VID Specialized University

Dissertation no. 16 Gry Espedal

Being O compassionate

Institutionalizing through values work in a faith-based organization.



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Institutionalizing through values work in a faith-based organization

Gry Espedal

Dissertation Submitted in Partial Fulfilment of the Requirements for the Degree of Philosophiae Doctor (Ph.D)

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Sammendrag

Denne studien bygger på og utvider perspektiver fra en fremvoksende forskningstradisjon som utforsker verdiarbeid i organisasjoner. Studien har identifisert og utviklet en prosess kalt verdi utforskning som forbinder fakta om en situasjon med idealer om fordeling av sosiale goder. Studien har forsket på verdi arbeid i en norsk diakonal helse-institusjon som har jobbet med verdier gjennom 150 år. Verdi utforskning prosessen starter med en selv-refleksjon og en kritisk vurdering av den dominerende verdi-rammen ved å stille spørsmål som «Når vi de vi er til for?» Prosessen leder til en ny innramming og re-tolkning av situasjonen som igjen fører til opprettelse av nye verdi praksiser for å ivareta organisasjonens idealer og verdier samt tilpasse seg nye utfordringer. Spørsmål som kritisk vurderer den dominerende verdi-rammen åpner muligheten til å revurdere hva som utgjør idealene i organisasjonen og finne en meningsfylt måte å re-fortolke og innramme organisasjonens verdiskapende aktiviteter på. Studien utvider forskning på verdi arbeid i organisasjoner fra å se på verdi-aktiviteter som en lineær hendelse, som for eksempel implementering av kjerne-verdier i organisasjoner, til isteden å identifisere ulike aktiviteter som gjenkjenner verdier og opprettholder organisasjonens idealer i situasjoner av institusjonell kompleksitet.

Denne studien finner at verdi utforsknings prosessen i en diakonal institusjon er institusjonalisert gjennom historien og har resultert i en iboende og fremvoksende institusjonell nestekjærlighets logikk. Prosessen leder også til aktiv fortelling av «hellig» historier som igjen er med å skape «hellige» praksiser som strekker seg ut over menneskelige idealer til noe transendent. Verdi utforsknings prosessen brukes som kompass for å oppdage moralske handlinger, hva som er rett og galt å gjøre i ulike situasjoner.

Abstract

This study extends the emergent stream of values work by theorizing a process of value inquiry that links the facts of a situation with the ideals of institutional social engagement and the common good. The value inquiry is identified as an open-ended process of questioning, reframing, and reinterpreting the dominant value frames. Through investigating values work in a faith-based health care organization in Norway, this study finds that the questioning of dominant value frames opens the possibility of reconsidering what constitutes the beliefs of the organization and of finding a meaningful way to re-frame its value-creating activities. In questioning the value frames, the actors move beyond a linear view of institutional complexity to recognize how values and organizational agency are both maintained and revised in the face of conflicting demands. The social order that emerges is driven by the creative discernment of people who are empowered to act in accord with the demands and possibilities of the situation, rather than out of obedience and rule following. In this way, the process leads toward a deliberation of ethical standards and contributes to a richer moral discourse.

This study finds the process of value inquiry to be evident throughout the organization's history as changing circumstances have been balanced against compassionate organizational aims. This process has resulted in an emerging and inherent institutional logic of compassion composed of a multiplicity of "value spheres." Judgment of the validity of these values is a "matter of faith," by which individuals seek and claim to be instruments of practice. The process of value inquiry is explored as a shuttling between the telling of sacred stories and the doing of sacred practice. The values are found to reside partly in the narrative unconscious and partly in pre-reflective corporeal action. An understanding of the sacred stories and practices becomes a major driver in institutional maintenance, ethical agency, and the institutionalizing of compassion.

Preface

On the 21st of April, 1870, the newly established teaching hospital, here called The Deaconess, experienced a challenging situation as it was faced with the deteriorating health of five out of its 23 patients. One woman was in a "dangerous" condition with puerperal fever. A child was ill with blood poisoning, and one baby twin was in a terminal condition.

Due to the challenges of the situation, the only physician at The Deaconess, Doctor Tar (an alias), wrote a letter to Mr. Brown (an alias), the chairman of the board, recommending that they send the patients in the worst condition to a larger hospital. However, enclosed in the envelope was a shorter letter from the female leader of the institution, Maria Haven (an alias). Haven had been head of the nursing school for two years. She was trained as a deaconess at the Kaiserswerth Deaconess Institute's Nurse Training School in Germany (1866–1868), a school that Florence Nightingale also attended. Haven had been called by God to reach out to marginalized people, and when invited by the recently established Deaconess committee to found the first training school for nurses in Norway (1868), she immediately accepted. Within two years, she had trained twenty sisters. In cooperation with the municipality, they expanded their services to provide health care, mainly, to the city's poor.

In her letter to Mr. Brown, Haven insisted they should keep the very sick patients at the hospital, resisting the suggestion of Dr. Tar. Haven asked: "What would people think if they were advised of the fact that we are sending the wretched [people] away from us?" It seems likely that Mr. Brown listened to Haven. The annual report of 1870 does not report any patients being sent to other hospitals, although it does report that three patients had died.

This story from the early days of The Deaconess expresses a twofold concern. First, the letter from Haven expresses concerns regarding the legitimacy of the diaconal/faith-based hospital¹ in sending "the wretched" away. Second, is the implication that it is the "desired" practice of the hospital to treat the patients themselves, thereby extending both worth and compassionate care to the patients.

One hundred and fifty years later, this same hospital states that they want their work to be inspired by Maria Haven. In the strategy plan for *The Deaconess* (2015), the current deaconess highlights the "legacy of Maria Haven" as "foundational" to the organization and as something that "commits and inspires to a continued societal effort." The hospital highlights its chosen core values of *quality* and *compassion* as reaching back to the start of the organization and forward to shape the standards of current practice. The president of 2002 explains: "The difference between other hospitals and us is that you will experience what we do. We are not telling people what we are. We are doing it" (Anders, president, 03.06.23).

For this study, I am in debt to president Anders (an alias). At our first meeting, he said he held the original female pioneer as his role model, often asking: "What would Maria Haven had done?" The president made space for me in a very tight schedule and thoroughly told me about the organization's history and about the challenging situation currently faced by the organization. During my data-collection, he moved to a new position and was replaced by president Bjarne (an alias). President Bjarne allowed me to follow his progress as he became leader of the organization, but unfortunately, after five months, he resigned due to a conflictual situation.

¹ Faith-based organizations are the equivalent of diaconal organizations. They are rooted in the Evangelical Lutheran church and operate out of the intention to extend Christian compassionate care to people in need.

However, I am indebted to all the informants who so willingly shared information and allowed me to follow them through their intense and complex workdays, providing priceless information for this study.

I am grateful to the former deaconess and principal of the nursing school, who told me the story of Maria Haven in such a way that it was possible for us to co-write Haven's biography (2012). The principal's narrative concerning Haven gave me insights into a remarkable woman who paved the way not only for nursing as a field but also for the founding of a diaconal and faith-based hospital to reach out to marginalized people.

In my work for this PhD, I am standing on the shoulders of the initiators of the mastersprogram in values-based leadership at VID Specialized University where I am currently working. I am grateful to Einar Aadland, Harald Askeland, Leif Stapnes, Olav Molven, Morten Skjørshammer, Gry Bruland Vråle, and Olav Helge Angell for the ongoing discussions about values in leadership and in organizations. I was fortunate to start my work at VID at the same time as we started to work on the book *Verdibevisst Ledelse* [Consciousness on Values in Leadership]. We had many challenging discussions about values. I am grateful to Morten Skjørshammer who challenged me to include the patients' perspective in my research. I agree that values are intentional expressions, as Askeland and Aadland highlight, but I am digging deeper into the performative practice of values through work. I am indebted to my current colleagues for further discourses on values: Beate Jelstad Løvaas, Tone Lindheim, Stephen Sirris, Benedicte Kivle, Anne Dieseth, and Marta Struminska-Kutra.

I am grateful to professor Harald Askeland who became my supervisor so we could continue the sociological discussion on the character of values in faith-based organizations. I am indebted to Harald for trusting me to find my own way.

I could never have done this research without professor Arne Carlsen, my co-supervisor from BI Norwegian Business School. He inspired me regarding narrative theory and the philosophy of Selznick, Ricoeur, and Dewey. These have been of priceless importance to me.

I am grateful to my husband Frank. I will be forever grateful for the in-depth conversations we had on processes, strategizing, methods, and organizing. Frank is the rock to my soul and the father of my two boys, Filip and Elias, who are the hope of my life.

In the middle of researching a hospital within the nation's health care system, I had the devastating experience of becoming a patient myself. The thesis work had to be put aside for me to survive breast cancer. My supervisor, Arne, encouragingly told me that now I could add another year of ethnographic studies to my project. Thank you to all the physicians and nurses who patiently answered my informal questions such as: At work, what are the most important and difficult discussions you encounter? What do you think are the values of this institution? I am sorry that not all the answers to these impromptu interviews were transcribed. I don't even remember all the answers due to pain, anesthesia or chemo-brain, but my experience was that the medical profession is doing everything it can to treat and heal patients, and I am forever thankful they managed to treat me so well that I am now cancer-free and can finish my PhD-work.

Through my disease, I gained in-depth knowledge of the importance of doing meaningful things. I am therefore finishing this section with the words of Shirley Horn:

Here's to life Here's to love Here's to you May all your storms be weathered And all that's good get better

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1. Espedal, G. (2019). Wide awake housekeepers on duty: The institutional logic of compassion in a faith-based organization. *Nordic Journal of Religion and Society*, 1/2019.

Presented at Ninth International Symposium on Process Organization Studies, Kos, Greece, June 2017.

2. Espedal, G., & Carlsen, A. (2019). Don't pass them by: Figuring the sacred in organizational values work.

Accepted for revision after 2nd round of reviews by *Journal of Business Ethics*, May 2019. Prior to this, the article was presented at Organization Summer Workshop at Mykonos Greece with the theme Spirituality, Symbolism and Storytelling, May 2016.

3. Espedal, G., Carlsen, A., & Askeland, H. (2019). How do we reach out to those we are here for? Value inquiry in sustaining institutions.

In preparation for submission. The article is accepted by the supervisors as ready for submission in a low-level journal. However, we think the article has the potential for a high-level journal and are looking for time to increase the quality for publishing at, for instance, *Organization Studies*. The article was presented at a workshop at the Warwick Business School, England, February 2018.

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Introduction

In this thesis, I am extending a recent stream of values work by theorizing a process of value inquiry. The process of value inquiry links the practical facts of the situation to the ideals of institutional social engagement and the common good. In the attached articles, I theorize in different ways about value inquiry as an open-ended process used to question the meaning of dominant value frames. The process illustrates how the temporality of a value inquiry can become the dominant mechanism of values realignment in maintaining institutional agency. In this introduction, I will introduce the research questions, briefly mention the theoretical and methodological approaches, and describe the contributions of the study.

The study builds on the theoretical trajectories of institutional work and institutional logic to shed light on the processes that institutionalize values work. A new stream of values work is shifting from a cognitive focus on values as abstract principles with a cultural focus, to a processual and performative practice-based approach involving attention to the practices through which the values are enacted (Gehman, Trevino, & Garud, 2013). The stream conceptualizes values work as ongoing performance situated in everyday practice (Gehman et al., 2013; Vaccaro & Palazzo, 2015; Wright, Zammuto, & Liesch, 2017), and it offers insights into the hidden and informal lives of organizations that are important to an understanding of the basis of social order (Scott, 2014, p. 66).

Even though values are identified as being embedded within institutions, few studies have elaborated on how work on values constructs social reality. Gehman et al. (2013) imply a linear sequence where values, in the form of an honor code, emerge in response to concerns and become formalized in practice. Another study investigates how professionals mobilize

institutional maintenance through collective action when important values are compromised (Wright et al., 2017). Other studies investigate how elite agents use stories to ensure the diffusion and maintenance of organizational values (Zilber, 2009), and how professionals work to maintain power when threatened (Currie, Lockett, Finn, Martin, & Waring, 2012). This study is a response to a need for studies that investigate values as part of the ongoing process of changing and maintaining institutions.

Values have been included in academic studies for a long time. While Parsons (1968) viewed values as part of the structural component of a social system, other scholars identify values as part of embedded agency (Emirbayer & Mische, 1998). Bednarek-Gilland (2015) introduces agency and the actors' contribution to changing values by arguing that actors reflect upon, assess, and alter their value orientations. Following Bednarek-Gilliand (2015), in this study I am investigating the role of values in constructing social meaning, as being inherited and latent, and also as bringing to the fore agency that is reproduced and transformed within the historical context.

A significant aspect of the potential in studying values work as a research area is the establishment of a consciousness and broader awareness of the "dispersed nexus of doings and sayings" in organizations (Gehman et al., 2013; Schatzki, 2012, p. 14) and of how values play a role in the interactions of actors and institutions (Lawrence, Suddaby, & Leca, 2009). Values are often so taken for granted that they rarely promote discussion and thus become part of the tacit knowledge of organizations (Chen, Lune, & Queen, 2013), sometimes expressed in the case organization as, "There is something written in these walls." Meglino and Ravlin (1998) argue that we need research to go beyond the management of values as related to organizational

behavior and decision making, to understand values as organizational practice and modes of behavior, as values-in-use.

Including the perspectives of both institutional work and institutional logic provides an opportunity to understand how these trajectories are linked and how values work plays a role in the establishment of value-related actions. Studies on institutional work reorient the traditional concerns of institutionalism by identifying institutional work as that in which practical actions create, maintain, and disrupt institutions (Lawrence et al., 2009). Studying institutional logic can provide insight not only into the effect of shifts in the dominant logic, with its implications for plural logics and organizational responses to institutional corder (Friedland & Alford, 1991). Every institution is composed of a multiplicity of "value spheres," which allow actors to create order in their social context (Friedland, 2013a). Values are not located in a thing but in the purposeful practice through which the thing is appropriated. Values thus establish a bridge between people's reflexive, purposive, and cognitive thoughts and the institutions at which their efforts are aimed (Hampel, Lawrence, & Tracey, 2017).

Through a single case study, I investigate values work in a faith-based health care organization, which is a unique case, rich in the phenomena under investigation. Enacting compassion is both something the organization wants to be known by (its terminal values) and wants to see practiced in everyday life—as its mode of behavior (instrumental values) (Rokeach, 1973). As part of its current institutional context the organization is delivering services through the nation's health care system, however challenged to provide business-like health care services regulated by the government. Despite its pressured situation, compassion is still an ongoing

practice in the organization, making it relevant to ask how compassion is institutionalized and becomes enduring. Thus, the research questions for this thesis are:

- How does values work emerge, and how is it performed?
- How does being compassionate come to be institutionalized through values work in a faith-based organization?

I am investigating values as an enactment of institutionalized belief and as part of the embedded agency that has the capacity to maintain, change, and disrupt institutions.

Research design

The research design for this study is a longitudinal qualitative case study. I have utilized a triangulation of methods that include observation, semi-structured interviews, and readings of archival sources. Triangulation provides different perspectives on the question investigated. Through qualitative interviews, it is possible to get closer to the data. Not all behavior can be explained and expressed verbally, thus, observation can capture varieties of social behavior and subtle meaning.

Through a five-year period, from June 2013 to November 2018, I conducted interviews and observations. To understand the current status of values work in the organization, I interviewed 53 persons, some several times, deriving a total of 65 interviews. In addition, I did 52 hours of direct observation (Diamond, 2006), observing patient treatment situations, interdisciplinary meetings, an introduction seminar, a faith-based health care leader conference, and leader meetings. I shadowed a middle management leader to gain insight into institutional practices,

beliefs, and the normative knowledge of values. Additionally, 3000 pages were read from the archival records of the case organization.

Institutional context

The case hospital, here named The Deaconess, has for many years, been one of the largest privately-owned faith-based organizations in Scandinavia. Currently, they are operating as a local hospital providing professional health care service for sectors of the population in the capital of Norway. In addition, they operate a large psychiatric department and a surgical department that admits patients from the whole country for scheduled operations. The hospital has 228 beds, with 13,123 admissions yearly, and an extensive out-patient facility that treats 163,680 patients annually (2017). They have a staff of approximately 1300 employees and a gross budget of approximately NOK 1,80 billion (2017). The financial requirements of the organization are met by grants and patient-paid fees through diagnosis-related group (DRG) reimbursement. For the past ten years, the organization has improved its financial position and maintained positive profit margins.

The Deaconess is a hybrid organization (Billis, 2010), operating within the framework of the regional health authority, while at the same time, maintaining its heritage. The organization represents a religious non-governmental faith-based organization (Martens, 2002), described as having "identity and mission self-consciously derived from a religious tradition, operating on a voluntary, non-profit and independent basis to promote articulated ideas about the common good" (Askeland, 2015, p. 37). Since its start, its values have been expressed in the everyday work of the organization, although the organization has been challenged by many forces, as elaborated below.

In 1868, when founded, The Deaconess was the nation's first nursing school, with Maria Haven as its first leader. Women from the district came to the capital city to be educated, to become deaconesses, and do nursing practice in the hospital. When entering the institution, the sisters accepted that they would work in an altruistic manner, working for better health care for all people. Their work was informed by a close tie between their Christian faith and doing relief work for the poor, as described in a letter to the parishes (1867) calling for "Christian women with a vocation from God, who care for souls in doing poor relief and nursing" (Annual report 1870) (Jahnsen, 1919). Thus, the practice of the first nurses and deaconesses was informed by Christian values such as compassion and "deeds of love" (Stave, 1997). All deaconesses wore a Christian cross as a necklace outside their garb, with a Bible passage chosen for them personally.

In 1912, when the nation's Nurses Union was founded, the self-contained compassionate work of The Deaconess came under pressure. The union wanted the nursing field to be professionalized. The female leader, Maria Haven, had concerns that professionalizing nurses would become "too academic, losing [the] heart of [the] marginalized" (Bloch-Hoell, 1968, p. 59). In 1945, after World War II, the values work of The Deaconess was put under further pressure by the establishment of the national welfare system, which launched the rationale that the government would take responsibility for all people. The pioneering work of faith-based organizations in taking care of vulnerable and marginalized people became less significant (Leis, 2004). In order to survive as providers of welfare, the diaconal institutions made incremental changes and adjustments to their operations, according to the demands of the public agency.

New Public Management (NPM), launched in the 80s–90s, increased the influence of the health care authorities over hospitals, and promoted the ideas and principles of business to make the public sector more efficient (McLaughlin, Osborne, & Ferlie, 2002). In addition to the

introduction of business-like logic into health care (Reay & Hinings, 2009), a chaotic situation emerged at The Deaconess (1991) threatening its existence. The municipality suggested shutting down the hospital due to its financial difficulties. After a mass movement of people fighting for the hospital, the newly elected council resolved to retain the hospital, insisting that The Deaconess merge with another faith-based hospital. The declining number of deaconesses due to retirement, meant the symbolic markers of Christian compassionate care weakened. However, to maintain some of their faith-based foundation, the organization now established Hospice care for the terminally ill. In 1910, Maria Haven had deposited NOK 100 for a "home for incurable sick people" (the Annual Account of Legacies and Funds Report). Establishing a Hospice was a way of fulfilling her intention to deliver care to the terminally ill and the marginalized.

A new strategic plan (1998) approved a renewed organizational mission established on four core values: compassion, openness, service, and determination. In 2002, when president Anders entered the organization, the values work improved. The number of core values was reduced to two—compassion and quality—selected from the institution's history. In 2015, a new strategy was launched, still being active, which highlights the two core values of the organization as compassion and quality. A value letter was established and issued in 2002, still being handed to new employees, stating that the organization does not demand that employees follow the Christian faith; however, they must be loyal to the institution's core values. This value letter emphasizes that the work of the organization should reflect Jesus's life and example and the parable of the Good Samaritan.

The contribution of the study

The research questions guiding the study resulted in three different articles that will be outlined in table 1. The contributions of the articles are presented below as it is described in the articles. In the findings chapter I discussing contributions across the articles.

	Research question	Empirical data	Main findings
Article 1 Espedal, G. Wide awake housekeepers on duty: The institutional logic of compassion in a faith-based organization	How does the institutional logic of compassion emerge, and how is it shaped over time?	A study of 150 years of history of the faith- based organization Archival sources, ethnographic interviews, observation Content analysis of the data and archival sources A chronological time- line of historical events was established. A processual approach with temporal bracketing was used to identify processes constructing the logic of compassion over time.	The composite nature of the institutional logic of compassion is revealed in the interplay between other logics, including professional care, the bureaucratic state, and business-like health care. The article identifies the logic of compassion as constructed and conveyed by three complementary processes. Based in a religious order, the logic of compassion is manifested through institutional believing, material practicing, and moral reasoning.
Article 2 Espedal, G. Carlsen, A. Don't pass them by: Figuring the sacred in organizational values work	How do notions of the sacred drive work on values in organizational settings in terms of facilitating processes of institutional stabilization and change?	A five-year study of values work in a faith- based organization, leaning on the 150-year history of the organization Ethnographic observation and interviews at three levels of the organization and readings of archival sources The research is informed by a strong	The article extends the understanding of the performative nature of values in organizations as being constituted in distributed and pre-reflective action rather than initiated and governed by leaders alone. The sacred is identified as a major driver of institutional maintenance and an enabler of distributed ethical agency. Tales of the sacred are performative and serve the temporal function of achieving

Table 1. Overview of the research question, empirical data and main findings of the study's articles

		process orientation and a narrative approach. The work of Ricoeur is used to describe and compare how the sacred is figured in the two sets of stories, the parable of the Good Samaritan and the legacy of Maria Haven. Ricoeur's conception of triple mimesis is used to describe the mutual imitation of narrative (sign) and action (behavior) in the organization.	continuity in institutional history, enabling the organization's members to handle demanding situations where they prioritize and provide care to patients.
Article 3 Espedal, G. Carlsen, A. Askeland, H. How do we reach out to those we are here for? Value inquiry in sustaining institutions	How is values work performed and maintained in an organization that faces shifting and competing institutional demands?	Five years of study of values work in the faith-based organization Archival sources, ethnographic observation, and interviews with three management levels of the organization The research is informed by a strong process orientation and a narrative approach. Three issues were chosen as especially information-rich to be the subjects of narrative and thematic analysis.	A process of value inquiry was identified as linking the facts of the situation to the ideals of institutional social engagement and the common good. We theorize value inquiry as an open-ended process of questioning, reframing, and reinterpreting the meaning of dominant value frames. To adapt to the situation, the institution is inquiring the dominant value frame to seek and find institutional values and practices to form new behaviors that re-align with the values and agency of the organization. Employees use available frames to reframe or change the conceptual setting or viewpoint in relation to how the situation is experienced and to place the situation in another frame that fits the "facts" of the situation equally well or better.

The first article examines the institutional logic of compassion as shaped and modified over time within a faith-based organization, illuminating the concern to balance changing

circumstances against compassionate organizational aims. The following research questions are addressed: How does the institutional logic of compassion emerge, and how is it shaped over time? The composite nature of the institutional logic of compassion is revealed in the interplay between other logics, these being the logics of professional care, the bureaucratic state, and business-like health care. A content analysis of archival sources together with temporal bracketing of the case organization's history identifies the institutional order of the logic of compassion. Questions drive the concerns of the logic: "Is the field of nursing becoming too academic?", "Is the hospital losing its character?" or, "What does it mean to be faith-based?" The logic of compassion establishes a frame for values work and is conveyed by three constitutive processes. Based in a religious order, the logic of compassion is shaped and manifested through institutional believing, material practicing, and moral reasoning. The dominant position of personal faith within the logic of compassion has, over time, been modified and reintegrated, providing the organization with a broader and renewed connection with social and religious meaning-making.

In the second article, drawing on a longitudinal study of the faith-based organization, I extend the research on values work in organizations to how it may involve the sacred as a major driver of institutional maintenance and ethical agency. The organization is viewed as a collective storytelling system in which performance of stories is a key part of members' sense-making (Boje, 1991). Myths or sagas are alive in the community, and newcomers learn the organization's values through the stories told. For "sacred" I look to prior work that conceives it as something within the realm of human ideals and values that "sets people apart" and grants special significance as "inviolable" or "untouchable" (Anttonen, 2000, p. 42; Harrison, Ashforth, & Corley, 2009, p. 227).

The study use the work of Ricoeur to describe and compare how the sacred was figured in two sets of tales that are lived and told with surprising intensity in the case organization: the parable of the Good Samaritan and the legacy of Maria Haven. I found the sacred-in-story evident as a persistent emphasis on high-quality care for the marginalized and on care for the whole person. I found the sacred-in-practice expressed as an extension of care beyond the economically viable to patients who "fell between institutional stools" and beyond the medical provision of care to include the social conditions and personal well-being of patients. The process of identifying the sacred, in this case through two sets of stories, is of importance because it might reveal processes for interpreting organizational values where the organizations risk losing their identity despite the fact that they are in dialogue with their history and symbols.

In the third article, a process of value inquiry is identified that questions the dominant value frames that serve the common good. Through systematic analysis of three highly valuesalient issues within the case organization, we theorize that the process of value inquiry is an open-ended process of questioning and reinterpreting the meaning of the dominant value frames, conducted by continuously asking self-reflecting questions such as, "What is our contribution now?" The process elaborates the temporality and intertextuality of institutional values work and suggests conditions under which value inquiry becomes a dominant micro-process of organizational meaning-making. As an emergent process, the notion of value inquiry resists any idea of deference to authority or the enactment of values as dogma or stable principles. Value inquiry cannot be limited to something one does before establishing a health care commission or making decisions. Rather, it forms the very basis of service provision by entering the actors' thought-action repertoires as they respond to demands, improvise, and make judgments. Thus,

the institutional demands reflect not only the experience of the organizational leaders but of all decision makers in the everyday activities of the organization.

Theoretical positioning

This thesis is positioned in the field of organizational institutionalism, which aims to investigate organizational behavior through institutional lenses (Greenwood, Oliver, Sahlin, & Suddaby, 2008). The institutional perspective, often called new-institutionalism, has been investigating how organizations are influenced by their institutional contexts. In recent decades, the field has expanded with new trajectories of institutional work, institutional logics, and now the additional stream of values work. The trajectory of institutional logics has, since the 1970s, been approached as a meta-theory and a method for analysis (Thornton & Ocasio, 2008). This exploration has established a new conceptual way of describing institutional work as creating, maintaining, and disrupting institutions. Studies of values work are establishing a new stream within the field by turning to social-symbolic performative work on values in organizations (Gehman et al., 2013; Phillips & Lawrence, 2012) and including the perspectives of the "old" institutionalism as proposed, for instance, by Selznick (Besharov & Khurana, 2015; Kraatz, 2009; Selznick, 1996).

This research-study is close to the field of institutional leadership. The processes of "value management" have been theorized to support continuous improvement in organizational performance and to develop long-term sustainability (Barrett, 2006). In revisiting Selznick's (1957/1983) perspectives, Kraatz (2009), for example, portrays the leader as both the "agent of institutionalism" and the defender and steward of the living social entity of the organization. As a managerial act, work on values is seen as having implications for organizational legitimacy,

governance, and change. However, in this thesis I consider values work as the distributed performance of the whole organization and not only as something that leaders do.

This study could have been placed in the field of the religion of sociology by analyzing the activities of a faith-based organization with a religious history. Given the profound role that religion plays in contemporary society, there have been repeated calls to explore the intersection between religion and organizations in a more meaningful and purposeful way (Ammerman, 2013a; Tracey, 2012; Tracey, Phillips, & Lounsbury, 2014). In one article, I am taking up the challenge to explore the role of the sacred in institutional values work, not only as a deliberate managerial emplotment but as manifested throughout the organization as a kind of values work. In another article, I am looking at how the logic of compassion in a religious order is driven by institutional processes. The emphasis here is not on understanding the religious phenomenon as the sacred and the logic of compassion, but to understand how they shape institutional work, action, and practice.

My engagement in the study

The qualitative researcher has been described as a bricoleur or quilt maker (Denzin & Lincoln, 2011). The research project can be viewed as a pieced-together set of representations investigated to understand the meaning and where the seams of a complex situation (the quilt) relate to the research question. In starting my PhD-project to research the question of how values work emerges and how it is performed in a faith-based institution, I did not come from a position of not-knowing. First, I had crafted some of the stories of The Deaconess by writing the biography of the institution's founder, Maria Haven (1840–1919). Second, I was positioned for four years (2008–2012) as an insider in the foundation owning the case organization, employed

as a professional educator and chaplain to the students. In this position, and through my regular access to management meetings, I witnessed the value discussions taking place in the foundation. During these meetings, strategy and values were discussed, and concerns about how to maintain the historical and diaconal foundation were explored. I was also part of informal conversations on values and actions at all levels of the organization.

Despite having already started to sew my quilt, there were patches missing and patterns that I did not see. When teaching students of the master-program in values-based leadership at the faith-based specialized university where I am currently employed, we use frames such as values-in-use and values-for-practice (Askeland & Aadland, 2017; Meglino & Ravlin, 1998). When starting my PhD-work I discovered an article by Gehman et al. (2013) about values work, and this started my journey: What are values-in-use and values work, and how are values institutionalized in practice? The combination of institutional work, institutional logic and values work in organizations represented a patch that I did not yet have, and set me on a journey to investigate the phenomena of values work, agency, and institutions in greater depth within the context of one faith-based organization.

Outline of the thesis

This synopsis consists of five chapters and aims to clarify, contextualize, and discuss the overall study, including the three articles. In chapter two, I outline the theoretical foundation central to my inquiry investigating the processes of values work. I present the main theories and concepts that provide the theoretical framework for my thesis. I describe and discuss existing empirical studies to situate my project more clearly within the literature. Since few reviews have scoped the academic trajectory of values work, I provide a traditional literature review on the

topic. In chapter three, I present and discuss the overall methodological research design and the strategies I employed to collect and analyze the data.

In chapter four, I present the findings and discussion. In this study, I am broadening the theoretical and empirical research done on values work, on institutional work and on institutional logic in organizations by theorizing a process of value inquiry. This process of value inquiry extends the emerging research on values work by highlighting the institutional work of organizational members and stakeholders. The process identified moves beyond a linear view of institutional complexity to maintaining and changing values and organizational agency in the face of plural demands. The process of value inquiry is found in the shaping of the logic of compassion and in figuring sacred stories and practice. Finally, in the concluding chapter, I summarize the theoretical, practical, and methodological contribution made as well as possible implications for future studies.

In the interest of clarity, I use the term *we* when referring to general assumptions and to work done by my two supervisors and myself, and I use *I* when I am referring to work that I did alone, although under the supervision of my supervisors. Due to confidentiality considerations, I have given aliases to all informants, even to the founder of the hospital. The placement of the organization is also made relatively broad.

Theoretical framework

In this section I discuss and qualify the theoretical foundation that is central to my inquiry researching how values work emerges and how is it performed in a faith-based organization. I extend recent studies on values work by theorizing a form of institutional work here called a value inquiry. Recent research on values, value practices, and commitments has produced a powerful reconfiguration of the understanding of values work in organizations and is now conceptualized as ongoing performances situated in everyday practice. In this study, I include any set of acts in everyday work as being value-driven, and values work to be a particular set of actions that enhance the ongoing knowledge and reflection-creating processes that infuse an organization with value-related actions and its social order.

I start by discussing values in organizations and include perspectives from institutional work and institutional logics to identify the process by which values institutionalize practice, work, and behavior. I base this chapter on a traditional literature review and map the streams of values work in organizations. This section has three key foci: (1) presenting the status of the field of values in organizations by including perspectives from the trajectories of institutional work and institutional logics, (2) providing a traditional literature review of studies of values work, and (3) identifying gaps in the literature, which this study hopes to close.

Values in organizations

Much of the research on values in organizations tends to emphasize centralized processes. "Core values" are assumed to reside in organizations independent of actions, representing a more functionalist management view (Collins & Porras, 1999; Peters & Waterman, 1982). The job of leaders is thus to discover, communicate, and transmit understanding of values to followers and outside stakeholders. Such highlighting and favoring of espoused values has been criticized for taking an overused and promotional form that reflects an integrationist understanding of culture as unitary and stable (Martin, 1992, pp. 43–52). Few current studies embrace such essentialism, but there is still a tendency in much of the literature on values to regard leaders as the primary movers (Grojean, Resick, Dickson, & Smith, 2004) and the articulation of values as forming part of "liberating the corporate soul" through "value management" (Barrett, 2006).

More recent research on values work has started to investigate it as a more distributed activity. Examples include the binding of concerns to values in the emergence of an honor code (Gehman et al., 2013), maintaining the values of a profession in everyday work (Wright et al., 2017), or the performative power of values work in fostering institutional change in processes that can also be bottom-up (Vaccaro & Palazzo, 2015). The writing of Selznick (1957/1983, 1992, 2008) can be used to fortify the idea of leaders as prime movers in values work, seeing values as a chief managerial concern and leaders as the agents of institutionalism through the infusion of values (Besharov & Khurana, 2015; Kraatz, 2009). However, Selznick (1992, 2008) also emphasized the processual and situated nature of all work on values and rejected the centralist and dogmatic stance implicit in the functionalist approaches. This aspect of Selznick's legacy has contributed to the reintroduction of the agentic dimension into research on values (Kraatz & Flores, 2015, pp. 365–367).

Selznick (2008, p. 55) is deeply influenced by Dewey in seeing values as arising from factual matters and says, "We bind values to ideals by attending to the quality of experience, thus revealing standards for criticizing the experience and assessing its moral worth." He goes on to emphasize how values as standards for acting are latent and arise from everyday activities. The social order that follows from the infusing of values is emergent and is driven by the creative

discernment of people empowered to act in accord with what the situation demands and affords rather than as a result of obedience and rule following (Selznick, 2008, pp. 77–80).

Broadly speaking, research on values in organizations has moved from a cognitive understanding of values as abstract principles (Rokeach, 1973; Schwartz, 1992), and a cultural understanding of values as symbolic artifacts (Schein, 2010), to values work as a form of practice (Gehman et al., 2013) or as embedded in practice (Wright et al., 2017). Gehman et al. (2013) were among the first to criticize previous research for pursuing values as objectified phenomena that exist as givens, and they took steps toward the proposal of a more performative understanding. One can question whether this argument goes far enough (Vaccaro & Palazzo, 2015, pp. 1094–1095), as the study by Gehman et al. (2013) implies a linear sequence where values first emerge in response to concerns and are then practiced in the form of an honor code. Additionally, we can ask if the theory sufficiently emphasizes the conditions of embedded agency in relation to the development of institutions and the discourse on value practices. From a strong process theory perspective, *all* work on values, whether they are claimed as core values by leaders, or as the enactment of professional values in everyday work (Wright et al., 2017), shows that they are constitutive acts (Ashcraft, Kuhn, & Cooren, 2009) that serve a performative function in constructing people's understanding of reality.

Institutional work and values work

In this study, institutions are investigated as enduring elements in social life that affect the thoughts, feelings, and behavior of individuals and collective actors (Lawrence & Suddaby, 2006, p. 216). The concept of *institutions* is at the heart of the institutional work approach and can be understood as the organization itself (as an institution), or as the way the organization

structures its activities (to form an institution). As organizations are viewed as open systems (Scott, 2003), it is of interest to investigate both what is shaping the institution from the outside and what is structuring the organization from the inside. This study is mostly engaged with the latter, and it investigates how values give insights into the normative and culture-cognitive elements that provide stability and meaning to social life (Scott, 2014, p. 56) and are part of symbolic interactions (Phillips & Lawrence, 2012). The role of cognition in conceptualizing institutional action has been criticized (Greenwood & Hinings, 1996). Instead, institutions need to be seen as products (intentional or otherwise) of actors' purposeful actions (Lawrence & Suddaby, 2006, p. 216). In this study, I give attention to the role of values as purposeful actions in relation to "lived experience" practiced by individuals and collective actors and to the connection between lived experience and the institutions that structure and are structured by it (Lawrence, Suddaby, & Leca, 2011, p. 52).

Institutions do not only include institutions as the property or state of the existing order, but also as a process of institutionalization and deinstitutionalization (Tolbert & Zucker, 1996). Since the 90s, the field of new-institutionalism has shifted from characterizing institutions as stable and taken for granted (Meyer & Rowan, 1977), to placing a renewed emphasis on institutions, agency, and actions in organizations. The relatively new trajectory of institutional work (Lawrence & Suddaby, 2006) is paying attention to understanding and unravelling the processes and mechanisms of institutionalizing, investigating how institutions are created, maintained and transformed (Surachaikulwattana & Phillips, 2017).

Much research relating to institutional theory has contributed to an understanding of how institutions govern actions on a macro-level (DiMaggio & Powell, 1983; Greenwood & Hinings, 1996; Meyer & Rowan, 1977); however, the institutional work trajectory aims to investigate the

processes and roles of actors in affecting institutions at a micro-level (Lawrence et al., 2009). Jepperson (1991, pp. 143–145) adopts this position in pointing to institutions as the product of purposive actions and by identifying institutions in organizations as representing a social order or a pattern that reflects a set of standardized interaction sequences. Institutionalization is then seen as revealing the particular reproduction process of these institutions. Institutional work incorporate this view, defining it as "the purposive action of individuals and organizations aimed at creating, maintaining and disrupting institutions" (Lawrence & Suddaby, 2006, p. 215).

Values are part of the organizational processes of institutionalism (Suddaby, Elsbach, Greenwood, Meyer, & Zilber, 2010). Building on Stinchcombe (1997, p. 8), Suddaby et al. argue that people accept institutions not because they have the right answer but because they embody "a value that people accept" (Suddaby et al., 2010, p. 1235). Selznick (1957/1983, 2008) has, for many years, highlighted values as part of the institutional process of constructing agency, actions, and practice in organizations. This involves seeing organizational pressures and rivalry not as mobilizing individual egotism but as a natural social process in which the intention is to ask the right questions and to discover which ideals to treasure. Institutionalization then comes to infuse the organization with values beyond the technical requirements at hand, and the institution is understood as a natural product of social needs and pressures (Selznick, 1957/1983, pp. 5, 17).

Few studies have investigated a combination of institutional work and values work. Wright et al. (2017) tend toward institutional work, but they also investigate the role of values in their study. This study identifies the mechanisms of specialist work and organizational practice; however, values are viewed as part of situations involving conflict and are not studied as embedded elements driving the process, per se. We need more studies that investigate values as part of the ongoing process of changing and maintaining institutions. This should involve the

study of how values form part of a recursive relationship between institutions and actions, especially in relation to how they constitute embedded agency.

Embedded agency and values

This study approaches values as relating to our concerns and agency across situations and social relations. While values have been described as forming part of the structure of the social environment by, for instance, Parsons (1968), other scholars have explored values as part of the developing human agency. Bednarek-Gilliand's (2015) action-focused, pragmatic position in relation to values describes values as emerging out of experience. Bednarek-Gilliand moves away from viewing values as stable orientations that are unlikely to change, to understanding values as relating to our concerns and affected by our emotions, and thus connected to the process of desiring and establishing a normative dimension for our actions. In saying this, I am adopting the definition of values as "Things that matter to us transsituatively (in specific situations as well as beyond the specificity of any one situation) and transsubjectively (not only for myself, but also for others)" (Bednarek-Gilland, 2015, p. 19).

The concept of human agency is associated with values (Emirbayer & Mische, 1998). Most often, human agency is viewed as a temporally embedded process of social engagement, informed by the past (as the capacity to imagine alternative possibilities), oriented toward the future (as the capacity to imagine alternative possibilities), and engaging the present (as the capacity to contextualize past habits and future projects within the contingencies of the moment) (Emirbayer & Mische, 1998, p. 963). Battilana and D'Aunno (2009) draw on Emirbayer and Mische (1998) in linking agency to the different types of institutional work involved in creating, maintaining, and disrupting institutions. The interplay of iteration (habit), projection

(imagination), and practical evaluation (judgment) is highlighted as reproducing and then transforming an environment's structure. All three constitutive dimensions of agency can be found in varying degrees in the values work of organizations. The practical dimensions of agency (Battilana, 2006) in values-based organizations are often hidden in customized and habitual practices of the past, as described by Wright et al. (2017), but they can also be activated through selectively recognizing, locating, and implementing schemas in the present. The imaginative engagement with the future can be activated through working on values as morally informed desirables and through social actors negotiating their paths toward the future.

When organizations are experiencing institutional pressure, for example, in faith-based health care organizations, the conditions may constrain the agency of the organization or of individuals from acting contrary to the demands. Here, the paradox may not involve the changing of institutions within the institution that constituted them (Holm, 1995) but how actors are working to maintain their embedded agency in situations of contextual flux.

Work on maintaining institutions

The emerging literature on institutional work has left us with a body of literature that examines the practices associated with creating institutions, while the work of actors in maintaining their interest in the face of the institutions has received limited attention (Lawrence et al., 2009). Studies examining how "institutional entrepreneurship" has created new institutions or transformed existing ones have received much attention (Garud, Hardy, & Maguire, 2007; Maguire, Hardy, & Lawrence, 2004). However few studies are mentioned that build on the six types of institutional work devoted to maintaining institutions as described by Lawrence and Suddaby (2006, pp. 232–233). The first three types of maintenance work ensure adherence to

systems of rules, while the latter three focus their effort on reproducing existing norms and belief systems. These three are mentioned here to give an idea of how values can play a role in maintaining institutions: Positive and negative examples that illustrate the normative foundations of an institution can be provided through *valourizing or demonizing*. *Mythologizing* history is a significant way in which actors preserve the normative underpinnings of institutions by emphasizing the organizational history and the founder's standards. *Embedding and routinizing* mean infusing the normative foundations of an institution into the participants' day-to-day routines, organizational practices, in strategy-documents, and expectations.

Currie et al. (2012) extend Lawrence and Suddaby's typology by adding another way of maintaining institutional work, described as "constructing normative networks." Constructing a normative network emerges as a relevant practice among elite health care professionals, enabling them to maintain their professional dominance in the face of external threats. Another study identifies maintenance repair work as enabling powerful incumbents to reverse changes and re-establish a status quo (Micelotta & Washington, 2013). This study is investigating institutional maintenance in a situation of social upheaval and researches how a faith-based organization maintains its ideals and intentions in challenging circumstances through its values work.

Institutional logics and values

This study finds that Friedland's perspective (2012, 2013a, 2013b, 2014, 2017; 1991) on institutional logics provides valuable insights to an understanding of values work in organizations. Striking in the review of values work studies (presented below) is the notion that no studies of values work are currently investigating how values animate the "value-spheres" of institutional logics and the practicing of the social order of logics. Here, I follow values as the

basis of institutional energy and the driver of the construction of social order in institutional logics (Friedland, 2017).

Building on Dewey (1923), Friedland highlights values as the quality of things, located not in the thing but in the purposeful practice through which the thing is appropriated. From this perspective, Friedland criticizes the approach of Thornton, Ocasio, and Lounsbury (2012) to institutional logics, as they define institutional logics as "the socially constructed, historical patterns of material practices, assumptions, values, beliefs, and rules by which individuals produce and reproduce their material subsistence, organize time and space, and provide meaning to their social reality" (Thornton & Ocasio, 2008, p. 101). Even though Thornton et al. (2012) recognize that values are an elemental part of the initial formulation, values are missing from their framework (Friedland, 2017, p. 14). They understand values as a "source of legitimacy" or as assimilated into the organizational identity, but do not elaborate on values as "generated" or "measured" (Friedland, 2017, p. 15).

Early in the 90s, Friedland and Alford (1991) criticized institutional theories for focusing on instrumental behavior and rational actions without including society, pointing to the plurality of institutional orders existing at the societal level. Capitalism, democracy, bureaucracy, family, and religion are all core orders that influence an institution, each shaping individual preferences and organizational interests as well as a repertoire of behaviors. Each institutional order has a central logic that guides its organizing principles and provides social actors with vocabularies for their motives and with a sense of self.

Drawing on Weber (1946/2012), Friedland understands the inherent beliefs of institutional logics as composed of a multiplicity of "value spheres." The judgment of the "validity of such values" is a "matter of faith," which individuals seek and for which they claim to be instruments.

Each value sphere has teleological consistency in exercising "power over man" (Friedland, 2013a, p. 28). According to Friedland, Weber sees all value rationalities as religious: on the one hand, one seeks to possess the divine in the moment, and on the other, one is an instrument of the divine, acknowledging God's creation and participating in the perfection (Friedland, 2013b, pp. 18–19).

Within each order, there are sets of expectations for both individual and organizational behavior (Friedland & Alford, 1991). When expressed, these distinct practices reproduce the material substance of the logics, organizing them in time and space and giving them meaning. The material practice of the values sphere of compassion, for instance, can be expressed through rites of care that reach out to suffering people, giving to the logic an instrumental and ritual content. Integral to the production of institutional logics is a valuation that reflects a judgment on what to do. In this way, institutional logics do have a normative dimension in that they are organized around actionable goods that are of value to the world (Friedland, 2017, p. 12).

Over the last decade, the literature on institutional logics has broadened the understanding of the institutional processes of organizations (Thornton & Ocasio, 2008; Thornton et al., 2012). Studies have emphasized the coexistence and mingling of logics (Purdy & Gray, 2009; Reay & Hinings, 2009) and the effect of shifts in the dominant logics (Lounsbury & Boxenbaum, 2013). Institutional logics have mainly been identified at the societal level, but can also be found within organizations, where they are used to legitimize institutions' language and practice (Alvesson & Sköldberg, 2009; Zilber, 2017). Recently, there has been a call to investigate institutional logics bottom-up, adding micro aspects of institutions to the study of institutional logics (Zilber, 2017). In this study, I am responding to the appeal of Zilber (2017) for more research on how

institutional logics are constructing, shaping, and modifying activities over time by researching how values work may be part of the internal practice of logic.

Institutional logics and institutional work

Even though the trajectories of institutional logics and institutional work have two distinct foci, the first establishing a cognitive lens for what is happening in organizations (the institutional logics), the second focusing on the micro-processes of changing and maintaining institutions (the institutional work), there is a possible link between the two. Zilber (2013) presents institutional logic and institutional work as two distinct concepts, naming them "figure" and "ground," and suggests that the two streams be treated separately and the correct theoretical lens be used as appropriate. In contrast, Hampel et al. (2017) suggest there may be significant insight to be gained by integrating the concepts of institutional logic more deeply into the study of institutional work. These authors argue that the concepts of logic could provide a way to understand how actors work to shape large-scale cross-field institutions, for instance, in constructing the institutional orders of family, community, religion, state, market, profession, and corporation (Thornton et al., 2012). Here we look to Hampel et al. (2017) for possible links between the two trajectories. We need more research to investigate how state, market, and religion, as institutional logics, influence organizational behavior and performance and how the relationship between logics and processes can build bridges between institutional logics, work, values and faith.

Values work in organizations

Since performative values work in organizations is a relatively new stream, I conducted a literature review to obtain an overview of studies on values work and their contributions. A computer-based literature search was conducted in international article databases such as ABI/Inform and Business Source Complete (BSC). The databases represented a broad overview of recent articles within economy, organizations, and leadership. Keywords such as "values work" and "organization" were searched for in titles, abstracts, and article keywords from the last ten years, covering a period from 2008–2018. Ten years was chosen so as to include articles prior to Gehman et al.'s (2013) notions of values work.

An initial search produced a relatively large number of articles, including 30 published articles in ABI/Inform and 83 in BSC. The following criteria were used to narrow down the number: 1) The articles should be empirical studies researching *values work* as a phenomenon within organizations. 2) The studies should identify structure, processes, or mechanisms of values work in organizations. 3) They should be published in either a Scandinavian or the English language. Excluded from the search were articles on "work values" that emphasized the development of individual values on joining an organization or on entering an occupation (Connor & Becker, 1994). Other empirical works excluded were studies that focused on economic and strategic approaches, such as sustainability strategy and value congruence, and articles based on psychological research and management, such as behavior work-life balance and work place commitment. A manual search for further references was carried out on all the selected articles.

From the published articles detected from the traditional literature review (Hart, 2018), six empirical articles were chosen as relevant to this review, all being empirical studies with a

primary focus on values work as performed in an organization. Three articles used the term "values work" or referred to Gehman et al.'s study of values work in organizations (Perkmann & Spicer, 2014; Vaccaro & Palazzo, 2015; Wright et al., 2017). One article did not mention the term values work, but was referred to in a review article and was included because of the distinct work on values in a crisis situation in an organization (Gutierrez, Howard-Grenville, & Scully, 2010). One article is included because it is based on empirical studies of values work in extant literature and reveals values as part of the dynamic nature of organizations (Bourne & Jenkins, 2013). Table 2 presents the titles, research questions, methods and findings of the six studies selected.

Authors' last names and article title	Research question	Methods	Findings and contributions
Gehman, J.	How do	A ten-year study of the	Defining values practices as
Treviño, L. K. Garud, R.	values practices	development of an honor code in a business school	sayings and doings in organizations that articulate and
2013	emerge and	code in a busiliess school	accomplish what is normatively
	how are they	Archival sources,	right and wrong, good or bad,
Values work: A	performed?	ethnographic observation,	for its own sake.
process of the emergence and		stakeholder interviews	Values work deals with a pocket of concerns, knotting local
performance of		Combining practice	concerns to action networks,
organizational		perspective and actor-	performing values practices,
values practices		network theory	leading to circulating values
USA			discourses.
Vaccaro, A.	How can	Eight-year study of	Going beyond the observation
Palazzo, G.	institutional	Sicilian anti-mafia	of values practice to show how
2015	change	initiative and a	change agents are using values
Values against	succeed in a social context	grassroots-movement: Addiopizzo (2004–2012).	strategically to transform the highly resistant setting of
violence:	that is	Utilizing publicly	paying pizzo.
Institutional change	dominated by	available sources such as	Identifying five micro-processes
in societies	organized	news articles, internal	that leverage values in
dominated by	crime?	documents, interviews	interaction with stakeholders:
organized crime		within Addiopizzo's	hooking, anchoring, activating,
T. 1		network and with	securing and uniting.
Italy		officials and experts, direct observation.	

Table 2. Presentation of empirical articles relevant to the literature review

		Combining institutional theory, stability and change literature	
Bourne, H. Jenkins, M. 2013 Organizational values: A dynamic perspective <i>UK</i>	What distinct forms of organizational values could there be and what are the relations between them?	Empirical studies in extant literature Propositions set out from institutional, organizational and managerial sources Contributing to the field of organizational values	Developing a framework that shows the interrelationships between forms of values, highlighting the dynamic nature of organizational values Defining four distinct forms of organizational values: espoused, attributes, shared, and aspirational, and showing how they reveal the dynamic nature of organizational values
Perkman, M. Spicer, A. 2015 How emerging organizations take form: The role of imprinting and values in organizational bricolage <i>UK</i>	How emerging organizations are selecting forms in a context where multiple forms are available and how they are shaping the organization	A six-year inductive and empirical study of the construction of a web- based company offering open publishing Gathering and reading of historical material, and exchanges from two media on-line message boards Contributing to the field of institutional complexity, process studies, organizational values	Identifying organizational values as helping to select organizational forms in resonance with the general purpose of the organization, providing a yardstick and an engine for judging the compatibility of alternative organizational forms Organizational bricolage is suggested as shaping organizational forms in the environment of multiple choices. Forms are aligned with organizational values, and values act as a focusing device shaping organizational structure.
Wright, A. L. Zammuto, R. F. Liesch, P. W. 2017 Maintaining the values of a profession: Institutional work and moral emotions in the emergency department <i>Australia</i>	How specialist actors are engaging in institutional work and maintaining their professional values when they interact with each other and balance demands from the public health	A three-year study of specialists in emergency medicine in a public hospital Observation Interviews Archival data Contributing to institutional work, values and moral emotions	Values identified as a source of conflict and a motive for professional action inside organizations Two micro-processes maintain professional values: 1) When value interpretations are misaligned between different specialists, transitory moral emotions motivate institutional maintenance. 2) When practice is misaligned with values, moral emotions are enduring and shared and mobilize collective maintenance. Organizational practices are adapted or

Gutierrez, B.	How can	A three-year study of the	The crafting of "split	
Howard-Grenville,	identification	emergence of unlikely	identification" is identified as	
J.; Scully, M. A.	trigger and	activism from committed	allowing members to obtain	
2010	shape change	members of the Catholic	identification with the	
	effort?	Church, conducting	normative aspects of an	
The faithful rise up:		interviews, and readings	institution. Despite values such	
Split identification		of newspaper articles, and	as loyalty being challenged,	
and an unlikely		archival sources	voices are expressed in a crisis	
change effort			to bring about change.	
		Contributing to	"Split identification" attempts to	
USA		identification theory and	repair the split by seeking	
		organizational change	change, and by responding to	
			realign with valued norms.	

The empirical studies chosen for the analysis were analyzed in the context of the definition of values, an understanding of the concept of values work, and how the concept is identified and integrated into forms of institutional work. Additionally, the studies were compared with two Norwegian studies on work on values in faith-based institutions (Aadland & Skjørshammer, 2012; Askeland, 2014). These two articles did not appear in the computer-based literature search but represent unique empirical studies on values in organizations, especially in the context of faith-based institutions. Aadland and Skjørshammer (2012) investigate how institutional identity is sustained in a faith-based institution within a secular and pluralistic society and find an increased moral sensitivity and raised awareness of values-in-use among staff and leadership, which is enhanced through internal self-reflection on values, practices, and change. Askeland (2014) researches how leaders, in interaction with others, contribute to interpreting the mission of an institution and to shaping the values in a faith-based welfare organization. He finds leaders are identified as agents of institutionalization, who influence organizational values through initiating value processes in different ways.

Several other studies could have been included in the literature review. The study of eight Norwegian organizations that examine the relative influence of values on core organizational functions comes close to investigating values work as institutional work in organizations (Aadland, 2010); however, the study does not identify values work and the practice of values, per se. Zilber (2009) takes a narrative approach in exploring the forms of institutional work used to translate meta-narratives into organizations and the lives of individuals, identifying the process as symbolic institutional maintenance. Symbols are highlighted as representing values and meaning. The study uses a rape crisis center in Israel as its case organization and examines institutional maintenance as narrative acts, but does not specifically identify values work.

Work by Kraatz (2009), who revisits Selznick's (1957/1983) perspectives, could have been included. He portrays the leader as both the "agent of institutionalism" and the defender and steward of the living social entity of the organization. As managerial action, work on values is seen as having implications for organizational legitimacy, governance, and change. However, I am concerned with values work as a distributed activity of the whole organization and not only as the work of leaders.

A recent article identifies how "values practices" are performed collectively by the practice of grassroots exchange networks in crisis-stricken Greece (Daskalaki, Fotaki, & Sotiropoulou, 2018). The study builds on Gehman et al.'s thinking about value practices and explores the value systems of different networks and how they reconfigure economic values. However, the study describes initiatives of solidarity in the economy at a macro-level rather than identifying structures of values work within organizations, and is therefore not included in the review.

What are values?

The studies selected for inclusion in the review hold a *performative view* of values in organizations (Gehman et al., 2013). The practice perspective of values treats values—which

have often been viewed as end-states (terminal) and quite stable—as found in evolving practices (Dewey, 1939). Gehman et al. were the first to introduce the concept of *values work*, conceptualized as ongoing performances situated in everyday practice and presented as part of emerging and performed value practices. Vaccaro and Palazzo (2015) go beyond the description of values work by Gehman et al. and highlight the performative power of values to contribute to the construction of the reality described. Building on Schwartz (1996, p. 2), they define values as "desirable, trans-situational goals" and highlight them as motivational factors and guiding principles in people's lives, able to challenge and change highly resistant institutions.

Gehman et al.'s (2013) perceptions of values work and practices are built on practice theory, and they highlight that the practices people perform provide direction for right or wrong behavior. They define values practices as the "sayings and doings in organizations that articulate and accomplish what is normatively right or wrong, good or bad, for its own sake." This definition is influenced by Schatzki's definition (2012, p. 14) of practice as an "open-ended, spatially-temporally dispersed nexus of doings and sayings." Despite the practice-orientation of these definitions, they lack the dimension of values as ideals, as "desirable modes" that are relevant to action.

Kluckhohn has inspired many scholars with his definition of values, which highlights values as desirables:

... a conception, implicit or explicit, distinctive of an individual or characteristic of a group, of the desirable which influences the selection from available modes, means and ends of action. (Kluckhohn, 1951, p. 395)

In their definition, van Deth and Scarbrough (1998) include processes of value reflection and sense-making as being important in terms of values influencing actions. They explain values as part of collective, reflective sense-making:

Conceptions of the desirable which are not directly observable, but evident in moral discourse and patterns of attitudes forming value orientations with relevance to action. (van Deth & Scarbrough, 1998, p. 46)

The little word "desirable" (which is different from "desired" (Parsons, 1968)) draws attention to what is wanted or wished for as an attractive, useful, or necessary course of action (Cambridge dictionary). It also gives values a normative direction (Scott, 2014), indicating a close relationship between morality and work on the "common good" (Lawrence, Leca, & Zilber, 2013). To orientate values practices toward standards and the capacity to imagine alternative possibilities for future ethical and moral actions, I expand the definition of values practices by Gehman et al., to be the sayings and doings in organizations that articulate and accomplish *the desirables* in relevance to right and wrong action and behavior.

The institutional context of studies of values work

An interesting observation in the analysis of values work studies in organizations is that values work is either studied in highly institutionalized organizations, recognized as *social systems* (Aldrich, 1992) or in groups described as *associations* or *"grassroots-organizations,"* characterized by "participation in collective political activities open to everyone" (Togeby, 1993).

The associated organizations are established with a clearly expressed agenda. In these organizations, micro-processes of work on values play a role in promoting a political mission and in encouraging common good. The grassroots-movement of Addiopizzo is promoting values, in a context where institutions are highly resistant to change, by working against pizzo, or protection-money, in the mafia-context (Vaccaro & Palazzo, 2015). Another grassroots organization is encouraging loyalty in the Catholic church against sexual abuse (Gutierrez et al., 2010). A third study is investigating innovation through the provision of an opening for anybody to author news on a newly established web-based platform (Perkmann & Spicer, 2014).

Organizations that function as open social systems have frequently developed strong normative and cognitive belief systems as part of the rules, norms, and ideologies of the wider society. The formal structures of these organizations can arise as reflections of rationalized myths (Meyer & Rowan, 1977) and contain weakly connected elements that make them loosely coupled systems (Meyer & Scott, 1992). Research into institutionalism in Scandinavia has, through case studies, investigated the dynamic aspect of ideas circulating in institutions. "Translation" has been found to occur, where ideas are co-constructed in ways that change the meaning and content of the ideas circulating in a field (Sahlin & Wedlin, 2008).

Studies researching values in open systems have investigated how integrity is reinforced through the emerging values practice of an honor code (Gehman et al., 2013). Professionals maintain their values despite changing their organizational practice (Wright et al., 2017), and awareness of moral values develops an organization's identity (Aadland & Skjørshammer, 2012). Studies have identified not-for-profit organizations as being highly sensitive to institutional influence (Greenwood et al., 2008). However, we need more research to investigate how circulating ideas, when translated, can be reframed in terms of the ideology of the recipient's

organization. One study identified religious commitment as being transformed into values partly because of collaboration with and regulations imposed by public agencies but also because the organization has a history to support (Askeland, Espedal, & Sirris, 2019). We know little of the distinct values practices of faith-based organizations as they transform, interpret, and reframe their values within a pressured institutional context.

Values work as investigating institutional processes

Despite the concepts of values work being highly influenced by practice theory, the studies in the review also are informed by a strong process orientation (Langley, Smallman, Tsoukas, & van de Ven, 2013; Langley & Tsoukas, 2010). In process studies, the focus of attention is on how and why things emerge, develop, grow, or terminate over time in organizations (Langley et al., 2013). Process studies aim to unpack events to reveal an understanding of the complex activities and transactions that take place in organizations and contribute to their constitutions (Langley & Tsoukas, 2010). Processes occurring simultaneously point inwards to things happening within the organization, but they also reflect responses and pressures from the outside.

Process studies are seen as offering a relevant perspective to the investigation of values in an organization, especially in relation to an examination of how values emerge and are performed at different times. The process perspective investigates values as changing or as maintained and the mechanisms influencing these processes. When investigating values work, Gehman et al. identify a process in which values emerge out of "pockets of concern," knotting local concerns into an action network, performing actual values practice, and finally circulating through a values dialogue to foster development and institutionalization (VanderPal & Ko, 2014). The process pattern is also evident in the study by Vaccaro and Palazzo (2015) where the

actor, Addiopizzo, is organizing resistance to paying pizzo through posting posters all over Palermo with the short message: "A society that pays the pizzo is a society without dignity." Through the process work of Addiopizzo, an institution that pays pizzo and the meaning of dignity are altered in the fight against institutions highly resistant to change.

Although the review studies are mostly engaged in describing strong processes in organizations (Langley & Tsoukas, 2017), we can ask if those selected take us far enough to include an understanding of values work as part of the institutionalizing processes that occur in organizations. The role of values, as included in ongoing institutionalization processes, and how values influence actions, agency, and institutions have not been thoroughly described.

An emerging field of values practice studies

A growing stream of studies that build on Gehman et al.'s (2013) study have started to investigate the effects of value practices and how they are encouraged in organizations (Daskalaki et al., 2018). Although the studies seem to be moving in different directions, two themes can be identified. Some studies have started to use the term values practices, extending the performative understanding of values practices by interpreting these as different arrangements for social change and maintenance. Values practices are seen as restoring human values in times of crisis, leading to sustainable living conditions (Daskalaki et al., 2018). Values practices are also highlighted as playing a role in understanding the tensions between public organizations and management (Chanut, Chomienne, & Desmarais, 2015) and in the protection of organizational identity (Desai, 2017).

Another direction involves investigating the nature of human and individual values as relevant to organizational practice, for instance in investigating the influence of counter-ideal

values (Van Quaquebeke, Graf, Kerschreiter, Schuh, & van Dick, 2014), the relationship of organizational humanity values and commitment (Husted, 2018), and as paving a way for social entrepreneurship to mitigate value concessions (Mitzinneck & Besharov, 2018).

Values work enhancing normative dimensions of work

Even though values work rests upon a normative pillar that introduces prescriptions and valuation dimensions into social life (Scott, 2014), this seems to be an under-examined theme in the studies reviewed. Gehman et al.'s (2013) notion of values practices as "right and wrong practice" indicate a close relationship to morality as an aim in working for the "common good," but this is not elaborated on in the text. Phillips and Lawrence (2012) mention 15 different forms of institutional work, none of which are described as involving moral or ethical work. Wright et al. (2017) identify moral emotions as arising from situations of value conflicts in interactions between organizational members, but they are looking at emotions as mobilized by problems and not as part of moral reflection. Aadland and Skjørshammer (2012) highlight work on values to introduce an ethical sensitivity but do not mention the mechanisms channeling this work.

In this study, I am looking for a connection between values work and moral agency (Lowry, 2006; MacIntyre, 1999; Moberg, 2006; Nielsen, 2006; Weaver, 2006). A stream of studies focus on moral agency as typically manifested by either ethical action or inaction, which may be preceded by a moral struggle on the part of the agents (Wilcox, 2012). In developing parallels between philosophical theories of virtue and the concept of moral identity, Weaver (2006) highlights virtues as being the dispositions necessary for the achievement of internal goods. These dispositions could be the values held to require a degree of narrative unity (MacIntyre, 2007) or continuity (Koehn, 1995). A reflection on these values takes place in

history, and the roles inherited by values give life moral particularity (MacIntyre, 2007). The highlighting of values as forming the moral discourse relevant to action (Van Deth & Scarbrough, 1998, p. 46) may establish a base for investigating the moral dimension of values work.

Gaps and further research

The six values work studies and a more recent stream of values practice studies, indicate a renewed interest in values and values work in organizational studies. All the studies in the traditional literature review are informed by a process perspective on what is happening in organizations and indicate values as distributed activities, embedded in practice, and constantly becoming. As part of the institutional work, scholars highlight values as playing a role in the interaction between actions and institutions and in understanding the social order that influences activities. However, we can ask if the current studies on values work are going far enough in integrating perspectives on how values are part of the constitutive acts that construct people's understanding of reality.

Scholars have been criticized for only mentioning values as part of a framework that is assimilated into organizational identity, but in this study, I ask how values work is "generated" through the institutionalizing process. We need more information on how tacit values become explicit through the institutionalizing process, and how values work becomes a dominant mechanism in value realignment, maintaining institutional agency and producing new valuerelated actions while also maintaining old practices in tense situations.

Few studies have combined institutional work, institutional logics, and values work. We need more studies that investigate values as part of the ongoing process of changing and

maintaining institutional work and the social order. This should involve studying how values influence and are part of the recursive relationship between institutions and actions, especially in relation to how they constitute the embedded agency. We need more research to understand the value-spheres of institutional logics, for instance how state, market, and religion, as institutional orders, shape and modify organizational behavior and performance at a micro-level.

Little attention has been given to researching the micro-processes of faith-based organizations that incorporate and modify the religious ideal of taking care through their social diaconal engagement. This study investigates institutional maintenance in a situation of social upheaval and flux, and it considers how a faith-based organization maintains its interest through values work under challenging circumstances. In studies of faith-based institutions, there is a quest for understanding on how to construct the future from the past and make Christian dogmas and personal faith meaningful in daily practice. When organizations are experiencing institutional pressure, as for example, in a faith-based health care organization, the conditions may constrain the institutional values of the organization or those of individuals acting contrary to the demands. We know little of how faith-based organizations work to transform, interpret, and reframe their values in a pressured institutional context.

We can ask how values occur in history through reflections, and how roles inherited through values give life moral particularity (MacIntyre, 2007). Even though there are indications of a close relationship between morality and work on the "common good," the normative pillar of values work in organizations is under-examined (Lawrence et al., 2013), leading us to another question about how values work is channeling moral agency.

Research methodology

Exploring values work in a faith-based organization can be viewed as a mystery that needs to be "solved" (Alvesson & Karreman, 2011). To investigate values work as both emerging and performed and as part of embedded institutional work and institutional logics, I have chosen a qualitative inquiry for my research design as this provides the opportunity to critically open up the case and challenge the mystery of the existing assumptions. A *qualitative* study can bring a richer and deeper interpretation and understanding of the ambiguities and complexity of the study. It can also bring us closer to the construction of the meaning that people give to the topic (Denzin & Lincoln, 2011). Inductive and abductive approaches are here used to discern the hypothetical overarching patterns and to distill general rules from observations.

Figure 1 presents an overview of the research design, the data-collection, and the research and analytical strategies used at different times. I have used boxes and arrows to identify the *logical plan for getting from here to there* (Yin, 2018) and the relationships between strategies, methods, and technics and the aggregated articles, indicating a research process happening in time.

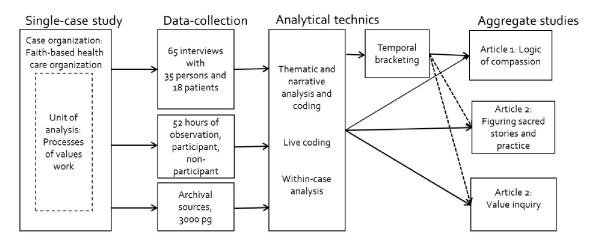


Figure 1. Research design

The structure of this chapter is divided into six. First, I describe the case study as part of my research strategy, and second, I position the research within the paradigm of constructivism. Third, I outline my strategies for data sampling, and fourth, I present analytical strategies and data analysis. Finally, I present reflections on the quality of the data and ethical considerations relating to my study.

Research design - A single case study

In a case study, the case is the object of interest in its own right (Bryman, 2016). However, it is debatable whether it is possible to use a single case study as a special research design within qualitative studies. Almost any kind of research can be constructed as a case study. What distinguishes a case study is that the researcher is concerned to reveal the unique features of that particular case (Bryman, 2016, p. 61). A case study is especially useful in situations where the boundaries are unclear (Yin, 2014) and the surroundings complex (Casey & Houghton, 2010). Thus, the definition of a case study might be to "investigate a contemporary phenomenon in depth and within its real-world context, especially when boundaries between phenomenon and

context may not be clearly evident" (Yin, 2018, p. 15). A concern is that one cannot generalize from a single case study, however as Flyvbjerg (2006a) highlights, "the force of examples" does provide a way to gain knowledge.

Researchers often struggle with questions about what a case is (Miles & Huberman, 1994). There may be many different cases, for instance, an organization, an occupation, or a profession (Silverman, 2017). However, in order to broaden the study to be more than a description of one case, a fruitful question is to ask about *the unit of analysis* (Miles & Huberman, 1994). In my own study, I take a faith-based organization to be my case organization, and the unit of analysis is the *processes enhancing values work* in that case organization.

Purposive sampling of the case organization

In choosing a context for my study, I did a typical case sampling (Bryman, 2016) to select an information-rich case (Patton, 2002). The case organization for this study represents a unique case (Yin, 2014) in terms of being rich on the phenomenon under investigation (Pettigrew, 1990). Issues of strategy, leadership, and development in a faith-based health care organization are rife with value questions, both in the organization having a heritage to maintain and in its facing new regulatory demands. The chosen organization has, over the years, become a strong values-based organization as a religious (Lutheran) non-governmental organization (J. Berger, 2003; Martens, 2002).

As an insider to the foundation owning the case-organization (from 2008–2012) and as a biographer of the foundation's founder, Maria Haven, I already had extensive knowledge of the first fifty years of the mother-house organization. I am also an experienced management consultant having worked for more than ten years (1997–2008) with different organizations in

both the public and voluntary sectors. Despite my in-depth knowledge of different organizations, I was not familiar with the broad range of activities and the challenges of the large and complex Deaconess hospital, and in particular, I was not familiar with values work. In November 2013, I sent an application to the president requesting to use The Deaconess as the case organization for my study. On Dec 6th 2013, a letter of acknowledgment from the president approved the study.

The Deaconess hospital is currently integrated into the public health service and operates within the framework of the Regional Health Authority (RHA). The hospital provides medical services for a little under 200,000 residents from four districts of the capital of Norway. In addition, psychiatric services are offered to several city boroughs, and the surgical department receives patients for scheduled operations from all parts of the country.

The health care system in Norway can be characterized as semi-decentralized. Since 2002, the responsibility for specialist care lies with the state, administered by four RHAs, whereas municipalities are responsible for primary care. Coverage is universal and automatic with some payment stipulations for patients. As of 2016, private providers accounted for less than 12% of overall services, mostly by not-for-profit institutions. Health care providers contracted by an RHA are typically paid a combination of an annual lump sum, based on the type of practice and the number of patients on the list, fee-for-service payments, and patients' co-payments. The annual lump sum and the out-of-pocket fees are covered by the government, and the fee-for-service payment scheme is negotiated between the government and medical associations.

In addition to being part of the nation's health care service, The Deaconess has a history to maintain. Values work has been part of the organization's work throughout its 150 years. From the beginning, the practices of the first nurses and deaconesses were informed by Christian values such as compassion and "deeds of love." For fifty years, Maria Haven, the first female

leader, taught nursing to deaconesses and administered The Deaconess House, as the nation's own Florence Nightingale. She sent letters to the sisters encouraging them to stay morally firm, constantly emphasizing what Jesus would have done. In 1945, after World War II and the introduction of the nation's welfare system, the pioneer-position of the hospital was challenged. The rationale of the government was to take responsibility for all people, and national insurance would cover all operating expenses. The initiative of the pioneers of faith-based organizations in taking care of vulnerable and marginalized people became less significant. The new Hospital Act (1969) and the sectoring of the city made The Deaconess responsible for hospitalizing all needy local inhabitants in three, and later four, sectors. Busier times for the deaconesses meant less time for practicing their religious devotions. In 1977, a new Law of Working Environment made it illegal for organizations to specifically recruit applicants with particular religious beliefs (paragraph 55a) (Friberg, 1977), which meant the workforce of the hospital became more secular and inter-religious. New Public Management (NPM), established in the 80s-90s, increased the influence of the health care authorities in hospitals, introducing ideas and principles of business to rationalize and make the public sector more efficient (McLaughlin et al., 2002). Though being challenged by this business-like health care logic (Reay & Hinings, 2009), The Deaconess' strategy plan in 2015 highlights that the organization's work should still be inspired by values such as quality and compassion. These values were selected from the institution's history to endorse their commitment and calling.

Philosophy of science

A key concept in relation to knowledge building is to identify a study's position within the philosophy of science and the beliefs of ontology and epistemology. Ontology means the theory

of the nature of *what is*, which in social science concerns the nature and knowledge of social reality (Delanty & Strydom, 2003, p. 6). Epistemology refers to the fundamental branch of philosophy that investigate the possibility, limits, origin, structure, methods, and validity of knowledge (Delanty & Strydom, 2003), which can be viewed as the relationship between the inquirer and the known (Denzin & Lincoln, 2011).

Much research on values has been placed within the positivist and quantitative paradigm, describing how values are structured and measured and investigating the impact values have on perceptions and decisions (Meglino & Ravlin, 1998). However, recently, scholars have positioned their values studies within the social science tradition of social constructionism (Aadland, 2017), highlighting values as part of the phronesis of organizations (the wisdom connected to practical action) (Flyvbjerg, 2006b, p. 370), and at the core of every linguistic expression (Aadland, 2017).

I relate to a moderate ontological approach to constructivism, claiming that construction is the process by which something is built from existing material (Czarniawska, 2008; Hacking, 1999). A paradigm of constructivist or social constructionism (the two concepts are here viewed as alike because of the similar focus on meaning-making processes (Spivey, 1996)) can provide an understanding of the world in which we live. The emphasis is on how the participant is engaged in actively constructing their world through forms of social action and by assigning meaning to the world through language-based distinctions (Holstein & Gubrium, 2008; Lincoln, Lynham, & Guba, 2011). The researcher is seeking to understand the world in which the participant lives and the complexity of this world, rather than narrow meanings that reflect only a few categories and ideas (Creswell, 2014).

In the processes of construction, the use of language is worth paying attention to (P. Berger & Luckmann, 1966). Our vocabulary, the words we use, our proverbs, values, sayings, and stories all elicit meaning (Gergen & Thatchenkery, 2004). Language and stories are part of the cultural process and gain their meaning within an organized form of interaction (Wittgenstein, 2009). To "tell the truth," is not to furnish an accurate picture of "what actually happened" but to participate in a set of social conventions. To be "objective" is to play by the rule of the given tradition. Thus, language and stories do not describe the action but are in themselves a form of action (Gergen & Thatchenkery, 2004).

Data sampling

I have applied a *triangulating* of methods to sample data in the field (Yin, 1999). A triangulation of interviews, field data, and the reading of archival material allow an investigation of the research question from different perspectives, thereby establishing a better sense of the unit of analysis (Silverman, 2014). The selection of interviewees was based on stratified, purposive within-case sampling for relevance and variation, and persons were targeted from three different levels (top-level managers, middle managers, and first-level managers & employees) for their assumed proximity to values issues. The interviewees were thus representative of a broad variation in professional background (physicians, psychiatrists, nurses, dentists, and administrative personnel). The information given in the interviews made it possible to find relevant sites for the subsequent observations. Participant and non-participant observations were conducted at three different levels. The archival sources were read both before and during the observation work. See table 3 for an overview of the data for this project. A time schedule for the data collection is attached in Appendix 5.

Table 3. Overview of data

Types	Sources	Descriptor
Interviews	Top-level managers (11)	Total of 65
	Mid-level managers (7)	interviews with 35
	First-level managers/employees (7)	persons of which 4
	Patients (18)	were stakeholders,
	Chairman of the board (1)	and 18 patients
	Persons with knowledge of The Deaconess' history (6)	
	Additional leaders (3)	Transcribed material: 429 pgs.
Observation	Top-level, overt non-participant observation of leader- meetings (2)	Total of approx. 52 hours of observation
	Introduction seminar for new employees (1)	
	Conference for leaders of diaconal health care	Transcribed material:
	organizations (1)	71 pgs.
	Mid-level: leader shadowed (1)	
	First-level: Patient treatment situations (9)	
	Inter-disciplinary meeting in a medical ward (2)	
Archives	Anniversary books (30, 50, 100 and 140 years), 900 pgs.	1st round: Historical
	Biographies (2, both of Maria Haven), 394 pgs.	institutional records,
	Textbooks (2, one about deaconesses, one about ethics), 368	approx. 1900 pgs.
	pgs.	
	Letters from Maria Haven from 1898 to 1914 (25 letters to	
-	the sisters, 39 letters to one sister [A.], letters to the	
	chairman), approx. 200 pgs.	
	Annual reports (1870, 1990–2014) and ground rules (1916,	2nd round: Annual
	1951, 1978, 1988), 550 pgs.	reports and policy
	Strategy plan (2012), 20 pgs.	documents, approx.
	Reports from the board (1969–1980, 1993–2015), 240 pgs.	900 pgs.
	Letters to the hospital from patients (39 letters, 2008–2014),	3 rd round: Patients
	approx. 50 pgs.	and employees,
	Internal employee survey (2010, 2014), approx. 75 pgs.	approx. 200 pgs.
	National patient survey (2013), approx. 25 pgs.	
	News reports regarding issues involving the hospital (2012–	
	2015), 10 pgs.	
	Records of external regulations, 40 pgs.	

Collecting data - interviews

In June 2013, I started the research project by doing a *pilot project*, interviewing the president and one clinic-leader. In addition, I attended a ward-meeting and an introduction seminar for new employees (taped, and transcribed). During the seminar, I noted the president saying: "Our values should be embodied in everything we do" (Anders, president, 12.09.13).

Listening to the president's speech, I learned two things: First, values are part of the everyday language of the organization. Second, the organization wants values to influence practice. However, moving from this knowledge to a study of how values work is conceptualized as ongoing performance, and how it is situated in the everyday practice of the organization, became a long and cumbersome journey.

Knowing that values are hard to identify, often being tacit and taken-for-granted (Chen et al., 2013), my approach to gaining knowledge of the phenomena of institutional values and values work started with interviews. A semi-structured interview guide, following a four-fold structure, was established on the basis of insights gained in the pilot-interviews. I first asked open-ended questions regarding activities, challenges, and the major concerns of the leaders and employees: "Can you tell me about the typical activities you engage in during a normal working day?", "What challenges do you face in being a manager/employee in this organization?" Second, I involved narrative work by asking, "Can you tell me a story of when you made a difference to someone at work?" Through this, I investigated the practices and stories for which organizational members wished to be known. This question was followed by, "How do you know this made a difference to someone?" This question investigated how the informant gained and constructed their knowledge of their story. Third, I asked a question such as, "At work, what are the most important and difficult discussions you encounter?" Finally, I asked questions about how the interviewees saw values processes and value priorities at work. The interview guide was used in most of the interviews, although slightly adjusted for the different levels of management. (The interview guide for managers and patients are attached, see Appendix 2 and 3.)

Interviews were primarily conducted during a period running from January 2014 to November 2015. Additionally, in March 2017 and November 2018, further interviews and some

focus group meetings were conducted to collect further information regarding details of the processes of values work. A total of 65 interviews were conducted with 53 persons. Of the informants, 35 were organization members, of whom four were outside stakeholders, and 18 were patients. Interviews were conducted with participants from three different managerial levels (top, middle, and first-level) and with a group of people who had knowledge of the history. The four stakeholders were a representative from the user committee, a former president, the chairperson of the board, and one of the last working deaconesses. A full list of informants and the dates of the interviews are attached in Appendix 4.

A research assistant was assigned to me by the hospital to help with logistics and to establish interview appointments. The research assistant sent a mail ahead of the interviews to inform interviewees about the aims of the research project. Further, I will describe the seven steps of the interview process in greater detail.

Choosing interview candidates was done using a *purposive sampling* and *sequential approach*. This approach usually begins with an initial sample and then gradually adds to the sample as benefits the research question (Bryman, 2016). The informant at the top-level willingly shared information and value-salient issues; however, a few of the interviewees held a critical distance from the subject of values in a faith-based context and could be termed "critical cases" (Ryen, 2010). I had six meetings with president Anders because of his in-depth knowledge of the organizational history, the health care system, and its regulations and to discuss the findings.

Second, at the mid-level, I interviewed leaders (June–Sept 2014) in a sub-setting of the hospital, the internal medicine department, chosen because of the personnel's proximity to patients and the lower complexity of the treatment situations relative to other departments (such

as psychiatry and surgery). In this department, the middle managers interviewed (7) were selected from the leader-group and represented ward leaders (4), section leaders of Hospice (2), and the leader of the physicians (1). Six of these leaders were nurses and one was a physician. Many of these informants were in favor of the organization's values work; however, a few had critical comments regarding a lack of business strategy in the structuring of the organization.

These interviews lasted approximately one hour. All were taped and transcribed verbatim with the exception the two pilot-interviews and one interview in which the tape-recorder broke. However, notes were also made during those interviews. An external transcriber was used to transcribe eight of the interviews, and the rest were transcribed by me. The informants received the transcribed interviews by mail with an opportunity to read and correct them. Three of the informants chose to change details of the content.

Third, a sequence of first-level interviews was conducted (June–Nov 2014) with nurses (7) from three different wards. The aim of these interviews was to get a view of work on values in proximity to patient encounters. The nurses were selected for the criterion of their availability, both for the interview and during the observation period. A nurse in the internal medicine department was interviewed in one ward. In a second ward, three nurses attended a focus group interview, and finally in a third ward, three nurses were interviewed individually. These interviews lasted a shorter time (from ten minutes to half an hour) due to the time available and due to some of these informants being peripheral to the main values discourses.

Fourth, other people were named during the earlier interviews as having relevant information for the study. Through *snowball sampling* (Bryman, 2016) I sampled and interviewed an additional seven informants (June–Nov 2014). The chairman of the board was interviewed, and interviews were conducted with six other people with profound knowledge of

the organization's history, such as the last working deaconess (until 2012), a manager (employed for more than 30 years), a person representing the user committee of the hospital, a former president, and two chaplains (employed since 1991). The information given by the representative of the user committee was perceived as not relevant for this research project and was therefore not transcribed. One person chose to change some of the content after reading the transcribed interview.

Fifth, to elicit stories of the experience of institutional values work, patients' perspectives were included in the study. A total of 18 patients were interviewed (June–Nov 2014) of which 17 patients were sampled from four different wards within the internal medicine department, and one was a recurrent patient with a chronic disease, currently out of the hospital but recruited by the research assistant. Nine of the patients had been admitted to the hospital, were in bed, and had some kind of problematic health condition. Eight patients were day-patients at the outpatient clinic and were interviewed as part of the observation activities.

The patients interviewed in the wards were recruited by the ward-leader and were asked if they were willing to contribute to the research project. One criterion requested was that the patients had experience of different hospitals and were able to compare the values work at The Deaconess with that in other health care organizations. Despite the challenging situation of being hospitalized, and in some cases being terminal, the patients willingly shared their stories. The patient interviews typically started with an attempt to elicit stories of both positive and negative patient experiences, followed by more directed questions about observed values and practices. The lengths of the interviews were adjusted to the patients' conditions (lasting from five to 40 minutes).

Sixth, as the research project proceeded, and as I had now conducted interviews at the top, mid and first-levels of the organization, my interest in values work turned from a cognitive understanding of values at work, to an investigation of values in practice. I realized that values were expressed in and during events such as patient encounters and leader meetings. Thus, rather than interviewing people, I started to look for events during which work on values could be observed (see details of observation activities below).

As the research work proceeded, a leadership change occurred. To understand how the values of the organization were perceived by a new president, I interviewed the new leader, Bjarne, three times after he entered the organization (April–Aug 2014) (Denis, Langley, & Pineault, 2000). However, as the leader's work continued, a conflictual situation arose that led to president Bjarne's resigning after five months. To get a better understanding of the values discourses involved, I did a second round of interviews (Nov 2014–Oct 2015) and interviewed the retiring president one more time (Dec 2014). This interview was not transcribed because of the strained situation, but notes were made during the interview. Additionally, I did interviews with three other leaders (one section-leader, who was not interviewed before, and two clinic-leaders who had already been interviewed), plus the former president, Anders, who returned.

Seventh, in order to make the research more co-generative (Carlsen, Rudningen, & Mortensen, 2014) a three-hour workshop was arranged at The Deaconess (January 6th 2017). Twelve leaders who had been informants on the project and who represented different parts of the organization were invited, seven of whom attended. The discussion in the workshop drew attention to certain issues in values work, and I realized I needed more data to broaden our understanding of two values-salient issues. In March 2017, two additional interviews were conducted in the psychiatric department with a clinic-leader (a nurse) and a professional (a

psychologist). In November 2018, a focus group meeting was conducted in a ward to broaden an issue regarding values work in the internal medicine department. Three nurses and one ward-secretary participated.

Collecting data - observation

Capitalizing on the information acquired during the first four steps of the interview process, I proceeded to collect ethnographic data as it occurred in the case organization (Holstein & Gubrium, 2008). The aim was to investigate and observe values work *in vivo* in social situations. The observations were especially driven by my interest in investigating the performance of values work, but I also engaged in questions about how values work is organized through talk and interaction. I made observations at three different levels of the organization, at top-level, mid-level, and first-level.

The ethnographic observation work yielded a total of 52 hours. Notes were made during the observation events, and a structured reflection guide was used to enrich the field notes subsequent to an observation. The reflection guide contained questions such as: What concerned the people? How did the people link their concerns to actions? How were the events connected to ongoing value discourses? What kinds of elements (e.g. time, place, management, feelings, intentions, history, etc.) influenced the action?

Selecting relevant sites for observations of the top-level were done in cooperation with the president, highlighting that values work is prominent in strategic discussions. During the period May–April 2015, I observed a one-day top leader meeting and a conference of leaders from faith-based health care organizations. From the pilot period, I included my observation of the

introductory seminar for new employees. My access at these sites was overt; however, I made my observations as a non-participant observer (Bryman, 2016).

At the mid-level of the organization, I shadowed (Quinlan, 2008) a middle manager (May 2015) in one of the internal medicine wards for a day, using participant observation (Diamond, 2006). This middle manager was purposively sampled after the interviews (Silverman, 2014) and chosen because her ward was a particularly challenging place that admitted the most marginalized, homeless, and drug-addicted patients. This leader had been explicit in describing her daily activities as being rife with ethical questions and dilemmas. She had worked in the organization for 13 years and had initially been taught by the deaconesses. This nurse, who was originally from another continent, also triggered my curiosity as to how values work was learned and practiced through the social community of the organization (Wenger, 1999).

To get a better understanding of "what was going on" in relation to values work and the practice of values on the ground, I did overt participant observations at the first-level of the organization (Oct–Nov 2014). I followed the activities in two wards, one internal medicine ward and one outpatient clinic, spending one day at each site. I attended different activities as they happened and observed patient treatment situations (9) and inter-disciplinary meetings (2).

Comments on the interview and observation process

I started the research process with an open question: how does values work emerge and how is it performed? In the process, I learned that this was a rather broad question and that I did not always know what I was looking for. I had the Gehman et al. (2013) article at the back of my mind, defining values work as ongoing activities, and values practices as distinct practices that tell people what is right and wrong. Many of the informants had much information to contribute on values and work, conveying value discourses and describing activities rife with practices that included values. However, after the sampling period, it became clear to me I had a large amount of messy data (Pratt, 2009). The question arose, is there anything here that can be structured and generalized as a pattern, a process or a mechanism of values work?

One lesson learned from the ethnographic field-study was that I could have limited the number of interviews and conducted more observation. As the project proceeded, I learned that there were places where values work was easier to identify, where it was embedded and lived, and charged with dilemmas and challenges. However, the interviews were necessary for me to choose relevant sites for these observations. In order to limit the project—observations are a time-consuming activity—I restricted my observations to 52 hours.

Archival sources

For this project, I collected data from both primary and secondary sources, personal and official documents as well as media outputs, to give insights into the historical processes of values work. Together, these archival documents yielded a total of approximately 3,000 pages (textbooks and articles about other organizations excluded). The data material and text-books regarding the case organization and relevant other organizations were read both before, during, and after the process of interviews and observation. Some sources I had already collected when writing the biography of Haven, and some sources were explicitly collected for this research project. I received help from the co-author of the biography of Haven in collecting the data material. She was a former deaconess and principal of the nursing school and had extensive knowledge of the case organization. Her in-depth knowledge directed my attention to historical sources relating to values work that proved more interesting than many others, especially letters

from Haven and annual reports and minutes from the board from 1969–1970, which had not been a subject of earlier analysis.

The archival sources of the case organization were treated in an interpretative way following a narrative approach in argumentation and style of reporting (Kipping & Lamberg, 2017). I investigated language, talk, and communication to identify the nature of values work over time and how it served as a springboard to action and in materializing meanings. Many of the sources were secondary, and time and authenticity became critical factors. In addition, the concept that sources may be subject to the interpretation of other scholars had to be considered. Primary sources, such as Maria Haven's letters to the sisters, pamphlets, and annual reports could be recognized as more authentic, but even here, the content was selected and presented by the authors. Nevertheless, the sources were useful in establishing event chronologies and in identifying the meanings and values discourses over the 150 years of the case organization. I will now describe the readings in three steps.

First step. When starting the research project, I re-read some of the relevant data material to get a perspective on values work across time. While working on the biography of the female founder, I had read pamphlets from the institution's early days and the annual reports (1868–1870) (Jahnsen, 1913), a biography of Maria Haven (Ebbell, 1940), textbooks (the first nursing textbook for the deaconesses and one about ethics) (Hagemann, 1930; Nissen, 1877) in addition to other research projects describing the early days of the deaconesses' work (Adriansen, 2007; Hellgren, 1997; Hvalvik, 2004; Lundby, 1980; Martinsen, 1984; Snøtun, 2007). On re-reading this material, I found the first textbook on nursing, written by Maria Haven's deputy, and the book of ethics, written by a female leader (1930), to be of particular interest. All of them added authenticity to the early discourses on the compassionate values work of the organization.

Second. To search further for values work and changes regarding work on values, I obtained personal documents, such as letters from the founder Maria Haven to the sisters (from 1868 to 1919). To these, I added different archival sources in my pursuit of information, which revealed differences in mission statements and guiding principles and changes in values practices. Anniversary books were read (30, 50, 100 and 140 years) (Bloch-Hoell, 1968; Jahnsen, 1913, 1919; Kaltenborn, 2009), as well as annual reports of The Deaconess (1969–1970, 1990–2015), the strategy plans, and the board minutes (1969–1970, 1990–2015). Finally, I also read the history and development of other faith-based institution (Angell, 1994; Askeland, 2016; Eckerdal, 2008; Leis, 2004; Stave, 1997).

Third. From 1991, a special period in the organization's history was identified when it was suggested that the organization should be closed down. To understand this incident and the organizational responses, I conducted interviews with persons with knowledge of the organization's history (already mentioned—see step four of Collecting data through interviews). In addition, official government documents were read, which included the White Paper no. 19 (2007–2008) and the White Paper no. 34 (2015–2016). Internal employee surveys (in 2010 and 2014) and a national patient survey (in 2013) were read. In addition, letters to the hospital from patients (39 letters, 2008–2014) and news reports regarding issues involving the hospital (2012–2015) were read.

Utilizing the data sources

The various empirical sources are used differently in the articles as either primary or secondary sources. The first article depends on archival material as its primary source and uses ethnographic observation and interviews to investigate how the logic of compassion emerges in the current organization. The second and third articles use ethnographic observation and interviews as their primary source, while the archival material is used as a secondary source to give background for the value-salient work through history.

Analytical strategy

As an analytical strategy, this project is informed by a strong process orientation (Langley & Tsoukas, 2010), with a particular emphasis on how history and narratives are brought in and reinterpreted (Whittle & Wilson, 2015) in particular instances of values work. Process studies view the organization as made up of processes rather than of things, and they see organizations as a dynamic bundle of qualities (Langley et al., 2013). Organizational values, as a performative process, can be researched through a strong process perspective (Langley & Tsoukas, 2017, p. 4). The processes of values work are therefore not viewed as unaffected by experience, but as constituted through the experiences of the actors. The emphasis is on "arrows all the way through" (Langley & Tsoukas, 2017, p. 4), which means investigating how phenomena are constituted through the work of the agents. Gehman et al.'s (2013) study sees organizational values as a form of practice, continually constituted and adapted through the ongoing "values work" enacted by organizational members. Their study examines values work differently from weak process studies (Bakken & Hernes, 2006), which investigate the effects and influences of organizational values (Langley & Tsoukas, 2017).

In this study, I research values work by using the lens of the strong process perspective to investigate the values work of the faith-based organization and how the values work creates knowledge and reflects the processes of the organizational members. I used a narrative approach (Rantakari & Vaara, 2016; Riessman, 2008) to elicit the values work and values practices of the

case organization. Narratives play a key role in organization process research due to their temporality, providing descriptions of sequences of events (Ricoeur, 1984). Narratives can offer knowledge of human intentions and deeds (Czarniawska, 2004, p. 650) and play a crucial role in forming a landscape of action (Bruner, 1986). As such, narratives can provide information about how things become organized (Boje, 1991) and about members' sense-making (Boje, 2008).

Analytical techniques

Our overall analytical approach was grounded and comparative (Charmaz, 2006) in its repeated iteration between empirical exploration and theoretical inspiration, which included a systematic thematic comparison (Riessman, 2008) across accounts of values work. The approach was both *inductive* and *abductive*. I used an inductive approach in proceeding from a number of cases to build connections, although the weakness here is that the underlying structures can be excluded from the picture (Alvesson & Sköldberg, 2009). In addition, I used an abductive approach that iterates between a hypothetical overarching pattern and the empirical data (Dubois & Gadde, 2002; Klag & Langley, 2013). Through this inductive and abductive approach, I have been able to move beyond the theories at hand to present a unique model of work on values in an organization.

Thematic and narrative analysis

In each article, a thematic and narrative analysis was utilized to identify sub-themes from the data material and to establish an awareness of the recurring and repeated actions of the phenomena under investigation (Bryman, 2016). Themes were identified on the basis of an initial

coding process. A narrative analysis was used to shift from "What actually happened?" to describing "How do people make sense of what happened?" (Riessman, 2008).

As the first step of the analytical work, I did an open round of coding of both interviews and observations using the software-program Nvivo. All the initial set of transcripts, the field notes, and documents from both the interviews and observations, were read several times to create a "start-list" of tentative and initial codes (Miles & Huberman, 1994). These were then inserted into Nvivo, giving me 107 codes. These codes identified the themes of leadership, processes, values, value practices, being faith-based, history of the case organization, and values work. Included were also emergent and controversial concerns regarding values work.

Within-case analysis

Within-case descriptions (Bryman, 2016) were created for all leaders at the top-level and mid-level to reduce the large number of transcribed pages to a more manageable size. I summarized the information that was relevant to the project, keeping it close to the way in which it was expressed by the informants, and did not follow a standard format for write-ups. The lengths of the write-ups were ½ to 1½ pages per leader. Similarities and repeated statements and actions were identified across the write-ups. Descriptions were created for particular themes appearing across the data-material, which included the Good Samaritan, descriptions of the founder Maria Haven, concerns, the common saying: "It is all in the walls," the meaning of being faith-based, compassion, the logic of compassion, the coordination of reform, culture and taboos, and the meaning of values.

Live coding

The list of codes and within-case descriptions were brought to meetings with the supervisors to establish a process of "live coding." Live coding is a creative process that connects validation and discovery to generate new theory (Locke, Feldman, & Golden-Biddle, 2015). We were looking for inconsistencies in the material and forming other creative codes to "legitimate new insight" (Locke et al., 2015, p. 374). Through this process, three aggregated themes for the study were established.

First, we followed the growing recognition of the importance of the tales of the Good Samaritan and Maria Haven in the case organization, and started to inquire how the conceptions of values intersected with the notion of the *sacred*. Through the live coding sequence, I observed that respondents were calling attention to issues in specific situations that highlighted values work. In the analytical notes, I recorded words such as concerns, compassion, quality, reflection, dilemma, and also question-phrases such as "Are we reaching those we are here for?" These led us to follow the notion of a process of value inquiry. Finally, building on the institutional logic literature, I asked if there could be an internal *institutional logic of compassion* and started to investigate the composite nature of the institutional logic through times and how it was revealed.

The analytical work proceeded in unique ways and lead to the three distinct articles. The data analysis can be read in detail in the method sections of the different articles. The general techniques and methods utilized are described here.

The logic of compassion

In the first study, on the institutional logic of compassion, I conducted content analysis of the data and archival sources (Franzosi, 2004). The emphasis was on systematic identification of

characteristics that underlie the indicators of content (Bryman 2016). An approach of temporal bracketing was used to identify different elements carrying the process of the institutional logic of compassion (Langley, 1999). Temporal bracketing is a way of structuring the description of an event to look for continuity and discontinuity in the activities within each period. Representations of the narratives depicted (Rantakari & Vaara, 2016) were collected to provide insight into the temporal progression of the activities (Langley et al., 2013) in different periods and to give a holistic view of their occurrence in the organization (Alvesson & Karreman, 2000). The different epochs and narratives were compared, and three elements of the process by which the institutional logic of compassion is constructed were identified. A visual map (Langley, 1999) was drawn to introduce the event chronology. Here boxes represented events, and arrows indicated responses to the event (can be provided if required). Through comparing the different brackets, it was possible to identify three processes that together constructed the institutional logic. These were institutional believing, material practicing, and moral reasoning.

Figuring the sacred

In relation to the sacred-article, we started to investigate: How and why the stories of the Good Samaritan and of the founder, Maria Haven, were constructed as sacred, and what functions does the sacred have in the institution at large? Looking across all types of data, including the archives and the observations of patient treatments, I singled out 92 excerpts of data that directly or indirectly referred to one or both of these stories. Of the stories, 44 were identified as having same structure as the Good Samaritan, and 48 were the story of Maria Haven. I coded these 92 excerpts for their common structure and basic sequence of exposition, complication and resolution (De Beaugrande & Colby, 1979; Kintsch, 1978). The stories had the

same plot about not passing by a person in need, whether in relation to marginalized patients or personnel. I also scanned through the data for potential contrary narratives and identified 21 excerpts where people critically contested the grounds of the sacred. To understand the dynamics of telling and living sacred stories, we turned to Ricoeur's concept of triple mimesis (Ricoeur, 1984) and placed the excerpts into two sets of analytical categories: figuring the sacred-as-story and the sacred-as-practice (see the article two for further detail).

The process of value inquiry

To identify the pattern of values work that results in the theoretical model of value inquiry, we started by examining the entire data set more systematically. As the first author, I identified 27 past or on-going processes of value reflections mentioned by more than three persons. As the next step in the analysis, we searched for "information-rich" cases by using an intensity sampling approach (Patton, 2002, p. 234) that located three sets of rich issues that questioned the dominant value frames. To ensure analytical contrast in within-case comparisons, I chose two issues that included micro-processes in units that were responding to societal changes (issues 1 and 2) and one that involved the whole hospital when the newly recruited president Bjarne launched a new strategy for the hospital (issue 3). In zooming in on these stories, we identified underlying assumptions for each issue and named them (see article three for further details).

Consideration of quality

Quality in qualitative research has traditionally been discussed under the criteria of validity, reliability, and generalizability. However, some consider these concepts inappropriate for qualitative research and give them other names such as credibility, transferability, and

dependability (Bryman, 2016; Silverman, 2017). Other scholars have slightly changed the sense in which the terms validity and reliability are used (Kirk, Miller, & Miller, 1986). I chose to employ the standard concepts of validity, reliability, and generalizability as contextualized for a qualitative research project, and I will also include some reflections on my own role in the project.

Reliability

Reliability (dependability) is traditionally concerned with whether the results of a study are repeatable (Silverman, 2014, p. 83). In a quantitative study, reliability means the ability to replicate reliable measures of social life. However, reliability is not evident in social studies where the social reality is in flux and lacks stable properties. In relation to qualitative studies, the possibility is highlighted that flux should be taken into account as a property of the study by making the research process as transparent as possible and through describing the research strategy and data analysis in a sufficiently detailed manner (Silverman, 2014, p. 84). In the context of this thesis, I understand reliability in this manner and have, in the methodology chapter, striven to clarify the methodological framework. Even though this research project is rather complex and would be hard to repeat, I have worked on describing the empirical material as precisely as possible. I hope that any researcher could follow the research process and would agree that the findings are reasonable interpretations of the material.

Validity

Validity is used in different ways and might refer to the credibility of the interpretations (Silverman, 2017, p. 384) or, more specifically, to "the extent to which an account accurately

represents the social phenomena to which it refers" (Hammersley, 1990, p. 57). In this study, I have used a combination of multiple theories, methods, and materials—a triangulation—to see whether the data corroborate each other. Interviews are combined with observations and readings of archival sources to overcome partial views and to arrive at the same or similar conclusions.

My approach as a social researcher has, in this project, had a form of *reflexivity* (Bryman, 2016, p. 388), meaning that I have made an effort to be reflective about the implications, biases, and decisions regarding the knowledge of the social world that I am generating. As a former insider, I am not "detached" from the object I study. A potential bias in this project could have been that I, as a theologian with an affiliation to the church, could be blind when approaching events, actions, and practices of the case organization because it was so taken for granted that the outline of the research "patch" could be difficult to find. However, my familiarity with the context could also be regarded as significant (Bartunek & Louis, 1996) because my knowledge would bring me "closer to the data" (Grenness, 2001, p. 189). Knowing the language and the nature of the action and interactions (Wadel, 1991) equipped me to ask different questions.

In order to "open my eyes" and establish a reflexive distance to the study, I was in constant dialogue with outsiders, such as my supervisors (Dwyer & Buckle, 2009) and practitioners of the field. Consistent with the principles of complementary sources of reflexivity in research (R. Berger, 2015; Josselson, 2004), the supervisors brought in different orientations, even (non-) faith affiliation, and contact with the traditions of critical research.

In addition, the research process was established as a process of negotiation and collaboration with the practitioners of the case organization (van de Ven, 2007, p. 10). The practitioners were engaged both during the sampling process of data and after. I was in dialogue with president Anders of the case organization, and in the later meetings to discuss the findings.

In January 2017, we conducted a co-generative workshop at the case organization to present the collective achievement of the theoretical models for figuring the sacred in stories and practices, the process of value inquiry, and to deepen our understanding of the issues. The workshop was conducted in cooperation with one of my supervisors who had experience of co-generative processes in other research projects. To involve the participants in the theorizing of the data, we produced 20 and 24 A5 hard-copy cards with quotations from the informants (Carlsen et al., 2014). The cards were divided between two groups and discussed, and then they were reflected on in a plenary session. The groups recognized that the quotations represented ongoing values work.

Generalizability

Generalizability, or transferability, touches upon the importance and relevance of the project and depends on the findings being applicable to another context. Generalizing on the basis of a single case study has been debated (Flyvbjerg, 2006a; Yin, 2014). The possibility of gaining knowledge without any attempt to generalize has been highlighted as cutting a way toward social innovation (Flyvbjerg, 2006a). Case studies are viewed as being generalizable to theoretical propositions but not necessarily to populations and universes (Yin, 2014). The case organization for my study has been rich in the subject of the investigation, namely, the values work in the organization. The contributions of the study can be viewed as insights into values work in a unique organization, which have been brought to light by critically thinking through the parameters of the population and by analytically generalizing from data and findings that corroborate, modify, and conflict with other theories. However, the results of the study are based

on one organization, and further studies with a larger number of values-based and faith-based organizations could be done to indicate if the findings are generalizable.

Ethical considerations

In social science, with its many possibilities for treating and mistreating individuals, communities, and the environment, it is of utmost importance that ethical behavior is reflected upon and then acted upon (Israel, 2015). Throughout my research project, I have followed the premises detailed in the guidelines provided by the Norwegian center for research data (NSD). The PhD-project was approved by the NSD in a letter dated 25th of February 2014. Since I am interviewing patients, a letter was sent to the Regional Committees for Medical and Health Research Ethics (REC) to ask if an application for the REC's approval was needed. On 5th of December 2013, I received a letter that said there was no need for a submission due to the character of the project being a study to evaluate a health institution and not the patients' health conditions.

Informed consent. The informed consent letter handed to informants had the title of the PhD-project at that time: "What is there in the walls?" The letter presented the aim of the research project and the planned implementation of the study. In addition, it emphasized the informant's right to withdraw from the project at any time. The content of the letter was slightly adjusted for the different informant-groups, being the leaders, people with knowledge of the history, and patients (The informed consent letter given to the managers is enclosed, see Appendix 1). All informants were handed the letter before the interview started and given oral information about the project. Every informant signed a letter agreeing to take part in the study.

The letter informed the reader that the data would be treated confidentially and that the informant would be kept anonymous in both the articles and thesis. People's names were removed from the transcribed documents and given a number. A separate list (a scrambling key) was established to decode the codes. All informants and the organization are, in the text, given fictitious names, including the founder of the organization, and the geographical positioning of the organization has been made relatively broad. However, there are only a few faith-based hospitals in Norway, and the history of the hospital makes it quite recognizable. President Anders allowed me to identify the hospital in oral presentations. A member check was done on potentially controversial persons to assess accuracy and to optimize validity (Koelsch, 2013).

I do not think the research project exploited anyone, nor was there any intended deception in the study (Silverman, 2014). Some of the patient-informants were in vulnerable positions having been admitted to the hospital with serious diseases and even terminal conditions. However, I attempted to meet them all with respect and reverence. The research assistant mentioned my background as a former chaplain to a few informants. However, I strived to ensure that the respondent understood that he/she was participating in a research study. All the patients were competent to give assent to participating in the research.

Findings and discussion

"We have to continuously tell the stories (...), and we never must stop asking whom we are there for. It is our users."

Anders, president, Dec 18th, 2015

The excerpt above represents a core theme of the empirical material. The citation refers to the broader mission of the institution. The first part of the sentence denotes the practice of continuously telling stories, which, when looking at the rest of the data material, refer to stories of the founder Maria Haven and the organization she founded and to the parable of the Good Samaritan (see article 2), a story about not leaving someone behind and of enacting compassion. "We never must stop asking whom we are there for" indicates an embedded agency attributed to the organizational actors. The quotation suggests a practical approach, of asking questions and of introducing a still deeper reflexivity.

As the theoretical and methodological approaches were described in the previous chapters, and all three articles have discussion-chapters on the findings, I will here present the aggregated contributions of the whole study in three sub-chapters. First, I present the processes of value inquiry as they unfolded in all three articles. Second, I discuss values work as creating institutions. Finally, I elaborate on how values work channels moral reasoning.

From values work to processes of value inquiry

On looking over the observations, interviews, and analysis of articles, what I found to be revelatory was the significant effort involved in the case organization's commitment to the emergence of its values. Values work is going on at any moment in the organization and takes

the form of a value inquiry, linking the facts of the situation to the ideals of institutional social engagement and the common good. To theorize about this work, I revisit three key processes involved in the emergence and performance of the process of value inquiry, considering these to be: questioning the meaning of the dominant value frames, reframing and reinterpreting the value frames, and the realigning of values, as presented in article three.

The process of value inquiry

This study find value inquiry to be a distinct and open-ended process by which organization members and stakeholders respond to events (whether external demands or as part of everyday practice) in situations where the organization is challenged by external demands. The *dominant value frame* that challenges the organization may be new regulations from the regional health care authorities or ethical dilemmas in everyday interactions. The types of concern that trigger the process of value inquiry vary across issues, but all stem from variations on the question: "What is our contribution now in relation to our faith-based heritage and our aspirations for the future?" Questioning opens the possibility of reconsidering what constitutes the belief of the organization and finding a meaningful way to reframe value-creating activities and their contributions. The pattern this study see is a move from macro to micro as accumulated institutional concerns become pressing issues addressed in everyday activities that must find a way to meet patients and personnel in a respectful and compassionate way. This questioning presides against challenging questions such as, "How can we get more patients into the system?"

In questioning the frames, both in strategy formation and care practice, the actors were found to assess and alter their value orientations and the institutions at stake, resulting in their *reframing and reinterpreting* the situation. Employees used the available frames to reframe or to change the conceptual setting or viewpoint in relation to how the situation was experienced and to place the situation within another frame that fitted the "facts" of the situation equally well or better (Snow & Benford, 1988; Watzlawick, Weakland, & Fish, 1974). The process led to a *re-aligning* of values that came close to Dewey's moral imagination (Alexander, 1993, p. 384), thereby producing new values-related actions while also maintaining old practices in tense situations. From the perspective of understanding actions as actualizing the past and the possible future, the temporality becomes apparent, and the process accentuates integrative values. As such, the process of the value inquiry elaborates a view on how the temporality of values work becomes a dominant mechanism of value realignment in maintaining institutional agency.

This study find the processes of value inquiry extending the emerging research on values work by highlighting the institutional work of organization members and stakeholders in moving beyond a linear view of institutional complexity to both maintain and change values and organizational agency in the face of plural demands. Unlike Gehman et al. (2013), I do not reserve the term value practices for demarcated and recurrent bundles of actions that meet specific time-bound concerns, such as the performance of an honor code. Instead, I find values work to include any set of value-laden acts in everyday work that are value-driven, and values work to be a particular set of actions that enhances ongoing knowledge and reflection-creating processes to produce value-related actions in specific situations.

In this process, I am following Selznick's (2008) description of values as *latent* qualities of experience, arising from everyday activity and addressing ideals that may or may not be realized in action. The social order that follows from infusing values is emergent and driven by the creative discernment of people empowered to act in accord with what the situation demands and affords, rather than acting out of obedience and rule following (Selznick, 2008, pp. 77–80). This

process leads toward a deliberation of the constituting of ethical standards, contributing to a richer account of moral experience, inquiry, and judgment (Fesmire, 2003).

This study finds this as a critical process that shapes the organizational members' interpretation of what is going on and their inquiring practice in a pressured situation. This work has the form of organizational identify work (Albert & Whetten, 1985), and of questioning the different value frames involved in a situation of social upheaval to establish a sense of self. As such, we can assume that this process is to be found in many organizations with a strong valuesbase, including family firms and faith-based organizations. In this study, I have largely emphasized the description of strong process work, and will now elaborate on how the process of value inquiry is broadened through the shaping of a logic of compassion and through telling sacred stories.

The process of value inquiry and the logic of compassion

The process of value inquiry is part of the emerging institutional logic of compassion (article one). The process of value inquiry has, over time, been evident in concerns for balancing changing circumstances with compassionate organizational aims and for establishing a basis for the values rationality of enacting compassion. Throughout its history, there has been in the case organization a concern for self-maintenance (Selznick, 1957/1983). The archival sources document questions such as, "Is the field of nursing becoming too academic?", "Is the hospital losing its character?" or, "What does it mean to be faith-based?" These concerns have surfaced when the case organization has been challenged by competing institutional logics, such as the logic of professional care (1912), the logic of the bureaucratic state (from 1945), and a business-like healthcare logic (from 1990) following the introduction of New Public Management. All of

these logics challenged the compassionate work of the organizational actors, including the early deaconesses and the later managers.

Over time, I find that the logic of compassion was being developed in the case organization as a value rationality (Friedland, 2013b), composed of "value spheres" such as religion and the need to contribute to the public agency. The logic of compassion is particularly related to the term "Christian compassion" as being central to the institutional beliefs and practices of the faith-based organization and reflecting the diaconal engagement of the Christian organization. The institutional logic is motivated by spirituality and implies altruism, particularly toward those who are vulnerable or in need, and is rooted in a fundamental human drive: the need to care.

Based in the religious order, the logic of compassion is manifested through processes of institutional believing, material practicing, and moral reasoning. The process of institutional believing involves a state of experience and an attitude or disposition toward the organizational doctrine of social engagement, resonating the process of value inquiry. The process of material practicing is carried by a strong expectation of engaging in social relations that involve reaching out to people in need. Moral reasoning is carried by ethical reflection and inquiries of what is morally good, resonating the process of moral imagination. Thus, within the logic of compassion, the dominant process of personal faith has, over time, been modified and reintegrated by processes of value inquiry, providing the organization with a broader and renewed connection with social and religious meaning-making.

The process of value inquiry and figuring the sacred

In the case organization, I find a mimetic practice of telling *sacred stories* (article two), which became a major vehicle for institutionalizing compassion. By naming the stories and

practices as "sacred," I build on prior work that has conceived the sacred as something within the realm of human ideals and values that people "set apart" and grant special significance to as "inviolable" or "untouchable" (Anttonen, 2000, p. 42; Harrison et al., 2009, p. 227). The sacred might have both theistic and non-theistic references (Harrison et al., 2009), or it may be referring to spiritualties (Ammerman, 2013b).

In the case organization, I discovered two sets of tales that were lived and told with surprising intensity and consistency: the parable of the Good Samaritan and the legacy of the founder of the organization. I found the two sets of tales provided interesting contrasts and similarities. From the perspective of Christianity, both focused on the importance of caring for the marginalized. While the parable of the Good Samaritan has a single source and small variety in its form, the stories of Maria Haven make up a conglomerate of snippets from biographies, historical records, and local adaptations.

Looking through the whole data set, I singled out 92 excerpts of stories that directly or indirectly referred to one or both of these sets of stories. To understand the dynamics of telling and living sacred stories, I used Ricoeur's concept of triple mimesis (Ricoeur, 1984) and placed all the excerpts into two analytical categories: figuring the sacred-as-story (*prefiguring* and *refiguring* in the movement from stories to action) and figuring the sacred-as-practice (resulting in a *configuring* of events from action into stories). I found the figuring of the sacred-in-story as persistent inquiries, with emphasis on high-quality care for the marginalized and the whole person, and the figuring of the sacred-in-practice as an extension of care beyond that economically viable to patients who were falling between institutional "stools" and then extending beyond medical situations to care for the social conditions and personal well-being of patients. This is further explained and illustrated in the second article.

The figuring model broadened the process of value inquiry to include a shuttling between telling and doing, which resided partly in the narrative unconscious and partly in pre-reflective corporeal action. The process of telling sacred stories figured in practice stretches beyond the situation, the subject, and the organization (Bednarek-Gilland, 2015) to sources of transcendence (Ricoeur, 1995). However, the sacred is never entirely set apart from the secular. It manifests in everyday work as questions and creative acts of care rather than sanctioned beliefs. As such, the sacred becomes a major driver of institutional maintenance and ethical agency.

In sum, this study find the process of value inquiry extending the stream of values work from time-bound processes of dealing with emerging pockets of concern (Gehman et al., 2013) to ongoing micro-processes (Powell & Colyvas, 2008), which involve questions about how contexts demand and afford moral actions. In this sense, value inquiry cannot be limited to something one does before decision-making or care provision. Rather, it forms the very basis of service provision. The process of value inquiry responds to new organizational experiences, shifting societal concerns in facing institutional plural demands through reflection on the organization's institutional logic of compassion, questioning the dominant value frame, telling sacred stories, and figuring the stories in practice. Thus, the process empowers acts in accord with what the situation demands and affords, rather than resulting from obedience and rule following. In this way, the process of value inquiry is broadening the temporality and intertextuality of values work and suggests conditions under which value inquiry as institutional work becomes a dominant mechanism of building agency to sustain values within an organization.

Values work as producing institutions

The process of value inquiry is a response to a request from scholars of the institutional work tradition to investigate the relationship between actions and creation and between the maintenance and transformation of institutions (Lawrence & Suddaby, 2006). It has been suggested that institutionalizing processes affect institutions at a micro-level (Lawrence et al., 2009; Tolbert & Zucker, 1996). These institutionalizing processes infuse the organization with values beyond the immediate technical requirements and work in the institution as a natural product of social needs and pressures (Selznick, 1957/1983, pp. 5, 17). My study find newinstitutionalism's mechanism of isomorphism occurring not only at a macro-level, but from the macro- to the micro-level, and also inside the case organization as a bottom-up, institutionalizing process that stabilizes the organization and establishes a homogeneous attitude toward external pressure. The Deaconess experienced coercive pressure (DiMaggio & Powell, 1983) from the health care authorities to adapt to laws and regulations. However, as a form of counter-work to the pressure from the outside, we can identify *mimetic* and *normative* activities that worked internally to maintain the organization's institutional agency. A mimetic process that figures a mutual imitation of narratives and actions can be identified through the process of value inquiry and the telling of sacred stories. A normative dimension (DiMaggio & Powell, 1983) of values work is promoted by the channeling of moral agency through moral reasoning and will be elaborated on in the next sections.

The institutionalization process described here reveals the reproductive process of institutions that happens through their values work (Jepperson, 1991). Value inquiry is not something that takes place in parallel and separate from the other organizational processes of change and renewal; rather, as noted in studies of identity formation (Carlsen, 2006; Golant,

Sillince, Harvey, & Maclean, 2015; Schultz & Hernes, 2013), it is intertwined with the other processes of organizational problem solving and meaning-making, such as strategy, organizational development, and the construction of institutional history. It is the contradictions that drive the patterns of change and maintenance in the value inquiry process. Shifting and competing demands in the organization are experienced as an *indeterminate* situation, which is the point of departure for Dewey's (1938) inquiry.

This study demonstrates that value inquiry often starts with a sensibility toward the situation, a triggering of concerns or "pockets of concern" (Gehman et al., 2013) that can be rooted in either external or internal forces. The involvement of values brings a "universe of experience" to the situation (Dewey, 1938), and, as Bednarek-Gilland (2015) highlights, our values are tied to our orientations and experiences. Values, in this sense, become multilevel constructs through which broader institutional influences and regulatory agendas meet local provinces in both explicit and implicit meaning-making. Meaning can be externalized through concerns, objectified through underlying mechanisms (Scott, 2014, p. 147), and developed through habitualization (P. Berger & Luckmann, 1966). The processes institutionalizing meaning can be found in discourses (Phillips, Lawrence, & Hardy, 2004), in contextual, conflictual, and on-going processes (Zilber, 2008), or, as in this case, in attention to values.

The introduction of value reflections commits activity networks to influence actual values practices and to circulate values discourses to foster development and institutionalization (VanderPal & Ko, 2014). Two key ideas are highlighted by Selznick (1996) as being important in this institutionalizing work, namely, the building of character and competence. In our case, this is achieved through questioning existing value frames, re-framing, and re-interpreting normative behavior. The process of value inquiry makes humanistic ideals clearer and promotes

a form of statesmanship, thus making the transition from administrative management to leadership-enhancing institutional agency (Selznick, 1957/1983).

Actors negotiating their embedded agency in complex situations (Battilana & D'Aunno, 2009) can be viewed as actors who are rediscovering themselves as change agents (Creed, DeJordy, & Lok, 2010). However, this study shows that this process provides a deeper temporal organizational engagement with the past and also with the future through imaginative engagement, reflecting an approach that is both backward-looking and forward-looking (Emirbayer & Mische, 1998). The performative work of backward-looking in the case organization reflects a faith-based heritage and its responses to reforms and recent mergers. The organization also engaged in a forward-looking approach that explore future contributions and performative ways of discovering new values and realigning old ones.

In this way, this process elaborates on the temporality of values work and suggests conditions under which value inquiry becomes a dominant micro-process in building institutions and agency in organizational meaning-making. In this sense, value inquiry is not limited to something one does before decision-making or care provision. Instead, it forms the very basis of service provision by entering actors' thought-action repertoires as they respond to unique demands, improvise, and make judgments.

Values linking institutional logic and institutional work

Values establish a bridge between people's reflexive, purposive, and cognitive thoughts and the institutions at which those efforts are aimed (Hampel et al., 2017). Institutional logics are organized around actionable goods, or goods that exist and are valuable to the world (Friedland, 2017, p. 12). The identification of 'goods' includes both what good is and what is good. As such, institutional logics are described as composed of value spheres (Friedland, 2013b, pp. 18–19). The judgment of the "validity of these value spheres" is a "matter of faith," for which individuals seek and claim to be instruments. The "matter of faith" nurtures both the institutional logic and the material practice within the rationalities. In this sense, values refer to social facts, intentional social objects, and social practice.

Values form the basis of the energy that provides the institutional logic with motives for "how" and "why". Values drive the construction and reconstruction of the logic. Following Friedland (2017, p.13), we can say that values animate the "positional game to possess," providing "fuel" to understand the institutional life. As such, values reflect the coming to consciousness of patterns of conduct, and specifically, the persistent alignment of such conduct.

Institutions and institutional work can be understood through their observable logics and productive material practice. Both the institutional logic and the work of compassion of the case organization are based on a knowledge-creation process in which the Christian values of enacting compassion play a role. The institutional logic of compassion creates a cognitive frame for the actions, and the symbolic and reflexive institutional work of value inquiry and the figuring of sacred stories and practices create different ways for the value sphere to be institutionalized in practice. The logic of compassion establishes a growing recognition of valuation (Friedland, 2017). The valuation of compassion can be viewed as performative practice that both considers reality and provokes it. Thus, values both produce institutional logic and entail practice.

Values work producing moral reasoning

The process of value inquiry can enhance a broader self-reflective process in which ways to serve the common good are identified (Selznick, 2008). As such, it is close to the process of moral imagination, which facilitates possibilities grounded in moral reasoning (Werhane, 2002). Moral imagination is a process that promotes an understanding of moral conflicts that emerge, for instance around stigmatized groups, while also considering how workers may be helped to face these conflicts (Roca, 2010). Based on the experiences of personnel and on self-reflection, the value inquiry introduces possibilities that bring a sense of order into a situation, giving birth to imagination and reasoning thus replace the ethical codes, principles, and commitments that provided meaning through the social reality of taking care of the marginalized. Several mechanisms that produce moral reasoning are elaborated on below: (1) actors as moral agents, (2) narrative practice as establishing a sense of self, and (3) moral experience as enhancing a fellowship of moral well-being.

The actors as moral agents

Johnson (1993, p. 1) claims that human beings are fundamentally imaginative moral "animals." Focusing on the imaginative qualities of moral deliberation can provide a view of morality that is liberating, in contrast to the traditional picture of a morality that is rule-driven and follows predefined concepts and explanations. Moral imagination is cultivated and developed by taking part in moral traditions and in searching for ways to discover how to change structures so as to live better lives.

From its start, the case organization has embraced a form of moral reasoning, creating a tradition of organizational members who engage in moral and ethical reflection and decision-making. As such, the organizational members can be described as moral agents (MacIntyre, 1999, pp. 315–316), characterized as persons with the ability to evaluate individuals with respect to their virtue and the goodness of their lives. A moral agent does not understand him- or herself as a practical, rational individual but rather as one who justifies confidence in their critical judgment.

In recent years, moral reasoning has been enhanced among the organizational actors through the continuous construction of the logic of compassion, and by shaping this logic through institutional values work. Rather than establishing systems to enhance normative rules that introduce prescriptive, evaluative, and obligatory dimensions into social life (Scott, 2014), the organizational actors reflect on their practice through a self-reflecting process of value inquiry. This serves as a way of discovering how to serve the common good through placing the suffering of others above the individual's needs, self-sacrifice before self-enhancement, the patients' rights and worth before efficiency (MacIntyre, 2007). The narratives told promote a fundamental mode of moral understanding.

Narrative practice establishing a sense of self

The case organization has strong tales that are told and lived: the parable of the Good Samaritan and the legacy of the founder. According to Crites (1971, pp. 30–31), such sacred stories convey cultural and religious myths that remain, to some extent, in the narrative unconscious as "moving forms, at once musical and narrative, which inform people's sense of the story of which their own lives are a part." These sacred stores are derived not only from

telling stories of the founder Maria Haven and the parable of the Good Samaritan but also the story of the life and acts of Jesus Christ and of Christianity.

The stories told speak of organizational moral agency as an emergent and distributed phenomenon (Painter-Morland, 2011), something that results from the situated and ongoing experiment of doing values work in everyday practice. It is a form of agency that means working with, through, and *for* others (Cooren, 2018). The stories are performed by many and emphasize ethical leadership as a response in a particular situation rather than as a formalized role (Munro & Thanem, 2018). The continuous telling of sacred stories constructs a sense of self and establishes an "authority" in making judgments (Tirrell, 1990).

It is necessary to be aware that enhancing institutional values can be seen as a doubleedged sword (Cha & Edmondson, 2006). There is a risk of subsequent disenchantment when values backfire or values are used as a cushion against initiatives for change and maintenance. Sometimes heard in the case organization are critical statements like, "This is not what I would have expected from a faith-based organization."

Moral experience as enhancing a fellowship of moral well-being

The processes of value inquiry and telling sacred stories produce a fellowship of moral well-being (Selznick, 1992). Selznick, inspired by Dewey, is concerned to find ways of analyzing our moral experience and to understand how it is supported or corrupted by our social life (Selznick, 2015). In the process of pursuing a normative path and emphasizing the "primacy of the particular in moral experience," Selznick (1992, p. 310) is returning to the subjective, the mundane, and the everyday life experience of institutions. Nilsson (2015) elaborates on this

perspective by extolling experiential surfacing and collaborative inquiry as strengthening "the moral well-being" and as the primary mode of positive agency.

The micro-process of value inquiry encourages a commitment to be moral actors who enhance moral imagination and form a fellowship of moral well-being (Selznick, 1992, p. 32). Ideals become demanding, requiring attention to experiences of injustice and inequality that affect the whole person and impact aspects of social life (Selznick, 1992, p. 383). The process emphasizes the moral experience of inquiring into the situation and of telling identifiable stories. In doing so, the practice comes close to constructing a normative network (Currie et al., 2012) of organizational members who will maintain the heritage and promote collaborative inquiry.

However, there is the question of how well organizational members "fit in" to the organization and the institutionalized values. The moral well-being established is dependent upon people agreeing or being familiar with the values and on their experiencing a common call to action. In upholding the commitment to "being compassionate," a critical factor is recruitment. The chaplains and leaders have taken over as symbolic markers for the deaconesses. However, they experience as much time-pressure as any other health care worker and say, "There is no more time than there is. You have to learn to be diaconal in the first two minutes" (Tove [33]). Research into who is staying and who is leaving and the behavioral characteristics of the case organization's members is not included in this study, but further studies should investigate whether working in this kind of organization requires special characteristics, conditions, virtues, or moral engagement.

Concluding remarks

The aim of this research project has been to identify ways in which values are externalized and become part of the institutionalized social practice of organizational members in a faithbased organization. The main questions asked are how values work emerges and is performed in a faith-based organization, and how being compassionate comes to be institutionalized through values work in a faith-based organization. The findings described in the three articles have contributed to an increased understanding of the institutionalizing process of values work in organizations. The process of value inquiry is identified in three sub-studies, and is followed by a discussion on how values work produces institutions and enhances moral imagination. This final chapter offers brief concluding remarks regarding the main contributions, and finally, reflections on the study's limitations and possibilities for further research.

Theoretical contribution

This study broadens the theoretical and empirical research done on values work, institutional work, and institutional logics in organizations. I have theorized a process of value inquiry linking the facts of the situation to the ideals of institutional social engagement and the common good. Involved in the emergence and performance of the process of value inquiry are three key processes: questioning the meaning of the dominant value frames, reframing and reinterpreting the value frames, and the realigning of values. I find the process of value inquiry to extend the emerging research on values work by highlighting the institutional work of organizational members and stakeholders in such a way that we move beyond a linear view of institutional complexity and toward the maintenance and changing of values and organizational agency in the face of plural demands. The process of value inquiry has, over time, been evident

in concerns that involve balancing changing circumstances with compassionate organizational aims and in establishing a basis for the value rationalities of enacting compassion through the institutional logic of compassion. This study found a figuring model that explores the meaning of the process of value inquiry by shuttling between telling sacred stories and doing sacred practice. The values reside partly in the narrative unconscious and partly in pre-reflective corporeal action. The process of value inquiry extends institutional work by introducing questions about how contexts demand and afford moral action. In this sense, value inquiry is not limited to something one does before decision-making or care provision. Rather, it forms the very basis of service provision. The process of value inquiry promotes the moral imagination, introducing possibilities that give sensibility to the situation and birth to imaginations and the discernment of right and wrong behavior. As such, the processes of value inquiry is opening moral experience to inquiry and judgment, replacing ethical codes and principles.

Practical contribution

The institutional work of the case organization can be upheld as an example of Selznick's ideal of "infusing the organization with values" (Selznick, 1957/1983, p. 17). Throughout this study, I am building on an emergent scholarly trend that is revisiting the work of Selznick and highlighting organizational work as both administrative and institutional. Selznick emphasizes that both technical and institutional forces are at work in organizations, and much of the life of an organization consists of an interplay between these (Besharov & Khurana, 2015). This also occurs when a strong value-driven faith-based organization is a hybrid that must work on managing the internal interplay of competing logics (Pache & Santos, 2013).

This study identifies organizational work that relates to the protection and promotion of values while also meeting technical imperatives. Following Selznick (1957/1983, p. 94), this work can be viewed as defending entrusted values. The technical imperatives on the case organization to enhance efficiency and goal rationality live side by side with the institutional work that creates practices embodying the purposes of the organization. Actors preserve the normative underpinnings of the institution by mythologizing the history or the founder's standards. The normative foundation of the institution is protected by the continuous asking of questions such as: "Are we reaching those we are here for?" I find that Selznick's vision is not only enhanced by leaders but by organizational members of all levels. However, recruitment is an issue for future studies.

Methodological contribution

In this thesis, I followed a qualitative research design believing this could convey a richer and deeper understanding of the ambiguities and complexities of values work. In the methodology chapter, I describe how I applied a *triangulating* of methods in data collection. These included conducting interviews, collecting field data, and reading archival material. However, I will highlight two methodological approaches as of particular importance to the contributions of this study. The first was investigating values work through a longitudinal study, and the second was using a narrative approach.

In this study, I responded to a call for more research using a retrospective design in identifying institutional work (Zilber, 2013). The investigation of history is of particular importance in process studies because it provides insights into past events and the outcomes of processes over time (Kipping & Lamberg, 2017). It is able to show how institutions arise and

persist, or how they become taken-for-granted and change over time (Suddaby, Foster, & Mills, 2014). For this study, an in-depth knowledge of the first phase of the case organization's history made it possible to track the processes that institutionalized values work over a long period of time. I utilized historical data to identify distinct processes in the institutionalizing of values work. The methodological approach became rich and complex, but for further studies, I hope to find a more structured methodological approach for studying values in organizations over an extended time.

The second methodological approach of importance to this study was the utilization of a narrative approach. This approach can be used both to collect data and to examine different interpretations of the organizational process (Rantakari & Vaara, 2016). Narratives can be bearers of knowledge about human intentions and deeds (Czarniawska, 2004, p. 650), and they play a crucial role in conveying a landscape of action (Bruner, 1986). Narratives provide descriptions of sequences of events (Ricoeur, 1984), and as such, they play a key role in processes that research temporality. The narratives provide a structure in which the past, present and future connect. They can be a powerful tool in highlighting the ongoing performance of values work. Narratives unfold at the intersection between discourse and practice, and they can become a resource that furnishes the embedded agency of the organizational members.

Possible implications and further studies

This study has aimed to theorize and contribute to values work, to institutional work, and to institutional logics. This has been done by investigating how values work becomes institutionalized in a faith-based organization. In this final section, I will mention some implications and limitations of this study. I have investigated values work through extending a recent stream of performative values work to include how values shape practice. However, values are often taken for granted and hidden away in language, stories, and symbols. It is reasonable to ask how we can understand the nature and character of values when they are connected to tacit knowledge (Pattison, 2007) and when agreement on the nature of values is dispersed. Researching values as intentions is difficult. Actors are not always aware of their intentions and, from a social constructionist perspective, their intentions can change with time, audience, and interest (Zilber, 2013). I suggest that a way through this is to investigate values as being that which matters to us in specific situations, and then go beyond the specific situation to apply them not only to oneself but also to others (Bednarek-Gilland, 2015). To understand this concept, we can investigate values as experienced within the mundane everyday language and life of an organization. However, there is much more to study in considering the nature of values as a concept and the role they play in relation to our actions. We are only at the beginning of research into how values affect actions, intentions, experiences, and institutions.

The powerful dimension of value framing (Fairhurst, 2010) should be further investigated. Kraatz (2009) portrays the leader as both the "agent of institutionalism" and the defender and steward of the living social entity of an organization. As managerial action, work on values has implications for organizational legitimacy, governance, and change. In this study, actors from all organizational levels participate in the institutional work of value inquiry and sacred discourse. Further investigation is needed on the dominant markers of institutional and values work that frame activities.

Recent scholars have highlighted that we need more research on emotions in relation to institutional work (Lok, Creed, DeJordy, & Voronov, 2017). Battilana and D'Aunno (2009)

emphasize that a relational approach is important if actors' positions in relation to their institutional environment are to be understood. We know little of how emotions motivate institutional disruption and creation, and how the individual experience of passion and desire can establish more integrated human beings in an organizational system (Voronov & Vince, 2012). Some profound and interesting attempts have been made, theorizing on, for instance, the role of shame in the institutional process (Creed, Hudson, Okhuysen, & Smith-Crowe, 2014). Additionally, research on compassion has recently received increased attention (Lawrence & Maitlis, 2012; Rynes, Bartunek, Dutton, & Margolis, 2012). It is argued that organizational compassion exists when members collectively notice, feel, and respond to pain (Dutton, Worline, Frost, & Lilius, 2006). Compassion is regarded as both processual and relational and is often seen as a process of interrelationship between self and others in the midst of suffering (Dutton et al., 2006; Kanov et al., 2004; Worline & Dutton, 2017). We need more research on organizational compassion to identify how emotions and values influence institutional work.

Given the profound role that religion plays in contemporary society, there have been repeated calls to explore the intersection between religion and organizations in a more meaningful and determined way (Ammerman, 2013a; Tracey, 2012; Tracey et al., 2014). Studies find that religion plays a role in organizational decision-making (Pe'er, Gottschalg, & Shir, 2015). The values in faith-based organizations are identified as translating and expressing the presence of religion (Askeland et al., 2019). Further research is needed on how religion, as an institutional logic, influences organizational behavior, and how the relationship between logics and processes builds bridges between institutional logic, work, values, and faith. For instance, we can ask how do religious scripts (Barley & Tolbert, 1997) establish links between the institution of enacting compassion and everyday activities and values work.

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Article 1

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Wide awake housekeepers on duty: The institutional logic of compassion in a faith-based organization. *Nordic Journal of Religion and Society*, 1/ 2019.

Wide Awake Housekeepers on Duty: The Institutional Logic of

Compassion in a Faith-based Organization

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Abstract

This article examines the institutional logic of compassion as shaped and modified within a faithbased organization. The following research questions are addressed: How does the institutional logic of compassion emerge, and how is it shaped over time? The study involves a content analysis of archival sources, semi-structured interviews with managers and organizational members, and observations of a Norwegian faith-based healthcare organization. The composite nature of the institutional logic of compassion is revealed in the interplay between other logics, of professional care, the bureaucratic state and business-like health care. This article identifies the logic of compassion as constructed and conveyed by three complementary processes: *institutional believing, material practicing* and *moral reasoning*. Within this logic of compassion, the dominant process of personal faith has, over time, been modified and reintegrated, providing the organization with a broader and renewed connection with social and religious meaning making.

Keywords: institutional logic, compassion, faith-based organizations

Introduction

In the latter half of the 19th century, faith-based² hospitals were founded by deaconesses in Sweden (1851), Denmark (1866), Norway (1868) and Finland (1867). The deaconesses were motivated by mercy and a desire to preach salvation through good deeds (Martinsen 1984, Christiansson 2003). Inspired by a spiritual awakening, and experiencing the relief provided by the government as moralistic, paternalistic and of limited help to people without means (Stave 1997), they established hospitals and nursing education. The deaconesses placed compassion and love for one's neighbor at the center of their institutional work, seeing themselves as "wide awake housekeepers on duty" (Letter from Maria Haven to the sisters, December 13, 1906).

A hundred and fifty years later, most of the Scandinavian faith-based organizations are still operating as healthcare providers, educating nurses and providing hospitalization for the sick and the poor. However, the organizations now function in cooperation with the government and healthcare authorities, receiving support for the services they provide (Leis-Peters 2014). Consequently, a faith-based organization is challenged by several recent tendencies. First, the secularized ideology of the welfare state permeates both the inner and outer context of faithbased organizations (Aadland and Skjørshammer 2012). Considerable research has investigated the macro and meso sociological integration of faith-based institutions into the governmental

² Faith-based organizations are equal to diaconal organizations. They are rooted in the Evangelical Lutheran church and operate with the intention of extending compassionate care to people in need.

welfare system (Angell 1994, Stave 1997, Lorentzen 1990). After World War II, the position of faith-based organizations was strengthened through the introduction of the welfare state (Tønnessen 2005), and the organizations were included as welfare providers for practical reasons rather than for their values and specific motivations (Leis-Peters 2014). Second, faith-based organizations experience a complex religious situation (Furseth 2018) of organizational members from different religions and cultures, leading to a question of how to anchor their Christian faith-based heritage in everyday practice (Aadland and Skjørshammer 2012).

Management studies of faith-based organizations show a reduction in the direct application of Christian beliefs and personal faith in daily organizational practice (Aadland and Skjørshammer 2012). However, it is recognized that managerial practice plays a critical role in framing the activities within a faith-based tradition; for instance, through articulating values and mission informed by the faith base (Askeland 2015). Although many organizations use values as the vessel for translating their faith base (Askeland, Espedal, and Sirris 2019), little attention has been given to researching the micro-processes that shape and modify the religious ideal of offering compassionate care through diaconal engagement against the complexity of pressures and demands.

This article investigates the micro-processes that have driven "the institutional logic of compassion" in one faith-based organization, from its origins until recent times. In attempting to investigate the internal processes of Christian compassionate work, this article considers the academic trajectory of institutional logics. Studying logics within organizations can provide insight not only into the effect of shifts in the dominant logic, with implications for plural logics and organizational response to institutional complexity (Lounsbury and Boxenbaum 2013), but also into the driving forces that establish social order (Friedland and Alford 1991). In opposing

rational theory, which offers a reductionist view of what happens in institutions, the American sociologist of religion, Roger Friedland, turns to Max Weber to highlight that every institution is composed of a multiplicity of "value spheres," which allow actors to create an order of the social context (Friedland 2013a).

The term "Christian compassion" is often used to describe the institutional beliefs and practices of faith-based organizations, and reflects the diaconal engagement of Christian organizations (Repstad 2001). It is motivated by spirituality and implies altruism, particularly toward those who are perceived to be vulnerable or in need. It is more than an emotion; it is a desire to alleviate suffering (Worline and Dutton 2017). The Christian tradition teaches compassion as "a duty to divine law, a response to divine love and a sign of commitment" (Wuthnow 1991, 50). Incorporated into Christian compassion are deeds of mercy, charity and love for one's neighbor.³ Thus, the research questions are: *How does the institutional logic of compassion emerge, and how is it shaped over time*?

In investigating the processes that enhance the logic of compassion, this article relies on a longitudinal case study of one Norwegian faith-based hospital, founded in 1868, hereafter called The Deaconess. An in-depth content analysis of archival sources, going back 150 years, provides a unique opportunity to study in detail the processes that supported the logic of compassion. Ethnographic observations and interviews with leaders and organizational members provide insights into the current position. This faith-based institution was founded by Maria Haven (in alias) (1840–1919). In many ways, Maria was the nation's Florence Nightingale: a pioneer in

³ Compassion is a key word in the parable of the Good Samaritan; as mentioned in Luke 10:33. The case organization highlight in Strategy Plan (2015) they want their practice to be known as the Good Samaritan.

teaching nurses to reach out to people without means. She also maintained close contact with the deaconess leaders in Sweden, Denmark and Finland (Ebbell 1940).

The contribution of this article is to understand how an institutional logic of compassion is shaped and modified against the rivalry of other logics. The importance of this analysis is the identification of the processes of this logic as it gives meaning to the work of the faith-based organization. Within a religious order, the logic of compassion is manifest through its institutional beliefs, material practices and moral reasoning. Before proceeding to data and analysis, I will describe the composite nature of institutional logics, and the context of the faithbased organization in which a logic of compassion emerges.

Theorizing the Logic of Compassion

Over the past decade, literature on institutional logics has broadened the understanding of the institutional processes of organizations (Thornton and Ocasio 2008, Thornton, Ocasio, and Lounsbury 2012). Studies have emphasized the coexistence and mingling of logics (Purdy and Gray 2009, Reay and Hinings 2009), and the effect of shifts in the dominant logics (Lounsbury and Boxenbaum 2013). The literature has also started to unveil the composite nature of institutional logics, highlighting values and social practice (Friedland 2017). Friedland's insightful description of institutional logic assists in this investigation into the institutional logic of compassion.

In the 1990s, Friedland and Alford (1991) criticized institutional theories for focusing on instrumental behavior and rational actions without including society, pointing to the existing plurality of institutional orders at the societal level. Capitalism, democracy, bureaucracy, family and religion are all core orders that influence an institution, each shaping individual preferences and organizational interests as well as a repertoire of behaviors. Each institutional order has a

central logic that guides its organizing principles and provides social actors with vocabularies for motives and a sense of self. Other scholars have contributed to the understanding of institutional logics, defining them as "the socially constructed, historical patterns of material practices, assumptions, values, beliefs, and rules by which individuals produce and reproduce their material subsistence, organize time and space, and provide meaning to their social reality" (Thornton and Ocasio 2008, 101).

Drawing on the sociologist Max Weber (1946/2012), Friedland understands the inherent beliefs of institutional logic as composed of a multiplicity of "value spheres," or domains of a "god." Each value sphere has teleological consistency in exercising "power over man" (Friedland 2013a, 28). According to Friedland, Weber sees all value rationalities as religious: on the one hand, one seeks to possess the divine in the moment; on the other, one is an instrument of the divine, acknowledging God's creation and participating in the perfection. The gods of the value spheres can also be called institutional "substances" (Friedland 2013b, 18-19). These substances are standards of values, expressed through material practices. Judgment of the "validity of such values" is a "matter of faith," for which individuals seek and claim to be instruments. The institutional logic of compassion can thus be understood as a faith matter that binds humans for its own sake.

Within each order, there are sets of expectations for individual and organizational behavior (Friedland and Alford 1991). When expressed, these distinct practices reproduce the material substance of the logics, organizing them in time and space and giving them meaning. The material practice of the values sphere of compassion can be expressed through rites of care that reach out to suffering people, giving to the logic an instrumental and ritual content. Practices such as prayer or pious behavior can additionally manifest the order of the logic.

Institutional logics are given a normative dimension in being organized around actionable goods that are valuable to the world (Friedland 2017, 12). Integral to the production of institutional logics is valuation that reflects judgment on what to do. However, this moral reflection is described less in the literature than the beliefs and practices.

In relation to compassion and charitable practice, the moral imperative (Robbins 2006) can be understood as the commandment of reason from which duties and demands derive, similar to Kant's categorical imperative. However, there is a difference in the moral imperative's dependency on autonomous and conscious judgment. It operates not as a law but as a reasoning for reaching out to those unjustly treated and oppressed.

Introducing the case organization

From their beginnings in 1868, the deaconesses expressed that they were motivated by their religious calling. Their aim was to perform altruistic deeds of mercy to reduce the suffering of vulnerable people (Letters from Maria Haven to the sisters 1906–1919). However, over time, different logics were introduced, challenging their compassionate work. The history of faithbased organizations can be traced through different periods, following the introduction of these new logics. These periods partly coincide with the historical epochs of missionary organizations in Scandinavia, as reflected in previous research (Askeland 2016, Eckerdal 2008).

In 1912, the newly founded national Nurse Union introduced a logic for professional care that challenged the compassionate aim of The Deaconess. The Union highlighted that professional care should be established around science and quality. It worked for better conditions for nurses, including reduced working hours and formalized nursing education. These changes reduced the focus on altruism and salvation. From 1945, the logic of the bureaucratic state, with its emerging national welfare system, was introduced, decreasing the need for pioneering faith-based organizations to care for the marginalized (Leis 2004). The new public administration aimed to take responsibility for all people, with national insurance covering all operating expenses. Most faith-based healthcare organizations were integrated into the welfare system as healthcare providers.

From 1990, new Hospital Acts (1969) and reforms introduced a rationale of public healthcare governance directed by New Public Management and business-like healthcare logic. This established cost-effective treatments, lowest-cost providers, and user centricity programs (Reay and Hinings 2009). The new logic challenged The Deaconess as a faith-based healthcare provider by demanding efficiency with shorter patient stays, and transferring the responsibility for patients to the municipality.

As the context for this case, table 1 summarizes the logics that emerged in the environment of The Deaconess. It connects each logic to an institutional order and elaborates on their substance and practice.

(Table 1 – about here)

	Logic of compassion – The Deaconess	Logic of professionalism – introduced by the Nurse Union (NU)	Logic of bureaucratic state – introduced by the welfare system	Business-like healthcare logic, introduced by New Public Management
	From 1868	From 1912	From 1945	From 1990
Institutional order	Religion	Professional	Bureaucratic state	Market
The substance of the logic	Religious calling of deaconesses, making The Deaconess an instrument for caring for the marginalized and	Protects nursing and nurses' working conditions through professionalizing the field, introducing	Guarantee of health care service for all people. The government is responsible for all people in providing	New market approach ensures better quality and greater efficiency in public services.

Table 1. Logics emerging in the context of The Deaconess

	their souls. Compassion is a sign of commitment.	quality standards and science.	sufficient care and services.	
The practice of the logic	Rites of care reaching out to suffering people. Religious practice of prayer, devotion and singing for patients in the corridor.	General nursing and relationship with the patient are the dominant aspects, not salvation.	Establish regulatory reforms, laws and demands with accumulation of resources, rationalization and control.	Establish cost- effective treatment programs: generating and measuring value, increasing specialization, lowest-cost provider and user centricity.

Research Questions, Setting and Method

This article emerged as part of a larger research project of values work in organizations. Leaning on process orientation (Langley et al. 2013), this article aims to investigate the internal microprocesses driving the institutional logic of compassion and maintaining the mission of the organization in a plural setting where different logics compete. Process studies provide explanations in terms of the sequence of events leading to an outcome, and reveal an understanding of the complex activities and transactions that take place (Langley and Tsoukas 2010), informing the research questions: How does the institutional logic of compassion emerge, and how is it shaped over time?

For the purposes of this article, a triangulation of methods is employed based on archival sources of the case organization, semi-structured interviews with managers and organizational members, and participant observations. A single case study (Yin 2014) is chosen because of the opportunities it provides for in-depth analysis. The case organization, The Deaconess, provides a unique opportunity as it is rich in the phenomenon under investigation – namely, compassionate work and practice. The case will not be representative of all contexts, but it gives an idea of the development of the phenomenon.

Today, The Deaconess operates as a local hospital within the framework of the regional health authority of Norway, providing medical services for 192,000 city residents (2017) and treating 163,680 patients annually in its outpatient facility. The hospital has a psychiatric and a national surgical department, the latter receiving patients for scheduled operations. The financial foundation of the organization is comprised of grants and patient-paid fees through diagnosis-related group (DRG) reimbursement. With a gross budget of approximately 1.8 billion NOK (2017) (190 million Euro), it is one of the largest privately owned faith-based organizations in

Scandinavia. Over the last two decades, the hospital has re-established its vision, business ideas and goals, re-emphasizing the legacy of Maria Haven and the altruistic and compassionate work of the deaconesses and parish nurses.

In investigating the historical patterns of the institutional logic of compassion, I have conducted a content analysis of the data and archival sources (Franzosi 2004). The emphasis has not been on quantification, but rather on systematic identification of characteristics that underlie the indicators of content (Bryman 2016). The analytic process will be described in three steps.

The first step was to collect relevant data. Having written a biography of Maria Haven, I had insider knowledge of the first phase of the organization, although not an in-depth understanding of the logic of compassion. I therefore reread the primary sources, such as pamphlets and textbooks published by The Deaconess, the annual reports (1868–1870, 1969–1970, 1990–2015), strategy plans and minutes from the board (1969–1970, 1990–2015), a book of ethics (Hagemann 1930) and a biography (Ebbell 1940). Anniversary books about The Deaconess (at 30, 50, 100 and 140 years) and other sources describing the history and development of the faith-based institution were included. I also accessed personal letters from Haven to the sisters that had not previously been examined; of these 14 letters, five were from the period 1906–1917 and nine letters were undated. The letters were read, coded and subjected to a thematic analysis that highlighted the concerns of this article.

To gain an understanding of the current compassionate work of the organization, interviews were conducted with leaders and organizational members. The data collection was primarily done between August 2013 and October 2015. Sixty-five interviews were conducted, of which seven were with people with profound knowledge of the organization's history, including the last working deaconess (until 2012), three managers (employed for over 30 years),

a former President and two chaplains (both employed since 1991). All interviews were taped and transcribed verbatim. The interviews were first coded in NVivo to track crucial organizational events. In addition, 52 hours of direct observation were conducted (Diamond 2006). Patient treatment situations, interdisciplinary meetings, introduction seminars and leader meetings were observed, and a middle manager was shadowed to give insight into current institutional compassionate practices and beliefs.

Second, through rereading the archival sources and interpreting the literature it was possible to establish an organizational chronology of events over the 150 years. Episodes crucial to the case organization were added to the timeline, and tables were created for events, identifying their aims, actors, motivations and financial platforms. Through this analysis, it became possible to track changes in the development of the logic of compassion and to identify the introduction of different institutional orders.

Representative narratives (Rantakari and Vaara 2016) and discourses (Phillips and Malhotra 2008) were tracked to further investigate the structure of the compassionate belief and practice, and to obtain a holistic view of its occurrence in the organization (Alvesson and Karreman 2000). This search for narratives included a broad range of parables, stories, values and religious symbols that form part of the organization's religious practice (Ammerman 2016) and sense-making (Boje 2008).

Third, the historical timeline was bracketed into four periods to compare and identify different elements that carried the process of the institutional logic (Langley 1999). Three processes driving the institutional logic were identified, namely, institutional believing, material practicing and moral reasoning. The next section will elaborate on these processes.

Findings: Three Processes Constructing the Logic of Compassion

When considering the four phases through which the institutional logic of compassion moved, this study identified that the logic was constructed and driven by three processes: the process of continuously working on institutional believing, the process of the material practice of compassion and the recurring process of turning to values and ethical reflections to provide moral reasoning for the logic.

The process of *institutional believing* involves a state of expectation and an attitude or disposition toward the organizational doctrine of social engagement. In the beginning, the logic was carried by the faith of the deaconesses. Faith often represents a subjective, spiritual trust and devotion, while believing yields more of a rational endorsement to doctrines of faith (Aadland 2012). Over time, institutional believing becomes apparent when carried by new ground rules and doctrines in the organization. Forming part of the organizational community, members become instruments of institutional believing.

The process of *material practicing* is carried by a strong expectation of engaging in social relations that involve reaching out to people in need. In the beginning, the logic was represented by deaconesses working on practicing mercy and love for one's neighbor in taking care of the sick and the poor (Hagemann 1930, Jahnsen 1919); but later, it was denoted by institutional rituals, ward practices and the strategic decision making of leaders.

The process of *moral reasoning* is carried by ethical reflection on what is morally good. Throughout its history, there was a constant organizational turning toward values in the thoughts and practices of the organization's members. In the later phases, moral engagement was performed by organizational members as moral imaginations, as possibilities within which they act empathetically and generate new values (Alexander 1993).

Table 2 identifies the characteristics of the processes of the institutional logic of compassion through its different phases. The statements of reasoning for the processes are deliberately short. Parts of the rich underlying material, including stories, quotations and examples, will be elaborated in the text that follows.

(Table 2 – about here)

able 2. Processes carrying the institutional logic of compassion at The Deaconess

	From 1868	From 1912	From 1945	From 1990
Processes/logics	Logic of compassion established	Logic of professional care introduced	Logic of state bureaucracy introduced	Business-like health care logic introduced
Institutional believing	Religious calling of deaconesses	Re-introduction of female diaconate and Christian role- models	Re-establishing organizational foundation of faith and compassion in ground rules	Institutional level, advocating faith-based inquiries, practice and compassion
Material practicing	Taking care of sick and poor through practicing mercy and love for one's neighbor	Taking care of the marginalized, motivated by religious practice of prayer, devotion and singing for patients in the corridor	Taking care of all people being hospitalized. Religious practicing reduced to reading "The Silent Comforter."	Strategic decision making of leaders. Institutional rituals. Wards taking care of sick, drug addicts and destitute
Moral reasoning	Text book presents values of nursing	Leader's letters and books encourage moral engagement	Ground rules emphasize patients' worth	Core values introduced. Value letters established to be handed to new employees

Institutional believing

In the middle of the 19th century, the motive for charitable work was to be found in the religious calling of the deaconesses, highlighted by their leaders in letters to parishes (1867) that called for "Christian women with a vocation from God, who care for souls in doing poor relief and nursing" (Annual report 1870; (Jahnsen 1919). A state of expectation was created that sisters would become instruments of Christ in reaching out to those in poverty and social distress.

In 1912, the foundation of the charitable work was challenged by the founding of the national Nurse Union, which emphasized that professional care was to be built on science and quality. The founder of The Deaconess, Maria Haven, expressed concern that the professional logic was becoming "too academic, losing [the] heart of [the] marginalized" (Bloch-Hoell 1968, 59) and called the period a "tough time of castigation" (Letters, December 18, 1913). In the ground rules of 1915, organizational beliefs were emphasized. The male director and the minister of The Deaconess highlighted that they were building their operation on the Old Church's female diaconate. Biblical women were held up as role models (Jahnsen 1913).

From 1945 onward, the faith-based healthcare organization made incremental changes to adjust their operation according to the demands of the public agency and the new welfare system. The Deaconess repealed the old mother house rule and employed nurses who were not trained as deaconesses (Minutes from the board, Case 77, November 22, 1969). However, internally the adjustments were met with concerns that guiding principles were being diminished: "Does the expansion mean the hospital is losing its character?" (Minutes from the board, Case 34, May 8, 1969). Internal forces emphasized autonomy in wanting to preserve themselves against impacts from the municipality (Letter to the Negotiation Committee of Private Healthcare Institutions, undated). In 1988, the organizational tenet of faith and compassionate work was re-established in ground rules that emphasized the patients' worth. The hospital highlighted that they were an institution owned by The Deaconess House, administered by the rules of The Deaconess, although operating in cooperation with the municipality.

From 1990, the introduction of New Public Management and business-like healthcare logic (Reay and Hinings 2009), further diminished the markers of the faith-based organization. In addition, the number of deaconesses had decreased. The municipality threatened to shut down The Deaconess due to financial constraints (1991). However, the hospital merged with another faith-based sister hospital, enabling it to continue (1992) (Kaltenborn 2009). A psychiatric unit with 300 employees was merged into the organization (1995), most of whom were unfamiliar with the organization's principles. The responsibility for maintaining institutional beliefs was taken up by the leaders, who became advocates of the organization's faith-based principles. They established a new vision that encompassed both business ideas and goals that reinforced the role of the organization as a reflection of Jesus's life and the legacy of Maria Haven (Strategy Plan of 2015).

Institutional believing is evident in current leaders who recognize the need for a revitalized organizational value platform, and for the reestablishment of core values drawn from the history of The Deaconess, including compassion and quality. The leaders are instigating company-wide inquiries into existing and desired value platforms and asking questions such as: "What is it, then, that we stand for?" (Anders, president Jan 23, 2014). In response, the chairperson of the board said, "We have to ask what our competence is, how can we live our values and heritage in our time?" (Tor, March 12, 2014). However, employees admit that the heritage is difficult to

sustain, "There are so many things that are not visible or cannot be set up in statistics, which cannot be counted and measured" (Elin, ward leader, June 10, 2014).

Thus, this investigation illuminates the emerging processual and institutional belief of compassion as being produced and reproduced through faith, concerns, beliefs, and mission statements. In the early days, the believing was influenced by deaconesses' faith and devotion, later formalized into mission statements and beliefs of the organization advocated by the leaders, practicing faith-based inquiries.

Material practicing

From the beginning, the material practice of the institutional logic of compassion was constructed through the social interaction of deaconesses, who combined nursing and taking care of the marginalized with the contemplative life and religious practice. Part of Haven's daily pattern was to listen to the concerns of the homeless and poor who sat under the staircase at the entrance to Deaconess House (Ebbell 1940). Haven's deputy highlighted that the charitable work of the nurses included meeting patients' needs, cleaning, treating infections and taking care of the mentally sick and elderly (Nissen 1877). Fifty years later, a female leader endorsed nursing as Christian compassionate work and an expression of love for one's neighbor (Hageman 1930). This mirrored Haven's encouragement of the sisters to be "silent and listen. Then God will give...mercy to listen" (Letters, December 18, 1913).

The deaconesses continued their religious practice and social engagement in taking care of the marginalized until the 1970s and 80s. In 1977, a new Law of Working Environment (1977) made it illegal for organizations to recruit applicants with specific religious beliefs (paragraph 55a) (Friberg 1977). Sectoring of the city required the hospital to admit all local inhabitants from

three, and later four, sectors. The resulting rush in the wards forced deaconesses to reduce their religious practice to reading "The Silent Comforter," a daily calendar with Christian psalms and texts. During the fourth period, after threats of closure and mergers, chaplains have taken over and are becoming symbols of faith-based practices.

The current president stresses that the hospital's practice of taking care of the marginalized is embedded in its strategic decisions, in its acquisitions, and with whom they cooperate (Anders, Jan 23, 2014). Employees are invited to participate in institutional and Christian rituals, such as introductory seminars where the story of Maria Haven is told, and invitations to attend Christmas services. The professionals express concerns about the new business-like healthcare acts and regulations, which are "quality indicators not about quality, but tempo, tempo, tempo" (Joar, section leader, Sept 14, 2014), and "I often think we are sending patients away too soon" (Kaja, nurse, June 6, 2014). Despite these concerns, compassionate practice is evident in wards and patient-meetings. Professionals are "going the extra mile" for the sick, drug addicts and destitute, giving them a second chance. Nurse Olga says, when caring for a patient with terminal cancer, that she "sees it in the face of the patient what is important to do" (October 14, 2014). The reasons for the compassionate care are found in the Christian faith of some employees, but mostly, in the meaning of the work.

Moral reasoning

The third driving process of the institutional logic of compassion is found in moral reasoning, in judging which course of action is morally right. Moral issues are often taken for granted and can be implicit in religious organizations (Jackall 1988). However, at The Deaconess, reaching out to people who have been unjustly treated or are in helpless situations has been promoted through an

emphasis on institutional values, helping actors to become aware of patterns of behavior and direction in their practice.

The moral dimension of the work at The Deaconess was established through the nation's first nursing book, published by Haven's deputy (1877) and highlighting that work at The Deaconess should encompass values such as encouragement, silence, obedience, cleanliness, order and punctuality. Additionally, nurses were encouraged not to be "a quarter of or a half of a doctor, but whole nurses" (Nissen 1877). The deaconesses were further encouraged to reflect on their contribution to the common good, characterized as "deeds of love" (Stave 1997).

In the second phase, the establishment of the scientific Nurse Union made it necessary for Haven to define principles for guiding the deaconesses' work. In a Christmas letter, Haven encouraged the sisters to stay morally firm and to be "wide awake housekeepers on duty" (December 13, 1906), keeping an eye on each other and constantly working to do what Jesus would do. The pietistic tradition of being "housekeepers" emphasizes moral reasoning applied in everyday practice.

In 1930, a female leader, following Haven's demands for enhanced moral reflection, produced a book presenting a code of ethics (Hagemann 1930). This book invoked values as demanding "subjects" for nurses, and discipline, reliability, order, accuracy, punctuality, truthfulness, fidelity, confidentiality and hygiene were all recommended for moral reflection.

After the introduction of the welfare state, the hospital emphasized the worth of patients by highlighting that they are whole human beings with physical, psychological, social and spiritual needs (Ground Rules, Annual Report, 1988). In the fourth phase, The Deaconess worked to define the duties of the institution in reaching out to meet people's needs. A new strategic plan was approved that embraced core values, including compassion and quality.

A current leader emphasizes that these values provide an ethical "compass" when making decisions (Siv, clinic leader, August 25, 2014). Another leader expresses the institutional values of the organization in saying, "You should let your heart take the lead, let it beat as close to the surface as possible, and then let your knowledge follow up" (Marit, clinic leader, August 25, 2014). In 2002, a value letter was established, issued to new employees, stating that while the organization does not demand Christian faith of its employees, they must all be loyal to the institution's core values. This letter highlights that the work of the organization should reflect Jesus's life and example, and the parable of the Good Samaritan.

Discussion: The Formation of the Institutional Logic of Compassion

This article started by posing the questions, "How do institutional logics of compassion emerge, and how are they shaped over time?" The institutional logic of compassion is understood as being enhanced in a faith-based organization, as a value rationality of Christian social engagement. This involves enacting compassionate care to alleviate suffering, motivated by institutional believing, practiced toward vulnerable people and grounded in moral reasoning.

Over time, there has been concern for balancing changing circumstances with compassionate organizational aims. The institutional logic of compassion initially reflected the faith of deaconesses but was later formalized into mission statements and organizational beliefs. In the early years, the material practice of compassion was enacted through the care of the deaconesses, but as the work became busier and the number of deaconesses declined, the leaders took responsibility for establishing rituals that would maintain the material practice, while professional nurses and chaplains became responsible for acting toward the patients. In recent years, moral reasoning around the logic of compassion and the establishment of core values for the institution have replaced the ethical codes, principles and commitments that provided meaning through the social reality of taking care of the marginalized. Values are used to establish a course of action that fulfills the obligation to function in a faith-based context for the promotion of the moral good. Further, I will discuss the mechanisms that contribute to the process of institutionalization of the logic of compassion.

Grafting and bridging competing logics

The introduction of new institutional logics often creates internal struggles within organizations. In the case organization, the competing logics and values dilemmas were often met with "pockets of concern" (Gehman, Trevino, and Garud 2013) or a concern for self-maintenance (Selznick 1957). Such concerns can be identified in questions such as, "Is the field of nursing becoming too academic?", "Is the hospital losing its character?" or, "What does it mean to be faith-based?"

Scholars describe the different diffusion mechanisms involved in the institutionalization of new organizational forms as transformation, grafting, bridging and exit (Purdy and Gray 2009). In transforming goals and actions to fit the rationalities of external logics, organizations may deviate from their initial missions in order to secure required resources, or they might try to graft and integrate the regulations into their existing practices rather than replace them. A third approach is to build a bridge between the expectations of different logics.

In order to survive, The Deaconess could have changed and transformed the beliefs, practices, and moral implications of the logic of compassion to accomodate, for instance, demands from public agencies and business-like healthcare authorities, as mentioned by Stave

(1997), who highlights how diaconal institutions have become subordinate to governance and control. The Deaconess accepted the organizational principles of the governmental requirements, but in addition, it grafted and integrated its existing practice into the demands of the external logics, making small adjustments but not reducing its principle of compassion. Thus, the hospital became a hybrid organization (Askeland 2016), working internally on managing the interplay of competing logics (Pache and Santos 2013). Providing an example of an organization that has built bridges between different rationalities and indicating the connection between the logic of compassion and a business-like healthcare rationale is the president's argument for the organization's agency: "Margaret Thatcher once said, 'Nobody would have heard of the Good Samaritan if he, in addition, did not have money to pay for the injured man.' ... We have to administrate the hospital with margins so we can help the marginalized and broken ones" (Anders, president, March 4, 2014).

Agents of the processes

Throughout the hospital's history, the agents of the logic of compassion were the pioneer, Maria Haven, the board of the organization and the deaconesses. After the number of deaconesses declined, the leaders of the organization ensured their role as agents, as described by Askeland (2015). Because there are no deaconesses as markers of the compassionate work today, the leaders are currently the important actors, working on the further construction of the logic of compassion, as highlighted by the president: "Francis of Assisi [said] life is about preaching the gospel, and if necessary, with words. This sounds like us" (Anders, president, June 3, 2014). The leaders focus on everyday operational activities but frame the professional services around the

organization's faith base. They are constructing an institutional leadership in which management of purpose and "promotion of values" are central (Selznick 1957, 27-28).

Moral reasoning and values work

Most striking in the material is the normative process of enhancing the logic of compassion through values. The dominant process involving the personal beliefs of the deaconesses has been replaced by an emphasis on institutional moral research, which provides substantial meaning to the social and organizational order.

From the outset, the organization has been infused with values (Selznick 1957). Recent studies have conceptualized values work as an ongoing performance situated in everyday practice (Gehman, Trevino, and Garud 2013). In all phases, this study identifies an organizational inclination toward values work, constructing a habit of organizational members to engage in moral and ethical reflections, establishing symbolic capital through the organization's inclination to "whatever value" (Bourdieu 1984). In placing the suffering of others before the individual's needs, self-sacrifice before self-enhancement, patients' rights and worth before efficiency, organizational acts of human quality are developed (MacIntyre 2007). Recent forms of moral reasoning come close to Dewey's moral imagination, seeing "the actual in the light of the possible," reading the ethical in everyday situations, and realizing character and deeds in discovering possibilities and generating new values (Alexander 1993, 384-390).

The disposition of the organizational faith base becomes clearer through the ongoing values work. Core values are, in this case, drawn from the faith-based tradition to enhance the religious history of the organization. Values in faith-based organizations are identified as translating and expressing the presence of religion (Askeland, Espedal, and Sirris 2019). As other

studies have highlighted, this study also finds that religion plays a role in organizational decision making (Pe'er, Gottschalg, and Shir 2015). Core values are reflected in strategic plans and become prominent in patient meetings.

Friedland (2013b) describes institutional logic as a values-sphere, or a matter of faith that is received and established through a charisma of illumination, binding the humans for its own sake. As such, when the logic of compassion is enacted through institutional believing, material practicing and moral reasoning, the organizational members become instruments for being Christ-like, an institutional way of life where the sacred are produced, encountered and shared. Thus, the processes of the institutional logic of compassion combine to maintain the significance of religion as a social institution and to clarify its boundaries with the secular (Durkheim 2008).

Implications of the institutionalization of the logic of compassion

This empirical study suggests three important processes in the construction and driving of the logic of compassion. Infusing an organization with values establishes an important way of ordering the logic and giving the organization symbolic and religious capital. However, this study has conveyed a single case and the subject would benefit from an in-depth comparative analysis of the development of logics in other faith-based institutions, for instance in Sweden, Denmark and Finland. Further research is needed on how religion as a logic influences organizational behavior, and how the relationship between logics and processes builds bridges between institutional logic, work and faith.

Conclusion

The processes involved in organizational *believing*, enacted in *material practice* and reasoned in *moral imperative* together compose the institutional logic of compassion. Leaders and members

put forward this logic at all levels of an organization. By infusing the organization with values and building on the symbolic capital of religion, the organization establishes a pattern that enhances the institutional logic of compassion and the virtue of taking care of the sick and marginalized. This is achieved by emphasizing other people's needs before those of the individual, patients' needs before efficiency, and equal rights and treatment for all citizens. This study suggests that the process of moral reasoning lays the foundation for a profound reflection on the dilemmas, ethical codes and values of the emerging institutional logic of compassion, and provides the organization with a broader and renewed connection with social and religious meaning making in the wider society.

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Strategy plans, minutes and letters of the board (1969–1970, 1990–2015)

Verdibrev (Value Letter) (2002)

Article 2

Espedal, G., & Carlsen, A. (2019).

Don't pass them by: Figuring the sacred in organizational values work.

The article is accepted for revision after 2nd round of reviews by *Journal of Business Ethics*, May 2019. Due to the fact that the article is not published I here present a short presentation of the article

In the second article, I aimed at investigating how notions of the sacred drive work on values of compassion and quality in organizational settings of social upheaval, in terms of facilitating processes of institutional maintenance and change. I extend the research on institutional work and values work to how it may concern the sacred as a major driver of institutional maintenance and ethical agency and finds the sacred becoming a major vehicle of institutionalization of compassion.

In this paper, I explore how people give voice to and enact beliefs of what they somehow hold to be sacred and make these beliefs consequential in organizations. I use a strong process orientation and underline the duality of values work as performative and values as latent qualities of experience (Selznick 2008) addressing ideals that may or may not be realized in action. By "sacred" I lean on prior work that has conceived it as something within the realm of human ideals and values that people "set apart" and grant special significance as "inviolable" or "untouchable" (Harrison, Asforth & Corley, 2009, p. 227; Anttonen 2000, p. 42). The sacred might have both a theistic and non-theistic references (Harrison, Ashforth, and Corley 2009) or be referring to spiritualties (Ammerman 2013b).

The study explore the meaning of the sacred as a form of institutional work that stretches beyond the situation, the subject and the organization (Bednarek-Gilland 2015) to sources of values work and transcendence (Ricoeur 1995b). The overall approach draws heavily from Ricoeur's (1995b) concept of *figuring* the sacred through symbolic resources and significant behavior. The term figuring is particularly important. Ricoeur used figuring to attend to and theorize the ways in which people engage with the sacred, sometimes in ways outside of direct access or control, what Brueggemann (1996, 95) referred to as the "tricky, delicate, artistic

human operation of knowing and seeing and telling that which ultimately resists our knowledge, our vision, and our utterance." The study describe and compare how the sacred is figured (Ricoeur, 1995) in two sets of tales that were lived and told with surprising intensity and consistency in the case organization: the parable of the Good Samaritan and the legacy of Maria Haven, the founder of the organization.

The research is informed by a strong process orientation and a narrative approach. To get a grip of the dynamics of telling and living sacred stories we used Ricoeur's concept of triple mimesis (Ricoeur 1984) and placed all the excerpts found in the data (see the article for the methodological approach), into two sets of analytical categories: figuring the sacred-as-story (*prefiguring* and *refiguring* in the movement from stories to action) and figuring the sacred-as-practice (resulting in a *configuring* events from action into stories). Sacred-in-story was also evident through *refiguring*, here taken as the reinterpretation and translation processes of the two sets of stories to accommodate new changes in the environment and provide new direction for action adjusting to the situation. This is further explained and illustrated in the empirical section of the article.

This study find figuring of the sacred-in-story as persistent articulation and emphasis on high-quality care for the marginalized and the whole person. I find figuring of the sacred-inpractice as an extension of care beyond economically viable patients to those falling between institutional chairs and beyond medical situations to care for the social conditions and personal well-being of patients. The article extends understanding of institutional work and values work as shuttling between telling and doing and partly residing in narrative unconscious and prereflective corporeal action. Contrary to prior conceptions, I also find that the sacred is never set entirely apart from the secular, and is manifest in everyday work as questions and creative acts of

care rather than sanctioned beliefs. Tales of the sacred are performative and serve temporal functions of achieving continuity in institutional history, enabling organization members to handle demanding situations of prioritizing and providing compassionate care to patients. It is key to the findings that the figuring and refiguring of the sacred in values work is ongoing as organization members' deal with new demands in the every day and try to accommodate changes in the institutional context. People become ethical agents when feeling and responding to the sacred in the call of the other.

Article 3

Espedal, G., Carlsen, A., & Askeland, H. (2019).

How do we reach out to those we are here for? Value inquiry in sustaining institutions. A short presentation of the article will here be provided as the article is not yet published.

In this article, I are extending institutional work by developing a theory to explain how a process of values inquiry are linking facts of the situation to ideals of institutional social engagement (institutions) and the common good. I theorize value inquiry as an open-ended process of questioning, reframing and reinterpreting the meaning of dominant value frames. The process elaborates a view on how the temporality of value inquiry becomes a dominant mechanism of value realignment to maintain institutional agency.

This article extends the emerging research on values work by highlighting the institutional work of organization members and stakeholders to move beyond a linear view of institutional complexity to maintain and change values and organizational agency in the face of plural demands. Unlike Gehman et al. (2013) I do not reserve the term value practices to demarcated and recurrent bundles of action that meet specific time-bound concerns, such as a performance of an honor code. Instead, I include any set of value-laden acts in everyday work to be value-driven, and values work to be a particular set of actions to enhance ongoing knowledge and reflection-creating processes producing value-related actions in specific situations. We follow Dewey (1938), Nilsson (2014) and Selznick (1957, 2008) in exploring value inquiry as a form of embedded agency in which people at all levels of the organization are involved in linking the facts of the situation to the ideals of human good.

The study is leaning on interviews with three management levels of the organization, observation of participants at all levels and readings of archival sources. Three issues were chosen as especially information-rich to be subject for the study. Zooming in to the stories I identified underlying assumptions in each of the issues, identifying a pattern of three aggregated dimension. The result of the work was a theoretical process model of value inquiry describing

the processes of questioning, reframing and reinterpreting the dominant value frame, and realigning values – see the enclosed article for the description of the issues and the model.

Value inquiry is a distinct and open-ended process by which organization members and stakeholders respond to events (whether external demands or parts of everyday practice) in a situation where the hospital is challenged by external demands. The *dominate value frame* which is challenging the institution can be large scale cross-field institutions or ethical dilemmas in everyday interactions. The types of concerns that trigger the process of value inquiry vary across the issues, but all stem from the variations of the question: "What is our contribution now in relation to our faith-based heritage and our aspirations for the future?" Questioning opens the possibility to reconsider what constitutes the belief of the organization and a meaningful way to frame value-creating activities and their contributions. The pattern we see is a move from macro to micro as accumulated institutional concerns becoming pressing issues addressed in everyday activities to find a way to meet patient and personnel in a respectful, compassionate way. The questioning preside against challenging questions of, "How can we get more patients into the system?"

In questioning frames both in strategy formation and care practice, I found actors to assess and alter their value orientations and institutions at stake, resulting in *reframing and reinterpreting* the situation. Employees used available frames to reframe or change the conceptual setting or viewpoint in relation to how the situation was experienced and to place the situation in another frame that fits the "facts" of the situation equally well or better (Watzlawick, Weakland, and Fish 1974, Snow and Benford 1988). The processes of value inquiry, led to a process of *re-aligning* values close to Dewey's moral imagination (Alexander 1993, 384), producing new value-related actions as well as maintaining old practices in tense situations.

Through the perspectives of understanding actions as actualizing past and possible future, the temporality becomes apparent, and the processes accentuate integrative values.

The article elaborates on the temporality and intertextuality of institutional work and values work and suggests conditions under which value inquiry as institutional work becomes a dominant mechanism of building agency to sustain values in an organization. The process of value inquiry responds to new organizational experiences, shifting societal concerns in facing institutional plural demands. Based in self-reflection and the generation of value discoveries the process of values inquiry contribute to the further constitution of the institutional logic of compassion that guides the organizing principles and provide the organization with vocabularies of motives and sense of self.

This study found the process of value inquiry extends the notion of values work from time-bound processes of dealing with emerging pockets of concern (Gehman, Trevino, and Garud 2013) to an ongoing micro-process (Powell and Colyvas 2008) involving questions about how contexts demand and afford moral actions. In this sense, value inquiry cannot be limited to something one does before decision-making or care provision. Rather, it forms the very basis of service provision by entering actors' thought-action repertoires as they respond to unique demands, improvise and make judgments.

Appendices

- **Appendix 1:** Informed consent letter to managers (in Norwegian)
- **Appendix 2:** Interview guide of leaders
- **Appendix 3:** Interview guide patients
- **Appendix 4:** List of informants and the date for interviews
- **Appendix 5:** Time schedule of data collection

Appendix 1

Informed consent letter to managers (in Norwegian)

Forespørsel om deltakelse i forskningsprosjektet – leder/medarbeider [Request for participation in a research project – leaders/employees]

«Hva er det i veggene?» (What is there in the walls?)

En kvalitativ studie av verdier og ledelse i et diakonalt sykehus (A qualitative study of values and leadership in a faith-based hospital)

HENSIKTEN MED STUDIEN

Hensikten med dette forskningsprosjektet er å undersøke hvordan verdier og ledelse utøves i en diakonal helseinstitusjon og se på hvordan dette former profesjonell praksis. En viktig tilnærming vil være å se på hvordan dette oppleves av pasienter. Dine tanker og erfaringer vil hjelpe oss til å forstå hvordan lede og bygge en diakonal institusjon, og hvordan ansatte ved Lovisenberg diakonale sykehus arbeider for å virkeliggjøre sykehusets verdier, og hvordan dette bidrar til pasientbehandling og arbeidsmiljø.

GJENNOMFØRING AV UNDERSØKELSEN

Prosjektet består av tre delstudier. Del 1 vil være kvalitative intervju med ledere for å bli kjent med deres verdibevissthet, og hvordan verdier brukes for å lede sykehuset. Del 2 vil være kvalitative intervju med medarbeidere for å få en forståelse av deres verdibevissthet, hvordan de oppfatter verdi-arbeid i praksis, og hvordan dette former den profesjonelle praksisen.

Del 3 vil være kvalitativ intervju/observasjon av brukere/pasienter. I en helseorganisasjon vil det være interessant å se hvordan eller om brukere blir gjenstand for verdi-arbeid.

Intervjuene vil vare ca 1 time. Det vil bli gjort et elektronisk opptak. Intervjuene vil deretter bli skrevet ut. Det som skrives ut vil bli avidentifisert ved hjelp av en tallkode som viser til en navneliste som oppbevares adskilt fra intervjuutskriftene. Den elektroniske lydfilen vil bli lagret på et kryptert og sikkert sted og slettet når prosjektet er ferdigstilt 1.6.2019. Alt materiale vil bli anonymisert. Det vil ikke være mulig å identifisere informantene i resultatene av studien når det publiseres.

I noen sammenhenger, for eksempel vanskelige etiske situasjoner, kan det oppleves sensitivt å snakke om verdier. Det antas likevel at det ikke vil føre til ubehag eller vil være belastende å gi informasjon om dette.

Studien er en del av Gry Espedals doktorgradsprosjekt og drives under veiledning av professor Harald Askeland ved Institutt for diakoni og ledelse på Diakonhjemmet.

Frivillig deltakelse

Det er frivillig å delta i studien. Du kan når som helst og uten å oppgi noen grunn trekke ditt samtykke til å delta i studien.

Dersom du ønsker å delta, bes du undertegner den nedenforstående samtykkeerklæringen på neste side. Om du nå sier ja til å delta, kan du senere trekke tilbake ditt samtykke uten at det påvirker din øvrige behandling. Dersom du senere ønsker å trekke deg eller har spørsmål til studien, kan du kontakte prosjektleder Gry Espedal: gry.espedal@vid.no

Samtykke til deltakelse i studien

Jeg har mottatt skriftlig informasjon og samtykker til å delta i studien «Hva er det i veggene?» En kvalitativ studie av verdier og ledelse ved et diakonalt sykehus. Jeg er informert om hensikten med studien, hva mitt bidrag består i og at jeg er sikret anonymitet i publikasjoner og avhandling. Jeg er også innforstått med at deltagelsen i undersøkelsen er frivillig og at jeg kan trekke meg når som helst uten å oppgi grunn.

(Prosjektdeltaker, dato)



Intervjuguide – ledere [Interview-guide- leaders]

Navn, kjønn, alder, stilling [Name, sex, age, position]

Introduksjon: [Introduction]

Hvor lenge har du jobbet her? [For how long have you been working here?]

Hvorfor jobber du her? [Why do you work here?]

Hva betyr det for deg å arbeide ved en diakonal organisasjon – på godt og vondt? [What does it mean for you to work in a faith-based organization?]

Hoveddel [Main section]:

Kan du beskrive en typisk aktivitet du deltar i i en normal arbeidsdag? [Tell me about typical activities you engage in during a normal working day?]

Hva er de største ledelses-utfordringene i din jobb akkurat nå? [What challenges do you face in being a manager in this organization?]

Fortell om en episode/hendelse da du merket at du gjorde/utgjorde en forskjell! [Can you tell me a story of when you made a difference to someone at work?]

Hvordan ble du klar over at denne historien gjorde en forskjell? [How do you know this made a difference to someone?]

Verdier og praksis [Values and practice]

Hva er de viktigste diskusjonene dere har her på sykehuset? [At work, what are the most important and difficult discussions you encounter?]

Hvem eller hva påvirker disse diskusjonene? [What is influencing these discussions?]

Hva er de vanskelige valgene dere står overfor i institusjonen? [What are the most difficult choices to make in this organization?]

Hvilke diskusjoner ville du være for uten? [Which discussion would you prefer not to have?]

<u>Undersøkelse rundt sykehusets verdier og ledelse [Investigating leadership and the values of the hospital]</u>

Nevn de viktigste verdiene som preger aktivitetene på sykehuset! [Can you mention the most important values influencing activities at this hospital?]

Hvilke av disse verdiene er du særlig opptatt av å bringe videre? [Which of these values do you want to bring forward to others?]

Hvilke verdier er du ikke så opptatt av? [Which values are you not engaged in?]

Hvordan ser du at du at verdiene kommer til kort? [In which situations do you find the values to be insufficient?]

Brukeroppfatning [User's opinion]

Om du skulle se på institusjonen utenfra; hvordan vil du karakterisere sykehusets profil, verdier og praksis? [Looking at the hospital from the outside, how would you characterize the hospitals profile?]

Hvilken forventing tror du pasientene har til sykehuset? (Which expectations to you think the patients have to your hospital?]

Hvordan tar dere hensyn til denne forventingen? (How do you take into account these expectations?]



Intervjuguide – pasienter [Interview-guide – patients]

Navn, kjønn, alder [Name, sex, age, position]

Introduksjon (Introduction]

Hvor lenge har du vært pasient på Lovisenberg diakonale sykehus? [For how long time have you been a patient here?]

Har du vært pasient på andre sykehus – i tilfelle hvilke? [Have you been patient at another hospital – where?]

Pasientens erfaringer [The patients experience]

Hvordan opplever du det å være pasient her? [What is your experience of being a patient at this hospital?]

Hvordan opplever du behandlingen av deg som pasient? [How is the treatment?]

Fortell om en god opplevelse som pasient her på sykehuset. [Tell me of a good experience at this hospital]

Hva gjorde denne historien med deg? [What did this story to you?]

Fortell om en opplevelse som du ikke synes var så god. [Tell me about a story which you do not think was that good]

Hva gjorde det med deg? [What did this story do to you?]

Hvis du skulle bruke et par ord på å beskrive behandlingen, hva ville det være? Bruk gjerne en metafor. [If you should use a metaphor of the treatment, what would it be?]

Hvilke verdier ville du knytte til den behandlingen du har fått her ved sykehuset? [Which value would you use describing the treatment of you at this hospital]

Pasientens erfaringer med ansatte, verdier og praksis [Patients experience with professionals, values and practice]

Hvordan vil du beskrive de ansatte? [How would you decribe the professionals?]

Hva vil du si om ledelsen av dette sykehuset? [How do you experience the leadership pf this hospital?]

Hva skulle du ønske de gjorde annerledes? [What would you like them to do differently?]

Sammenligning med andre sykehus [Comparing to other hospitals]

Om du sammenligner med opplevelser som pasient andre steder, hva vil du si er forskjell? Hva er likt? [If you compare your experience at this hospital to other hospital – what is the difference?]

Hva tror du sykehuset kan lære av andre sykehus? [What can this hospital learn from others?]

Opplevelse av diakonalt sykehus [the experience of a faith-based hospital]

Hva av det du ser og opplever, vil du knytte til det å være et diakonal sykehus? [Looking across your experience, what would you say is connected to being a faith-based hospital?]

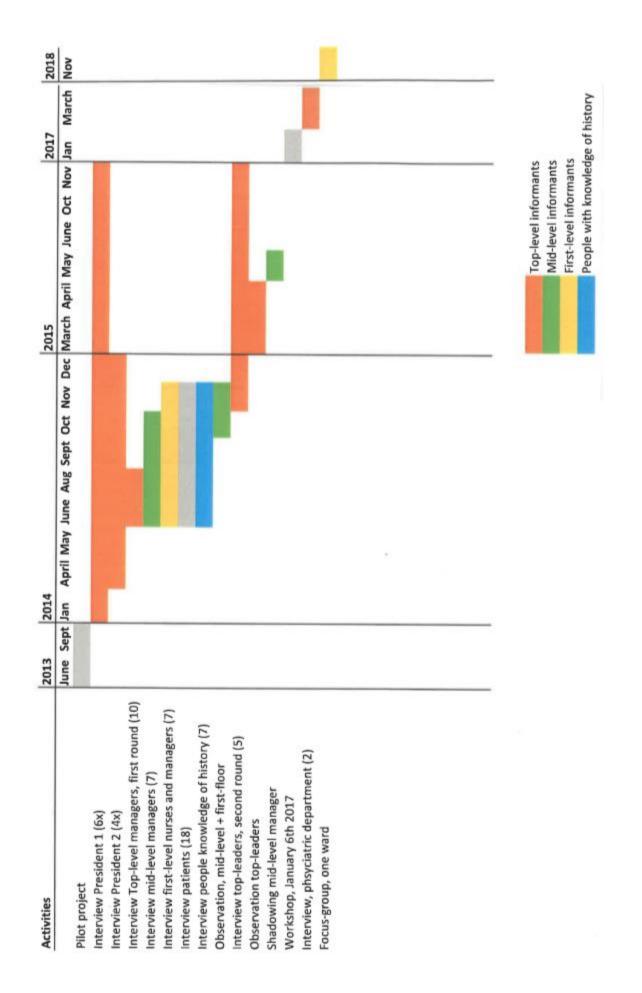
Appendix 4

List of informants and the date for interviews

text				Date interviewed
Informants	- Ton-level			
1	Tor	Chairman of the board 2001-2016	1	12.03.14
2	Anders	President 1, president for three periods: 2002–	6	03.06.13
	1 macro	2004, 2008–2014, 2014-2017	0	23.01.14
				04.03.14
				30.04.14
				18.12.14
				06.11.14
3	Bjarne	President 2, president May–November 2014	4	04.04.14
	J	, r		27.05.14
				20.08.14
				15.12.14
4	Tonje	Vice president	1	12.06.14
5	Heine	Clinic leader	1	22.08.14
6	Aron	Vice president	1	22.08.14
7	Hans	Leader technical support	1	22.08.14
8	Siv	Clinic leader	3	04.02.13
0	517		5	25.08.14
				01.05.15
9	Hanne	Clinic leader	1	25.08.14
10	Marit	Clinic leader	1	25.08.14
10	Bent	Clinic leader	1	25.08.14
12	Geir	Clinic leader	2	26.08.14
12	Gen		2	01.05.15
13	Cato	Leader administration	1	15.10.15
49	Tord	Clinic leader	1	27.03.17
50	Paul	Psychologist	1	27.03.17
Informants		1 Sychologist	1	27.00.17
14	Elin	Ward leader	1	10.06.14
15	Gudny	Ward leader	2	12.06.14
	Gualiy	Ward Icader	2	05.05.15
16	Hilde	Ward leader	1	12.09.14
17	Ine	Ward leader	1	12.09.14
18	Joar	Section leader	1	15.09.14
19	Kari	Section leader	1	17.09.14
20	Lise	Section leader	1	11.06.14
Informants			1	11.00.14
21	Mona	Nurse	1	12.06.14
22	Olga	Nurse	1	14.10.14
23	Pia	Nurse	1	14.10.14
23	Ruth	Nurse (note: Ruth, Sonja, and Nina interviewed	Focus group inter-	13.11.14
	mulli	together)	view	10,11,14
25	Sonja	Nurse	Focus group inter-	13.11.14
20	Jonja	THE SE	view	10,11,14
26	Nina	Nurse	Focus group inter-	13.11.14
	11110	THE SE	view	13,11,14
/1	Helene	Nurse	1	16.10.14
<u>41</u> 51	Karin			19.11.18
10	1\a1111	Ward secretary	Focus group inter- view	13,11,10

52	Malene	Nurse	Focus group inter- view	19.11.18				
46	Kaja	Nurse	Observation	12.09.13				
Informants - Knowledge of history								
27	Trond	Committee member, user interest committee	1	03.06.14				
28	Olav	Leader research	1	03.06.14				
29	Kristine	Deaconess, from 1968–2012	1	06.06.14				
30	Arne	Section leader, since 1981	1	13.11.14				
31	Gunnar	Former president, from 2007–2012	1	15.12.14				
32	Einar	Section leader chaplain, since 1991	1	07.01.15				
33	Tove	Former section leader chaplain, from 1991 -	1	21.04.15				
		2016						
Informants - patients								
35	Gerda	Patient	1	11.11.14				
36	Ann	Patient	1	11.11.14				
38	Eldri	Patient	1	11.13.14				
39	Vigdis	Patient	1	14.10.14				
40	Harry	Patient	1	16.10.14				
45	Emma	Patient	1	11.06.14				





VID