

Boundaries



Boundaries

Professional boundaries define effective and appropriate interaction between a professional and the public they serve.

They exist to protect both the advocate and the person you are working with. Our boundaries set limits for acceptable behaviour in people around us and communicate what is and what is expected (and acceptable).

Boundaries also impact on the quality of the advocacy relationships as they offer both advocate and partner the safety and space in which to discuss issues.

If you establish positive boundaries you are more likely to:

- keep focused on the advocacy outcome(s)
- stay in the advocacy role
- complete the advocacy process quicker
- support the person to feel empowered
- facilitate positive endings
- encourage self advocacy (and avoid dependency)





Consequences of not establishing boundaries

Advocates who fail to establish positive boundaries often experience the following problems:

- ending the relationship is difficult you or your partner may not want to 'let go'
- the relationship lasts a very long time and typically meanders from issue to issue
- the person often asks the advocate to complete tasks which fall outside of the advocacy role
- the person may become dependent on the advocate

Most important boundary...

The most effective way of setting and maintaining boundaries is also the most simplest:

KEEP FOCUSED ON THE ADVOCACY ISSUE.... AT ALL TIMES

You do this by asking yourself 'if I do this (for instance attend this meeting) how will it promote their wishes or feelings or get them closer to their outcomes?



Tips for boundaries

Advocates should:

- respect the person, their experiences, beliefs and values
- explain confidentiality
- not accept gifts in exchange for support attended
- maintain the focus on the person
- not establish personal relationships outside of the advocacy support
- avoid personal disclosure which place the emphasis on the advocate not the person using advocacy





Empowerment and independence

An advocacy relationship with clear boundaries will be empowering for the person, as the advocate will only ever be listening to the wishes of the person and speaking up with them or on their behalf. The advocate will not be telling their partner what to think, feel or what decisions to make, but will support them to take control of all aspects of their life. This will range from taking part in meetings to determining treatment plans, housing or parenting options.

This positive view of the partner is based on the assumption that they have the ability or capacity for self determination, and will result in the person gaining confidence and developing their skills during the course of this relationship.

This is often an empowering experience for the partner as they take control of their lives with the support of the advocate, and become more independent as a result.



The absence of clear boundaries could end up with the opposite effect.

If an advocate acts outside of their role this will create confusion as the partner may not have a clear understanding of what their rights and responsibilities are. It could also take away control and make them more dependent on other people. For example, an advocate who gives advice will be limiting the partners options and could undermine their confidence in their own abilities.

An advocate who does things for a person – speak for them at a meeting or make a phone call when they could do these things for themselves – will be fostering dependence.

This would be contrary to all advocacy core values but could result if boundaries are unclear or ambiguous



Issues that can impact on relationship

There can often be many other limitations to the advocacy relationship as well as the boundaries of the role itself. These can often be outside of the advocate's control.

External and internal factors can include some or all of the following:

a) The type of advocacy being offered

Although there are many different "types" of advocacy – issue based, long term, self advocacy etc - it is likely that the advocate is fulfilling a specific role. For example a paid advocate may be there to offer issue based advocacy support, around an issue identified during the referral or the initial meeting only. It may be difficult for an advocate to offer any support beyond this, unless the advocacy project has a flexible approach and is able to offer support for a succession of issues that need "repeat" visits. Some people may also need more time than a 'professional' advocate can give, which is why many projects also work with volunteers who can usually give a longer term commitment.

The introduction of statutory advocacy (such as IMCA, IMHA and Care Act Advocacy) means there are advocates available that offer very targeted advocacy support to certain groups of people that meet criteria laid down by statute.

You want to make sure you see the person as an individual who draws on advocacy to help with a particular issue - not just as series of issues to fix and then leave.



b) Organisational constraints

These will include the policies and procedures of your advocacy organisation, as well as any funding constraints there may be. For example, your organisation may be funded by the local authority to provide advocacy for people that meet eligibility criteria for services only, which will limit who you can or can't work with.

Organisations that are hampered in this way will often look for other sources of funding so that they can offer advocacy support to a wider range of people. However, the trustees of an organisation may have imposed limitations on the advocacy role – to only provide self advocacy support, or only use volunteers not paid staff for example – in which case you will have to abide by those.





c) You / your partner

Advocacy is about a relationship with your partner based on their needs, so they will set the pace rather than you. This means that at times the advocate may feel limited, as if "things aren't going quick enough" or that they don't know their partner well enough to be an effective advocate. There may therefore be times when an advocate can feel frustrated but the unique characteristic of the relationship is that the person drives it forward.

Your partner may also bring a lifetime of experiences of being let down to the advocacy relationship: you will need to be mindful that trust has to be built and earnt.

Where a person has had negative experiences from using care and support services, they may also be very angry or even unreasonable. Remember that these feelings are valid and to be led by the person and go at their pace. Give them control.





d) Resources/information available

Advocates are not expected to be legal experts in social care, health or the law. However you do need to be comfortable is using the law to challenge decisions and processes when they are wrong and to give information about rights to your partner. You will be supported to learn more about the law and process further on in your qualification.

One key area of essential knowledge is understanding your local community. Developing links and relationships with local community groups, the voluntary sector, faith groups, self advocacy groups as well as professional services such as lawyers and beneifts advisors are invaluable for the information that can be exchanged and discovered.

You also need awareness and understanding of the diversity of your local community, including an awareness of different cultures, so you are not limited in the support you offer. It can be very difficult to work with someone from a different cultural background if you have no knowledge of their beliefs or values. An example could be supporting someone through the death of a loved one without having an understanding of their religion, or how their culture might require certain care options.

Advocates must always be clear about their boundaries and should avoid providing specialist information. Instead, advocates facilitate or support people to access the information required from other specialists. An example of this could be in hospital where a person wants information on the medication or treatment they are receiving – good advocacy dictates that the advocate asks the clinical team to provide explanations and information and facilitates access to the information – rather than simply providing the information.



e) The advocate's status

Advocates may find themselves in situations where their status will limit their role. For example, advocates could support a patient to attend a Mental Health Review Tribunal but may not be able to address the meeting.

As an advocate you will not want this to detract from your role or your effectiveness, so will want to clarify when and where you can contribute, preferably before any proceedings start. This may not always be possible, and some advocates will help their partner write a letter or help them prepare some words in advance in these sorts of situations. Sometimes a lack of status can allow you to ask the most obvious straight forward questions, as you are not encumbered by professional relationships or concerns over funding. Your perceived lack of status could also be a lack of understanding of the advocacy role, which could be overcome by a quick reminder of the main purposes of advocacy, and people's right to be heard.

Never be put off however by professionals who try to undermine or dismiss you or your role. Remember, if they are trying to do this to you, how must your partner feel. Always speak truth to power and remember people have right to advocacy!



Practical Boundaries

Physical contact

Physical contact between people cannot be totally avoided, especially when supporting a person who uses non verbal and sensory communication. However thought and care should be given by the advocate as to appropriate physical contact.

There are many people who really value physical contact for all sorts of different reasons. This can range from someone looking for reassurance, comfort and some emotional support, to people with sensory impairments or profound disabilities. However, physical contact can potentially expose individuals to abuse or invite allegations of abuse.

Physical contact can also send strong messages to stop talking (for instance when a person is upset and crying, if they receive a hug this can be interpreted as being told to 'ssshhh, be quiet').

Some basic guidelines useful for advocates in these situations include:

- do not initiate any physical contact
- if your partner initiates contact, restrict it to 'non intimate' areas like hands.
- keep it short
- choose handshakes or high fives instead of hugs
- if you do use physical touch in your communication make a note of what you did and why



Managing risks

Most advocacy organisations will have some way of assessing and managing risks, including the risks associated with the 1:1 advocacy partnership. These will include lone working policies and some kind of assessment process for advocacy referrals, so that advocates will have enough information before meeting a person so they can determine the most appropriate place to meet and keep safe.

There will always be risks associated with advocacy, as we are working with other people in all sorts of environments. The key will be to manage any risks in the most empowering way possible.

Giving personal information

There are many different approaches to how much information about yourself you should give. Some advocates prefer not to divulge any private information at all, as they regard as it as irrelevant or an invasion of their privacy. There may be good reasons why you shouldn't give out information, particularly if this could put you at risk.

Advocates should use their own judgement and be guided by their organisation on when it is appropriate to share this kind of information. However, you should be careful not to over burden your client with details about your life, as this could be a distraction for them, or they could take on board your problems or worries.



Time limits

There will always be a finite amount of time available in any advocacy relationship, even in the most open ended of arrangements. A self advocacy group will always finish at a certain time, an issue based relationship will finish when the issue has been resolved, a long term volunteer advocate will only ever have a certain amount of time available for each visit. Many individuals may struggle with this, particularly if they are socially isolated and have no-one else in their lives. They may want you to stay with them longer than you are able to, or see them more often than you can. However, giving more time to your partner could be counter productive, as it could create dependency or place too much of a burden on you. Advocates should be honest about how much time they have available, but mindful of their partner's situation and needs.

Let them know how much time you have before you meet up, and perhaps remind them at the beginning of the meeting. Make sure you are realistic about how much time you have available, as you don't want to be constantly looking at your watch or not paying attention because you worried about how many other things you have to do that day. Try and be positive if you have to end a phone call or a meeting, and at least let them know when you will be back in touch or suggest someone else they can talk to.



The "emotional" limitations

Advocates can often find these boundaries the most difficult to set or adhere to. The challenge is to maintain enough focus on the advocacy goal without the relationship becoming too blurry with boundaries.

How involved is "too involved"? You will need some degree of involvement to ensure that the relationship with your partner is genuine and authentic. In some situations you may feel anger at an injustice or lack of support, in others you might feel sadness at what is happening. Either way, you cannot be so overcome with emotion that it clouds your judgement and it affects your ability to act appropriately or make decisions.

If you find yourself becoming preoccupied with a situation, then the chances are you are probably investing too heavily. Another sign would be if you were finding it difficult to distinguish your own feelings from that of your partner. Peer support and supervision from your project or manager should help you gain a sense of perspective and also relieve you of some of the burden. Of course, you may also find yourself in an advocacy relationship where the opposite is the case – you don't want to get emotionally involved at all. Advocates may find themselves working with people they find it difficult to like, or whose lifestyles or actions are difficult to cope with. In this case the principle of maintaining enough distance in order to carry out your role effectively would remain the same.



Money and gifts

Organisations should have a policy to govern what advocates can or cannot accept. In general advocates should not accept anything which looks like payment. Some people do want to show their appreciation, and express thanks for the help they have received from their advocate, so may want to give a gift. It may not be appropriate to accept, and this will depend on your partners situation and the nature of the gift so it is a good idea to seek guidance from your project. You need to avoid the appearance that you are taking advantage, but should also balance that with your partner's right to express themselves or enjoy the act of giving just like everyone else does.

Many advocates will accept a gift rather than reject it outright, then tell their project about it and decide collectively what they should do – share it out with colleagues, or give it back for example.

Practical tasks

Advocates should look to limit their role in any practical tasks in order to maximise their partner's involvement. It can be easy to take over and do things for yourself, particularly if the task is playing to one of your strengths or if you could do it quicker or more accurately than your partner. For example, it may be quicker for you to write a letter on behalf of your partner but may dis-empower them in the longer term.



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