



# Boundaries





*“Boundaries mark the limits of behaviours that are acceptable to you, where words or actions beyond that limit cause you harm or make you feel unsafe,”*

Melissa Urban author of  
The Book of Boundaries: Set the Limits that Will Set you Free





*“Peers fill an unusual role in mental health care that renders boundary setting especially nuanced.”*

Recovery's Edge: An Ethnography of Mental Health Care and Moral Agency  
Neely Laurenzo Myers (2015)



# Contents



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# Boundary Ethics



“ Boundary ethics in peer support are particularly complex given that peer support is premised on some degree of mutual sharing and receiving of aid between individuals ... ***challenging notions of concrete boundaries*** that (otherwise) benefit patients in interactions with clinicians who have significant authority.”





“Peers or people trained to lead support programs *drawing on their own recovery journeys* - fill a unique role in the mental healthcare landscape where **boundaries are dynamic, flexible, and especially fraught.**

Peers are vulnerable with others in sharing their experiences and forming deeply meaningful and mutual healing relationships.

Yet (they) must be careful to protect their own well-being by ensuring that others understand the paraprofessional nature of the peer support relationship.”

The **Greek prefix "para-"** indicates *beside* or *side by side* (as in "parallel"); hence, a paraprofessional is one who works *alongside* a professional, while being a professional themselves.





# Tips for maintaining personal and professional boundaries in Therapeutic Relationships

We are not Therapists



## 1. Expectations

Set clear expectations with clients at the **beginning** of the process about:

- what they can expect from you, as the professional
- what you expect from them, as the client.

This includes acceptable behaviours, mutual respect and a **commitment to the therapeutic process**.

## 2. Your role

Be clear about your role and its limits.





### 3. Assertiveness

Be assertive and let clients know if they are behaving inappropriately.

### 4. Clear relationship

Keep your relationship professional. Having both a professional relationship and a personal friendship with a client at the same time can make it difficult to maintain boundaries and a safe and appropriate working environment.

### 5. Personal information

Avoid disclosing your personal information to a client.





## 6. Unnecessary information

Do not seek unnecessary information from the client that is not relevant to the therapeutic process.

## 7. Objectivity

Maintain your objectivity with clients.

## 8. Triggers

Understand how to recognise and manage your own triggers.

## 9. Privacy and confidentiality

Maintain your clients' privacy and confidentiality.

## 10. Critical reflection

Engage in regular critical reflection of your work.





# CODE OF CONDUCT

As Certified Peer Supporters we adhere to the following Code of Conduct:

I will act ethically, according to the values and principles of peer support

I will treat all people with respect and dignity

I will respect human diversity and will foster non-discriminatory activities

I will honour the rights, beliefs and personal values of individuals

I will behave with honesty and integrity in providing support to peers

I will respect the privacy of individuals and maintain confidentiality within the limitations of program policies and the law e.g. potential harm to self or others

I will not knowingly expose a peer to harm

I will not take advantage of the peer relationship for personal benefit, material or financial gain

I will respect the boundaries of peer support work and will not engage in romantic or sexual relationships with the peers that I support

I will not provide peer support in a manner that negatively affects the public's confidence in peer support



Peer Support Canada



In a perfect world, following this Peer Support Code of Conduct to the best of our ability will help us preserve our peer / client relationship ..... along with with appropriate boundaries.



# Boundaries



***In Peer Support services are important because they keep us safe and protect the peer relationship.***

## The Purposes of Boundaries in Peer Services

Self-Care	Peer Growth	Ethics
Better work-life balance	More strengths-based	Better supports confidentiality
Protects us from responsibilities that are not ours	Allows building of skills, confidence, and responsibility	Keeps us in our lane
Protects us from burnout	Encourages finding of appropriate resources	Supports peer supporter's recovery
Maintains and builds our recovery	Empowers individuals to make positive changes	Reduces legal liability and increases ethical compliance



# Boundaries



**"Some" of the boundaries that we as peer support specialists observe to protect our clients - boundaries against:**

- Taking advantage of clients
- Exposing clients to inappropriate material
- Lending or giving money to clients
- Buying clients alcohol or drugs
- Stealing from / accepting gifts or favours
- Becoming a beneficiary of a client's will
- Including clients in our personal activities
- Giving clients our personal contact info
- Seeing clients outside of assigned hours
- Hiring clients to work for us
- Revealing information about clients to anyone but their mental health team
- Inappropriate touching
- Sexual relationships
- Advising, coercing
- Becoming a friend





# Boundaries



***Are there additional boundaries to be concerned about?***





# Boundaries



*Are there ambiguous concerns about any of these boundaries?*





# Setting Boundary Scenarios



## Recovery-Oriented Practice Webinar Series

A Recovery-Oriented Approach to Professional Boundaries

PRESENTED BY

Patricia E. Deegan, PhD.

Pat Deegan suggests that there are indeed ambiguous considerations to be dealt with in peer support boundaries.



# Setting Boundaries

## Scenario 1



Anna has worked with Franco for a year as a Peer Supporter. She has seen Franco make tremendous strides in his recovery and recently attended his graduation with an AA degree from Skyridge Community College. She attended the reception for all graduates following the reception.

At their next appointment, Franco tells her, “I want to thank you for all you’ve done for me. I think you are a beautiful, loving person. And I have to tell you that I’m in love with you. I want to be more than your client. And I think you have feelings for me, too.”



# Setting Boundaries Scenario 1



“Franco, that is not appropriate. You know that I am your Peer Support Worker and there can never be any other type of relationship between us.”





# Setting Boundaries a little more gracefully



“Franco, I have enjoyed working with you and seeing all your success. I am flattered that you would have such strong feelings for me. But here’s the situation: my role is to be a Peer Supporter for you. And that means the relationship we have stays professional.

What I hear is that you are ready for a romantic relationship in your life. That’s something you and I can talk about how to find a person that you can truly love and be with.”





# Setting Boundaries

## Scenario 2



**"I" Statements**

*You haven't done anything wrong by asking but I am not comfortable sharing information about my religion. To me that's part of my private life.*

*(wait, observe and follow-up if necessary)*

"I" statements can help to gently establish personal boundaries rather than brashly declaring a boundary violation.





## Boundary Decisions

In the CommonGround Program, we use an algorithm comprised of five factors that can be applied to help determine professional boundaries that build recovery oriented relationships. Describe a situation you are experiencing (or have experienced) and then walk through the five factors below to help inform your response.

A challenging boundary situation I have experienced  
or am currently experiencing in my work is:

In the situation described above:

Are there Ethical Considerations related to the situation?

- No  
 Yes - Describe:

Are there Role Expectations which influence how you might respond?

- No  
 Yes - Describe:

Are there Clinical Concerns related to the situation?

- No  
 Yes - Describe:

Do I have Personal Limits related to the situation?

- No  
 Yes - Describe:

Are there Client Preferences which should be considered?

- No  
 Yes - Describe:

Based on my answers, what will I do/say?



## Boundary Decisions

Pat Deegan offers an algorithm comprised of 5 factors that can help determine professional boundaries:

- Ethical Considerations
- Role Expectations
- Clinical Concerns
- Personal Limits
- Client Preferences



# Setting Boundaries Scenario 3a



In her video

[https://www.youtube.com/watch?v=QxgargF5\\_NM](https://www.youtube.com/watch?v=QxgargF5_NM)

Pat Deegan takes us through this worksheet with a scenario about a client who asks his peer support worker if they have taken psychiatric drugs.

Are there Ethical Considerations related to this situation?

- Yes
- No

If no, describe:

Have you ever taken psych meds?

- Ethics
- Role expectations
- Clinical concerns
- Personal limits
- Client preferences



# Setting Boundaries Scenario 3a



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Pat Deegan takes us through this worksheet with a scenario about a client who asks his peer support worker if they have taken psychiatric drugs.

Are there Role Expectations which influence how you might respond?

- Yes
- No

If no, describe:

A survey card featuring a photograph of an older man with glasses and a light blue t-shirt. To his right is the question: "Have you ever taken psych meds?". On the right side of the card is a vertical stack of five chevron-shaped boxes, each containing a label: "Ethics" (yellow), "Role expectations" (light green), "Clinical concerns" (green), "Personal limits" (blue), and "Client preferences" (dark blue).



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Are there Clinical Concerns related to this situation?

- Yes
- No

If no, describe:

Have you ever taken psych meds?

- Ethics
- Role expectations
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- Personal limits
- Client preferences



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Do I have Personal Limits related to this situation?

- Yes
- No

If no, describe:

Have you ever taken psych meds?

- Ethics
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Pat Deegan takes us through this worksheet with a scenario about a client who asks his peer support worker if they have taken psychiatric drugs.

Are there Client Preferences which should be considered?

- Yes
- No

If no, describe:

A survey card featuring a photograph of a man with glasses and a light blue t-shirt. To his right is the question 'Have you ever taken psych meds?'. On the far right is a vertical stack of five chevron-shaped boxes, each containing a different category: Ethics (yellow), Role expectations (light green), Clinical concerns (green), Personal limits (blue), and Client preferences (dark blue).



# Setting Boundaries Scenario 3a

A woman with short blonde hair, wearing a dark blue sweater, is smiling and holding a light-colored clipboard. She is positioned in front of a window with a view of a city. The image is overlaid on a video player interface, which includes a small video thumbnail in the top right corner and a title "I Statements" with a horizontal line below it.

*Sure, I am comfortable sharing that I have used psychiatric meds in my life. I don't want to get into the details but in a small way I can relate to your ambivalence about using meds.*

All things considered, Pat determines that it is okay for the peer worker to share that he/she has used psychiatric meds in the past.





An essential role of peer supporters is disclosure of our lived experience of recovery. However, peer supporters don't have to tell fellow staff and peers everything about themselves. We are allowed to keep some things private. Use this worksheet to explore your personal boundaries.

**Step 1:** Review the answer key below.

**Step 2:** Place an "X" next to the response that best describes your level of comfort disclosing on the topics below. Use the open spaces to add additional disclosures specific to you. Then reflect on your responses.

**Step 3:** Create an "I" statement for how you will express this personal boundary to your peer.

*Example: You haven't done anything wrong by asking, but I am not comfortable sharing information about my religion. To me, that's part of my private life.*

**Step 4:** Make a plan.

Remember that personal boundaries change over time. It's a good idea to update this worksheet once a year.

Answer Key				
<b>Prefer not to disclose:</b> I prefer not to disclose this type of information when working with peers. The topic is very private or triggering for me.	<b>Willing to disclose if asked:</b> I am willing to disclose this information with peers if asked, but don't usually share it spontaneously.	<b>Comfortable disclosing:</b> I am usually comfortable disclosing the information with peers and will even volunteer it to them without being asked.	<b>Not applicable:</b> This scenario does not apply to me.	
Identity Related Disclosures				
My gender identity	<input type="checkbox"/> Prefer not to disclose	<input type="checkbox"/> Willing to disclose if asked	<input type="checkbox"/> Comfortable disclosing	<input type="checkbox"/> Not applicable
My sexual orientation	<input type="checkbox"/> Prefer not to disclose	<input type="checkbox"/> Willing to disclose if asked	<input type="checkbox"/> Comfortable disclosing	<input type="checkbox"/> Not applicable
My religious affiliation or spirituality	<input type="checkbox"/> Prefer not to disclose	<input type="checkbox"/> Willing to disclose if asked	<input type="checkbox"/> Comfortable disclosing	<input type="checkbox"/> Not applicable
My political beliefs	<input type="checkbox"/> Prefer not to disclose	<input type="checkbox"/> Willing to disclose if asked	<input type="checkbox"/> Comfortable disclosing	<input type="checkbox"/> Not applicable
	<input type="checkbox"/> Prefer not to disclose	<input type="checkbox"/> Willing to disclose if asked	<input type="checkbox"/> Comfortable disclosing	<input type="checkbox"/> Not applicable
<b>My reflections:</b>				
<b>My "I" Statement:</b>				



Pat Deegan also provides a worksheet on helping to determine your own personal boundaries regarding self-disclosure.

This worksheet provides directions on how to express these limits to your clients and colleagues using "I" statements.



# Recognizing Boundary Violations

## Boundary violations are not always clear:

- They can be insidious and sometimes come in the form of gaslighting or other hard to identify interactions.
- Sometimes we might wonder if we are being dramatic or overly sensitive.
- If something feels off, it may be an indicator that a boundary is being crossed.
- Pay attention to your inner voice, your gut, and the hair on the back of your neck.
- If you would be reluctant to tell your supervisor about it, it is probably not a healthy boundary being set.





# Recognizing Boundary Violations



**Have you ever committed a boundary violation?**

**Did you recognize it as a boundary violation at the time?**

**How did you resolve it .... if you did?**





# Care Boundaries



Care boundaries are a critical aspect of maintaining a healthy balance between caring for others and carrying their emotional weight.

Establishing these boundaries requires self-reflection and sometimes difficult conversations.





Behaviors

Thoughts

Actions

	Unhealthy Not Caring	Healthy Not Caring	Healthy Caring	Unhealthy Caring
Behaviors	Complete detachment, feeling distant or numb, dismissing others, cutting off relationships	Practicing self-care, setting boundaries, emotionally detaching from toxic situations	Showing empathy, accepting others' feelings, empowering others, expressing discomfort appropriately	Compassion fatigue, taking on vicarious trauma, overprotecting, sacrificing too much
Thoughts	"It's not my problem.", "Why should I bother?", "They're overreacting."	"I need to look after myself.", "I can't help everyone.", "It's okay to step back."	"I understand how you feel.", "It's okay to have these feelings.", "You have the strength to handle this."	"I have to save them.", "If I don't help, no one will.", "Their happiness is my responsibility."
Actions	Ignoring requests for help, avoiding contact, refusing to acknowledge someone's struggles	Taking time for oneself, saying no when necessary, avoiding enabling unhealthy behaviors	Active listening, providing resources, encouraging self-help, sharing one's own feelings honestly	Overextending oneself, fixing others' issues, neglecting one's own needs, feeling overwhelmed by others' problems

## Care vs Carrying

Here's a scale from "Gentle Observations" that helps define the extent of our *caring* to ensure it doesn't tip over into *carrying*, which can be detrimental to our well-being.





Behaviors

Thoughts

Actions

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## UnHealthy Caring

Or "**carrying**" can lead to compassion fatigue, vicarious trauma, being over protective, and feeling overwhelmed by others problems.





	Unhealthy Not Caring	Healthy Not Caring	Healthy Caring	Unhealthy Caring
Behaviors	Complete detachment, feeling distant or numb, dismissing others, cutting off relationships	Practicing self-care, setting boundaries, emotionally detaching from toxic situations	Showing empathy, accepting others' feelings, empowering others, expressing discomfort appropriately	Compassion fatigue, taking on vicarious trauma, overprotecting, sacrificing too much
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## Whereas Healthy Caring

reflects a healthy balance between caring too little and caring too much.



# Caring vs Carrying Reflective Questions to ask yourself



- When I think about the person I am helping, do I feel uplifted or weighted down?
- Can I listen to this person's issues without offering solutions or try to fix things?
- What boundaries can I set to ensure that I am not over-extending myself?
- What can I do to step back and give this person space while still being available in a healthy way?

**What are other reflective questions to consider?**



# Dual Relationships



Clinicians in mental health care do not navigate boundaries in the same way as peer workers, whose relationships with clients are notably different and may include interactions with clients outside designated support programs ("dual relationships").

Dual Relationships can be an issue particularly in rural and underserved areas.



# Dual Relationships



**Maybe the only mechanic in your town, becomes one of your clients.**

**Should you buy Girl Guide cookies from the daughter of one of your clients?**

**Perhaps you go to the same AA meeting as one of your clients.**



# Dual Relationships



**Have you ever experienced a dual relationship with a client?**

**What ethics were involved?**

**How did you handle it?**



# Crossed Boundaries



As well as monitoring their own boundaries, Peer Workers need to protect themselves from being manipulated and taken advantage of.

Psychotherapist John Bradshaw breaks down boundary crossings into

- Sexual
- Physical
- Emotional
- Intellectual
- Spiritual





# Crossed Boundaries



**Have you ever had one or more of your boundaries challenged or disrespected?**

**Did you manage to handle the situation to your satisfaction?**

**If not, how could you have handled it differently?**





# Crossed Boundaries



**Prevention:** Be aware of PSW ethical codes and practice guidelines related to your organization. Establish them well with your client at the beginning of the contract.

If you are unsure whether a boundary has been crossed, consult your association's code of ethics and standards and/or your supervisor.

**Act Promptly:** Don't let issues build. If a client makes an inappropriate comment or gesture, say so right away. Document your conversations objectively. For example, state the client's exact words rather than, "Client made sexual innuendo."





# Crossed Boundaries



**Third Party:** If you need to have a difficult conversation with a client, such as when he/she is making sexual advances, consider having another person as part of the conversation.

**Be proactive:** Devise a plan to deal with a boundary crossing such as repeatedly being late for appointments. Establish that the next time the appointment will have to be rescheduled.

**Resolution:** In some cases, you may need to refer the client to another Peer Worker or resource. In cases that affect you emotionally (such as being struck by the client), consider therapy for yourself.





# Crossed Boundaries



Above all, handle communications about boundary crossing issues with calmness and respect for everyone involved.



The more you value  
yourself ... the  
healthier your  
boundaries are



Lorraine Nilon,  
Spirituality, Evolution and Awakened Consciousness:  
Getting Real About Soul Maturity and Spiritual Growth





Rule #1  
Do No Harm





I have included a few handouts about MeerKats to show why I used these images.

MeerKats are totally into togetherness.

Sometimes we may need to take a ***“MeerKat Moment.”***



# Boundaries

A hand is visible on the left side of the frame, with the index finger pointing towards a long, narrow trench that has been dug into the sand. The trench runs horizontally across the middle of the image. The sand is a light brown color and has a slightly grainy texture. The lighting is bright, creating soft shadows.

*Created by Marilyn Galati for the Peer Work Network, September 2024*

*A copy of these slides and contributing resources are posted on the Peer Work Network portion of the [Spotlight for Mental Health](https://spotlightonmentalhealth.com/peer-work-network-resource-list/) website*

*<https://spotlightonmentalhealth.com/peer-work-network-resource-list/>*