Dilemmas and Conflicts of Various Professional Roles within a Human Service Agency

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Abstract
The purpose of this article is to analyze the workplace experience of three groups of professionals at the Chilean National Service for Minors (Servicio Nacional de Menores, SENAME) through the study of the tensions and dilemmas they face in carrying out their roles. This public institution is tasked with protecting and caring for the most vulnerable children and adolescents throughout Chile. By systematically studying the subjective experience of its workers, this article opens perspectives to understand organizational dynamics operating beneath the institutional surface. Among these dynamics, there are identified the isolation and atomization of workplace relationships, the idealization of own role, the lack of emotional and professional support, and persecutory anxieties. In this context, the article describes the main "collective social defenses" that professionals employ to face high levels of anxiety and conflict that the work done in this institution stirs up.

KEYWORDS
anxiety, idealization, role, social defense system, work relationships

1 | INTRODUCTION

Public institutions face different challenges than do private organizations. While the latter primarily deals with market rules, public institutions must also consider ethical and emotional aspects that greatly impact the lives of citizens. These particular conditions cause public institutions' primary purposes to be constantly challenged, thus making them into repositories for collective social anxieties. Public institutions must achieve an adequate level of technical efficiency in conjunction with value perspectives connected with public service. This entails coping with “primary
dilemmas” that are often contradictory and compete with one another in the institution’s dual mandate of ensuring its survival and of benefiting society as a whole (Hoggett, 2006, p. 188).

Therefore, public servants themselves experience all of the contradictions, tensions and value dilemmas that are not resolved at the level of public policy design. Many of these contradictions are created by the various types of demands citizens make on the public system, transforming it into a depository for that which individuals cannot contain within themselves. In such a context, public servants must contain the anger and frustration found in the system, thus becoming scapegoats that the government or citizenship can blame for issues that have not adequately been addressed and solved (Hoggett, 2006; Obholzer, 1994).

From this perspective, the systematic study of public officials’ subjective experience brings to light the challenges facing the institutions in which they work. The purpose of this article is to analyze the work experience of three groups of professionals at the Chilean National Service for Minors (Servicio Nacional de Menores, SENAME), by studying the dilemmas they face in carrying out their roles. This public institution is tasked with protecting and caring for the most vulnerable children and adolescents throughout Chile. Organizational role analysis (ORA) was carried out in order to explore the conflicts and contradictions these professionals face (Newton, Long, & Sievers, 2006). This method provides opportunities to examine the conscious and unconscious dynamics underlying the dilemmas individuals deal with in carrying out their roles, with the purpose of opening up new alternatives in their jobs. Through the subjective exploration of roles, this article opens up perspectives to understand the organizational dynamics operating beneath the institutional surface (Huffington, Armstrong, Halton, & Pooley, 2004). In this scenario, it is especially important to determine the main phenomena that prevent SENAME professionals from adequately taking up their roles. The article also examines the institution’s main “social defense system” that protects individuals from the high levels of anxiety that their work produces (Dejours, 1998; Jaques, 1955; Menzies, 1960). In sum, this study seeks to obtain a broad perspective of SENAME’s social and institutional context by analyzing its employees’ subjectivity.

2 | THEORY

2.1 | Organizational Role Analysis (ORA)

ORA is a consultancy method grounded on psychoanalysis and systems theory, which is used for studying and understanding the conscious and unconscious aspects involved in performing a role within an organization (Brunning, 2006). This analysis of roles is based on the assumption that roles are shaped by the double influence of the organization and the individual persons that perform them. A role is defined as a regulating principle held in a person’s mind that is forged through the relationships he or she establishes with individuals and groups that belong to the organizational system. A role is a mental construct that cannot be conferred externally. It is created through a complex learning process based on the experiences a person has in the organization according to the changing requirements of the context. Carrying out a role is always a dynamic process that requires being aware of a multiplicity of factors, which may hamper the person’s capacity to adequately manage the system’s primary tasks (Reed & Bazalgette, 2006).

The role comprises an area that is at the interface between a person and an organization (Figure 1). The person brings to the role all the personal characteristics, attitudes, values and capacities that have been developed throughout life. These characteristics are influenced by the organization, which is comprised of the primary tasks, functions, cultures, structures and working relations (Reed, 2001). The process of taking up a role is constantly challenged by the differences between perspectives, the conflicts between roles, and the lack of clear and effective communication among all involved parties. Furthermore, the changing conditions within the organization and its surrounding context impact heavily on the processes of construction and execution of a role, which are influenced by the psychosocial dynamics that emerge from experience (Sievers & Beumer, 2006).

Role consultation seeks to analyze roles in order to reconcile their meaning at the individual and organizational levels, and thus, to help a person effectively “manage oneself in the role” (Lawrence, 1979). This means using personal
authority with autonomy and responsibility to define and carry out tasks according to the system’s shifting needs. This task requires being in direct contact with the unconscious processes that envelop relations with the organization, while the person adopts a questioning stance that enables him or her to lead changes (Krantz & Maltz, 2009).

During the role analysis process, the consultant encourages reflection in order to understand the dynamics that influence how the role is carried out and the perceptions held about the organization. This methodology is based on the client’s self-assessment to uncover problematic situations that can be improved with the purpose of developing a constructive relationship with the organization. The consultant thus becomes a process facilitator and not a problem solver. The role analysis process constitutes a space in which the client can reflect upon the experiences of roles and suggest a course of action to pursue (Armstrong, 2005). Once the limits of roles are elucidated, clients gain a better understanding of the external expectations as well as their own requirements. Furthermore, they develop a better idea about their contributions to the organization on both emotional and technical levels. The process is carried out during meetings in which client and consultant work together to build a thoughtful, containing space of trust (Krantz & Maltz, 2009).

Reed and Bazalgette (2006) describe several stages in the ORA process. During the first phase the role must be found, exploring the emotions, thoughts and dynamics involved in the performance of a role. The mental images connected to the role can then be examined and a more appropriate regulating principle for the individual can be reformulated. Secondly, the role must be created by articulating the ideas obtained during the previous phase, which gives rise to an integration of all the systems involved in understanding the role. It is important for the person to comprehend that the relationships built with the other members of the organization influence the creation of the role. During this stage, work hypotheses are developed regarding the level of consonance or dissonance that exists between the client’s and the organization’s perspectives of the role. After creating the mental image about the organization and the person, and also expanding the hypotheses about the organizational dynamics, the client is ready to take the role and to implement changes. Each session can contribute to expanding and deepening the client’s understanding, as he or she “becomes involved in an iterative process of re-finding, re-making and re-taking the role” (Reed & Bazalgette, 2006, p. 55).

In the ORA process, projective techniques can be used to assist the process of exploration and reflection, which is why the consultant often asks the client to produce and analyze drawings. This method enables the examination of unconscious aspects, as it is likely that various issues would be difficult to discuss or explain verbally.

*Drawing is a powerful tool in the work of socioanalytic exploration. Its power resides in its capacity both to give simple expression to complex feelings and ideas about organizational life, and to provide a vehicle for change and adaptation for the individual and the group during the sharing and exploration of what the drawing reveals.* (Nossal, 2013, p. 67)

During an ORA session, clients are asked to visually portray their role experiences within the organization. They are then asked to describe and explain their drawings. The consultant can intervene to ask for clarifications about the

![Organizational Role Analysis Model](image-url)
elements, colors, shapes or any other aspects. Thirdly, the consultant uses the drawings and explanations to create several hypotheses about a client's role in the organization. Finally, clients have the opportunity to close the analytical space by discussing any aspect that draws their attention.

It is essential for the consultant to be able to provide an appropriate space for clients to feel comfortable during role analysis. Furthermore, it is necessary for the consultant to be able to delve into and capture conscious and unconscious aspects revealed in the analysis that are relevant to the role and the organization-in-the-mind of the clients (Hutton, Bazalguette, & Reed, 1997). Lastly, it is crucial that the consultant adopts a "binocular perspective" of the situation, which helps him or her to simultaneously observe and analyze the reality of the clients and the system in which they work (Bion, 1962; Biran, 2006).

2.2 Social Defense Systems

Institutions are social structures in which people can collaboratively achieve different kind of purposes. This turns them into special containers for hosting mental and emotional elements that individuals transfer into them, both consciously and unconsciously. Based on the work of Melanie Klein and Wilfred Bion, the seminal research performed by Jaques (1955) and Menzies (1960) describes how institutions are built on collective anxiety and desired and undesired aspects that people project onto them. This anxiety arises from the institution's primary task and inevitably affects the nature of individuals' work. People use "defensive techniques" to handle the anxiety that results from the specific way the work is done. These techniques have a collective nature that is shared by the members of the institution and is expressed through the work practices. Adhering to the workplace culture helps individuals avoid experiences of anxiety, guilt and uncertainty once anxiety-provoking situations are eliminated. The adherence to this culture is sustained in an unconscious way by what Menzies (1960) calls a "social defense system".

The classic study carried out by Menzies (1960) in a public hospital, describes how nurses avoid the anxiety that emerges from the emotional challenges of their work by following a series of unreflective, institutionalized work practices. By clinging to standardized work practices that insulate them from the consequences of their actions, nurses attempt to manage powerful anxieties that result from the intimate contact with patients, pain and death. These practices include strict adherence to workplace rituals, the segmentation of tasks and responsibilities, depersonalization, denial of feelings toward the patient, among others. While the anxiety experienced by them can be denied and contained, they are forced to incorporate the institutional defense system as a sort of compensation, which tends to become an aspect of external reality that is very difficult to oppose or change. Social defenses against anxiety refer to aspects that exist independently of the institution's members, but "that are utilized by people to buttress individual defenses through processes of projection and introjection" (Krantz, 2010, p. 194). Individuals adjust to the institutional defense system to the detriment of their own personal experiences that are frequently at odds with the collectively instituted order. This state of affairs has serious consequences, as anxiety avoidance leaves individuals weakened and insufficiently connected to reality, which decreases the ability to modify or face anxiety in a realistic manner.

Long (2006) claims that the notion of social defenses against anxiety is a relevant conceptual framework, which helps to understand why institutions can remain cohesive and sustained over time, and why change is so difficult to implement. While the action of social defenses against anxiety allows people to work in quite demanding and anxiety-provoking conditions, it can become problematic when the defense system hinders engaging the task. The disengagement of the task can be very frustrating and demoralizing since it weakens personal and collective capacities and resources. Consequently, instead of developing their subjectivity within a role, individuals develop "unconscious collusions or agreements to distort or deny those aspects of experience that in phantasy give rise to unwanted emotions" (p. 288).

The social defense system that is contained within the institution operates inside of an institutional context that is much larger, making its operation even more complicated. From Bain's (1998) perspective, this defense system functions as a "system domain" comprised of all of those institutions that have a similar primary task and share
systems of authority, policies and procedures, budgets, and technology. The close interconnection established by
contemporary organizations complicate their functioning both on the institution's internal level as well as when join-
ing with other institutions in the pursuit of common goals. The institutional interconnection of the "system domain"
makes modifying the social defense system of a specific institution more difficult, as they are an expression of an
overarching institutional structure.

3 | METHODOLOGY

3.1 | Gathering Data

The context of the research was a certificate program held at the Universidad de Chile for SENAME's employees
working at centers that are directly administered by the institution. These centers are tasked with carrying out pro-
cedures and penalties set forth by a court when adolescents between 14 and 18 years of age commit a crime. One
module of the certificate program was an ORA unit, whose main goal was to develop professionals' core management
skills. This unit was divided into four sessions of four hours each. Every group of professionals did the same program
but worked separately. The students that took part in each program included 24 Juvenile Correctional Center
Directors (all of the centers throughout the nation), 28 Clinical Intervention Professionals (CIPs) and 18 Training
Coordinators (TCs).

In the ORA sessions, the projective drawing techniques were employed. The first step was for each participant to
make a drawing of his or her role within SENAME. Afterward, pairs of professionals worked together to come to an
agreement and make a single drawing to integrate their role experiences. In total 35 drawings were made; 12 from
the Director group, 14 from the CIP group and nine from the TC group.

The drawings were analyzed in sessions of approximately 45 minutes per drawing in each respective group. Each
group was divided in two in order to provide more space for participants' reflections. First, each pair of presenters
described their own drawing with help from the consultant, who was also tasked with facilitating and expanding
the understanding of the elements present in the drawing. Afterwards, the extended group developed new hypoth-
eses that helped deepen the role analysis. Lastly, the presenters finished the exercise by sharing any remaining
thoughts about the role analysis process, which created a space for a final reflection. Theoretical lectures about
the methodology and associated concepts preceded each session, with the purpose of deepening the group's under-
standing, by integrating theory and practice.

Each session was observed and audio-recorded for purposes of data collection. Moreover, a psychoanalytically
informed method of observing organizations was used (Hinshelwood & Skogstad, 2000). This method, carried out
by two trained researchers in the methodology, allowed for a direct report of the main phenomena and dynamics
of every session and complemented the analysis of the verbatim transcriptions.

3.2 | Data Analysis

After the data gathering process, an exhaustive and detailed analysis of the collected information was carried out. It
was done using a qualitative method of analysis in order to inductively gather knowledge using detailed study of the
texts. The qualitative research used a naturalist and interpretive approach to understand the meanings that individ-
uals attribute to phenomena that take place in social reality (Ritchie, Lewis, Nicholls, & Ormston, 2013). Open coding
(Strauss & Corbin, 2002) of the session transcripts was done during the first stage. The goal of this analytical process
was to identify concepts and uncover the primary properties and dimensions, as well as to examine the data and
relevant content in detail.

Afterwards, the codes were grouped in accordance with the similarities of their content and their relationship to
the revealed phenomena. The objective of this stage was to connect the codes as a function of their explanatory
capacity to create categories in order to describe the most relevant phenomena. Names were assigned to these
categories during the process. If more clarifications were needed, sub-categories were identified as well. This "axial codification" process helped connect the various categories and establish an interpretation of the primary dilemmas and conflicts facing the three SENAME professional groups (Strauss & Corbin, 2002). Both shared and distinct characteristics of the professionals' workplace experiences were examined in order to develop a broader and systemic view of the functioning of the main phenomena described through analysis. Finally, this analysis was integrated with the information previously gathered in the observation process during the ORA sessions.

To reduce the biases of the qualitative analysis, the two researchers that observed all the sessions analyzed the data, and a third one reviewed and then discussed with them the quality and accuracy of the analysis. This process was systematically carried out until analytical consistency among the group of researchers was obtained.

4 | DESCRIPTION OF THE ORGANIZATION

The SENAME is a public entity that collaborates with the justice system and is under the Ministry of Justice. Its stated mission is "To contribute to the promotion, protection and restitution of the rights of vulnerable children and adolescents, as well as holding adolescent lawbreakers accountable and reintegrating them into society through programs carried out directly or by organizations collaborating with the service" (SENAME, 2015). The strategic objectives extend to all three operational areas: Juvenile Justice, Protection of Rights and Adoption.

Given that the Juvenile Justice Unit is the focus of this research, it is described in greater detail. The purpose of this area is to ensure compliance with the penalties and measures ruled on by the courts of justice with the aim of achieving full social reintegration of youths between ages 14 and 18, in accordance with what is stipulated in the Adolescent Criminal Liability Law. The foundation of this institution's work operates using a perspective of rights in which each adolescent facing a legal process shall be guaranteed a fair trial, which is oral and public, just as is afforded to adults. This prevents endangering the rights of adolescent offenders.

Descriptions of each position are given in order to understand the technical nature of the work carried out by the public servants analyzed in this research. The job of the center's Director is to lead the center in accordance with organizational guidelines. The Regional Director directly supervises the position. The CIPs answer directly to the technical supervisors at each center. Their primary duty is to assist in the social reintegration of youths, mainly through clinical services. Finally, TCs also respond directly to the technical supervisors at each center. Their main duty is to administer the educational programs, job training and socio-educational workshops.

5 | RESULTS

The primary results obtained in the analysis are presented in Figure 2. It shows that the institution's primary tasks (rehabilitation and confinement) are inherently contradictory in terms of the purposes that each task seeks to accomplish. The primary task is a heuristic concept that helps clarify what existential and normative meanings individuals place upon themselves in taking up roles in relation to the particular task system in which they are located (Lawrence, 1985). SENAME's opposing primary purposes causes high levels of anxiety that are very difficult to cope with. Ambiguity and tensions involved in making decisions over these competing work purposes, elicits what Hirschhorn (1999) calls the "primary risk". He defines it as "the felt risk of choosing the wrong primary task, that is a task that ultimately cannot be managed" (p. 9). This dilemma can give way to "task ambiguity", where individual and collective vacillation and ambivalence play a key role.

Moreover, an institutional framework characterized by serious material, technological and staff shortages, makes the accomplishment of tasks much more complex and this affects both the professionals and youths served by the centers. SENAME's management do not adequately contain their employee's competing priorities, heavy workloads, and high administrative burden and this, in turn, deteriorates the quality of professionals' work performance (Cooper & Lees, 2015). This institutional framework contributes to the development of a social defense system marked by the
The confining conditions that characterize the work done at SENAME centers create feelings of emotional constriction and reclusion that strongly affect the professional staff. There is a constant atmosphere of hostility as a result of this confinement experience at the centers, which generates high levels of anxiety that are difficult to contain and elaborate on. During their shifts, professionals are subject to entrance and departure monitoring that limits their contact with the outside world. In the role analysis sessions, the group constantly alluded to the anxiety and despair that a prisonlike experience causes. As Foucault (1980) suggests, reclusion intensifies the experience of inhabiting an infernal world in which escape cannot be imagined by those who are observed and guarded, and by those doing the observing and guarding. The center thus becomes an imprisoning machine for those who wield power and for those who are subject to such power.

In accordance with Kaminsky (1994, p. 127), confinement is defined as "the fragmentation and boxing in of existence (...) it is life turned against itself". Confinement is an experience in which repetition becomes an inescapable drowning, and where one’s vision constantly stumbles across the exact same objects. In a context such as this, the impact of working with those who are socially excluded becomes a very complex and dramatic experience. The task of integrating youths, who for various reasons resist being incorporated into the formal structures of the social world, becomes a difficult challenge that often exacerbates the resistance to the therapeutic spaces offered by the centers. The deprivations and resource shortages at the centers only intensifies the youths’ lack of perspective, which then contributes to the professional teams’ demoralization. The willingness to rehabilitate young people inside of these centers clashes with the precariousness offered to them, which reinforces the system’s violence to handle them. Rather than considering that the youths have been traumatized by experiences of poverty, privation and abuse suffered during their lives, their anti-social behavior is interpreted as deviant and offensive. This reinforces the desire to imprison and isolate them (Scanlon & Adlam, 2008).
addition to this sense of alienation, is the lack of remorse felt by the young people towards the crimes they committed. As Kaminsky states (1994, p. 123), “There is no feeling more alien to an inmate than repentance”. The inmates are not repentant; rather, they recognize that their strategic action failed, meaning they have to pay for it through “prison intake”.

The professionals face a conflictive polarity caused by the contradictory aims of pursuing the rehabilitation of the youths, while simultaneously keeping them in confinement and deprived of their freedom. These clashing aims reinforce the use of social defenses against anxiety, which can lead to severe problems in organizational identity and role ambiguity (Armstrong & Rustin, 2015). In this context, we find some professionals who exacerbate the violence of punishment and others who intensify their strong bonds of empathy toward the youths and their process of reintegration to society. According to Halton (2015), the professionals’ adjustment to the social defense system exacerbates the use of “obsessional-punitive” collective defenses, which protect them from the impact of the care systems’ work complexities. As a result of management and peer surveillance, obsessional mechanisms such as the isolation of feelings, the rigid adherence to work rituals, and the administration of discipline and punishment increase (Halton, 2015). The adherence to this defense system prevents professionals from being overwhelmed by the aggression and violence present in this kind of institution.

The drawing, made by two Directors, shows the unconscious conflict in their work (Figure 3).

A youth confined by a chain, symbolizing what these two directors described as the “essence” of their collaborative work, is depicted in Figure 3. According to them, the links in the chain represent the “teamwork” that characterizes their labor. However, through drawing analysis, the directors examined that their collective task was primarily focused on imprisoning and chaining the youth rather than providing opportunities for personal growth. As clearly depicted, the development possibilities and resources represented by the four drawn elements are all outside of the space in which the youth remains confined. Becoming conscious of the symbolic meaning of the chain as a function of imprisonment was a very unsettling experience for the group of directors in terms of the evident teamwork deficits.

5.2 Isolation and Atomization of Workplace Relationships

As a result of the difficult workplace dynamics, the professionals experience strong feelings of isolation and disconnection from the rest of the team and the youths (Scanlon & Adlam, 2008). In the role analysis
sessions, it was clear that the professionals very infrequently considered the others as potential collaborators for conducting work inside the centers. According to one CIP: “Only the CIP interacts with them, because there are no other professionals available to help because there is no teamwork. We don’t have any other forms of collaboration. There is no real SENAME.” This is directly connected to the kind of workplace relationships established at the centers wherein teamwork, collaboration, effective communication, trust and emotional support were absent. However, the lack of these phenomena stood in opposition to what authorities “officially” considered important for improving performance and carrying out primary tasks.

The disconnection between professional members increases the sense of isolation due to rigid operational conditions that invalidate the constructive effects of team meetings (McCaffrey, 1998). This atomization of work leads to feelings of loneliness on a part of the employees, which creates negative consequences for their emotional stability and well-being and also in the performance of their principal duties (Scanlon & Adlam, 2011). For example, one director states, “Despite being surrounded by a lot of people, I feel really alone”. Another CIP says, “There is a great deal of loneliness and isolation with little mutual understanding”.

The drawing done by two CIPs describes how they feel at work. The island with the palm trees represents the two of them (Figure 4). The coconuts on the ground are the products of their work with the youths. The smaller islands represent their non-psychologist co-workers. The CIPs do not know anything about the work the others are doing. There is no communication with the other islands, nor any coherence to the process. They feel misunderstood by the other professional staff, and think that the others do not understand the psychological language they use, which they find very frustrating and discouraging.

The professionals’ attitude is quite passive concerning this aspect given that although they highlight the need to improve workplace relations, little is done to create links with co-workers or to collaborate together on joint tasks. According to one CIP, “I feel I promote this isolation since I don’t create a space for sharing nor do I take any initiative to leave the individualism behind”. There is the case of one TC who asks, “How much do I add to this isolation? How much do I allow others to help me?” This “fear of the other”, which can be observed in the professionals working in these kinds of institutions, reflects the anxiety of being “contaminated or corrupted” by the perturbed mind of the other. This invisible contamination “cannot be symbolized, avoided or ignored rather, it is confined within a claustrophobic space” (Scanlon & Adlam, 2011, p. 178).

FIGURE 4 Drawing 2
5.3 | Idealization

In response to the atomization of work relations and the context of confinement where the youths’ rehabilitation process takes place, idealization emerges as an unconscious defense strategy of a collective nature used for protecting the self when facing the anxiety and discomfort present at work. Each specific group of professionals saw themselves as the main sustainer of the system, thus playing the most central role in the process of reintegrating the youths into society. In addition to showing a high sense of self-sufficiency and grandiosity, they minimize the work done by other people helping with the rehabilitation process.

The effects of idealization were especially evident in the CIP groups, as they more openly revealed their fantasies of grandiosity and heroism. In the words of one CIP, “We are like aliens within the organization. We must have superpowers in order to do things from out of this world. One must be from another planet, from another dimension, even often having these supposed powers”. The drawing shown in Figure 5 exemplifies the phenomenon.

The idealization in the organization carries with it severe consequences. It does not only affect the vision of one’s own role, but also that of the rest of the team, hampering inter-group relations and teamwork even further. This creates a fantasy of distinctness from the other individuals, thereby feeding a sense of grandiosity that impregnates the role, making it difficult for the individual to distinguish the boundaries between their ideals and the work at hand (Roberts, 1994).

The mechanisms of idealization are also made evident in the intense contrast between some of the professionals’ drawings with the truly difficult reality they face on a daily basis. Their drawings portray childish and colorful images with fantastical figures that display a façade that is highly at odds with the centers’ complex context. The drawing analysis process helped them to explore the hidden aspects of the images, thus extracting a more integrated view of the workplace reality. While the resistance to incorporating other perspectives of reality was very intense, the analytical work contributed to begin a reflexive process that allowed for the inclusion of split off, unconscious aspects.

5.4 | Failures in Socio-technical Containment and Persecutory Anxieties

The narratives of SENAME professionals reveal a constant critique toward the technical deficits of the institution’s management. Distance at the central level, a lack of coordination between the centers, a lack of process standardization, the use of improvisation and a shortage of technical guidelines are some of the identified deficits. A negative view of SENAME’s central office is colored by the feeling of desperation due to the abandonment felt...
by the professional staff on the part of the institution. For example, one CIP states, "Fighting against the organization appears to be a serious battle that is difficult to win. Such a fight would be like suicide". Employees claim that there are communication problems at the centers, supervisors are not helpful, and nobody is worried about professionals' well-being. As one CIP states, "The system at the institution was created in such a way as to make it impossible to perform well. This creates a lot of backlash against the organization".

While there are collaboration problems inside of a single center, this disconnection is even greater when the centers must work together in a coordinated way. This happens when youths are transferred from one center to another, often meaning that the rehabilitation process begins all over again, negating any gains made earlier at another center. The process becomes fragmented as the youths' diagnosis and treatment are duplicated, which hinders an adequate completion of the work, and highlights the organization's lack of a systemic view. In the words of one TC, "SENAME has no overarching vision. There is a disconnection in the general system. The centers don't jointly function. Nobody sends the files, or even if they do, they never review them and the whole process starts over again from the beginning".

The failures of institutional management have a direct impact on the work done at the centers and on the lack of support that professionals feel in their daily duties. Professionals view the central office as a distant figure that does not take responsibility for the circumstances that affect operational and emotional aspects. As one Director states: "I know that we are very weighed down, but nobody helps us. We are alone. Our superiors are very far away".

The institution’s lack of support operates at the level of both the technical deficiencies of the work organization, as well as the insufficient socio-emotional containment that this kind of work demands (Pasmore, 2006). The shortcomings in the technical area have reached such extreme levels that several job positions are not even appropriately defined, which has a negative impact on the performance of roles. In addition to the lack of clear operational guidelines and structures, there are very few mechanisms for containing the "clinical" anxiety that the professional staff experiences as a result of the complex nature of the work that is done (McCaffrey, 1998).

In the last drawing (Figure 6), a CIP is depicted on each side of the rope. "Our role is to pull the rope taut to support the youths by making their path more solid and secure. In other instances, we have allowed it to slacken and the youth falls down and must begin again". The net represents the other professionals that intervene in the rehabilitation process; however, it is diffuse and only placed beneath the youths to support them in the event of a crisis. This reduces the opportunities for collaborative, preventive intervention. The clown represents those "who await failure so that they can laugh at other people, as the success of some depends upon the failure of others". The "show" takes place inside of a circus tent, never outside. The circus is associated with the significant improvisation that they perceive within the institution. "In the end, every rigid structure inside of SENAME becomes a joke, because it is a blind structure regarding the youths".

FIGURE 6 Drawing 4
When mechanisms for containing work teams' anxiety fail, the malaise redoubles, the work deteriorates, and the atomization and relational disconnection increase. One CIP states: "It's emotional isolation, not working on a team or sharing our feelings with workmates". These feelings of solitude arise due to the lack of effective support systems for handling socio-technical aspects of the institution. For example, one TC says, "The supervisors leave us to work alone. They give us no feedback or guidance, nor do they support us in decision-making. And when support does come, it arrives very late". As McCaffrey (1998) puts forward, organizations must provide support and effective management that invite reflection about dilemmas and challenges concerning the work of rehabilitating vulnerable youths.

The predominant type of supervision used by SENAME does not fulfill the team's needs. Instead, it increases the anxious feelings of persecution experienced by professionals who feel watched by the central office controlling them at a distance. The directors are the most affected by these control methods. As one director states, "They supervise the centers, make observations and then take action. But they are not efficient and sometimes simply copy earlier reports". Another director states, "The supervising body doesn't help or support. It just watches you and challenges you to portray things as being better as they really are (referring to the way in which they must act while being supervised)". These practices reflect how the conflictive work reality is obscured, pretending as if everything were operating correctly and hiding the complex situations that professionals deal with, such as rebellions and fights.

This culture of surveillance extends throughout the system helping to exacerbate the feelings of persecution for the work teams. The bureaucracy of SENAME's monitoring system (and of many public services) requires filling out numerous forms and reduces the time professionals have for working directly with the youths (Hoggett, 2006). This results in the staff feeling constantly observed and monitored both by bureaucratic technology scrutinizing their work at a distance, as well as by the youths and their resistance to the rehabilitation process. The consequences of the persecution anxiety are "to move away from an emphasis on greater relational security (Emphasis in the original), reflective practice, and team development, and inevitably towards an anxious pre-occupation with personal survival, physical security and other offensive and defensive practice measures" (Scanlon & Adlam, 2011, p. 188).

The effects of this surveillance culture are not only triggered inside of the organization, but also through constant scrutiny from the community. Surveillance represents an unceasing threat for the directors, since they are the ones who must answer to judges and society. "The press [a visible item in some drawings] represents constant spying making one feel watched, which is related to the investigations that some colleagues have undergone and the changes that occur in the centers".

The prevailing culture of surveillance and the lack of adequate socio-technical containment cause the deterioration of the professionals' altruistic motivations of working on youths' social reintegration. These constructive motivations are replaced by a tendency toward dogmatism, coercion and control. To overcome these difficulties, it is necessary to create a different kind of containment, rooted in greater tolerance and understanding of the difficulties these professional teams face in these complex and claustrophobic work environments (Scanlon & Adlam, 2011). In this context, the institution requires the development of a work structure that contains and promotes the capacity for reflection in the different work spaces (Bain, 1998; Hinshelwood, 2001).

6 | CONCLUSIONS

Based upon an analysis of subjective experiences, this research describes the main institutional dilemmas that SENAME's professionals face at work. The ORA method was employed to investigate the profound contradictions that professionals experience within the context of a public institution, heavily affected by a lack of economic and human resources, serious management problems, and the stigma of working with a social group that is severely segregated and excluded from society. The ORA helps understand the individual, group and institutional experiences of the professionals by exploring the unconscious dynamics that hinder the management of the SENAME's primary tasks. The analysis depicts the social defense system (Menzies, 1960) that is unconsciously built at the institutional level to cope with the anxiety that arises as a result of work complexity.
The experience of confinement adversely determines the workplace conditions at SENAME. Although many of the youths are required by law to be confined for their rehabilitation process, the emotional and mental repercussions of this condition impact heavily upon the youths and the professionals that work with them during the process. The anxiety and “task ambiguity” that arise from the inherent contradictions in SENAME’s goals (reclusion and rehabilitation) activates collective defensive strategies when facing the “primary risk” involved in complex decision-making (Hirschhorn, 1999). Some of these are isolation, atomization in workplace relationships and the idealization of one’s own role. Additionally, the profound failures of the supervisory and containment methods of the professional teams, and the presence of a centralized bureaucratic control intensify the paranoid persecutory anxiety in the institution. These dynamics only exacerbate the prevailing surveillance culture and disconnection between professionals who form part of the work teams. The tendency toward coercion, inflexibility and idealization of each subgroup’s professional skills, splits reality into good and bad, projecting a large part of the predominant malaise onto the institution. In such a workplace culture, the idea of implementing a more reflexive and integrated practice around differences is severely attacked and devalued.

This rigid and controlling social defense system emerges from anxiety sources located within the institution, but also from the effects of an external, social environment. The pressing focus on profit and competitiveness imposed by current, broad social changes, affects both public and private organizations in health and corporate contexts, by imposing rewards and sanctions for success and failure in work performance (Armstrong & Rustin, 2015). In the area of health and human service agencies, methods of surveillance and control, which operate through statistics, auditing and inspections, put a great strain on the relationship between professionals and patients. Due to the use of these methods, the levels of suspicion and mistrust of professionals’ work are intensified by the cumulative pressure coming from society, external regulators and managers. As a result, social defense systems in care services have become increasingly inflexible and fearful, thus reducing the quality of service given to patients (Halton, 2015). These organizational dynamics have unfortunately led to the “replacement of concern (albeit anxious concern) for the patient or service user by a dominant anxiety for the survival of the professional self” (Cooper & Lees, 2015, p. 244).

Therefore, unconscious social defenses against anxiety may operate when the diminished and silenced instrumental role that professionals play in the organizational system threatens their subjectivity (Long, 2006). This gives way to a stressful and toxic organizational atmosphere, where episodes of crisis become a constant and opportunities for recuperation and psychic elaboration become very reduced. Chronic stress creates a “trauma-organized system”, where dysfunctional and primitive responses of professionals and managers can become more frequent. This brings about serious consequences for service users and the system as a whole (Bloom & Farragher, 2011).

Lastly, this study shows the need for SENAME to transform the workplace culture within the different centers. This requires the defense system to evolve to a stage where persecutory anxieties can be better contained and metabolized. As a result of this change, aggressive feelings could be acknowledged and integrated into the workplace reality. Likewise, tendencies towards control and punishment should be replaced by support and guidance (Halton, 2015). The complexity of the tasks that professionals carry out, demands the creation of intermediate supportive and reflective spaces that can help contain high levels of anxiety. These reflective spaces are fundamental to improve the level of collaboration and coordination for facing a task that should be handled with a trans-disciplinary approach, that can facilitate the encounter of the diverse professionals’ perspectives (Hinshelwood, 2001).

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DECLARATION OF INTEREST STATEMENT

All the authors declare that they have no conflict of interest.

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