her abrupt movements caused pain to some patients, so I forbade her to touch my dad. As long as this lady had a shift in the room where my dad was staying, I took care of him. That was the only solution.
- It was about correcting a catheter insertion. The first one was very painful. After changing the position of the needle in the vein, the pain stopped.
- In the delivery room at the maternity ward, I asked for more gentleness because the nurse was causing me pain when examining me.
- The lady paid no attention to me, as if I were transparent.
- During my pregnancy, I perceived many procedures as violating my dignity. But I didn't know how to explain that I felt like an object.
- During my child's hearing test, I said to the doctor that it was Hania (my daughter's name), which caused him to stop treating my child objectively. It was an impulsive reaction, but it worked magic [...].



- This situation was not about me, but about my sick grandmother with senile dementia disease. Grandma was lying in the ward after hip surgery. Since no one on the staff was able to feed my grandmother, my mother and I were on duty. During my first visit at lunchtime, when I entered the ward, I heard a woman screaming. I immediately recognized that it was my grandmother, and so I went to the nurses' station on duty. In response to my question, "Are you ladies not bothered by this woman's screams?" I was told not to worry about those screams, because the woman has Alzheimer's and screams like that every day. I answered informing the ladies that it just so happened that the woman was my grandmother and that she only screamed that way when her body needed help. She was at such a stage of illness that she was no longer able to turn around on the bed. Upon entering the room, it became apparent that my grandmother was lying on a broken bed, turned with her operated hip to the mattress, she slipped off the pillow, and with all the weight of her body pushing against her sore hip, which was stuck in the gaps between the bed springs. This may not be the best example, but I believe that here even the simplest mechanical and medical touch was missing. I learned from a patient from an adjoining room that my grandmother had been lying like this since breakfast. Sad.
- After giving birth, I needed help to get to the bathroom. The lady who was helping me dragged me almost down the hallway. I asked her several times to slow down, but she got very angry. And there was no effect, because she kept going too fast. Finally, upset and humiliated, I told this person what I thought of such behavior. There was no reflection on the part of this lady.
- After my abdominal surgery, I was relieved by the roll of blanket I had placed under my knees. The nurse correcting the bedding yanked this blanket out from under my legs, because in her opinion it shouldn't be there. She wasn't interested in the fact that with that kind of support I didn't need painkillers. She preferred to administer painkiller drips rather than listen.
- I had had a C-section and asked the midwife not to press my abdomen so hard during the examination, because it was causing me great pain. She was angry with me for reprimanding her.



Have you ever been staying in a hospital and experienced anything related to touch from the medical personnel that you really enjoyed and remembered as good and important?



% of indications - N = 212



Positive experiences with the touch by medical personnel (patients' stories)

01

DIAGNOSTIC CARE

- At the initial diagnosis, when I cried, the nurse and the doctor held my hand and stroked my back.
- I felt a touch on my hand, a light stroking. It was the doctor informing me that the operation would take place tomorrow, not today. This stroking woke me up, but I felt very important to the doctor and felt a lot of empathy on his part. Although several years have passed, I still remember that feeling. Some time ago I met this doctor during my internship at the hospital and gathered courage to tell him about it. I saw the emotion in his eyes. He hugged me. It was a pleasant experience.

PERINATAL CARE

- In the delivery room, the midwives and nurses stroked me, demonstrated tenderness, dampened my lips when they saw that they were dry, or when I asked. It was 26 years ago and I still remember it. That experience made me feel special.
- After one of the C-sections, the nurse rubbed my feet when the anaesthesia was coming off and I felt like they were freezing, and then she wrapped them in a blanket.



02

- Being stroked on the hand by the anaesthesiologist and the nurse. I was even a little shocked by this affectionate approach.
- I became a mother quite young. During my pregnancy I was on life support due to the risk of premature labor. I was strong, but I hid a lot of fears in my mind. I was concerned about whether the baby would develop lungs to breathe on its own before it was born, and whether my anaemia would affect the baby's development. I read a lot, educated myself. I took hectoliters of injections – painful injections in the buttocks, which were administered quickly, not in accordance with the rules. Then for years I had lumps in my tissue. I carried those painful "stones" on my buttocks. It took a long time to heal. But there was one nurse. She only stroked me once, at night, while administering a series of injections. I don't even remember whether it was on my shoulder or hip. I remember that she did it. And her face is the only thing I still have in front of my eyes to this day at the memory of that long hospitalization.
- After giving birth, caesarean section, the midwife very gently helped me to sit up, stand up, told me to do it slower, more calmly, she took her time, with gentle care helped to put on underwear, washed me.
- It was during my first natural childbirth during the pandemic, when I was alone in the delivery room, without the support of anyone close to me. The midwife who took care of me was tender, stroking me, wiping my face.
- After a miscarriage, when I spent several days in the hospital, only one person, and it was a gynecologist, a man, came to me, sat on the bed, held my hands, stroked my head and just talked. At first I felt awkward and uncomfortable, but this feeling quickly disappeared and I was very grateful to him for what he did.



PERI-OPERATIVE CARE

- When I was about to get up for the first time after the surgery, the nurse touched my feet and put flip-flops on them. When my blood was drawn, the nurse gently touched my veins and examined them carefully, then gently stuck a cotton swab over them. This happened several times.
- Back massage after surgery.
- The nurse stroked my head and said I was a nice boy. I felt nice.
- A few years ago I had some medical procedure in a hospital in England. During that stay, every person (doctor or nurse) who was going to touch me first introduced themselves by name and then explained in detail what they were going to do to me and why, and whether it would be unpleasant or painful. I was forewarned and more or less knew what to expect.
- Gentle touching of the hands during awakening from the anaesthesia.
- On the operating table, just before the surgery, one of the nurses very gently brushed my hair off my forehead and put her hand on my shoulder. I felt fragile and safe.
- The stroking of my cheek by the surgeon who was to operate on me again – just before giving me anaesthesia before another surgery. And then the embrace of another doctor who saw my breakdown the moment I heard that I had to be operated on once again.

03



MEDICAL AND NURSING CARE

- Gently drawing blood, removing a catheter, ensuring injections are not painful, patiently assisting the patient in maintaining an upright position after surgery, gently examining after gynaecology surgery.
- All subtle touches are an important support – also during surgery, or while a dressing is being changed.
- I have noticed a huge difference when someone performs the same actions, even if only purely nursing, medical handling, but with consideration for the human being, and when they do it purely mechanically, as if it were not a living being, but a representative of the species. I also understand that staff have their own issues, are tired, etc. Nevertheless, the difference in perception that the approach makes is huge.
- I experienced comforting from both the nurse and the doctor. Each time it was a touch of the hand or forearm. I felt it as a touch of understanding and support "I know you are suffering". However, this rarely happens.

04



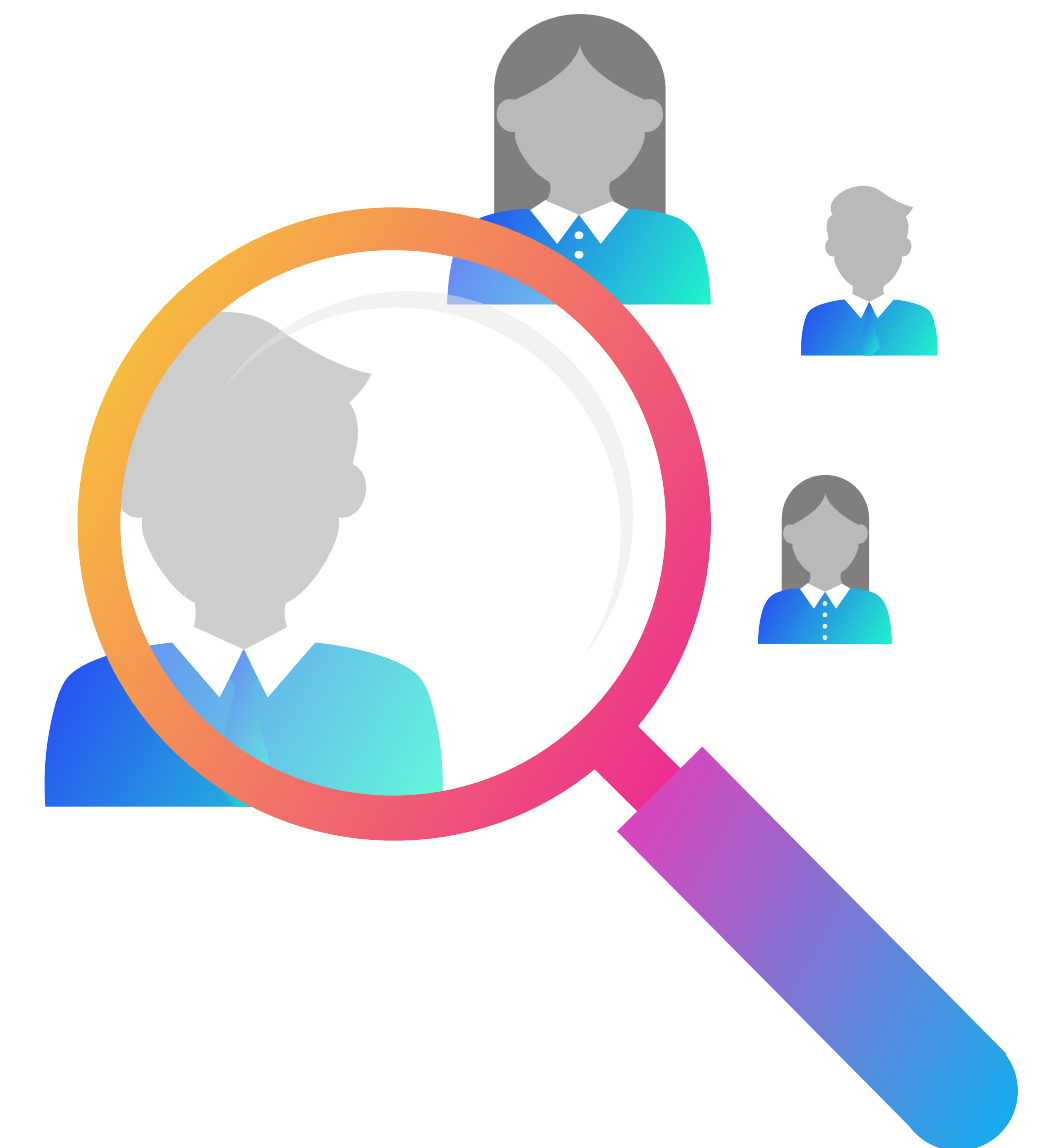
CLOSER LOOK

More than half of the respondents (59.7%) report that, during their hospital stay, they only experienced touching from medical staff when carrying out necessary treatment procedures. Only 12.9% pointed out to someone caring for them that they should perform their duties more sensitively. As for the others, it did not occur to them (38.6%) or they did not feel comfortable enough to ask for gentle approach (40.6%).

Four main types of patients emerge in the answers given: a parent in a care facility, a grandmother with Alzheimer's disease, a pregnant patient, a patient after surgery and a child in a hospital ward.

According to the data collected, the way patients are treated by medical staff does not depend on the type of the patient, their age or gender.

Positive experiences of hospital care using empathetic touch are relatively rare. Only 21.7% of respondents have those.



Empathetic touch should become an integral part of care in hospices, hospitals and nursing homes for seniors



As a psychotherapist with many years of experience with human body, I wholeheartedly support the idea presented in the report of the Institute of Touch and Massage.

The report confirms what I have observed many times in my practice: touch is an essential element of support for patients.

The value of empathetic touch goes beyond the physical benefits - it is first and foremost an expression of humanity, love and care, which are essential to the healing process. Therefore, the promotion and education of empathetic touch is not only needed, but is actually crucial in order to improve the quality of patient care and their treatment experience.

In my therapeutic practice, I often meet patients who are struggling with a variety of physical and psychological problems. Empathetic touch, applied in the right conditions, can provide relief, establish a sense of security and significantly support the healing process.

This is where patients often experience loneliness and isolation, and where touch can act as a bridge, connecting them to their caregivers and loved ones. The report emphasises that touch or gentle massage can be used not only by professionals, but also by those close to the patient, further enhancing the sense of closeness and support.

It is also worth observing that empathetic touch can be an effective communication tool in medical care. Doctors and nurses who introduce elements of gentle massage and empathetic touch into their day-to-day work can build better relationships with their patients, resulting in their better wellbeing and more effective cooperation in the treatment process.

In facilities such as hospices, hospitals or nursing homes for seniors, empathetic touch can become a key element of support that improves patients' quality of life and helps them to better cope with their illness.

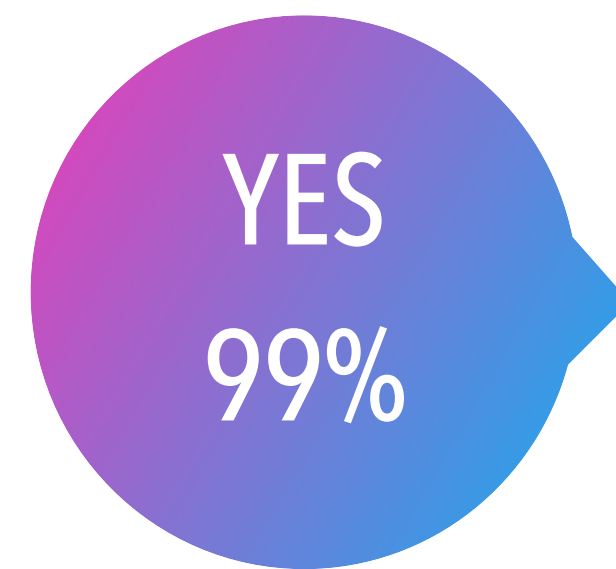
The report is not only an important research document, but also an inspiring guide that can contribute to the greater good and improve the quality of patient care.

Sandra Kłos

Psychotherapist, holistic psychologist, works, among others, according to the Gestalt approach and Somatic Experiencing®, Founder of the Institute *Psyche i Soma*



Do you think empathetic touch /
gentle massage should be
practised in hospices?



Do you think empathetic touch /
gentle massage should be
practised in hospitals?

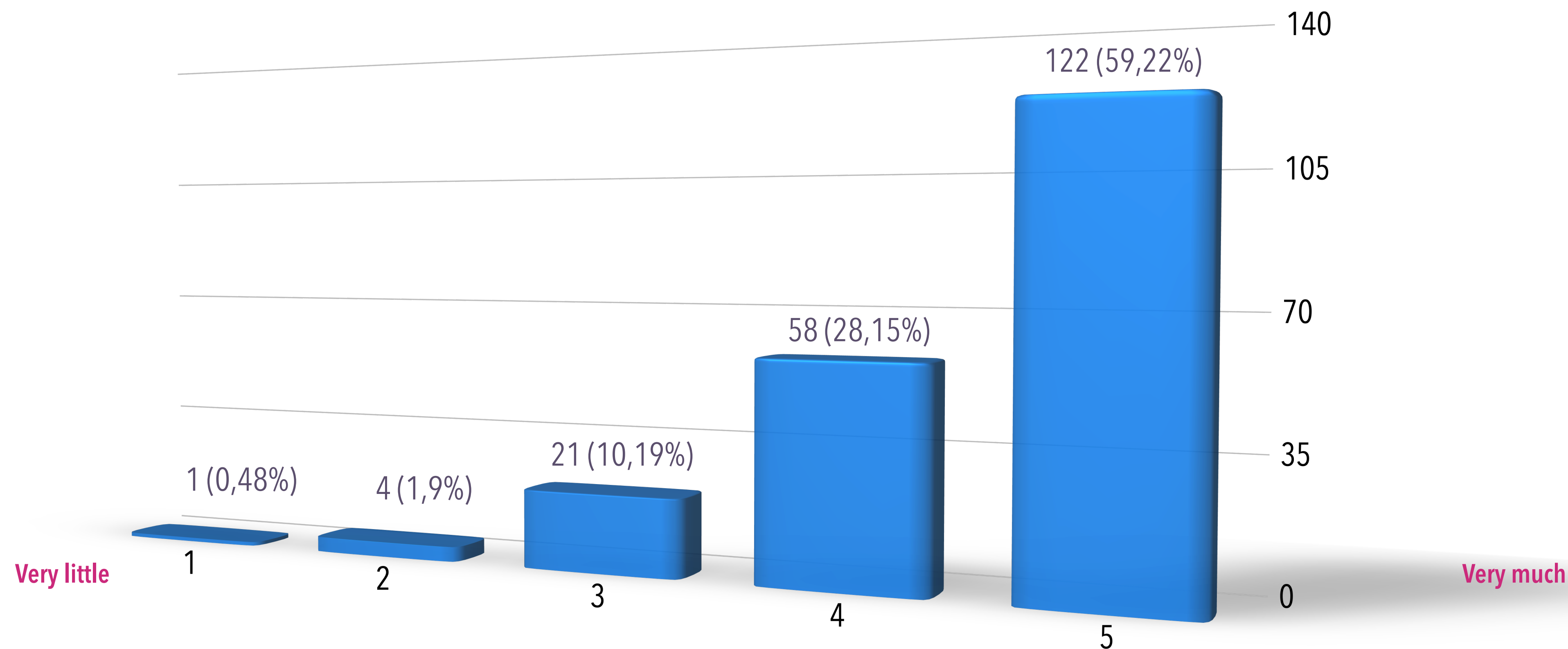


Do you think empathetic touch /
gentle massage should be practised
in nursing homes for seniors?

% of indications - N = 206



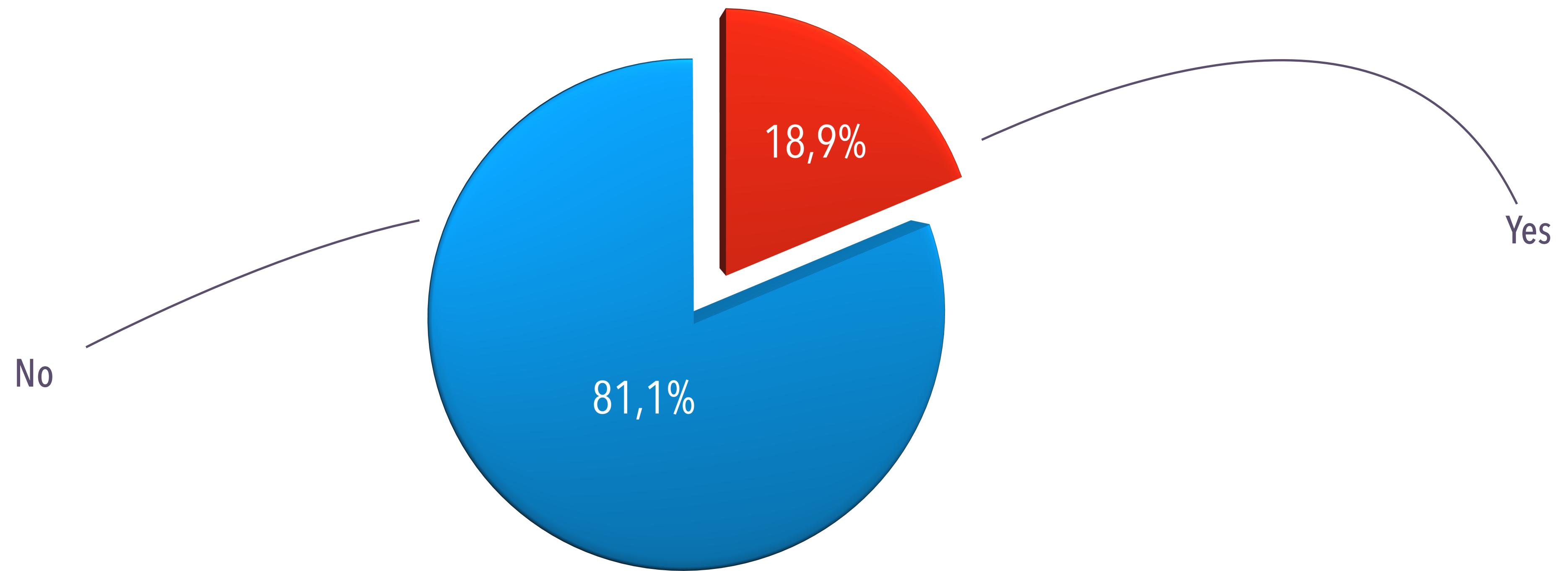
To what extent do you think the use of empathetic massage in a medical facility could contribute to faster patient recovery?



Number of respondents (% of indications) – N = 206



As someone who was / is ill, have you experienced anything negative related to touch / massage during your illness?



% indications - N = 212



Negative experiences with the touch / massage (patients' stories)

EXPERIENCES OF VIOLENCE

- When I was a child, I was forcefully held down so that the doctor could examine me.
- Subjective treatment. Invasion of privacy boundaries without such necessity.
- Pain, jerks, squeezing, no anaesthesia.
- Intermittent touch, too hard, without previous boundary setting.
- After my abdominal operation, there was a medical assessment performed by a committee of three doctors before I was discharged from hospital – conducted in such a way that I felt violated.
- Being held by force, things being done against one's will, being touched in an insensitive and uncaring manner, rudeness, overstepping boundaries – for the psyche, this is torture.
- When I was a child, I was tied to the hospital bed because I cried missing my parents and didn't know what was going on. I was treated as unnecessary burden and an unpleasant chore to be handled. No one dealt with me gently or looked at my pain, neither physical nor psychological. To this day I relive this childhood trauma in medical facilities.

01



AUTOMATIC TREATMENT

- In some situations I felt like an object rather than a subject.
- It was an automatic examining, just to be over with it as quickly as possible.
- Conducting examinations in a routine, painful manner.
- Automatic examination causing pain, great discomfort.
- Mechanical pressing. No emotional contact.
- The touch was quick, insensitive, painful, I felt as absent.
- Instrumental treatment, lack of respect for the body and its boundaries.
- Someone touched me in such a way that I felt I was a problem for someone, a burden.
- I was treated badly, objectively when visiting the dentist with a toothache. My physical boundaries were overstepped during my visit to the doctor as I was told to undress, i.e. take off my bra and stand naked, which was not comfortable for me, I did not feel safe. I also have unpleasant experience of painful and mechanical visits to gynaecologists.
- I was touched hurtfully, with anger, dismissively, many times with disgust painted on faces, especially in the gynaecology and obstetrics wards.

02

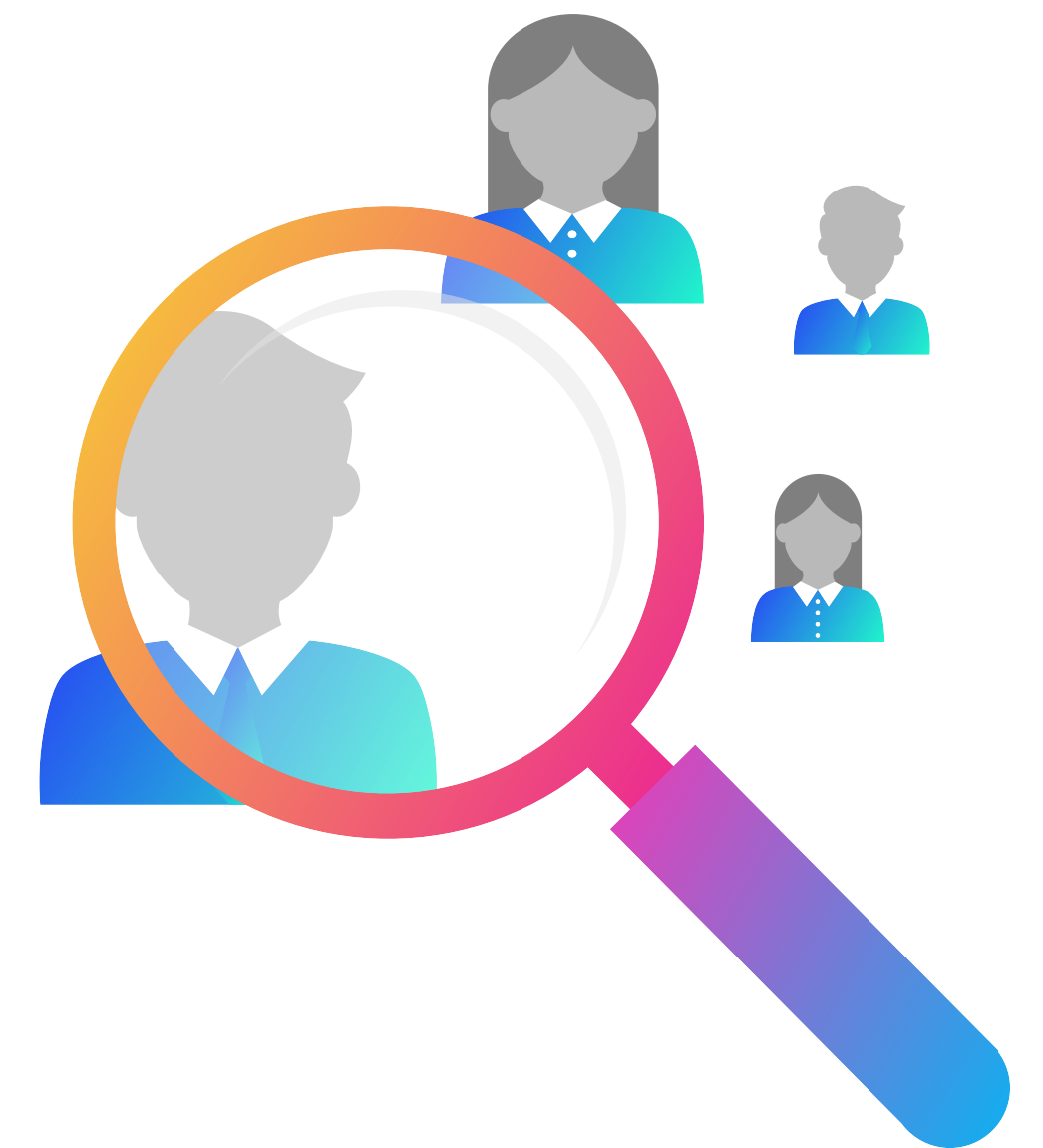


CLOSER LOOK

Almost 80% of respondents are unable to point to any good or important experience related to touch by medical staff. And many patients' stories describe their negative experiences in this regard.

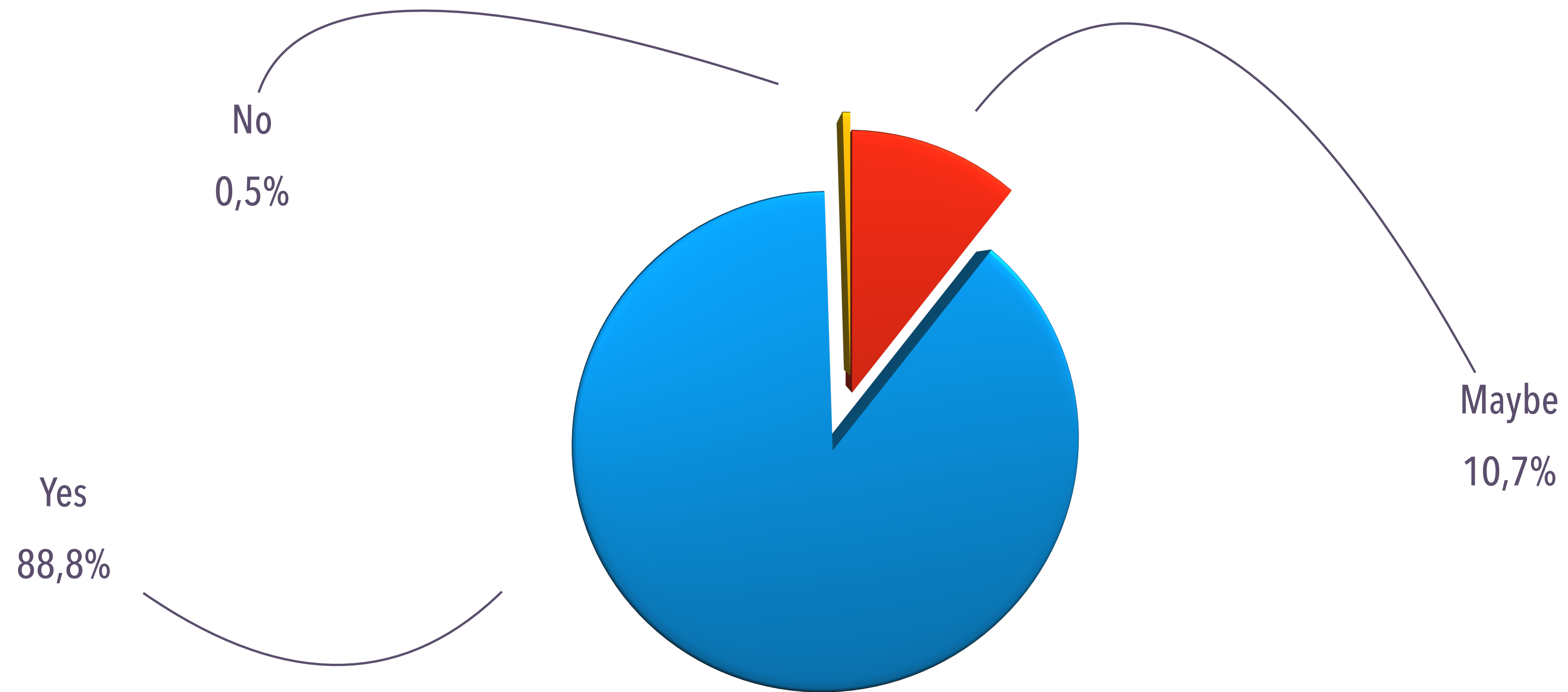
Perhaps the total of the experience would be different if medical staff were educated in soft skills or the empathetic touch was incorporated into medical care as its element.

The vast majority of respondents believe that empathetic touch or massage should be used in hospices (99%), hospitals (94.6%) and nursing homes (99.5%). This is probably based on the opinion that touch in medical facilities could very much contribute to faster recovery of the patient (nearly 60% of respondents say so).





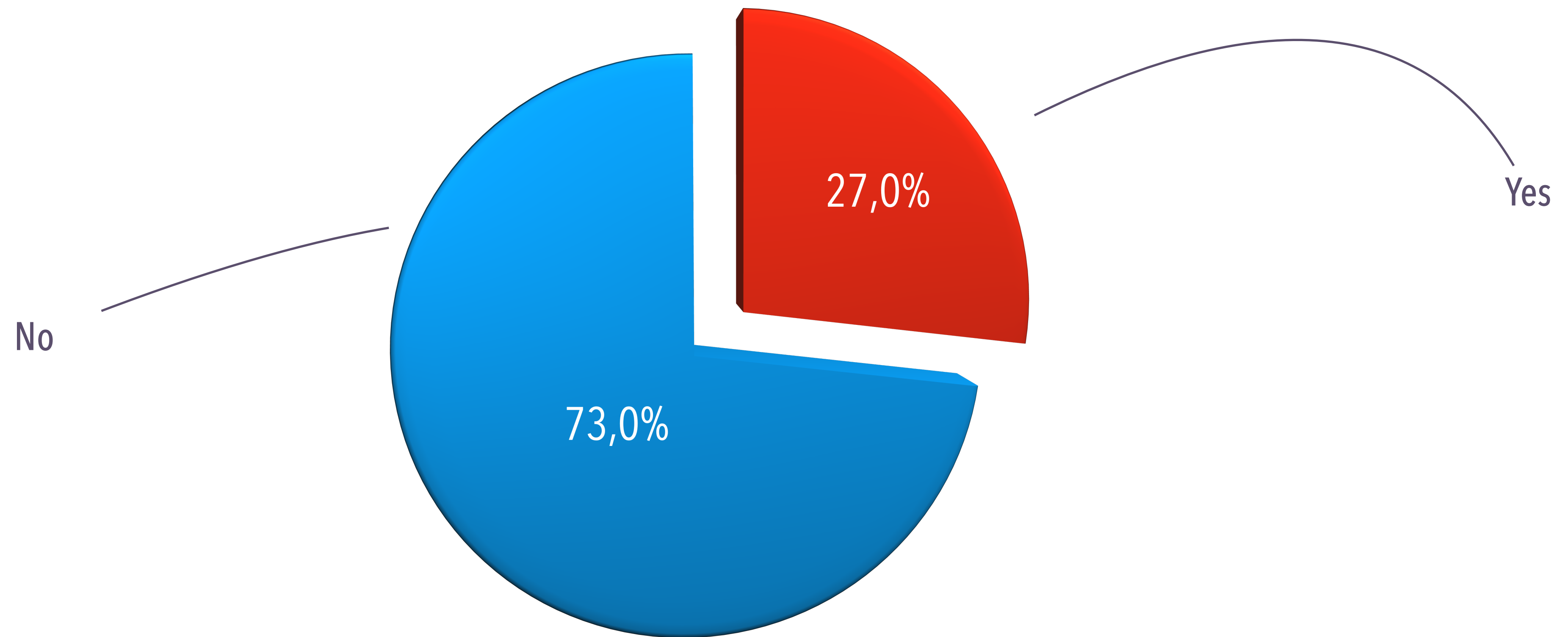
If you knew that empathetic touch/elements of gentle massage could help you get through your time of illness better, increase the quality of everyday life in illness, would you want to receive this form of care?



% of indications - N = 212



Have you ever had any concerns about some gentle massage / touch during your or someone else's illness?



% of indications - N = 212



Patients' concerns about touch / massage during illness

FEAR OF DETERIORATION OF HEALTH

- That this touch/massage will worsen the condition.
- I once heard that people recovering from cancer sometimes should not receive massage, and I had to ask my doctor before I went for a massage.
- That I can hurt a sick person.
- I was afraid that I would hurt someone (partner's back pain). Also, three years ago I had pain in my shoulder, I thought it was a muscle and that it needed to be massaged, so I put my finger where it hurt. It turned out that I had put my finger in the joint where the inflammation was and made things much worse. I've been struggling with this shoulder for three years now and can't get rid of the pain. Although, thanks to yoga, it has been getting better recently.
- When I became aware of the commonly cited contraindications to therapeutic massage, classical massage, even relaxation massage, I feared whether my massage would cause serious harm to the health of loved ones.
- Mum with malignant, ductal, aggressive cancer – prohibition by attending physician.
- I was afraid that the touch might accidentally aggravate an oncological condition.

01



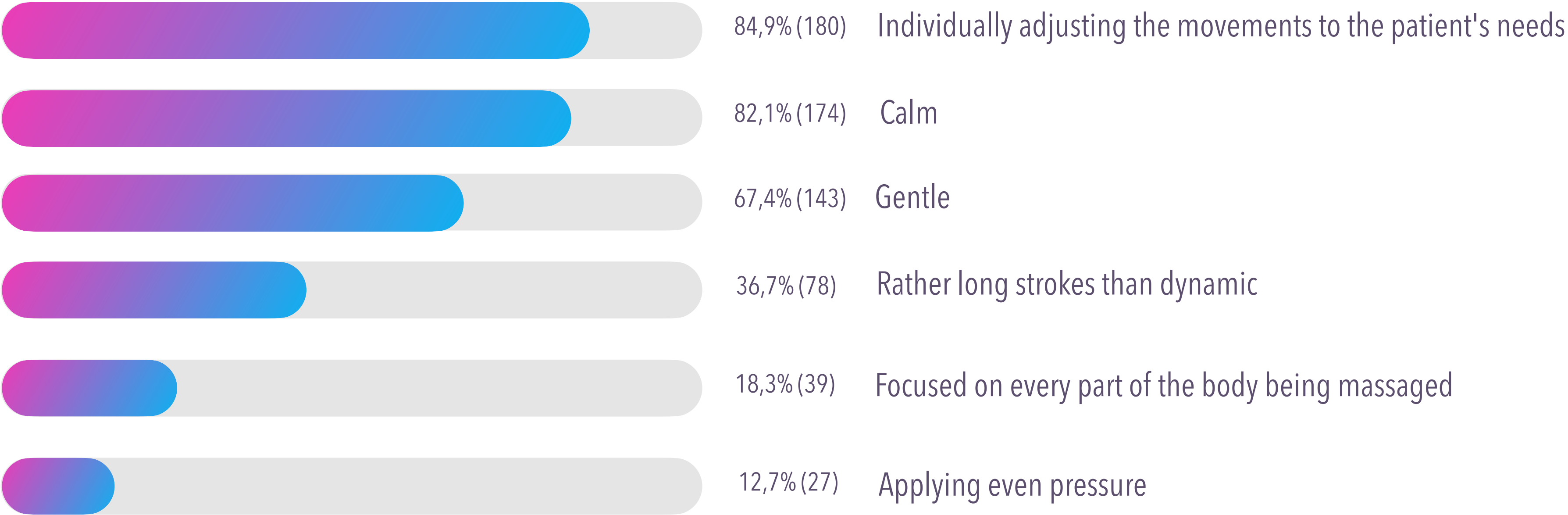
FEAR OF VIOLATING THE PATIENT'S COMFORT ZONE

- The very thought of touch paralysed me. I was very untouchable. I didn't feel comfortable, it invaded my space.
- I am afraid that boundaries will be crossed without prior enquiry and my enthusiastic consent.
- I would not like to upset a sick person. I know it can be unpleasant
- I fear overstepping the boundary of intimacy, and because of the fact that I freeze when a stranger touches me, I consider it a 'procedure', I don't pay attention to my needs, I don't verbalise them.
- I'm afraid that touch will cause me pain, that someone won't want to touch me, that they will violate my boundaries.
- The concern is about the shame of the perception of one's body. Whether or not the person providing the touch is disgusted by the touch.
- With my own illness, my body is more tender, sometimes even a gentle, affectionate touch is a discomfort. My concern is about being able to communicate this while being ill, weak. And that someone else, being ill, can feel the same: discomfort and the difficulty in communicating it. Even at the hairdresser's, it takes me a while to realise that I should say that the water is too hot when washing my hair and that my neck hurts on the hairdresser's sink. Similarly, we can react in a delayed way to taking care of our body's boundaries when we are at a medical specialist's.

02



What qualities do you think the touch / massage comforting during illness should have?



Respondents' own indications:

It depends on the illness and how the person feels. It's impossible to categorise it.
Uncompelled.
Focused on areas where harm certainly cannot be done.
These are very individual issues, foot massage could be widely practised, according to Chinese medicine such massage heals.

% of indications (number of respondents) – N = 212

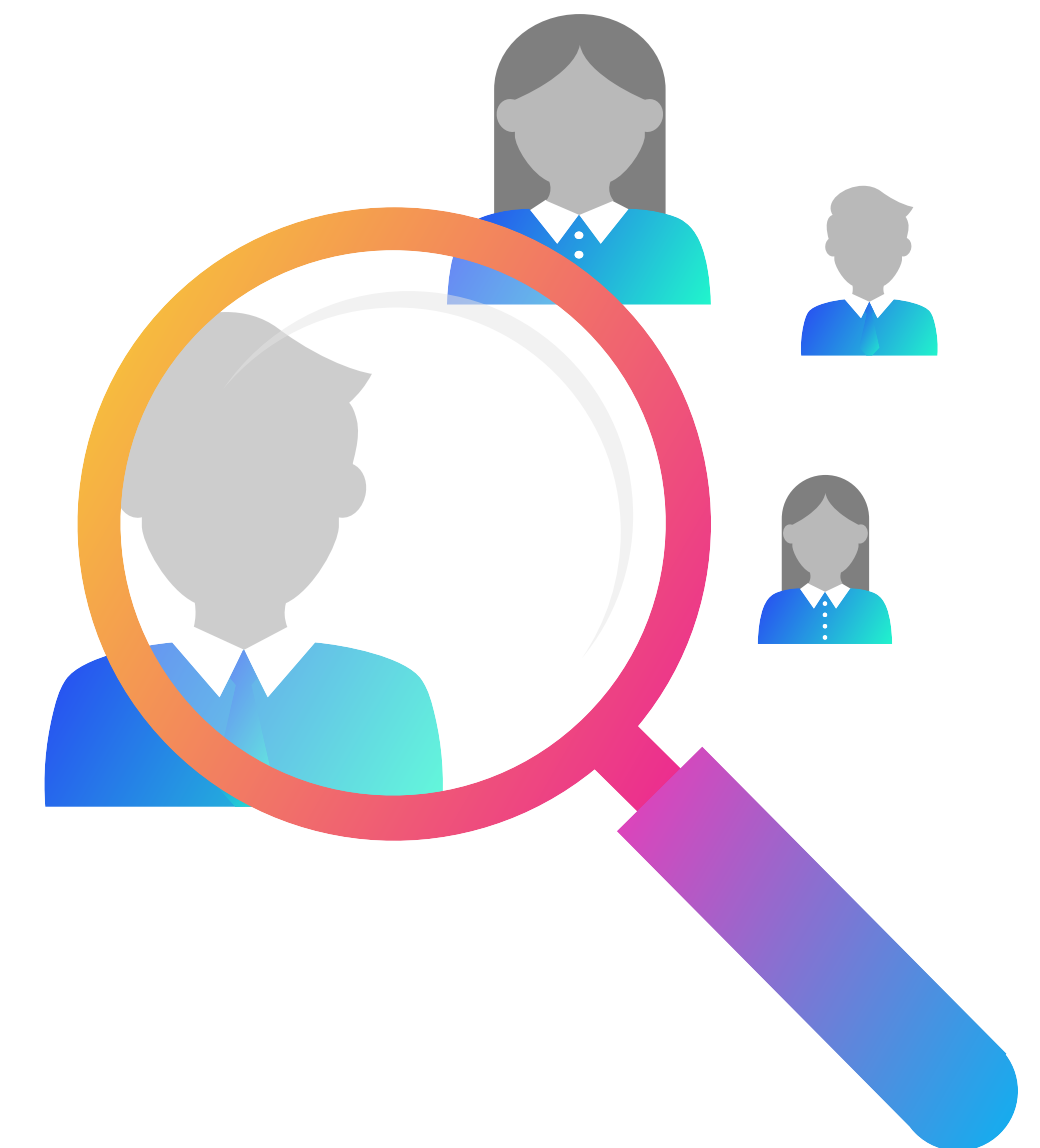


CLOSER LOOK

More than 70% of respondents answered in the negative when asked if they had any concern about gentle massage/touch during their illness. At the same time, almost 90% reported that they would like to receive empathetic touch to help them get through their time of illness better.

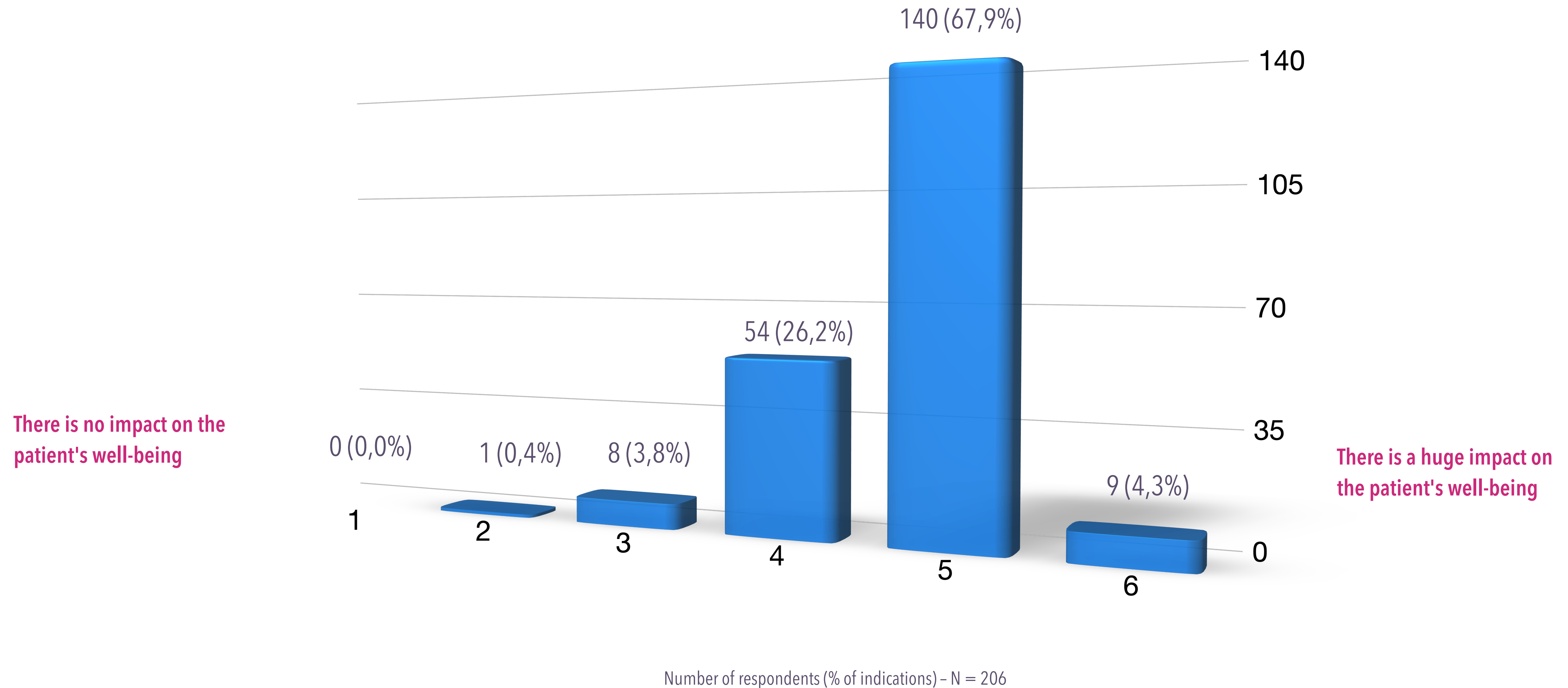
Among the patients' concerns about touch / massage during illness, the fear of worsening their condition and of their comfort zone being violated was predominant.

According to the respondents, an empathetic massage should primarily be based on movements individually tailored to the needs of the patient (84.9%). It is to be calm (82.1%) and gentle (67.4%), performed with long rather than dynamic movements (36.7%).





Assess how empathetic touch / massage can have a therapeutic effect on the patient's emotions and general well-being on the model provided.





According to the respondents, empathetic touch has a very high impact on the patient's emotions and general well-being.

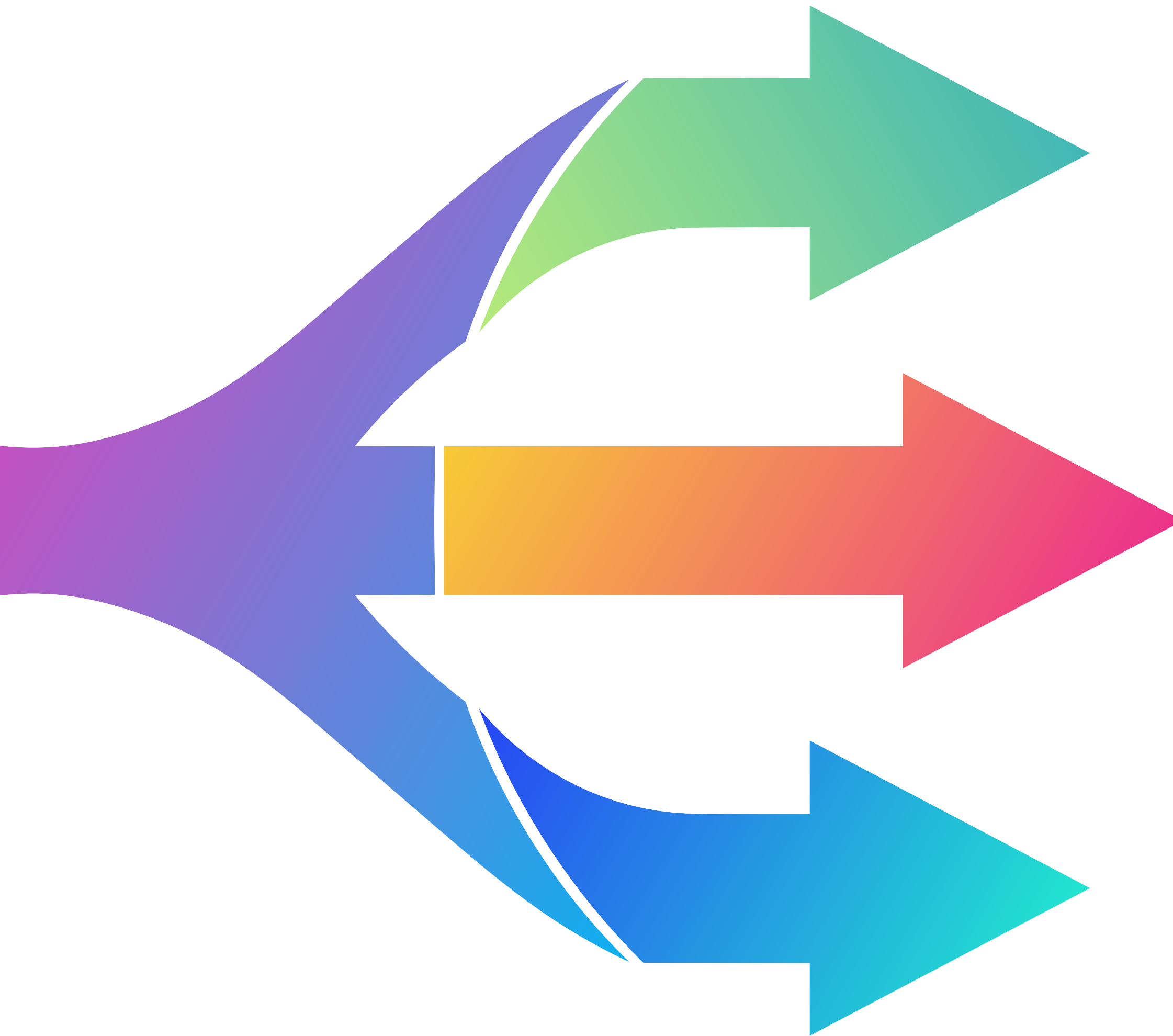


How would respondents advocate to others the need for empathetic touch / massage?

Thanks to the touch, patients can feel that we always love them, whatever their condition.
When we are ill, we are most often as helpless as children, and children like to be looked after.
Helping another human being is the essence of humanity.



How would respondents advocate to others the need for empathetic touch / massage?



Physical health benefits

Gentle massage can help to relieve muscle tension, improve circulation and increase body flexibility. These physical benefits can contribute to the patient's overall wellbeing and support the recovery process.

Forming stronger emotional bonds

Touch is one of the most fundamental ways of developing bonds between people. Providing support through touch can allow to establish a deeper emotional relationship with the patient. This can help to minimise feelings of loneliness and isolation.

Therapeutic effect on mental health

Empathetic touch and gentle massage may provide psychological relief, reducing stress, anxiety and boosting mood. It is a simple, non-invasive form of support that can significantly improve a patient's wellbeing.



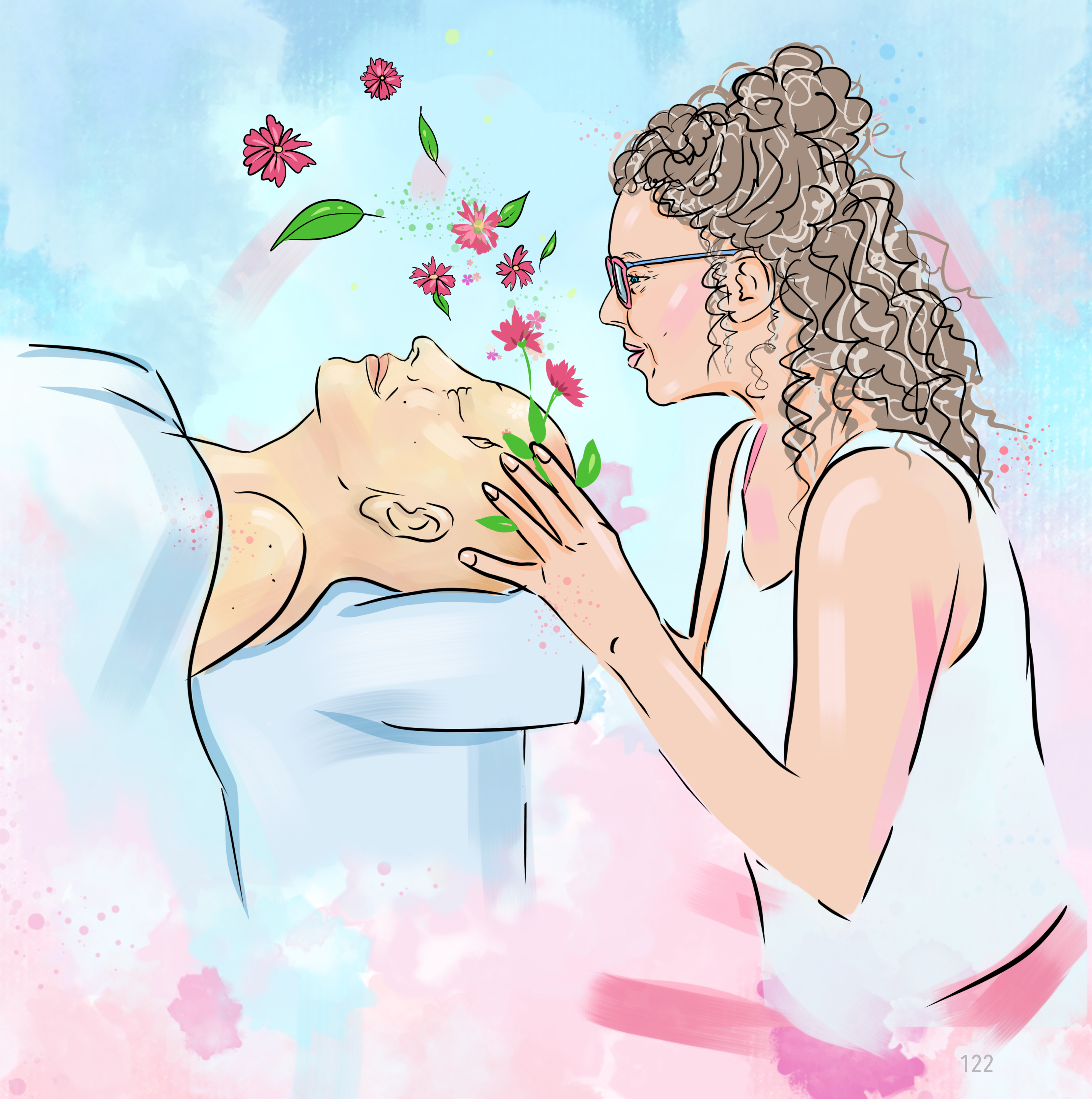
CONCLUSIONS



The way patients are treated by medical staff does not depend on the type of the patient, their age or gender. All of us most often experience touch only during necessary medical procedures while in the hospital.

However, empathetic massage offers a number of benefits: it has an impact on mental health, helps to create a strong bond and brings physical relief. The basket of goods is abundant, and it is certainly worth leaving these goods where some other are missing – in the bodies of sick people.

If respondents were aware that gentle massage helps people get through their time of illness more effectively, they would like to receive this sort of care. Especially since the majority of respondents do not report related concerns and believe that empathetic touch should be practised in hospitals as well as in hospices or nursing homes for seniors.



CONCLUDING REMARKS AND RECOMMENDATIONS

Touch – the forgotten tool in modern medicine



Imagine that you are bed-bound. You are solely dependent on people to feed you, wash you, lift your arm or leg, turn you from one side to another from time to time, if you are lucky, they will even correct your nightgown because it has rolled halfway up your stomach. The only part of your body you can move on your own is your head. You are not touched very often.

Can you feel your feet that haven't touched the ground for so long? Can you feel your flaccid calves? Can you feel anything more than tension in your thighs? You're only touched by the duvet or the blanket or the towel on your chest on a hot day because it keeps you from feeling like you're lying in a puddle of sweat. You have legs, arms, but it is only through the touch of another person that you feel them fully.

Or imagine that your legs are curled up, bent in a strange position, twisted in such a way that you wonder how this is even possible. For certain they are about to break. And yet they don't. You lie there, you can't change position in no way and your debatable comfort depends solely on the anti-decubitus mattress, which sometimes makes annoying noises as it inflates.

I don't have to imagine it, because I witness it several times a week in seniors' homes, Caritas health care centres and residential medical care facilities, where I have been organising a touch-massage voluntary service since January 2024.

My volunteer work is the practical application of everything covered in this report. When I started massaging sick, helpless people six months ago, often reliant only on the bed in which they stay all the time, I never imagined that touch could help them so much.

I felt I knew something, I believed in something indefinite – that's why I started the survey. But what I get to experience several times a week far exceeds my initial assumptions.

Through empathetic touch, the body - which is sick, experiencing pain, loneliness and being forgotten – can be seen and respected regardless of its past. Through empathetic touch, such a body can feel something beyond the illness and beyond the way it was treated before.

Touch does not reject the wound, the pus, the odour, the sores down to the bone, the contractures, the impotence, the shame. Sickness brings along so much hardship, and empathetic touch can not only accommodate this, but also offer solace, softness, gentleness, peace. Sometimes the powerful work of the body is done thanks to the impulse coming from gentle movement.

Touch is being overlooked in increasingly automated, technologically advanced medical procedures. And it is the touch that represents the human side of medicine. I hope that this report will be an invitation to a greater debate about touch as an indispensable tool in modern medicine.

I dream of a world where our loved ones, if they are ill, can be provided not only medical care, but also they can be comforted by touch – full of affection, humanity and carrying relief. We all have the power to share that kind of touch.

Agnieszka Kawula

SYNTHESIS OF THE CONCLUSIONS



- Empathetic touch has a positive effect on both the body and the emotions of the patient. It can be offered by a close person, not necessarily a professional.
- When we comfort with empathetic touch, especially in times of illness, we are not only showing love, attention and care in this way, but also supporting the healing process.
- Respondents understand the need for touch in sickness, but do not analyse it in the category of medical support, but as something natural. During illness, we intuitively sense that empathetic touch is good for us. We look for it, welcome it and remember all manifestations of kind treatment.
- For seriously ill patients, empathetic touch, applied, for example, during daily care routines, helps to reinforce the perception that they are still important to someone, which makes them feel that they are not just an illness or a burden.
- The main concern that stops us from comforting patients with touch or elements of massage is the fear that we will cause them some harm.
- The need to recognise the individual needs of the patient is crucial when offering touch support. If we want to support the sick with empathetic touch, it is important to take care of its quality, the specific conditions and the patient's consent.

SYNTHESIS OF THE CONCLUSIONS



- The inability to give feedback may be one of the reasons for the lack of popularity of the empathetic touch practice in the medical treatment processes.
- We often have a good experience of supportive touch during illness and usually associate it with loved ones.
- The list of body parts where patients are most likely to experience pain is strongly linked to the areas we address during massage.
- Negative experiences of receiving help during a disease are often the result of missing empathy or automatic treatment of patients, as well as a lack of awareness of the importance of empathetic touch.
- We need education about what empathetic touch is and how important it is for patients. If respondents had known that empathetic touch helped to get through the period of sickness in a better way, they would be willing to make use of this type of care.
- In medical facilities, touch is predominantly associated with the performance of medical procedures. Perhaps this state of affairs could be changed by proper training of medical staff and by raising awareness of how important empathetic touch is for patient support.

RECOMMENDATIONS



1. Introducing empathetic touch into the practice of care in hospitals, seniors' homes, hospices, and residential medical care facilities based on a catalogue of principles and techniques taking into account the highest good of the patient and their sense of security.
2. When spreading the idea of supporting the healing process with touch, one cannot be indifferent to the needs of those willing and able to comfort patients in this way. Therefore, it is recommended that training for personnel in empathetic touch is carried out.
3. Communicating the feedback and its skillful interpretation are crucial in the process of supporting the patient with empathetic touch. It is thus recommended that this support is provided by a person who is sensitive to the patient's needs and endeavours to recognise them, even when they are not verbalised.
4. It is recommended that empathetic touch / massage be recognised as an appropriate form of support for patients and that they be allowed to use it as much as possible in their circumstances.
5. The introduction of touch-massage voluntary service in care facilities and appropriate training for volunteers may be a good solution.
6. It is worth creating a public campaign to educate about empathetic touch (including conferences, public debates, documentaries, podcasts, books, interviews, articles in the press and social media content).
7. It may be helpful to create a series of instructional videos to show how loved ones can apply empathetic touch / gentle massage in the daily care of the sick person.
8. It is recommended to continue research dedicated to empathetic touch and to cooperate with foreign research centres that are also working on this issue.

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If you find the information in this report useful and valuable, or you would like to share your experiences of empathetic touch / gentle massage, please email me at: kontakt@agnieszkakawula.pl.

It's important to me what you think and whether you found the survey results helpful or inspiring in any way.