





Peer Counseling Fundamentals Week 4

Dr. Kutzen • 1/10/2023



Learning Objectives

At the end of this session, you will be able to:

- Recognize the importance of and examples of personal boundaries
 - Recognize when to share experiences and when to listen and how to appropriately self-disclose
 - Describe signs of bias, transference, and countertransference
 - Respond effectively when challenges in boundaries arise
- 
- 

Outline



1. Establishing Boundaries



2. Transference



3. Countertransference



4. Self-disclosure & Boundaries



5. Bias

Exercises






Establishing Boundaries


What are boundaries in a peer support relationship?

Why are establishing boundaries between you and your peer -client important ?





Case studies – What should you do?

- Janice has been receiving peer support services from your agency for years. While you are grocery shopping, you run into Janice's mom and she begins to ask how Janice is doing. What ethics or boundaries apply in this situation?
 - Tim is a peer with whom you have been working for several months. He has sent you a friend request on social media and asked why you have not accepted it. How would you answer and what ethical considerations need to be taken?
- 

01

Defining Transference

When a client projects their feelings, perceptions, or desires about someone else onto the counselor



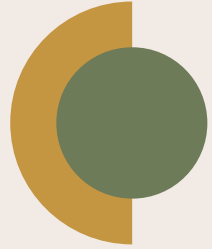
Examples of transference

- Client sees characteristics of their father in their peer support counselor
- Client attributes “fatherly feelings” to counselor
- May be positive or negative feelings
- Important information to monitor if a client attaches anger, hostility, adoration, love

02

Defining Countertransference

When a counselor projects their feelings, perceptions, or desires about someone else onto the client



Examples of countertransference

- Counselor finds themselves feeling protective and parental towards the client
- May remind the counselor of their own experiences of being protected or not
- If a client is different, “rubs you the wrong way”

Why is it important to identify transference and countertransference?



To contribute to developing a healthy relationship based on trust



To strengthen rapport between counselor and client



To establish clear boundaries for both

Recommendations for managing transference and countertransference?



Get consultation/supervision from a clinician



Research concepts for better understanding



Exercise self-care to deal with distress caused

03

Defining Self-disclosure

Counselor sharing personal information with the client during or outside of a session.

Disclosure may include thoughts, feelings, preferences, ambitions, hopes, fears.

When is it appropriate to self-disclose?



Most impartial is to review/determine if self-disclosure will help the client



Examine your reasons for self-disclosure



Counselor's responsibility to build self-disclosure skills that help client

Three methods for self-disclose skill-building

A The Normalizing Statement

When a client tells you a story, the peer support specialist can say, “If I was in that situation, I might feel X, Y, or Z. Do any of those fit for you?”

Three methods for self-disclose skill-building

B The Personal Story

Used to validate clients' perspectives or provide solutions. Client explains they are very anxious about a job interview, peer support specialist can say, "This happened to me, and I handled it by _____"

Three methods for self-disclose skill-building


C The Reactive Response

Gaining awareness that even if no self-disclosure, peer support specialist may be triggered by interaction.

- Reminders (conscious or unconscious) of similar experiences
- Emotional reaction may shift counselor role
 - to be equal or protector



Case studies – Which stories of self-disclosure are appropriate?

- Juan doesn't know if he should believe his providers who have been saying that recovery can be a goal for him. CPC Prem responds to Juan, "I know what you mean, they told me I could recover too, but I still have a crummy apartment and I'm still dealing with symptoms all the time."
 - DaQuan is working with Janie, who thinks that she can never get married because of her diagnosis. DaQuan says, "That's what they say: People like us won't have regular lives again."
 - Maxine and Carina are talking about the difficulty of dealing with the loss of a loved one. "I know what it's like to love someone who is gone. It's so painful. It feels, in the moment, like it's never going to end. I've learned that at least for me, there's no easy way through. Support and time has helped me. Still not easy. But it's helped."
- 

Case studies – Which stories of self-disclosure are appropriate?

- Rachel shared: “I can hear how hopeless you are feeling, Jake. And I know what you mean when you say that you wonder if anyone with symptoms can go back to school. I wonder if it would be okay to tell you part of my story. I had a really difficult time when I was first diagnosed, and was in and out of hospitals for a long time. I didn’t think I’d ever get out of day treatment at one point. But I always had a dream of doing something important. It took me a little while, but I eventually found a support person who thought I could do it, too. She helped me start to take steps toward my dream. I had to start slow, taking one class at a time at first, but I was able to make my way in school, far enough that I am working now and love my job. I never thought I could do this. I learned that I am smarter than I thought I was, and that I am someone who can really keep at it, even when times get tough. I have been really glad I took a chance on working on my real goals. I believe in you, and I would be happy to work with you on what is important to you

04

Responding to Bias

Counselors may face bias on the basis of age, religion, ethnicity, gender, race, sexual orientation, or age. These are unfair as counselors' expertise, character, and education is devalued and risks a negative relationship that limits the success in working together.

Suggestions for handling bias (1/2)



Examine your own social/cultural views to prepare for bias



Have an open conversation getting to the core of clients' views to prepare for biases



Inquire about clients' views/biases about *you* which leads to understanding their vulnerability and who they are

Suggestions for handling bias (2/2)



Introduce suitable ways to address bias based on counselor's best judgment: explore situation or do not explore or bring it up



**Keep focus on the client for effective outcomes.
Are biases relevant to work with the client? Who benefits?
Discussion may make you angry, resentful, or hurt.**



Seek support and training as it is important to share experiences to gain support from mentors, colleagues, and experts.




Attend trainings, lectures, and workshops to better navigate these challenges.

EXERCISES – Is this ethical?

- On Tuesday, Jada was working with Marcus, a young man of 21 years, who had been using peer services for about 6 months. Jada and Marcus just started working together last month. She noticed that while she was trying to gain his trust and start a partnership, he had started to get more and more flirtatious. She oriented him to the goals of the peer support relationship, but it didn't seem to deter him. Jada wondered if she was doing something to lead him on, or whether he expected that all relationships with women were supposed to be romantic. She was starting to dread meeting with him.
- Charlotte, a CPC, has started calling one of her peers every night, "just to say goodnight."



EXERCISES – Is this ethical?

- Joshua is a CPC who has been working with Awan, a peer from the local Native American community. They've worked together for nine months and are ending their work together today. As part of their good-byes, Awan presents Joshua with a gift from his tradition that is worth about \$25. Joshua knows Awan would be offended if he did not accept the gift. Joshua is concerned, as his agency has a policy against accepting any gifts. Does accepting the gift violate any ethics? Does not accepting the gift violate any ethics? What are some possible responses?
- 

EXERCISES – Is this ethical?

Sunny is supporting Alison, a woman who has not found services to be useful to her in the past. With Sunny's support, Alison has felt hope for the first time in a long time and has connected with someone in a meaningful service relationship. Alison has decided to cut down her medications, especially the antipsychotics that leave her feeling numb and sedated. Sunny asks Alison if she has talked to her doctor about her decision, and Alison says, "No, she doesn't understand me at all. I'm not telling her anything. And I don't want you to say anything either. You said our meetings are confidential unless I'm suicidal or going to kill someone" Should Sunny keep this information to herself? If she does, will it violate any ethics? Will sharing the information violate any ethics? What are some possible options?



Conclusion

Summarize lessons learned.

Questions?





Assessment

- Rubric (practice to self evaluate, bring to mentor next meeting)
 - Plan (last 2 classes present to group)
 - Quiz (easy last class)
- 