Record Nr.	UNINA9910480502403321
Autore	Hunter Mic
Titolo	The ethical use of touch in psychotherapy [[electronic resource] /] / Mic _Hunter, Jim Struve
Pubbl/distr/stampa	Thousand Oaks, : SAGE, c1998
ISBN	1-322-41852-7 1-4833-2810-4 1-4522-4996-2
Descrizione fisica	1 online resource (322 p.)
Altri autori (Persone)	StruveJim
Disciplina	616.8914
Soggetti	Psychotherapy Touch - Therapeutic use Electronic books.
Lingua di pubblicazione	Inglese
Formato	Materiale a stampa
Livello bibliografico	Monografia
Note generali	Description based upon print version of record.
Nota di bibliografia	Includes bibliographical references (p. 275-287) and index.
Nota di contenuto	Cover; Contents; Preface; Acknowledgments; Part I - Foundations and Historical Background; Chapter 1 - The Physiology of Touch; The Evolution and Mechanics of Skin Sensitivity; The Structure of the Skin; Physiological Responses to Touch; Variations in Touch Perception; Touch as Validation of Reality through Integration with Other Senses; The Relationship of Touch to Memory; Touch and Psychological Development; Summary; Chapter 2 - The Influence of Touch on Socialization; The Language of Touch; Touch as a Tool for Interaction and Exchange The Impact of Touch on Communication and Physical DevelopmentTouch as a Facilitator of Attachment and Affect Development; Touch as a Facilitator of Separation and Individuation; The Impact of Touch Dysfunctions on Child Development; The Relevance of Touch with Older Persons; Summary; Chapter 3 - Traditions of Touch within Various Cultures; Christian and Other Religious Traditions; The Practices of Medicine; Child Rearing; Summary; Chapter 4 - Traditions of Touch in Psychotherapy; Psychoanalysis; Freud; Ferenczi; Reich; Body-Oriented Psychotherapies; Bioenergetics; Adler

1.

	Human Potential MovementBehaviorism; Marriage and Family Therapy; Sex Therapy; Hypnotherapy; Contemporary Factors That Influence Individual Views on the Use of Touch in Psychotherapy; Psychotherapists are Members of the Wider Culture; Touch and Taboo; The Taboo of Touch within Psychotherapy; Despite a Hostile Environment, Touch is Used in Psychotherapy; Our Position on the Use of Touch in Psychotherapy; Recommendations for the Field of Psychotherapy; Recommendations to the Reader; Summary; Part II - Clinical Application of Touch in Psychotherapy Chapter 5 - Power Dynamics That Effect the Use of Touch in TherapyAn Introduction to the Dynamics of Power; Relevant Dimensions of Power; Status/Role Norms; Cultural/Ethnic Norms; Gender Norms; Summary; Chapter 6 - Functions of Touch in Psychotherapy; Factors Influencing the Interpretation of Touch; Sensory Experience; Intention of Touch; Context of Touch; Expectation of Touch; Previous Experience; Possible Negative Effects of Touch; Possible Effects of the Lack of Touch; Possible Positive Effects of Touch; Research Supporting the Ethical Use of Touch; Positive Functions of Touch To Provide Real or Symbolic ContactTo Provide Nurturance; To Facilitate Access to, Exploration of, and Resolution of Emotional Experiences; To Provide Containment; To Restore Touch as a Significant and Healthy Dimension in Relationships; Summary; Chapter 7 - The Dynamics of Touch When Applied in Psychotherapy; Initial Considerations; Touch and the Variability of Meaning; Accidental Touch; Task-Oriented Touch; Attentional Touch; Touch for Greeting and Departure; Referential Touch; Courtesy Touch; Celebratory/Affectional Touch; Emotional/Expressive Touch; Appreciative Touch; Reinforcing Touch Supportive Touch
Sommario/riassunto	Is the bias against touch in psychotherapy justified? Is ethical touch an oxymoron? Can the recovery process be complete without healing touch? Mental health professionals are entrusted with the awesome responsibility of providing appropriate treatment for clients in a safe environment that nurtures trust, a necessary ingredient for optimum movement through the therapeutic process. Though treatment approaches vary, most modalities are verbally based and, in theory, exclude physical contact. Fearing that any form of touch would likely lead to sexual feelings or interaction, clinicians tend to s