

Ethics and Boundaries ▶ When Working with Unhoused Communities

Kari Jennings-Parriott, LCSW
(She/Her)

What are Ethics?

- ▶ Broad code
- ▶ Shared morals reflecting the value and judgment about “right” and “wrong” by society
- ▶ **Ethical guidelines explain:**
 - ▶ Your role to the client
 - ▶ Your philosophy of care
 - ▶ Your role on the team and within the program



There are some very clear ethical and professional guidelines that govern our interactions with clients.

There are also a lot of situations where the boundaries are not clear.

These are called “Grey Areas”

Be educated about your agency guidelines - **NOTHING HERE REPLACES THEM.**

Ethical Guidelines



- ▶ Clear, firm and professional boundaries in the relationship with client(s)
- ▶ Avoid compromising relationships/dual relationships
- ▶ Agency staff shall not display favoritism or preferential treatment
- ▶ Maintain the confidentiality of private information

Ethical Guidelines

- ▶ Honor the dignity of each person
- ▶ Never use your position to take advantage of client(s)
- ▶ NO sexual contact or intimate relationships
- ▶ Documentation must be accurate and complete
- ▶ Confidentiality
- ▶ No use of drugs/alcohol with clients
- ▶ Avoid medical issues (unless this is your job)

Unethical Behavior

Undermines the mission to provide a services/program that is safe and secure for clients and staff

Examples:

Abuse of clients

Inappropriate relationships

Fiscal Improprieties

Misconduct on-duty

Misconduct off-duty

Investigative violations

Questions to Consider When Managing Ethical Dilemmas

- What helps you make ethical decisions?

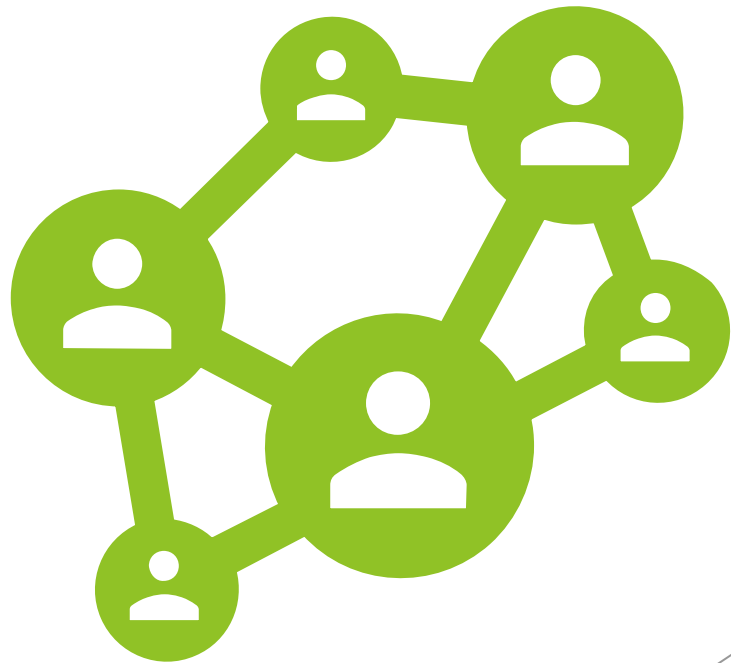
- What resources are available?

- Who can you consult?

- How do you manage conflict in an ethical way?

- Can you be held liable?

Professional Boundaries



- ▶ Clear limits
- ▶ Knowing where you end, and the client begins
- ▶ Being friendly, not being friends
- ▶ Develop understanding of the limits and responsibilities of your role as a service provider
- ▶ Do not do for your clients what they can do for themselves
- ▶ Crisis may be natural consequences and that's okay

Professional Boundaries

Involve “good judgment”

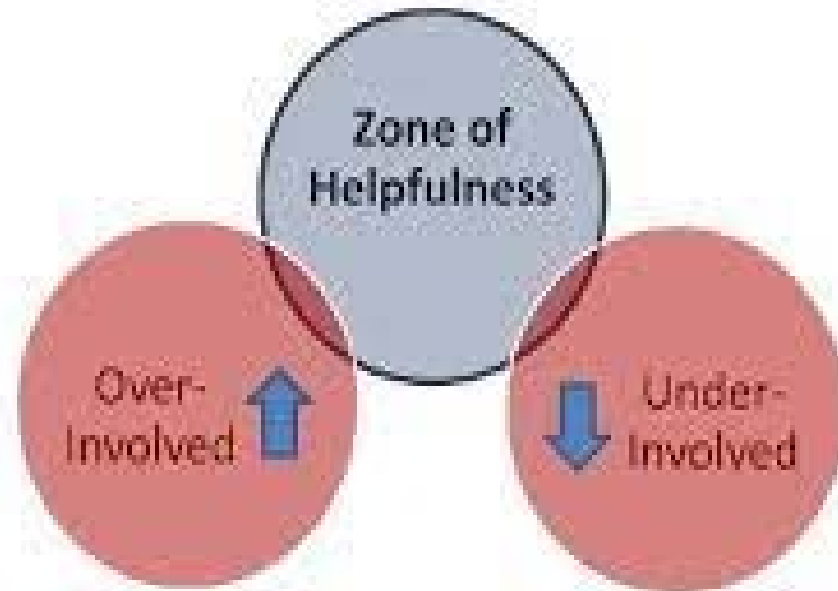
Protects clients from possible conflicts of interest on our part

“Objectivity” is necessary

Clear expectations and roles

Zone of Helpfulness

Staying within the "zone" helps you to stay "in bounds".



Unprofessional Behaviors:

- ▶ Negligence
- ▶ Neglect
- ▶ Exploding in anger at co-worker or client
- ▶ Boundary violations
- ▶ Sexual harassment
- ▶ Bullying
- ▶ Disrespectful behavior toward clients



Common Boundary Violations:

- ▶ Excessive self-disclosure
- ▶ Accepting large gift
- ▶ Sexual relationship
- ▶ Dual relationships
- ▶ Bartering/mishandling of money
- ▶ Inappropriate types of physical contact

- ▶ **What are some possible others?**

Types of Boundary Crossing

Touch

- Ask your client if they are comfortable with your touch
- When using touch, only serve the client's need and not your own
- Observe client's reaction to touch realizing every person is different

Unprofessional Demeanor

- Keep your voice, body language and expressions calm and clear
- Keep good personal hygiene and professional attire
- Avoid profanity, jokes, or wording that could be offensive

Gifts / Tips / Favors

- Do not accept payment or tips from clients
- Practice saying "No" to clients who offer gifts or money or tell them it is against policy
- Protect yourself and report if a client offers funds or large gifts to the agency



Have a good heart and healthy boundaries.
Otherwise, your life is for everyone else
and you lose yourself.
Kindness is everything, but setting limits
allows you to remain true to who you are.

KRISTEN BUTLER

sizzle

Healthy Boundaries Look Like:

- A relationship that is safe for client and provider
- A relationship that is supervised, and the worker follows rules/guidelines of the agency
- This is transparent from the beginning
- A relationship that is consistent but flexible
- A relationship that promotes growth, independence, and self-sufficiency
- The focus is on the client's needs
- The relationship is not transactional



How to Set Healthy Boundaries

- **Help**--- Providers focus on the responsibilities to the clients you serve
- **Allow**--- Providers model healthy behaviors, communication, and professional relationships
- **Ensure**--- Physical and emotional safety
- **Establish Clear**--- understanding of roles and expectations
- **Encourage**--- Promote open, safe communication



Clear Boundaries

- ▶ Don't give or loan money
- ▶ Don't take clients to your home
- ▶ Don't establish a transactional relationship
- ▶ Don't keep secrets for cts from other providers or co-workers
- ▶ What else?





- ▶ Sharing your personal history
- ▶ Sharing your home/cell number
- ▶ Friending clients on Facebook
- ▶ Accepting gifts
- ▶ Working with a client when you're not on the job
- ▶ Working with clients who are no longer enrolled
- ▶ What else?

What Would You Do?



What Would You Do?

You need to talk to your supervisor about an ethical dilemma you're facing in your work, but you have difficulty trusting your supervisor's direction because this person tends to give advice without really listening and understanding the issues you are concerned about?



What Would You Do?



A new CT of the CMs is struggling with substance use and alcoholism. The CT heard a rumor at the CM is in recovering, which is true. During a meeting CT asked if the CM was in recovery. The CM decide to answer the question candidly. How much information/details do you share?

What Would You Do?

The local police ask you to accompany them to an encampment to prepare for an abatement and to help intervene with certain problematic unhoused folx. (Though the police seem well intended, you wonder about the implications for your outreach work if you are perceived as closely associated with law enforcement.)



What Would You Do?

A CT living in an encampment has unchecked diabetes. He refuses medications, has been losing weight and having more behavioral issues which has brought the police around. They refuses to get checked out by a Street Med Dr. or at a nearby clinic.



What Would You Do?

You are a SW who is working with a Ct that is pregnant and has HX of meth use. You and the CT met with staff from the Family Justice Law Center, who suggested the CT get urine drug tests monthly to show the hospital staff she was drug free during pregnancy. She wants to keep her baby and is worried that because she is unhoused and has a documented drug use HX that the hospital staff will call CPS. As a part of your team there is a RN ready with to administer the urine drug screening. You ask her if she will take a drug test today and she says she can't and is insinuating that she recently used without admitting that. What do you do?
How do you document this?



Thank you!

Kari Jennings-Parriott, LCSW

(She/Her)

karijparriott@gmail.com