The umbrella of boundaries, love, and grief

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Abstract

While working in the life-space of children and youth it is hard to imagine an interaction that does not contain some level of caring or love that guides interventions and interactions while being governed by professional boundaries. Caring and love in practice requires a level of reflection that acts as a check to ensure these boundaries are adhered to. This article is a reflexive moment in an experienced Child and Youth Care Practitioner’s career when a youth who she had cared for was involved in a motor vehicle accident and died.

Keywords

Love, grief, relational practice

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Warm, soft tears streamed down my face, as I started to read a message from a past co-worker that a youth I had worked with had passed away. Shortly after this, my phone buzzed – it was an email from a past supervisor emailing me, which caused the tears to flow faster until I could barely see the words on the computer screen. 'I just heard on the news this evening that [...] was killed in a car accident last night, out my way [...] I know he held a special spot in your heart....’ (Personal communication, July 5, 2014). My mind could barely process the words. I had worked as his key worker for about a year, where I was mainly responsible for handling contact with professionals, completing paper work, largely involved in contact with his family and social worker. Typically, this role seemed to establish a stronger relationship with the young people I worked with, which was true in his case as he would call and come by the group care facility to visit on a regular basis after he was discharged from the program. I felt a familiar numbness begin to overwhelm me in a way I had never anticipated – grief; I could not make sense of the level of the grief I was experiencing in relation to my professional career.

As I sat trying to process my feelings — grief and confusion — I reverted back to what seemed to be an automatic response, where I often found myself during my career; the reflecting, which came somewhat naturally after many years of repetition, experience, and deliberate intent to ensure my practice was professional and within ethical boundaries. This heartache I felt took me to a place where, for the first time in years, I questioned whether my relationship was professionally appropriate – could this kind of pain be felt without crossing those lines?

In the late 1990s, when I began my career as a child and youth care practitioner, it was made clear to me during my education and employment that professional boundaries were required and there was little scope – at that time – for love in practice. I can still recall in 2001 the first time a child said, ‘I love you’. I was caught off guard and unsure how to respond so I simply said, ‘Thanks’. What else could I say? ‘I love you too’? When I shared this moment with a co-worker they gasped as if I had been met with a moment of crisis. This may seem quite trivial in contemporary practice; however, at that time alarms and red flags would have been coupled with questions of unclear and unprofessional boundaries. Looking back, what a sacred gift I had just received, ‘I love you’ from a child who was diagnosed with an attachment disorder. These were the children who were at this time labelled as being relationship resistant yet they were the children with whom I seemed to build the strongest relationships by practising activity based and relational child and youth care.

Looking back, I am able to recognise that the truth is I loved them all, each one for different reasons but I know I loved them all. If I love food, the sunshine, the beach, my dog, my sweater, and my car then why couldn’t I love a child I was in a professional relationship with? I also loved my job, my career, my field, my co-
workers and my employer. However, at this time in my career the word ‘love’, as I knew it, would not include professional boundaries and objectivity. It took me a long time to recognise how love could be involved in my daily practice as a child and youth care practitioner. Relationships allow a sense of belonging in the world of trauma and pain – the world that many of our youth live within – supporting the actualisation of the resilience needed to overcome their struggles. I have come to believe that the moment a young person offers me the opportunity to be in a non-exploitive, caring relationship with them I will view it as the ultimate gift they are able to share with me. As child and youth care practitioners, we use relationships to create safety and a sense of belonging where young people are then able to find the courage to love and care about the relationships; where true change can begin to occur.

I cried for hours after reading the email, and each time I gained control over my emotions, I would recall a memory that I would try to suppress as I tried to focus on my preparation for the next day at work. I felt guilt for how much I obviously cared about this young man; I felt my grief was excessive. So many times I had been told throughout my career to have professional boundaries; had I lost objectivity? Do boundaries mean not to care or love the youth in our care? I had no answers – only tears. I told my husband about the boy’s death when he came to my office to say goodnight. He placed his hand on my shoulder with a sympathetic and confused look, not knowing how he could support me; he couldn’t understand this internal tug-of-war I was feeling. As he headed to bed, I truly felt alone, not knowing who could help me understand why I felt like I had lost someone I loved.

The words the young person – with the most contagious smile – sang so frequently at the top of his lungs echoed through my memory:

When the sun shines, we shine together
Told you I’ll be here forever
Said I’ll always be your friend
Took an oath that I’m a stick it out till the end
Now that it’s raining more than ever
Know that we still have each other
You can stand under my umbrella
You can stand under my umbrella, ella, ella, eh, eh, eh
Under my umbrella, ella, ella, eh, eh, eh... (Rihanna, 2007).

This memory left me, again, sobbing uncontrollably; this level of grief left me with an extremely uneasy feeling. It is an expectation as a professional to have emotional self-control in practice and this situation was related to practice. Over the course of the next couple of days that song would play on the radio more times than I could count, bringing with it feelings of both grief and comfort – I heard it as a message.
Who could I turn to that would understand the grief I was experiencing? I knew my family could not understand the relationship complexity that can be involved in child and youth care practice; some of my co-workers might, but I knew there was only one person I could talk to: my first supervisor. I admired her, and viewed her as a leader in relational child and youth care practice; I also knew she experienced the loss of a young person who was previously in her care.

We had recently reconnected on social media, so I took a chance and in that moment, logged in with tears in my eyes. Luckily, she was online. I knew that she would be aware of the youth’s passing, as she still supervised in the organisation. I mentioned that I was struggling with his passing and asked if she minded trying to answer some questions I had. She graciously agreed. I asked her the simple question: ‘How can I be so upset?’ She acknowledged, in what seemed to be a matter of fact way, ‘You cared about him’. I processed her response a moment, I knew she was right. I did not need to reflect any further on that part of my struggle. Though the truth is, I cared about them all. This youth, though, lit up the room when he smiled and sang, his emotions and pain were also present in his eyes when he felt them and when he became angry, people knew about it! Sadly he was often given up on, though his being diagnosed with an attachment disorder never seemed to discourage the interactions and relationship building process that I actively engaged in with him. This light would no longer be seen. His pain, and search for love, had ended.

‘How do we grieve the loss of a youth?’ was the next question I asked my past supervisor. ‘Just like you grieve anyone you care about’, was her reply and in that moment I realised I needed to have permission not only from her but from myself; to grieve (Personal Communication, July 2014). Tears began to stream, guilt free, down my face for the first time since I had learned of his death. Had she not been open to supporting this process, I am unsure as a child and youth care practitioner that I would have had the support to grieve the loss of this young person in the same way. I was grateful for the mentorship she provided through the years and while I struggled to process my loss.

That is when it began to happen, the mourning process. I allowed the memories to enter that somehow brought a smile through my tears. Perhaps a favourite was, when my family was skiing and he was there with his foster father. This was long after he left the group home where I was his key worker and we skied a couple of runs together before we left for the day. He smiled that day with true happiness and freedom in his eyes each time we quickly reached the bottom of the hill. He thanked me for skiing with him, gave me a quick hug and parted ways.

During my career I accompanied many youths on ski trips, outings, tennis matches, skating trips, amusement park outings, to the beach to jump and play in waves, and on many other planned or unplanned programs that I viewed as a
privilege to be part of. These activities allowed the young people to have fun, do fun things and, most importantly, to be in a healthy relationship. To demonstrate that I was there because I cared and wanted to be, I was always intentional in planning the outings that I took youth on, conversations that I had with them, meals that I made, structured programs that I facilitated.

These are the moments that likely mattered the most and often afforded the youth the same opportunity to care in return and to engage in all of these wonderful moments that allowed me to build relationships on each shift. Whether it was making an attempt to ensure I spent time with each youth in the residential program I worked at, ensuring I was consistent in my approach, having the ability to admit I was human and could be wrong, to actively listen to their complaints and help them come to their own solutions, to give them a sense of belonging and make every attempt to make them feel capable of achievements; I showed up each shift intent to show the youth they mattered and that I cared. I hung in; if one approach failed I would try another – after all I knew the pain was the roadblock and not the desire to be cared for. I was genuine in everything I offered, not because I had to do something but because I wanted to and they knew it. Children and youth are smart and often underestimated. They know when they are being manipulated, lied to, respected or cared about. I always tried to have reasonable and developmentally appropriate opportunities for the youth to accomplish to allow them to feel success and competence. Throughout my career I found it natural to use a relational child and youth care approach.

I believe that it was my reflection and recollection of the relationship built with this young man that solidified my understanding of the approach I practised in the daily life-space of the children and youth I cared for by incorporating love within it. My approach was coupled with, respect, passion, empathy, consistency, connectedness, intention, concern, but most importantly love.

My email response to my supervisor was, ‘He sure did. I too heard this sad news tonight and will be attending the funeral without a doubt. Such a sad end to a great young man’s life. I know he suffered a lot throughout his life. Thanks for messaging me’. I held true to myself and the relationship with this young man; I allowed myself to mourn. I went to his memorial service, though not before making a wrong turn and signing the wrong guest book. I smiled knowing that somewhere he was sitting laughing at the situation I was in. I politely exited and found my way to pay my respects to him and his loved ones with the hope he rests in peace knowing he was loved by child and youth care practitioners.

About the author

Michelle began working in Nova Scotia as a Child and Youth Care Worker in the summer of 1999 after graduation from Holland College in Prince Edward Island.
Michelle gained experience in numerous programs and roles for HomeBridge Youth Society: long term and short-term programs, male and female, leadership positions, key/primary worker roles, programming coordinator, trainer, facilitator and mentor. Michelle also had the privilege to work with a number of Indigenous young people and their families on a contractual basis through youth support work, family support work, tutoring, and respite foster care. Michelle wanted to make a larger impact on the field of child and youth care and began to explore the possibility of teaching part time at Nova Scotia Community College in the Child and youth Care Program. Michelle is currently the lead Child and Youth Care Faculty at NSCC Waterfront Campus. Michelle returned to university, completed the Bachelor of Arts Child and Youth Study at Mount Saint Vincent University earning the Senate Award for Highest Distinction.

**References**


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