



TODAY'S WORKSHOP

Boundaries Workshop for Volunteers

Toronto HIV/AIDS Network

November 8, 2023

Presented by
John Miller, OODP Consultant

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Handout 01: Key Concepts: Privacy & Confidentiality

(Adapted from content developed by Toronto HIV/AIDS Network)

Privacy

- Privacy refers to an individual's right to be free from intrusion or interference by others. It is a fundamental right in a free and democratic society. Individuals have privacy interests in relation to their bodies, personal information, expressed thoughts and opinions, personal communications with others, and spaces they occupy.
- An important aspect of privacy is the right to control information about oneself. The concept of consent is related to the right to privacy. Privacy is respected if an individual has an opportunity to exercise control over personal information by consenting to, or withholding consent for, the collection, use and/or disclosure of information. (Source: www.pre.ethics.gc.ca)

Confidentiality

- The duty of confidentiality may be a legal or ethical duty. It refers to the obligation of an individual or organization to safeguard entrusted information. The duty of confidentiality includes obligations to protect information from unauthorized access, use, disclosure, modification, loss, or theft. Fulfilling the duty of confidentiality is essential to the trust relationship. (Source: www.pre.ethics.gc.ca)
- However, there are bounds of confidentiality – essentially who is defined in the circle of care. The line should be drawn around the circle of care, not around the individual. Explaining this to a client is also essential to the trust relationship.
- And their *limits and exceptions* to confidentiality, defined by law or by ethics. Explaining those limits and when we may be compelled to breach privacy or where we may choose to do so to prevent harm or death is also essential to the trust relationship.

Exceptions to in Maintaining Confidentiality in Social/Health Service Organizations

- Health and safety of an individual/Risk of serious harm to person or group
 - Child abuse
 - Suicide risk
 - Imminent risk of serious bodily harm or death
 - Medical emergencies
- Compassionate circumstances that aren't about health & safety

- Disclosures to public health authorities
 - Reportable illness.
 - Situations posing public health threats.
- Other legal obligations
 - Subpoenas
 - Search warrants

Privacy & Confidentiality in Policy & Practice

Agencies should require each staff member and volunteer to read and sign a confidentiality agreement. This requirement is routinely included in agency policy and reflected in agency practice and forms.

The confidentiality agreement or form you complete and sign as a volunteer will probably cover numerous types of confidential information as well as various relationships which give rise to duties of confidentiality.

As a volunteer: your duty of confidentiality extends beyond clients' confidential information and includes the agency and its staff and volunteers.

For example, the agreement or form you are asked to sign might state:

Volunteers must maintain privacy and confidentiality of information they gain while volunteering, including information about:

- *Clients and their families*
- *Staff and other volunteers, including Board members.*
- *Agency program decisions, business activities, funding, fundraising, finances, and governance matters*
- *Terms and conditions of agency partnerships*
- *Agency internal policies and procedures*

Volunteers must not disclose any personal or confidential information they receive, either directly or indirectly, during their volunteer duties. Volunteers must not disclose any confidential information even after they are no longer volunteering.

Exceptions would include...

Etc.

Handout 02: The Helper-Client Relationship

What constitutes a healthy helper-client relationship?

The following are key:

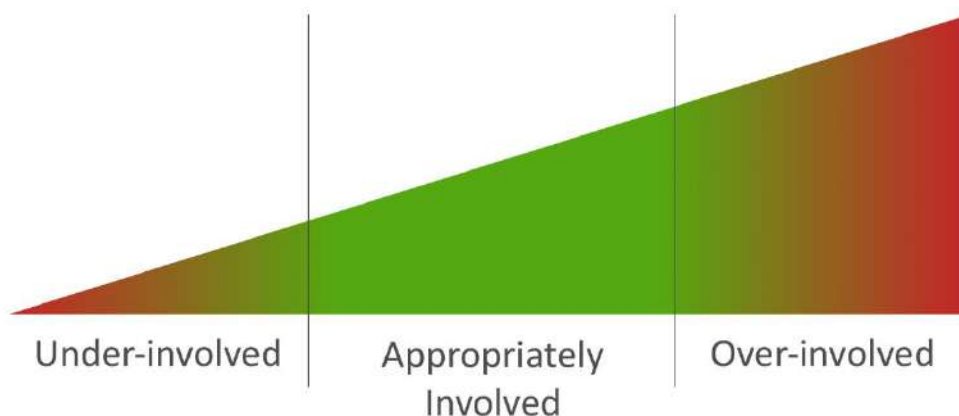
- Maintaining a professional relationship.
- Setting parameters on how services are delivered.
- Being aware of the inherent power imbalance.
- Being aware of your own potential conflict of interest: what are you getting out of helping?
- Being guided by what is in the best interest of the client, while not losing sight of how, ultimately...
 - You need to maintain self-care as the helper; and/ or
 - How your help to one client might affect the organization—in terms of risk, reputation & resource management.

The following can lead to—or are in and of themselves--boundary crossings or violations:

- Being too familiar with a client—emotionally or physically
- Blurring the lines between professional and friend.
- Intimate relationships—sexual or otherwise.
- Sharing personal information or experiences so that clients can relate – if those experiences are not firmly in the past, and resolved for you (otherwise, the client may feel you need support)

Being appropriately involved, ie. In the zone of helpfulness below (or, as Vikki Reynolds refers to it, “The Zone of Fabulousness”)

Being appropriately involved is about figuring out what is neither under-involved or over-involved—and ties back to the “ultimately” part of our key question, “*Is my behaviour appropriate and, ultimately, helpful?*”



Handout 03 - Techniques for Creating & Maintaining Healthy Volunteer-Client Boundaries

(Content developed by THN)

Set clear boundaries with clients from the beginning of your volunteer role:

- Establish clear agreements with the client about your role as a service provider, your availability, and the best ways to communicate with you.
- Establish clear agreements about what to do if you see each other in public. Define the limits of your expertise (for example, clients should not have reason to confuse education about a prescribed HIV regimen with medical advice, or a sympathetic ear with psychotherapy).
- Be clear about the amount of time and energy you can give, especially if you are available to clients outside of normal working hours.
- Advise and periodically remind clients of any program requirements that limit the duration of support.

Address issues as quickly as possible and rely on supervision.

- Consult with your supervisor if you are feeling uncomfortable talking with clients about boundaries.
- When boundary issues or warning signs appear, address these issues with the client quickly.
- Be sensitive to clients' feelings when doing this; emphasize the importance of, and your commitment to maintaining healthy boundaries.
- Use your supervisor as a sounding board, especially when boundary issues are impacting your ability to provide objective, compassionate care.

Be empathetic and patient, and be prepared to repeat and check in.

- Realize that how a client interprets your words and actions might not match what you were trying to communicate:
 - You may need to frequently clarify your role and boundaries.
 - Ask the client to repeat back what you said to ensure that they understand.
 - Give the client an opportunity to ask clarifying questions.
- Dual & multiple relationships:
 - If you had a personal relationship with a client before becoming a volunteer with the agency, realize that you need to use your professional judgment when interacting with the client in social settings.
 - Pay particular attention to the client's confidentiality and their physical and emotional security.

Power, care, and self-care

- Situations in which one person can hold power over the other person must be avoided if possible.
- Remember that you can't (and shouldn't) "do and be everything" for a client: you will not help them if they become dependent on you.
- Take care of yourself! Make sure you are getting enough sleep, eating well, spending time with friends and family, exercising, seeking supervision as needed, and leaving work at work!

Think carefully about self-disclosure to clients.

- If you decide to tell a client something personal about yourself, ensure that the information is related to the client's goals.
- Too much self-disclosure shifts the focus from the client to the volunteer and can confuse the client in terms of roles and expectations of the relationship.

Handout 04: Questions to Ask When Your Radar Beeps

What questions should we ask ourselves if our radar beeps with clients and peers?

- Is this in the client's or peer's best interest?
- Is there a policy that guides this?
- Whose needs are being served? Mine or the client's/ peers?
- Am I benefiting from this situation?
- Am I treating this client or peer differently than others?
- Will this have an impact on the service I am delivering?
- How might this situation be viewed by the client's or peer's family?
- Should I discuss this with another volunteer, a staff, or my organizational supervisor?
- Might this be a liability issue for the agency?
- Is the client or peer drawing me into something that does not feel right?
- If I was the client or peer, would I want this?

What questions should we ask ourselves if our radar beeps with fellow volunteers?

- Does this situation feel right?
- Is there a policy that guides this?
- Am I being treated fairly?
- Am I benefiting from this situation?
- Will this have an impact on the service or task I am delivering?
- How might this situation be viewed by other volunteers, by staff or by people outside the agency?
- Should I discuss this with a fellow volunteer, or my staff supervisor?
- Might this be a liability issue for the agency?

Handout 05: Resources to Help You & Your Organization Manage Boundaries

The following resources are available to help your organization manage boundaries.

Internal

- Volunteer job description
- Your Supervisor/ Manager of Volunteers
- Policies & procedures

External

- Further training (Note that a version of this training is also available for Board Members)
- OODP individualized consults in more serious situations—or to develop policy – oodp.ca.
- Provincial legislation
- Federal legislation
- Professional guidelines
- Ethics-based tools and guidance - www.careworkerethics.org will take you to a free decision-making tool, and orientation slides in English or French.

Slides with Presenters Notes



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What we offer...



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For those new to the sector – who may not be familiar with our organization....

- established 1995
- Government response to ASO requests for long term organizational development (OD) support

Mission:

- strengthen the capacity of ASOs and HIV-funded programs in Ontario to determine direction with awareness.
- Foster a culture to take responsibility for their own organizational development.

For complete description – visit website at www.oodp.ca Snapshot:

- Workshops (Governance, Boundaries, ARAO, GIPA/MIPA, etc.)
- Planning (Strategic Planning, Annual Work Plans Staff and Board)

Introductions

In the chat window, please type the following:

- Your name and organization
- What is/ will be your volunteer role?
- If you're a volunteer coordinator, please indicate that.
- One thing you hope to get from the training.



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- Coaching – • and Board Chairs
- Individualized Consult Requests

Now let's move on to Facilitator note:

- Make some observations and read a few examples of what people hope to get from the training.

Introduction ✓

Let's Talk About Boundaries



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This is the question we want you to take away from today's workshop, if you remember nothing else:

Always ask yourself: "Is my behaviour appropriate?" And "Is my behaviour ultimately going to be helpful – not just in the moment, but in the future."

And will it be helpful to to the organization, to its clients, and to me? The challenge with boundaries is that we must think of all three at the same time.

Implied in the question is what to do if the answer is no, or if you're unsure, which is to manage your response to the situation, and get help in managing the response when necessary.

bound·ary.
(in human relations)

Something that defines limits in personal or professional behaviour and relationships.



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Why Are Boundaries Important?

(please type an answer in the chat)



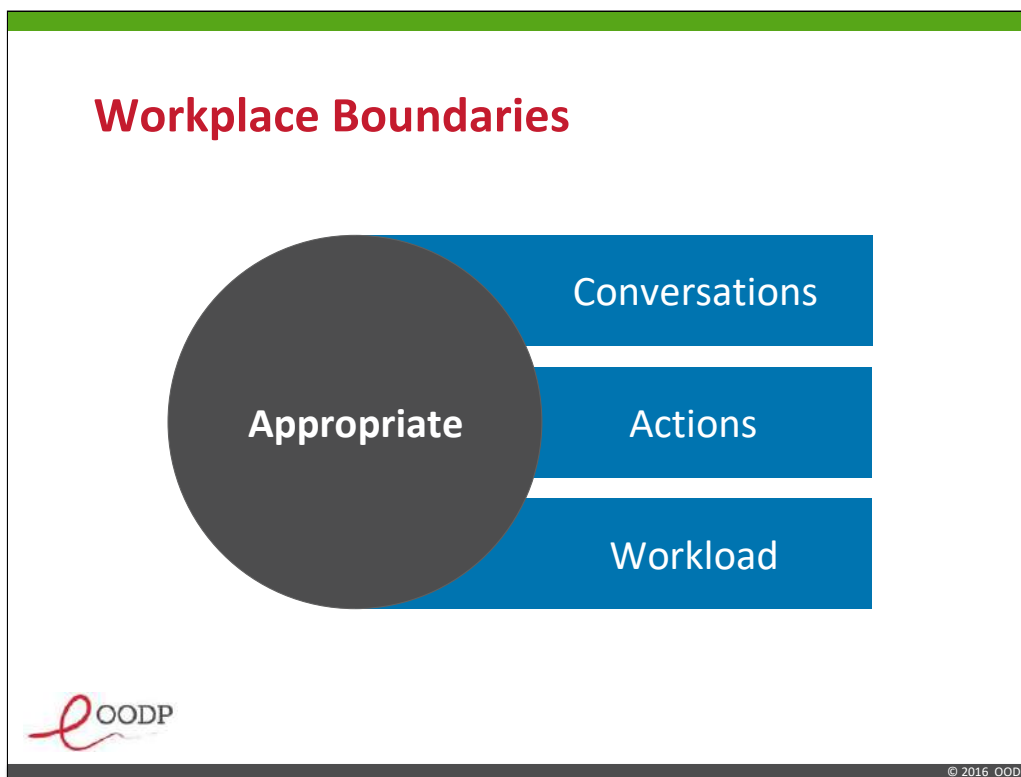
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Why Are Boundaries Important?

Because they help to prevent complications arising from conflicting roles or expectations.



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What do we mean when we say “appropriate”?

Here, we’re talking about three things:

1. **CONVERSATIONS:** Putting limits on what we talk about and with whom so that it doesn’t complicate relationships, cause offence or cause harm
 - a. As staff, volunteers, and Board members
 - b. e.g., inappropriate sharing and disclosure
2. **ACTIONS:** Putting limits on our behaviour to make sure it’s appropriate to our role(s) and doesn’t cause harm
 - a. For employees, volunteers, and Board members
 - b. an example of inappropriate behaviour would be sleeping with a client.
3. **WORKLOAD:** Putting limits on our workload, and on requests or complaints from staff, volunteers, or clients to better serve clients as an organization; and
 - a. to reduce our stress level
 - b. e.g., improve our ability to say no, or to redirect requests when appropriate

Develop Your Boundary Radar



Radar by Pantelis Glavos from the Scan Project

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BUT FIRST, we need develop and fine-tune our boundary radar—the radar we use to detect and hopefully avoid problems that can arise from boundary situations.

Develop Your Boundary Radar

Three steps towards improving your ability.
to respond appropriately:

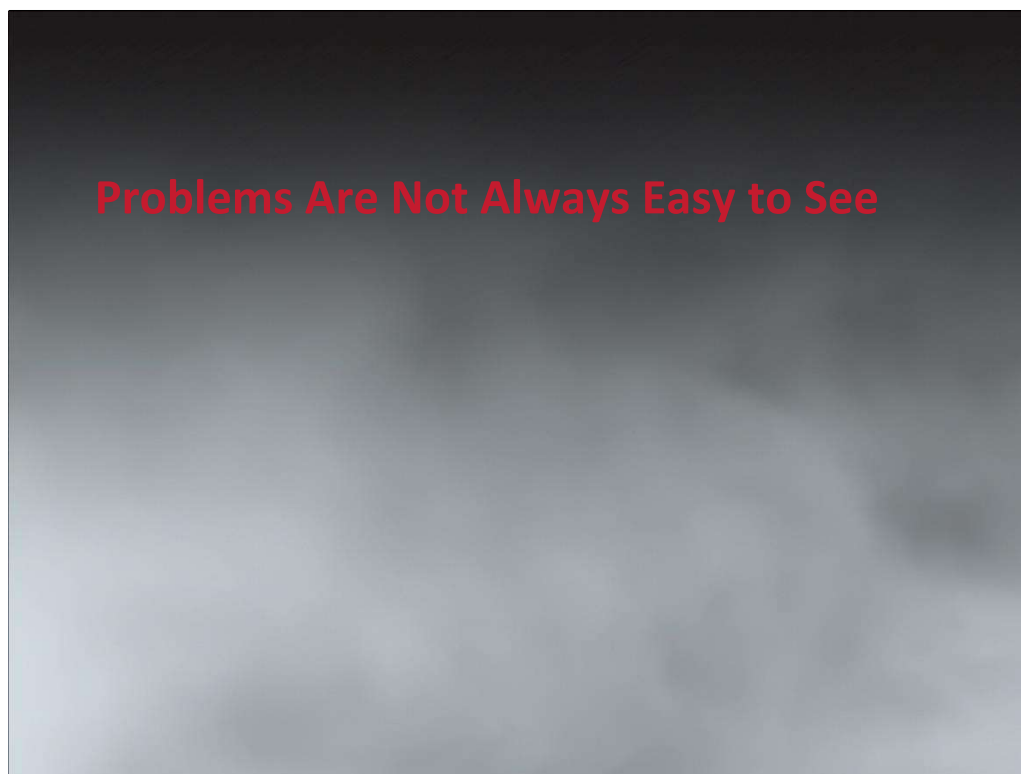
1. Become situationally aware.
2. Assess what can or did go wrong.
3. Consider possible responses.
(If the answer is not clear, ask someone)



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There are three steps towards improving your ability to respond appropriately to boundary situations:

1. Becoming situationally aware.
2. Assessing what can go wrong.
3. Considering possible responses (and asking someone if the answer isn't clear)



Becoming situationally aware is hard. Problems are not always easy to see.

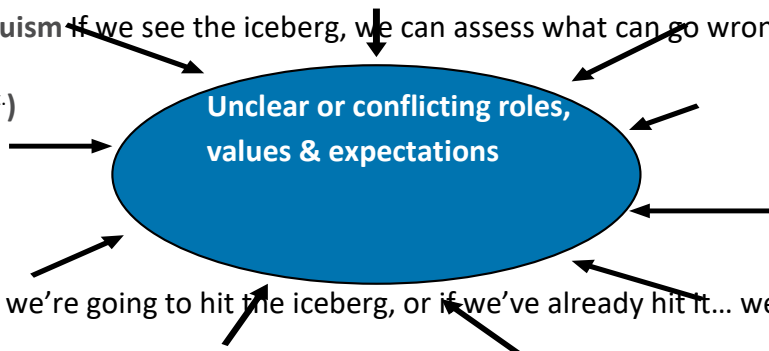
Not maintaining Helper's own established conventions **Insufficient training, guidelines, emotional/dependency needs**

We need to cut through the fog with our Boundary Radar... **policies, supervision**

When we do, we see... There may be an iceberg.

Wanting to self-disclose Altruism If we see the iceberg, we can assess what can go wrong, and start to think about what.

(Caring too much to do about it.)



If it's too late, and we're going to hit the iceberg, or if we've already hit it... well, we

Are seeking personal need to figure out how to manage the situation more aggressively.

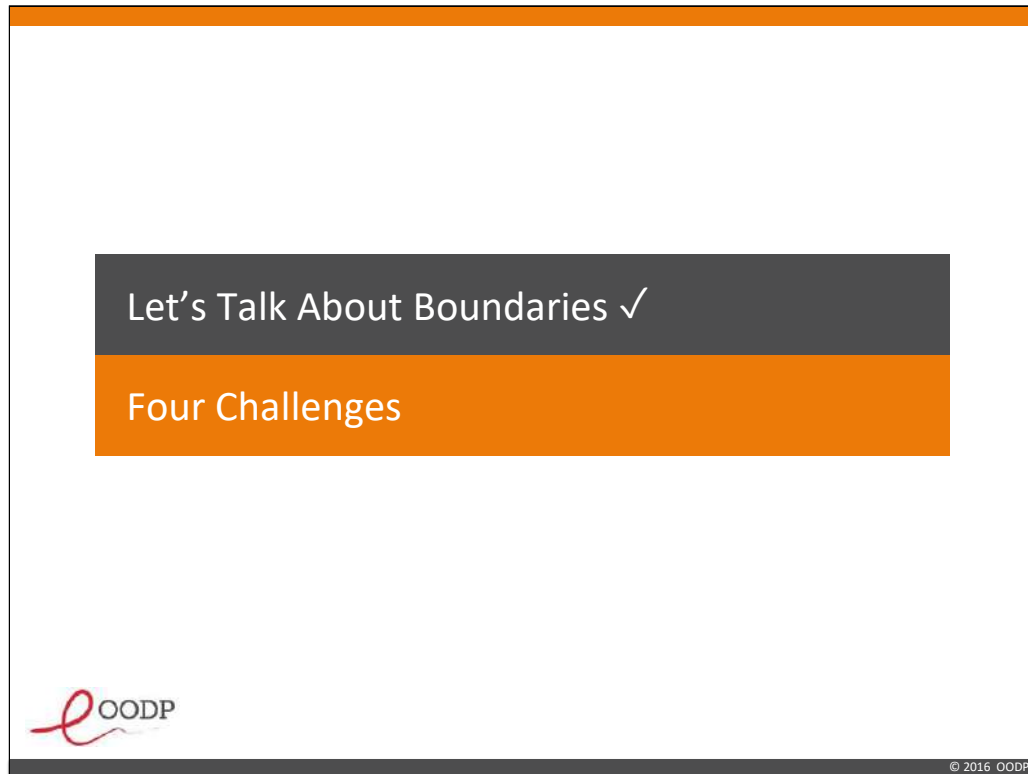
benefit

Unclear expectations about Information
Perceived conflict sharing confidential
of interest.

Unavoidable or unanticipated
circumstances

Wanting to be generous or
accept generosity (giving or
receiving gifts)

So, we come back to our guiding question.

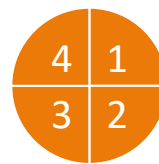


We're getting closer to being able to tell: Is my behaviour appropriate and, ultimately, helpful?

We've now defined what a boundary is and talked about the need to develop our boundary radar.

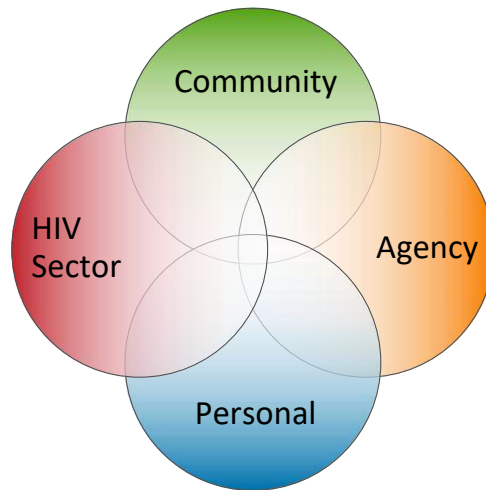
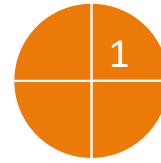
Now, to improve our ability to identify boundary situations and to respond to them, we're going to discuss four challenges to maintaining boundaries.

Four Challenges To Maintaining Boundaries



1. Intersecting values and cultures
2. Multiple, conflicting, or unclear roles
3. The helper-client relationship
4. Protecting and sharing information

Challenge #1: Intersecting Values And Culture



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Challenge #1 is Intersecting values and culture.

As volunteers, we must manage the competing and overlapping values and cultures of

- The community in which we work.
- Our agency.
- The HIV sector; and
- Our own personal values and preferences, which are different for each of us.

We're going to leave our personal values and preferences aside for now, because they're the focus of a few exercises we'll be coming to shortly.

There may be a lot of commonalities between community, agency and the HIV sector's values and culture, but it's the tensions between these three that make it difficult to manage boundaries.

Who can identify some of these tensions – and why they may pose problems?

Preparatory Exercise #1: What We Say And Hear



Objectives:

1. To explore our boundaries around conversations in our volunteer role.
2. To discuss appropriate limits.

	your relationships / dates (past/present)	your sex life or... how you are not in a relationship with you were dating	your children or... the fact that you're not getting any sex	your drug or alcohol use or recovery	your opinions about their drug or alcohol use or recovery	your sexual orientation	your workplace	the identity of your boss, clients/ clients or others, including in relation to HIV	your political beliefs	your religious beliefs	your religious practices	board performance - your own performance or someone else's	grief and loss - to your life	telling "soft" colour jokes (including sexual/ sexualized jokes) or playing practical jokes
WITH WHOM:														
With/ to my fellow board members														
With/ to my board chair														
With/ to agency volunteers														
With/ to agency staff														
With/ to service users														



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Our first exercise, which you will have completed in advance, is called “What We Say and Hear” and it’s one that each of you was to have completed before arriving at today’s workshop.

The objectives were to:

1. To explore our boundaries around conversations; and
2. To discuss appropriate limits.

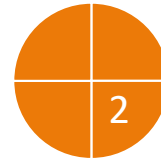
This exercise brings us to the fourth circle from a few slides back, which is about our personal values and preferences.

The document looks like this image.

Please bring it out and **TYPE ONE REFLECTION on the exercise into the chat.**

Then, for those who are willing to share, let’s briefly discuss the kinds of answers you gave in the exercise -- and why.

Challenge #2: Multiple, Conflicting, Or Unclear Roles



- In our volunteer work
 - With other volunteers
 - With staff
 - With clients/service users
- In our personal lives



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Challenge #2 is Multiple, Conflicting or Unclear Roles Implementing GIPA/MEPA

We may have multiple, conflicting, or unclear roles when we deal with any of these organizational stakeholders.

And in our personal lives, we play multiple roles.

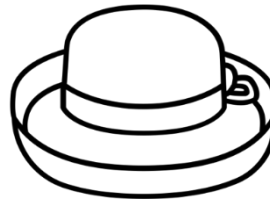
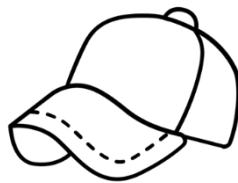
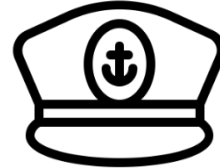
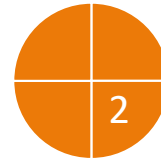
This is another way of saying that different facets of our identity influence us to approach situations in different ways—including, for some of us, being people living with HIV.

The challenge is figuring out, among all these roles, which role is the primary one in any given work situation.

The 1st exercise begins to get at the fact that we all wear multiple hats.

The top row of images shows 3 examples of hats all worn by people who are working on a ship together, perhaps playing different roles on the ship, but all of

We All Wear Multiple Hats



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them trying to work together to steer the ship properly and avoid icebergs. But everybody on the ship also has different roles in their personal lives.

In addition to your role(s) in the organization, you may be a: friend, family member, partner, parent, patient, community leader, client, citizen, neighbour, volunteer... or PHA.

Those are all part of your identity. They don't disappear just because you're volunteering at an organization. But they may contribute to boundary situations, or they might affect how you respond.

For instance, being a PHA means that you might have several roles in your community outside of your volunteer role. It also might affect how you feel about disclosing that to fellow volunteers, staff, or clients. Or if it's known that you are HIV positive, it might affect what people assume they can share with you.

Can anyway name any other situations where this may be a problem?

Preparatory Exercise # 2: Role-appropriate Behaviour



Objectives:

- 1) To explore our boundaries as they relate to volunteers.
- 2) To discuss appropriate limits.

	Always	Never	It depends (If you check this, you can write comment in the column to the right)	Comments (optional)
With staff:				
1... date the ED				
2... have sex with the ED				
3... develop a friendship with the ED				
4... loan money to the ED				
5... accept a personal gift from the ED				
6... date another staff				
7... have sex with another staff				
8... develop a friendship with another staff				
9... loan money to another staff				
10... accept a personal gift from another staff				
11... share information about the ED with another staff				
12... discuss Board issues and disagreements with staff				
With fellow Board members (please comment if it makes a difference that it's the Chair of the Board)				
13... date a fellow board member				
14... have sex with a fellow board member				
15... develop a friendship with a fellow board member				
16... loan money to a fellow board member				
17... accept a personal gift from a fellow board member				
18... share a service user's personal information with a board member				
19... share information about the ED's performance with a fellow board member				



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Now let's take up the 2nd exercise, which you will also have done in advance, and which is about Role-appropriate behaviour.

The exercise looks like this.

The objectives were like the previous exercise.

Let's use the vote feature on the poll I'm going to put on the screen.

The questions for the poll are:

- "Which of the following answers did you choose more often than the others:
- "Always" (i.e., It would always be okay to...)
- "Never" (i.e., It would never be okay to...) or
- "It depends"

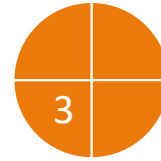
Facilitation question

- Why did you answer the way you did?
- Were there some “hard nevers”?

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- In which situations might it depend?

Challenge #3: The Helper-Client Relationship



What constitutes a healthy helper-client relationship?



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Challenge #3 is the helper-client relationship.

It's important for volunteers and peers to understand the basics.

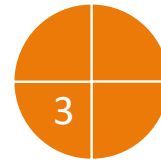
What constitutes a healthy helper-client relationship?

The following are key:

- Maintaining a professional relationship.
- Setting parameters on how services are delivered.
- Being aware of the inherent power imbalance.
- Volunteers being aware of their own potential conflict of interest: what are they getting out of helping?
- Being guided by what is in the best interest of the client, while not losing sight of how, ultimately...
- Staff need to maintain self-care as the helper; and/ or

- How their help to one client might affect the organization—in terms of risk, reputation & resource management.

Inherent Power Imbalance In Helping Relationships



Clients, service users, or patients sometimes find it difficult to recognize, negotiate, or defend against boundary violations.



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Helpers

The following can lead to —or are in and of themselves **Clients/patients/** --boundary crossings or violations:

- Being too familiar with a client—emotionally or physically
- Blurring the lines between professional and friend.
- Intimate relationships—sexual or otherwise.

service users' personal information or experiences so that clients can relate

– if those experiences are not firmly in the past, and resolved for the
organizational helper (otherwise, the client may feel the staff themselves need context, contr
vulnerability, need, information &
Support) trust, etc.

The Zone of Fabulousness*

- Vikki Reynolds - www.vikkireynolds.ca



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- Sharing


Question for group: What were the take-aways for you?

PROMPTS, if nobody responds:


Reynolds talks about

- how over-involvement can replicate dynamics of abuse and disrespect our colleagues (only I can help them!)
- how under-involvement can lead to bitterness, and/or neglect of clients.
- And she speaks about the obligation to think of collective care versus self-care – nobody is fabulous on their own.

Challenge #4: Protecting And Sharing Client Information



When should or shouldn't we share a client's?
personal information with someone else?



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Challenge #4 is about Protecting and Sharing Information.

Notice that we are not just talking about the issues of client confidentiality—or even only about clients.

We're talking about when it is appropriate to protect information, and when it is appropriate to share it.

Let's talk about sharing the **personal** information of clients (workshops for staff and Board also need to think about organizational information).

Here, we're talking about information pertaining to:

- Staff.
- Volunteers.
- Donors.
- Clients; and/or
- Children of clients

Question: When shouldn't we—and when should we—share information?

Answer: When it's in the best interest of the person to share it (when it's ultimately helpful)
... and when you've either received consent, or there are exceptions to when consent hasn't been received (we'll come back to this in a couple of slides)

In social services and health care, striking this balance is another way of thinking about the zone of fabulousness.

- “Under-involvement” in this case, means disclosing too much information – caring too little about confidentiality or privacy.
- “Over-involvement” looks like guarding private information from team members, as if you are the only one who can be entrusted with it – it ignores that there's a 'circle of care' and that good service means sharing appropriately to give good service.

Confidentiality Exceptions



- The health and safety of an individual.
- The risk of serious harm to a person or group.
- Legal obligations.
- Other.



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These are the different statutes and organizational documents that help to safeguard both.

- Privacy, and/or
- The right to information

Exceptions to in Maintaining Confidentiality in Social/Health Service Organizations


- Health and safety of an individual/Risk of serious harm to person or group – Child abuse – Suicide risk
 - Imminent risk of serious bodily harm or death
 - Medical emergencies
- Compassionate circumstances that aren't about health & safety
- Disclosures to public health authorities – Reportable illness.
 - Situations posing public health threats.
- Other legal obligations – Subpoenas



Always ask yourself...

Always ask yourself...

**Is my behaviour appropriate?
and, ultimately, helpful?**

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Radar by Pantelis Gkavos from the Noun Project

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— Search warrants

Once again – as we wrap up this section on the Four Challenges...

...let's come back to our guiding question: "Is my behaviour appropriate and, ultimately, helpful?"

Questions To Ask When Your Radar Beeps With Clients and Peers



Radar by Pantelis Glavos from the Neoun Project

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What questions should we ask ourselves if our radar beeps? with clients and peers?

1. Is this in the client's or peer's best interest?
2. Is there a policy that guides this?
3. Whose needs are being served? Mine or the client's/ peers?
4. Am I benefiting from this situation?
5. Am I treating this client or peer differently than others?
6. Will this have an impact on the service I am delivering?
7. How might this situation be viewed by the client's or peer's family?
8. Should I discuss this with another volunteer, a staff or my organizational supervisor?
9. Might this be a liability issue for the agency?
10. Is the client or peer drawing me into something that does not feel right?
11. If I was the client or peer, would I want this?



**What questions should we ask ourselves if our radar beeps?
with your fellow volunteers**

1. Does this situation feel right?
2. Is there a policy that guides this?
3. Am I being treated fairly?
4. Am I benefiting from this situation?
5. Will this have an impact on the service or task I am delivering?
6. How might this situation be viewed by other volunteers, by staff or by people outside the agency?
7. Should I discuss this with a fellow volunteer, or my staff supervisor?
8. Might this be a liability issue for the agency?

Identifying boundary issues, and improving our ability to respond appropriately is about...

1. Listening to your boundaries radar
2. Asking questions (of yourself, or the client, or your supervisor) and knowing where to look (is there a policy?)
3. Deciding (if possible, in consultation with your staff supervisor).



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Facilitator's Guide

Note that your radar goes off, you don't need to memorize every relevant organizational policy, guideline, or code of conduct, but you should be able to recall that one exists and where to find it, or you should know who to turn to for more organizational info on expectations and requirements.

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Let's take up Preparatory Exercise #3

FOCUSING ON THIS SCENARIO: "Your work mobile phone is broken and one of your clients needs to be able to contact you about the outcome of a custody case on a day that you are working out of the office."

What do you do? Remember the previous slide said:

1. Listen to your boundaries radar.
2. Ask questions (of yourself, or the client, or your supervisor)
3. Decide (if possible, in consultation with your staff supervisor).



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Facilitators note:

- After taking up the one scenario, if there's time, tell the group, "We have time to discuss one more situation."

Organizational Resources to Manage Boundaries

- Internal
 - External
- (see Handout #5)



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- Internal
 - Job descriptions
 - Senior Staff (including Supervisors/Coordinators/Managers of Volunteers)
 - Policies & procedures
 - External
 - Further Training (Note that a version of this training is also available for Staff)
 - OODP individualized consults in more serious situations—or to develop policy – oodp.ca.
 - Provincial legislation
 - Federal legislation
 - Professional guidelines
 - Ethics-based tools & guidance – i.e.

<https://www.nswp.org/sites/nswp.org/files/Difficult-Decisions-ENGLISHofficeprinter-version-low-res.pdf> (free decision-making tool)

**What questions does this bring up for you?
about work within your own agency?**



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If time permits, let's type in the chat any other Real-life Scenarios affecting your organization right now, if they haven't already come up?

Facilitators note:

- Choose 1 or 2 depending on time.
- For the rest, "How can you pursue an answer to these questions in your organization?"

As we finish the section on which questions to ask ourselves, let's come back again to our guiding question:

**(One last time) Always ask.
yourself...**



**Is my behaviour appropriate?
and, ultimately, helpful?**

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“Is my behaviour appropriate and, ultimately, helpful?”

Wrap-up (check-out)

Thank you!

Thank you!

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