

SETTING BOUNDARIES*

▶ ABOUT THIS ACTIVITY

- 🕒 **Time:** 45 minutes
- ➔ **Objectives:** By the end of this session, participants will be able to:
 - Outline the role of the peer educator and limitations;
 - Understand why professional boundaries are needed and useful;
 - Understand when and how to use professional boundaries with colleagues and clients.
- ★ **Training Methods:** Role Play, Large Group Discussion, Dyads, Large Group Discussion
- ✓ **In This Activity You Will...**
 - Demonstrate and conduct “sharing weight demonstration” (10 minutes).
 - Conduct role plays (10 minutes).
 - Facilitate discussion of role plays (15 minutes).
 - Summarize discussion of boundaries (10 minutes).
- ✂ **Materials:**
 - Handout – Skit #1
 - Handout – Skit #2
- 🔪 **Preparation:**
 - Pre-select training participant to conduct the demonstration.
 - Practice the “sharing weight” demonstration with the participant.

Instructions

1. Tell participants that being able to manage their lives is an important skill to have.
 - It is important to take care of ourselves while we are helping others. Also, as peers it’s important we understand that we don’t have all the answers.
 - In this session we’re going to discuss professional boundaries. What are “boundaries”? [**Note: Possible answers include rules, limits, outline of expectations, etc.**]
2. Demonstrate personal boundaries with a “sharing weight demonstration.”
 - Pre-select partner from the group and discuss/practice exercise in advance.
 - Designate a partner A & B for participant pairings.

[Note: The following are instructions on sharing weight to demonstrate where personal boundaries begin and end:]

 - Designate which partner (A/B) will give/share weight. Demonstrate while giving instructions.
 - Adjust so that partners are comfortably aligned and sharing weight equally to start.
 - Face your partner and place the palms of your hands together.
 - Have partners mirror what you demonstrate:
 - A gives weight; B takes weight;
 - A gives weight gently in increments; B takes weight and holds firmly;
 - B pulls back when physical boundaries are violated (too close);

* This module comes from Duke University, Partners in Caring; Center for Creative Education, 2006.

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I had to learn to put up boundaries and stuff because I was at first bringing things home and it was affecting my health.



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- Switch partners; B gives weight; A takes weight...
 - Repeat instructions for sharing weight.
3. Process with the following questions:
- What happened when too much weight was put on a person?
 - When have you ever experienced a time when your physical boundaries were violated?
 - How did it feel?
 - Where do you feel boundary violation in your body?
4. Pair participants and have them do the exercise.
- Invite participants to get a partner and follow along with exercise (optional).
 - Caution peer/participants that these exercises involve shifting weight back and forth, bending and stretching. They should not be undertaken if someone has a physical limitation that might be aggravated by this kind of activity. Watching is a useful way to benefit from this exercise.
5. Process with the following questions:
- How did it feel to take all the weight?
 - What did the person taking the weight notice about his/her ability to stand up?
 - How does this exercise related to the kind of relationships we want to create with our peers?
6. Allow the volunteers to read over the skits and then act them out.
- We will now see two role-plays. I need four volunteers for the skits.
7. At the conclusion of the first skit, ask participants the following questions:

[Note to trainer: Follow the “11 second rule.” Allow 11 seconds of silence for participants to respond to each question.]

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- What did Keith do well in this situation?
- When did Chris overstep Keith's boundaries? Did Keith respond appropriately?
- What other ways can boundaries get set?
- How would you feel as Keith the next time you saw Chris?
- How do you think Chris feels the next time he sees Keith?
- What do you think negative reactions, like not wanting to see or deal with someone like Chris, are telling us? [Possible answers: comfort zone has been crossed; he's trouble—keep away; fear of legal ramifications or job security, etc.] Strong feelings like this are usually a sign that our boundaries have been crossed or our comfort zone has been invaded.

8. At the conclusion of the second skit, ask participants the following questions:

[Note to trainer: Follow the “11 second rule.” Allow 11 seconds of silence for participants to respond to each question.]

- What was different about Skit #2 as compared to Skit #1?
- What were some of the differences?
- What did Keith do well in this scenario?
- Any suggestions for improvement for Keith?
- What other ways can boundaries get set?
- How would you feel as Keith the next time you saw Alyssa?

9. Link to sharing weight demonstration.

- So how do these skits link to the demonstration we saw earlier?

[Note: Allow a few responses. Possible answers include the following:]

- Skit #1 where the peer educator's personal and

professional boundaries are tested by the peer relates to weight sharing (palm-to-palm).

- Skit #2 where the peer educator bends over to take the peer's weight relates to the concept of sharing weight to have a balanced, healthy peer-peer educator relationship.

10. Discuss that boundaries are important for both the peer educator and the peer.

- Why do we need boundaries?

[Potential answers include: personal comfort “we know better than we do” explain concept of aligning our actions with our best intentions, safety, legal issues, professional codes and ethics, so others will know what to expect from us, etc.]

- As a peer educator, both you and your patient will have boundaries. Some boundaries, like those that ensure safety, professionalism or legal issues, will be the same for every peer educator. Setting boundaries helps both people know what to expect. Clear boundaries keep our relationships healthy. Hurt, frustration and anger can actually harm or kill the relationship.

- Boundaries are important for both the peer educator and the client. These should be discussed early on with time allowed to identify boundaries and needs. Conflict in boundaries between a peer educator and client should be negotiated.

- As a peer educator, both you and your patient will have boundaries. Some boundaries will be the same for every peer educator. What do you think some of these are?

[Possible answers include: maintain confidentiality; do not have sex with a client; do not buy, share, or use drugs or alcohol with a client; do not give, lend or borrow money from a client; do not live with a client.

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- Other boundaries are individual but it is important to know the policy of the Institution you are working for when figuring out your own boundaries. What examples can people come up with of personal boundaries?

[Possible answers include: working after work hours; finding acceptable places to meet with a client; giving out the phone or pager number and being clear when calls are appropriate; giving people rides.]

- Sometimes as caregivers, we feel that it is not compassionate or nice to say “NO” to people or to set limits. Setting boundaries is an important way for peer educators and peers to be clear about what to expect.
- Knowing your boundaries also deals with knowing when to refer clients for things such as mental health, adherence counseling, case management or a provider’s care.
- Who do you think peer educators have professional boundaries with and where do we have them?

[Answers include the following:]

Clients – in their homes in public places like human service agencies or if we see them around town;

Peers – other human service providers – in professional setting – at non-professional settings – if you see a colleague in a restaurant;

Doctors, human service administrators – professional settings & non-professional settings.

- When do we use professional boundaries?
[At a client’s home or if you see them in public; at clinics and hospitals, etc.]

- You are a professional, not a friend on a social visit or a casual acquaintance. Know the “protocol” or appropriate behavior when you see a colleague out in public. Discussions using people’s names in front of non-professionals are disrespectful, inappropriate and illegal. Remember the confidentiality form you all signed. This is an example of both the professional code and legal statute.
- These are complicated issues that even seasoned professionals have a hard time with. You may want to talk later with your mentor. The take home message is to understand what some of these “rules” or boundaries as a peer educator are:
 - Empower don’t enable
 - Be clear and honest - Don’t let clients blur boundaries between providers
 - Use direct assertive communication
 - Know your limits – when to refer – where to refer
 - And remember, it’s a job, not your life – don’t take it personally, and remember to take care of yourself first.

Summary

- It is important for peer educators to know the difference between being “friendly” and being a “friend.”
- It is important to know when, where and how to get support and assistance as a peer educator.

* This module is part of the online toolkit Building Blocks to Peer Success. For more information, visit http://www.hdwg.org/peer_center/training_toolkit. This module comes from Duke University, Partners in Caring; Center for Creative Education, 2006.

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SESSION HANDOUT # 1 of 2

SKIT # 1

Keith is a peer educator sitting with his family to celebrate his son's birthday. Enters Chris, an HIV-infected peer.

Chris: What's up? Looks like you're having a party

Keith: We are; pull up a seat and join us.

Chris: Oh I just wanted to come and drop off my phone bill, but I would love to join you.

Keith: Let me introduce you to my family. Bob, Billy this is Chris. He is one of the people Daddy works with.

Chris: Nice to meet you. Hey, do you want to go get some ice cream after this, my treat? If I do not have to pay the phone bill I'll have enough money to splurge a little.

Keith: That is nice but we are going skating after we eat. That is what Billy wanted for his birthday.

Chris: Skating, I would love to go. I am a GREAT skater!

Keith: Ummm. Okay, I guess that will be okay.

That Friday, Keith and Chris set a meeting to discuss his budget. Chris gets to the clinic site late.

Chris: Sorry I am late I overslept.

Keith: I understand, let's get started on this budget. I'll finish what I was working on later.

Chris: I don't know how I can work on a budget. I never know what my expenses are going to be. For example, my car broke down on the way from skating with you the other night; I had to walk two miles. Can I borrow your extra car until I get mine fixed?

Keith: My car? How will I get around?

Chris: Can't your wife bring you to work? What about your co-worker?

Keith: I guess you're right. How thoughtless of me, here are the keys.

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SESSION HANDOUT # 2 of 2

SKIT #2

Keith is a peer educator meeting Alyssa, a new peer for the first time. The case manager has arranged the meeting.

Keith: Hi, I'm Keith the peer educator. We're here today to start the process of working with you as a peer.

Alyssa: Nice to meet you, but I about to leave this office.

Keith: We should plan to meet on Friday, because I know you have been a little overwhelmed today.

Alyssa: I do not have a car and it is hard for me to pay for gas for someone else to bring me here. Can you come to my house instead?

Keith: Of course; many clients prefer that, I work from 8 am until 12 o'clock noon on Fridays. What time do you want me to come?

Alyssa: How long will it take?

Keith: Usually an hour.

Alyssa: Can you come at night?

Keith: No, all of my work is done from 9-5, unless it is an emergency or something I can do on the phone.

Alyssa: Okay, what about 10:00 am.

Keith: That will work for me.

Alyssa: By the way, can you help with my utility payments?

Keith: I can't personally, but I can give you names of many agencies that help with utilities.

Alyssa: What about getting my phone back on? I missed a few payments after I got sick.

Keith: We should probably sit down and make a budget to see what you can do to get yourself back on track.

Alyssa: Thanks, I feel so relieved that I do not have to go through this alone.

Keith: You're not alone; I know that you are a strong person and want to do as much for yourself as possible. I'll be here to give you a little guidance and moral support.