

Organizational Turbulence, Trouble and Trauma: Theorizing the Collapse of a Mental Health Setting¹

Michael D Fischer

University of Oxford, UK

Abstract

Turbulence is usually considered a negative property of an organization's environment. Yet turbulence is also a feature of an organization's internal dynamics and may be useful for productivity. This article argues that interactions between the formal and informal management of trouble produce relational turbulence that may mobilise resources and collective action, or conversely lead to dysfunction and crisis. The author links relational psychoanalytic theory with social constructionist perspectives in exploring intersubjective dynamics of trouble and its repercussions of turbulence. Based on a longitudinal interorganizational ethnography, an atypical mental healthcare organization is described – a Democratic Therapeutic Community – in which turbulence plays a central function, but in two very different ways. In a restorative mode, turbulence generates *formative spaces* that are creative and have a regulating function, useful for organizational productivity. Conversely, a perverse mode is destructive and may produce intractable *perverse spaces*, leading to organizational dysfunction, crisis and even collapse. This is theorised by extending the psychoanalytic concept of liminal, transitional space. In contrast to the notion of transitional space as a safe, protective area, the author develops a model of distinct formative and perverse spaces created by relational turbulence in organizations. In human service organizations, where the generation, trading and management of trouble are

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inherent in an organization's internal dynamics, turbulence may be a valuable resource, but one that, in the perverse mode, can be immensely destructive.

Keywords: intersubjectivity; psychoanalysis; social constructionism; transitional space; trouble; turbulence

Introduction

The concept of turbulence has long been discussed as a feature of organizations' external environments (Emery and Trist 1965). Accordingly, the turbulence literature is predominantly oriented outwards, exploring how turbulence, current and future, affects organizational relations (Child et al. 2005; Tsoukas and Shepherd 2004).

Turbulence, however, is not merely a condition of external environments. Organizations' 'inner lives' significantly affect their interactions with societal contexts. As Beck (1992) asserts, organizations demonstrate an increasingly reflexive relationship to their environments. External turbulence may induce inner turbulence, but inner turbulence may lead to a construction of an environment as turbulent and threatening. Below the surface of organizational rationality, many scholars have come to view a micro-politics of inner relations as fundamentally shaping contemporary institutions (Clegg et al. 2006; Fleming and Spicer 2007; McGivern and Ferlie 2007).

If turbulence describes environmental conditions, the concept of trouble is often used in connection with an organization's inner life and predicaments faced by its members. The dynamics of organizational 'trouble' have attracted some scholarly interest, from micro-political studies of deviance to organizational *mis*behaviour (Ackroyd and Thompson 1999) and collective grievance (Earl 2009). Originating in the social problems literature, the concept of trouble is helpful in researching the relationship between organizations' formal and informal dimensions. Studies have analysed the development of trouble, its attribution to 'troublemakers' and its management by 'troubleshooters' (Emerson and Messinger 1991; Rubington and Weinberg 2003). Yet despite interest in its capacity to mobilise resources, the prevailing image of trouble is as something to be controlled and prevented.

Some studies have sketched a contrasting picture of trouble not as an exceptional situation calling for emergency action, but a currency in which organizational members deal. Behind the scenes of the formal organization, participants from college roommates to

corporate executives, produce, trade and manage trouble in personal and emotional ways (Courpasson and Thoenig 2010; Gabriel 1995; Morrill 1995). Beyond official control, yet inherent to an organization's inner life, trouble occupies an ambiguous, liminal space. Even if ostensibly private, it may interact with the social setting, becoming heated and volatile, to produce dynamics of turbulence.

In this article, I argue that interactions between the formal and informal management of trouble produce turbulence that may mobilise resources and collective action, or conversely lead to dysfunction and crisis. Drawing on social constructionist insights on trouble, and linking these to relational psychoanalytic theory, I develop the concept of relational turbulence across what M. Stein (2007) terms 'phenomenological' or experiential boundaries, at individual, group and organizational levels.

Linking constructionist and psychoanalytic perspectives reveals, of course, certain lacunae in each; but more importantly, their combined lenses focus attention on organizational dynamics through which both trouble and its repercussions are readily produced. Social constructionism, in particular, emphasises the role of 'reaction processes' (Gibbs 1966) through which interested parties and official 'troubleshooters' actively construct certain matters as problematic.

Whereas social constructionism ties trouble analytically to the concept of deviance (Holstein and Miller 2003; Schneider 1985), relational psychoanalytic theory illuminates intersubjective dynamics of trouble and its potential for turbulence as an exchange intrinsic to all social relations. Contemporary relational psychoanalysis regards both the self and the social world as intersubjective, contingent and shaped by political and cultural dynamics (Mitchell 2000; Quinn and Strauss 2006). Through interactions at the interstices of social relations, liminal 'third' spaces may develop in which experiences, emotions and fantasies are exchanged across these boundaries (Crapanzano 2006; Diamond and Allcorn 2009).

The psychoanalytic literature has long regarded 'third' or *transitional* spaces central to personal and cultural development (Winnicott 1953). Occupying an intermediate area between social 'reality' and inner experience, they cultivate individual and collective exploration and creativity (Anzieu 1984). Yet their involvement in trouble suggests they also have turbulent and destructive potential, hitherto overlooked. I here link organizational perspectives on transitional space (Diamond and Allcorn 2009; Stein 2007a) with recent scholarship on the perverse organization (Armstrong 2005; Long 2002; 2008) to explore how turbulent and potentially destructive forms of transitional space develop.

Based on a longitudinal interorganizational ethnography in the field of mental healthcare, this article examines how trouble associated with people with severe personality disorders generates turbulence in organizations that manage them. Through the case of a Democratic Therapeutic Community (DTC), the study explores the production of turbulence, its escalation and organizational repercussions. Whereas a restorative mode of turbulence has developmental and self-regulating properties, a contrasting mode of perverse turbulence has destructive and escalating effects, ultimately leading to the DTC's collapse.

These findings are theorised by extending the psychoanalytic concept of transitional space. In contrast to the notion of transitional space as a safe, protective area, I argue it can take the form of a turbulent, *formative space* in which authentic, mutual relations develop, useful for organizational productivity. Conversely, when perverse forms of turbulence develop, an intractable *perverse space* may take hold, from which participants' abilities to extricate themselves is uncertain.

This article contributes to the turbulence literature by developing the concept of relational turbulence, and through developing a model of contrasting formative and perverse spaces created by this turbulence in organizations.

The sociology of trouble

In exploring the relation between trouble and turbulence, an important foundation is C. Wright Mills' (1959) distinction between 'personal troubles of milieu' and 'public issues of social structure'. According to Mills, trouble is a private matter of an individual's experience of self and immediate relations, concerning personal values felt to be under threat. When private trouble reflects wider societal structures, though, trouble needs to be understood in terms of public issues. Mills maintained that public issues such as divorce, unemployment and large-scale social problems connect personal troubles with societal and institutional dynamics. He advocated paying attention to relations between personal biography and social history, studying what each produces in and reveals about the other.

A number of approaches have been adopted to study this relationship between individuals and society, particularly within the social problems literature. Some emphasise structural contradictions that produce problems through conflicting discourses and values (Blumer 1961; Spector and Kitsuse 1977), while others elucidate the development of trouble at a micro-level (Holstein and Miller 2003). Whereas early literature focused on substantive social conditions, from perspectives of social pathology, disorganization, value conflict,

deviance, labelling, and critical theory (Rubington and Weinberg 2003), social constructionism introduced a shift in focus. Instead of studying putative social conditions, scholars turned their attention to how interested parties come to define conditions as problematic (Best 2002; Schneider 1985).

On the one hand, according to constructionist arguments, social problems are established through assembling moral claims about undesirable conditions (Spector and Kitsuse 1977). Through grass-roots agitation and referral to official parties, personal circumstances become entangled with public structure and rhetoric (Emerson and Messinger 1991). Everyday 'social problems work' brings public discourses into play at a micro-level (Gubrium 1991), 'reassert(ing) the importance of practice...while context and interpretive structure promote pattern' (Holstein and Miller 2003: 78). Overall, constructionist perspectives offer a framework with which to explore 'reaction processes' (Gibbs 1966), albeit emphasising formally-orientated control.

On the other hand, the concept of trouble addresses local disruptions to social norms which may be perceived and handled in informal ways. Analytically connected to the notion of deviance, trouble refers to discontent or upset arising from interpersonal interaction (Emerson 2008). Participants' activities and interpretive schemes can produce all forms of interpersonal trouble, often beginning amorphously with a tenuous sense of 'something wrong'; only some of which are constructed as problematic (Emerson and Messinger 1991). At this informal level, trouble is relational in character and tends to be interpreted in intra- and interpersonal rather than official terms. What might eventually *become* a social problem often hinges upon restorative responses as parties attempt to influence trouble's nascent dynamics (Emerson and Messinger 1991).

Some authors hold that informal trouble is inherently part of organizational life, occupying 'niches' in unmanaged areas of the organization (Gabriel 1995; 1998). In studies of trouble amongst executives, trouble is predominantly handled as 'an affair set behind closed doors', pursued privately through conciliatory attempts, secretive complaining or sabotaging careers (Courpasson and Thoenig 2010; Morrill 1995). Similarly, Emerson (2011) describes informal responses aimed at preserving civil relationships through circumventing trouble or negotiating remedial solutions.

The ways in which trouble is informally handled, then, significantly shape its course and transformation. Yet institutions also influence how trouble is interpreted and responded to through interacting with its development. Official trouble-shooters shape 'indigenous' approaches and may exacerbate trouble to produce relational turbulence. In the following section, I introduce relational psychoanalytic perspectives that regard trouble not merely as

an interpretive construction, but an intersubjective exchange; what begins as local trouble can thus escalate and become contagious, producing relational turbulence across boundaries between individuals, groups and organizations.

Relational dynamics of turbulence

In contrast to social constructionist perspectives, psychoanalytic theory puts trouble at the heart of social relations. Psychoanalysis argues that central to the human condition are conflicting impulses, aggressive-destructive as well as libidinal-constructive, producing significant affects, as well as defences that mitigate them. A major strand of psychoanalysis has concentrated on clinical dimensions of trouble. However, beginning with Freud's *Group Psychology* (1921) and *Civilization and its Discontents* (1930), psychoanalytic concepts have been used to study social phenomena.

The psychoanalytic study of social phenomena was developed particularly by the Frankfurt School sociologists who sought to integrate psychoanalytic insights with critical theory. Their study of political, cultural and social aspects of institutions developed a metatheoretical, hermeneutic science, strongly represented in cultural criticism and organizational studies (Alvesson and Sköldbberg 2000; Gabriel and Carr 2002; Habermas 1972/1987). Much of this work is orientated to institutional power relations that, though not always directly observable, may be tangibly experienced.

While critical psychoanalytic perspectives have examined all kinds of social problems, contemporary relational idioms have renewed the relevance of psychoanalytic concepts to social theory (Elliott 2000). Organizations are not merely rational, dispassionate entities, but contain unconscious motivations, emotions and fantasies, linking subjective experience with wider political and societal forces. Fotaki's (2006; 2009) studies of welfare policy reveal dynamics of social projects as 'utopian dreamlands' originating in attempts to overcome psychic tensions and fragmentation. Institutions are thus imbued with symbolic meaning and 'cultural signifiers' (Long 1991), revealed most dramatically in societal conflict (Volkan 2004).

According to relational psychoanalytic theorists, societal structures provide resources to colonise members' worlds, but trouble is locally fashioned in intersubjective exchanges (Mitchell 2000). Crapanzano's (1992; 2006) anthropological studies reveal intersubjective scenes, reducible neither to subjective experience nor based in objective reality, but involving 'interlocutory dramas'. Real and imagined encounters between participants and

their inner worlds mediate experiences of oneself and others (Quinn and Strauss 2006). Yet ‘there is...nothing irrational, nothing even fictive about the scene... Both the scene and...objective reality are subjectively experienced.’ Crapanzano (2006 p.398).

Trouble is thus inherently relational, ‘located’ in-between persons (Foulkes 1948/1991), at the interstices of social relations. Following Winnicott’s (1953) original theory of transitional space, such intermediate areas are usually associated with positive relations (see McGivern and Fischer, 2012). Involving deep participation in intersubjective relations, transitional space transcends individual subjectivities (Mitchell 2000), creating a mutually-constructed ‘third’ space when participants make genuine contact with other individuals, groups and organizations (Diamond and Allcorn 2009; Fischer 2008).

Winnicott (1953) conceived of this as a potential space in which certain boundary or ‘transitional objects’ are emotionally invested with psychological attachment and meaning. Originating in his observation of children and their families, he argued that psychologically safe settings cultivate boundary areas in-between the psyche and its social environment that are important in social and psychological adaptation, and maturation. These areas provide conditions for self-comfort, play and creativity; indeed, all cultural experience may be located in these transitional spaces (Winnicott 1967).

Yet liminal areas are not always associated with positive dynamics. M. Stein (2007b) describes permeable relational boundaries as sites of trouble between front-line employees and customers. When exchanges are excessively hostile, employees experience themselves being poisoned by interactions, producing emotional and sensate experiences that can spill over to contaminate other parts of the organization, producing ‘toxic environments’. Similarly, H. Stein’s (2007a) anthropological studies find that certain traumatic experiences can be understood only through embodied sensitivity to organizations’ interior dynamics.

Such intersubjective involvement is central to the idea of transitional space. Group theorists such as Bion (1961/1994) and Foulkes (1948/1991) applied psychoanalytic perspectives to groups and organizations, revealing deep connections between external ‘objects’ in the social world and their inner, psychological representations (Brown and Zinkin 1994; Trist and Murray 1990). Indeed, group-based settings can elicit particularly strong psychological engagement in shared transitional space (Anzieu 1984).

Relational psychoanalytic theory conceptualises these relations as involving a dialectical tension between two types of *object relations*. In a *paranoid-schizoid* form, powerful ‘split’ connections develop between the inner psyche and part-aspects of the social world. Positive attachments are made to ‘good objects’ experienced as nurturing, but ‘bad objects’

associated with frustration and aggression are rejected as persecutory. This rudimentary form of object relations provides some protective psychological functions but may be highly dysfunctional in social relations, stirring dynamics of hostility, persecution and terror (Volkan 2004). Psychological and social integration require a so-called *depressive* form that mediates and restores relations between inner experience and the social world. Both external ‘objects’ and their internalised representations thereby become more balanced, fostering relationships with ‘whole’ persons (Greenberg and Mitchell 1983).

Transitional space is important in this process; its ambiguous boundary between inner and outer experience provides an area for integrating inner and outer ‘reality’. But might there be a darker side to this positive image? Stein’s (2007b) toxic contamination involves a scene of excessively permeable relational boundaries, rather than authentic relations. Yet all intermediate space shares its means of exchange across relational boundaries. Intersubjectivity develops through *projective identification* - a complex mechanism in which a participant unconsciously projects impulses or mental representations into others. Through social interaction, ‘recipients’ are coerced into behaving and feeling in ways congruent with these projections. Participants are thereby ‘made to feel’ emotions and fantasies experienced as partly belonging to the other (Ogden 1992).

Not all liminal areas have the emotionally-invested quality of transitional space, but I question whether this space is necessarily positive. Transitional space has long been regarded an area of creativity and formation. However, this overlooks the possibility that it may involve more turbulent and destructive dynamics, capable of restricting development. As Crapanzano (2006: 401) argues, ‘intersubjective captivation’ can be so intense that subjectivity collapses into ‘entanglements of longstanding anger and bitterness’ that so enmesh participants together they are unable to disentangle themselves.

To summarise, in exploring the idea of trouble, relational psychoanalytic theory conceptualises it as intersubjective scenes that link inner and outer dimensions of the social world. Whereas trouble situates and localises relational tensions, relational turbulence escalates these dynamics beyond the original scene, producing contagious ‘ripple effects’ (Barsade 2002) across experiential boundaries of individuals, groups and organizations.

In the following section, I introduce a Democratic Therapeutic Community as an atypical mental healthcare organization. Its methods of working with people with severe personality disorders in a participative, emotionally-invested setting provide an ‘extreme case’ (Eisenhardt 1989) in which trouble and relational turbulence feature prominently.

Managing trouble in a Democratic Therapeutic Community

DTCs may be especially suited for studying empirically trouble and its turbulent repercussions in organizations. Their unorthodox approach is based on strong participation and democratic decision-making, in which the whole community is responsible for managing forms of trouble (Kennard 1998).

DTCs were first developed in two military hospitals in England, during the Second World War. Pioneering group psychoanalysts such as Bion (1961/1994) and Foulkes (1948/1991) sought to address institutional dynamics and their effects on soldiers' neuroses by bringing the whole hospital to function as a large therapeutic group (Harrison 2000). By focusing on social dynamics rather than individual conditions, clinical 'trouble' was treated as symptomatic of social tensions and thus capable of being handled by the 'community as doctor' (Rapoport 1960).

DTCs have been found clinically effective in mental health hospitals, child and adolescent units, and even prisons. As 'cultures of inquiry' they develop organizational learning and resilience (Lees et al. 2004). Yet their democratic-therapeutic methods challenge professional and managerial orthodoxies (Campling and Haigh 1999). Baron's (1987) account of a DTC beset by internal trouble exemplifies how professional power can disrupt therapeutic functioning. They are not readily governed through managerial techniques, but require shared engagement and negotiation (Whiteley and Gordon 1979).

Their collective meaning and purpose is underpinned by an emotionally-invested community ideology (Ormrod et al. 2007). Through the principle of *permissiveness*, a wide range of 'acting out' and interpersonal trouble is tolerated. This is constrained by obligations of *communalism* and *reality confrontation*. More especially, *democratization* reduces power and role differences through sharing equally therapeutic and administrative decisions (Rapoport 1960). Wider institutional support for their methods is considered important (Hinshelwood 1987), and may be crucial when handling tensions between individual, community and authorities' objectives (Spandler 2006).

The DTC – a policy initiative

A government initiative to develop a national DTC service provided the organizational setting in which to explore the emergence and handling of trouble. In response to high profile incidents involving people with severe personality disorders, a national government within the European Union developed a number of DTC units to treat such people. The

DTC that is the subject of this paper was one of these units, and accommodated 29 male and female residents.

Described as ‘heart-sink patients’ and ‘the patients psychiatrists dislike’ (Lewis and Appleby 1988), people with severe personality disorders are widely regarded as trouble-makers. They often act impulsively without regard to consequences, presenting self-mutilation, suicide attempts, and violence. According to the Institute of Psychiatry, their emotional impact on staff is commonly anxiety, anger and exhaustion: they are ‘the most difficult people to be encountered in clinical practice... act(ing) in dangerous ways and disrupt(ing) hospital settings’ (Moran 1999).

If this description suggests contradiction with the DTC’s ideals, the DTC has a strong, ideologically-derived culture that establishes normative forms of engagement. Although staffed by doctors, psychologists and therapists, role differences between staff and residents are reduced. The term ‘resident’ is used rather than patient, to mark a distinction with other mental health settings. Residents are usually able to over-rule staff decisions. All therapy takes place in groups; there is no individual treatment and no psychotropic medication. The community meets several times a day, often to handle rule-breaking or other forms of community trouble.

Residents join voluntarily after being interviewed by the community, testing their commitment to 12 months of residential therapy and their willingness to withdraw from medication, alcohol and other substance use. The community votes democratically who to admit or discharge. Residents are expected to contribute to community tasks, prepare meals and work therapeutically with other members. Membership requires personal engagement in the life of the community, expressed through providing and receiving personal feedback, and holding each other to account for actions.

A longitudinal ethnographic study

The empirical data for this paper are drawn from a four-year ethnographic study of a DTC and its interorganizational relations with other health, social care and criminal justice services.¹ Ethnography was used to explore participants’ activities, beliefs, meanings, values, and motivations – seeking to understand and interpret the social world as its members did (Hammersley and Atkinson 1995).

As is conventional in ethnographic research, the study’s design was shaped progressively in early fieldwork (Hammersley and Atkinson 1995). In a first phase, I studied the DTC’s

relations with organizational stakeholders across three city conurbations and one rural area. I conducted in-depth interviews (1½ to 2 hours duration) with practitioners, managers and service users, observed meetings, participated in interorganizational (outreach) projects, and followed individual ‘cases’ as residents were referred to and discharged from the DTC. A second phase focused on the residential DTC following a critical incident, exploring its effects on external and internal relations.

In order to be immersed in the field yet retain freedom of movement and thought, I developed an observation-orientated fieldwork role. ‘Observing in order to write’ allowed close attention to dialogue during meetings (Emerson 2001), yet permitted spontaneous participation outside of meeting and in informal activities, which I recorded later. At the time of this study I worked as a healthcare consultant and psychotherapist elsewhere in the region, and I was generally treated as an insider. While this opened considerable access to backstage regions, it presented additional demands on managing the fieldwork role.

As Gans (1999) argues, the ethnographer’s *emotional* participation may be more important than the role notionally adopted. Especially in settings under stress, ethnographic insights arise through ‘subjecting the self – body, belief, personality, emotions, cognitions’ to the same situation and experiences of participants (Van Maanen 2011: 219). I treated this involvement as important data and sought to increase sensitivity to diverse perspectives through what Stein (2007a) terms ‘deep listening’. This treats emotional responses and private associations not as insight, but intersubjective material requiring further investigation and reflexive questions about relations with the setting and within oneself (Hinshelwood and Skogstad 2000; Hunt 1989). Such material remained a ‘live’ element of fieldwork that continued long after leaving the field, informing analysis and ethnographic writing.

Formal fieldwork involved 76 formal interviews, 195 hours of participant-observation and analysis of written records. As a consultant in the region, I conducted numerous informal interviews with wider stakeholders. These informed my understanding of the field, but are not included in the formal data. A summary of fieldwork is captured in Table 1.

Table 1 Summary of Fieldwork

<i>Phase 1</i>	<i>Participant-observation</i>		<i>Formal Interviews</i>
	<i>Hours</i>	<i>Episodes</i>	
<i>DTC staff</i>	42	9	15
<i>Interorganizational outreach projects</i>	51	15	14
<i>Former residents</i>	7	1	4
<i>Organizational stakeholders</i>			32
<i>Phase 2</i>			
<i>Residential community</i>	95	10	3
<i>External officials</i>			8
<i>TOTAL - Phases 1 & 2</i>	195	35	76

Fieldnotes and interviews were transcribed, and NVivo software assisted data management and analysis. A modified grounded theory method was used for ethnographic analysis, making particular use of key incidents and memo-writing to develop analytic categories (see Charmaz and Mitchell 2001; Emerson et al. 1995). I first used open coding for content analysis and exploration of themes across the whole dataset; I next selectively coded key incidents and rich anecdotes to compare incidents, deepen analysis and explore alternative meanings. At this stage, analytic categories such as ‘trouble’, ‘turbulence’, and other variants emerged inductively as strong themes, which shaped a preliminary analytic framework. I then re-analysed the dataset using focused coding, following Katz’s (1983) strategy of constantly comparing deviant cases, both testing and revising analytic categories. Social constructionist and psychoanalytic perspectives were used to examine the emerging analysis, and also ensure interpretations were strongly over-determined by the empirical data (Gabriel 1999). An empirically-grounded framework was thus gradually developed, moving iteratively between data and theory (see Eisenhardt 1989).

Restorative turbulence and the creation of formative space

Turbulence across relational boundaries

From mundane interpersonal arguments to full-blown crises, the presentation and handling of trouble are key aspects of relations in the DTC. Ranging from reticence to engage with others to disruption of the setting through self-harm or violence, forms of trouble preoccupy the community.

Yet the concept of trouble inadequately describes dynamics of wider disruption that travel beyond local trouble to produce turbulence across relational boundaries. What begins as localised trouble tends to create emotional contagion, stimulating further trouble elsewhere in the community:

*‘Going there is terrifying...you haven’t got time to think - I had just unpacked and somebody screamed and put their hand straight through the window right next to me...it’s a pretty big shock.’
(Resident)*

If mainstream mental health services are designed for formal trouble-shooting the democratic methods of the DTC may be better suited to manage relational turbulence. While localised trouble is usually addressed in a daily programme of group therapy, its potential to provoke turbulence is regarded central in managing the DTC’s ‘inner life’. The community is continuously on-call to respond to trouble that threatens to escalate. Meetings of the full community may be called several times a night to manage relational turbulence.

Such involvement helps create a mutually-constructed ‘third’ space in which therapeutic responses may be devised. Other members’ emotional reactions can foster deeply formative relations: *‘it really affected me that - oh my God - I can have so much effect on people.’* For residents accustomed to traditional psychiatric and criminal justice settings, this potential for mutual engagement can represent an idealised *‘place of so much hope.’* Over time, such experiences shape participants’ experiences of themselves and others, often motivating them to engage less destructively:

'The first two months I didn't know where the hell I was...I was totally overwhelmed and exhausted...fighting with them. (I knew) I just needed to stop (cutting) myself, I needed to be different.' (Resident)

Consequently, the transmission of turbulence across boundaries may have beneficial effects by shaping reciprocal, therapeutic forms of intersubjectivity. Instead of controlling trouble and turbulence, the DTC attempts to cultivate authentic interactions at sub-critical levels, making them amenable for exploration and remedial work. Participants are encouraged to clarify their positions, grasp others' concerns, and explore alternative solutions. This applies to staff as much as residents and serves an important regulating function, counteracting further escalation through deep, mutual engagement.

Isomorphic effects upon the organization

However, turbulence tends to have a cumulative effect and may disrupt the community's therapeutic work. Emotional strain arising from relational trouble, suicide threats and intimidation produces 'a reverberating circuit of projective identifications' (Ogden 1992: 119). Heightened levels of turbulence shift and are amplified between interpersonal, subgroup and DTC levels. Such escalation generates isomorphic effects at an organization level as interactions produce similar functioning and behaviour between groups and organizations (Agazarian & Peters, 1981; Di Maggio & Powell, 1983), affecting parties far beyond the original trouble.

Organizational turbulence is thus not merely a reaction to trouble, but produced through wider destabilizing effects upon organizational functioning and morale. This involves more insidious dynamics than relational turbulence. Whereas relational turbulence tends to generate 'third' space, organizational turbulence attenuates such space, inhibiting therapeutic work.

When organizational turbulence is operating the DTC itself is experienced as chaotic. Interactions involve '*such insularity in people's capacity to actually think...the worst thing of all is this sense of deprivation, of crisis, of sickness.*' As one therapist described, it can seem as though the organization itself becomes 'personality disordered':

'You live and breathe the (personality disorder) experience...every pore is fully immersed...The dynamics...seep everywhere. You do enter a similar 'borderline' experience to that of the residents...the staff room (mirrors) what's happening with residents and vice versa... All these things are polluted by the dynamics.' (DTC therapist)

Organizational-level turbulence, moreover, has a self-perpetuating tendency that thwarts organizational learning and shared decision-making. Tensions are compounded through procrastination, double-binds, and undermining corrective efforts. The whole organization can be so affected – its outreach and management functions, along with the community itself.

Turbulence as a restorative mechanism

Nonetheless, the DTC has important recovery mechanisms. Collective participation has a limiting effect on organizational turbulence. Sheer exhaustion can stimulate collective attempts to contain tensions by ‘slowing them down’ rather than risk further escalation. More experienced residents may advocate the need to manage each other’s anxieties rather than stir them, *‘otherwise we end up having (emergency) meetings all night long.’ Such efforts may in themselves be reparative, laying foundations for greater mutuality and consideration of others’ wellbeing.*

Secondly, the turbulent community’s tendency to scapegoat ‘troublemakers’ can have unexpected, therapeutic outcomes. At times of intense frustration and exhaustion, democratic decision-making may initially enact rather than repair community tensions. There can be strong pressure to evict members deemed ‘untreatable’, often without consideration of potential consequences:

‘People had simply had enough. The community kicked him out in the middle of the night and then later realised that they may have been unnecessarily angry... Sometimes we end up making crap decisions.’ (DTC therapist)

Such scapegoating dynamics may be highly destructive (Girard 2005). In large groups under threat, object relations develop a paranoid-schizoid form that strengthens projections onto the group as a good object, while ‘badness’ is externalised onto an external enemy or perceived stranger within (Volkan 2004). Scapegoating stems from this totalising tendency to attribute the group’s predicament to certain ‘bad objects’, cast for instance in the role of a scapegoat. In fantasy, badness may thus be controlled through removal of the scapegoat (Schwartz 1993).

Enacting this dynamic temporarily relieves group tensions, but at the cost of strengthening persecutory anxiety and a compulsion to expel further ‘bad objects’ (Hinshelwood 1987). When worked with at a more symbolic level, though, scapegoating has some potentially transformative effects. As a collective ‘interlocutory drama’ it creates a provisional sense of group unity through shared liminal space (see Bhaba 1994). Through blurring the

boundary between inner fantasy and social reality, transitional forms of object relations are created (Anzieu 1984) that are potentially restorative.

The DTC's established methods for dealing with troublemakers tend to cultivate this more turbulent form of 'third' space. By establishing time for reflection, exploring alternative solutions, and gaining informal support, integrative forms of intersubjective relations can develop. Even subtle shifts in attitudes may prompt efforts to restore benign relations:

'It may be we have got to let her stay around the building on her own all day – there might be something quite creative about it. If you're feeling really angry and you hear people having a good time...something might just change.' (DTC therapist)

A major finding of this study was the identification of different types of turbulence in the DTC. Distinct from localised trouble, the transfer and escalation of turbulence across experiential boundaries had regulating effects, capable of restoring organizational functioning. In the next section, I turn to a traumatic incident and its repercussion upon the DTC.

Ruptured transitional space

The DTC's ability to handle turbulence was transformed by a critical incident that traumatised the community. The incident involved two former residents, Mark and John², who had recently completed twelve months of DTC treatment and, unknown to DTC staff, moved together into a rented apartment. The couple formed an intimate relationship whilst in the DTC and although they had experienced difficulties in their relationship, community members believed they were resolving them, with the help of a weekly 'transition' group for recently discharged residents.

Yet shortly after moving in together, the couple had a violent, drunken row – and Mark stabbed John to death in a frenzied attack. Both men were regarded as having been successfully treated by the DTC. Yet within just weeks of leaving the community, Mark was charged with and subsequently convicted of John's murder.

The impact upon the DTC was profound. Residents and staff alike were horrified by the attack and shocked by Mark's seemingly uncharacteristic violence. He had been regarded as a gentle and sociable member of the community, and he was felt to have been one of its least aggressive members. The incident overwhelmed the community with grief, remorse

and intense anger, fuelled by recrimination. Resident and staff groups found themselves internally divided, split through torn emotions and loyalties to the two men.

‘The pressure has been immense...enormously traumatic. We just didn’t know who to be angry with...there has been a great deal of soul-searching – and such fallout in the staff team...a chain reaction of blame.’ (DTC therapist)

Relational trouble does not come in any stronger form than homicide. For a community whose identity and purpose was not merely containing trouble, but the successful treatment of personality disorders, John’s murder threw the community into crisis. The incident traumatised its members, producing a psychological injury that overwhelmed their capacity to cope with now heightened emotions and reactions. The death of a colleague can produce grief reactions analogous to death in the family (Hyde and Thomas 2003), but the violence of homicide in therapeutic settings has more devastating psychological and social effects. By violating the social prohibition against extreme violence, the ‘elusive boundary between fantasy and reality, wish and action’ is eroded (Erlich-Ginor and Erlich 1999: 203), rupturing the basic trust needed for therapeutic work (Erikson 1985).

This idea of a ruptured boundary is important because the homicide altered DTC members’ sense of a shared, protective space in which the dynamics of trouble might be safely handled. It disrupted members’ belief in the community as an essentially safe space, protected from dangers of the outside world. As aggression was felt to lose symbolic aspects, coercion, scapegoating, and threats of violence became frighteningly real. In its traumatised state, the community’s ability to manage ‘ordinary’ trouble was overwhelmed. DTC leaders suspended the therapy programme, resorting to around-the-clock emergency meetings in an effort to manage barely contained levels of turbulence.

The DTC’s internal dynamics were compounded, however, by the homicide’s repercussions within the policy environment. Government representatives and health authorities reacted with extreme anxiety and, as one official described, ‘panic’ as a high-profile national initiative threatened to become a policy embarrassment:

‘The homicide is telling: discharge planning was done by other punters...(yet) these are some of the most dangerous and manipulative patients that there are. It’s literally the case of “the lunatics running the asylum”. It’s scandalous...the project is unsafe.’ (Senior official)

Yet the homicide need not have been disastrous for the DTC. Homicides are not unusual in mental health services, and rarely lead to organizational closure. Although the DTC was

in crisis, therapeutic communities are prone to extreme fluctuations in morale and functioning, and they may be remarkably resilient (Hinshelwood 1987). Engaging with the painful reality of the homicide might therefore have led to integrative-reparative (*depressive*) grieving and recovery, leading to individual and organizational learning. Instead, in the homicide's aftermath, a highly defensive mode developed in which turbulence took a perverse and destructive form.

Perverse turbulence and the development of perverse space

The DTC's capacity for reflection and learning from experience was undermined by the homicide's repercussions at local and national levels. Rising interorganizational conflict developed, focused on the community's distinctive model of handling clinical trouble. Fearing political fallout, authorities attempted to avert blame, imposing externally-prescribed risk management techniques.

'Of course the homicide caused a great furore. The chair of (the national commissioners) began to get anxious he was going to end up with a homicide inquiry... (and) panicked into commissioning a risk report of the entire national service... Did it make (local authorities) anxious? Oh my God, yes...(they) already had two homicide enquiries going on, both of which will severely criticise (them).'
(Senior official)

Under what they perceived as threat of severe official sanction, and a 'witch hunt', community members experienced extreme, persecutory anxiety. Residents became preoccupied with the survival of the community and the security of their places within it, while staff members feared for their professional careers. Such anxieties disrupted the community's capacity to think reflectively, concentrating a sense of failure on the DTC's handling of clinical risk:

'There is something about the unknown that unnerves them so the (officials) go to what they think is solid ground and demand information on patient behaviour. But residents should not be made to feel like subjects of risk, debris of pathology...slapped down to keep their feelings inside.' (DTC therapist)

Critical external evaluations compounded feelings of guilt over John's murder, and a sense of shame in the DTC's failure to live up to its ideal. Whereas its democratic-therapeutic handling of trouble had previously been regarded a source of pride, it quickly became a

cause of humiliation. Escalating recrimination and anger about the DTC's responsibility for the homicide distracted the community from mourning its losses – even to speak of them:

Miranda (pointing to graffiti) says John had written that shortly before being murdered by his partner... She suddenly seems uncomfortable. I want to ask how it has affected the community, but stop myself. It feels intrusive to ask, as though it's something very personal. They half-joke: 'however, we don't talk about that.' (Fieldnotes)

Unlike mourning, which involves internally-directed feelings of guilt, important in psychological reparation, shame is externally-focused, involving exposure to another's negative evaluation. Failing to live up to one's ideal self image produces feelings of mortification and rage towards others, inhibiting the ability to grieve (Scheff 1994). Avoiding talk of John's murder may have temporarily reduced emotional distress, but the aftermath seemed to pervade the community: *'going on and on, affecting everything we do.'* For residents, it produced *'months (of) hell...no protected time, no retreat...it's like a year in Beirut.'*

These experiences did not produce the relative cohesion of paranoid-schizoid splitting, however, which might have galvanised the community internally against an external adversary (Volkan 2004). Instead, preoccupation with self preservation produced a terrified and beleaguered community, 'assaulted, undermined and torn apart (by) a very inflammatory and destructive engagement (with officials).'

Distracted from its primary task, the community bypassed therapeutic 'remembering, repeating and working-through' (Freud 1914) the events of the homicide. Yet its dynamics were re-enacted in a highly destructive mode of turbulence in which sado-masochistic patterns dominated. Central to this was residents' deep resentment of an emerging betrayal by staff members who no longer seemed to believe in the DTC's democratic ideals. Despite rhetorical protests against authorities' efforts to steer the management of trouble, staff quietly adopted managerial perspectives. Confidential details of residents' activities were covertly passed to officials and other agencies, *'covering ourselves, in case the shit hit the fan.'* DTC leaders pressurised the community to deal more rigorously with presumed 'troublemakers', threatening more challenging residents with expulsion. Residents were acutely sensitive to the emotional changes in community relations, perceiving a menacing shift in attitude:

'There is not one community here - there are two. I really don't trust staff - you can't call it a community when you can't talk with them about anything...you can't call it democratic.' (Night-time discussion between residents)

Instead of merely retreating from democratic participation, residents engaged in impassioned conflicts, furious at staff attempts to exert hierarchical authority. As democratic decision-making was undermined, a sense of shared, mutually constructed space was eroded, and the community became an area where staff experienced *'no longer having moral authority.'* Conflict between staff and residents escalated as one's survival in the community seemed dependent on overcoming others' aggression.

'We picked up the pieces every morning after a bloody bomb had gone off overnight.' (DTC therapist)

In contrast to restorative turbulence, then, in which intersubjective relations have a moderating effect, in this perverse mode parties colluded to produce an enmeshed and intractable conflict. Members shared terrible images of being under siege in war-torn conflict, of being trapped in a death train, and of an impending Holocaust. These images were tangibly experienced and 'made real' through members' intersubjective exchanges with each other. Persecutory anxiety created a shared experience of persecution at the hands of sadistic officials. Residents described horrific nightmares in which staff members appeared as their abusers. For their part, distressed staff members described in tears their experiences of such accusations as attacks upon their innermost selves: of having their *'livers ripped out.'*

'It is so severe, all this battering. It's so thin - the skin...it's a crucifixion. I'm overflowing...with feelings. I just can't seem to escape or forget the hurt that residents put me through. I'm constantly under attack.' (DTC therapist)

With community relations so destructively engaged, the DTC's capacity to restore therapeutic functioning collapsed. Through fragmented splitting, the DTC had degenerated from a perceived 'jewel in the crown' to a painful lost cause, yet one that members felt compelled to engage in 'like a moth rushing into the flame', amidst experiences of betrayal, sadistic persecution, and fear of annihilation.

'We tried to hang onto some semblance of authority. But the power the (authorities) were exercising over us diminished our ability to manage the attacks from residents. The community became

disembowelled... Every day was like a nuclear reactor without the container – there was nothing around to hold the explosion.’ (DTC therapist)

Despite positive government-commissioned independent evaluations (Fiander et al. 2004), officials finally lost patience and closed the DTC, less than four years after its launch as a promising policy initiative.

Discussion

This empirical case reveals intersubjective ‘third’ space to be fundamental to the DTC’s handling of trouble and turbulence. Although turbulence is disruptive to transitional space, in a restorative mode the DTC’s methods were adaptive, resilient and capable of making productive use of turbulence through collaborative reflection and reparation. This restorative capacity was undermined following the homicide as conflict between the DTC’s and authorities’ management of trouble undermined the DTC’s methods, producing a perverse mode of turbulence.

A key question is why the homicide had such a destructive impact upon the DTC. Responsibility for the incident formally lay not with the DTC, but other agencies providing aftercare. Despite official concerns about risk management, independent evaluations had concluded the DTC was ‘clinically safe’ and effective in treating a problematic population (Fiander et al. 2004). So why was this incident such a turning point?

The dynamics of restorative turbulence

The DTC’s original ability to handle trouble and turbulence may be conceptualised as a formative process in which object relations undergo a recursive process of transformation from *paranoid-schizoid* splitting to integrative-reparative (*depressive*) relations.

In restorative turbulence, experiences of emotional contagion provoke rudimentary splitting between ‘troublemakers’ (Obholzer and Roberts 1994) or ‘outsiders’ (Hirschhorn 1990) and positive identification with the DTC as a ‘*place of so much hope.*’ Experiences of security and nurture are partly gained through scapegoating, externalising ‘toxins’, while identification with the DTC’s organizational ideal allows other members to overcome anxiety and experience ‘a return to centrality in a loving world’ (Schwartz 1990: 19).

Scapegoating may be highly destructive; group cohesiveness and morale is temporarily achieved at the expense of persecuted individuals (Schwartz 1993). But by cultivating a

reflective, shared endeavour and ‘slowing things down,’ the DTC’s methods promote restorative relations. Eliciting alternative perspectives and solutions encourages gradual integration of inner experience and social ‘reality’, restoring relations and leading to collective learning.

Through such endeavours, a *formative space* was mutually created. Although far more turbulent than Winnicott’s (1953; 1967) notion of transitional space, this ‘third’ area intersubjectivity involved reciprocal forms of relatedness in which insight, mutual care, and self-regulation were able to thrive.

The dynamics of perverse turbulence

This capacity to handle turbulence was critically disrupted following the homicide. Trauma involves extreme anxiety states in which normal patterns of object relations fail to contain affect. Even rudimentary forms of *paranoid-schizoid* splitting collapse, resulting in terrifying experiences of falling apart in relation to others and within oneself (Bion 1957).

What followed was neither complete breakdown, nor a process of recovery, but a highly defensive, rigid form of organization in which moral authority was eroded. Officials’ involvement with the DTC undermined its well-established methods, disrupting members’ capacity to grieve and learn from the homicide. Despite private feelings of guilt, shame, and disillusionment, such emotions were bypassed in the face of official scrutiny and directives. Experiencing persecutory external threat, the community regrouped, creating a *‘mob mentality (with) no functioning aspect of the group (to) appeal to.’*

This propensity for trauma to produce highly dysfunctional, ‘incohesive’ group relations has been studied by Hopper and colleagues (2003; 2012). Individuals’ anxiety of breakdown is so intolerable that an urgent grouping is needed to provide order out of chaos. Incohesive relations create a temporary order in which intersubjective relations are tenuous, limiting their capacity to recover. When these fragmented ‘aggregates’ of individual participants threaten to fall apart, they are barely capable of collective action, yet attempts to regroup produce a dense, undifferentiated mass, such as the DTC’s ‘mob mentality’.

In the aftermath of the homicide, the DTC’s besieged mentality reflected certain ‘incohesive’ characteristics, shifting from fragmented ‘aggregation’ to subsequent ‘massification’ (Hopper 2003). But through escalating turbulence, a distinctive, *perverse* form of transitional space developed in which relations became emotionally intertwined in intractable and escalating conflict.

Organizational perversion has previously been described as an *escape* from relatedness (Armstrong 2005). Long (2002; 2008) elucidates how organizational perversity develops through cold, detached states of mind; psychological retreats in which instrumental and abusive relations thrive. By ‘turning a blind eye...knowingly deciding not to know,’ contradictory versions of reality are able to coexist, evading their most painful aspects (Steiner 1993: 93-94). Insight and understanding are used to misrepresent reality, intentionally distorting relations.

In perverse turbulence, however, a volatile, ‘heated’ form of intersubjective engagement arose. These dynamics did not merely attenuate transitional space, but constructed instead a shared *perverse space*. Relations acquired a persecutory aggressor-victim dynamic as officials, staff members, and an increasingly seditious resident group engaged each other in mutually destructive conflict and ‘intersubjective captivation’ (Crapanzano, 2006). Whereas ‘cold’ perversion involves a relationally distant state of aggregated participants, ‘heated’ perversion involves the entanglement of ‘massification’. In contrast to *formative space*, in this very different perverse space intersubjective relations were aggravated and subverted, undermining the DTC’s methods in a parody of organizational functioning.

Instead of supporting the community to mourn its losses and face its responsibilities associated with John’s murder, interactions between officials and the DTC led to ever-escalating turbulence. In place of a democratic, ‘good authority’ (Hoggett et al. 2006), relations became perverted, the possibility of restoring shared decision-making was eschewed, and destructive forms of authority took over (see Long 2008).

Conclusion

In linking social constructionist perspectives with contemporary relational psychoanalytic theory, this study has explored nuances of trouble and its potential for turbulence as part of an organizational, intersubjective ‘scene’. Studying how trouble is generated, exchanged and managed in organizations reveals dynamics of relational turbulence capable of escalating across experiential boundaries in individuals, group, and organizations.

This article contributes to the literature by introducing the concept of relational turbulence across boundaries, and through developing a model of formative and perverse spaces created by this turbulence in organizations. This model extends the psychoanalytic concept of transitional space, revealing turbulent and destructive dimensions, hitherto overlooked. Whereas restorative turbulence has a regulating function and may create *formative spaces* in

which authentic, mutual relations flourish, perverse turbulence undermines organizational functioning and can lead to intractable *perverse spaces* in which aggressor-victim dynamics dominate.

As Eisenhardt (1989) argues, extreme cases such as this illuminate dynamics which, although present, may be harder to discern in other settings. In human service organizations such as healthcare, schools and prisons, trouble and its turbulent effects are inherent in organizational life. When handled informally, they can have important self-regulating dynamics, creating formative spaces that are important for productivity. Conversely, formal control may not merely attenuate transitional areas, but produce perverse spaces from which participants' abilities to disentangle themselves is uncertain.

This study has implications for wider organizational research beyond such settings. Liminal areas may play a more vital part in organizations than is usually recognised. They can be a significant resource for creativity, as well as for dramatically 'unleashed' rebellion forcing organizational transformation (Courpasson and Thoenig 2010). This case study suggests that future research should pay greater attention to their dynamics as key relational spaces, where individuals, groups and organizations come together in interesting and often unexpected ways.

Bringing organizational 'third' space into focus has revealed an intersubjective scene in which turbulence plays a key role. This scene illuminates exchanges between 'personal troubles of milieu' and their handling as 'public issues of social structure' (Mills 1959). Within 'third' space, relational turbulence may be important for productivity, if it is also potentially immensely destructive.

Notes

1. This study was undertaken as part of self-funded PhD research (Fischer 2008)
2. Personal names have been changed

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Author Biography

Michael Fischer is Senior Research Fellow in Leadership Development at Saïd Business School, University of Oxford, and Honorary Consultant Psychotherapist at King's Health Partners Academic Health Sciences Centre. He is a psychoanalytic psychotherapist and group analyst, and trained with the Institute of Group Analysis, London. He holds a PhD in organizational behaviour from Imperial College Business School, University of London. His main research interests are organizational studies (especially group dynamics, interorganizational relations, critical studies and psychoanalysis), leadership development, knowledge management, and the organization and management of public services and healthcare.