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Paradoxes in Practice

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Abstract

The purpose of this paper is to explore how paradoxes unfold in management practices and how moments of relational dialogic, self-reflexive learning can transform these paradoxes into new understandings of the complexities of organizing and management. We work with paradox, not as a label but a lens arising from equivocality and ambiguous organizational interpretations. We therefore apply perspective on organizing that acknowledge the super complex processes of organising and approach research from a becoming perspective. The research findings presented in this paper explores from within the movement from spectator to practitioner in an organizational change process. We focus on moments of dialogue in our research that reach beyond the hegemony of organizational life, inviting new ways of going on, change, differing voices and polyfoni. The focus on moments of dialogue represents a way for us to explore 'the flux of reality from within' with the managers. We therefore draw on Bakhtin's ideas regarding ongoing centripetal (monologic) and centrifugal (dialogic) forces of language and aim to demonstrate how working with language and the awareness of the embodied embedded practices at the same time both constitutes and reconstruct organizational paradoxes.

Keywords: Paradox, management learning, reflexivity, relational, dialogue, practice theory

Introduction

In current literature on paradox in management studies Roberts (1995) points to the power of constructive dialogue by questioning basic assumptions and sharing information. There is an increasing awareness of the complexity, paradox and ambiguity within management studies (Hardy; 1994; Koot et.al., 1996; Farson, 1996) and Van de Ven and Poole (1988), position that organizational change is essentially paradoxical. Other researchers found that in the face of paradox leaders should not attempt to solve the paradoxes but rather attempt to identify what is perceived as paradoxical and ambiguous

and why (Vince & Broussine, 1996). This might be done with the help of external facilitators and leaders need to make sense of paradox for themselves (Lüscher & Lewis, 2008) in order to work with them. They emphasize the need to keep paradoxes open, embracing the surfacing of tension rather than suppressing, ignoring or avoiding them. However some of the current literature on paradox management seems to recommend best-practices for managers to solve or work through paradoxes (Quinn, 1988; Lavine, 2014). This best-practice perspective seems to be the answer to managers and employees in organizations wishing to control the flux of organizational life. However this perspective seen from our perspective over-emphasizes rational problem-solving and goal achievement and seemingly encourages the ongoing co-construction of paradox.

In contrast this paper builds on research within the field of paradox research (Lüscher & Lewis, 2008; Lüscher et.al. 2006), suggesting an alternative route for managers to understand paradoxes and reflect on their own role in the ongoing co-construction of paradox within the organization. We find inspiration in Lewis et. al's (2014) approach to explore how the daily management practices and understandings of paradoxical vision can assist managers in bridging and working through paradoxes by engaging with others in dialogue and action. We also pay attention to the framework presented by Lüscher et.al. (2006), emphasizing paradox as socially constructed in organizational change processes.

We take an alternative approach to the best-practice outside-in perspective on paradox management and in this paper we focus on an inside-out exploration of how the complexities of day-to-day organizational life can be understood from a learning perspective that embraces the daily work practices and activities of managers. We therefore explore how paradoxes unfold in management practices and how moments of relational dialogic, self-reflexive learning can transform these paradoxes into new understandings. Through dialogue the managers can come to new understandings for how to untie the knot of the complexity within the process of organizing.

We approach the term paradox, not as a label but a lens (Lüscher & Lewis, 2008, Jazabakowski et.al., 2013). The lens arises from equivocality and ambiguous organizational interpretations (Putnam, 1986). By applying a perspective on organizing as ongoing super complex processes (Barnett, 2013; Newbury & Hoskins, 2016) and seen from a becoming perspective (Chia & Holt, 1996; Tzoukas & Chia 2002).

The research findings presented in this paper explores the complexities of organizational life (Lüscher & Lewis, 2008; Farjoun, 2010; Jazabakowski et.al. 2013) and therefore we apply practice theory and methodology to zoom in (Nicolini, 2009) on moments of dialogue in our research that reach beyond the hegemony of organizational life, by engaging new ways of going on, changing, differing the voices and paying attention to polyfoni (Shotter, 2004). The research presented in this paper is based upon a two year longitudinal study of a Danish Hospital undergoing major organizational and structural changes. As Denis et.al., (2001: 809) describe health care organizations are pluralistic domains, consisting of many divergent objectives, multiple actors and fluid and ambiguous power relations. In our research we found a variety of socially constructed paradoxes inhibiting the organizational practices and we set out to explore one of these paradoxes further in this paper.

We focus in our research on movements from spectator to becoming a practitioner and this represents a way for us to explore 'the flux of reality from within' (Tsoukas & Chia, 2002: 571; Kemmis, 2012) with the managers. We draw on Bakhtin's (1981, 1990, Gergen 1995) ideas on the ongoing centripetal (monologic) and centrifugal (dialogic) forces of language and work with how language and embodied embedded practices (Shotter, 1996) at the same time both constitutes and reconstruct organizational paradoxes. Based on these reflections we raise the research question; *"How do managers construct and reconstruct paradoxes in relational dialogue? – and can managers learn to transform the paradoxes into new understandings and new actions?"*

Applying a practice lens

In this paper we apply a practice lens because we see dialogue and practices as interwoven (Kemmis, 2012) and therefore find it important focus by zooming in on relational practices when leaders engage in dialogue to capture different discursive constructions and practices as a part of the manager's ongoing sensemaking of paradoxes in the here-and-now organizing activities. We explore how dialogue can support managers to embrace and understand paradox from within their own practice. By employing a dialogic research approach to our research this paper investigates how dialogue with outsiders (in this case a researcher) can encourage managers understanding of paradoxes from within and assist in changing their day-to-day practices. Inspired by Kemmis (2012) we call this a movement from spectator to practitioner.

Further we argue that applying a practice lens will enable us as researcher to get closer to practice and through dialogue open up new local practice perspectives on paradoxes by letting the practice talk on practice terms. This is a fruitful and living way for researchers to study the interrelationship between dialogue and practices. By focusing on conversations between a researcher, an outsider to the health care community, and a health care manager in charge of relational co-ordination (Gittell, 2009) we explore how these conversations enable the newly appointed manager to work with paradoxes from within and how these conversations in some cases lead to moments in dialogue which can be described as second order critical reflexive learning (Cunliffe, 2002).

By applying the method of living conversations (Czarniawska, 2007) and a practice lens (Nicolini, 2009) to the study we explore how paradoxes unfold in the semantic space as characteristic 'sayings' serving as hegemonic centrifugal arrangements, affecting the 'doings' as embedded embodied practices of organizing and how this affects the 'relatings' between the members of the organization, also described as teleoaffective structures (Kemmis, 2012; Kemmis et.al., 2009; Schatzki, 1996; 2001; 2002).

We follow how managers articulate the paradoxical challenges from a practice-based perspective (Schatzki, 2002, Kemmis, 2012, Nicolini, 2009, 2012), with the purpose of articulating how the actors through dialogue move from spectator to practitioner as we found the actors were struggling in a meshwork (Ingold, 2008, 2009) of enacting the organizational change. Schatzki points at practice as *"an open-ended, spatially-temporally dispersed nexus of doings and saying"* (Schatzki 2012: 2), and it is the doings and sayings that are the basic activities in organizations. The activities are organized by a

practical understanding of taken-for-granted rules and understandings. The organization member's activities and actions belong to the practice, and are carried out via rules constantly (re)formulated and (re)produced in timespace (Schatzki, 2012). *"Together the understandings, rules, and teleoaffective structure that link the doings and sayings of a practice form its organization"*(Schatzki, 2002: 77). The teleoaffective structures are *"not a set of properties of actors. It is instead, the property of a practice: a set of ends, projects, and affectivities that, as a collection, is (1) expressed in the openended set of doings and sayings that compose the practice and (2) unevenly incorporated into different participants' minds and actions"* (Schatzki 2002: 80).

This approach allows us to articulate practice by zooming in on the practice through dialogue with the participants – on practice terms and demonstrate how the actors wayfare (Ingold, 2008, 2009, 2015) by interpreting the way the participants articulate their practice. What becomes interesting is how and why do the participants articulate the practice the way they do – what kind of challenges is the participants facing in constituting the practice and why? We see the practices and the practical understanding as socially constructed by the organization members, it is these co-constructions that over time are embodied and embedded into the organizational practices and become taken-for-granted by organization members as legitimate ways of interacting. The socially constructed practical understandings provide, according to Schatzki and Wittgenstein, the human with knowledge about *how to go on following a route* and somehow humans just act, they do not choose. Humans act – they do something because they are in a line of history – the past. So when coping with the paradoxical challenges the actors often tend to draw on the past in order to make sense of the present – which becomes important for the future. But according to Schatzki the past only play a part as long as the past is put into action – the activities in practice. By applying a practice lens for this paper means that we do not aim at producing theoretical generalizations and universal explanations, but instead we are am preoccupied with the situated dynamics of practices as they are played out in the organizational field (Feldman and Orlikowski, 2011).

Along with the practice perspective we use dialogue and we therefore based this research on language as ontology which means *"acknowledging and embracing that language is indeterminate; it is creative and metaphorical, and it is an embodied practice"* (Cunliffe, 2002; Larsen & Madsen, 2016: 4). Following the practice can be done by talking 'with' and 'in' the practice. Basically that means having conversations – which we articulate as sensitive dialogues, about the practice with the participants and establishing a foundation based on trust. This foundation will in time give you the opportunity to 'go to work' with the participants. We will not call it shadowing (Czarniawska, 2007), but rather following the participant around in their everyday activities. The following aspect allows you to have conversation 'while walking' – conversations where the topics of the present activities can be discussed in an informal way. Getting pictures and being shown what the practice is all about – while having the conversation leaves the researcher with the opportunity to raise questions in order to gain knowledge about the practice. You do not only learn what the practice look like, but you also have the opportunity to learn the language of the practice. Having 'follow up' conversations or dialogues with the participant enriches the understanding for the practice especially when doing the thick descriptions of the practice. In line

with Nicolini (2009) attending meeting, conferences and so on where the practice is debated makes you have some kind of understanding for how the practice is discursively constructed.

We therefore approach this by applying language as ontology because it gives us the opportunity to grasp the sensitivity within the dialogue. This sensitivity allows the researcher to get close to the practice by zooming in on the moments of dialogue between the participants and the researchers, which tells the story of practice. Some may raise the question –‘Why is this knowledge useful’ and ‘for what purpose can we use this information’. We demonstrate this dialogue-based methodology to illustrate the fruitful information that lies within getting close to practice – and letting the practice talk on practice terms. By unfolding the findings in this paper we argue that it is possible to demonstrate that much richer and often ignored knowledge can be achieved by zooming in on how practice is socially constructed. We therefore use dialogue as methodology and language as ontology for this study in order to show a respect to practice by letting practice talk – on practice terms – from the perspective of within the practice, by focusing on “how” and “why”.

A brief presentation of the case

The region North in Denmark introduced an organizational modernization of the hospital sector, aimed at setting off relational coordination (Gittell, 2009) as the leading organizational thinking of hospital activities. The existing organizational centers were organized along functional lines and were replaced by clinics with the aim for combining the specialties. To some extent the specialties were connected in the sense that they would share patients who suffer from more than one disease (Gjerding & Schulze, 2015).

New managerial positions were created as part of the change process and eight clinics were formed. Each clinic consisted of three new managerial positions; head of clinic, deputy of human resources, and deputy of horizontal patient processing. The main focus for the new managerial positions was to coordinate how activities across clinics develop and how these activities could be constructed and reconstructed within the clinic and across clinics. The managerial positions were broadly described to bring out knowledge of hospital activities, but not essentially based on the medical and nursing professions. Three out of eight managerial positions as head of clinic were occupied by economists and one by a nurse, while doctors only occupied the remaining four positions. Furthermore, a leading part of the deputy positions were filled by nurses. Along with the organizational change the organizational position as head nurse was substituted by a new position as nurse area manager, meaning that an entire organizational layer among nurses disappeared.

The organizational structure; Future Managerial Organizing (in Danish the short term is FLO) is organized in area management teams and is supported by professional teams “of specialist physicians, nurses and other professionals who are working within or between the different medical specialties” of the clinics, and patient teams which coordinate the processing of patients across specialties and clinics (Axelsson et al., 2014: 5, Gjerding & Schulze, 2015).

Since the managerial positions were described broadly and the well-established boundaries between various hospital activities became unclear or even disappeared, the managers were set out as wayfare (Ingold, 2008, 2009, 2015), which meant they had to find their own way within the new organizational meshwork and how to relate and belong (Lüscher & Lewis, 2008). This journey meant a process of defining themselves and their new managerial positions as they walked along trying to figure out where to go and which stones to lie out. Within this process the managers had to deal with different paradoxical contradictions, such as how to belong to the organization, how to cope with the new structure and how to handle and make sense of the different messages from the board of directors and the world around them.

As the new organization - FLO took off the hospital was regularly facing the challenge of budget cuts. That meant the hospital had to face the challenge of coping with increasing costs of health care. In effect, what at the beginning had been planned to be a more or less steady way of organizing turned out to be as a set of organizational structures which varied from clinic to clinic. Therefore the traditional balance between professional groups has been disturbed and that lead to a *temporary breakdown* of the practical understanding (Sandberg & Tsoukas, 2011) among the managers and the doctors. The doctors felt that they have lost managerial power which meant that they, as well as the managers had to define and redefine themselves in the new position.

In this paper we have chosen to focus on by zooming in, on one of the newly appointed managers in charge of relational coordination. We want to demonstrate how she coped with some of the paradoxes she had to deal with on this journey of becoming a manager coping with the complexity of changing the organization.

Theoretical inspiration

According to Nicolini adopting real-time practice as the starting point, poses a clear difficulty. Nicolini refers to Heidegger (1947) and Wittgenstein (1953) that made it clear *“that practice constitutes the unspoken and scarcely notable background of everyday life”* (Nicolini 2009: 1392). For that reason practice always need to be articulated by a thick description so that the practice becomes visible. That also requires a shift in the theoretical lens. In order to do so, Nicolini present a provisional framework for the study, analyses and re-presentation of the practice. He suggests that first we need to zoom in on the practice in order to understand and re-present the practice, by selectively choosing conceptual tools and perspectives.

Zooming in

In order to perform a task that is zooming in on practices, Nicolini (2012: 219-221) suggests the following palette of considerations:

- What are people doing and saying? What are they trying to do when they speak? This means to approach practices as an act of 'practicing'; *"a real-time doing and saying of something in a specific place and time"* (Nicolini, 2012: 219).
- As *"practices only exist when enacted and re-enacted"* (Nicolini, 2012: 221), this means by focusing on practice is to pay attention to the social and material doings of something as the main focus of inquiry

Furthermore Nicolini points at that we need to address how *"translocal phenomena come into being and persist in time as effects of the mutual relationships between the local real-time accomplishments of practice, as well as how they make a difference in the local process of organizing"* (Nicolini, 2009: 1392). Nicolini suggest for the purpose of zooming in on the practice, that we need an appropriate methodological approach for the opportunity to see the connections between "here-and-now" of the situated practicing and the "elsewhere-and-then" of other practices (Nicolini, 2009). This second movement is described as 'zooming out'.

The focus is therefore on a doublet movement of zooming in and zooming out. By zooming in we follow or trail the connections between practices in a local context – within the meshwork, and that focus on locality enable us to understand both the accomplishments of practice and the ways which practices are associated in the broader textures – the landscape of our daily organizational life (Nicolini, 2009).

For the purpose of presenting this methodological approach Nicolini draws upon Wittgenstein and Heidegger's view of social affairs and their *"emphasis on the centrality of the social practices and practical understanding as the foundational texture of everyday life"* (Schatzki, 1996, 2002; Shotter, 1993; Chia & Holt, 1996; Nicolini 2009: 1393). These two traditions allow us to locate the roots of social co-existence in the practice. And by claiming that the world is a result of never-ending social construction – which means that social structures, variations, power and meaning are constructed it entails providing a convincing explanation of the significance in practice. This is done according to Nicolini by *"specifying the methods and devices"* (Nicolini 2009: 1393).

All though Nicolini draws upon different traditions from Wittgenstein and Heidegger, he is of the opinion that some theories can be organized together because they contribute to some key common beliefs and they join in the belief that (Nicolini 2009: 1394):

- *"Practices constitute the horizon within which all discursive and material actions are made possible and acquire meaning; that practices are inherently contingent, materially mediated, and that practice cannot be understood without reference to a specific place, time, and concrete historical context (Engström 2000; Latour 2005; Schatzki 2002, 2005)"*.
- *"While practice depend on reflexive human carriers to be accomplished and perpetuated, human agential capability always results from taking part in one or more socio-material practices (Reckwitz 2002)"*.
- *"Practices are mutually connected and constitute a nexus, texture, field, or network (Giddens 1984; Schatzki 2002, 2005; Latour 2005; Czarniawska 2007). Social co-existence is in this sense rooted in the field of practice, both established by it and establishing it. At the same time,*

practices and their association perform different and unequal social and material positions, so that to study practice is also the study of power in the making (Ortner 1984)".

(Nicolini 2009: 1394)

Zooming out

By zooming out Nicolini points at following the trails of connections between the practices and observing the way the connections are connected. It is all about focusing on how the connections come to form the nexuses and what the effects are from this connectedness. According to Nicolini what becomes interesting is how the practices manifest themselves in the 'local' practicing through flow and motilities (Nicolini, 2012), Kemmis et.al., (2009) and Kemmis & Grootenboer (2008), describes these connections as practice architectures which means that practices are clustered together in relationships and embedded within the practice architectures. We can achieve knowledge by paying attention to following notions from Nicolini (2012):

- *"What are the connections between the 'here and now' of the practicing and the 'then and there' of other practices? Which other practices affect, enable, constrain, conflict, and interfere, etc., with the practice under consideration? How are configurations, assemblages, bundles, and confederations of practices kept together?"* (Nicolini, 2012: 230)
- *"How does the practice under consideration contribute to the 'wider picture'? In which ways does the practice reproduce existing social arrangements or generate tension and conflict? How do different arrangements of practice establish the social world of interactions, scenes of actions, organizations, and institutions in which we live? What world do they conjure for the practitioners?"* (Nicolini, 2012: 230)
- *"How did we get to where we are? What are the interests, projects, hopes, and manoeuvres, ect., that led us to the current state of affairs? How could the world be otherwise?"* (Nicolini, 2012: 230)

We find these questions important to consider when studying paradox from within and this research method of praxeologising organizational and management issues can according to Nicolini et.al. (2016) and Eikeland et.al.,(2011) be addressed in four different ways; *"the situational approach, the genealogical approach, the configurational approach and the dialectical approach"* (Nicolini et. al., 2016). We follow the dialectical approach because this way of addressing and looking at practices gives us the opportunity to discover valuable and fruitful knowledge on organizational paradox. Nicolini & Monteiro writes; *"This perspective is in fact predicated on analyzing practices, surfacing tensions and contradictions, and offering their findings to the practitioners themselves – based on the assumption that reflecting on representations of practices often trigger generative and expansive (learning) processes"* (Nicolini et.al., 2016: 17). It is these generative and expansive learning processes we aim at exploring in this paper by studying how the interrelationship between teleo-affective structures (human projects) and the practice architectures (practice traditions) of the organization are constructed by the FLO managers.

In order to follow the zooming-in and zooming-out of the FLO managers in the living conversations with FLO managers in our data material we apply the following framework developed by Steven Kemmis (2012: 902) as an analytic framework for our analysis.

Zooming-in	Individual and collective practice/praxis constitutes, and is constituted in, action via			Zooming-out
The individual		Dimension/medium	Practice architectures constitute, and are constituted in, action via	The world we share
	Characteristic 'sayings' (and <i>thinking</i>)	The <i>cultural-discursive dimension (semantic space)</i> realised in the medium of <i>language</i>	Characteristic cultural-discursive arrangements	
	Characteristic 'doings' (and 'set-ups' of objects)	The <i>material-economic dimension (physical space)</i> realised in the medium of <i>activity and work</i>	Characteristic material-economic arrangements	
	Characteristic 'relatings'	The <i>social-political dimension (social space)</i> realised in the medium of <i>power</i>	Characteristic social-political arrangements	
	which are bundled together in characteristic ways in <i>teleoaffective structures (human projects)</i>		which are bundled together in characteristic ways in <i>practice traditions</i>	

(Adapted from Kemmis, 2012: 902)

In this rework of the original model we focus upon exploring from the perspective of the managers we have interviewed how paradoxes emanate but also can be worked with from within by dialogic

exploration of the individual and collective practice/praxis which constitutes and is constituted in action in their local interacts.

- 1) We start the analysis by identifying how the managers construct paradoxes in their day-to-day practices;
 - Characteristic sayings (and thinkings),
 - Characteristic doings (and set-ups' of objects)
 - Characteristic 'relatings'
- 2) Then we focus upon how the manager interpret and relate to the practice traditions in the organizing process;
 - Characteristic cultural-discursive arrangements
 - Characteristic material-economic arrangements
 - Characteristic social-political arrangements (power)
- 3) Then we identify the complexity and in some cases paradoxical nature of the managers day-to-day practices with the constructed practice traditions of the ongoing organizing processes at the hospital
- 4) The last step in our analysis is to find out how these paradox constructions change from the perspective of the individual leader over time in our longitudinal study. How does the interpretations of the individual leaders perspective found in step 1 change over time and how does the interactions with and interpretations of the individual manager of the practice traditions found in step 2 change over time and last we analyze how the two interact and change as a relational learning process.

Analysis

In the following example we focus in on relational coordination and the new structure of FLO implemented at in the regions hospitals. The manager interviewed is placed in a newly created managerial position in charge of implementing relational coordination across clinics which encompass several medical specialties. The purpose of the new managerial position and FLO is to insure a sustainable patient flow for the increasing number of patients suffering from multi-diagnosis health problems.

Zooming-in	Dimension/medium			Zooming-out
The individual	Individual and collective practice/praxis constitutes, and is constituted in, action via		Practice architectures constitute, and are constituted in, action via	The world we share
	Characteristic 'sayings' (and <i>thinking</i>) "I think that one of the most dangerous and hardest stones blocking the way for FLO is the issue of economy. We had no time to get to know each other in the new triad-management and find our feat."	The <i>cultural-discursive dimension (semantic space)</i> realised in the medium of <i>language</i>	Characteristic <i>cultural-discursive</i> arrangements "Nearly all clinics ran with at deficit in 2012 and this unbalance resulted in a focus in 2013 entirely on economics."	
	Characteristic 'doings' (and 'set-ups' of objects) "This focus on economics, economics, economics has resulted in silo thinking, 'how can we save money in our clinic' and if you need this treatment from us you have to pay for it"	The <i>material-economic dimension (physical space)</i> realised in the medium of <i>activity and work</i>	Characteristic <i>material-economic</i> arrangements "In April the hospital management demanded that we made an economic action plan to reach the target."	
	Characteristic 'relatings' "We need to get to know each other, this will take time, and that we want to get involved, want to work together. It also means confronting this ridiculous silo thinking, and making ones experiences, competences and patients available to others. Sometimes it's hard to do this because I need to take care of my own budget and I have had some beatings because I am so naïve that I want to share things." "I identify with the organization and the core service and things have to work across the clinics. For me it's all about patient care not sausage production!"	The <i>social-political dimension (social space)</i> realised in the medium of <i>power</i>	Characteristic <i>social-political</i> arrangements "It's not the optimal way to run the economics, not at all. We need to change the way we budget to follow the patient flow instead of chopping it up into pieces" "I think it is like a T shape, our silo and the added value of FLO will be the interconnections of the T's but there are no interconnections between the T's. We need the clinics but we also need to be cross functional and work across the clinics."	
	which are bundled together in characteristic ways in <i>teleoaffective structures (human projects)</i>		which are bundled together in characteristic ways in <i>practice traditions</i>	

When zooming-in on the individual leader in **step 1** of our analysis we find that at the discursive construction of FLO in this interview seems to be struggling with the discursive construction of the economic status of the clinics. The deficit in all clinics in 2012 seem to take center stage and form the actions that materialize and in this way counteracting the work of the newly appointed FLO leader in the interviews. As we can see in the data material, she needs to counteract on the economical focus by lending out resources to the other clinics when they aim at relational coordination and she is not always able to get the resources back into her own clinic accounts. In her own words she describes these actions as naïve but also necessary to enable the success of the interconnecting T structures between the clinics. At the point of relating, she describes the necessity to share resources across clinics and identifies with the patient care as the core service of the hospital, pointing out that it is important to

prioritize the patients rather than complying with the current structures which inhibits cross functional work between the clinics. Identifying the human project in the teleoaffective structure as the best possible patient care, underlining that it is not like sausage production to run a hospital.

In **step 2** we zoom-out on the practice architecture, seen from this newly appointed managers perspective, the discursive construction of economics and saving money is much more prevalent in the practice as an agent from which the material – economic actions resulted in working out individual economic action plans for each clinic. This leads Liza to reflect that in order for FLO to work the economic system of the hospital needs to be revised. Otherwise the interconnected structure between the individual T's in each clinic will never be possible. The structure and the power of the economic structure at the hospital chops this structure up into little pieces, because the money follows the treatment not the patient. One could say here that the new organizational structure of FLO is disabled by the economic system and structure, overpowering the ideas of relational coordination.

In **step 3** we focus upon the process in the interview with Liza. We follow her process during the interview zooming-in on the teleoaffective structures, sayings, doings and relatings of Liza's individual practice and how when she zooms-out on the practice traditions of the hospital, constructs of a paradox between FLO and the economic practices at the hospital. This zooming in and out process in the interview leads Liza to construct the idea that the economic system needs to be changed to support the new FLO structure and this idea is given front stage in the interview. Liza at this moment is working to build bridges between the silos by dismissing the influence of the economic system, and this is done with the understanding that it is a new way to act in the hospital. She is trying to establish and enable the construction of the new practices needed to connect the clinics with the aim of providing better patient care for the patients suffering of multi-diagnoses at the hospital. However seen in a learning perspective, the dialogue with the researcher leads her to reflect on how difficult this is to achieve if the hospital keeps the old practice architecture of the economic system at the same time. At the end of the conversation Liza connects her identity to prioritizing the best possible patient care and constructs this as her goal as FLO manager, however being self-reflexive in the dialogue she relates that her attempts to reconstruct the current hospital practices as maybe seen to others as rather naive but also highly important in order to create new practices of relational coordination at the hospital.

In **step 4** of our analysis we focus on how paradox constructions change over time in our longitudinal study. By looking at the moment in the conversation with Liza and connecting it to other conversational with her we see how her interpretations change over time and how she goes from being a spectator to the old practice architecture in the hospital to an active participant, trying to influence and work around this structure. The moment in the interview shows how this is a relational learning process for her. We interpret Liza's actions as resistance to the hegemony of the established discourses and practices at the hospital. By counteracting the current practice architecture represented by the economic system she challenges the embedded embodied practices of the organization as a necessity to reach the goal of relational coordination between the clinics. This action is accompanied with her discursive challenge of the hegemonic discursive construction of economics as the main issue in hospital management. By offering her discursive construction of what should be the main priority in hospital management as the best possible patient care to be obtained by relational coordination (FLO) she challenges current

practices, discourses and the embedded practice structures. In her doings she becomes not only a spectator but also a participant in the ongoing processes of reconstructing the current practices in the organization. As Nicolini (2012) points out only practices being continuously enacted and re-enacted exist and in our interpretation Liza takes on the task of challenging the hospital practices and the hospital discursive construction of main priorities in the paradox between better patient care versus economic structure. Her learning in this over time seems to be that she has to act and become an active participant in this process and in this way she can change hospital practices from within.

Discussion

In this case the conversation with Liza shifts between the “here and now” of her situated FLO practices and she uses the “elsewhere-and-then” of the economic practices to reflect upon her own ways of working around the system. But also realizes that the current economic practices take front stage and out powers her ongoing maneuvering to create new bridging FLO practices between the silos. It is suggested in this paper that this switching between the lenses in practice is to some extent brought on by the dialogue with the outsider / researcher. By asking questions and ‘needing’ an explanation to the ‘why’ and ‘how’ of organizing the dialogue sets of Liza’s self-reflexive learning process (Cunliffe, 2002, 2008).

In order to understand these questions the perspective and articulation of the movement; participating-becoming practitioner in practice in *real time*, becomes central (Kemmis, 2009, 2012). That means gaining understanding for how the participants wayfare in the everyday meshwork and in the ongoing movement trying to grasp how and why they shift from “observing” the practice to actually interacting with practice. As Nicolini et.al. (2016) writes; “... *social and organizational life stem from and transpire through the real time accomplishment of ordinary activities*” (Nicolini et. al., 2016: 2). When looking at how Liza wayfare in the organizational meshwork shifting position from observing to interaction, from spectator to practitioner within the practice, we see her attempts to work around the existing silo practices in the hospital and creating new ways to talk, think and interact between the clinics as resistance to the hegemonic discursive and embedded practices at the hospital. She unfolds her reasons for these counteracts as for the best of the patients by relating a counter discourse of putting patient care at the center of all hospital activity. As Ortner (1984) states to study practice is also to study power in the making.

The findings in this particular study demonstrate why it is interesting to study the movements where central figures in organizational change processes shifts perspective from being a spectator to becoming a practitioner in the organizational structure. Shotter articulate the movement in this way; “*Only if we can learn how to see everything from within our own ongoing, always unfinished, practical involvements with the others and otherness around us and to see them from within the multifarious dynamics of those involvements, will we be able to see the unfolding dynamic events occurring within these involvements that give them their ‘shape’, their character*” (Shotter, 2011: 41). By applying with-ness thinking in our research perspective – the perspective of the practitioner, and how they express and construct the

coming together of the doing, saying and relating through action we are able to study how actions are living, ongoing and connected as ecologies of practices (Kemmisa, 2012).

Seen from a researcher perspective this doublet movement of zooming in and zooming out – as a process (Nicolini, 2009, 2012) means that the researcher follows the movements from spectator to practitioner (Kemmisa, 2012) and by following this trail we are able to study the connections between practices, because that enables us to understand both the ‘local’ accomplishments of practice how these local understandings is associated in the landscape of our daily organizational life (Nicolini, 2009). By applying a practice lens to the research in this way allow us to locate the roots of social co-existence in the practice because the world is a result of never-ending social construction, meaning social structures, variations, power and meaning and focus in on how this comes together and is acted upon in practice.

The approach of shifting lenses gives the researcher opportunity to articulate local understandings of and ongoing coping with paradoxes of the practitioners and enables the study of paradoxes from within the ongoing organizational practices.

Reflections

The research presented in this paper illustrates how managers are able to reconstruct their practices, understandings and the conditions of their current practices through moments in dialogue. The research presented in this paper contributes to a praxiologic social constructionist understanding of paradoxes by;

- Pointing to the super complex meshwork of organizing and the ongoing processes of paradox construction embedded in the embodied practices and interwoven with the discursive constructions of the organization members.
- Illuminating the managers ability to challenge the hegemonic centrifugal powers of language and the embedded embodied practices of the organization in order to reconstruct the current practices in the organization
- By enabling the ongoing processes of reworking and reconstructing organizational paradoxes in dialogue, with other members of the organization and through conversations with outsiders (researchers/consultants) it is possible to create ongoing opportunities for dialogic interaction and self-reflexivity resulting in new ways to go on in the organization.

However this research has led us to more questions than answers and we will suggest further research on these questions;

- What is our role as researchers, co-constructors and interpreters in the zooming in and zooming out process?
- Do the managers sometimes have to ‘go back’ to being a spectator? - observing the practice in order to reflect upon the doing, sayings and relatings?

- Or is it possible to stay in the process of self-reflexive learning? – And how? How can we articulate this process theoretically?

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