

**BOUNDARIES,  
POWER AND  
ETHICAL RESPONSIBILITY**  
IN COUNSELLING  
AND PSYCHOTHERAPY

BY  
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# 1

## WHAT ARE BOUNDARIES?

Before progressing to the finer detail of boundaried therapeutic work, it is helpful to clarify some of the specific meanings within the context of counselling. Considering what we mean by the term 'boundaries' in counselling should help, in addition to considering how such boundaries can be used as a vehicle for therapeutic change. With so many models of therapy being practised, we also need to explore the impact that our theoretical orientation can have on the contracting process. We will also consider a range of possible alternatives for managing our boundaries. Within this chapter we will be considering the challenges and benefits that working within safe boundaries can provide; to do that however, we first need to clarify exactly what we mean by boundaries within professional counselling relationships.

### COUNSELLING AND THE VERY NATURE OF COUNSELLING

There are probably hundreds of explanations of the activity of counselling but the BACP define counselling as being:

... time set aside by you and the therapist to look at what has brought you to therapy. This might include talking about life events (past and present), feelings, emotions, relationships, ways of thinking and patterns of behaviour. The therapist will do their best to help you to look at your issues, and to identify the right course of action for you, either to help you resolve your difficulties or help you find ways of coping. Talking about these things may take time, and will not necessarily all be included in one session.

This definition introduces several notions: that of the breadth of potential content a client might wish to discuss; the counsellor's role in facilitating progress; that the process can take differing lengths of time for different people; and that the process is divided into sessions. There are several aspects of this process that might be confusing for a new client who hasn't experienced counselling before; an honest discussion between client and counsellor about the process will start the relationship on a more even footing, clarify any expectations or allay any fears. By framing boundaries in this way, it helps us view them as a positive aspect of the relationship that provides a shared safety and security, as opposed to negative restrictions or rules which is how they may be considered within other contexts.

## WHAT WE MEAN BY BOUNDARIES

If we are working with a client new to counselling however, much as we try to avoid it there is an instant imbalance of power within the relationship. The counsellor will have expectations based on their own personal and professional experience, while the client's expectations may be based on a different range of external sources. It is possible that a new client may expect a counsellor to give them answers, or at least guidance, whereas the counsellor's way of working may never involve such a directive approach. This illustrates the potential for client and counsellor to be approaching the sessions, content and process from very different perspectives.

To avoid this, we aim to simultaneously reduce differences in expectation, or at least acknowledge those differences, while increasing the equality within the relationship. It is ethically important during the first meeting for a counsellor to explain their counselling process and discuss the aim or purpose of their service with every client. An integral aspect of this is to agree the external and internal conditions that they will both adhere to in developing a working contract. This discussion takes place before any therapeutic work begins and is an opportunity for both parties to question and clarify the details of what will take place during their time working together.

To be clear, when we talk of boundaries we are talking of:

- the rules, guidelines and safe margins that we work within to ensure the maximum security for a client and counsellor
- the best possible conditions for therapeutic development
- a shared agreement of the limits of the relationship.

A BACP factsheet providing guidance on the area of professional issues explains them as ‘... *maintain(ing) clear standards of therapy and protect(ing) you from poor or unethical practice*’ (Kent, 2012). By clarifying the limits of the relationship with our client, it allows us to adopt a role more akin to that of facilitator, as opposed to a manager or expert. It also encourages an increase in shared trust, as both client and counsellor discuss, agree and implement the boundaries to their meetings. This level of transparency adds to the culture of equality and is intended for the client to feel sufficiently safe to be as open, honest and emotionally vulnerable as might be required. The client also needs to be confident that the counsellor can be trusted to value and safeguard that information. Because of this, some boundaries are non-negotiable, such as issues surrounding confidentiality or venue, which are informed by legislation, policies, organisations and ethical frameworks.

There are many types of boundaries, many of which we shall visit later, but they include the number, regularity and length of sessions, referral, orientation, setting, environment, ethics, supervision and cost. The management of risk or a safe plan may also be included within this list so the client is aware of a course of action if they experience a crisis when not in the counselling session. Due to the uniqueness and dynamics of counselling, none of these aspects are clear cut, as they are influenced by a range of internal and external considerations. These considerations are many and varied but can include the setting the counselling is taking place in, the theoretical orientation of the counsellor, the cultural norms of the client and ethical guidelines.

These external influences can introduce an initial source of inequality within the relationship if a client is unaware of factors, such as funding or ethical guidelines. In addition to this, some boundaries are enforced by other external bodies, such as indemnity insurance providers and organisational policies and procedures, so are far less flexible. As a counsellor, we have a responsibility to discuss and explain the governing influences behind certain requirements so the client can understand the reasoning behind such boundaries. For example, a client travelling a long way to attend and wishing their sessions to be longer than the usual therapeutic hour may lead to a negotiation process that might include explaining the policy of the service in such circumstances, what research informs us regarding therapeutic benefit in relation to session length, diary commitments and of course, personal preference. The outcome is then up to both client and counsellor to agree based on the shared information.

## MAKING USE OF BOUNDARIES AS A VEHICLE FOR THERAPEUTIC CHANGE

The sharing of information regarding boundaries contributes towards a client's increased empowerment; this is a key aspect of the therapeutic relationship. The content of the counselling sessions can impact upon the client beyond the realm of the session and into the rest of the week, if not longer. Giving the client a voice, highlighting their choices and taking time to hear their contribution might be an experience that doesn't happen often in other aspects of their life. Engaging with our client as a valued equal can lay down a foundation of warmth, acceptance and trust, creating important preparation for a successful therapeutic relationship.

The negotiation process during the contracting session is a highly successful method of clarifying the role of counselling and encouraging the client to shape their environment within certain parameters, while discussing their own expectations and requirements. Shifting the balance so that the client shares in the responsibility of establishing a foundation for change gives the client permission and space to test their ability to take control of some aspects, as well as sharing how they feel regarding others. For many clients control, or the lack of it, is a core issue when attending counselling; a careful and kind dialogue can encourage the client to value their input from the very first meeting. This real demonstration of interest and care for the client is setting a precedent for the dynamics within the relationship. It is putting Rogers' 'organismic valuing into practice' (Rogers, 1964: 160–167).

Here is an example of a trainee counsellor's introduction to agreeing boundaries in which Anne remembers her trepidation when starting her Introduction to Counselling course:

'I remember how nervous I felt on my first day. I had never done anything like this before and had no idea what to expect. After my interview several months earlier I was given a course handbook which contained a reading list and sections on how to submit assessments and how to contact tutors but nothing to prepare me for who I was going to meet or how I would feel. When I walked into the classroom my first reaction was that I was relieved to see that I wasn't the oldest on the course which I realised had been a worry. It was on our second

day that we sat in a circle and agreed class rules which we all signed and was put on the wall. It was quite detailed and included things like turning phones off, confidentiality, respect and being honest but kind to each other. Just by sharing that task as a group it gave me a reason to speak to others and was my first experience of how we might work as a group.'

Anne's experience illustrates how a contracting session, whether it be in a group or a one-to-one session, can break the ice and encourage a discussion on an equal footing. Both student and tutor, or client and counsellor, are placed in a position of empowerment when they are both given a voice. A similar process takes place within other counselling environments, such as group therapy, couple and family therapy, as well as individual counselling sessions. Focusing on some of the less flexible external and organisational procedures can be a gentle way to start a new relationship, particularly one that will be moving away from the external and concentrating more on internal processes in the future. For it to be part of the therapeutic process, formal contracting can be approached in a friendly and helpful manner to introduce the client to a professional way of working, and to lessen any concerns regarding what can be seen by some as a confusing and secretive activity.

Iain had a similar experience, feeling nervous and trepidatious, but on starting his placement was very positive about the contracting process when reflecting on it with his supervisor.

'I was quite nervous before my first session. I had received my readiness to practise statement from my course tutor but as I was waiting for my first client to arrive, I didn't feel ready. The service I was working for had a written contract that was very clear about the areas that could be negotiated and I used that as the basis for our session. As it turned out, my client was new to counselling too so didn't have any previous experience to refer to as a comparison. We worked through the sections together and I was surprised that it took so long. I encouraged her to expand on her thoughts about each separate aspect and found out a lot about her which is how we started. I wasn't as clear as I thought I'd be about where the contracting ended and where the counselling began.'

## THE IMPACT OF EXTERNAL ASPECTS ON BOUNDARIES

The psychological theory that underpins our practice will influence not just the way we approach contracting but also how we come to agreements in future therapy. This relationship between our model of therapy and working with boundaries is discussed in more depth in Chapter 9 but can be summarised thus. If we are working with a more directive theoretical orientation, the contents of the contract may be slightly less negotiable. If we are working with a less directive approach we may be comfortable negotiating much of the content. By this I mean, we must demonstrate a professional flexibility that caters for not just the needs of our client, but also blends the requirements of the organisation we work within and our own value base. This blended approach shows us how the contracting process is an integral part of the counselling relationship and encourages the client to experience the underpinning ethos of our relationship rather than an isolated process.

Consider this example:

Damien works as a counsellor within an addiction service. His core training is person-centred but the organisation he works for requires him to include an aspect of education in his sessions. This means Damien is expected to demonstrate that he is offering relevant information about the effects of addiction to his clients. The service also encourages all clients to attend their 12-step programme. In the evenings Damien rents an office and maintains a small private practice. He sees four clients a week and has written his own policies and procedures based on his person-centred way of being. His private clients are all self-funding so Damien has far more freedom regarding the management of his service.

Here we can see that the policies of this organisation and their general ethos impact quite significantly on Damien's practice during the day. For continuity throughout the addiction service, all counsellors working there are required to include information giving and an awareness of the 12-step programme, in addition to their therapeutic approach. The contracting, therefore, is not completely in the hands of Damien and his clients, but heavily influenced by the organisational requirements that, in turn, may well come from influential funding bodies. For Damien to work successfully for this service, his person-centred approach will have to underpin his practice in a way



that can accommodate the less flexible aspects of the contracting. However, in his private work, he is able to practise with more freedom and a far greater sense of autonomy.

This example highlights the constraints and benefits of a different sector.

Joanne is a CBT practitioner employed by the NHS. So far she has found very little conflict between her structured therapeutic work and the boundaries determined by the organisation. She feels that the rigidity of the medical routine (appointment system, venue, statutory funding, etc.) have worked to reinforce her counselling process. During her sessions, she focuses on reinforcing positive behaviours and the repetition of successful change so both the regularity and formality of the setting are very much part of the process. Joanne feels that the setting unconsciously reinforces how she (and the wider health service) is taking the client and the therapeutic process seriously.

As we can see from these examples of Damien and Joanne, in addition to our underpinning theoretical model, the setting we are based in can also impact upon our boundaries. Examples can include working within a statutory service, such as the NHS, social work department, schools or prisons, where there are nationally and locally developed policies and procedures guiding our working practices, whether relating to counselling or to the wider organisation and its culture. The frustrations that can accompany this therapeutic/employee tension will be explored within Chapter 8.

We have already identified that being based within the voluntary sector can shape our working practices, but let's look at the practicalities and the impact that these can have on our client. Consider the following example of working with a client within a drug rehabilitation service.

This was Gerry's third engagement with a rehabilitation service. Initially he had been referred to the local Community Addiction Team but relapsed twice. Several months later he approached a local organisation with a drop-in service on the recommendation of a friend. Gerry felt quite jaded by his past experiences and focused on what

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he viewed as his previous failures. On his first meeting with his new counsellor Sonia, he was cautious, suspicious and very guarded. He had learned to be resistant to being told what to do by others but at the same time didn't trust his own coping strategies. This resulted in Gerry simultaneously distrusting both himself and those helping him. Sonia had worked in the centre for five years and was aware of the inner turmoil that new clients could experience.

What might Sonia do in that first meeting to engage with Gerry and develop an equitable relationship?

Although not a definitive checklist, these are some possible areas that can be used to start to build a positive relationship.

- Ask Gerry to define his aims and ultimate goal
- Clearly explain her role as a counsellor and the services the organisation can provide
- Invite Gerry to recognise what didn't work in his previous endeavours
- Encourage Gerry to identify his strengths
- Demonstrate to Gerry that he is at the centre of his recovery by listening to his viewpoint
- Embedding his values within the initial contract
- Ensuring that time is spent negotiating the more flexible boundaries to demonstrate to Gerry that his opinion counts.

By implementing these steps, Sonia provides a structure for the therapy that has its foundation in Gerry's previous experiences. It also communicates to Gerry that he is central to the process and that his contribution can help mould the counselling and their future relationship. This, in turn, communicates a sharing of power intended to challenge Gerry's lack of faith in his own coping strategies in a manner that demonstrates this is an equitable process designed to establish trust.

## POSSIBLE ALTERNATIVES FOR MANAGING BOUNDARIES

Following the initial agreement or contracting session, boundaries need to be re-visited and managed to ensure that they are being adhered to, but also that they are working as hoped. When more than one client is involved, such as in couples, family or group counselling,

there is a greater requirement to ensure that all parties are clear on what will take place and that everyone has been given an equal opportunity to contribute. This may involve explaining and agreeing factors several times in a range of ways if our clients are of different ages or have varying levels of understanding to each other. It is the counsellor's responsibility to clarify all aspects of the agreement and check that the client is aware and comfortable with the content. It might be helpful to use examples to illustrate the implications of particular parameters of the sessions and relationship, particularly when explaining our theoretical orientation or therapeutic process. Just as each client is a unique individual, so is the dynamic of our interactions with them. Although we can have our own personal and professional expectations of what might take place, it is impossible to predict. Therefore, we have to be sufficiently prepared for, and sufficiently flexible to deal with, any occurrence that might arise.

Here are some of the situations that might occur within sessions. What might be done in each of these situations to manage our original agreement?

- (a) A client consciously or unconsciously ignoring the end of the session and wishing to continue.
- (b) A client's mobile phone ringing.
- (c) A client becoming angry and walking out.
- (d) A client describing events in detail but completely resistant to discussing their feelings.
- (e) A client disclosing abuse.
- (f) A client you suspect is avoiding paying.
- (g) A client admitting that they are attracted to us.
- (h) One client dominating the session in couples' counselling.
- (i) Clients in a group session talking over each other.
- (j) A client wanting to end their sessions as they are finding it too upsetting.

There are no definite answers to any of these examples as so many factors influence each situation. One solution doesn't fit all, but rather there are a range of possible alternatives for responding when our boundaries are challenged. There are also many strategies we can put in place to manage both our sessions and our relationship which we will look at further in Chapter 8 using these same examples. As previously mentioned, the combination of flexibility and care is crucial if we are to communicate to our client that this is an equitable relationship.

The ability to see the bigger picture, consider the background of the current situation and respond in a manner that avoids impulsive, knee-jerk reactions and be guided by our theoretical approach, are skills that

might take time to develop, but are crucial in our ability to maintain boundaries in a professional and appropriate manner. Clients can knowingly or unknowingly try to manipulate us into collusion, agreement or advice giving, so we need to remain vigilant about our responses, what they might mean to the client, and any impact they might have on the development of the therapeutic alliance. We can work with our supervisor to have strategies in place that we are comfortable using to support our client. We are aiming to develop methods that maintain the therapeutic connection but, at the same time, respond in a manner that remains within the agreed limits of our relationship. This can be challenging to say the least, particularly if you are unprepared, but the most important tool in this case is transparency. Maintaining our boundaries can become an integral part of the therapeutic process if we remain honest and open to encourage self-awareness and insight. If a client challenges their boundaries we shouldn't just highlight it, but make it part of our session. The use of immediacy in this way can help move the session forward. It demonstrates that we are aware of what is taking place, we feel that it is relevant and that we are unafraid to challenge our client. The challenge may be gentle as in the case of examples (g) or (j) above or more direct in the case of examples (a) and (f).

The approach to, and method of, managing boundaries is covered within our core counselling training and we know can vary depending on which theoretical orientation we are working within. For example, a CBT therapist may be more pragmatic in their approach, employing available evidence, direct challenge and may develop tools specifically to work with that particular client. This may differ considerably from the approach of a person-centred counsellor who may implement the core conditions to formulate a less direct challenge. The key is to remain aware of the context and implications of any challenge and to respond in a manner appropriate to both the boundary that is being tested and our own modality.

What this means on a practical level is that we

- refer back to our initial contract
- pre-empt some of the situations and strategise with our supervisor
- include guidelines within a service leaflet (such as payment methods, session length, complaints procedure)
- give a copy of the contract to clients before they engage with the service.

Although not mandatory, there are numerous situations where providing a leaflet or signed contract outlining our service significantly helps reduce the incidences of boundary confusion. An example of this is if

we work with children and young people, or clients at risk where informed consent needs to be sought (this will be discussed further in Chapter 3). Having an explanatory leaflet or information on a website can also reinforce the transparency of the service by including an overview of the general process. It is often useful to view the information that other services provide to help formulate an appropriate document for your own service. There are many available online, but this is an example of information provided on a website for a student counselling service:

### **What do we do?**

Counselling is an opportunity to talk to a trained professional who can help us work out how to deal with our personal problems. These can include long-standing issues and short-term crises. Our counselling service offers free, private counselling to all students currently enrolled at the college. We provide friendly, private support to students who wish help with any difficulties they may be experiencing. Talking through your problems can help to improve your wellbeing and impact positively on your studying. It may be beneficial to speak to someone outside your immediate group of family, friends and tutors. For more details, watch the short BACP film on the Counselling Service page on the college website.

### **What problems do students see a counsellor about?**

You can approach a counsellor with any personal problem. Problems arising from a variety of issues such as:

1. trouble with family and friends
2. feelings resulting from an event such as bereavement or trauma
3. difficulties adjusting to life as a student
4. living away from home
5. addiction
6. stress
7. anxiety
8. low mood.

Counsellors can also help you access assistance from an outside specialist agency if you would find that helpful. The counselling service will not be able to assist with practical issues such as funding, housing, childcare or benefits.

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### **Will anyone know if i attend counselling?**

No, not even your course tutor or lecturers unless you specifically request it. The counselling service guarantees privacy to all students. The counselling rooms are anonymous and used by different services so not identifiable to those passing by. Students of all ages, backgrounds, gender, full or part-time and distance learners can make use of the counselling service.

### **How much time will it take up?**

As a guideline, each session lasts for 50 minutes. The frequency of the visits is usually weekly but depends upon what you and your counsellor agree is appropriate. You are requested to make counselling appointments for a time when you are not timetabled to be in class. If you are unable to attend your appointment, please contact your counsellor with at least 24 hours' notice to cancel your session.

### **How much does it cost?**

There is no charge for students attending counselling as the service is funded by the college.

### **Does the counsellor take notes?**

Yes, all our counsellors take notes at the end of each session which are stored securely within the college. You are able to ask your counsellor to see these at any time.

### **How do you make an appointment?**

If you would like to access counselling, you can either book a session on the Student Intranet, College App or you can approach your Student Advice Team. Counselling can be accessed at any of the campuses, not only the campus you are currently attending. When necessary we also accept external referrals from GPs, Social Workers, NHS and courts. Please be aware that referrals from members of staff are not usually supported.

The information is designed to outline the overarching boundaries of the service and clarify those aspects that are not flexible. The time of sessions is stipulated, but the venue isn't. To have a majority of inflexible boundaries can be demanding and testing. Those that are pre-fixed due to external circumstances might include the policies and procedures of the service, or the confines of the setting you are working

within. Restrictions might include cost, number of sessions (e.g. eight if referred from GP or the maximum offered within service), the available room to work in, how often we can meet with our client, etc. Having the fixed and negotiable boundaries contained with a leaflet, written contract, email or website can be particularly helpful for a client to receive in advance to help them decide whether the service you offer is likely to meet their needs. Such clarity clearly meets the BACP (2015) ethical guidelines on commitment to clients:

4. Build an appropriate relationship with clients by:
  - a. Communicating clearly what clients have a right to expect from us.
  - b. Communicating any benefits, costs and commitments that clients may reasonably expect.
  - c. Respecting the boundaries between our work with clients and what lies outside that work.
  - d. Not exploiting or abusing clients.
  - e. Listening out for how clients experience our working together.

## AREAS OF CONCERN AND POTENTIAL CHALLENGES

Although the majority might prefer a more passive role in the process, reaching an agreement with clients in a way that meets both their expectations and our professional requirements can be a daunting prospect. This isn't only regarding possible challenges, but also from encouraging clients to feel sufficiently empowered to contribute from a position of understanding. Some counsellors, particularly when first starting out, find the process a source of tension. However, if a new client has read through our available marketing literature and made an informed decision to attend, they are less likely to be resistant to engagement.

Whilst plenty of time was hopefully spent within your training considering the range of boundaries in counselling practice, this should be balanced with considering the impact that each can have on the counsellor, the client and the alliance. To begin with, no amount of preparation in a classroom setting can totally remove all anxieties when being faced with a new client, and neither should it. The key to reducing potential barriers to a smooth working relationship with our clients is to employ a combination of clarity, flexibility, transparency and negotiation. This initial process can have a profound impact upon clients and can be for reasons we may not be aware of. Because of this, it is beneficial for all involved to encourage questions not just during the first meeting but throughout the time working together.

In addition to the initial process, there are other, more specific areas of concern that many counsellors experience at any point in their career. The following are just a few examples that have arisen during sessions with both new and experienced supervisees:

1. I'm not sure what the professional guidelines recommend.
2. What evidence are my decisions based on?
3. What am I legally required to offer?
4. How do I keep safe?
5. How do I keep my client safe?
6. What if there is a complaint about me?
7. How do I know that what we're doing is working?
8. Is the environment conducive to our working together?
9. How do I decide what to charge?

The good news is that as long as we can be clear about where our concern lies, it is considerably easier to find a solution that we are comfortable with. Whether this comes from our supervisor, our professional guidelines, course tutor (if in training), our colleagues, professional journal, additional reading, CPD or our line manager. The list isn't exhaustive but does highlight how many resources we have available to us when we reach a point of uncertainty. Even if none of these concerns have cropped up in your counselling work, having a strategy in place to face concerns should they occur is part of our professional preparation. If this is an area of concern for you, the above list can be used as a basic framework to reflect on in supervision. We should be identifying gaps in our knowledge and confidence so that we feel more prepared should an anxiety arise in future. Then we are making sure that our supervision isn't just reflective, but also strategic and preparatory too, reinforcing our own self-care.

As well as potential concerns regarding our professional practice, there are also uncomfortable or unexpected situations that can arise from our client. Depending upon how prepared we feel, in some instances these may be viewed as potential challenges to a counsellor. These might include:

1. A client disagreeing.
2. A client referring to previous experience that was different (better or worse).
3. External restraints such as working within educational setting.
4. Counsellor's lack of confidence.
5. Counsellor's fear of forgetting something.
6. A client might not feel sufficiently confident to contribute.
7. A very experienced and confident client working with a new and inexperienced counsellor.



8. A client being resistant to boundaries, interpreting them as being told what to do.
9. A client being distrustful.

The one aspect these all have in common is that they might suggest powerlessness but in the opposite way to that often assumed. Rather than the client feeling at a disadvantage, here the counsellor might feel that the equality in the alliance is compromised or fractured; that the client has adopted a challenging or controlling position and the imbalance of power has them at a disadvantage. This illustrates how the distribution and perception of power can distort the relationship and will be considered in the next chapter using these same examples.

### Questions for reflection

Here are some additional questions for personal reflection, which you might take to clinical supervision. You might also discuss them with colleagues in relation to your organisation's current boundaries. More ideas for reflecting on the professional aspects of our boundaries are covered in Chapter 3. Allocating development time to consider alternative responses and approaches might raise awareness of any areas you need to clarify. Avoid focusing just on counselling situations but consider your relationship with boundaries in other areas of your life.

1. What are my thoughts about rules in general?
2. How do I respond when I'm governed by rules?
3. Which therapeutic boundaries am I most comfortable with?
4. Why is this?
5. Which boundaries am I least comfortable with, and why?

If, in answering these questions you have identified any fears, uncertainties or worries, make a record of them and discuss them at your next supervision session. A feeling of resistance or discomfort with aspects of the contracting agreement may well be unintentionally communicated to your client. We are aiming to blend our professional theoretical and ethical grounding with our personal moral stance. Being comfortable and confident with the way in which we conduct our contracting lays a solid foundation for any future therapeutic work together.

### Chapter summary

This chapter has given us a basis for considering our relationship with boundaries and hopefully it has also identified any areas for development. The flexibility and negotiation of boundaries isn't just between the counsellor and client but also between the counsellor and organisation or company they work with. Boundaries should be a constant work in progress that reflect developments and changes in law, professional guidelines, research findings and feedback from those using our service. To balance that, we must ensure that our way of working is also compatible with our own values and moral compass.

### FURTHER READING

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