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Beyond Boundaries: How Third-Sector Counselling Organizations Navigate the Tension Between Professional Limits and Moral Imperatives

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Abstract

Background and aims: Against the backdrop of the global refugee crisis and the post-pandemic era, vulnerable populations in London face multiple challenges, including housing crises and issues related to legal or policy status. Their mental health needs are intertwined with basic survival needs, creating role boundary challenges for third-sector counselling organizations. This study focused on Waterloo Community Counselling (WCC), exploring the issue of role boundary conflicts faced by third-sector counselling organizations in serving vulnerable populations.

Methods: The study adopted a qualitative research design and conducted semi-structured interviews with 7 WCC office team members. The data were analysed and coded using thematic analysis to extract main themes.

Results and Conclusion: Five main themes were identified: Impact of Practical Issues on Counselling Services, Structural Constraints on Service Provision (funding, resources, and gaps in service provision), Organisational Challenges in Providing Practical Support, Current Strategies for Coping with Challenges (basic material support, referral services), Dual Attitudes Toward Organisational Operations.

The organization faces multi-level operational challenges, including individual role ambiguity, role differentiation perspective, and tensions between professional boundaries and moral responsibilities; Although strategies such as material support and referral services partially alleviate the pressure, they do not fundamentally resolve the boundary conflict; As a result, employees exhibit a contradictory attitude toward organizational operations, combining positive evaluations with frustration over the inability to expand services.

The study depicted the generative mechanism of WCC's role boundary conflicts through five main themes. It revealed that these conflicts stemmed from the dynamic interplay among institutional constraints, organizational operational challenges, and response capacities. It provided an empirical framework for understanding the tension between professional boundaries and moral responsibilities in third-sector counselling organizations.

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Introduction

Against the backdrop of the global refugee crisis and the post-pandemic era, the challenges faced by vulnerable groups in London have become increasingly prominent. According to data from the Office for National Statistics, the housing crisis in London worsened in the 2023-2024 period, reaching the highest level in a decade (London Councils, 2024). Meanwhile, over 1 million people are affected by the "No Recourse to Public Funds" (NRPF) policy, which excludes them from most state benefits and services (McKinney et al., 2024).

These vulnerable groups are often trapped in multiple survival challenges, leading to severe mental health risks: social isolation and structural discrimination, such as refugees struggling to integrate due to language and cultural barriers subject them to persistent psychological stress, making them highly susceptible to anxiety, depression, and other mental health issues (Bhui et al., 2022). While their urgent need for psychological intervention often remains unmet, as mainstream services frequently exclude them due to language and cultural barriers, financial constraints, or policy restrictions (Turrini et al., 2019).

In such circumstances, non-profit third-sector counselling organizations become an important option for this group. Third-sector organizations are nonprofit entities that operate independently from both government and market forces, with a core mission focused on serving the public interest (Macmillan, 2013). When there is a shortage of services in the public sector, the third sector is often forced to take on public services such as education and social work to compensate for the “contract failure” of the government and the market (Salamon & Anheier, 1997； NCVO, 2009). The free mental health services provided by the NHS in the United Kingdom cannot meet the demand in London due to the city’s high population density and high needs. Moreover, mainstream mental health services lack multilingual and cross-cultural matching, resulting in limited accessibility for disadvantaged groups. As a result, a “service gap” has emerged.

However, the positioning of third sector organisations as “gap fillers” creates multiple organisational pressures, bringing challenges in managing organizational role boundaries for

such institutions. This is not only because their non-profit nature makes them highly dependent on external resources, which echoes the Resource Dependence Theory (Pfeffer & Salancik, 2006). Research also shows that these organisations frequently experience the "mission drift" phenomenon (Schmid, 2013): Expanding their services beyond their core capabilities to meet unmet community needs. Ebrahim et al. (2014) found that 73% of third sector organisations reported facing pressure to provide services beyond their original boundary, but often without corresponding resource support. This phenomenon is particularly prominent in the field of mental health because clients' psychological needs are closely intertwined with their practical survival issues, making it difficult to avoid.

Waterloo Community Counselling (WCC) is a typical example of third-sector mental health services. Its office team has eight staff members and provided more than 7,500 hours of counselling services each year to nearly 700 clients in London. The organisation provides low-cost services to people unable to afford counselling fees, which accounts for about 44% of its total services. Meanwhile it offers no-cost multilingual counselling services in 23 languages to refugees and asylum seekers, which accounts for 56%.

WCC also faced the above-mentioned typical dilemmas of third-sector organisations, which were essentially a "passive expansion of non-professional roles". This could be further explained through the classical role theory framework. The role theory system proposed by Kahn et al. (1964) includes three key elements: role senders, role receivers, role expectations. Role boundary conflict occurs when multiple role senders have conflicting expectations for the same role.

The ethical code of the British Association for Counselling and Psychotherapy (BACP) clearly states that counsellors should "provide services only within the scope of their professional competence" (BACP, 2018). However, when clients are unable to participate in therapy due to basic survival crises, strictly maintaining role boundaries may constitute another form of ethical harm. This dilemma is referred to in academia as the "responsibility paradox of non-profit organisations" (Pope & Vasquez, 2016). Under this circumstance, the role conflict faced by WCC is reflected in the contradictory role expectations from the two

role senders: the professional framework and client needs, under conditions of limited resources and qualifications, giving rise to role boundary conflict.

A systematic review covering 24 studies on third-sector organisations (Bach-Mortensen & Montgomery, 2018) showed that there was a clear gap in existing research regarding the resolution of dilemmas faced by WCC: Firstly, most literature focuses on large official organizations or healthcare systems, overlooking the unique perspectives of the boundary issue of community-level third-sector organizations operating under resource constraints; Secondly, there is a lack of in-depth exploration into the subjective perceptions of staff within these organizations, particularly non-counselling personnel. The dynamic negotiation and allocation process between psychological counselling services and essential practical needs has not been sufficiently discussed.

Based on the background above, the aim of this study is to explore WCC's organisational role boundary management issue. As a third-sector nonprofit-counselling organization, WCC's core mission is to provide mental health support and counselling services for vulnerable groups rather than delivering social services or addressing practical issues. The fundamental conflict between the institutional role of such organizations and the complex needs of their clients constitutes the core issue of this study.

Through in-depth interviews with WCC office team members, this study seeks to offer comprehensive understanding of organisational role boundary conflicts, their underlying mechanisms, and associated structural constraints. At the same time, it sought to provide empirical evidence for optimizing service models in WCC and similar nonprofit counselling organizations and contribute to practical improvements.

Methods

Design

This study adopted a qualitative research design and collected data through semi-structured interviews. Qualitative research is more suitable for capturing the details of individuals' subjective experiences and personalized expressions in complex phenomena (Creswell, 2007). This method combines the advantages of a predetermined question framework and open-ended dialogue (Braun & Clarke, 2006), making it highly compatible with the study's aim of exploring role boundary conflicts and mission drift among WCC staff in the context of complex service demands. The interview guide was structured around three core dimensions: the specific manifestations of role conflicts, the practical challenges of resource coordination, and recommendations for optimizing the boundaries of practical support.

Sample

This study recruited 7 office team staff members as research subjects, including staff from administrative, clinical, and finance positions. Two members of the participants work full time, and the rest at part time. Purposive sampling was employed to obtain rich, detailed data on personal experiences (Pietkiewicz & Smith, 2014).

Procedure

Recruitment was conducted through internal "gatekeepers" within the organization: A recruitment email (Appendix A) and recruitment flyer (Appendix B) was sent to all eligible employees for initial screening, and an information sheet (Appendix C) and consent form (Appendix D) were sent via email to the targeted employees in the recruitment phase. Participants signed the electronic consent form at least 48 hours before the interview.

Interviews took place between April and June 2025.During the formal interview, a

pre-designed semi-structured interview guide was followed (Appendix E), with the duration of 45±15 minutes. In terms of the interview format, one-on-one interviews were conducted in an online meeting room or in an office provided by WCC. The interview was recorded throughout with the participant's informed consent.

Data were anonymised by assigning each participant a unique identifier to prevent identification. All recordings and original transcripts were stored on password-protected devices.

Ethical approval

Ethical approval was obtained from King's College London PNM Research Ethics Panel (Reference: LRU/DP-24/25-46263) on 26 February 2025.

Data Analysis

This study's data analysis followed the six-stage framework of thematic analysis by Braun and Clarke (2006), using NVivo 15 software for initial coding, theme induction, and theme revision through three levels of coding. This method is suitable for systematically extracting core contradictions in employees' perceptions, such as the conflict between "focusing on counselling services" and "addressing practical needs". Thematic analysis is also highly flexible, making it suitable for extracting both commonalities and differences from interviews with employees in different roles within the office team for this study (Braun & Clarke, 2006). The framework focused on individual staff experiences, identifying common themes at the organizational level regarding responsibility boundaries and referral standards.

Methodological Considerations

The limitation was addressed by providing **thick description** through detailed portrayal of WCC's operational realities. The study presents comprehensive depictions of the

client groups WCC serves, the primary challenges faced by the organization, and the support policies currently implemented. This helps researchers assess whether the findings of this study are applicable to similar organizations, enhancing the transferability of the results.

Meanwhile, **member checking** was conducted by sharing selected interview excerpts or summarized themes with participants after the interview. This process ensures their perspectives are accurately represented and helps prevents potential misunderstandings.

Results

The thematic analysis of the seven interview datasets was conducted through systematic coding and categorisation following the six steps of Thematic Analysis. A word frequency chart generated from the analysis of the original interview transcripts was also used as a reference (Figure 1), from which five main themes were extracted.

Figure 1. Word frequency chart from the analysis of raw transcripts

Theme 1 showed the negative impact of clients' practical issues on the organisation's core counselling mission; Theme 2 described the challenges WCC faced when providing practical support at the individual, interpersonal, and organisational levels; Theme 3 introduced WCC's current coping mechanisms for some of the challenges; Theme 4 captured the structural constraints, in terms of resources and social environment, that hinder WCC from providing more diverse and higher-quality services; Theme 5 illustrated participants' dual attitudes towards the organisation's overall operation and service boundary issues.

Table 1 presents the five main themes and their sub-themes derived from systematic coding and categorisation.

Main Theme	Sub-theme
Theme 1: Impact of Practical Issues on Counselling Services	Service Engagement Disruption
	Client Focus and Prioritisation Issues
	Psychological Health Deterioration
Theme 2: Structural Constraints on Service Provision	Resource and Capacity Constraints
	External Environmental Constraints
Theme 3: Organisational Challenges in Providing Practical Support	Individual Level Challenges
	Interpersonal Level Challenges
	Organisational Level Challenges
Theme 4: Current Strategies for Coping with Challenges	Meeting basic living needs - Providing material support
	Addressing professional gaps - Providing signposting services
	Alleviating organisational boundary conflicts - Establishing a referral network
Theme 5: Dual Attitudes Toward Organizational Operations	Positive Evaluation of Current Operations
	Ambivalent Feelings About Service Expansion

Table 1: Main Themes, and Sub-themes Identified from Interview Data

Theme 1: Impact of Practical Issues on Counselling Services

Participants stated that the impact of the clients' practical issues on counselling work was not only about poverty, but also about "uncertainty": *"sometimes clients will start in their counselling, and in the first week, something comes up like I'm going to be kicked out of my house"*. One reported prominent manifestation of "uncertainty" is the "DNAs" (Did Not Attend) issue: *"the main issue is like dropping out or people who don't attend"*.

Participants emphasised that the impact was not only on punctual attendance, but that clients burdened with practical issues also showed less than ideal engagement in counselling: *"in a very desperate situation, then they're not able to come in and think about other things"*. Participants felt that they could not focus on counselling itself because: *"their practical needs are so overwhelming and so preoccupying",* and also stated that at that moment their needs

were not prioritised on counselling: *"they're in survival mode and counselling is not what they need at that point".*

In addition, some participants also observed that practical issues interacted with clients' existing psychological problems, describing it as a vicious cycle: *"the anxiety that they would be sent back to their country of origin, And so then the depression follows, because whilst you're very anxious, the anxiety prevails"* , They believed that these negative emotions triggered by poor living conditions would be further intensified by new practical issues:

"If you're not eating decent food, getting enough rest and not living in warm, comfortable circumstances, your physical health won't generate as well".

Theme 2: Structural Constraints on Service Provision

Resource and Capacity Constraints

Every participant mentioned that the primary factor limiting WCC from expanding service boundaries and providing more practical support is the constraint of resources and professional qualifications: *"We don't have the manpower. We don't have the resources"* One participant stated that even if they had self-studied relevant knowledge and wanted to give clients advice: *"I should have told the client advice, but I couldn't, because I'm also not a profession in house and advice".* What was highlighted was not only the lack of professional qualification, but also the scarcity of space: *"We don't have a separate office for us to meet clients"*.

Whether it is the desire for more professional training and talent or the hope for more resources and space, all are closely linked to funding. WCC is reliant on support from other richer charitable organisations who dish out money for good projects, but this is linked to the social environment constraints discussed in the next theme: *"there are fewer and fewer of those around and lots of other charities are struggling to get funding to provide support"*. Participants also noted that, even if funding is raised, more attention will only be given to

WCC's core counselling services: *"They'll only fund the direct costs of counselling service, not the overhead costs, despite the fact that you can't run the service without your overhead costs".* This causes the expansion of practical support to be either impossible or to come at the expense of reducing counselling services.

In addition, the finance staff also stated regarding the organisation's spending on practical support: *"I don't think we've ever actually looked at it as a separate cost, some things are just overhead"*.

External Environmental Constraints

Economic and Political Environmental Changes.

Participants considered changes in the political environment to be an important factor in the decline of people's willingness to donate: *"there's a much more hostile environment towards refugee to do with politics, I think people are much more cautious about who they give their money to".* The economic downturn has also increased the number of people facing financial crises and needing practical support: *"people aren't able to access or afford the same food or anything that they used to go to for market"*.

For the more comprehensive and free NHS services: *"the issue with the NHS is the waiting times can be extremely long, and the length and type of service you get can be very restricted".* Participants stated that such limitations are of little help for clients with urgent psychological issues.

Absence of Responsible Organizations.

According to participants, when the clients exceed WCC's capacity, they often face difficulties in properly referring clients to other organisations because *"those other services are just like us, struggling financially, and they either have got closed waiting lists or they've stopped functioning altogether"*. This absence is especially evident in the native-language counselling services urgently needed by multilingual clients with language barriers: *"the Vietnamese mental health service, which was the only one that I was aware of in London, has closed down"*. The same situation was also reported for Albanian-language counselling. As

the only organisation providing services in this language, WCC's waiting list is always full.

Perceptions of Mental Health.

It was noted that many people see mental health counselling as a luxury: *"if you can't afford it, then you don't have it. When times are tough, they're not going to fund it".* One participant also pointed out that, compared with the more visible suffering of multilingual clients:

"When you're talking about people who don't very clearly have this major life event, but are having mental health issues, it's harder for people to see a compelling need to fund-raise".

Also mentioned in the interviews was the stigma from others and from the clients themselves: *"they don't believe in psychology or psychotherapy. They just believe all that thing of 'I'm not crazy' kind of way of thinking".*

Theme 3: Organisational Challenges in Providing Practical Support

Individual Level

Most participants, when discussing their work, described it as having a certain degree of complexity: *"it's quite a varied job which actually encompasses quite a few different things"*. Some participants also reported experiences of handling work outside their own responsibilities. For example, dealing with client groups that are not their own responsibility: *"sometimes we'll have to deal with stuff that is relevant to clients on the other side of the organisation"*. Or being forced to take on work outside their responsibilities: *"I don't think it's really part of my work to be phoning various places, but I'll do if I need to"*. Some participants also stated that the complexity and flexibility of office work made it difficult for them to clearly define their role boundaries:

"I don't know exactly what my job role would entail, but some tasks have almost evolved naturally into part of my work".

Interpersonal Level

Some participants further discussed the challenges they faced when providing practical support in collaboration with counsellors. According to participants, counsellors, as the primary role communicating with clients, serve as an important intermediary for the office team to understand and relay information. However, a considerable number of counsellors often expressed reluctance to discuss practical issues due to adherence to the clinical framework: *"I'm not a social worker and I tend to not ask those questions in the sessions if the client do not mention".* Even when practical issues were discussed, participants sometimes felt that the counselling perspective did not align with the office team's action-oriented aim of efficiently resolving problems:

"Counsellor won't do any decision but try to explore anything with players. But sometimes I feel like as a caseworker I need to tell the client that this is the right way to do it"

At the same time, participants also reported that some counsellors lacked the judgment and coping abilities when faced with complex practical issues, which may hinder clients' practical issues from receiving timely and effective assistance *"counsellor may just haven't thought it's important or it's something that we can talk about in the session. But actually we think this is something that we need to help with".* Some participants suggested that they might lack the ability to judge the urgency of situations and had not received relevant professional training: *"it could be really difficult for the counsellor to not be completely overwhelmed with the clients' needs".*

Organisational level

Misalignment Between Professional Identity and Client Expectations.

The first type of organisational-level challenge reported by participants is that clients misunderstand WCC's organisational nature and professional scope. For example, clients may seek advice services because the word "counselling" is sometimes translated as "advice" in other languages: *"So people come with that idea that we're gonna tell them what they need to do, and that's not what we're there for".* Also appearing in the interviews was the clients'

misunderstanding of the scope of documents they could issue: *"as a counselling organization, we can't offer kind of medical letters in terms of like diagnosis or prognosis or those kinds of medical reports".* Participants reported that even though WCC does not provide services for such practical issues, they still need to spend extra time clarifying the organisation's nature and signposting appropriate services:

"The length of time, the level of admin contact that goes into these issues is really demanding".

Tension Between Service Boundary Maintenance and Moral Responsibility.

Several participants expressed two practices simultaneously regarding maintaining organisational service boundaries and accepting clients. Firstly, participants generally reached a consensus that they needed to uphold professional ethics by being responsible to clients and should not take on work beyond their professional competence. when clients have serious psychological issues for instance: *"if they have a very specific mental health diagnosis like psychosis or bipolar, we may not take them because we're not the right service to support them"*, or when the current waiting list is already too long:*"40 people who on the waiting list who waiting for weeks and weeks before their counselling begins".* Participants were all able to make the rational judgement of *"we're not the right service"*.

However, at the same time, the same participants also expressed another contradictory practice: *"we become entangled sometimes with these clients because we have a sense of we need to offer them something"*. Participants stated that even with a clear understanding of service boundaries, they were still driven by such moral motivation:

"We also feel not obliged but as human beings, we do want to help".

Theme 4: Current strategies for coping with challenges

Meeting basic living needs - Providing material support

Regarding the lack of basic living provisions faced by WCC's client group, the

following types of material support were reported in the interviews.

Firstly, in terms of food *"we have an existing partnership with the food bank, we can get them a voucher and they can pick up some food themselves".* Support for data communication was also recognized: *"we're registered as a data bank, which basically means that people who needs access to the internet to come and collect a SIM card from us that has data preloaded on it".*

Participants believed that although this support is basic and not within the organisation's responsibilities, its implementation does not require much resource or effort and is of great help to clients.

Addressing professional gaps - Providing signposting services

In areas where WCC lacks resources and qualifications, participants reported that they provide assistance by developing partner organisations and offering signposting services to clients:

"I will give them a list of law centres or organisations that provide advice and advise the client to contact them directly".

The areas mentioned in the interviews covered multiple domains, such as social welfare and housing law, which are too complex for WCC but crucial for clients.

Alleviating organisational boundary conflicts - Establishing a referral network

When facing potential organisational role boundary conflicts and the risk of mission drift, participants described establishing a referral network as a current coping strategy: *"the way we try and manage that is to have good connections with other organizations to have a network of other services and contacts"*. The referral network enables WCC to refer clients promptly to appropriately matched service organisations:

"If they need immigration, housing, or benefits advice, then we have established good relationships with various other voluntary sector organisations in both Lambeth and Southwark, and we refer clients to them."

Participants stated that this allows clients to access more specialised and appropriate services without expanding service boundaries or increasing workload.

Theme 5: Dual Attitudes Toward Organizational Operations

Despite the various challenges and constraints mentioned, overall, the interviewees still gave positive evaluations of the current state of the organisation's operations. Whether regarding the core counselling service *"we're doing good work on counselling"* or in providing other forms of support "*I think we're a very safe organisation and I think we do offer a really good level of support*". Including budget management: *"I think the office staff mostly are very pragmatic about understanding the charity needs to be healthy for everyone's benefit, financially healthy".* Participants stated that while the organisation is running smoothly and healthily overall, there is also a certain budget surplus.

However, at the same time, some interviewees also expressed ambivalent attitudes towards whether to expand the service boundaries, which was especially prominent among administrative team members more directly responsible for practical support: *"it's a bit tricky because we're just the counselling service, but we do realize that the clients need a lot more support than just the therapeutic support issues"*. Participants also described different feelings about their capacity to help: *"So I feel a bit frustrated that there isn't enough that we can do and sometimes I end up feeling a little bit useless".*

Discussion

Summary of the main results

This study explored the issue of organisational role boundaries arising from the contradictions between institutional role positioning and clients' complex needs. Through in-depth interviews with 7 office team staff members at Waterloo Community Counselling (WCC), five main themes were identified:

The uncertainty of clients' practical issues directly undermines the effectiveness of counselling services, creating a vicious cycle between survival difficulties and psychological problems; Under structural constraints such as resource shortages, gaps in service provision, changes in the policy environment, and the stigmatization of mental health; The organization faces multi-level operational challenges, including individual role ambiguity, role differentiation perspective, and tensions between professional boundaries and moral responsibilities; Although strategies such as material support and referral services partially alleviate the pressure, they do not fundamentally resolve the boundary conflict; As a result, employees exhibit a contradictory attitude toward organizational operations, combining positive evaluations with frustration over the inability to expand services.

These findings objectively illustrated the multiple contexts and practices that WCC faced in its operations. This is not merely a set of isolated constraints, challenges, and coping strategies, but rather an interconnected chain of dilemmas. The internal connections provided an empirical basis for an in-depth analysis of WCC's "role boundary conflict" issue.

Discussion of results

The five themes identified in the results section present a dynamic interactive pathway, illustrating the generating mechanism of WCC's role boundary conflict (Figure 2):

Theme 1 explains the driving forces on the demand side. Clients' survival needs hinder the counselling mission, forming the initial source of pressure for boundary conflict and forcing WCC to confront practical issues;

Themes 2–3 together depict the formation of the pressure field. External structural constraints and internal operational challenges intertwine to create a dual pressure field, which intensifies the conflict between maintaining professional boundaries and fulfilling moral responsibilities;

Theme 4 presents the limited responses. The organisation responds to some boundary challenges through material support and referral networks, but still cannot fully resolve the problems;

Theme 5 presents employees' perceptions of the effectiveness of the organisation's responses. It reflects employees' perceptions of the outcomes when the organisation responds (Theme 4) to the pressures (Themes 2–3). The dual attitude indicates both satisfaction with the functioning of existing response mechanisms and frustration over the lack of mechanisms addressing certain challenges.

This pathway indicates that role boundary conflict essentially results from the dynamic interplay between structural constraints, organizational operational challenges, and response capacity. It provides an empirical framework for analysing moral imperative dilemma (sources of tension), role-based perceptual differences (sources of obstacles), and structural amplification effects (sources of constraints).

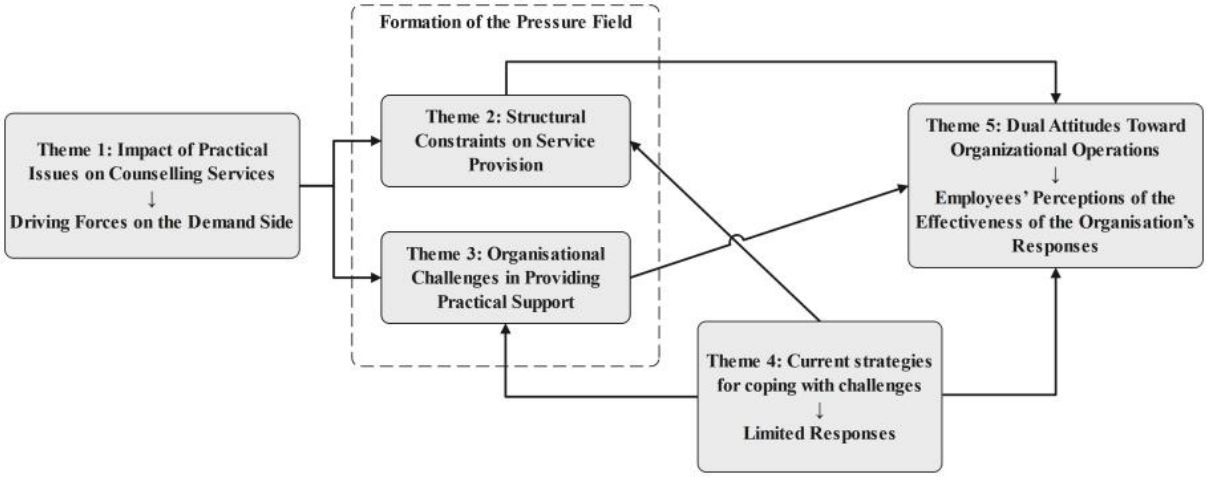

Figure 2. Dynamic Interactive Pathway of Role Boundary Conflict at Waterloo Community Counselling

The Moral Imperative Dilemma

At the intrapersonal level, the role boundary conflicts faced by WCC essentially reflect the unique moral-driven dilemmas of third sector organizations. Research shows that practitioners with a strong helping motivation are often willing to cross established role boundaries to respond to the urgent needs of vulnerable groups (Grant, 2007). This trait is also more common among individuals in nonprofit counselling organizations. This can easily lead to "mission drift" and resource dispersion (Schmid, 2013). Empirical studies further show that without institutional support, boundary-crossing interventions often exacerbate individual role conflict and burnout (Needham et al., 2017).

According to Tronto's (1993) ethics of care theory, care involves attentiveness, responsibility, competence, and responsiveness. WCC staff possess attentiveness and responsibility, understanding clients' practical needs and striving to offer help whenever possible; However, they lack competence and responsiveness, as there are insufficient resources to provide support. Therefore, such conflicts further give rise to moral distress (Jameton, 1984), which is the pain experienced when individuals know the right course of action but are unable to carry it out. This invisibly drives employees to extend the organization's role boundaries.

Role-Based Perceptual Differences

At the interpersonal level, differences in role perspectives among individuals within the organization are one of the key mechanisms contributing to internal role boundary conflicts. According to role theory (Katz & Kahn, 1978), different positions form different cognitive judgments about the same situation due to differences in task objectives and information sources.

In the case of WCC, differences in functions and the degree of exposure to practical issues within the office team also lead to differentiated perceptions of role boundary issues: Administrative staff, due to their direct involvement in supporting clients' practical issues, have a more immediate understanding of these needs and are therefore more inclined to hope that the organization expands its boundary to meet them. Clinical staff, constrained by professional frameworks and ethical guidelines (BACP, 2021), focus more on counselling

quality and service boundaries, and are therefore more likely to maintain a refusal stance when dealing with clients who do not meet the criteria. Finance staff lack direct interaction with clients, and since the organization has not yet established a systematic cost accounting mechanism for practical support, they find it more difficult to perceive the financial pressures in this area.

This cross-functional difference in perspectives aligns with empirical research findings, which show that different professional roles have significant differences in goal orientation and resource allocation preferences (Pratt et al., 2006).

The Structural Amplification Effect

Factors at the extra-organizational level also create structural amplification effects, further intensifying role boundary conflicts. Resource Dependence Theory (Pfeffer & Salancik, 1978) points out that the operation of nonprofit organizations is inevitably constrained by external factors such as the priorities of their funders.

The fragmented structure of the UK social welfare system (Glasby & Dickinson, 2014) increases the complexity of inter-agency collaboration. When these external constraints act upon internal operational patterns, the impact of boundary conflicts is amplified (Ebrahim, 2005).

Organizational Resilience and Effective Boundary Management

Although this study primarily explores the difficulties and challenges faced by WCC, the depiction of current service conditions and the attitudes and evaluations of interviewees demonstrate the organisation's overall good operational status and commendable aspects in managing organisational role boundaries. First, the organisation maintains overall stability in its operations and management, consistently upholding the core mission of delivering high-quality counselling services. This highlights how nonprofit organisations maintain clear role definitions and strategic focus amid complex external environments (Anheier, 2014).

Second, in most role boundary conflict situations, WCC demonstrates a triple-boundary maintenance motivation based on professional qualification limits, clients' best

interests, and organisational identity recognition. This reflects the core view in Kahn's (1964) role theory on the importance of role clarity for organizational effectiveness, effectively preventing "mission drift" and role conflict (Ashforth et al., 2000).

Lastly, WCC has addressed practical support through the utilization of external partnership networks. It helps maintain service quality and continuity in complex environments (Hobfoll, 2011), and represents an effective practice aligned with empirical findings recommending organizations alleviate role conflict through referral networks (Ebrahim et al., 2014).

Recommendation

Given that the external environmental constraints identified in the conflict mechanisms are difficult to control or change in the short term. Improvements in the other two mechanisms both require the organization to have systematic data collection on practical support expense and workload capacity as a foundation. Therefore, it is necessary to establish data-driven boundary management.

Based on this foundation, improvement measures can be divided into two aspects. First, in terms of funding application allocation and referral criteria, explicit implementation standards should be established through quantitative assessment. Existing research shows that such standardization not only facilitates the rational allocation of internal resources but also improves the success rate of targeted external funding applications (Ebrahim & Rangan, 2014).

On the other hand, to address the divergent perceptions of boundary conflicts caused by role differences, the organization should enhance cross-departmental communication and establish shared goals. Empirical studies show that cross-functional teams engaged in data-driven dialogue are more likely to reach consensus on priority judgments across diverse perspectives (Homan et al., 2008).

Optimistically, WCC has made preliminary efforts in standardizing processes and

systematizing structures, laying a foundation for future improvements in funding allocation and referral strategies.

Limitation

This study also has the following limitations. First, as a case study of a single organization, its external validity is limited. Second, the sample size is relatively small; the seven interviewees may not have fully captured the entire diversity of perspectives within the organization.

At the methodological level, this study's cross-sectional design cannot capture the dynamic evolution of role boundary conflicts over time. As a qualitative thematic analysis, this study is inevitably influenced by subjective interpretation. Although credibility was enhanced through member checking, the inherent limitations of this method in interpretation must still be acknowledged.

Conclusion

This study, by thoroughly examining the operational realities and challenges of Waterloo Community Counselling, reveals the underlying mechanisms of organizational role conflict faced by third-sector counselling agencies. It is the interaction of three mechanisms: moral drive, role perception differences, and structural amplification effects.

Theoretically, extending role conflict into a "moral dilemma - structural constraint" interactive framework highlights the unique theoretical value of third-sector organizations in continuously balancing moral responsibility and professional limitations.

Methodologically, this study fills the cognitive gap in organizational psychology regarding micro-level decision-making through the perspectives of frontline staff. It also successfully identified the logical patterns among phenomena, providing an effective analytical framework for qualitative research on third-sector organizations.

At the practical level, it underscores the urgent call for policymakers to address gaps in social service provision. The proposed data-driven boundary management strategies and cross-role communication mechanisms offer improvement paths for similar organizations.

Future research should track the effects of boundary management interventions by combining longitudinal study designs with cross-organizational comparative research. This will help to understand the evolution of role boundary conflicts and further validate the generalizability of the mechanisms identified in this study, assisting third-sector counselling organizations in improving issues related to role boundary conflicts.

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Appendices

Appendix A: Recruitment Email

Dear All,

I'm delighted to announce that this year, WCC has partnered with King's College London to become part of the King's College Service and Research Hub.
As a community partner, WCC has been invited to engage in a collaborative, community-driven research initiative. This partnership allows us to propose meaningful and relevant research questions to King's MSc students, with the aim of gaining valuable insights that could enhance our services and operations.
I'm pleased to share that King's has now identified two student researchers who will be conducting a study based on a research question we submitted. Their work will begin in the coming weeks, and as part of their research, they will be conducting interviews with members of the WCC staff and counselling team—which may include you! We hope that many of you will be interested in getting involved and share your experiences, thoughts and feelings!
More details, including the research topic and information about the students, will be shared soon. In the meantime, if you're interested in taking part or have any questions, please don't hesitate to reach out.
Looking forward to this exciting collaboration!

Appendix B: Recruitment Flyer

Appendix C: Participants Information Sheet

INFORMATION SHEET FOR PARTICIPANTS

Ethical Clearance Reference Number: LRU/DP-24/25-46263

YOU WILL BE GIVEN A COPY OF THIS INFORMATION SHEET

Title of project

Counselling organisations' management of their clients' practical needs

Invitation Paragraph

I would like to invite you to participate in a research project that will contribute towards my Master's dissertation. Before you decide whether you want to take part, it is important for you to understand why the research is being done and what your participation will involve. Please take time to read the following information carefully and discuss it with others if you wish. Ask me if there is anything that is not clear or if you would like more information.

What is the purpose of the project?

The purpose of the project is to explore what clinical, ethical, or practical responsibilities an organization like Waterloo Community Counselling (WCC) should have when addressing clients' practical needs, beyond its core purpose of providing counselling. The research will also consider whether WCC should establish stricter referral criteria, such as only accepting clients with stable housing or referrals from specific partner organizations, in order to provide better counselling service and more effective support for vulnerable groups.

Why have I been invited to take part?

You are being invited to participate in this project because you satisfy the requirement of being a member of staff team from WCC over the age of 18. The option for accepting the interview is available to all members of staff team from WCC over the age of 18.

What will happen if I take part?

If you choose to take part in the project you will be asked to undergo a one-to-one semi-structured interview centred on what you have been doing at WCC and your feedback. Participation will take place at the convenience of the participants, in offices arranged by WCC, or through online meeting software Microsoft

Teams. The length of the interview will be limited to approximately 45±15 minutes. As part of participation, you will be asked to provide your experiences in managing clients' practical needs (such as housing, asylum support, and welfare assistance), the challenges and difficulties encountered in your work, and your ideal changes and suggestions. These data are crucial to this study as they will help us to analyse how WCC could find a balance between ethical, practical and resource constraints and make recommendations for future improvements. The audio-recordings of the interviews will be downloaded and stored on a password-protected and encrypted laptop as well as backed up on KCL's OneDrive. They will be transcribed manually to ensure accuracy, and all personally identifiable details contained in them will be anonymised. The audio-recordings will be stored only until data analysis is completed, after which they will be permanently deleted.

Do I have to take part?

Participation is completely voluntary. You should only take part if you want to and choosing not to take part will not disadvantage you in any way. Once you have read the information sheet, please contact us if you have any questions that will help you make a decision about taking part. If you decide to take part we will ask you to sign a consent form, and you will be given a copy of this consent form to keep.

What are the possible risks of taking part?

There are no foreseeable risks in participating in the study. All data collected from your interview will be completely anonymised and will not reveal any information that could identify the participant, nor will it be used for work performance assessment. You can withdraw from the study at any time if the interview causes you discomfort by reminding you of a stressful situation at work. It is necessary to understand that this interview does not want you to disclose details of any illegal activities or other activities that may pose harm to yourself or others. You must ensure that you do not reveal any such information.

What are the possible benefits of taking part?

You can get £20 worth of Amazon vouchers in return for taking part in the interview.
Moreover, the information I receive from the study will help me to provide WCC with clearer suggestions on resource allocation, such as enhanced mechanisms to support staff or clear lines of responsibility. This will help reduce the workload and improve the work experience of staff when dealing with the complex needs of clients.

Data handling and confidentiality

Your data will be processed under the terms of UK data protection law (including the UK General Data Protection Regulation (UK GDPR) and the Data Protection Act 2018).
Your responses in the interview will be strictly anonymous and confidential. They will be held securely both during the research as well as after it is finished. Please note that while all interview responses will be handled with strict confidentiality, the original audio recordings are considered personally identifiable data as they contain your unique voice characteristics and other identifiable features. All personally identifiable details (including those present in the audio recordings) will be removed or anonymised in the transcriptions.

The data used for analysis will thus be anonymous. The audio-recordings of the interviews will be downloaded and stored on a password- protected and encrypted laptop as well as backed up on KCL's OneDrive. They will be transcribed manually to ensure accuracy, and all personally identifiable details contained in them will be anonymised. The audio-recordings will be stored only until data analysis is completed, after which they will be permanently deleted. All data collected will be protected under the Data Protection Act of 2018.

King's College London has a responsibility to keep information collected about you safe and secure, and to ensure the integrity of research data. Specialist teams within King's College London continually assess and ensure that data is held in the most appropriate and secure way.

Data Protection Statement

If you would like more information about how your data will be processed under the terms of UK data protection laws, please visit the link below:

https://www.kcl.ac.uk/research/support/research-ethics/kings-college-london-statement-on-use-of-personal-data-in-research

What if I change my mind about taking part?

You are free to withdraw at any point of the project, without having to give a reason. Withdrawing from the project will not affect you in any way. You are able to withdraw your data from the project up until 30th July 2025, after which withdrawal of your data will no longer be possible due to data will have been committed to the final report. If you choose to withdraw from the project, we will not retain the information you have given thus far.

What will happen to the results of the project?

The results of the study will form part of my research and will be analysed within my Master's dissertation and may be used in an anonymised form for publication in academic articles. If the results of the study are published, participants will be informed how to access the information.

The anonymised dataset of the study results will not be shared publicly and all data will be used solely for the purposes of this study and in strict compliance with data protection legislation.

Thank you for reading this information sheet and for considering taking part in this research.

Appendix D: Consent Form

CONSENT FORM FOR PARTICIPANTS IN RESEARCH PROJECTS

Please complete this form after you have read the Information Sheet and/or listened to an explanation about the research

Title of project: Counselling organisations' management of their clients' practical needs		
Ethical review reference number: LRU/DP-24/25-46263	**Version one: 16/12/24**	
		Tick or initial
1. I confirm that I have read and understood the information sheet dated 16 December 2024, Version 1 for the above project. I have had the opportunity to consider the information and asked questions which have been answered to my satisfaction.		
2. I consent voluntarily to be a participant in this project and understand that I can refuse to take part and can withdraw from the project at any time, without having to give a reason, up until 30th July 2025.		
3. I understand my personal information will be processed for the purposes explained to me in the Information Sheet. I understand that such information will be handled under the terms of UK data protection law, including the UK General Data Protection Regulation (UK GDPR) and the Data Protection Act 2018.		
4. I understand that my information may be subject to review by responsible individuals from the College for monitoring and audit purposes.		
5. I understand that confidentiality and anonymity will be maintained, and it will not be possible to identify me in any research outputs		
6. I consent to my participation in the research being audio recorded.		
7. I understand that the information I have submitted will be published as a report		
8. I agree to be re-contacted in the future by King's College London researchers regarding this project.		
9. I agree that the researcher may retain my contact details so that I may be contacted in the future by King's College London researchers who would like to invite me to participate in future studies of a similar nature.		

_____	_____	_____
Name of Participant	**Date**	**Signature**
_____	_____	_____
Name of Researcher	**Date**	**Signature**

Appendix E: Semi-Structured Interview Guide

Core Interview Question Examples

1 Could you start by briefly describing your role at WCC and what your daily tasks involve?

1.1 How does your work connect with clients' practical needs, like housing or asylum issues?

1.2 Among WCC's main client groups—such as refugees, asylum, low-income, etc.—do you work with one group more than others, or is it balanced?

1.3 Have you noticed any features or differences in the practical needs of these different client groups?

2 Impact of Practical Issues on Counselling

2.1 From the perspective of your position, how do clients' practical problems (like housing, asylum applications) affect WCC's core counselling services? Could you share a typical example of this happening?

2.2 What are the main strategies WCC currently adopts to handle these practical issues?

2.3 Which of these tasks are clearly part of your responsibilities, and which feel like "extra" work you end up taking on? Is there any clear criteria for you to decide what to do?

2.4 When a client's practical issue is too complex for your team to handle (like legal issues), how do you usually respond?

3 Balancing Ideal vs. Realistic Responsibilities

3.1 If WCC had unlimited resource and funding, what're the top 3 practical needs that you would prioritize solving for clients? Why are these the most important for counselling to work well?

3.2 Now thinking about the real world—what are the top 3 challenges limiting what WCC can do for these needs?

3.3 If, in the future, even when resources are abundant, which services do you believe should not be handled by a counselling institution like WCC?

4 Perspectives from Your Role

4.1 As someone not directly doing counselling, do you think your view is different from the counsellors'?

4.1.1 For example, do you focus more on solving practical problems quickly, while counsellors focus on the counselling itself?

4.2 Among the office team, do colleagues in different roles (like admin, referrals, finance) have different priorities when dealing with clients' practical needs?

4.2.1 Does this ever cause disagreements? How do you work through them?

5 Referral Standards and Criteria

5.1 When other agencies or social workers refer clients to WCC, are there clear criteria for who gets accepted?

5.2 If we were to consider new ones—like requiring stable housing or basic living support, do you think it will better the current situation?