Saint Luke Institute

LukeNotes

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Good Fences Make Good Neighbors

by Sam Stodghill, Psy.D.

Robert Frost once said, "good fences make good neighbors." This may seem to be about keeping people out of our personal space, but fences also communicate who and how we want to allow people in.

The types of fences we construct often depend on the fences others have built near us, especially those that are not well built. We need to recognize and respect their fences if we expect them to be aware of and respect ours. The same is true for boundaries. Healthier personal boundaries make healthier relationships.

Just as good fences help make good neighbors, healthier personal boundaries make healthier relationships.

What is a personal boundary?

A personal boundary can be described as the space between people (physical or emotional) that marks where you end and another begins. Boundaries guide how we interact with others and how we allow them to interact with us. An example of an emotional boundary is the degree to which we allow other peoples' emotional states to influence our own.

Boundaries fall along a spectrum, ranging from enmeshed to balanced to rigid (Brian Grady, briangrady.wordpress.com). Individuals with enmeshed boundaries tend to be too close and dependent on others. They often rely heavily on others' opinions, compromise their values to avoid conflict, share personal information too quickly and have difficulty saying "no."

Individuals with rigid boundaries tend to keep people at arm's length. They may rarely share personal information, talk about feelings or ask for help. People with either enmeshed or rigid boundaries often struggle to get their needs met in direct or healthy ways.

Our boundaries should be balanced and flexible so we can adapt them to our relationships and adjust them as relationships change. The type and depth of a relationship, and the level of trust, influence the degree of openness. Boundaries also vary based upon our interpersonal roles, with different boundaries with friends, family and co-workers. We often have differing boundaries toward ourselves and in our relationship with God .

Responsibilities and risks

Monitoring and maintaining healthy boundaries is particularly important for priests and religious. Their professional roles give them both the privilege and the responsibility of interacting with parishioners and others in unusually personal ways. This unique dynamic can create an imbalance of power and vulnerability for a parishioner, ultimately demanding a heightened ethical responsibility to safeguard boundaries (Becker & Donovan, 1995). Their vocation also places them in relationships that frequently comingle personal and professional roles. Overlapping, complex roles increase the risk for boundary violations – intentional or not.

The vocation assumes a strong commitment to being selfless and living an unusually public existence. Also, one's self often is the primary instrument of service (e.g., time, knowledge, emotion, faith). This can lead to a tendency to overextend and neglect one's own needs, increasing the risk of physical and emotional burnout.

Subtle danger signs

As in other professions, codes of conduct for clergy and other church personnel help identify and prevent egregious boundary violations. However, serious violations often take root in more subtle violations that build over time. Subtle violations can cause problematic consequences even if they do not clearly cross ethical or legal standards.

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Case Study **Fr. Tim**

by Margaret Crowley, SHCJ, LCSW-C

Father Tim is a 65-year-old priest in a religious community. He has experienced bouts of severe depression through the years and has tended to withhold this suffering from others because it feels like a stigma.
In his youth, he grew up with a demanding father and a silent mother. He developed a style of maintaining obedience in order to please authorities, while denying opportunities to make legitimate requests so that his own needs could be met. He feels unworthy and undeserving – even somewhat marginalized in his own community.

One might say that these early wounds have actually become his gift because he gives generously of himself, most often in hidden ways so as not to call attention to himself. There is a downside to this, however.

> This can be flattering at first, but eventually one feels the pressure to respond.

It appears that he desires to fulfill unspoken needs by entering into the lives of others in a way that could be seen as intrusive. His interest and involvement in the lives of others "fills him up." He needs to be "in the know," gathering facts about others so as to anticipate their needs.

When a community member is the person of interest, Fr. Tim asks multiple questions, inquiring about how the person is doing, where he has been, what he's up to, etc. This can be flattering at first, but eventually one feels the pressure to respond. A boundary has been crossed – all in the name of care. Yet, this comes from his neediness disguised as "care."

Over-caring

Another confrere, Father Jack, observed that, at times, Fr. Tim would take his caring to excess. He over-attached himself to the object of his caring, identified too much and wanted to see things go a certain way.

Other members of the community felt that his doting on them was actually an effort in controlling them. One individual even told him, "You are not my monitor."

Differentiation

Fr. Tim had not sufficiently developed a personal sense of self.

Beginning very early in life, his basic self had not sufficiently differentiated or separated from the (co-dependent) emotional system of his family. He entered religious life and embraced the Gospel mandate to care for others.

Over the years he felt deeply hurt when others rejected what, in his mind, was genuine care. He had, in fact, yielded his own autonomy because of a heightened need to belong. He had forsaken his own needs to provide care for others.

It became increasingly difficult for him to share information or opinions from his own personal perspective, thus denying the community his unique and valuable insights.

One might say that his boundaries were enmeshed and the members of his community just got used to this style of interacting. They grew to love him but didn't actually know who he was. While infringing on the boundaries of others, he was, ironically, keeping quite a rigid boundary regarding his own healthy transparency with others.

He confided in Fr. Jack one day following a period of loneliness. He had begun to wonder why he was so lonely since he was so engaged in the lives of others.

Fr. Jack was pleased that he had opened up. He responded by encouraging Fr. Tim to take some steps to be with others in a new way; that is, to

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Fr. Tim, *continued*

allow himself to share more about his own personal life.

Checking In

Fr. Jack reflected on this as a new opportunity for the entire community. He suggested a non-threatening process of "checking-in" when the community gathered each month.

Each person would be prepared to share what his activities had been, any concerns about his health, his loved ones, or what events/challenges had affected him since their last meeting. This is an approach that his friends in another community and in a diocesan priest support group had found helpful.

At first, this was difficult for many in the group, especially Fr. Tim.

Over time, and with a consistent group process, Fr. Tim discovered that others responded to his new type of sharing and to his feelings. This was not easy for him but, in time, he was able to feel positive effects and good feedback.

Fr. Tim improved in his ability to believe that he was good and was appreciated just for himself. He continued to "be for others" but in brand new ways!

Margaret Crowley, SHCJ, LCSW-C, is a therapist on the clinical Continuing Care staff of Saint Luke Institute.

To ensure the confidentiality of our clients, names, identifying data and other details of treatment have been altered.

Boundaries, *continued*
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Preventing violations requires honest, ongoing self-reflection. In *At Personal Risk*, Marilyn Peterson identifies four potential danger signs of developing boundary violations. These include situations in which: 1) roles are reversed (e.g., parishioner is supporting pastor), 2) a double-bind occurs (e.g., principal uses a young volunteer's eagerness to belong to leverage her into taking on more than she should), 3) a secret is involved (e.g., DRE withholds information, resulting in an unfair advantage), and 4) a professional privilege is indulged (e.g., pastor uses authority to further a personal need).

Creating healthy boundaries

- Develop a healthy personal life. Attend to self-care needs such as adequate rest, nutrition and exercise. Maintain intimate friendships outside of your ministerial life.
- Keep a professional view. Regularly reflect upon appropriate boundaries for ministerial relationships.
- Seek support. Find a mature colleague or group for regular supervision. Make yourself accountable to others and discuss potential issues openly. Engage in spiritual direction and include discussions of complicated relationships with parishioners.
- Identify limits and weaknesses, including your emotional, physical and spiritual limits. Consider what types of boundaries are especially challenging for you to create and maintain based on your own history .
- Pay attention to feelings. These can be cues for boundaries that need attention. For example, one often feels resentment when trying to meet unrealistic expectations or discomfort when someone is physically or emotionally too close.

Maintaining healthy boundaries helps ensure our safety and the safety of others, encourages balance in our lives, and provides definition between work and personal life. It requires an ongoing commitment to honest self-reflection, accountability and preventative measures.

Sam Stodghill, Psy.D., is a psychologist on the clinical staff of the Saint Luke Center, Louisville, Kentucky.

Tips for creating healthy boundaries

- Develop a healthy personal life
- Keep a professional view of things
- Seek support
- Identify limits and weaknesses
- Pay attention to feelings

New design, more content for SLIconnect.org

Saint Luke Institute has launched a redesigned and updated website for SLIconnect, our education resource for healthy life and ministry.

The new site brings all of the Institute's education opportunities - online, in-person and publications - together in one place. Previously, SLIconnect.org only included online programs.

The site also includes a member login area and free trials for group subscriptions. Visitors can browse by topic or by webinars, on-demand (e-workshops and archived webinars) or in-person workshops; look at presenter bios; and read Lukenotes and Renew & Reflect, as well as Connections, a new newsletter launching in August.

Upcoming webinars include

- Boundaries and Their Impact on Ministerial Effectiveness (July, Emily Cash, Psy.D.)
- Celibacy as Lived Experience (September, Br. John Mark Falkenhain, OSB, Ph.D.)
- Embracing Transition: Spiritual Growth in Times of Change (September, Sr. Jane Becker, OSB, Ph.D.)

SLIconnect
Connect. Grow. Renew.

Msgr. Steve Rossetti named president

Msgr. Steve Rossetti, Ph.D., president of Saint Luke Institute from 1996-2009, has returned as president. Sheila Harron, Ph.D., is serving as CEO. The changes follow the resignation of Msgr. Edward Arsenault in May 2013.

Fr. Jim Gordon, a priest of the Diocese of Richmond, returned in July as a member of the clinical staff.

Support our ministry

"The work you do at SLI is not just a career but a vocation in service to God by serving men and women who are in need of help."
- former client

Please consider making a gift in honor of a priest, consecrated sister or brother who made a positive difference in your life. Donate online at www.sli.org.

St. Louis Consultation Center Partnership

Saint Louis Consultation Center, a national treatment center for Catholic clergy and men and women religious that offers an intensive outpatient program, has been acquired by Saint Luke Institute.

The programs will remain distinct from each other. The new partnership will allow the staffs to collaborate professionally and clients to more easily access the program that best fits their needs.

Msgr. Stephen J. Rossetti, president of Saint Luke Institute, welcomed the new connection between the programs and staffs in a June 3 announcement. Dr. Sheila Harron, interim CEO, called the Center "a fine organization, with a gifted staff committed to quality care. I look forward to our future collaboration."

Sr. Jean Meier, CSJ, Psy.D., is the Center's clinical director.

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