Implementing Evidence-Based Activation Work

A Study of Individual Placement and Support in the Norwegian Labour and Welfare Administration

Vidar Bakkeli

Dissertation for the degree of philosophiae doctor (PhD)
Department of Social Work and Social Policy
Faculty of Social Sciences
OsloMet – Oslo Metropolitan University

Autumn 2022

OsloMet Avhandling 2022 nr 25

ISSN 2535-471X (trykket)
ISSN 2535-5414 (online)

ISBN 978-82-8364-417-3 (trykket)
ISBN 978-8264-457-9 (online)

OsloMet – storbyuniversitetet
Universitetsbiblioteket
Skriftserien
St. Olavs plass 4,
0130 Oslo,
Telefon (47) 64 84 90 00

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Postboks 4, St. Olavs plass
0130 Oslo

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Acknowledgments

The process of doing this PhD has been a journey. However, it has not been a solo journey, and the dissertation would not have been possible without the many people who have supported me along the way.

First of all, I would like to thank my supervisors, Eric Breit and Tone Alm Andreassen, for their invaluable support throughout the PhD project. Eric, you have shown me new ways of working with ideas, theories, and text that have been truly inspirational and transformative. Tone, your enthusiasm, curiosity, experience, and subtle way of asking good questions played a crucial role in shaping the project and enabled me to approach the work from fresh angles.

I am grateful to the Work Research Institute (AFI) and institute director Elisabeth Nørgaard for support and inclusion also after the PhD position ended. I would like to say thank you to research director Knut Fossestøl, for generously sharing his knowledge and for believing in the project, as well as to Cathrine Egeland, Eirin Pedersen, and my fellow PhD colleague, Ida Bring Løberg, with whom I have had the privilege of exploring the intricacies of the NAV offices in the *Front line innovations in the welfare services* (INNOWEL) project. The people at AFI all deserve a big thanks for creating an inclusive and supportive community. I wish to express my gratitude to Sveinung Legard, Selma Therese Lyng, Kjetil Frøyland, Elin Borg, Camilla Stub Lundberg, Mari Amdahl Heglum, Øystein Spjelkavik, Miriam Hovden, Wendy Nilsen, Øyvind Pålshaugen, Grete Wangen, Joakim Finne, Arne Lindseth Bygdås, Erik Thorstensen, Knut Jørgen Vie, Hans Christoffer Aargaard Terjesen, Mari Holm Ingelsrud, Christian Wittrock, Kristin Reichborn-Kjennerud, Christina Lindskog, Anne Grete Tøge, Ira Malmberg-Heimonen, and Eivind Falkum. In particular, I would like to thank Gudrun Rudningen, Siri Yde Aksnes, and Jannike Gottschalk Ballo, who make up the Nesodden Department of AFI, for the much-needed meetups and socialization during the pandemic.

The PhD program in Social Work and Social Policy at Oslomet has been an inspiring community to be part of. I would like to thank Amy Østertun Geirdal, the PhD program leader, and Anne Thorsen, for the practical help. I also wish to thank my fellow PhD candidate colleagues, especially Dagny Adriaenssen Johannessen, Maja Flåto, Hanna Buer Haddeland, Magne Bråthen, Håvard Aaslund, Maria Reinholdt Jensen, Krisztina Gyüre, and Øyunn Syrstad Høydal. I would also like to thank Åsmund Hermansen, Marie Føleide, Jorunn

Vindegg and the staff at the Department of Social Work, Child Welfare and Social Policy. Further, I want to thank all the people in the *NAV på kryss og tvers* group. Discussing paper drafts and NAV with you online and offline has been great. A special "thank you" goes to Talieh Sadeghi for being there for me in the last phase of the PhD project, along with Line Fossum Skogstad, Susana Vilhena, Chris Rønningstad, Karianne Nyheim Stray, and Johanna Gustafsson.

At the same time, I am grateful to Lars Klemsdal for his constructive and crucial feedback at my midway evaluation, to Flemming Larsen and Dorte Caswell for providing thoughtful and constructive feedback, to Rik van Berkel for his extensive comments on a draft that later became Article 1 and for recommending that I be bolder and aim toward a broader theoretical generalization, to Michael Lipsky for his thoughtful comments about manualization and discretion, and to Sharon Wright and Evelin Brodkin for their support and interest in the project. I also wish to thank Lars Mjøset for inspiring discussions about my project and social theory as we walked the streets of Shanghai in 2018.

Likewise, I am thankful to the frontline workers and managers at NAV who participated in the study and to the service participants who shared their experiences with me. Further, I want to thank Kine Nan Lium, Ane Stø, and Thorgeir Hernes in the Norwegian Labor and Welfare Administration for their interest in my work, as well as Lars Inge Terum, Heidi Moen Gjersøe, and Senter for arbeidsinkludering (KAI) for interesting discussions. A special note of gratitude goes to Emma Johannessen for her guidance, patience, and many forms of inspiration; to Tove Helene Edvardsen Stemsrud for opening up new ways of thinking in the time leading up to the PhD project; and to Arne Backer Grønningsæter for the long-time support and collaboration.

One of the benefits of doing a PhD is the opportunity to attend PhD courses. I am grateful to Lea Sgier for not only sharing her deep and broad knowledge about qualitative analysis, but also for generously spending a long afternoon to help me out of the jungle I found myself in; to Dvora Yanow for the inspiring course about policy frame analysis, interpretive research, narratives, metaphors, and categorization; to Andrew Bennet for the deep dive into case study research methods; and to Eckhart Schröder for an inspiring PhD Symposium at the European Group for Public Administration (EGPA) conference in Belfast in 2019.

Last but not least, I would like to express my deepest gratitude to my family and friends for their encouragement and support throughout my journey. To my wife, Nan Zou Bakkeli, thank you for believing in me; I love you, and I could not have done this without you. To our two cats, Maki and Melis, thank you for your “fluffy love” and for adding new and improved paragraphs to my thesis documents left unattended on the computer screen. I would like to thank Tom Erik Vennesland for inspiring conversations, along with Tore Rafoss, Tone Liodden, Jens Hjort, Andreas Trollvik, Silje Naustvik and Kyrre Wedvik. Finally, I would like to thank my mum and dad, as well as my brothers, Øyvind and Andreas, for cheering me on, being there for me all the time, and reminding me of other important things in life.

Nesodden, August 2022
Vidar Bakkeli

P.S. After the dissertation was submitted for evaluation, a revised and improved version of article 3 has been published in European Journal of Social Work. The article can be found here: https://doi.org/10.1080/13691457.2022.2083085

Summary

Drawing on interviews and fieldwork conducted in two frontline offices in the Norwegian Labour and Welfare Administration (NAV), this dissertation examines how an evidence-based intervention called *Individual Placement and Support* (IPS) was implemented in street-level activation services. Activation work involves complex tasks of motivating and assisting citizens with diverse problems and needs toward employment. The dissertation articles illuminate implementation from three distinct angles by focusing on frontline supervisors and their activities to implement the intervention (Article 1), activation workers and how they worked with the intervention in practice (Article 2) and clients' service experiences and interactions with the activation workers (Article 3).

This dissertation is situated at the intersection between scholarly debates on professionalism in activation work, evidence-based standardization of social services and studies of implementation in street-level organizations. In discussions of activation work, there are concerns about too much managerialism and too little professionalism. There are challenges related to increasing organizational control through rules, procedures and measurement, as well as the lack of a solid knowledge base and expertise among activation workers. Implementation of evidence-based interventions and standards have raised polarized debates about managerialism and professionalism across social services. This thesis expands on previous research by exploring how the implementation of such interventions influences frontline activation practices.

A main finding of the thesis was that the evidence-based intervention was implemented through a continuous, dynamic interplay between intervention demands and situated frontline actors with agency who interpreted the intervention rules and combined these with additional professional knowledge when facing challenges in everyday situations. The intervention had a hybrid character that both constrained and enabled new frontline practices. While it contained managerial elements like performance measures, the intervention also detached the activation workers from existing demands and procedures in their organizations. The intervention enabled flexible, individualized and comprehensive follow-up of clients and employers.

The present thesis makes three contributions to the broader literature on the implementation of evidence-based interventions in social services. First, in contrast with common views of implementation as linear and stepwise processes, the thesis

foregrounds how implementing evidence-based interventions is contested, interpretive and interactional work. The articles show how supervisors and activation workers interpreted intervention rules in light of local concerns and needs, handling tensions between the intervention and existing practices, meanings and stakeholders in the organizations.

Second, contrary to dominant claims in the literature emphasizing how evidence-based interventions promote managerialism and limit professional discretion, the thesis shows how such interventions can revitalize professional practices by promoting social work principles. This includes facilitating a relational orientation, an emphasis on client preferences, personalized follow-up work and service coordination.

Third, while evidence-oriented knowledge views risk marginalizing practice-based and tacit knowledge, the thesis shows how the intervention depended on skilled practitioners and supervisors to work in practice. To solve daily challenges with clients and employers, they combined the intervention with other knowledge resources in pragmatic ways.

Taken together, the articles and the thesis as a whole nuances dichotomous views about evidence-based interventions and professional frontline practice. On the one hand, deviation from intervention demands is often viewed as implementation failure in both practice fields and academia. However, too rigid implementation frameworks risk marginalizing knowledgeable practitioners who need space for pragmatic improvisation in interactions with individual clients. The findings suggest implementation processes should allow for flexibility and adaptation. On the other hand, the thesis also nuances dominant conceptions in the social work literature of evidence-based interventions as rigid standardization, by contributing knowledge about how such standards can promote professional, relational practices. Researchers, policymakers, leaders and practitioners should all aim for a *middle ground*, characterized by a *nuanced approach* to the dynamic and complex processes that unfold when implementing evidence-based interventions in street-level practice.

Sammendrag

Basert på intervjuer og feltarbeid i to NAV-kontor, undersøker denne avhandlingen hvordan en evidensbasert intervensjon kalt *Individual Placement and Support* (IPS) ble implementert i aktiveringstjenester i førstelinjen. Aktiveringsarbeid innebærer utfordrende oppgaver med å motivere og støtte brukere med varierte problem og behov inn i arbeid. Avhandlingens artikler belyser implementering fra tre ulike vinkler ved å fokusere på teamledere og deres aktiviteter for å implementere intervensjonen (artikkel 1), aktiveringsarbeidere og hvordan de jobbet med intervensjonen i praksis (artikkel 2) og brukeres erfaringer og samhandling med aktiveringsarbeiderne (artikkel 3).

Avhandlingen er rettet mot diskusjoner om profesjonalisme i aktiveringsarbeid, evidensbasert standardisering av sosiale tjenester, og studier av implementering i organisasjoner i førstelinjen. Diskusjoner om aktiveringsarbeid er preget av bekymring om mye styring og for lite profesjonalisme. På den ene siden er det utfordringer knyttet til sterk organisatorisk kontroll gjennom regler, prosedyrer og måling, på den andre siden bekymringer om manglende kunnskapsbase og faglighet blant de som jobber med aktiveringsarbeid. Implementering av evidensbaserte intervensjoner har skapt polariserte debatter om forholdet mellom styring og profesjonalisme på tvers av velferdstjenester. Denne avhandlingen bidrar med ny kunnskap ved å utforske hvordan implementering av slike intervensjoner påvirker aktiveringspraksiser i førstelinjen.

Et hovedfunn i avhandlingen var at den evidensbaserte intervensjonen ble implementert i praksis gjennom et kontinuerlig, dynamisk samspill mellom intervensjonens krav og aktive aktører i førstelinjen som fortolket intervensjonen og kombinerte den med profesjonell kunnskap i møte med utfordringer i hverdagen. Intervensjonen hadde en hybrid karakter som både avgrenset og muliggjorde nye praksiser i førstelinjen. Mens den hadde styringselementer som aktivitetsmålinger på individnivå, frakoblet den også aktiveringsarbeiderne fra eksisterende krav og prosedyrer i organisasjonene. Intervensjonen muliggjorde fleksibel, individualisert og tett oppfølging av både brukere og arbeidsgivere.

Avhandlingen har tre bidrag til den bredere litteraturen om implementering av evidensbaserte intervensjoner i velferdstjenester. For det første, i motsetning til utbredte forståelser av implementering som lineære, trinnvise prosesser, finner avhandlingen at implementering er omstridt, fortolkende og interaksjonelt arbeid. Artiklene viser hvordan teamledere og aktiveringsarbeidere fortolket intervensjonen i lys av lokale

utfordringer og behov, og taklet motsetninger mellom intervensjonen og eksisterende praksiser, meninger og interesser i organisasjonene.

For det andre, til forskjell fra dominerende oppfatninger i litteraturen hvor evidensbaserte intervensjoner knyttes til økt organisasjonsstyring og begrensning av profesjonell skjønnsutøvelse, viser avhandlingen hvordan slike intervensjoner kan revitalisere profesjonelle praksiser preget av sosialt arbeid-prinsipper. Dette innebærer å fremme en relasjonell tilnærming, vektlegging av brukerens ønsker og behov, personlig oppfølging og tjenestekoordinering.

For det tredje, mens evidensorienterte kunnskapssyn risikerer å marginalisere praksisbasert og taus kunnskap, viser avhandlingen hvordan intervensjonen var avhengig av dyktige praktikere og teamledere for å fungere i praksis. For å løse daglige utfordringer med brukere og arbeidsgivere, kombinerte de intervensjonen med andre kunnskapsressurser på pragmatiske måter.

Avhandlingen bidrar til å nyansere dikotome oppfatninger om evidensbaserte intervensjoner og profesjonelle praksiser i førstelinjen. På en side anses avvik fra intervensjonskrav ofte som implementeringsfeil i både praksisfelt og akademia. Det er risiko for at rigide implementeringsrammeverk marginaliserer kunnskapsrike praktikere og deres behov for pragmatisk improvisasjon i samhandlingen med individuelle brukere. Avhandlingens funn tyder på at implementeringsprosesser bør åpne for fleksibilitet og tilpasning. På den andre siden nyanserer avhandlingen også rådende oppfatninger i sosialt arbeid-litteraturen om evidensbaserte intervensjoner som rigid standardisering, ved å bidra med kunnskap om hvordan slike intervensjoner kan fremme profesjonelle, relasjonelle praksiser. Avhandlingen går inn for at både forskere, politikkutviklere, ledere og praktikere bør sikte mot en mellomposisjon, karakterisert av nyanserte tilnærminger til de dynamiske og komplekse prosessene som utfolder seg når evidensbaserte intervensjoner implementeres i praksis i førstelinjen.

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Bakkeli, V. (2022). Handling tensions in frontline policy implementation: Legitimating, interpreting, and shielding a disruptive intervention.
International Journal of Public Administration.
DOI: https://doi.org/10.1080/01900692.2021.2009856

Article 2:

Bakkeli, V. & Breit, E. (2022) From "what works" to "making it work": A practice perspective on evidence-based standardization in frontline service organizations.
Social Policy & Administration, 56(1), 87-102.
DOI: https://doi.org/https://doi.org/10.1111/spol.12757

Article 3:

Bakkeli, V. (2022) Evidence-based activation work and service individualisation: client and frontline worker experiences with a standardised intervention, European Journal of Social Work,
DOI: https://doi.org/10.1080/13691457.2022.2083085.

1. Introduction

Activation work involves complex tasks related to "motivating, compelling and assisting marginalized citizens into labour market participation" (Andreassen, 2019, p. 1). In many countries, activation work has become more challenging as policy reforms have broadened the client target groups of activation policies (Heidenreich & Rice, 2016). Clients have diverse needs, preferences and problems, related to both mental and somatic health, social marginalization, substance abuse, debts and other barriers to employability. Activation services are generally viewed as more effective when adapted to the problems and needs of specific individuals (Borghi & Van Berkel, 2007; Heidenreich & Rice, 2016). However, such services have also been criticized for being too bureaucratic, lacking attentiveness and responsiveness to client needs and being particularly ineffective in helping the most disadvantaged or vulnerable client groups obtain employment (Dall & Danneris, 2019; Lindsay et al., 2019).

In scholarly discussions regarding problems and solutions in activation work, many scholars point to problems of *too much* organizational control over how the work is done and *too little* professionalism (Berkel, 2017). Street-level organizations—frontline agencies and departments that deliver services directly to people (Brodkin & Marston, 2013)—are dense with laws, rules and procedures. On the one hand, scholars have argued that increasing managerialism constrains activation work through a proliferation of bureaucratic rules, standardized procedures and performance management (Fuertes & Lindsay, 2016; Jørgensen et al., 2015; Røysum, 2013; Thorén, 2008). On the other hand, research has shown that the work is knowledge-intensive, unpredictable and requires professional responses and skills to balance employment goals with clients' individual problems (Nothdurfter, 2016; Sadeghi & Fekjaer, 2018). Scholars have problematized the lack of a scientific knowledge base for activation work, high educational diversity among practitioners and risks of non-transparent, obscure work practices (Eikenaar et al., 2016; Hagelund, 2016; Van Berkel et al., 2010).

The contemporary emphasis on innovation and change makes the implementation of new policies and interventions more urgent than ever (Hill & Hupe, 2014). Currently, there is increasing attention being paid to developing knowledge regarding approaches for assisting people into employment, as well as how service providers implement "new ways of linking street-level work, organized action, and outside worlds" (Noordegraaf, 2007, p. 781). This includes innovation projects (Freier & Senghaas, 2021), co-

production and co-creation (Larsen & Caswell, 2020; Lindsay et al., 2019), integration across services (Andreassen et al., 2020), employer engagement through boundary-spanning practices and networks (Ingold, 2018; Van Gestel, Oomens, et al., 2019) and the implementation of frameworks for knowledge-based services (Malmberg-Heimonen et al., 2016).

"The evidence agenda" is a development across social services, touching upon core aspects of implementation, managerialism and professionalism. With roots in evidence-based medicine, the evidence agenda represents an ideal wherein policies, public service activities and professional practice should be based on knowledge about "what works" (Boaz et al., 2019). In recent discussions of evidence-based practice (EBP) in social services, a controversial issue has been whether EBP is a bureaucratic or managerial threat to professional work in frontline services (Ponnert & Svensson, 2016). Some argue that EBP has strong managerial features that constrain professionals through rigid procedures, restricting relationships with clients (Bergmark et al., 2011; Gray et al., 2009; Lauri, 2016; Otto et al., 2009). Proponents have been particularly critical of evidence-based interventions and standards based on manuals and fidelity frameworks (Bergmark et al., 2011; Gambrill, 2011). However, others argue that EBP can support decision-making, legitimize professional work and improve relations with clients (Natland & Malmberg-Heimonen, 2016; Ponnert & Svensson, 2016; Skillmark et al., 2019; Soydan & Palinkas, 2014).

In recent years, the evidence agenda has also taken hold in the field of activation services (Bonfils et al., 2017; Bredgaard, 2015; Breit et al., 2018; Dall & Danneris, 2019). While there is a burgeoning literature on EBP in social services and social work, there has been far less scholarly attention paid to evidence-based services in activation work. In some existing studies, scholars have focused on managerial aspects, viewing evidence-based interventions as constraining to frontline work and ignoring the complexities of client needs (see e.g. Andersen & Breidahl, 2021; Andersen et al., 2017). From these debates, evidence-based interventions can be seen to constrain service practices in managerial ways but also to promote or legitimize forms of professional practice in a field lacking common professional standards.

This thesis contributes to debates on professionalism, managerialism and implementation by focusing on the implementation of a specific evidence-based intervention in frontline activation services for vulnerable clients with complex needs

and problems. The thesis draws on a multiple case study of the implementation of the evidence-based intervention *Individual Placement and Support* (IPS) in two street-level Norwegian Labour and Welfare Administration (NAV) offices, based on interviews and ethnographic fieldwork. The thesis is based on the view that there is a need for more nuanced, bottom-up and interpretative understandings of the complex implementation processes through which evidence-based interventions can be translated into frontline practice, involving relational and contingent interactions (Dall & Danneris, 2019). Specifically, it is important to investigate interactions between frontline workers and clients to develop a more grounded understanding of what actually these services entail and how clients experience the services.

In the IPS intervention, activation workers called *employment specialists* provide comprehensive employment-oriented support to clients (Drake et al., 2012). The work involves mapping individual clients and matching them to specific employers based on client preferences, also providing follow-along support in the workplace. The primary client target group of the intervention was individuals with moderate and severe mental health problems. In these offices, however, broader client groups also received IPS-based follow-up services, including youth (Sveinsdottir, Lie, et al., 2020) and refugees (Sveinsdottir, Bull, et al., 2020a).

Implementation of the IPS Intervention

Like other social interventions in the welfare field, such as Housing First for supported housing and the Assertive Community Treatment model (ACT), the IPS intervention has traveled from its origin point in the United States (US) to many different welfare and country contexts (Killaspy et al., 2022). Implementation of IPS is interesting to study because the intervention is supported by numerous randomized controlled trials (RCTs) and systematic reviews from many countries, including Norway. Generally, substantial positive effects in terms of employment and work outcomes have been found compared to traditional vocational services (see e.g., Brinchmann et al., 2020; Marshall et al., 2014; Nøkleby et al., 2017).

The intervention combines the ideals of *individualized* services with a rather *standardized* service model. It involves providing comprehensive, personalized support to each client based on Supported Employment (SE) principles that draw on social inclusion, empowerment and recovery philosophies (Menear et al., 2011; Wehman,

2012). However, the IPS intervention can also be viewed as a managerial and standardized approach to evidence-based services. The intervention is structured with a 25-point fidelity scale as the central feature of the service. The importance of implementing the intervention with high fidelity (i.e., close to the model standard) is a core concern in the IPS literature (Bond & Drake, 2019). The intervention involves the close supervision of staff to ensure correct work practices, performance measures to track activities of individual practitioners and a comprehensive system of external fidelity reviews to monitor implementation quality. This combination of individualization and standardization makes this intervention an interesting case for examining evidence-based activation work in practice and discussing broader themes of implementation, managerialism and professionalism in activation work.

Research Questions

The present thesis investigates how IPS as an evidence-based intervention was implemented in specific teams within two street-level organizations. The first guiding research question was as follows: *How is an evidence-based intervention implemented through the everyday activities, interactions and understandings of involved frontline supervisors, activation workers and clients?* This research question combines the questions posed in the individual articles within the thesis. The articles focus on three key actors involved with the intervention as follows: *frontline supervisors* (team coordinators) and their efforts to handle organizational tensions when implementing the intervention (Article 1), *activation workers* (employment specialists) and how they made the evidence-based intervention work in everyday service provision (Article 2) and *clients*, focusing on their experiences and interactions with the activation workers (Article 3). The thesis focuses on supervisors and workers because they were central in the intervention activities and interactions, and they related to intervention rules and content on a daily basis. Other frontline actors were also involved with the intervention (i.e., counselors, mental health professionals), but they receive less attention in this thesis, as they were more distant from the intervention and their work was not structured by it.

The research question is examined by exploring what the intervention involves when enacted by situated actors in practice in everyday service life. The practice perspective focuses on everyday activities and shared understandings of frontline actors

situated in local organizational contexts (Nicolini, 2013; Schatzki et al., 2001). This aligns well with street-level bureaucracy theory, which highlights how frontline workers make policies on the ground through specific practices and activities (Brodkin & Marston, 2013; Lipsky, 1980/2010). Implementation is conceptualized as practical and purposeful activities to enact and sustain new interventions or policies in organizational settings (Cloutier et al., 2015). An intervention in social services "is not real until implementation; before that it is only an idea, […] the actors perform and produce the method for real in the concrete intervention activities" (Koivisto, 2007, p. 533). The implementation activities are seen as continuous and ongoing, rather than limited to specific or early project implementation phases (De Corte et al., 2018).

The second research question is oriented toward the broader debate on managerialism and professionalism in activation and social services: *Does implementation of the evidence-based intervention constrain service practices in managerial ways, promote forms of professional work or combine managerial and professional elements in novel ways?* This question is used to explore connections and tensions between managerial and professional influences in the evidence-based service practices. In a broad sense, managerialism refers to forms of organizational control to improve organizational performance by structuring frontline decision-making through various tools and mechanisms, including performance measurement, quality systems, formal rules, standardized procedures and an emphasis on managerial authority (Noordegraaf, 2015b). At the same time, to solve complex social problems, street-level organizations depend on knowledgeable, skilled practitioners. While professional work from a perspective of pure professionalism refers to control over the content of work (i.e., within a knowledge domain) and occupational closure, this thesis draws on notions of hybrid professionalism, representing a less restrictive and more relational orientation to professionalism (Noordegraaf, 2007, 2015a). This is relevant to activation work, as it draws attention to situated practices, interactions and meaning-making in the frontline and is well aligned with the practice perspective.

Articles

The following three articles represent the main body of the thesis:

1. Bakkeli, V. (2022). Handling tensions in frontline policy implementation: Legitimating, interpreting, and shielding a disruptive intervention. Published in the *International Journal of Public Administration*.

2. Bakkeli, V., & Breit, E. (2022). From "what works" to "making it work": A practice perspective on evidence-based standardization in frontline service organizations. Published in *Social Policy & Administration.*

3. Bakkeli, V. (forthcoming) Evidence-based activation work and service individualization: A case study of client and frontline worker experiences with a standardized intervention. Under review in the *European Journal of Social Work.*

The first article highlights the disruptive character of the intervention by examining how frontline supervisors handled tensions when implementing the evidence-based intervention. Tensions included different stakeholder views on use of resources, contradictions between existing and new service practices and controversies surrounding the new frontline role. The article shows how frontline supervisors represented a crucial mediating role in frontline organizations. Through the analysis of their activities and understandings, three main strategies enacted to strengthen, shape and protect intervention-based practices—i.e., legitimizing, interpreting and shielding—were identified.

The second article investigates how IPS as an evidence-based standard was enacted in everyday work practices in two NAV offices. The article identifies a "practice shift" toward employers in one office and a "practice revival" in the other, involving a return to more traditional social work values of holistic, client-oriented follow-up practices. The article identifies organizational factors at the sites that could explain these differences, including contrasting recruitment policies, internal formal organization and team integration into the broader organization. A central finding of the article was the dynamic relationship between the standard and the practitioners. The article also

illustrates how the implementation of evidence-based standards can promote work styles with professional characteristics.

The third article focuses on the intervention as a form of service individualization, investigating how clients experience and are affected by intervention activities, as well as what frontline workers actually do in their interactions with clients. The findings highlight the focus in service on work and employment as the main goals. Clients largely had positive experiences and emphasized the importance of patient support over time, being empowered through a personal relationship with activation workers and receiving support when facing challenges. Frontline work practices were characterized by flexibility, building relations and detachment from the organizational context.

Thesis Structure

The thesis is structured as follows: Chapter 2 presents background information and an overview of existing research in the field. This includes research on managerialism and professionalism in activation work, a comparison of two ideal models of evidence-based practice, a literature review of evidence-based interventions and professional practice in activation and social services, as well as research focusing on the specific IPS intervention. Chapter 3 describes the theoretical framework, combining insights from institutional theory, a practice perspective and an interpretive approach to professionalism. Chapter 4 presents the context of the study, including the NAV offices as street-level organizations, the IPS intervention and the implementation of the IPS in the NAV offices. Chapter 5 presents the research design, data collection, analytical approach, reflections on methodology and ethical considerations. Chapter 6 summarizes the three articles (outlined above). Chapter 7 includes a discussion of the findings in light of previous literature, limitations and possible further research. Finally, Chapter 8 offers a short conclusion and is followed by the three articles.

2. Background and Previous Research

Implementation of evidence-based interventions such as IPS can be understood as attempts to institutionalize new normative standards for professional work in frontline services (Brunsson & Jacobsson, 2000; Møller, 2019). According to Van Berkel (2018), evidence-based standardization is "an interesting case in debates about bureaucratic and professional characteristics of frontline work" (p. 25). While it can strengthen a rule orientation in frontline work, it can also represent professionalization strategies.

Therefore, this chapter begins with a broader discussion of managerialism and professionalism in frontline delivery of activation work. Next, two ideal-type models of evidence-based practice are presented, before research on evidence-based interventions and professional practice in both activation and social services is reviewed. Finally, the chapter provides a brief overview of research that focuses on the specific IPS intervention.

Activation Work between Managerialism and Professionalism

There are considerable country- and context-specific variations in the tasks and content of activation work (Van Berkel et al., 2018). The work of supporting people with complex problems into employment requires not merely administrative tasks but "transformative practices" (Van Berkel, 2018, p. 24) aimed at influencing clients' situations, attitudes, and behavior. Frontline workers need specific sets of skills and expertise when working with diverse client groups, including how to motivate people, approach employers, provide support, and promote social participation (Nothdurfter, 2016). Professionalism in activation work is complex and ambiguous partly because it involves "finding the right balance between employment-oriented goals and solutions to complex social problems" (Nothdurfter, 2016, p. 436).

Different public services may be more or less professionalized, with practitioners having different educational profiles and various degrees of autonomy and discretion (Liljegren et al., 2014). The concept of professionalism in activation work is contested and ambiguous. Authors have characterized it as an "immature" professional field, that is, lacking a (scientific) knowledge base and having weak links to educational programs or professional degrees (Nothdurfter, 2016; Van Berkel & Aa, 2012). According to

Malmberg-Heimonen, West, & Vuori, “activation programs are to a large degree developed and implemented as administrative services with no adherence to any particular empirical or theoretical base” (2019, p. 37). Others have argued that activation workers are indeed professionals to the extent that they have a higher education level, but they are “professionals without a profession” (Van Berkel et al., 2010). In some countries, activation workers have administrative profiles and diverse educational backgrounds (Van Berkel, 2018). In Norway and Scandinavia, many activation workers have social work backgrounds, although also diverse backgrounds (Garsten et al., 2016; Sadeghi & Fekjaer, 2018).

Activation professionals are typically employed in street-level organizations, which are characterized by high caseloads, limited resources, performance management, and standardized routines (Van Berkel & Aa, 2012). The relationship between organizational conditions and frontline work is a core theme in activation services literature (Van Berkel, 2018). Activation workers are usually conceptualized in literature as street-level bureaucrats (SLBs), that is, “public service workers who interact directly with citizens in the course of their jobs, and who have substantial discretion in the execution of their work” (Lipsky, 1980/2010, p. 3). As clients have different situations, needs, and problems, it is not possible to prescribe in advance (e.g., in detailed policies and regulations) how to handle all encounters. Hence, frontline workers in these organizations are given discretionary powers to decide on how to handle each case within given rules, norms, and constraints. Through their decision-making, they become policymakers, as they implement policies on the ground in interaction with clients. A wide diversity of frontline practices has been observed in empirical studies (Fletcher, 2011; Kjørstad, 2005; Solvang, 2017), and studies have raised doubts and worries regarding obscure and non-transparent activation work practices (Eikenaar et al., 2016; Van Berkel & Knies, 2018; Van Berkel & Aa, 2012, p. 499).

Administrative rules and procedures play an important role in shaping frontline work practices in many service settings (Eikenaar et al., 2016). Across country contexts, these organizations have been modeled after New Public Management (NPM) principles, emphasizing use of targets, performance measures, control and audit mechanisms, purchaser-provider splits, and business-like management techniques based on standardized procedures and codification (Boston, 2011; Jantz et al., 2015). Several

authors have concluded that bureaucratic models marginalize professional modes of service delivery in activation work (Brodkin, 2011; Fuertes & Lindsay, 2016; Hasenfeld, 2010; Jewell, 2007; Røysum, 2013; Soss et al., 2011; Thorén, 2008). Some scholars have connected managerialism to processes of de-professionalization (Hasenfeld, 1999; Mik-Meyer, 2018; Rogowski, 2011; Trappenburg & van Beek, 2017), meaning it reduces professional control and autonomy in the work situation due to strong organizational rules and standards (Van der Veen, 2013). For example, in Danish activation services, managerial techniques reduced the discretion of activation workers through standardized procedures, increased administrative workloads, and narrowed-down traditional holistic approaches to clients (Jørgensen et al., 2015). There are, however, important differences between different country and service contexts. In a comparative study, Jewell (2007) found more dominant bureaucratic and managerial elements in activation work in the US than in Sweden and Germany.

Other scholars have argued that the bureaucratic and professional aspects can be aligned or integrated (Hansen & Natland, 2017; Kjørstad, 2005; Nothdurfter, 2016; Sainsbury, 2008). Studying professionalism across service contexts, Noordegraaf (2007, 2015a, 2016) developed a more relational and connected understanding of professionalism that emphasizes how practitioners actively combine managerial and professional elements in their practice. In Norwegian activation services, Hansen and Natland (2017) found professionals shifting between bureaucratic and client-centered approaches in active and strategic ways, drawing on both organizational and professional resources. In Danish employment services, Dall (2020) found frontline workers skillfully balancing professional and organizational discourses. Decision-making in complex client cases depended on practitioners' professional agency, knowledge, and expertise but also relied on institutional resources.

In a study of British personal advisors in an activation program, Sainsbury (2008) found professional and bureaucratic elements co-existing but with some tensions. Client-oriented work involved advocating for the client and collaborating towards mutually agreed-upon goals within a professional treatment model. However, bureaucratic elements of the work, such as conditionality rules and sanctions, created contradictory "good cop" and "bad cop" roles. Freier and Senghaas (2021) showed how, in German employment services, relaxing organizational rules and giving frontline workers greater autonomy to shape client follow-up processes led to a shift from an

administrative logic to a *service logic*. These workers met clients in cafes, worked comprehensively with each client, and collaborated more closely with employers. This resulted in more tailor-made services and better quality in client work placements.

New service provision models influenced by forms of network-oriented governance, involving inter-agency cooperation in the provision of services, co-production, and more holistic forms of service delivery, have also necessitated new and active forms of frontline professionalism (Künzel, 2012; Larsen & Caswell, 2020; Van Gestel, Kuiper, et al., 2019). Ellis (2011) argued that the shift from a hierarchical government towards governance, networks, and inter-organizational collaboration has made frontline workers more active, powerful, and influential policy-making actors. A number of studies from a broader public administration literature have also emphasized the *agency* of frontline actors and how they contribute to institutional change and frontline policymaking (De Corte et al., 2018; Durose, 2011; Johansson, 2012; Kalkman & Groenewegen, 2019).

Van Berkel et al. (2010) identified different frontline worker identities in frontline contexts, including *entrepreneurial frontline workers*, which allowed for the approaching of goals, procedures, and regulations in a flexible way and for the active development of solutions suitable to individual clients. To collaborate, frontline workers need space to act and negotiate solutions with partners. They often deal with distressing social problems that cut across different sectors (Lindsay et al., 2019). Employer engagement requires specific strategies and knowledge of negotiations, relational work across organizations and cultures, and how to establish shared meaning (Aksnes, 2019; Gjersøe & Strand, 2021; Ingold, 2018).

Considerable attention has been given in activation literature to the importance of tailoring services to client's specific situations and needs (Heidenreich & Rice, 2016; Van Berkel & Valkenburg, 2007). The increasing diversity of clients with complex needs and problems (e.g., mental and physical health problems, substance abuse, social marginalization, language barriers, and economic debt) has also accentuated the need for professional skills in frontline work (Van Berkel, 2018, p. 24). A stream of studies have examined frontline worker-client interactions (Kampen & Tonkens, 2019; Solvang, 2017), such as in identifying *working relationships* characterized by dialogue and co-creation (Hansen & Natland, 2017) and highlighting the client's complex and nonlinear trajectories over time (Danneris & Caswell, 2019; Nielsen et al., 2021;

Toerien et al., 2013), for example, through phases of deterioration, progression, stagnation, and derailment (Danneris, 2018). This research foregrounds the complexities and challenges involved in activation work and the demands it makes in terms of professional, reflexive responses. The active agency of the individual client has been found to be vital to acquiring work (Danneris & Caswell, 2019). This agency is co-produced through interaction with caseworkers and is dependent on clients experiencing responsiveness and respect, being given a choice, and having influence in the process.

An important discussion within the broader debate on professionalism in activation work concerns whether social work should be the professional ideal in the field (Andreassen & Natland, 2020; Nothdurfter, 2016; Van Berkel & Aa, 2012). As Nothdurfter (2016) argued, social work is well suited to be a "referential model" for professionalism in activation work. The social work field has considerable experience in struggling with dilemmas of being strongly linked to social policy demands and welfare bureaucracies while also striving for distance and autonomy hinged on a professional knowledge base and ethical commitments toward client target groups. New notions of professionalism can be developed through critical reflexivity and debate on, for example, how to deal with ambiguities and how to balance employment-oriented goals with finding solutions to complex social problems.

According to Hasenfeld (1999), activation policies are incompatible with professional social work. Hasenfeld argued that the bureaucratic structures of street-level organizations delivering activation services marginalize the strong service orientation of a professional model. One reason for this is the tasks of determining welfare eligibility and delivering conditionality policies (i.e., enacting disciplining elements such as monitoring and sanctioning of clients). Hasenfeld contrasts this with a service orientation embedded in the values and principles of social work as characterized by: "(a) a belief system that ascribes high moral worth to the clients; (b) a service technology that is individualized, tailoring the services to the specific needs and attributes of the clients; and (c) staff-client relations that are based on mutual trust" (1999, p. 185). This professional orientation is characterized by continuous trust-based relationships with clients and based on the problem-solving skills of the frontline workers.

Overall, activation work is performed within both managerial and professional influences and conditions. Importantly, in part as a response to a lacking knowledge

base in activation work, there is increasing attention to, and use of, knowledge-based policies and implementation of new methods, tools, and forms of evidence-based interventions in activation work. There is reason to believe that examining the implementation of such normative standards for activation work will shed new light on professional and managerial dimensions of activation services. Evidence-based interventions can have different consequences on the ground, both in terms of strengthening managerial or bureaucratic elements, or by enabling or legitimizing new forms of professional practice. This thesis empirically examines the broader issue of how evidence-based interventions shape frontline practice in managerial, bureaucratic of professional ways, by focusing on the implementation of an evidence-based intervention in specific street-level organizations.

Two Models of Evidence-Based Practice

EBP has its roots in evidence-based medicine (Sackett et al., 1996) and was introduced as a new paradigm for reducing the gap between research and practice. The concept has spread from medicine to many sectors of the welfare state (Ekeland et al., 2019). EBP has been interpreted in many ways, sparking intense and ongoing debates about the meaning of evidence and the relationship between knowledge and practice (see e.g. Gambrill, 2019). In the original and widely quoted definition of EBP as "the conscientious, explicit and judicious use of current best evidence in making decisions about the care of individual patients" (Sackett et al., 1996, p. 71), EBP is conceptualized as a combination of three knowledge sources: the client's values, preferences, and experiences; professional expertise; and knowledge from research. This classic definition has been adapted to different professional practices, such as evidence-based social work (Gambrill, 1999) and evidence-based education (Kvernbekk, 2016).

Several authors in literature have distinguished between two different conceptualizations—or ideal-type models—of EBP (Bergmark et al., 2011; Møller, 2018; Nutley et al., 2009; Olsson, 2007). The first view involves the embedding of research knowledge in standards, programs, tools, and guidelines that are diffused and adapted across local services. This has been referred to as the *embedded research model* (Nutley et al., 2009) or empirically supported interventions (Gray et al., 2013). The implementation of such standards for practice is thought to be an important way to develop work practices in the frontline (Timmermans & Berg, 2003). Procedural

standards specify the steps practitioners should take when carrying out their work (Timmermans & Epstein, 2010). In the embedded research model, research enters practice indirectly, as decision-makers at the central or local level (e.g. policymakers, managers, and researchers) assess the evidence and translate it into standards and guidelines. Frontline practitioners relate to the standards and rarely engage directly with research findings. In this thesis, the IPS intervention is conceptualized as an example of the embedded research model, and I mainly refer to this model when discussing evidence-based practice and interventions.

The second view is related to how research-based knowledge in used in professional decision-making processes, and has been referred to as the *research-based practitioner model* (Nutley et al., 2009). Here, EBP is not the application of a specific method but a process where individual practitioners use different knowledge sources in their everyday work to improve decision-making on a case-by-case basis. Professional education and training are key enabling factors for the use of research. This model has also been referred to as the *critical appraisal model* of EBP (Nutley et al., 2009). The practical application of EBP in this view is based on a decision-making model that has five steps: (1) convert one's need for information into an answerable question, (2) conduct a comprehensive search for external evidence to answer the question, (3) critically appraise the validity, effect, and applicability of the evidence, (4) apply this appraisal in a professional way by combining insights from the research with professional expertise and the circumstances of the individual client, and (5) evaluate the outcome of the steps taken and reflect on how to improve them in the future (Sackett et al., 2000).

Both EBP models are based on a specific view that research knowledge should preferably be derived from the "best research evidence" (Thyer & Pignotti, 2011, p. 328) that is available. The research is placed in an evidence hierarchy. There are different versions of the hierarchy, but randomized controlled trials (RCTs) are often placed on top and referred to as the "gold standard" (Pawson, 2006; Timmermans & Berg, 2003). In an RCT, the study participants are randomly assigned to two or more groups. Typically, one group receives the intervention treatment and the other group receives an alternative intervention, and the results are compared. Moving downwards in the evidence hierarchy, the next levels are (2) quasi-experimental studies, (3) before-and-after comparisons, (4) cross-sectional studies, (5) process evaluation, formative

studies, and action research, (6) qualitative case studies, (7) descriptive guides and examples of good practice, and (8) user opinions (Pawson, 2006, pp. 49-50). In other versions of the evidence hierarchy (e.g., Thyer & Pignotti, 2011), systematic reviews are placed on top. In these reviews, systematic methods are used to select and appraise research to answer specific research questions in accordance with the evidence hierarchy.

The two models have both been characterized as essentially being about standardization (Björk, 2016a; Knaapen, 2014), by standardizing how evidence is produced in RCTs and meta-analyses, by implementing standardized procedures and guidelines, and by standardizing decision-making processes. The embedded model, in particular, has been criticized for promoting centralization and standardization (Bergmark et al., 2011) and for ignoring analysis, diagnosis, and inference processes as central aspects of (professional) decision-making (Møller, 2018).

Central authors such as Gambrill (2006) have argued that the research-based practitioner model is anti-authoritarian, democratic, and empowering for professional decision-making because it integrates evidence with professional expertise and clients' preferences. The concept of evidence-informed practice highlights this interplay between professional values, ethics, client voice, and evidence use in decision-making (Gambrill, 2008). However, other scholars have argued that the research-based practitioner model remains an illusory (or even impossible) ideal that is seldom implemented in frontline practice (Bergmark et al., 2012; Bergmark et al., 2011; Björk, 2016a). As Bergmark and Lundström (2011, p. 325) concluded, "social workers today do not … seem to function [much] as 'Sackett professionals.'" In their view, the research-based practitioner model disregards frontline working conditions. Practitioners have limited time to appraise evidence (i.e., spend days reading research papers) because of limited resources, time constraints, lack of supervision, and complex cases (Gray et al., 2009).

Evidence-Based Interventions and Professional Practice

Overall, limited attention has been given to evidence-based interventions and standards in literature on frontline activation services. For example, the term evidence-based is

not mentioned in the "state of the art" literature review on frontline delivery of activation services (Van Berkel, 2018). In the field of activation services, the embedded research model of EBP has been most common, that is, services based on standardized procedures, manuals, and guidelines (Breit et al., 2018; Dall & Danneris, 2019). To my knowledge, the research literature has not described attempts to implement variants of the research-based practitioner model of EBP in activation services.

The few studies that have examined different facets of evidence-based interventions in activation services have mainly been critical of the phenomenon and have emphasized connections between EBP, managerialism, and constrained frontline practices. In a review of the literature, Dall and Danneris (2019) focused on standardized "what works" interventions in employment services and noted the growing demand for scientific evidence to support policy development in this field. They problematized how the policy interventions underpinned by such studies are based on "a linear logic of causality" (2019, p. 585). In other words, interventions are expected to work in a straightforward way to produce positive employment outcomes, and frontline work practices are constrained in rigid ways. They note that studies also mostly identify marginal positive outcomes and effects of these evidence-based activation interventions in the Danish context (e.g. Maibom et al., 2017; Rehwald et al., 2017).

In a mainly conceptual article, Andersen et al. (2017) linked the increasing emphasis on evidence-based knowledge in policy development to increased managerialism, which limits frontline discretion, ignores frontline worker experiences, overlooks the complexities of client problems, and leads to poor service outcomes: "Formal policies that ignore the complex problems many clients face, governance structures [that] decrease frontline discretion and evidence-based knowledge that subverts professional judgment and experience are bound to have only limited employment effects for the most vulnerable unemployed" (Andersen et al., 2017, p. 344). The authors argued for an alternative approach, with emphasis on bottom-up, practice-based knowledge based on experiences of frontline workers and clients (i.e., phronetic knowledge; Clegg et al., 2014).

Along similar lines, Andersen and Breidahl (2021) showed how a strong orientation towards evidence-based knowledge had developed in the Danish Ministry of Employment. Many RCTs and experiments had been conducted between 2005 and 2012 that focused on caseworker-client meetings and short-term activation schemes, designed

"to get the unemployed individual to exit the employment system as quickly as possible" (2021, p. 858).1 Andersen and Breidahl argued that this institutionalized evaluation system (and the corresponding knowledge hierarchy) had a lasting influence on policy-making in the employment field, creating a "cognitive lock" that made policy change difficult. According to the authors, the evidence-based interventions promoted a (neo-liberal) work-first approach rather than human capital approaches. A key reason for this was that the design of the RCTs had been shaped by political interests of the right-wing government in power from 2001 to 2011.

Within the broader literature on social services, there has been a long and complex debate on the role of evidence-based practices and interventions. A range of studies have explored the implementation of EBP, particularly in Scandinavia but also in other countries (Avby et al., 2014; Barfoed & Jacobsson, 2012; Møller, 2019; Skillmark et al., 2019; Skillmark & Oscarsson, 2018). One body of research investigated the experiences and attitudes of social workers towards EBP. These studies have identified barriers to the diffusion of EBP and concluded that there is considerable confusion among practitioners as to what EBP entails (Avby et al., 2014; Ekeland et al., 2019; Finne et al., 2020; James et al., 2019).

Another type of studies focuses on implementation processes (Gray et al., 2013; Nutley et al., 2009). The main aim is to study diffusion and improve implementation of evidence-based methods and programs in social services. Studies in this field often present an ideal view of implementation as stepwise, linear processes (Nilsen, 2015). A dominant approach is the use of quantitative methods to identify factors that represent barriers to or enablers of implementation across different professional fields. In a core contribution, Fixsen et al. (2005) reviewed 743 implementation studies and identified seven core factors influence implementation, including staff selection, training of practitioners, staff coaching and supervision, staff evaluation, program evaluation and fidelity measurement, decision support data systems, supportive administration, and systems intervention. The field of implementation science has been characterized as "instrumental, managerial and somewhat 'technicist'" (Møller, 2018, p. 28) in its efforts to promote evidence-based interventions.

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[1] For example, RCTs showed that frequent meetings with caseworkers made clients exit the unemployment system faster. Based on this, policies were introduced that required unemployed clients to have at least nine meetings with a caseworker during their first half-year of unemployment.

The social work literature is dominated by critical perspectives with regards to evidence-based services and professional practice (Martinell Barfoed, 2014; Petersén & Olsson, 2014; Webb, 2001). Scholars have been concerned about how the evidence hierarchy marginalizes other forms of knowledge (e.g., practice-based experience and tacit knowledge), how EBP and standardized interventions constrain frontline practitioners, and how they cause detachment from clients. Several studies have argued about the limitations of the evidence agenda and the specific knowledge view it represents. Petersén and Olsson characterized EBP as an "old-fashioned, top-down strategy with exaggerated belief in scientific evidence" (2014, p. 1588), based on positivistic and instrumentalist ideals (Gray et al., 2009). Herz and Johansson (2012) concluded that evidence-based tools and instruments limit or restrict the ways frontline practitioners use their professional knowledge. They lead to less reflexive practices by reducing social workers to "tick-box assessors" (Herz, 2018, p. 60). Studying an evidence-based assessment tool in child welfare services, White, Hall, and Peckover characterized the tool as "a descriptive tyranny" (2008, p. 1) because it promoted categories and procedures that contradicted professional ontologies and vocabularies. Another central concern is that client needs and circumstances are too complex to be handled merely by following standardized approaches (Gray et al., 2009; Ponnert & Svensson, 2016; Webb, 2001). Evidence-based interventions are viewed as rigid and inflexible, constraining interactions with clients when implemented in dynamic social work contexts (Lauri, 2016).

However, some scholars have examined evidence-based interventions in practice and found that these contributed to forms of professional work (Barfoed & Jacobsson, 2012; Björk, 2016a, 2016b; Gambrill, 2018; Mullen, 2016; Sletten & Bjørkquist, 2020). Natland and Malmberg-Heimonen (2016) found that an evidence-based program for social work for families enabled reflective, discretionary social work practices and promoted values related to empowerment, user involvement, and a resource-oriented perspective. Skillmark et al. identified a "bottom-up professional drive" (2019, p. 470) among social workers in support of using assessment tools in domestic violence cases. The tools were experienced as useful for structuring assessment tasks and helped reduce the social worker's reliance on informal "gut-feeling" (2019, p. 470). The authors concluded that implementation of the tool was a way for the social workers to improve legitimacy, claim jurisdiction and increase professionalism.

As there is a vast body of literature on evidence-based practice, services, and interventions, this literature review was not meant to be exhaustive but rather, to illustrate some central debates regarding implementation, managerialism, and professionalism in evidence-based services. It can be argued that the concept of EBP has been treated rather sweepingly in social work literature. Björk's assessment of the literature is, in my view, still relevant: "there is an inability in social work research to acknowledge the diversity of EBP or standardized procedures" (2016a, p. 64). There is a need for empirical studies that explore differences and nuances between different interventions and tools. According to Timmermans and Berg (2003), different interventions have different consequences and should be studied empirically on a case-by-case basis. This literature review shows a need to further explore empirically the local processes and dynamics of implementing an evidence-based, standardized intervention in frontline practice, and particularly, within activation services. In particular, there is a need to explore the interplay between evidence-based interventions and the local organizational context, and how interventions and practitioners influence each other.

Research on IPS and Vocational Rehabilitation

There is a voluminous body of literature that focuses on the IPS intervention. This literature has developed in a rather disconnected way from the literature on the frontline delivery of activation services. One significant research stream consists of randomized controlled trial studies and systematic reviews (see e.g. Drake et al., 2016; Marshall et al., 2014; Nøkleby et al., 2017). A recent systematic review and meta-analysis identified 27 RCTs from 14 countries and concluded that IPS is more than twice as effective as traditional vocational rehabilitation in getting people with mental illness into competitive employment (Brinchmann et al., 2020). Some studies have found positive but more modest effects. For example, a multicenter RCT study in Norway found that 36.6% of IPS participants remained in competitive employment after 12 months compared to only 27.1% of the control group participants (Reme et al., 2019).

Another central strand in the literature on IPS focuses on implementation processes (Bergmark et al., 2018a, 2019; Bonfils, 2021; Bonfils et al., 2017; Hillborg et al., 2020; Hutchinson et al., 2018; Lockett et al., 2018). Many studies draw on perspectives from

implementation science (Fixsen et al., 2005; Nilsen, 2015) and aim to improve or promote implementation of the IPS model.

Bonfils et al. (2017) reviewed 21 implementation studies on IPS and identified facilitators and barriers. The results showed that contextual, organizational, and individual factors influenced implementation of IPS. Contextual factors such as employment policies, regulations, and intersectoral separation of services hindered implementation as they promoted traditional service models. The attitudes and cultures of the practitioners were seen as barriers at both the organizational and individual levels as there were conflicting views on treatment, care, and recovery. Key facilitating factors at the organizational level include the fidelity scale as an implementation tool, adequate funding, and leadership. Bonfils noted a lack of attention to contextual factors in the literature and an interplay between the contextual, organizational, and individual factors.

Several studies have noted that IPS is a complex intervention that disrupts traditional ways of working in both employment and mental health services (Bergmark et al., 2018b, 2019; Markström & Lindqvist, 2015; Aarons et al., 2014). Menear et al. (2011), in a study of SE and IPS services in Canada, highlighted the dynamic, non-linear character of the implementation of IPS and SE services. Their findings indicated that most IPS services were adapting and deviating from the model in order to fit local organizational circumstances and to solve individual client needs. Other studies have focused on collaboration between employment and mental health services with the IPS model (Bonfils, 2020, 2021; Hillborg et al., 2020). Bonfils (2020), in a study of four Danish IPS projects, drew on an institutional logics perspective to examine challenges in integrating employment and mental health services. IPS represented a new logic to these services and was regarded by managers as a parallel service, not as an integrated part of mental health. Central aspects of the IPS intervention did not fit well into the institutional logics of mental health services in terms of management issues, time-limited treatment programs, and use of resources, among others. The study also identified discrepancies between the views of IPS specialists and mental health professionals concerning work and client work readiness. Previous studies also examined client experiences with IPS. They found that the relationship between the employment specialist and the client is a core part of the intervention (Nygren et al., 2016; Vukadin et al., 2021).

The vocational rehabilitation field has also considerably focused on evidence-based interventions. Central streams in the literature in this field are based on psychology approaches. For example, Smith et al. (2017), in a recent systematic review of evidence-based interventions for people with different disabilities, found strong support for ongoing support and work-related social skills training for persons with mental health disabilities. Liu et al. (2014), in a meta-review on job search interventions (i.e., standardized training programs designed to help job seekers look for employment), summarized 47 experimental studies and found that the odds of obtaining employment was 2.67 times higher for the intervention participants than for the control group participants. Another relevant research stream in the vocational rehabilitation field focuses on the practices, competencies, and roles of activation workers in promoting work inclusion (Corbiere et al., 2014; Corbiere et al., 2017; Frøyland, 2019b; Kostick et al., 2010; Spjelkavik, 2012; Tilson & Simonsen, 2013).

The literature on implementation of the IPS intervention has informed this study throughout the PhD project. However, the individual articles of this thesis are not primarily oriented towards the literature on IPS or vocational rehabilitation. Instead, implementation of the IPS intervention in the offices was conceptualized as an interesting case for investigating the dynamics of evidence-based activation work. As such, this thesis, as a whole, is primarily directed towards the literature on frontline delivery of activation services and the literature on evidence-based social services, but I also draw on insights from the more specific IPS and SE-related literature.

Concluding Remarks

As this chapter had shown, there are ongoing polarized scholarly discussions about professionalism in activation work, foregrounding tensions between the managerial and professional elements and the need to balance them. The evidence agenda and the diffusion of evidence-based practices and interventions have raised the temperature and acuteness of these discussions. In particular, the embedded research model of EBP, of which the IPS intervention is given as an example in this thesis, has been criticized. A dominant perspective in social work literature is that of evidence-based interventions, programs, and tools as constraining frontline autonomy, professionalism, and relations with clients, although emerging literature has added nuances to this picture. The few existing studies in the activation literature on evidence-based practice and policies have

mainly analyzed evidence-based services in terms of managerialism and standardization of frontline work, indicating a need for more empirically grounded studies. While the extensive literature on the IPS model and vocational rehabilitation has provided important insights with broader relevance, this literature has largely developed disconnected from the activation literature, and some of the studies therein are characterized by rather normative perspectives (e.g., aiming to promote the IPS intervention).

Based on my review of previous research, I argue that there is a need for more theoretically informed, qualitative research that examines evidence-based interventions in neutral terms as a social phenomenon and focuses on how such standardized interventions and policies are "made to work in concrete practices" (Dall & Danneris, 2019, p. 592) by situated frontline actors. To add to the literature, the ambition of this study is to contribute to understanding how evidence-based interventions are implemented in everyday work as new forms of follow-up practices in street-level organizations. There is a need for further knowledge on how such interventions influence professionalism in activation work and how clients experience the services.

3. Theoretical Framework

In this chapter, I describe the theoretical perspectives that underlie the thesis as a whole. The theoretical framework is a pragmatic combination of institutional theory (Kraatz & Block, 2008; Scott, 2014) and a practice perspective on implementation (Cloutier et al., 2015; Feldman & Orlikowski, 2011; Koivisto, 2007; Schatzki et al., 2001; Smets & Jarzabkowski, 2013). The framework combines and expands upon the theoretical perspectives used in the thesis articles. These resources provide useful conceptual tools to address the research questions regarding the way an evidence-based intervention was implemented in practice in organizational settings saturated with different rules, institutions, practices and beliefs.

Rules, Agency and Institutional Pluralism

Street-level organizations (SLOs) are agencies that "do the day-to-day work of the welfare state" (Brodkin & Marston, 2013, p. 17). As an analytical approach, the street-level organization perspective focuses attention on how forms of management and governance have transformed the conditions of frontline service delivery (e.g., through performance management, contracting, governance networks involving public, private and non-profit actors, service standardization). The concept builds and expands upon Michael Lipsky's (1980/2010) concept of street-level bureaucracy. It is common in welfare state and policy studies to view street-level organizations as faithful policy implementers, based on a principal-agent, hierarchical view of the state. In contrast, the street-level organization perspective foregrounds a more dynamic and political understanding of these organizations, viewing them as mediators of policy and "sites of policy conflicts" (Brodkin & Marston, 2013, p. 23). Brodkin and Marston conceptualize street-level organizations as "institutional locations in which political projects of change and welfare state transformation are advanced, contested, and, at times, realized" (2013, p. 17).

This perspective is useful as a building block in a theoretical framework because it centers a pluralistic understanding of the interplay between management, governance, organizational conditions, discretionary decision-making, frontline service practices and interactions with clients. These interactions take place within organizations and in

practice determine "who gets what, when, and how" (Lasswell 1936 in Brodkin & Marston, 2013, p. 24), including important political dimensions.

I draw on institutional theory to investigate the relationship between rules, actors, structure and agency in frontline service organizations. From an institutional perspective, organizations can be viewed as actors shaping the norms and values of their members: "Bureaucratic agencies, legislative committees, and appellate courts are arenas for contending forces, but they are also collections of standard operating procedures and structures that define and defend values, norms, interest, identities, and beliefs" (March & Olsen, 1989, p. 17). March and Olsen defined institutions as "collections of interrelated rules and routines that define appropriate action in terms of relations between roles and situations" (March & Olsen, 1989, p. 21). In their framework, the desire to act *appropriately* is viewed as more important than the desire to achieve something important for the individual actor. This approach contrasts with theories focusing on rational, individual decision-making actors and behaviors.

Modern organizations have many rules (Klemsdal & Wittusen, 2021)—organizations and the people in them reach goals by following certain rules that define what they should do and how they should do it (Scott, 2014). Institutionalized practices are deeply embedded in the individual and are often taken for granted; however, they are also dynamic and subject to change. Crucially, rules need to be interpreted. How to follow a rule does not follow from the rule itself, depending instead on how actors understand the rule (Wittgenstein 2009 in Klemsdal & Wittusen, 2021, p. 5). In the context of evidence-based standardization in healthcare, Timmermans and Epstein emphasized the following: "no rule can adequately capture the requisite work of a prescribed action. On the ground, every standard is simultaneously over determined and incomplete. […] Tinkering, repairing, subverting, or circumventing prescriptions of the standard are necessary to make standards work." (2010, p. 81). Implementing and practicing a standard involves reflexive and interpretive work by social actors.

To advance understandings of frontline work beyond the dominant discretion concept in street-level bureaucracy theory, Maynard-Moody and Musheno (2012) foregrounded meaning-making and pragmatic improvisation as an expression of agency in frontline practice. Frontline actors are viewed as "knowledgeable agents" (Giddens 1976 in Maynard-Moody & Musheno, 2012, p. 19) with knowledge of rules, norms, roles, resources, practices and institutional structures, enabling them to re-create and

modify existing practices and structures. Frontline actors deal with dilemmas and make decisions with moral implications, directly affecting the clients' living situations. There are constant mismatches between prescribed, rule-based practices and problems encountered in everyday life in such service settings. Recent studies have also highlighted the role of *distributed forms of agency*, involving collective development and implementation processes among frontline workers, managers, professional organizations, policymakers, and service users (De Corte et al., 2018; Møller, 2019; Visser & Kruyen, 2021).

In a neo-institutional framework, street-level organizations can be conceptualized as ambiguous, pluralistic and complex sites characterized by contradictions and tensions between different institutions (Smets & Jarzabkowski, 2013). Organizations often contain a mix of institutional logics—i.e., different "organizing principles that shape the behavior of field participants" (Reay & Hinings, 2009, p. 631)—which refer to belief systems and associated practices. Institutional pluralism is understood as organizations operating in multiple institutional spheres that provide different logics (e.g., being subject to several regulatory regimes, different normative orders and/or different cultural logics), creating deep and persistent tensions within the organization (Kraatz & Block, 2008, p. 243). If institutions are understood as the "rules of the game," these organizations play "in two or more games at the same time" (Kraatz & Block, 2008, p. 243). In such organizational contexts, actors need to navigate and manage institutional contradictions and challenges in practice (Bjerregaard & Jonasson, 2014). Recent studies of the micro-level practices of professionals in service organizations have also highlighted how local actors use contradictory logics pragmatically and creatively to advance certain goals and interests (Høiland & Klemsdal, 2020). Studies based on institutional and neo-institutional theoretical perspectives have also underscored the active role of frontline actors not only in "enacting and perpetuating the institutional structures" but also in "interacting with and reconstituting the structures that surround them" (Cooney, 2007, p. 715, see also Rice 2019, p. 73).

A Practice Perspective

The use of a practice lens to study implementation of the evidence-based intervention focuses attention on what people actually do with an intervention in their ongoing situated activity. Practices have been defined as "embodied, materially mediated arrays

of human activity centrally organized around shared practical understanding" (Schatzki et al., 2001, p. 2). As Whittington (2006, p. 615) noted, practice theorists focus on how social fields, organizations or systems define practices, such as shared understandings, cultural rules, languages and procedures, as well as how these practices guide and enable human activity.

Viewing frontline organizations with a practice lens accentuates the varied and diverse practices that exist in organizational settings. Practice theorists have conceptualized organizations as "bundles of practices" (Nicolini, 2013, p. 2) and material arrangements.[2] Different practices may connect, overlap and be entangled with each other, and there may be tensions, asymmetries, contradictions and conflicts among them.

The practice perspective is useful in capturing the increasingly complex and dynamic character of contemporary organizational phenomena (Feldman & Orlikowski, 2011). Feldman and Orlikowski (2011) highlight three central practice theory principles—the importance of everyday actions, the effort to move beyond dichotomies and the mutually constitutive relationship between phenomena. First, everyday actions are important and play a decisive role influencing social life and structures. Second, practice theory seeks to explore dualisms and inherent relationships between elements often treated as dichotomies in social theory. Examples of such dichotomies include mind and body, objective and subjective, as well as structure and agency.[3] The third principle emphasizes the mutually constitutive relationship between phenomena, in particular between social orders (e.g., structures, institutions, rules) and agency. Practice approaches also acknowledge the centrality of power and conflict in social life (Nicolini, 2013, p. 6). The mutual constitution between structure and agency may be characterized by asymmetry, actors may have differential access to resources, and there can be conflicts between different interests and norms (Feldman & Orlikowski, 2011).

[2] For example, a frontline social service agency consists of diverse, overlapping and sometimes contradictory practices—including counseling, administrative, collaborative and community-building practices—and is situated within specific material infrastructure and housing arrangements in a local community.

[3] This is inspired by Giddens's (1984) structuration theory, offering concepts to move beyond the dualism of structure and agency.

Implementation as Practice

In this thesis, implementation is conceptualized as "the practical, effortful, sometimes partial and not always successful activities directed at institutional change" (Cloutier et al., 2015, p. 262) within a field of activity (e.g., a public frontline service organization). This concept focuses on the practical and purposeful activities that local actors undertake as they attempt to enact and sustain new interventions or policies, as well as the efforts involved to disrupt, modify and adjust existing institutional structures.[4] Actors actively *interpret* ideas and policies when implementing them in local organizational contexts (Boxenbaum, 2006). The work involves developing trust and shared understandings to encourage people to grow into new roles and structures, connecting policy visions to concrete service practices and developing new capabilities and procedures in the frontline. This also involves translation (i.e., a process where an idea is transferred or converted into a new context and made into concrete practices), where local actors interpret, adapt, and add to policies and interventions (Gestel & Nyberg, 2009; Vossen & Van Gestel, 2019).

Drawing on notions of institutional pluralism, the implementation as practice perspective foregrounds how interventions and reforms "enter into contradiction with established institutionalized rules, norms, and practices" (Cloutier et al., 2015, p. 261). To translate more or less abstract policy templates into concrete frontline actions and practices is "fragmented, localized, and contingent" work (Cloutier et al., 2015, p. 269). Implementation is contested and involves "effort in the face of resistance" (Cloutier et al., 2015, p. 262) from stakeholders with diverse interests who may strive to maintain previous institutions. Importantly, this work is continuous and not only part of early implementation phases of a project or policy reform.

Relational Evaluation

While this is not an evaluation study, I draw on the *relational evaluation approach* (Koivisto, 2007, 2008) to study implementation in practice in Article 3. This framework has many similarities with the practice approach, including a focus on situated,

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[4] Cloutier et al.'s conceptualization builds on the notion of "institutional work"—i.e., "the purposive action of individuals and organizations aimed at creating, maintaining and disrupting institutions" (Lawrence & Suddaby, 2006, p. 215). However, rather than foregrounding the framing of the institutional work, I have chosen to focus on the practices and activities related to implementation.

everyday activities, the mutual enactment of agency and structure, and the rejection of dualisms. Scholars have argued that studying everyday practice is important for "capturing social work as emerging through everyday routines, procedures and processes" (Olesen & Eskelinen, 2011, p. 75) and to open up "the black box of evidence-based approaches" (Bryderup, 2008).

The relational evaluation framework builds on perspectives from science and technology studies (STS), including actor–network theory (Latour, 2005) and theories of co-production of technology and society (Harbers, 2005). The social world is understood as "materially heterogeneous networks and relations [...] performed and constituted by humans, technical artefacts, money, architecture, values, goals, norms and so on" (Koivisto, 2007, p. 532). Dualisms like actor and context are avoided in favor of viewing social structure as continuously produced by human actors through their activities.

The framework prescribes an empirically oriented research strategy to explore social interventions. Social interventions are understood as local activity and interaction among different actors (e.g., social workers, other professionals, clients, family members, employers). Interventions contains a *script* defining activities and roles that users in their concrete practices may follow or depart from (Akrich, 1992). Scripts refer to the ideas and roles inscribed in technological objects regarding how the object will be used and who the user is, also shaping how users will interact with the object (Akrich, 1992, p. 208). The term de-scription refers to how technology is used and appropriated in specific contexts, as well as whether and how diverse users modify, extend, tinker and deviate from designer intentions.

In social interventions, the goal is often to change a client's life situation in some way. The life situation is conceptualized as a socio-material network combining social and material elements, continuously performed and produced through daily activities. The framework emphasizes how the effects of an (evidence-based) intervention are not located in the intervention method alone. Facts, technologies and services do not have "an inner causal power that can cause effects" (Koivisto, 2007, p. 532). Potential effects are consequences of the concrete activities and interactions between frontline workers and clients through which an intervention is enacted: "the actors perform and produce the method for real in the concrete intervention activities" (Koivisto, 2007, p. 533). Taken together, the framework focuses on studying how a client's own life situation

(i.e., their socio-material network) is changed by intervention activities and how the involved actors produce and achieve change through collective action.

Professionalism

The literature on professions and professionalism emphasizes formal and education-based knowledge as core features of professionalism (Freidson, 2001). Notions of "pure professionalism" (Noordegraaf, 2007) often restrict professional work to traditional professional occupational fields, like medicine and engineering. This involves control over the content of work and occupational closure, setting professional work apart from nonprofessional work. The possession of abstract knowledge within a domain serves as a foundation for a professional who provide services, treats cases and deals with complex problems (Abbott, 1988).

In this thesis, I approach professionalism by drawing on the concept of hybrid professionalism as developed by Mirko Noordegraaf (Noordegraaf, 2007, 2015a). This represents a less restrictive, more relational, interpretive and practice-oriented understanding of professionalism. Building on Schön (1983), who studied non-traditional groups like town planners, architects and managers, Noordegraaf defines professionals as "reflective practitioners" (Noordegraaf, 2007, p. 771; Schön, 1983). Professionalism is understood as "a new epistemology of practice" (Schön 1983, p. 49) and involves a focus on "artistic, intuitive processes which some practitioners do bring to situations of uncertainty, instability, uniqueness and value conflict" (Schön 1983, p. 49).

Hybrid professional work is performed by knowledge workers situated in organizational settings. These practitioners treat cases based on judgment and sense-making (i.e., inferential and experiential activities), drawing not only on abstract, scientific knowledge but also experience from practice, common sense and tacit knowledge. This approach to professionalism does not require practitioners to share a common knowledge base or educational background.

In the public sector, service organizations combine forms of bureaucratic and professional control. Organizations use measurement and monitoring schemes to achieve goals like cost control, improved service quality and efficient use of resources. This professionalism is hybrid because it combines both organizational and professional elements. Hybrid professionalism foregrounds a relational understanding of

professionalism, as practitioners (e.g., social workers) operate in interdisciplinary settings, and are linked to other professional actors, the organization and the outside world in various ways.

Seen from an institutional perspective, professionalism can be conceptualized as an institution. Following Scott (2008, p. 233), "the notion of profession is itself an institutional model specifying the characteristics of the social structures of those actors performing knowledge work in our society." As such, professional actors, for example social workers, are carriers of a specific institutional model (social work), that they bring with them when they are employed in public service agencies. This adds to institutional pluralism in these settings, as actors may choose to act on the basis of professional norms and ethics, rather than organizational norms (Cecchini & Sommer Harrits, 2021; Harrits, 2019).

Concluding Remarks

The theoretical framework presented in this chapter pragmatically combines a set of conceptual tools and resources for studying implementation activities among actors in street-level practice. The different concepts provide a framework for addressing the research question of how an evidence-based intervention is implemented in practice, focusing on the activities of specific organizational actors and interactions with clients in the case settings.

The thesis draws on an institutional perspective combined with a practice perspective, centering local activities, understandings and agency. Institutional theory is useful to conceptualize the relationship between rules and actors in organizational settings. Concepts of rule interpretation and agency focus on how rules need to be interpreted, and how knowledgeable actors transform rules and contribute to institutional change. Concepts of street-level organizations and institutional pluralism highlights how these organizations operate in different institutional spheres that provide different institutional logics, creating tensions within the organizations. These concepts are useful to analyze how the intervention clashes with existing institutionalized rules, norms and practices and the contested nature of policy implementation. Building on a practice perspective, implementation as practice directs attention to the practical activities aimed to create institutional change. This perspective centers attention on situated local actors and their practical work of interpreting policy ideas and translating

these into frontline practice. The concept of hybrid professionalism aligns with other theoretical resources by advocating for an interpretive, practice-oriented and relational analytical approach to study professional work within ambiguous organizational settings.

Drawn together, the framework advocates for an open-minded and explorative approach to studying the relationship between rules and content as prescribed in an intervention or standard, as well as everyday implementation practices in frontline social service organizations characterized by ambiguity and complexity.

4. Study Context

This chapter provides a brief background about the Norwegian activation policy context, the organizational context of the study, the IPS intervention and how IPS have been implemented in NAV.

Policy Context

Activation services in Norway have been characterized by an enabling approach (Aurich, 2011; Molander & Terum, 2019), focusing on education and training. Enabling activation policies toward clients aim to support and facilitate in order to improve individual skills and employability, based on human capital investment ideas (Eichhorst & Konle-Seidl, 2008; Fossati, 2018). In contrast, demanding activation policies involve putting pressure on unemployed people to speed up their labor market reintegration (e.g., by tightening individual job search requirements, curtailing welfare benefits, and introducing activity requirements in job search processes). Policies towards the employer-side have traditionally included demanding approaches (i.e., regulation and formal requirements), or creating incentives like wage subsidies and funding for job training (Frøyland et al., 2018).

Like in other Scandinavian and European countries, there was an important shift in Norwegian activation policies in the early 1990's towards "the work line" (arbeidslinjen), with increased emphasis on stimulating people off welfare benefits and into employment (Molander & Terum, 2019; Øverbye & Stjernø, 2012). Ending unemployment is seen as important in terms of well-being and social inclusion. In recent decades, Norwegian activation policies have increasingly combined elements of enabling and demanding elements, as there has been an increasing emphasis on obligations and conditionality (Gjersøe et al., 2020; Sadeghi & Terum, 2020; Torsvik et al., 2022; Vilhena, 2021).[5]

Internationally, activation policies have been criticized for failing to help the "most-hard-to-place individuals" (Eichhorst & Konle-Seidl, 2008, p. 441). In Norway, there

[5] Activity demands with possibilities for sanctions have been introduced for different welfare benefits. Specifically, for social assistance for people under 30 (from 2017, see Vilhena, 2021), unemployment benefits and work assessment allowance (AAP). However, there is considerable variation in how these activity demands and sanctions are practiced locally, and lack of knowledge about how they are implemented (Molander & Terum, 2019).

has been substantial criticism of employment and social services for being too strict, bureaucratic and standardized. In 2015, a government-appointed expert committee concluded that rigid, bureaucratic procedures in the frontline offices limited counselors' ability to guide clients toward work, with inadequate client involvement and attention to individual needs (Vågeng Committee, 2015). The offices lacked contact with employers and were too reliant on external activation providers.

In Norway, as in other countries, there is an ongoing search for new policy approaches that addresses both client's complex barriers to work and social inclusion, as well labour market and workplace factors (Frøyland et al., 2018; Lindsay et al., 2015). As a response to public criticism, the government presented main policy goals in a white paper called *NAV in a new age (2015–2016)*: to strengthen client orientation and efficiency in services, to improve work-oriented services for both employers and jobseekers, to provide more in-house activation services, to develop knowledge-based services and to enhance frontline discretion through professionalization and organizational learning (Ministry of Labour and Social Affairs, 2015-2016). This includes a turn to what Frøyland et al. (2018) has called *combined workplace-oriented approaches*, including SE and IPS, which is presented later in this chapter.

Evidence-based labor market policies have been central for policy- and service development in recent years (Bråthen, 2021). NAV has had a strong emphasis on implementing evidence-based knowledge into frontline practice (Breit et al., 2018). In 2012, the Directorate commissioned the first RCT of IPS in Norway, with a study examining six different IPS services (Sveinsdottir, Bull, et al., 2020b). Other evidence-oriented development projects include the HOLF program to improve follow-up of low-income families where employment for the parents was among the main goals (Malmberg-Heimonen & Tøge, 2020), Comprehensive, Methodological, and Principle-based Approach (CMPA) to improve frontline worker skills and introduce counselling tools and a systematic approach to follow-up work (Malmberg-Heimonen et al., 2016), and the evidence-based method Motivational Interviewing (Miller & Rollnick, 2012) to develop communicative skills to create change among clients, widely implemented in NAV.

Organizational Context

The NAV offices are interesting organizational sites for studying evidence-based activation work for several reasons. The offices are frontline service organizations characterized by both hierarchical and network-based governance. There has been increasing emphasis on evidence-based interventions in NAV, and frontline work is characterized by tensions between organizational demands and professional discretion.

Similarly to the Labour Force Service Centres in Finland and German job centers, NAV offices are complex, multi-purpose "one-stop shops" (Minas, 2014) providing integrated employment and welfare services, including social assistance, social security, as well as employment and other social services. The offices were established with the major administrative NAV reform of 2005–2011, merging national employment services, the insurance agency and municipal social assistance services. In line with international policy trends toward individualized and integrated service delivery (Heidenreich & Rice, 2016), the core objective of the reform was to establish holistic, coordinated services adapted to individual client needs (Fossestøl et al., 2015). After a reduction of offices, there were 293 offices at the end of 2020 (The Norwegian Labor and Welfare Administration, 2021, p. 9). Staff size varied from small offices of around five employees to large offices with over 200 employees.

Governance in NAV is characterized by a mix of hierarchical, top-down steering and local network governance (Fossestøl et al., 2015). Each NAV office is organized as a partnership between the state and each municipality, financed by both sides. This adds to the institutional complexity in the organization (Høiland & Klemsdal, 2020). While the dominant state side of NAV is structured as a layered, hierarchical organization with more standardized work procedures on the frontline, the municipal side has (traditionally) been based on social work professionalism and regulations enabling more frontline discretion. Through the municipality, the NAV office is embedded in local service networks with which they collaborate, along with other local agencies. A recent governance reform in NAV has promoted increased local autonomy for the frontline offices and an emphasis on network-based governance (Fossestøl et al., 2020).

As organizations, the NAV offices are characterized by tensions between organizational standards and professional work practices. There is a strong emphasis in the organization on procedures, tools, routines, performance, uniformity and rationality

(Fossestøl et al., 2015).[6] Examples of tools that structure work in all NAV offices are standardized client classification and assessment systems structuring day-to-day caseworker tasks (Gjersøe, 2016; Hagelund, 2016). At the same time, forms of knowledge-intensive professional work are also crucial for frontline work in NAV. A NAV counselor is responsible for a range of tasks—e.g., administering welfare benefits, addressing economic issues, conducting work-health assessments, choosing between different activation measures and providing employment-oriented follow-up.[7] The practitioners' agency, skills, knowledge and ethics are needed to achieve policy goals (i.e., providing holistic, individualized services to clients with complex needs) (Gjersøe, 2020). Regarding educational diversity, employees in NAV have diverse professional backgrounds, with around one-third being social workers (Sadeghi & Fekjaer, 2018).

The IPS Intervention

The IPS intervention was developed in the US from the 1990s onward by a team led by Robert Drake and Gary Bond (Drake et al., 2012). The intervention builds on a place-then-train approach with ordinary, paid employment as the goal and an emphasis on client preferences (Drake et al., 2012). The intervention is for clients with moderate to severe mental health problems. IPS is based on the following core principles: (1) focus on competitive employment, (2) eligibility based on client choice (i.e., client motivation), (3) integration of rehabilitation and mental health services, (4) attention to client preferences, (5) personalized benefits counseling, (6) rapid start of job searching, (7) systematic job development and (8) time-unlimited and individualized support (Drake et al., 2012).

IPS is often referred to as the evidence-based version of SE (Rinaldi et al., 2010). The IPS intervention can be understood as a translation of SE principles and philosophy into a technical implementation framework. SE was initially developed and used to help individuals with developmental disabilities. One of the founders of SE, Paul Wehman, described SE as a "way to help those with disabilities who are unable to successfully gain or retain employment on their own to enter the labor force with dignity and

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[6] Høiland and Willumsen have described a "continuous flow of implementation efforts of new innovative policies and work inclusion methods," based on "standardized methods and documentation procedures" (2018, p. 6).

[7] Administrative decision-making regarding clients' eligibility for welfare benefits is done in specialized units in NAV, but requires a dialogue between frontline counselors, the NAV office and these units.

inclusion with others in society" (Wehman, 2012, p. 139). The SE approach builds on principles of social inclusion and recovery philosophy, focusing on the client's own, active process, their needs and preferences, and the importance of social inclusion, relations, networks and the development of identity and meaning for the individual (Frøyland, 2018; Menear et al., 2011). Over the years, the model has been expanded and modified to new target groups, including people with mental illness, physical disabilities, traumatic brain injuries and autism (Wehman, 2012).

Like other interventions belonging to the embedded research model of EBP (Nutley et al., 2009), the IPS intervention is structured using a 25-point fidelity scale and manuals (see e.g. Becker et al., 2015). The fidelity scale provides (relatively) detailed operational descriptions of the program elements.[8] Fidelity can be defined as "the degree to which a program implementing an EBP adheres to specific model standards" (Bond & Drake, 2019, p. 1)—that is, the extent to which the local service replicates the original program (Durlak & DuPre, 2008). The fidelity scale is a link between the original program standard (which has been found to have positive outcome effects in RCTs) and positive outcomes of the locally implemented service. According to Bond et al. (2011, p. 127), "programs which replicate 'core principles and procedures of an EBP' will achieve similar outcomes as found in the original research establishing its effectiveness." In this approach, local deviation from the model standard is seen as leading to negative service outcomes.

The IPS intervention includes several elements that can be conceptualized as managerial: structured tasks and phases of client and employer follow-up, performance measures, a strong team supervisor role and regular fidelity reviews. The fidelity scale is divided into three categories—staffing, organization and services—and specifies many aspects of how the service should be organized and how employment specialists should practice (Drake et al., 2012). Employment services provided to the individual client are structured in six phases with defined tasks and activities, including intake, engagement, assessment, job placement, job coaching and follow-along support. The performance measures aim to shape individual practitioner activities and time usage.

[8] Fidelity scales have several functions, including guiding the implementation of a program (i.e., specifying how program objectives and procedures are put into everyday practice), monitoring a group of programs (i.e., establishing benchmark standards indicating service quality levels enabling comparison), promoting collaboration, service quality and program sustainability (Bond & Drake, 2019). The scale has also been used in several studies on the IPS model (see, e.g., Bonfils et al., 2017).

Three central measures are the number of employer meetings per week, percentage of working hours spent out in the community and percentage of working hours spent on employment services.[9] Method supervisors have a central role and are responsible for guiding, supervising and supporting the team of employment specialists. They keep track of performance results, using them to develop frontline practices and service quality. The model demands that regular fidelity reviews of the service are conducted. External evaluators spend two to three days within the service, interviewing employment specialists, participants, collaboration partners, managers and so on, and analyzing statistics and documents (Bakkeli et al., 2020). Based on this, the evaluators score the service using the fidelity scale. A top score (between 115–125 points) indicates the service is implemented with high fidelity and good quality.

IPS in NAV

Although IPS services have been implemented in some NAV offices since 2012, diffusion was significantly scaled up with the program *In-house Follow-Up* in 2017, promoting individualized, work-oriented follow-up services for clients with complex problems.[10] Importantly, the model represents a shift from standardized workflows where clients are referred to external activation providers (sheltered work enterprises and contracted providers), to in-house, integrated follow-up services.

By the end of 2019, approximately one-third of Norway's 326 offices (at that point in time) had employment specialist teams. The teams follow either the IPS model or a modified standard developed internally by NAV. While the IPS service model involves integration with local mental health services, the teams of the *In-house Follow-Up* program are not integrated with mental health services. Each IPS employment specialist is integrated with up to two mental health teams, and collaborate with mental health professionals who provide treatment to clients. These teams consist of psychologists,

[9] For example, employment specialists should provide employment services 96% or more of the time to obtain a top score (Staffing Point 2, "Employment services staff"), have six face-to-face meetings with employers each week on behalf of particular clients (Service Point 6, "Job development—Frequent employer contact") and spend 65% of total scheduled work hours out in the community, meeting employers and clients (Point 13, "Community-based services") (Becker et al., 2015).

[10] Other examples of individualized services in NAV include "The Qualification Program," which promotes individualized, personalized services to social assistance recipients (Hansen, 2019, 2020; Hansen & Natland, 2017). Youth services also involves comprehensive, tailored follow-up, e.g., by organizing specialized youth teams in offices (Frøyland, 2019a, 2019b; Strand et al., 2015).

psychiatrists, psychiatric nurses and clinical social workers with different profiles, such as the general, ambulant and substance-addiction teams.

Comparing the employment specialist frontline role with the regular counselor role is illustrative to show differences between existing service practices and intervention-based practices. NAV counselors have diverse tasks related to guiding, motivating and advising clients toward activity and employment. This involves assessing and referring clients to external activation providers (e.g., sheltered work enterprises). There is great variation in terms of counselor caseloads in NAV. A survey from 2019 showed 29 % of counselors in NAV had between 20-50 clients, 37 % between 50 and 100 clients, while 13,5 % had more than 100 clients (n=1745, Fossestøl et al., 2020, p. 170). In the two offices of this study, the caseloads among counselors ranged from around 40 to 130 clients. Employment specialists provide more comprehensive and individualized follow-up oriented toward clients' employment and work situation. They have smaller caseloads of 15 to 20 clients and do not follow standardized procedures but adhere to intervention-specific rules and content. They focus on employment-related follow-up. Employment specialists collaborate with counselors, who are responsible for administrative follow-up (including finance and welfare benefit issues), and mental health professionals, who are responsible for treatment and therapy.

Table 1. Comparison of the Regular Service Model with the Intervention Model

	Standard service model	IPS intervention model
Organizing principles	National directives, standardized ICT systems and procedural tools, performance management	Adherence to intervention fidelity scale principles, including performance management
Main frontline role	Generalist counselors	Specialist employment-oriented role, collaborating with NAV counselors and therapists
Frontline work content	Standardized production, assessment and categorization of clients with reduced work capacity	Individualized, comprehensive in-house follow-up with clients and employers, boundary-spanning and brokerage tasks, employer engagement, continuous workplace support.
External/internal service provisions	Standardized referrals to external service providers (e.g., sheltered work enterprises, contracted providers)	In-house service capacity for comprehensive, individualized follow-up
Caseload per frontline worker (in the case offices)	45–130	15–20

Clients served by the IPS service were referred through mental health services, while clients in the "In-house follow-up" were referred from NAV counselors. The target user groups for IPS services in NAV were citizens who want ordinary paid jobs and who receive primary or specialist mental healthcare treatment for moderate to severe mental illnesses, which can occur in combination with addiction problems. The two main criteria for entering the IPS program was that the participant had motivation to work and was receiving mental health treatment. The "In-house follow-up" team worked with wider user groups, including people who do not receive mental health treatment, immigrants and youth, among others.

Regarding the offices in this study, the intake criteria decisions in both offices were conducted in a rather pragmatic and not very transparent way, and the intake practices also changed over time. In Office A, informants emphasized the zero exclusion criteria of IPS and that the service would be available for those who needed it. In Office B, informants highlighted that the service was intended for clients with complex problems. Youth and immigrants are generally prioritized groups in NAV, so they were also prioritized in referrals to IPS and "In-house follow-up" at both offices. Most clients using IPS services in the case offices had various mental health diseases, including anxiety, depression and bipolarity. There were also clients in the "In-house follow-up" group with mental health problems. The age span of patients in the two services ranged from 18 years to around 65 years. Some clients had physical and somatic problems, as well as substance abuse and addiction problems. Many clients had been out of employment for a significant length of time. Some had immigrant or refugee backgrounds and lacked relevant education. There were also clients without mental or somatic problems who were closer to employment.

Concluding Remarks

In sum, as complex street-level organizations, NAV offices are ideal settings for studying frontline dynamics involving interactions between old and new institutional frameworks, managers, professionals and clients. The IPS intervention is a useful case for studying evidence-based implementation because it is an example of a rather rigid service model based on a fidelity framework and manuals. At the same time, it is based on the welfare ideals of user centeredness, empowerment and individualized follow-up.

5. Data and Methods

This chapter reviews the analytical approach, empirical material, methods and ethical considerations of the study. The aim is to provide a reflexive and transparent account that can enable the reader to assess the trustworthiness of the analyses.

Research Design

The study is an in-depth, multiple-case study based on semi-structured interviews and short-term ethnographic fieldwork in two frontline offices. The empirical material[11] consists of 81 semi-structured interviews with managers, frontline workers and clients, as well as observations from 30 days of short-term ethnographic fieldwork (approx. 160 hours) in two NAV offices (Offices A and B). This material was developed through repeated visits to the two sites between 2017 and 2019. The organizations were a mid-size office (staff under 60; Office A) in a rural municipality and a large NAV office (staff under 200; Office B) in an urban municipality.

Case studies allow for intensive, in-depth exploration with detail and richness (Flyvbjerg, 2006). A case study involves focusing on a specific "unit of study" (Flyvbjerg, 2011) or "bounded system" (Stake, 2008) and connections between the unit of study and its context. In this project, the unit (i.e., the central phenomenon) comprises the implementation activities and practices related to the evidence-based intervention within the context of frontline service organizations. The focus is on the employment specialist teams, and the activities, practices and understandings of involved actors (i.e., managers, frontline workers and clients). While my approach to the research design has been pragmatic throughout the research project, the study has also been influenced by an interpretive approach to case studies, focusing on local understandings and meaning-making (Stake, 1995).

As a multiple-case study, an important analytical strategy has been comparing activities at the two organizational sites, noting differences and similarities (Bartlett & Vavrus, 2016). Regarding studying practices, Davide Nicolini has highlighted the

[11] I use the terms empirical material, data and data collection interchangeably. However, I agree with Alvesson and Kärreman (2007, p. 1267) who note that the term "data collection" implies data is something passive that the researcher collects, while "empirical material" to a greater extent implies the researcher does something active to the data.

benefits of comparison: “Comparing practices […] shows how very different meanings can be attributed to the same practice in different places, thus producing different effects and consequences” (Nicolini, 2009, p. 132). Working with multiple cases also enables the researcher to decide whether findings are idiosyncratic to a single case or present in several cases (Eisenhardt & Graebner, 2007).

My PhD research has been part of the broader project *Frontline Innovations in the Welfare Services* (INNOWEL) at the Work Research Institute, funded by the Research Council of Norway. This larger project is dedicated to innovation processes and the implementation of labor and welfare policies in the frontline, involving data collection at three NAV offices. Being part of INNOWEL set some limits for my project regarding the overall topic, choice of offices and research methods (e.g., prescribing fieldwork and interviews as main methods). However, I have had considerable freedom in choosing what themes to investigate and how to perform fieldwork and data collection. The INNOWEL research design also involves mutual learning platforms with the offices, enabling dialogue between researchers and practitioners. In these meetings, we presented findings and engaged in discussion with the offices. INNOWEL also connected me with an international research community through collaboration with the Danish *Local Innovation in Social and Employment Services* (LISES) project at Aalborg University, headed by Dorte Caswell and Flemming Larsen. The two projects had the same reference group, consisting of Michael Lipsky, Evelin Brodkin, Rik van Berkel, Sharon Wright and Mark Considine. Discussions with the reference group were inspiring and gave me important international perspectives on the Norwegian case.

Case Selection

Since my PhD project was part of the broader INNOWEL project, the specific NAV offices had been decided upon before my research project began. The three offices in the INNOWEL project had been selected based on a dialogue between the project leader and the central NAV directorate. As INNOWEL was about innovation in frontline services, the most important selection criteria were choosing offices that were innovative and oriented toward service development, as well as located in geographic proximity to Oslo to accommodate fieldwork and data collection. The directorate provided a shortlist of potential offices, and the senior researchers chose three offices

that all agreed to participate in the project.[12] Gaining and negotiating access to research sites can be difficult in qualitative research. An important advantage of this set-up was that I had access to the sites when my project started, as the (formal) permits were already in place and the INNOWEL project was in dialogue with the office managers.

Although the offices had been determined by others, I have had considerable leeway for framing and choosing what to focus on in the offices. My conceptualization of the cases has developed throughout the study. Flyvbjerg (2006) noted how a deeper understanding of a case, which develops over time, can bring about a need to change how the researcher understands and frames the case. The framing can also be influenced in late research stages as a response to new research questions, novel theoretical perspectives and engagement with previous studies (Bartlett & Vavrus, 2016). The events, processes and dynamics of a single NAV office are very rich and complex and can be interpreted from many different angles. I started data collection with a relatively open, explorative approach to the research sites. To focus, I gradually centered attention on the IPS intervention, the employment specialist teams and related practices and interactions among frontline supervisors, employment specialists and clients.

In the thesis, I view the activities and interactions of the actors situated in the employment specialist teams, who were implementing the IPS intervention within these organizational sites, as *critical cases* (Flyvbjerg, 2006).[13] This means they have "strategic importance in relation to the general problem" (Flyvbjerg, 2006, p. 229) that I study—that is, evidence-based activation work in street-level contexts. The IPS intervention is well suited for studying evidence-based activation work, being a standardized model that defines the service features and structures of frontline work practices. The employment specialist teams were situated in organizations that emphasized service development and innovation. Each office had several years of experience with the IPS intervention. They prioritized achieving high fidelity, and the

[12] In the beginning of the project, I was involved in fieldwork and interviewing in all three offices in the INNOWEL project. To narrow the scope of the PhD project, I increasingly focused on the IPS intervention, which two of the offices had implemented. The third office then became less relevant and has not been included in this thesis.

[13] Flyvbjerg (2006, p. 229) provides an illustrative example of selecting critical cases: an occupational medicine clinic was investigating whether people working with certain chemicals suffered brain damage. Rather than choosing a representative sample of all enterprises in the area that used these chemicals, the clinic chose one workplace where all safety regulations had been fulfilled. This was a critical case, in the sense that if brain damage was found in this particular place, it was likely to be a problem at other enterprises too.

IPS services had received “high quality score” in external fidelity reviews of both sites (i.e., indicating the services had been implemented close to the model standard).

These teams, situated within complex street-level organizations, may not be “representative” cases of evidence-based interventions implementation processes more generally. As well, the IPS intervention only represents one specific form of EBP. Yet, studying these cases may reveal important aspects of the challenges and possibilities of evidence-based activation work in such street-level contexts.

Office A was in a midsize municipality in a rural area, and Office B was in a midsize city. Office A was organized into three departments with different tasks and services, while Office B also had three departments, with each department covering all services. Compared to Office A, Office B was a larger organization with more staff, an extra management layer and a larger manager group. Both offices had two employment specialist teams with around 13–14 members. In both offices, the IPS team provided services for clients receiving mental health treatment and had clients referred from these services, which had existed prior to the “In-house follow-up” program. The “In-house follow-up” teams worked with wider client groups (including people with substance abuse problems or somatic health problems, youth and refugees), who were referred from NAV counselors. Although the work in the “In-house follow-up” was mainly structured by the IPS standard, the broader target groups and the non-integration with mental health services represented deviations from the standard. Client caseloads in the offices varied but were generally higher in Office B, indicating higher pressure on the services and each frontline worker. Key characteristics of each NAV office are summarized in Table 2.

Table 2. Key Characteristics of Offices A and B

	Office A	Office B
Geographical setting	Rural municipality	Urban municipality
Staff	Under 60	Under 200
Organization	Three departments (specialized model): • Welfare (including social assistance) • Follow-up (including the youth team) • Two employment specialist teams	Three departments (generalist model): • Each department covers all services • Staff further divided in teams • Two employment specialist teams
Managers	1 top manager, 3 department managers	1 top manager, 2 vice-top managers, 3 department managers, team leaders
Employment specialist teams	• Two teams: IPS and In-house Follow-up • Both teams follow the IPS standard • Staff: 13 in Nov. 2018	• Two teams: IPS and In-house Follow-up • Both teams follow the IPS standard • Staff: 14 in Nov. 2018
Clients per worker* (approximation, Nov. 2018)	• Standard effort, situational effort: 100 • Specially adjusted effort: 40–45 • Employment specialist: 12–20	• Standard effort, situational effort: 120–130 • Specially adjusted effort: 60–70 • Employment specialist: 10–20

* NAV allocates clients to one of four categories on the basis of an assessment of support needs: "standard effort," "situational effort," "specially adjusted effort" and "permanently adjusted effort."

Data Collection

Table 2 provides an overview of the empirical material underlying the three articles of the thesis. Data collection in Office A was done through several visits to the site from 2017 to 2019. In March 2017, my PhD supervisor (who was also part of the INNOWEL project) and I conducted 11 interviews with counselors, employment specialists and managers. I started with pre-analysis of the material in the following months. This was useful, as it made me attentive to the IPS intervention and the new practices performed by the employment specialists. In September 2017, we presented preliminary findings at an office meeting and received feedback. In November and December 2017, I conducted fieldwork in the office. I returned in February 2018 and conducted additional interviews after having assessed the fieldwork material. The next round of data gathering in Office A occurred in December 2018. After working on the analysis of the empirical material in spring 2019, it became clear to me that client experiences of the service comprised a missing "puzzle piece" in the project. I therefore returned to the research site in June 2019 and interviewed 12 clients.

Data collection in Office B was also done in several rounds. Researchers from the INNOWEL team had started collecting data in spring 2017 in the office. In October 2017, I spent five days in the office, observing meetings, daily life in the office and

conducting interviews. In March 2018, 13 interviews were done by me and other researchers from the team. In March and April 2018, I spent 15 days doing fieldwork and interviews in the office. The next visit was in December 2018, when I and other researchers completed 14 interviews. While it would have been preferable to have client interviews also in Office B, time and resource limitations prevented me from doing so.

Table 3. Empirical Material

Data source	The aim	Detailed description
Office A		
Semi-structured interviews with managers and frontline workers n = 31	Understanding the actors' views, experiences and interpretations regarding their work practices, interaction with clients and organizational processes	4 interviews with office managers 3 interviews with middle managers 6 interviews with frontline supervisors 10 interviews with counselors 7 individual interviews with employment specialists 1 focus group interview with 4 employment specialists
Semi-structured interviews with clients n = 12	Understanding client experiences and views about the IPS intervention and how this affected their life situation	12 individual interviews with service participants in their workplace, in the NAV office and at home
Fieldwork and participant observation Approx. 90 hours	Understanding everyday activities and processes in the organization, service practices and interactions between the actors	Participation in meetings and daily life in the office Following employment specialists meeting clients and employers Following managers to external seminars, workshops and meetings to trace the broader IPS network Documented in field notes
Office B		
Semi-structured interviews with managers and frontline workers n = 38	Understanding the actors' views, experiences and interpretations regarding their work practices, interaction with clients and organizational processes	5 interviews with office managers 1 interview with middle manager 8 interviews with frontline supervisors 11 interviews with counselors 13 individual interviews with employment specialists
Fieldwork and participant observation Approx. 70 hours	Understanding everyday activities and processes in the organization, service practices and interactions between the actors	Participation in meetings and daily life in the office Following employment specialists meeting clients and employers Documented in field notes

Interview Methodology

Following authors like Brinkmann and Kvale (2014), I understand interviewing as an interpersonal situation where "knowledge is constructed in the inter-action between two people" (Brinkmann & Kvale, 2014, p. 35). My approach to doing interviews in the project has largely been in line with a phenomenological approach. I aim to understand social phenomena from the actor's own perspective. This entails a focus on exploring the experiences and understandings of actors in their situated context and an emphasis on providing nuanced accounts of meaning and sense-making. Seeing the interview as social interaction aligns with the principles of the active interview approach (Holstein & Gubrium, 1995). In keeping with this, Holstein and Gubrium see knowledge from interviews as constructed through the active interaction and collaboration between the researcher and participant.[14]

Interviews were conducted with office managers, middle managers, team leaders, supervisors, counselors and clients (see appendix A for examples of interview guides). The interviews were semi-structured, allowing for flexibility to following interesting topics that arose. Interviews with employment specialists focused on their follow-up work with clients, their experiences working within the manual-based approach, how they work with employers and workplace supports, as well as their collaborations with NAV supervisors and mental health professionals. Interviews with managers and team leaders were mainly about implementation issues, experiences with implementing and innovative work in the local organizational context, how they experienced the manual and working with it in daily life, as well as more contextual and organizational issues. Interviews with NAV counselors focused on their normal work practices, experiences collaborating with employment specialists, as well as how IPS affected other services and questions regarding the more general "mood" in the office.

The key informants were interviewed up to four times. The purpose of repeated interviews was to gain insight into how organizational processes develop over time, to gain a rich understanding of informants' situated experiences and viewpoints and to revisit topics from earlier interviews in greater detail. While I have conducted a

[14] These approaches to interviewing are, in my view, mainly consistent with the strong attention paid to situated sensemaking in organizational ethnography (Ybema et al., 2009b) and to the emphasis on situated activities and understandings in the practice perspective.

majority of the included interviews, and nearly all interviews with the employment specialists, some interviews were done by other researchers in the INNOWEL research team. Interview guides and topics were coordinated by the team. Interviews lasted between 45 minutes and 1.5 hours. All interviews were transcribed by external transcribers.

Informants draw on cultural resources and scripts when talking about a given organization (Alvesson, 2003). They can also be aware that they are "speaking for posterity" (Hammersley & Atkinson, 2007, p. 110), which can affect what they say and how they say it. It can be a challenge to move beyond the "surface level." For example, employment specialist informants in Office A were generally very positive about their work situation and IPS, and in early phases of data collection I worried that I was only getting "frontstage" accounts. Combining interviews with fieldwork was valuable to understand more of the "backstage" processes and dynamics in the offices. My impression after spending more time with informants was that they were generally being genuine and sharing their experiences in a straightforward way.

Ethnographic Fieldwork

The fieldwork in Office A took place in November and December 2017 and in Office B from March to April 2018. Ethnographic fieldwork can be defined as "the firsthand experience and exploration of a particular social or cultural setting on the basis of (though not exclusively by) participant observation" (Atkinson et al., 2007, p. 4). Observation enables the researcher to capture accounts of actions, activities, meanings and beliefs as they unfold naturally in real life (Ybema et al., 2009b).

While classic ethnographic fieldwork typically lasts a year or longer, this study was influenced by more pragmatic conceptions of fieldwork from organizational ethnography (Neyland, 2007; Ybema et al., 2009a).[15] Following Rhodes (2014), the use of ethnographic methods can be flexibly adjusted to fit the project, research question, empirical setting and obstacles in the field. The research design in this study, being

[15] Approaches like the "mini-ethnographic case study" (Storesund & Mcmurray, 2009), "part-time fieldwork" (Fangen, 2004) and "hit-and-run ethnography" (Rhodes, 2014, p. 320) involve shorter field visits, collaboration in research teams, multiple sites and the use of varied methods.

embedded in the larger INNOWEL project, was based on shorter fieldwork periods and repeated visits to several offices, rather than one long fieldwork session at one site.

In the Field

My general approach to the fieldwork was to "follow actors […] in their wheelings and dealings" (Waal, 2009, p. 32). In both offices, I mainly focused on the employment specialist teams. I spent time in their office spaces, engaging in informal conversations. I also talked with counselors and managers in other departments, for example when spending time in the lunch areas or meeting people by the coffee machine. Each day I tried to find out about future meetings that I could participate in. Meetings were useful for observing team dynamics and interactions. I "shadowed" (Czarniawska, 2007) employment specialists as they traveled within the local district to meet employers and clients. Joining employment specialists on their trips out into the local community was important for gaining insight into their practices when meeting clients and employers. I was not present in the offices every day but tried to be there three to four days per week.

As part of fieldwork, I also traced connections between the employment specialist teams and other actors. In Office A, I followed informants from the office to seminars and workshops arranged in other cities in the wider region. The main motivation was to explore activities and understandings in the broader networks of the practice field, where people from different NAV offices and other agencies met each other. I also observed some meetings between employment specialists and mental health professionals at both research sites, as I had an interest in focusing on inter-professional collaboration between NAV and mental health services within the IPS model. Although these efforts gave me a deeper understanding of the IPS model and broader network, the empirical material from these parts of the fieldwork has not been directly used in the articles included in this thesis.

Field notes were written by hand. Compared to writing notes on a laptop, notetaking by hand allowed me to be more present in the situations. It also reduced the risk of creating separation between me and the informants. The field notes included descriptions of meetings, conversations and observations. I later typed these notes into digital text and included reflections and reactions on the material. I generally did not record any audio in fieldwork situations, with the exception of one team meeting in Office A, where I explicitly asked for consent from participants prior to recording.

Field Relations and Positionality

The researcher enters the research site with preconceptions, expectations, biases and prior knowledge. The NAV offices represented an unfamiliar setting to me, being an outsider with no personal experience working in NAV. I have prior experience from applied research on social housing, substance abuse follow-up and how municipalities organize their services, and I have done fieldwork and qualitative interviews in different service contexts. Nevertheless, I was surprised at the complexities of the NAV offices, characterized by a whirlwind of activities, interactions, talk of rules and regulations, tacit knowledge, bureaucratic talk and professional discourses. On the one hand, experiencing "stranger-ness" (Schwartz-Shea & Yanow, 2011, p. 29) in the field is an advantage, as it makes it easier for the researcher to notice taken-for-granted meanings of the situated actors. On the other hand, my relative unfamiliarity with NAV made fieldwork a humbling experience, as it took time for me to make sense of the local activities, practices and understandings in these settings.

My positionality also influenced the perspectives I took and how I connected with informants. With an educational background in sociology and social anthropology, my inclination was to ground the study in the specific activities and practices taking place in the everyday interactions between managers, frontline workers and clients. As a mid-30s white male with a social background of growing up in the countryside, I am familiar with the culture in rural municipalities in Norway and the challenges that may exist in such communities—e.g., unemployment and social marginalization. I also have experience with mental health issues. Being able to relate to such experiences was especially valuable when doing interviews with clients.

I aimed to enact a researcher role as a curious observer, asking naïve questions and staying flexible and attentive as situations unfolded. As a person, I am rather shy and prefer to observe social interaction than take center stage. However, I am genuinely interested in people and the things people do. In my view, I established trust-based relationships with informants and gained access to both front- and backstage dynamics in the organizations. My prior experience from interviewing and fieldwork also gave me some advantages in connecting with informants. Managers and staff were generally friendly and welcoming. The repeated visits to the offices over a two-year period also contributed to strengthening relationships, as I met the same informants several times. There was a lot of humor in daily office life, and over time I was increasingly included

in the friendly banter. There were also informants sharing reflections about difficulties they faced in work with clients and frustrations about office management.

Analytical Approach

The analytical approach in this study is based on an abductive logic of inquiry. This approach involves alternating between previous literature, theory, empirical material and findings (Timmermans & Tavory, 2014). The notion of an abductive puzzle is central in this approach. A puzzle is "something about the social world that is odd, unusual, unexpected or novel" (Abbott, 2004, p. xi). Such puzzles can come from tensions between expectations the researcher brings to the field and what they observe and/or experience there or appear in later analytical phases of the research process.

The three articles can be viewed as being about three conceptual puzzles I became aware of when comparing expectations based on previous literature with empirical data and fieldwork experiences. In very simple terms, Article 1 is a response to a contradiction between expectations from the street-level literature, where frontline supervisors seemed to be quite passive administrative actors, and my fieldwork observations of very active and engaged frontline supervisors, acting as institutional change agents and making policy decisions on a daily basis. Article 2 was developed based on expectations prior to fieldwork of finding quite rigid and similar evidence-based frontline practices in the two settings. The IPS literature I was familiar with at the time seemed to highlight rigidity, rule-following and fidelity to the standard model, and both offices had high fidelity in repeated reviews. However, when comparing the two research settings, I observed that employment specialists had different approaches to practice and the intervention itself, representing a puzzle. Article 3 was developed based on a contradiction between the literature on evidence-based interventions, generally claiming these constrain and limit client relations, and my findings of flexible client–frontline worker interactions within IPS as a case of a standardized intervention.

When analyzing the empirical material, I mainly followed the principles of qualitative content analysis, specifically thematic analysis (Braun & Clarke, 2006). Thematic analysis can be viewed as a method for identifying, analyzing and reporting patterns (i.e., themes) within data. It involves the following four main phases: familiarization, coding, development of themes and writing up of analysis. Analysis is not a linear process and involves movement "back and forth as needed, throughout the

phases" (Braun & Clarke, 2006, p. 86). Braun and Clarke have noted that it is compatible with different epistemological orientations, including inductive, deductive and abductive approaches.

The first phase, *familiarization*, involves acquainting oneself with the material through active reading with an open mind, identifying possible patterns, limits, constraints and noting ideas. First, I read through the interview transcripts and recorded ideas and reflections. The *coding* phase involves organizing data into meaningful groups. The codes identify specific features of the data that appear interesting. Coding was time-consuming work, which I did in several rounds throughout the project when working on the specific articles. Coding can be done inductively (from data upward), deductively (from theory downward) or as an interplay between theory and data. In the beginning, I mainly worked from the data upward in an inductive way. Later, I worked more abductively by viewing data and coding in light of theoretical frameworks and expectations, focusing on tensions, puzzles and the concrete activities of the actors. I used software to code (in an early phase, HyperResearch, in later phases, nVivo). The third phase, *development of themes*, involves sorting data into categories and identifying patterns in the data. Codes are analyzed and combined to form broader, overarching themes. Developing themes involves "messy" processes and several rounds of trying out categories and themes, reviewing and revising. I used thematic maps, tables and visualizations as aids in this work. The fourth phase of thematic analysis, *writing up the report*, involves providing a coherent account of the story that also shows evidence supporting the themes.

Data analysis was closely connected to the work on each of the articles. I have described the methods and analytical steps in the Method sections for each of the articles, so it is not repeated in detail here. In two of the articles (Articles 1 and 2), comparing the two cases was a central strategy. I was inspired by Nicolini's approach of "zooming in and zooming out" and "follow the practice" (Nicolini, 2009, p. 121). The approach involves first "zooming in" on ongoing action taking place in a particular site to make sense of the local activities and understandings. "Zooming out" is mainly done by comparing sites (as in Article 2), noting differences and similarities between practices, ways of doing things, understandings among actors, local dynamics and interactions, rules and procedures and other factors. When working on Article 1, I combined this with table frameworks from Miles et al. (2014). In Article 3, I focused on

the experiences of clients and the interactions between clients and employment specialists.

Performing the analysis and writing-up the articles have been challenging in different ways. In practice, analysis is integrated with writing in qualitative research, as the writing process is essential for making connections between theory and data (Cloutier, 2016; Schwartz-Shea & Yanow, 2009). Generally, determining how to frame and conceptualize the papers has been difficult. In the early phases, I tried to develop ideas and paper drafts that were too complex, including multiple actors, organizational sites and levels. Through processes of trial, feedback and revisions, the framing and focus of each article was gradually simplified and narrowed down (e.g., focusing on specific actors like frontline supervisors in Article 1 and employment specialists in Article 2). It has also been a struggle to fit extensive and complex qualitative data into short, journal-length articles. Specifically, I struggled with using material from the fieldwork in the articles, and in the end mostly utilized interview material. The COVID-19 pandemic has made the analysis and write-up phases demanding by creating a sense of social isolation. Excepting shorter periods with more relaxed regulations from the university, I worked in a home office from March 2020 to February 2022. On the positive side, this enabled deep work, and I maintained relationships through digital platforms. On the whole, however, the pandemic effectively reduced my exposure to useful ideas and perspectives by limiting social interaction with supervisors, colleagues and the broader research community.

Methodological Reflections

Credibility in qualitative research refers to the trustworthiness of the findings (Tracy, 2010). The central criteria for establishing trustworthiness in qualitative research include rigorous and systematic research practices in the various phases, thick description, triangulation, transparency and reflexivity (Schwartz-Shea & Yanow, 2011; Tracy, 2010).

Thick description (Geertz, 1973) can be defined as providing “in-depth illustration that explicates culturally situated meanings” (Tracy, 2010, p. 843). This involves presenting places, situations, actors and interactions with sufficient details and nuance to convey that the researcher was present and able to interpret interactions and events in culturally sensitive ways. Throughout the project, I faced tensions between providing

(sufficiently) thick descriptions and writing journal articles within the given word limits. Within the constraints of an article-based dissertation, there were many tough decisions regarding how to conceptualize the material and what to include and exclude. Overall, I have tried to put considerable emphasis on including actor voices and perspectives in a transparent way and to stay attentive to context-sensitive meanings (e.g., by providing background information to enable reader interpretations of findings). To improve trustworthiness and transparency, I have also used tables to present empirical material in a condensed and organized way (Cloutier & Ravasi, 2021) and included additional supplementary material.

Triangulation refers to using two or more methods to examine the same research subject to improve research credibility (Tracy, 2010). Combining different sources of data can confirm and strengthen the findings. This study is based on a combination of interviews and fieldwork, which enabled me to explore evidence-based activation work from different perspectives at two organizational sites. For example, while observation offered insight into the hectic and sporadic episodes of everyday activities, interviews with employment specialists were crucial to understand the long-term trajectories and processes of the individual clients. Triangulation can also extend to using different combinations of data sources, methods, theoretical frames and researcher viewpoints. Exploring different combinations of methods and theoretical lenses enabled me to improve interpretation and deepen my understandings. A specific challenge I encountered was how to make use of ethnographic material in the research articles. In some earlier drafts, I used more field notes (e.g., describing meeting situations), but it was difficult to make the text work within the limited space. I approached this by focusing more on presenting analysis of interview transcripts. However, findings and insights from fieldwork were crucial in terms of developing robust understandings, developing interpretations and preserving connections between meanings and their local contexts.

Transparency refers to being open and honest about the research process. This is done by revealing and reflecting on research decisions and activities, as well as by disclosing challenges and “twists and turns” along the way. This chapter, in particular, was written with transparency in mind, revealing the challenges and choices I have made throughout the project. To increase trustworthiness, I also aimed to be transparent

in the research articles, describing research design, methodological choices and analysis within the constraints of the article format.

Reflexivity, closely related to transparency, can be understood as "honesty and authenticity about one's self, one's research, and one's audience" (Tracy, 2010, p. 842). In particular, this concerns the researcher being aware of and reflexive about their own positionality in relation to informants and fieldwork, as well as values and biases throughout the phases of research. While I have reflected extensively on my research and persona throughout the process, the articles contain little explicitly self-reflexive passages, in part because they were trimmed to fit the different journal styles. I have attempted to include more reflections and self-reflexivity in this chapter.

Ethical Considerations

Ethical considerations are a central part of research practice and run through the process from the early design stages to publishing the results and beyond (Webster et al., 2014). Central ethical principles include the idea that participation should be based on informed consent, be voluntary, not make unreasonable demands of participants and avoid adverse consequences and ensure that anonymity and confidentiality are preserved. While formal aspects of ethics are important, ethical conduct involves continuous reflection throughout the research project.

The INNOWEL research project was formally approved by the Norwegian Centre for Research Data (NSD; see appendix D).[16] The approval includes the PhD project as it is integrated within INNOWEL. Regarding data protection, all data and interview transcriptions were stored on a secured server within the Oslomet university infrastructure in compliance with relevant regulations. Interviews were anonymized, and each interview was given an identification code. Data analysis was mostly done digitally. Printed interviews were kept in a locked drawer in my office at Oslomet, and shredded after the analysis work was completed.

Participation in research should be based on informed consent, meaning that participants have all necessary information to decide whether to take part in the research and that participation should be voluntary and free from pressure (Webster et al., 2014).

[16] NSD is a national archive for research data. They also have a department for privacy protection, processing project applications from Norwegian research institutions.

Before each interview, I made clear the purpose and aims of the research project, indicated that the research project was independent from NAV, participation was voluntary and could be withdrawn at any time, information about individuals would be treated confidentially and not shared with NAV, and participants would be made anonymous to ensure confidentiality in publications resulting from the project. Participants received written information about the INNOWEL research project and a consent form. All participants signed the form. The consent forms were stored safely in a locked drawer in the office at Oslomet.

The issue of confidentiality has added ethical importance in this study because although the offices are anonymized in publications, they may be recognizable to people knowledgeable about the field of employment and welfare services in Norway. Although the number of NAV offices with IPS services has greatly increased in recent years because of the *In-house Follow-Up* program, few offices had implemented IPS back in 2017 when data collection started. The NAV offices were not promised anonymity when entering the INNOWEL project, in part because they would participate in collaborative learning workshops. My assessment has been that the offices remain anonymous for an international audience and for purposes of Norwegian public debate, but there are risks of identification among people in NAV and the broader welfare system. For example, the organizational context has been described in the publications. This concern has made it all the more important to anonymize individual informants in the finished publications, especially with regards to service clients.

The use of gatekeepers to recruit informants is another concern that raises ethical issues (Webster et al., 2014). When I was recruiting clients in the late spring of 2019, a supervisor and frontline workers in the IPS service acted as gatekeepers. Working with gatekeepers had clear benefits, as they had knowledge about relevant participants. In practice, it was also the only way to reach clients. However, it was important to ensure that the gatekeepers did not exclude some participants from participating and that people participated voluntarily and did not feel obligated to take part in the research. I had a positive dialogue with supervisors in the service both before and during this fieldwork. To ensure a range of participants reflecting diverse experiences and situations, I also provided criteria for participant selection. For example, to avoid exclusion, one criterion was including participants with both positive and negative service experiences. I also provided information about the project that could be given to

potential participants. My impression was that the individuals I interviewed all participated voluntarily, appreciated the opportunity to speak about their experiences and wanted to share their viewpoints regarding IPS and NAV, both positive and negative. Although only a few of the participants I interviewed had neutral or negative experiences about the IPS service, my assessment was that the participants were diverse and that stakeholders had been open, helpful, thoughtful and constructive when assisting in the recruitment of study participants.

The researcher has a responsibility to avoid harm and adverse consequences for informants (Brinkmann & Kvale, 2014; Webster et al., 2014). In the different phases of the research project (planning, fieldwork, data analysis and publication), I have tried to be reflexive about the rights and vulnerabilities of participants, as well as issues of researcher positionality and power. The proximity between researcher and participant in interview situations and the unpredictability of what is said can impact participants in unintended ways. For example, informants may say more than they intended to say and regret things later. The interviews with frontline workers focused on relatively non-sensitive issues related to work practices and service development but also involved reflections on working conditions and personal experiences. The interviews with clients about their service experiences represent the most sensitive material in the project. I tried to make the purpose of the interviews clear, as well as their choice in deciding whether to answer the questions and that they could withdraw from the interview at any time. The interview guide questions focused on experiences with IPS and NAV services but also included questions on participants' current life and work situation. These interviews were conducted as flexible conversations, and I did my utmost to ensure a relaxed, open and respectful atmosphere.

6. Summary of Articles and Findings

This chapter presents the findings of the three articles presented in this thesis. The articles form a movement of implementation activities as enacted by the main actors focused on in this thesis—i.e., managers and frontline supervisors (Article 1), employment specialists (Article 2) and clients (Article 3).

Article 1

Title: "Handling tensions in frontline policy implementation: Legitimating, interpreting, and shielding a disruptive intervention"

Status: Published in International Journal of Public Administration

This article examines the implementation of the intervention by exploring tensions surrounding the intervention and implementation activities of frontline supervisors. The article is placed first in the thesis because it provides a broader view and contextualization of the intervention within the organizational settings. The research question was as follows: "How do frontline supervisors handle tensions when implementing a policy intervention?" The article's analytical approach first identifies tensions surrounding the IPS intervention, and then identifies the strategies frontline supervisors used to address tensions. The article draws on institutional theory and a practice perspective and is based on a study of two NAV offices. The empirical material includes a total of 69 interviews with managers, supervisors, counselors and employment specialists, as well as ethnographic fieldwork.

The article is primarily framed to contribute to the literature about frontline actors and policy implementation in street-level contexts. Previous studies have examined the importance of higher-level managers (i.e., office managers and middle managers) in policy implementation (e.g., Cloutier et al., 2015; Cooper & Kitchener, 2019; Gassner & Gofen, 2018; McDermott et al., 2013; Wimmelmann et al., 2018). In a literature review, Hupe and Keiser (2019) argued that street-level theory and research have overlooked the active role of frontline supervisors in policy implementation, identifying a need for more knowledge about how these actors influence policy implementation. This article contributes to this literature by adding nuance and identifying concrete strategies and activities. Although situated in hierarchical organizations, these actors can be viewed as knowledgeable, active, professional actors with considerable agency.

Furthermore, the article identifies tensions between existing institutional rules and the evidence-based intervention. Few previous studies on implementation of evidence-based services have focused on conflicts between existing structures and the new rules and practices introduced by a given evidence-based intervention (Björk, 2016a). The identified tensions are also relevant to the literature about contradictions between street-level organizations geared toward "one-size-fits-all" solutions and the implementation of individualized activation services (Fuertes & Lindsay, 2016; Hansen, 2020; Howard, 2012; Rice, 2017).

One set of tensions in this study concerned the use of resources in the organization and disagreements between various stakeholders. The existing procedure was to refer clients to external activation providers, while the intervention, on the contrary, involved establishing in-house services and individualized follow-up. Some actors on both the local and regional levels in NAV advocated to continue in the standardized way (prioritizing work with larger client groups), while others supported moving toward more resource-intensive, individualized follow-up. Another set of tensions involved conflicts between old and new rules, procedures and beliefs. For example, central intervention principles contradicted existing documentation requirements and practices regarding client activities. A third set of tensions surrounded the employment specialist as a new frontline worker role in organizations. These tensions were related to status differences and collaboration problems between different groups of frontline workers (e.g., counselors and employment specialists) and contradictions between adhering to intervention rules and following professional discretion.

The study identifies three strategies enacted by the frontline supervisors to cope with tensions. These strategies are conceptualized as sets of purposeful actions and activities that form patterns (Touati et al., 2019). These frontline supervisors influence local policy implementation by actively framing problems and solutions in the organizations in ways that support the intervention (*legitimating* the intervention), by translating the rules of the intervention into frontline practice, by contributing with expertise about the intervention upward in the organizations (*interpreting* the intervention) and by protecting the intervention from resistance in the organizational settings (*shielding* the intervention).

The legitimating strategy involves framing problems and solutions in specific ways so as to promote the intervention as the solution. For example, to legitimate the shift

from external activation providers to building up in-house service provision capacity, the supervisors voiced concerns about problems associated with referring clients to external activation providers, pointing out the benefits of establishing in-house services. To do so, they drew on their extensive frontline experience. The interpreting strategy involved activities of translating more or less abstract rules into concrete frontline practices—e.g., shaping frontline practices through supervision and monitoring activities. Supervisors handled tensions through active engagement and navigation between actors and interests, drawing on their extensive frontline knowledge. As the supervisors had an important intermediary role between management and the frontline, interpreting also involved channeling views, experiences and analyses from the frontline upward to management. The shielding strategy involved activities to protect the intervention from being adversely affected by different organizational conditions and problems. This included increasing task specialization, team restructuring, developing new recruitment policies, buffering rules and negotiating with office management.

This article addresses the overarching research question of the thesis—How is an evidence-based intervention implemented in practice?—by examining the tensions and contradictions that arose between the existing organization and the intervention in implementation processes. It foregrounds the concrete activities and understandings of the frontline supervisors responsible for the employment specialist teams. The article shows the relevance of viewing these actors as knowledgeable, active and professional, with considerable agency, even when situated in NAV offices that are bureaucratic hierarchical organizations.

Article 2

Title: "From "what works" to "making it work": A practice perspective on evidence-based standardization in frontline service organizations"

Status: Published in *Social Policy & Administration*

This article investigates how the IPS intervention was implemented in two NAV offices. It is a core piece of this thesis, as it focuses on intervention-based practices in two organizational sites by studying everyday activities and shared understandings among employment specialists and managers (Schatzki et al., 2001; Smets & Jarzabkowski, 2013). The research question was as follows: "How is the evidence-based standard

made to work in practice by frontline workers in everyday service provision?" The article conceptualizes the IPS intervention as a standard (Timmermans & Epstein, 2010) and as an embedded model of EBP (i.e., bringing research into practice through fidelity scale and manuals; Nutley et al., 2009). The article examines the activities and understandings of employment specialists in each office, identifying different practices at the two sites. The article also investigates why the standard is shaped in different ways in the two offices by comparing relevant organizational conditions. The article is based on 60 interviews and ethnographic fieldwork conducted from 2017 to 2018.

The article contributes to the literature on the challenges of implementing evidence-based standards and tools in professional frontline practice (see e.g. Bergmark et al., 2018a; Høybye-Mortensen, 2013; Petersén & Olsson, 2014; Ponnert & Svensson, 2016; Skillmark et al., 2019; Skillmark & Oscarsson, 2018) and to a growing literature examining the interplay between standards and the organizational context of professional work (Bosk, 2019; Nordesjö, 2020; Sandholtz, 2012; Sletten & Bjørkquist, 2020). The article provides important knowledge about activation practices within the evidence-based standard, characterized by reflexive, relational and professional work. Another contribution is to reveal the complex and mutual interplay between the standards, practitioners and organizational conditions, leading to different practices in different sites.

The article zooms in on team practices in each office, finding two different ways of practicing the evidence-based standard. This was labeled as a "practice shift" in Office A from inward to outward orientation toward employers and as a "practice revival" in Office B with a shift to the "traditional" service practices of a holistic orientation toward clients. The standard creates a space for new work practices, contrasting with existing practices in the organizations. These practices had professional characteristics in terms of promoting flexible, client- and employer-centered work. The study highlights the dynamic and bidirectional relationship between the standard and the practitioners. The local practices at each site were shaped through an interplay between the intervention, practitioners, managers and the influence of the organizational settings.

Service practices in Office A centered on developing relations and networks with employers, adherence to the rules and content of the standard, client follow-up activities structured by the standard but combined with pragmatic improvisation based on common-sense approaches, emphasis on service specialization and work division of

work with other practitioners, as well as team-building activities that contributed to a sense of positive team culture and identity. As the practitioners had been recruited externally from different businesses and industries, they were knowledgeable and skilled in dealing with employers. Although client work was challenging and they lacked professional resources, they improvised by drawing on common sense and tacit knowledge. Their understandings were characterized by down-to-earth-attitudes, motivation and a commitment to improve the local community. Informants were concerned about not doing tasks outside their jurisdiction as prescribed by the standard (e.g., administrative work) and emphasized collaboration with others (e.g., counselors and therapists).

Service practices in Office B were characterized by practitioners viewing the standard as central and as enabling comprehensive and individualized client follow-up. The standard was adapted to enable more holistic practices to address individual client problems and needs, as practitioners drew on professional knowledge (e.g., from social work) and coordinated services with other actors around each client. Employer practices were characterized by common sense and relational approaches. There were tensions in the two teams, in particular regarding performance management. Informants in Office B had social work and welfare backgrounds and past experience as NAV counselors. They contrasted the flexibility of the standard with past experiences working as counselors constrained by IT systems and procedures in NAV.

To examine why the standard was practiced differently at the two sites, the article compared organizational conditions in the offices. There were significant similarities between the two cases, as managers in both were committed to implementing high quality services in accordance with fidelity principles. However, the study identified different recruitment policies, differences in internal formal organization and management styles and contrasting ways of integrating the teams into the organizations. Of particular importance were different recruitment strategies leading to teams with very different professional compositions.

The findings contribute to the main research question of the thesis by revealing the complex dynamics involved when standards are implemented in practice, with mutual interactions between the standard, local actors interpreting and performing standard-based activities and organizational conditions.

Article 3

Title: “Evidence-based activation work and service individualisation: A case study of client and frontline worker experiences with a standardised intervention”

Status: Under review in *European Journal of Social Work*

This article approaches implementation by investigating how clients and frontline workers experienced activities within the IPS intervention, based on fieldwork and interviews from one critical case (Office A). The research question was as follows: “How do clients and frontline workers experience intervention activities?” The article investigates how the intervention was performed as situated activities and interactions between clients and frontline workers, drawing on a theoretical framework based on relational evaluation (Dall & Danneris, 2019; Koivisto, 2007). The empirical material consists of interviews with 12 clients, 18 interviews with employment specialists, counselors, team supervisors and office managers, as well as around 90 hours of fieldwork. Data was gathered between 2017 and 2019.

The article deals with the dilemma between standardization and individualization in street-level services (Hjörne et al., 2010; Nordesjö et al., 2020). Several authors have argued that evidence-based, standardized interventions constrain frontline workers from tailoring services to individuals’ needs and situations (Jacobsson & Meeuwisse, 2020; Lauri, 2016; Skillmark & Oscarsson, 2018), turning clients into passive recipients (Johansson et al., 2015). Other articles have found that interventions can improve client follow-up by strengthening professional practices (Barfoed & Jacobsson, 2012; Natland & Malmberg-Heimonen, 2016; Ponnert & Svensson, 2016; Soydan & Palinkas, 2014).

This article contributes to the field by presenting nuanced rather than dominant critical views regarding standardized interventions and the potential for individualization in the literature. The article shows the dynamic interplay between the IPS intervention (including rules and scripts for roles and activities), frontline workers with purposive agency and the individual clients with specific resources, needs, challenges and life situations. The analysis of the material on client experiences resulted in the categorization of three themes—relations, time and support. Most clients emphasized the strong relations they developed with individual employment specialists, that they were given time to develop their own processes and that they received tailored support that was attuned to the concrete challenges they faced (e.g., employer and

workplace challenges). Clients contrasted experiences of intervention-based follow-up with previous negative experiences of regular NAV services.

Regarding the frontline workers' experiences and activities, the analysis brought forth the three themes of flexibility, building relations and organizational detachment. Flexibility refers to the diverse activities these frontline workers juggled in their day-to-day work situation, spending considerable time out of office with clients in workplaces, at cafés, in their homes, on the road, as well as meeting employers. Informants experienced the client follow-up work as intense and challenging, requiring improvisation, patience and strong commitment. Building relations refers to relational and network-developing activities. The frontline workers developed trust-based connections with both clients and individual employers, working recursively to sustain the connections over time. From a network perspective, the frontline workers aimed to be support actors within the clients' network and to create and strengthen work-related networks around the clients. The organizational detachment theme illuminates the separation of the intervention-based activities from the existing demands within the organization. The frontline workers could mostly ignore normal organizational procedures and focus on intervention rules. They viewed themselves as different from other caseworkers, seeing themselves as client advocates and change actors in the organizational setting.

This detachment theme illustrates how evidence-based interventions can organize individualized service practices that break with existing structures in the organizational context. This aspect has received little attention in previous studies on evidence-based practice. Rules and content of the intervention, such as low caseloads, task specialization, attention to individual client preferences and needs and the collaborative character of the work, enables comprehensive and personalized follow-up practices.

The article has implications for discussions of professionalism in activation work. The article sheds light on and reveals the intricacies of helping clients with complex problems into employment, in alignment with previous studies (e.g., Danneris, 2018; Danneris & Caswell, 2019). The frontline workers in this case office experienced client follow-up as challenging, and there were issues with lack of boundaries and excessive involvement in individual cases. Although the frontline workers' experiences in business and the private sector was a clear advantage for employer and workplace support activities, they lacked professional welfare experience and competencies. The

findings indicate the importance of developing a diverse set of skills in the role, including both employer knowledge and follow-up knowledge based on social work and other relevant resources.

7. Discussion

This chapter first addresses the research questions and findings from the three articles. Next, the chapter highlights three arguments that have broader relevance to discussions of the implementation of evidence-based interventions in activation and social services. Limitations of the study are discussed, as well as ideas for further research.

This thesis examines evidence-based practice in activation work performed in everyday activities by actors in frontline settings. The following main explorative research question guided the project: *How is an evidence-based intervention implemented through the everyday activities, interactions and understandings of involved frontline supervisors, practitioners and clients?* Taken together, the three articles address the main research question by illuminating the activities and understandings of central frontline actors engaged with the implementation of the intervention. Answering the overall research question, the main finding of the thesis was as follows: *The evidence-based intervention was implemented in practice through continuous processes of mutual constitution between the intervention with rules and content, frontline practices performed by knowledgeable leaders and professionals, organizational conditions characterized by institutional pluralism and clients situated in their own lives with specific needs and problems.* A main finding across the articles was the *mutual constitution* unfolding in the complex interplay between the intervention, the situated actors with agency (including frontline supervisors, employment specialists, clients) and broader organizational conditions. This continuous character is related to social services being enacted in real time through ongoing interactions between service providers and clients (Noordegraaf, 2015b, p. 117).

Article 1 shows how the intervention was implemented through processes of mutual constitution between the intervention (as a set of rules and content) and the active, knowledgeable actors who made the intervention work in practice. The article focuses on how the intervention was translated by frontline supervisors who interpreted (i.e., made sense of) the intervention rules and supervised the employment specialist teams. The work of the supervisors, handling tensions through diverse strategies, had nuanced policy-making consequences, as they advocated for fundamental changes in the organization of service delivery, grounded in a concern for clients and service gaps they had identified in public service delivery, particularly regarding the most vulnerable clients.

Article 2 shows there was a mutually constitutive dynamic among the intervention rules, employment specialists, supervisors and organizational conditions in the continuous implementation processes. By prescribing rules and scripts that defined goals, service activities, phases in client follow-up and performance measures, the intervention both constrained and enabled new work practices. The employment specialists adhered to, adapted, deviated from and tinkered with the rules, drawing on pragmatic improvisation, practical know-how and professional resources. Different organizational conditions in the two offices (i.e., recruitment policies, management styles and the integration of teams in the broader organization) further influenced the implementation dynamics. This article discusses how the bidirectional dynamics among the intervention, practitioners and organizational conditions led to the standard being implemented in different ways in the offices (i.e., a shift from inward to outward orientation toward employers in Office A and a shift from bureaucratized service provision toward holistic client follow-up with social work characteristics in Office B).

Article 3 shows how the intervention was enacted in practice through concrete activities and interactions between clients and employment specialists. The study foregrounds the complex, nonlinear and relational processes between clients and employment specialists, characterized by an interplay among intervention scripts, practitioner agencies and individual client realities. Clients developed strong relationships with the individual employment specialists, were given time to go through individual processes and received work-oriented support through the ups and down of their nonlinear trajectories in an out of work.

Based on the findings, I argue that paying attention to the *continuous interplay* between intervention, the involved actors and organizational conditions is crucial to understanding implementation dynamics as they unfold in practice in these complex service settings. This argument is important because it represents a *middle ground* between implementation studies and social work literature, which both maintain rather *linear* views on the relationship between intervention and practice. On the one hand, many implementation studies emphasize fidelity and how service organizations need to change and adapt to accommodate new standards. This involves promoting a linear view of implementation that ignores how standards are adapted to address local challenges and situations in frontline settings (Durlak & DuPre, 2008). On the other hand, social work studies also tend to present a one-sided, static and rather linear view

of the impacts on practice, by concluding that such standards and tools are generally managerial and harmful for professional practice (Björk, 2016a).

The second research question was as follows: *Does implementation of the evidence-based intervention constrain service practices in managerial ways, promote forms of professional work or combine managerial and professional elements in novel ways?* The thesis finds the intervention as implemented represents a hybrid combination of managerial and professional elements. As shown in the articles, intervention rules constrained professional practice (e.g., by prescribing clear goals, tasks and performance measures) but also enabled new forms of professional practice (e.g., by prescribing flexible follow-up, low caseloads, long-term follow-up and by detaching practitioners from existing rules and procedures in the NAV offices).

Performance measures represent central managerial elements in the intervention. (e.g., spending time out of office meeting clients and employers, number of face-to-face meetings with employers each week). These contributed to the high tempo of work and work pressure within the teams (Articles 2 and 3). Article 2 identifies divergent views on the performance measures in the two offices, as some practitioners in office B had more critical views. This seemed related to the more rigid managerial styles in this office. More generally, Noordegraaf (2015a) have pointed out the need to distinguish between strict business-like or performance-based management on one hand and organizational approaches that respect professional and political dynamics on the other. Few would argue that public services should be exempt of any activity or performance measures, as these organizations need to maintain some form of accountability and transparency. The performance measures were closely connected to the core tasks and goals of the service. In the teams, the targets were negotiable and often critically discussed in the teams. Overall, the findings of this thesis are in line with scholars foregrounding the ways that managerial, bureaucratic and professional aspects of activation work can be aligned and integrated (Dall, 2020; Hansen & Natland, 2017; Sainsbury, 2008), but alignment depends on how the intervention is implemented and enacted in local settings.

The thesis findings enable a more general discussion on the possibilities, challenges and limitations of evidence-based interventions in activation and social services. Three broader arguments can be highlighted as follows:

1. Implementing evidence-based interventions is contested, interpretive and interactional work;
2. Evidence-based standardization can revitalize professional practice with social work characteristics;
3. Evidence-based interventions requires reflective, knowledgeable practitioners and managers.

Implementing evidence-based interventions is contested, interpretive and interactional work

A common conception in both practice fields and scholarly discussions has been viewing implementation processes as rational, administrative, top-down, linear and step-wise processes (Hupe & Hill, 2016; Nilsen, 2015). Standardized interventions are often expected to work in straightforward and uniform ways across sites and to be easier to implement because they are described in detailed manuals and guidelines (Dall & Danneris, 2019). The findings of this thesis, in contrast, emphasize how the implementation of the evidence-based intervention should instead be understood as contested, interpretive and interactional work among the involved actors.

First, implementation is *contested work*. This thesis has shown how the IPS intervention as it was implemented in NAV clashed with existing hierarchical structures (Article 1). It can be argued that all new interventions break with existing structures, but they do so in different ways. In the offices, there were tensions surrounding the use of resources in the organization, around workflows and standard procedures and surrounding old and new frontline worker roles. Stakeholders had opposing views and interests—e.g., concerning whether budgets should be spread across many clients or concentrated on a few. There is a tendency in the implementation literature to hold overly rationalistic and technical conceptions of street-level organizations, which overlooks the contradictions, pluralism and contested aspects of street-level work. However, the implementation of standards has political consequences, as "every standard necessarily elevates some values, things, or people at the expense of others" (Timmermans & Epstein, 2010, p. 83). Dealing with contestation, ambiguity and diverse interests are part of everyday service development (Brodkin & Marston, 2013; Cloutier et al., 2015).

Second, implementation is *interpretive work*, as the actors interpret intervention rules and engage with them in ways that are meaningful in a given local context (Article 1). Implementation activities were continuous and ongoing, as the supervisors reflected and tried to make sense of the intervention and to align service practices more fully with the rules. Interpretation involves "conceptual work" (Cloutier, 2015), meaning the establishment of new belief systems, norms and schemes viewed as consistent with the intervention, as well as drawing on these systems when supervising staff. Employment specialists interpreted the intervention rules in their ongoing service practices (Article 2). Previous authors have highlighted the role of interpretation and translation of evidence-based intervention (Björk, 2016a; Møller, 2019; Nordesjö et al., 2020; Vossen & Van Gestel, 2019)—e.g., "EBP represents a stream of ideas that actors interpret according to their beliefs and definitions of problems. […] Organizations take up ideas and translate these" (Johansson et al., 2015, p. 74). These perspectives contrast with more linear conceptions of how interventions diffuse and are adopted in organizations.

Third, implementation in complex frontline organizations can be conceptualized as *interactional* work. The IPS intervention was put into practice through concrete activities and bidirectional interactions among frontline supervisors, employment specialists and clients, as emphasized in the present thesis, but also by additional actors like counselors, mental health professionals and employers. Other scholars have conceptualized frontline implementation processes as *distributed agency*, as interactional phenomena involving interplay between diverse frontline actors (De Corte et al., 2018). Møller (2019) showed how the implementation of evidence-based practice in child protection services was far from a top-down, linear and controlled process, as multiple actors at different organizational levels were actively negotiating, contesting and making sense of how the implementation of evidence-based practice should be understood and framed.

In contrast to Vohnsen's (2017) ethnographic study of the implementation of a Danish evidence-based intervention called *Active-Back Sooner*, which highlighted the inherent instability of implementation processes of an intervention that failed as actors disengaged from it, this thesis examines what many would consider to be *successful* implementation processes—the services were stabilized within the organizations, funding had been secured, the results were good and they had gained recognition. Still, even in these "best cases," there are contestations, disagreements, actors who engage

and disengage with the intervention and a need to continually work on developing, protecting and nurturing the service, as shown in Article 1. These perspectives aligns with the broader literature viewing implementation as a dynamic, active and disruptive process involving situated actors (e.g., Cloutier et al., 2015; Cooney, 2007; Dall & Danneris, 2019; Vohnsen, 2017; Wimmelmann et al., 2018) and highlights the role of agency and sense-making in frontline work (Maynard-Moody & Musheno, 2012).

A central condition enabling the work practices among the employment specialists was the flexibility they had in everyday service life within the intervention framework (Articles 2 and 3). An important question is whether the flexibility was due to the *relaxed implementation* of the intervention or whether the flexibility was embedded in the *intervention itself*. The intervention was implemented with high fidelity in the offices, documented in annual fidelity reviews, indicating that local actors prioritized achieving correct replication of the standard. There were implementation differences between the offices related to different organizational conditions and the ways managers interpreted the intervention rules and supervised staff (Articles 1 and 2). Importantly, the intervention itself has core principles that prescribe personalized, comprehensive follow-up with attention to client needs and problems (e.g., fidelity scale points of individualized follow-along support, low caseloads and time-unlimited follow-up). These rules contributed to the opening up of a substantial space for agency and pragmatic improvisation (Maynard-Moody & Musheno, 2012) within the intervention.

From a more theoretical perspective regarding evidence-based interventions and the balance between managerialism and professional work, we can consider what standardization actually entails when an intervention explicitly prescribes flexibility, agency and individualized approaches for each client. Evidence-based interventions like IPS strongly emphasize fidelity (i.e., whether the local services faithfully replicate the standard model to achieve the effects identified in the RCT experiments; see Chapter 4). From this perspective, local deviation and adaptation of the model is viewed as a problem (Bond & Drake, 2019). It is also relevant to discuss how we should understand the fidelity concept itself, when the standard model requires practitioners to be reflexive, improvise and tailor the support toward clients' individual needs and preferences.

The broader literature on evidence-based standardization focuses on the ways that various standards and interventions differ in terms of rigidity and flexibility (Björk,

2016a; Timmermans & Epstein, 2010). If manuals or guidelines are too detailed, prescriptive or time consuming to use, they may become an obstacle to professional work (White et al., 2008). Discussing manual-based treatments and interventions aimed toward youths and families, Kendall and Beidas (2007) have argued that manuals can and should be *implemented flexibly*, creating "flexibility within fidelity" (2007, p. 16). Practitioners provide treatment within the overarching structure of the approach but are allowed flexibility in how they fulfill the main goals of the intervention, drawing on creativity and individualization as they remain sensitive to individual client situations. Durlak and DuPre (2008) have also highlighted the importance of adaptation. The findings of this thesis align well with a study of IPS services in Canada, where Menear et al. (2011) used a *skeleton* metaphor to describe the relationship between the IPS intervention framework and frontline practices. Informants experienced they had space to maneuver within the skeleton. This involved adapting the model and their practices to handle diverse clients with different needs.

Evidence-based standardization can revitalize professional practice with social work characteristics

Approaching the local activities and understandings of involved actors with a practice perspective has been useful to reveal the nuances of frontline dynamics that easily remain hidden in more structured or top-down research approaches. This bottom-up perspective has helped in nuancing dominant claims in the literature about evidence-based interventions and standards as managerialism, constraining professional autonomy and restricting attention to clients' individual needs (Herz, 2018; Herz & Johansson, 2012; Martinell Barfoed, 2014; Ponnert & Svensson, 2016; White et al., 2008). Similar critical perspectives are also central in the limited research on evidence-based activation services. This thesis provides a more positive view by foregrounding how evidence-based standardization can revitalize professional practices with evident features of social work. The articles show that while the services were oriented toward employment, the work practices were characterized by an individualized, relational orientation to both clients and employers (Articles 2 and 3). Practitioners experienced the intervention framework as supporting their work by clarifying goals and tasks while

opening up a space for agency and creativity by not specifying how to solve tasks in too much detail (Article 2).

The intervention-based practices in both offices had clear characteristics of social work. This included relational work practices with each client, emphasis on user preferences and empowerment, personalized follow-up and extensive service coordination (Johnson & Yanca, 2010). The service practices as observed were also aligned with Hasenfeld's (1999) three principles of social work (i.e., a belief system assigning moral worth to clients, individualized services tailored to individual needs, staff–client relations based on mutual trust). This finding contrasts dominant understandings in the literature, where the embedded research model of EBP (Nutley et al., 2009)—building on manuals, procedural standards and/or fidelity scales like the IPS intervention—has been particularly criticized for promoting managerialism, centralization and limiting professional discretion and agency (Bergmark et al., 2011; Gambrill, 2011; Møller, 2018; Van Der Zwet et al., 2016). As such, the present findings add nuance by providing an alternative perspective.

While social workers' professional training typically emphasizes relational work with clients, studies have found that the organizational systems of which they are part often limit this work by stressing accountability and control tasks (Hupe & Hill, 2007; Mik-Meyer, 2018). Similarly, social work studies on EBP have described a movement from a prior state of pure professionalism (e.g., professional autonomy and holistic client relations) toward less pure and more constrained practices, using evidence-based tools or standards (Jacobsson & Meeuwisse, 2020; Møller, 2018; Ponnert & Svensson, 2016). The present findings, however, point in the opposite direction: frontline practices in the frontline offices were relatively rigid and standardized, and the intervention as implemented represented a shift toward more flexible, outward-oriented follow-up work.[17] The findings align with Freier and Senghaas's (2021) study of an innovation project in German employment services, describing a shift from an *administrative logic* to a *service logic*.

[17] Rather than claiming frontline work in the NAV offices is purely bureaucratic and administrative rule–following work, the counselors should also be viewed as professionals, as they have discretion and draw on extensive education-based and experiential knowledge in addition to institutional resources. At the same time, several previous studies have emphasized strong procedural and bureaucratic influences on central tasks and procedures in NAV offices (Fossestøl et al., 2015; Gjersøe, 2020; Office of the Auditor General of Norway, 2018; Røhnebæk, 2016; Åsheim, 2019).

Importantly, the thesis argues the IPS intervention as implemented *detached* the practitioners from existing structures, demands and routines (Articles 2 and 3). This finding adds to an emerging literature emphasizing organizational aspects of evidence-based interventions (Björk, 2016a; Plath, 2014; Skillmark & Oscarsson, 2020). In contrast to previous findings that standardized tools increase administrative tasks and burdens (Lauri, 2016; Robinson, 2003), the rules of this specific intervention explicitly limited time spent on documentation, so practitioners could spend most of their time on core tasks (client-, employer- and workplace-oriented activities). While this legitimized the new work practices, it also created continuous tensions between existing organizational demands requiring documentation in client cases and intervention principles (Article 1).

Seen from a social work perspective, "lay persons" basing their practice on manuals can be understood as cases of de-professionalization (Ponnert & Svensson, 2016). As shown in Article 2, practitioners in Office A mostly lacked social work professionalism. This could raise concerns regarding obscure work practices and a lack of ethical reflexivity. However, in the context of activation work, characterized by a lack of professional standards, I argue this should not be understood as de-professionalization. Rather, the intervention legitimizes relational social work–like practices that contrast with the normal bureaucratic and administrative orientations in the NAV offices in a way that represents an alternative way forward in the field. The practitioners with non-welfare backgrounds had extensive employer knowledge that was central in their matchmaking work, a competency that previous studies have identified as lacking in activation services (Hagelund, 2016; Nothdurfter, 2016). As shown in Article 3, their work for clients, although specialized toward employment, was clearly relational, drawing on common sense practical know-how and community knowledge. At the same time, there were challenges related to a lack of knowledge about client follow-ups and problems establishing boundaries (i.e., working outside of office hours, being too committed in individual cases), which points to the need for reflexivity, team deliberation and continuous competency development within such standardized interventions.

Different standards and manuals are grounded in different knowledge bases, which can impact whether they support or constrain professional work (Høybye-Mortensen, 2013, p. 613; Ponnert & Svensson, 2016). Some standards are based on professional

knowledge and may be closely aligned with professional practice. Others are based on managerial or bureaucratic knowledge and may promote these rationales, leading to constrained frontline practices. Administrative standards often lack a knowledge base. In terms of knowledge bases, the IPS intervention is seated in SE principles promoting social inclusion, integration and recovery philosophies, although structured within a rather technical, fidelity-oriented framework. The SE philosophy underpinning the intervention is likely to be an important condition for understanding how the intervention affects frontline practice.

There has been a tendency in the literature on evidence-based social services to treat evidence-based standardization and tools as a unitary concept without acknowledging diversity (Björk, 2016a; Skillmark, 2018), although some studies have shown that different interventions have diverse contextual and local consequences (Bosk, 2019; Høybye-Mortensen, 2013). Therefore, it is important to *nuance* the dominant understandings of the professional features of evidence-based practice and highlight the need to acknowledge how *varied, differentiated and complex* the phenomena of evidence-based standards, tools and interventions are in real-life service settings.

Evidence-based interventions requires reflective, knowledgeable practitioners and managers

Scholars have identified "knowledge hierarchies" as privileging evidence-based knowledge and marginalizing practice-based knowledge within ministries and agencies responsible for delivering activation and social policies (Andersen & Breidahl, 2021; Breit et al., 2018). In the evidence hierarchy, qualitative studies, practice-based experiences and user opinions are usually placed at the bottom (Pawson, 2006). Following Dall and Danneris (2019), there is an assumption of "linear chains of causality" (2019, p. 588) in policy-oriented discussions, between implementing an evidence-based intervention and gaining outcomes of the improved labor market participation of vulnerable clients. This assumption easily marginalizes attention paid to practitioner agency, reflexivity, expertise and creativity in frontline work.

Based on the findings of the thesis, I argue that there is a need to highlight the importance of the mix of knowledge forms that characterize frontline practices for vulnerable clients. That is, coupling increasingly detailed interventions with less

competent staff is unlikely to produce the intended results. This aligns with scholars who have argued that "phronesis" (i.e., "practical wisdom"; Petersén & Olsson, 2014), understood as practice-based, experience-near and tacit forms of knowledge, is essential for performing well in the complex situations practitioners encounter (Andersen et al., 2017; Clegg et al., 2014; Petersén & Olsson, 2014). Scholars have been critical toward evidence-based practice because they believe it neglects tacit knowledge and reflexive, ethical forms of professionalism (Otto et al., 2009; Petersén & Olsson, 2014). While I agree with these researchers that standardized approaches risk marginalizing practice-oriented knowledge, I depart from them by arguing that standardized interventions can provide space for practical knowledge. Additionally, I argue that such interventions *require a combination of knowledge forms* to work in practice. Implicitly, this is a critique of fidelity frameworks that ignore or downplay the role of practitioner competency. Previous studies on evidence-based standards in healthcare have also highlighted the role of tacit knowledge and additional skills to ensure that procedures and guidelines work (Gabbay & May, 2004; Johannessen, 2017; Timmermans & Berg, 2003).

In the everyday activities serving clients and employers, pragmatic improvisation based on practical know-how combined with professional and education-based knowledge was essential to be able to help clients. As shown, practitioners combined intervention rules with additional knowledge—e.g., from professional experience as employers in Office A or from social work and psychology in Office B (Article 2). Their practices were not characterized by existing administrative or bureaucratic structures but had a flexible, improvisational and creative character akin to that of reflective practitioners (Schön, 1983). As found in previous research (Danneris, 2018; Danneris & Caswell, 2019), the nonlinear and complex trajectories of individual clients have created extensive challenges and "messiness" in everyday service work. Clients moved in and out of treatment, work, sickness, problems and possibilities (Article 3). Practitioners experienced the work as demanding, intense and, at times, all-consuming (Articles 2 and 3). In the work toward employers, practitioners had to engage with people, build trust and manage differences. There was a continuous need to interpret situations, relate to different cultures (i.e., workplace cultures), remain "tuned in" and stay responsive to other people's reactions. As Nothdurfter and Olesen (2017) have argued, activation work requires knowledge from a variety of fields, including relational

competency, local labor markets, welfare systems, about ethic and with regards to physical and mental health problems. In practice, practitioners mix different knowledge forms to address challenges they face.

As Maynard-Moody and Musheno (2003, p. 10) have observed, "a great deal of street-level work remains hidden from direct supervision." Importantly, the concrete, practical work efforts of the employment specialists went beyond what was "made visible" in the fidelity framework and review evaluations. The work was characterized by a strong service motivation and relational commitments to individual clients (Articles 2 and 3). In a previous study of IPS, Cocks and Boaden (2009) described employment specialists' attentiveness to clients in more holistic terms than the intervention rules allowed (e.g., regarding housing, economy, social networks, crisis events), which played a decisive role in terms of helping clients maintain jobs. It can be argued that this more or less *hidden work* likely contains some core (causal) components (Bredgaard, 2015; Cartwright, 2009) enabling positive outcome effects of the intervention, as shown in numerous studies (see e.g., Brinchmann et al., 2020)—e.g., close, concrete, relational and personalized follow-up activities for individual clients and employers and integrated collaboration with other professionals.

Interventions also depend on reflective, knowledgeable managers. In the offices, supervisors played a crucial role in terms of handling tensions, interpreting rules and content and supervising staff (Article 1). Most supervisors in the present study had substantial professional knowledge and personal experience as frontline workers. Scholars have shown how increasing pluralism in frontline organizations, conceptualized as different institutional rule sets, have opened up "creative spaces" (Lowndes, 2005, p. 291), increasing space for institutional change agents to navigate and enact institutional change (Durose, 2011). In both offices, supervisors had gained status as knowledgeable actors able to interpret and implement the intervention in appropriate ways (i.e., to reach high fidelity and good service quality). This increased their legitimacy and impact in the ongoing development processes. However, there is a risk, in fidelity-based schemes like the IPS intervention, of relatively powerful supervisors endorsing approaches to implementation and staff supervision that are too rigid. The findings underline the general importance of knowledgeable supervisors with situated skills and competencies who are reflexive about the dilemmas involved in

implementing evidence-based services (e.g., regarding the balance between rigidity and flexibility).

Following this line of thought, it is relevant to revisit the research-based practitioner model of EBP, combining professional expertise with client perspectives and best evidence (Nutley et al., 2009). There is a need for flexible professional roles with explicit room for rule adaptation, which also acknowledges that practitioners will move outside of the intervention model (e.g., by incorporating additional and alternative knowledge resources). However, this can conflict with fidelity frameworks like IPS if too rigidly implemented. While acknowledging how standardized interventions can revitalize and support practitioners, there is also a need to recognize the limits of intervention rules and content. The rules cannot specify in detail what decisions are to be made in each individual case, and there is a need for practitioners to improvise, adapt and move beyond the intervention to solve emerging challenges.[18] Practitioners face ethical and professional dilemmas when determining appropriate actions, as they make decisions with moral implications that can directly affect the lives of clients (Dall, 2020).

Limitations and Further Research

In this thesis, implementation of the IPS intervention in the two frontline organizations has been conceptualized as critical cases (Flyvbjerg, 2006), meaning that these cases have strategic importance to evidence-based activation work as a phenomenon. As such, I argue the findings are relevant to broader understandings of evidence-based work in street-level organizations characterized by institutional pluralism and contested service delivery. The hybrid character of the intervention, mixing managerial and professional elements, makes it suitable to investigate broader issues of professionalism in activation work. While the IPS intervention is a complex intervention, it also has features in common with other evidence-based interventions—e.g., emphasizing contemporary

[18] Complexity also increases with the distribution of tasks and responsibilities among different professionals (i.e., employment specialists, counselors, mental health professionals and others), and there are trade-offs and dilemmas related to who should do what, how to coordinate, and what responsibilities the different service actors actually have with regard to individual clients. This requires navigation between different concerns.

welfare ideals like centering user preferences, comprehensive and individualized work practices and the integration of services.[19]

At the same time, this thesis examines only one particular intervention in specific organizational settings. I do not claim that the findings apply to all other EBPs and standardized interventions. For example, the evidence-based activation policies implemented top-down in Denmark (Andersen & Breidahl, 2021) are different than standardized assessment tools (see e.g. Skillmark & Oscarsson, 2020), tools used in child protection agencies (Sletten & Ellingsen, 2020) and the IPS intervention.

As case studies, there are limitations regarding the transferability of the findings. The NAV offices were among frontrunners in the field regarding evidence-based service developments. However, this may make them less "representative" of NAV offices in a strict sense—e.g., because different offices may hold more neutral, reluctant or negative views on evidence-based services. There is also a risk that the empirical material in this study may have been biased in different ways. A positive orientation toward evidence-based services might introduce bias, for example, because actors have positive or enthusiastic attitudes about their work. However, the combination of fieldwork and repeated in-depth interviews over a two-year period have in my view reduced the risk of bias by enabling (some) access to behind-the-scenes dynamics in the offices.

Another limitation of the study is the lack of attention to the full range of actors involved with the IPS intervention. The three articles focus on frontline supervisors and employment specialists because they related to the intervention on a daily basis. The counselors, mental health professionals and employers were also relevant actors, although their work was not structured by the intervention in the same way. However, the empirical material contains data from all these actor groups, and this broader material has informed analysis in the articles.

A further limitation is the inadequate attention paid to the ways that conditionality demands influenced work practices and client experiences within the IPS intervention. Although Norwegian employment services are, comparatively speaking, characterized

[19] Examples of social service interventions with similar features include Housing First (Nelson et al., 2012; Snertingdal & Bakkeli, 2015), ACT (Phillips et al., 2001), Family–Nurse Partnership (Olds, 2006), the HOLF intervention (Malmberg-Heimonen & Tøge, 2020) and various evidence-based interventions in vocational rehabilitation (Smith et al., 2017).

by an enabling approach, and issues of sanctions and conditionality did not appear as substantial topics in the client interviews, activation services remain a mix of demanding and supportive elements that influence how activation work is performed and what tensions are involved. In particular, more attention is warranted concerning client experiences with conditionality and how this affects service delivery.

Regarding IPS-based services in NAV, an interesting avenue for further research would be examining the interplay between employment specialists focusing on employment follow-up and counselors focusing on administrative tasks. In particular, the balancing of "good cop" and "bad cop" roles (Sainsbury, 2008) in this collaboration could be a topic for future research. There is also a need for knowledge about collaboration practices between employment specialists and mental health professionals (e.g., with a focus on tensions and contradictions related to their different professional approaches and the different institutional and organizational environments in which they are embedded).

It would be useful to compare follow-up practices within the IPS interventions implemented in organizations situated within different activation policy regimes. This study has been situated within policy a context characterized by an (overall) enabling approach to employment services, emphasizing support and skills training to improve employability. Although the fidelity framework is intended to create uniformity across country and service contexts, it is reasonable to expect that the intervention rules and content will be interpreted and implemented differently by actors situated in service contexts characterized by demanding policies with extensive behavioral requirements, monitoring and sanctions.

From a broader perspective, there is a need for more theoretically informed and comparative studies of evidence-based interventions, focusing on practices and interactions among frontline actors. This could include comparing practices within different interventions in different service settings (e.g., police, nursing, education and social work) while staying attentive to the implementation dynamics, intervention content, practitioner agency and organizational conditions, as well as how these factors interact.

8. Conclusion

This thesis examines evidence-based activation work by studying the implementation of an evidence-based intervention in two street-level organizations as critical cases. The study draws on ethnographic fieldwork and interviews conducted in two NAV offices that had implemented the IPS intervention. The thesis is based on the view that it is useful and interesting to explore implementation in practice by focusing on activities, interactions and understandings among situated actors involved with intervention activities—namely frontline supervisors, employment specialists and clients.

Drawn together, the three articles of the thesis show how the evidence-based intervention was implemented in practice through dynamic and continuous processes of mutual constitution among the intervention, leaders, professionals, organizational conditions and clients. In this interplay, the intervention shaped frontline practices, but the activation workers also had agency as they interpreted intervention rules and content in light of the situated challenges and situations they faced. This included the adherence to, adaptation of, deviance from and tinkering with intervention rules, as well as the mixing of the intervention content with additional knowledge and professional resources.

The intervention as implemented had a hybrid character with both managerial and professional elements. Rules and performance measures constrained the practitioners but also detached them from existing rules and procedures in the organizations. This opened up a creative space that enabled new work practices. These practices had a strong outward orientation toward employers, clients and the community and was characterized by flexible, comprehensive and personalized follow-up practices.

By revealing the complex processes that unfold when an evidence-based intervention is implemented in practice, this thesis contributes to nuancing dichotomous ways of thinking about evidence-based interventions and frontline practices. The findings are in contrast to claims in the social work literature regarding the managerial and constraining character of evidence-based interventions and standards, foregrounding how such interventions can promote professional work practices. However, there is also a normative position found in both practice fields and academia, viewing deviance from intervention rules and intent as implementation failure that needs to be corrected to ensure service quality and positive outcomes. The findings

engage with too-rigid conceptions of service fidelity that risk ignoring and marginalizing the contribution of agentic, knowledgeable practitioners.

To move forward, this thesis argues that there is a need for more open approaches to the complexity that evidence-based services represent, allowing room for adaptation or flexibility within fidelity. Researchers, policymakers, leaders and practitioners should all aim for a *middle ground*, characterized by *reflexive and nuanced approaches* to the dynamic and complex processes that unfold when evidence-based interventions and standards are implemented in frontline work with vulnerable clients.

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Intervjuguide jobbspesialister

- Hva er bakgrunnen din?
- Hvor lenge har du vært jobbspesialist?
- Hva er en jobbspesialist? (med dine ord)

Oppfølging av arbeidssøkerne

- Kan du fortelle om porteføljen din? Hvem er arbeidssøkerne dine? (Alder, kjønn, bakgrunn, problemer)
- Hvordan følger du opp arbeidssøkerne? Hva gjør dere sammen?
    - Bruk av verktøy/skjema.
- Hva er viktig for å følge opp arbeidssøkerne på en god måte i tidlig fase? Gjerne eksempler.
- Hvordan jobber du med brukerens «motivasjon og jobbønske»?
    - Hva betyr det at brukerens jobbønske er «i sentrum»? Er det utfordringer med dette?
- Er det ting som kan være utfordrende i relasjonen til arbeidssøker?
- Hvem passer IPS for? Er det noen du tenker det ikke passer for?

Om å jobbe innenfor IPS

- Hvordan opplever du det er å jobbe innenfor IPS?
- Har du lest IPS-manualen?
- Hva er mest utfordrende?
- Føles det rigid eller styrt å jobbe som jobbspesialist? Eller åpent, at man selv bestemmer hvordan løse oppgaver?
- IPS-kvalitetsskalaen har 25 punkter. Vise frem denne. Hvilke synes du er de tre viktigste?
- Hva har du bruk for av erfaring og kompetanse som jobbspesialist?
    - Hva slags opplæring har du fått?
    - Tenker du det er kompetanse eller kunnskap du trenger mer av?
    - Eksempler: oppfølging, terapi, psykisk helse, NAV, annet?
- Hvordan opplever du kravene om å levere resultater og rapportere?

Jobbspesialistteamet

- Opplever du at du er del av et team? Hvordan?
- Når dere diskuterer kvalitetsskalaen/manualen/metodikken, hva er viktige tema? Er det noen tema det er mye uenighet rundt?
- Er det åpenhet for refleksjon, kritikk og komme med nye ideer i teamet?
- Er metodeveilederne viktige? På hvilke måter?
- Er metodeveiledere/teamledere åpne for idéer og innspill?

Arbeidsgivere

- Hvordan foregår arbeidet ut mot arbeidsgivere?
    - Kan du beskriv noen typiske forløp med arbeidsgivere?
- Hva er viktig for å lykkes med å skaffe jobb til arbeidssøkere?
- Hvordan foregår oppfølgingen på arbeidsplassen?
    - Hva er viktig for å lykkes med å beholde jobben?

- Utfordringer i arbeidet med arbeidsgivere?

Samarbeid NAV

- Hvordan foregår samarbeidet med NAV-veilederen?
    - Eksempel på forløp, litt konkret.
    - Utfordringer i samarbeidet?
- Tenker du at IPS og måten å jobbe på, påvirker kontoret ellers? Hvordan?
    - Eksempler: nye måter å jobbe på, holdninger, kunnskap, roller, organisering, forløp, samarbeidsformer

Samarbeid med helse, DPS

- Integrering i behandlingsteam. Hvilke team er du med i?
- Hvordan opplever du samarbeidet med behandler/psykologene/DPS?
- Opplever du at helsesiden tenker forskjellig enn dere rundt psykisk sykdom og arbeidslivsdeltakelse? Evt. hvordan?
- Er det utfordringer i samarbeidet? Eks. legitimitet, rolleforståelse, kompetanse, ulike syn.

Intervjuguide deltagere

- Fortelle hvem jeg er. Informert samtykke. Anonymitet. Mulighet trekke seg. Ok om lydopptak. Tema i intervjuet.
- Alder, utdanning.

Erfaringer med arbeid

- Hvordan er arbeidssituasjonen din nå?
- Hva slags erfaringer har du hatt med arbeidsgivere de siste årene?

Erfaringer med IPS/utvida oppfølging

- Når kom du med i IPS? Hvordan kom du med, var det ventetid?
- Hva gjør dere sammen? (Fortelle om oppfølgingen, aktiviteter).
    - Hva har jobbspesialisten hjulpet deg med? Gi gjerne konkrete eksempler.
    - Hva snakker dere om? Jobb, livet, andre tema?
    - Hva synes du jobbspesialisten er flink eller mindre flink til?
- I IPS skal deltakers ønsker være i sentrum, opplever du at det er sånn?
    - Har du idéer hvordan ting kan gjøres annerledes?
    - Opplever du at de lytter de til ideer og tilbakemeldinger?
- Hva synes du har vært bra med IPS? hva har vært utfordrende?
- Er det noe som har overrasket deg med IPS?
- Har jobbspesialisten hjulpet til med kontakt med andre tjenester?
    - F.eks. være med på møter, hjelp når det gjelder økonomi, bolig, søknader, arbeidsgivere, annet?
- Hvordan har IPS-oppfølgingen påvirket livssituasjonen din?

Arbeidsgivere og støtte på arbeidsplassen

- Har du vært innom en eller flere arbeidsgivere? Hvordan var det?
- Hva slags oppfølging får du på arbeidsplassen i dag?
- Har det vært noen utfordringer på arbeidsplassen? Fikk du hjelp å håndtere de?

Andre tjenester

- Får du oppfølging fra andre velferdstjenester eller kommunale tjenester enn NAV?
- Er jobbspesialisten involvert i samarbeid med andre tjenester?
- Hva synes du om samarbeidet mellom jobbspesialisten og behandler? (hvis relevant)

Kontakt med NAV, sammenligning

- Har du erfaringer med NAV før du ble med i IPS?
- Får du oppfølging fra NAV-veilederen nå? Hva, hvor mye.
    - Hva slags kontakt har du med veilederen på NAV nå?
- Hvis du sammenligner IPS/jobbspesialist med vanlig oppfølging fra NAV-veileder, hva er forskjellene?
- Har du vært i tiltaksbedrift e.l.? Hvordan opplevde du det?
- Hvis du sammenligner IPS med oppfølging fra tiltaksbedrift, hva er forskjellene?

Avslutning

- Hvordan kan tjenestene bli bedre?
- Noe du har lyst å si til slutt eller tenker er viktig å ha med?

Innovasjon i NAVS førstelinje (INNOWEL)

INNOWEL er et forskningsprosjekt ved Høgskolen i Oslo og Akershus. Prosjektet startet opp 1. september 2016 og løper frem til 31. august 2020. Prosjektet skal utforske tjenesteinnovasjon og brukermedvirkning i NAVs førstelinje.

Sentrale problemstillinger i INNOWEL er blant annet:

• Hva er vilkårene for *læring* og *innovasjon* i NAVs førstelinje, og hvilke faktorer er avgjørende for vellykkede innovasjonsprosesser i førstelinjen?

• Hvilken rolle spiller *organisasjonen og arbeidsorganiseringen* for tjenesteinnovasjon i førstelinjen?

• Hvilken betydning har *brukermedvirkning* for tjenesteinnovasjon i NAVs førstelinje?

For å skaffe et godt grunnlag å besvare spørsmålene på skal vi i INNOWEL:

• Ved bruk av ulike metoder gjennomføre datainnsamling for å få grundig innsikt i hva som foregår i førstelinjen. Samtidig skal ikke innsamlingen bli kilde til tidkrevende ekstraarbeid og forstyrrelser for ansatte og brukere ved casekontorene

• Bidra til gjensidig læring mellom forskning og praksis

Metoder og datainnsamling

Datainnsamling skal bestå av observasjoner og individuelle intervjuer med ansatte og brukere. Datainnsamlingen gjøres av forskerne under feltarbeid ved casekontorene. Observasjoner kan f.eks. være av veiledningssituasjoner, fagmøter og ledermøter hvor det skal foretas prioriteringer og hvor ord skal bli til handling. Datainnsamlingen via observasjon vil foregå på flere måter, både ved fokusert «skygging» av en eller to veilederes arbeidshverdag og ved at forskerne oppholder seg på kontoret i 2-3 uker og deltar på veiledningsmøter, avdelingsmøter og i andre sammenhenger som er av betydning for utviklingen av tjenestene i førstelinja.

Under observasjonene og de individuelle intervjuene vil forskerne gjøre notater. I noen tilfeller vil det også bli gjort lydopptak, etter godkjenning av alle tilstedeværende. Lydopptak brukes for å få en så korrekt gjengivelse av en samtale eller diskusjon som mulig. Lydopptaket vil bli transkribert, og oppbevares i henhold til Høgskolen i Oslo og Akershus sine rutiner for informasjonssikkerhet.

Konfidensialitet

Alle uttalelser fra intervjuer og observasjoner med ansatte og brukere vil bli behandlet konfidensielt, anonymisert og bearbeidet i sammenheng med andre intervjuer som foretas i prosjektet. Observasjoner av møter mellom ansatte og brukere vil foregå etter innhentet samtykke fra bruker. I noen tilfeller vil forskeren be brukeren om tillatelse til å la seg intervjue i etterkant av et observert møte mellom en ansatt og en bruker. Dette skal det innhentes samtykke til via undertegnet samtykkeerklæring. Informasjon som fremgår i møter mellom ansatte og brukere og som observeres med brukerens samtykke eller informasjon om brukere eller konkrete saker som fremkommer i

intervjuer med brukere i etterkant av observerte møter er underlagt taushetsplikt og vil konfidensielt og anonymisert.

INNOWEL gjennomføres i tett samarbeid med det danske forskningsprosjektet Local Innovation in Social and Employment Services (LISES). Foruten Ålborg Universitet og NAV er også Kompetansesenter for arbeidsinkludering (KAI) ved Høgskolen i Oslo og Akershus en viktig samarbeidspartner i INNOWEL.

Det vil *ikke* bli utlevert data med personopplysninger til samarbeidspartnere i INNOWEL-prosjektet.

Tilbaketrekking fra deltakelse

Det er frivillig å delta i prosjektet, og du kan når som helst trekke deg fra å delta uten at dette vil få noen følger. Om du ønsker å trekke deg trenger du bare å opplyse om dette til prosjektleder Cathrine Egeland. Om du trekker deg fra prosjektet kommer vi ikke til å bruke dine uttalelser, og vi vil slette alle data som kan forbindes med deg. Etter at det er blitt publisert fra prosjektet er det imidlertid ikke mulig for deg å trekke din deltakelse.

Spørsmål og henvendelser

INNOWEL er meldt til NSD. Om du har spørsmål om prosjektet kan du henvende deg til prosjektleder Cathrine Egeland, eller seniorforskere Eirin Pedersen og Eric Breit.

Kontaktperson	Telefon	E-post
Cathrine Egeland	+47 992 55 938	cathrine.egeland@afi.hioa.no
Eirin Pedersen	+ 47 936 36 150	eirin.pedersen@afi.hioa.no
Eric Breit	+47 997 26 997	eric.breit@afi.hioa.no

Finansiering og samarbeidspartnere
INNOWEL er et forskningsprosjekt som ledes av Arbeidsforskningsinstituttet (AFI) ved Høgskolen i Oslo og Akershus.
Det er finansiert av Norges Forskningsråds program «Gode og effektive helse-, omsorgs- og velferdstjenester» (HELSEVEL).
INNOWEL gjennomføres i tett samarbeid med det danske forskningsprosjektet Local Innovation in Social and Employment Services (LISES), som ledes av Flemming Larsen og Dorte Caswell ved Aalborg University. LISES studerer tjenesteinnovasjon i førstelinjen ved de danske Jobcentrene. Foruten Ålborg Universitet og NAV er også Kompetansesenter for arbeidsinkludering (KAI) ved Høgskolen i Oslo og Akershus en viktig samarbeidspartner i INNOWEL.

Behold gjerne dette informasjonsskrivet!

Samtykkeerklæring for deltakelse i forskningsprosjektet INNOWEL

Innovasjon i NAVS førstelinje (INNOWEL)

Vennligst se gjennom det vedlagte informasjonsskrivet og underskriv på riktig sted dersom du samtykker i å delta i prosjektet.

- Jeg samtykker til i å delta i forskningsprosjektet INNOWEL, under forutsetning av at de vilkårene som er beskrevet i informasjonsskrivet er oppfylt.

Deltakers navn: _____

Organisasjon: _____

Underskrift: _____

Dato: _____

Cathrine Egeland
Arbeidsforskningsinstituttet Høgskolen i Oslo og Akershus
Postboks 4 St. Olavs plass
0130 OSLO

Vår dato: 22.02.2017 Vår ref: 52008 / 3 / STM Deres dato: Deres ref:

TILBAKEMELDING PÅ MELDING OM BEHANDLING AV PERSONOPPLYSNINGER

Vi viser til melding om behandling av personopplysninger, mottatt 09.01.2017. Meldingen gjelder prosjektet:

52008	*Front line innovations in the welfare services (INNOWEL).*
Behandlingsansvarlig	*Høgskolen i Oslo og Akershus, ved institusjonens øverste leder*
Daglig ansvarlig	*Cathrine Egeland*

Personvernombudet har vurdert prosjektet, og finner at behandlingen av personopplysninger vil være regulert av § 7-27 i personopplysningsforskriften. Personvernombudet tilrår at prosjektet gjennomføres.

Personvernombudets tilråding forutsetter at prosjektet gjennomføres i tråd med opplysningene gitt i meldeskjemaet, korrespondanse med ombudet, ombudets kommentarer samt personopplysningsloven og helseregisterloven med forskrifter. Behandlingen av personopplysninger kan settes i gang.

Det gjøres oppmerksom på at det skal gis ny melding dersom behandlingen endres i forhold til de opplysninger som ligger til grunn for personvernombudets vurdering. Endringsmeldinger gis via et eget skjema, http://www.nsd.uib.no/personvern/meldeplikt/skjema.html. Det skal også gis melding etter tre år dersom prosjektet fortsatt pågår. Meldinger skal skje skriftlig til ombudet.

Personvernombudet har lagt ut opplysninger om prosjektet i en offentlig database, http://pvo.nsd.no/prosjekt.

Personvernombudet vil ved prosjektets avslutning, 31.08.2020, rette en henvendelse angående status for behandlingen av personopplysninger.

Vennlig hilsen

Kjersti Haugstvedt

Siri Tenden Myklebust

Kontaktperson: Siri Tenden Myklebust tlf: 55 58 22 68
Vedlegg: Prosjektvurdering

Dokumentet er elektronisk produsert og godkjent ved NSDs rutiner for elektronisk godkjenning.

Personvernombudet for forskning

Prosjektvurdering - Kommentar

Prosjektnr: 52008

FORMÅL
INNOWEL skal utforske tjenesteinnovasjon og innovasjonsprosesser i NAVs førstelinje, herunder brukermedvirkning i tjenesteinnovasjon. De sentrale problemstillingene i INNOWEL er: • Hvilke faktorer er avgjørende ved gjennomføring av vellykkede innovasjonsprosesser i førstelinjen? • Hvilken rolle spiller organisasjonen og arbeidsorganiseringen for tjenesteinnovasjon i førstelinjen? • Hvilken betydning har brukermedvirkning for tjenesteinnovasjon i NAVs førstelinje? • Involveres arbeidsgivere i tjenesteinnovasjon - hvordan? • Hvordan opplever ansatte og brukere brukermedvirkning i tjenesteutviklingen?

UTVALG OG DATAINNSAMLING
Utvalget består av ansatte og brukere i NAV. Data samles inn gjennom intervjuer og observasjon ved tre NAV-kontor. Det vil foretas observasjon av møter blant ansatte og ledelse, samt veiledningsmøter mellom ansatte og brukere.

Det vil innhentes samtykke fra ansatte og brukere til deltakelse i intervjuer, og i forbindelse med observasjon av veiledningsmøter mellom ansatte og brukere.

INFORMASJON OG SAMTYKKE
Utvalget informeres skriftlig og muntlig om prosjektet og samtykker til deltakelse. Informasjonsskrivet mottatt 21.02.2017 er godt utformet, men det må i tillegg opplyses om at datamaterialet anonymiseres ved prosjektslutt, jf. opplysningene i meldeskjemaet.

DISPENSASJON FRA TAUSHETSPLIKTEN
Forskergruppen vil være til stede på casekontorene og foreta observasjoner, og i tillegg vil de være med på møter med ansatte. Det skal ikke registreres personopplysninger om brukere i denne delen av datainnsamlingen, men ettersom forskerne vil få innsyn i taushetsbelagt informasjon må det foreligge dispensasjon fra taushetsplikten. Prosjektleder har søkt Arbeids- og velferdsdirektoratet om dispensasjon fra taushetsplikten. Søknaden er datert 15.02.2017.

Personvernombudet forutsetter at studien gjennomføres etter alle forutsetninger og vilkår Arbeids- og velferdsdirektoratet setter, og vi ber om at tillatelsen ettersendes til personvernombudet@nsd.no.

SENSITIVE OPPLYSNINGER
Det behandles sensitive personopplysninger om helseforhold.

INFORMASJONSSIKKERHET
Personvernombudet legger til grunn at forsker etterfølger Høgskolen i Oslo og Akershus sine interne rutiner for datasikkerhet. Dersom personopplysninger skal lagres på mobile enheter, bør opplysningene krypteres

tilstrekkelig.

PROSJEKTSLUTT OG ANONYMISERING
Forventet prosjektslutt er 31.08.2020. Ifølge prosjektmeldingen skal innsamlede opplysninger da anonymiseres. Anonymisering innebærer å bearbeide datamaterialet slik at ingen enkeltpersoner kan gjenkjennes. Det gjøres ved å:
- slette direkte personopplysninger (som navn/koblingsnøkkel)
- slette/omskrive indirekte personopplysninger (identifiserende sammenstilling av bakgrunnsopplysninger som f.eks. bosted/arbeidssted, alder og kjønn)
- slette digitale lydopptak

Dersom stipendiatene som skal delta i datainnsamlingen skal benytte data til andre formål enn det som er oppgitt her, så minner vi om at de må melde sine prosjekter til oss før oppstart.

Arbeidsforskningsinstituttet
Høgskolen i Oslo og Akershus

Postboks 4, St. Olavs plass
0130 Oslo

Att.: Cathrine Egeland

Deres ref:	Vår ref: 17/1471	Saksbehandler: Knut Brenne	Vår dato: 26.04.2017

DISPENSASJON FRA TAUSHETSPLIKTEN I FORBINDELSE MED FORSKNING

Arbeids- og velferdsdirektoratet viser til søknad mottatt 14.2.2017 om dispensasjon fra taushetsplikten for forskningsprosjektet "FRONT LINE INNOVATIONS IN THE WELFARE SERVICES (INNOWEL)».

Sakens opplysninger

Prosjektet er beskrevet slik:

Prosjektets problemstilling

Front line innovations in the welfare services (INNOWEL) skal studere tjenesteinnovasjon I NAVS førstelinje.

De sentrale problemstillingene i INNOWEL er:

Hvilke faktorer er avgjørende ved gjennomføring av vellykkede innovasjonsprosesser i førstelinjen?

Hvilken rolle spiller organisasjonen og arbeidsorganiseringen for tjenesteinnovasjon i førstelinjen?

Hvilken betydning har brukermedvirkning for tjenesteinnovasjon i NAVs førstelinje?

Involveres arbeidsgivere i tjenesteinnovasjon - hvordan?

Hvordan opplever ansatte og brukere brukermedvirkning i tjenesteutviklingen?

Prosjektets formål/nytteverdi

Å fremskaffe kunnskap om vilkår for tjenesteutvikling i NAV. Bidra til læring om muligheter for innovasjon i NAV.

Høgskolen i Oslo og Akershus/AFI er behandlingsansvarlig for prosjektet, jf § 2 nr 4 i personopplysningsloven. Prosjektleder er seniorforsker Cathrine Egeland. Prosjektet er finansiert gjennom forskningsmidler fra Norges Forskningsråd.

Metoden er beskrevet slik:

> Vi skal undersøke hvordan det drives tjenesteinnovasjon i NAVs førstelinje. Til dette trenger vi data om arbeidsmåter, organisering, arbeidsoppgaver (inkludert veiledningsmøter, fagmøter, ledermøter) og brukermøter ved tre utvalgte casekontor: [redacted]
>
> Dette er kvalitative data vi samler inn gjennom intervjuer med NAV-ansatte og brukere, samt observasjon av virksomheten ved casekontorene. Se vedlagt designnotat.
>
> Personopplysninger knyttet til brukere vil i denne sammenhengen kun dukke opp om enkeltsaker nevnes i møter eller i de tilfellene vi (med brukers samtykke) deltar på veiledningsmøte med enkeltbrukere, intervjuer enkeltbrukere eller deltar på gruppemøte med brukere.
>
> Vi skal altså ikke behandle sensitive personopplysninger om brukere eller ansatte fra NAV. Denne søknaden dreier seg med andre ord om:
>
> > dispensasjon fra taushetsplikten i forbindelse med feltarbeid (intervjuer og observasjoner) ved tre NAV-kontor: [redacted] slik at vi kan foreta observasjoner av og intervjuer med ansatte og brukere ved casekontorene.
>
> Vi søker ikke om å få innhente personopplysninger fra forvaltningsorganet, men om dispensasjon fra taushetsplikten i forbindelse med feltarbeid (intervjuer og observasjoner) ved tre NAV-kontor: [redacted]
>
> Utvalget trekkes gjennom videreformidling av kontaktinformasjon via ledelsen, teamledere og veiledere ved de tre casekontorene, snøballmetode og ved direkte henvendelse i forbindelse med observasjon/feltarbeid

Prosjektet har videre angitt:

> Datainnsamling skal bestå av observasjoner og individuelle intervjuer med ansatte og brukere. Datainnsamlingen gjøres av forskerne under feltarbeid ved casekontor ene. Observasjoner kan f.eks. være av veiledningssituasjoner, fagmøter og ledermøter hvor det skal foretas prioriteringer og hvor ord skal bli til handling. Datainnsamlingen via observasjon vil foregå på flere måter, både ved fokusert «skygging» av en eller to veilederes arbeidshverdag og ved at forskerne oppholder seg på kontoret i 2-3 uker og deltar på veiledningsmøter, avdelingsmøter og i andre sammenhenger som er av betydning for utviklingen av tjenestene i førstelinja.

Under observasjonene og de individuelle intervjuene vil forskerne gjøre notater. I noen tilfeller vil det også bli gjort lydopptak, etter godkjenning av alle tilstedeværende. Lydopptak brukes for å få en så korrekt gjengivelse av en samtale eller diskusjon som mulig.
Lydopptaket vil bli transkribert, og oppbevares i henhold til Norsk Senter for Forskningsdatas (NSD) regelverk. Dette innebærer at alle transkripsjoner vil bli anonymisert og lagret på sikre, passordbelagte hjemmeområder tilhørende Høgskolen i Oslo og Akershus.

Det er angitt at utvalget består av omtrent 50 personer.

Prosjektperioden er oppgitt til 1.9.2016 – 31.08.2020.

Prosjektet er meldt NSD/personvernombudet. Det er ikke fremlagt opplysninger om tilbakemelding derfra.

Rettslig utgangspunkt

Personopplysningene som vil kunne fremkomme i dette prosjektet er underlagt taushetsplikt. Det rettslige utgangspunktet for taushetsplikten er forvaltningsloven § 13, jf arbeids- og velferdsforvaltningsloven § 7 og lov om sosiale tjenester i NAV § 44.

Taushetsplikten er ikke til hinder for at opplysninger brukes når behovet for beskyttelse må anses ivaretatt ved at de gis i statistisk form eller at individualiserende kjennetegn utelates på annen måte, jf forvaltningsloven § 13a nr. 2.

For at det skal kunne gjøres unntak fra taushetsplikten i forbindelse med et forskningsprosjekt, må det foreligge et gyldig rettsgrunnlag. Dette innebærer enten gyldig samtykke fra de personene som er omfattet, jf forvaltningsloven § 13a nr 1, eller dispensasjon fra taushetsplikt til forskning, jf forvaltningsloven § 13d. Arbeids- og velferdsdirektoratet er delegert avgjørelsesmyndighet etter forvaltningsloven § 13d første ledd til å kunne dispensere fra taushetsplikten til forskningsformål for så vidt gjelder opplysninger i saker på vårt ansvarsområde.

Vurdering

Prosjektet bygger på samtykkebasert deltakelse fra så vel NAV-brukere som NAV-medarbeidere. Imidlertid er det i prosjektbeskrivelsen lagt opp til aktiviteter som lett kan føre ut over rekkevidden av den enkeltes samtykkeerklæring. Vi peker her på:

l) Opptak av samtaler med bruker: I et slikt opptak vil det kunne komme frem identifiserende opplysninger om saksforhold og tredjepersoner som ikke er med i utvalget og/eller som ikke har gitt noen samtykkeerklæring som dekker omtale i intervju.

2)Observasjoner under tilstedeværelse i NAV-kontoret i perioder: I slike sammenhenger vil det utilsiktet kunne bli overhørt drøfting, samtaler, mv om NAV-brukere og tredjepersoner som ikke har gitt samtykke eller uten at omtalen er fullstendig anonymisert.

3) Observasjoner/deltakelse på interne møter i NAV-kontoret, gruppemøter/intervjuer med NAV-medarbeidere og NAV-brukere Også i slike sammenhenger vil det utilsiktet kunne bli drøftet eller referert til NAV-brukere og tredjepersoner som ikke har gitt samtykke eller uten at omtalen er fullstendig anonymisert.

Fremgangsmåten innebærer at det vil kunne fremkomme direkte identifiserende personopplysninger om NAVs brukere. Detter omfatter ikke bare taushetsbelagte opplysninger, men også sensitive opplysninger (helseforhold).

Vi peker også på at omfanget av undersøkelsen er ganske begrenset (relativt få brukere på et meget lite antall kontorer i avgrensede geografiske områder), noe som kan medvirke til en mulig reidentifisering.

Disse forholdene gjør at vi må vurdere om det kan gis dispensasjon fra taushetsplikten, selv om prosjektet i utgangspunktet basere seg på samtykke fra NAV-brukere.

Arbeids- og velferdsdirektoratet ser at undersøkelsen kan være viktig med tanke på utvikling av kunnskap om den aktuelle saksbehandlergruppens arbeidsmetoder og resultatoppnåelse. Vi finner å kunne dispensere fra taushetsplikten slik at prosjektet kan gjennomføres som beskrevet. Under henvisning til det som er nevnt ovenfor stiller vi imidlertid visse vilkår, jf forvaltningslovens § 13d.

Det er en forutsetning at undersøkelsen kun skal omfatte myndige personer og at dataene kun brukes til det formål de er innhentet for. Vi gjør oppmerksom på at forsker er ansvarlig for å behandle personopplysningene i tråd med personopplysningsloven.

Vi forutsetter at prosjektet før NAV-kontoret kontakter noen NAV-brukere har mottatt melding fra NSD om at prosjektet kan igangsettes, eventuelt at det er gitt konsesjon fra Datatilsynet.

For øvrig gjelder følgende vilkår:

- NAVs deltakelse er helt frivillig, og arbeidet med prosjektet må ikke gå utover etatens primæroppgaver, eller medføre ekstra kostnader for NAV.

- NAV avgjør selv ev medvirkning til undersøkelsen, hvilke medarbeidere som deltar og utstrekningen/formen på medvirkningen. Det forutsettes at alle medarbeidere deltar på samtykkebasert basis.

- All første gangs kontakt med og spørsmål om prosjektdeltakelse for NAV-brukere skal skje gjennom henvendelse fra NAV-kontoret - ikke fra forskeren.

- NAV-brukere som kontaktes må få en orientering som inneholder disse elementene:

- Orientering om prosjektet/formålet og at det ønskes innhentet taushetsbelagte opplysninger og hvilke dette er
- Fremgangsmåte og metoder som brukes
- At det er helt frivillig å delta og at NAV ikke har gitt ut noen opplysninger om brukeren til prosjektet.
- At deltakelsen er basert på at vedkommende etter å ha blitt informert om undersøkelsen frivillig gir samtykke til deltakelsen.
- At det ikke har noen betydning for vedkommendes rettigheter overfor NAV om hun/han deltar eller ikke - rettighetene vil være de samme
- Informasjonsskrivet fra prosjektet vedlegges. Det må beskrive alle aktiviteter der taushetsbelagte opplysninger om NAV-brukeren kan fremkomme og skal til slutt ha en samtykkeerklæring der det fremgår at vedkommende gir et frivillig, uttrykkelig og informert samtykke til deltakelse og behandling av opplysningene.

- Forskeren kan så i samhandling med NAV-kontoret ta kontakt med de som samtykker og avtale praktisk deltakelse/gjennomføring.

- Lydopptak kan bare gjøres så langt samtykke fra NAV-brukeren er gitt. Opptakene skal ikke omfatte tredjepersoner som ikke har gitt samtykke til å bli omtalt. Ev. slike opplysninger som utilsiktet fremkommer må slettes.

- I forskers møter, intervjuer og andre aktiviteter i NAV-kontoret må det ikke omhandles identifiserende opplysninger om saker og NAV-brukere eller tredjepersoner som ikke har gitt samtykke til å bli omtalt i den aktuelle situasjonen. Ev. slike opplysninger som utilsiktet fremkommer må slettes.

- Det gis ikke tilgang til registre eller saksmappe/journal i NAV.

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Article 1

Bakkeli, V. (2022). Handling Tensions in Frontline Policy Implementation: Legitimating, Interpreting, and Shielding a Disruptive Intervention. *International Journal of Public Administration*, 1-11.
DOI: https://doi.org/10.1080/01900692.2021.2009856

INTERNATIONAL JOURNAL OF PUBLIC ADMINISTRATION
https://doi.org/10.1080/01900692.2021.2009856

Handling Tensions in Frontline Policy Implementation: Legitimating, Interpreting, and Shielding a Disruptive Intervention

Vidar Bakkeli

Work Research Institute, OsloMet—Oslo Metropolitan University, Oslo, Norway

ABSTRACT

Policy implementation in public frontline service organizations is characterized by tensions between old and new institutional configurations. This study explores how frontline supervisors handled tensions when implementing a disruptive activation service intervention in local Norwegian Labor and Welfare Administration agencies. The empirical analysis is based on in-depth interviews and ethnographic fieldwork in two frontline organizations from 2017 to 2018. The study identifies three main strategies that supervisors enacted to handle tensions surrounding the intervention: legitimating, interpreting, and shielding. The findings highlight the specific activities through which frontline supervisors contribute to policymaking in the frontline.

KEYWORDS

Frontline supervisors; institutional change; activation; managers; street-level bureaucracy

Introduction

Implementation of new policies and reforms continues to be a central topic in public administration and management (Christensen & Laegreid, 2017; Hill & Hupe, 2014). Evidence-based standards, guidelines, policy pilots and interventions are increasingly introduced in these organizations, contributing to pluralism and complexity (Boaz et al., 2019; Denis et al., 2015). Seen from an institutional perspective, managing policy implementation in these pluralistic contexts involves "effort in the face of resistance" (Cloutier et al., 2015, p. 262), as interventions and reforms can create tensions between established institutional rules, norms, and practices, and the new solutions (Hupe & Hill, 2016; Lowndes, 2005; Rice, 2013).

Moving beyond views of policy implementation as top-down "a-political administrative activity" (Hupe & Hill, 2016, p. 104), there is an emerging literature focusing on the influence of public managers as policymakers and institutional change agents in public frontline service organizations (Cloutier et al., 2015; Cooper & Kitchener, 2019; Howlett, 2011; McDermott et al., 2013; Meza & Moreno-Jaimes, 2020; Saguin & Palotti, 2020; Wimmelmann et al., 2018). For example, McDermott et al. (2013) argued that managers, when translating policy interventions into service delivery, adapt and add to policies. While several studies have focused on office managers (i.e., chief executive officers of frontline organizations; Gassner & Gofen, 2018) and middle managers (Radaelli & Sitton-Kent, 2016), there is a need for in-depth studies exploring the role of *frontline supervisors* in policy implementation, i.e. "the lowest tier of management" (Gassner & Gofen, 2018, p. 554). There is still a limited understanding of the actual work these non-elite organizational actors do when translating, embedding, interpreting, and stabilizing new policies and interventions in the local organizational context (Bjerregaard & Jonasson, 2014; Gestel et al., 2020; Radaelli & Sitton-Kent, 2016).

To add to this literature, this article explores how frontline supervisors handle tensions between old and new institutional configurations when implementing a disruptive intervention in two public frontline service organizations. Drawing on institutional theory, the article explores how they navigate contradictions and ambiguities when implementing the intervention in daily service delivery (Bjerregaard & Jonasson, 2014; Cloutier et al., 2015; Smets & Jarzabkowski, 2013). The focus on tensions is useful for exploring policymaking, agency, and change from a bottom-up, institutional perspective. The study poses the following research question: How do frontline supervisors handle tensions when implementing a policy intervention?

To understand this, the article draws on an in-depth, inductive, and explorative case study from two Norwegian Labor and Welfare Administration (NAV) offices, where frontline supervisors within the program "In-house Follow-up" implemented an evidence-based

CONTACT Vidar Bakkeli bavi@oslomet.no Work Research Institute, OsloMet—Oslo Metropolitan University, P.O. Box 4, St. Olavs plass Oslo, 0130, Norway

Supplemental data for this article can be accessed online at https://doi.org/10.1080/01900692.2021.2009856

activation service intervention called Individual Placement and Support (IPS) (Drake et al., 2012). Activation work involves practices to motivate, assist, broker, negotiate, and compel clients with diverse problems into the labor market. The intervention introduced comprehensive, resource-intensive employment follow-up services for vulnerable clients with complex needs. The study includes interviews and ethnographic fieldwork conducted between 2017 and 2018.

The study contributes to the literature on policy implementation in frontline service organizations by centering on the "doings" of embedding new policies and interventions in frontline practice. Although the frontline supervisors implemented a rigid, standardized intervention, they were active actors who interpreted and added to policy goals and mandates while drawing on contextual and professional knowledge. Three specific strategies that the supervisors used to handle tensions were identified: legitimating, interpreting, and shielding. The findings also suggest that increasing legitimacy surrounding the intervention also strengthened their position, as the most knowledgeable actor regarding the specific method. Overall, the findings highlight the importance of the bi-directional, situated, and local organizational dynamics involved in frontline policy implementation.

Policy implementation and frontline supervisors

In the practice fields and in the scholarly literature, there is a widespread view of policy implementation as a largely rational, linear process (Hupe & Hill, 2016). For example, implementation of guidelines and evidence-based standards is mainly understood as linear, top-down, and mechanistic knowledge-to-action processes (Hjelmar & Møller, 2016; Wimmelmann et al., 2018). In contrast, the street-level bureaucracy literature views policy implementation from a bottom-up perspective, highlighting how policies become realities on the ground through street-level workers' discretionary decision-making when interacting with clients, in organizational contexts with multiple demands, organizational constraints, and limited resources (Lipsky, 1980/2010).

While managers were until recently mainly considered as loyal "transmitters" and administrators of top-down organizational policy and goals (Evans, 2010, 2016; Sabatier, 1986), an emerging literature – mainly focusing on top and mid-level managers – explore how managers enact active roles, contributing to policymaking, institutional change, and influencing service delivery (Cooper & Kitchener, 2019; Gassner & Gofen, 2018; McDermott et al., 2013; Radaelli & Sitton-Kent, 2016). Examining the institutional work of managers implementing reforms, Cloutier et al. (2015) highlighted how they actively navigate tensions and contradictions by developing shared understandings with stakeholders and collaborators, connecting policy visions to concrete service practices, and developing new capabilities and procedures in the frontline. Other studies have underlined how different professional orientations and framings influence the ways local "policy workers" translate and implement guideline interventions (Wimmelmann et al., 2018), and how middle managers assess and rework policy goals in everyday activities when embedding interventions and new practices in teams (Cooper & Kitchener, 2019).

Moving a step down the managerial ladder, this article focuses on frontline supervisors, situated between top and middle managers above and frontline staff below. Central tasks include supervising frontline workers, prioritizing tasks, staff motivation, monitoring performance, and improving communication in the organization. They can have strong professional identity, similar professional backgrounds as frontline staff, and personal frontline experience working with clients. Several studies have underlined their central role in policy implementation, e.g., by influencing frontline staff to identify with organizational goals and policies (Brewer, 2005; Sandfort, 2000), and as role models influencing staff attitudes towards clients (Keulemans & Groeneveld, 2019).

Based on a review of public management and street-level literature on frontline supervisors, Hupe and Keiser (2019) conceptualized three mechanisms by which supervisors contribute to policymaking in frontline organizations. First, frontline supervisors influence policy in the organization by creating "implementation patterns" as they filter and interpret rules (i.e., "action prescriptions" or norms that guide behavior) downward to frontline staff, upward to office managers, and outward by channeling information from outside actors and networks. Supervisors filter rules down to frontline staff in five ways: (1) passing, in which formal rules are conveyed to subordinates; (2) strengthening, in which the supervisor adds rules before conveying them to staff; (3) translating, in which certain rules are prioritized more than others; (4) buffering, in which the supervisor blocks certain rules by not conveying them; and (5) countering, in which the supervisor takes an active stance and speaks up to organizational superiors (i.e., when disagreeing with rules).

The literature provides valuable insights into the active policymaking roles of managers in frontline public service organizations, but it is not without limitations. While several studies have explored higher level and middle managers, few have examined frontline supervisors and their activities when implementing policies in frontline

public service organizations. In particular, less is known about how organizational actors stabilize new solutions within organizations (Gestel et al., 2020; Radaelli & Sitton-Kent, 2016). To contribute to this literature, we focus on the situated practices of frontline supervisors implementing an evidence-based intervention in public frontline service organizations.

An institutional perspective

The article draws on institutional theory combined with a practice perspective to examine the practical activities of frontline supervisors implementing a policy intervention promoting individualized activation practices (Bjerregaard & Jonasson, 2014; Cloutier et al., 2015; Smets & Jarzabkowski, 2013). Institutions can be defined as "a relatively stable collection of rules and practices, embedded in structures of resources that make action possible [. . .] and structures of meaning that explain and justify behavior-roles, identities and belongings, common purposes, and causal and normative beliefs" (March & Olsen, 2008, p. 691). In simplified terms, institutions are the "rules of the game" (Kraatz & Block, 2008, p. 243) that direct organizational behavior, where new interventions represent a new set of rules.

A central turn within institutional theory was centering attention away from institutions per se toward the "purposive action" involved in creating, maintaining and disrupting institutions (Lawrence & Suddaby, 2006), emphasizing the role of actors and agency in institutional change processes (Smets & Jarzabkowski, 2013). This involves examining how institutionalized meanings and practices are sustained, reproduced, translated, and transformed through the activities of individuals and organizations in local situations (Barley, 2008; Bjerregaard & Jonasson, 2014; Cloutier et al., 2015; Lawrence & Suddaby, 2006). Specifically, the practice perspective allows centering the level of analysis on the everyday work of actors, as well as the actions, interactions, and negotiations between multiple local actors (Smets & Jarzabkowski, 2013). Implementing new policies and interventions can be understood as "deliberate institutional change" (Cloutier et al., 2015, p. 261), aimed at changing the rules, practices, and structures of meaning within a field of activity (e.g., a public frontline service organization). Through specific activities and strategies, organizational actors translate policy ideas into frontline practice, actively interpreting ideas and policies when embedding these in their organizational contexts (Boxenbaum, 2006; Cloutier et al., 2015).

Organizations that are characterized by institutional pluralism (i.e., multiple objectives, diffuse power, and knowledge-based work processes; Denis et al., 2007, p. 180) participate in several "games" at the same time. This creates tensions and contradictions between the different rule sets (Lowndes, 2005). The work of implementing theoretical policy templates into concrete frontline actions and practices is "fragmented, localized, and contingent" (Cloutier et al., 2015, p. 269); it involves confrontations with existing values, interests, and structures and resistance from stakeholders with other preferences.

In sum, this study draws on institutional theory from organization studies, following calls to incorporate organizational perspectives in public administration research, particularly when studying implementation (Denis et al., 2015). This conceptual grounding, combining institutional and the practice perspective, enables attentiveness to the more mundane, everyday activities that organizational actors perform when implementing policies. Organizational tensions and contradictions are conceptualized as ruptures between different rule sets, encompassing identities, norms, regulations, and meanings.

Research setting

The Norwegian frontline NAV offices provide an ideal context to investigate the activities of supervisors implementing a disruptive policy intervention in a complex, pluralistic organizational environment. They are integrated one-stop shops, providing social assistance, social security, employment services, and various other social services (Christensen & Lægreid, 2011; Klemsdal & Kjekshus, 2021). They are situated within a layered, hierarchical government organization, and structured as a local partnership between the state and municipalities (Fossestøl et al., 2015). Due to a municipal reform and intermunicipal collaboration, the number of offices was reduced from 423 to 326 offices from 2017 to 2019 (Fossestøl et al., 2020).

The intervention implemented in the case offices was a part of the government-initiated program "In-house Follow-up". The main policy goals with the program was to strengthen user involvement, develop experience with in-house services, improve work-oriented services, and enhance frontline work practices (Ministry of Labour and Social Affairs, 2015, 2016). The intervention introduced a new frontline worker role called "employment specialist". They provide intensive, individualized, flexible, and personal employment support to clients with complex needs while developing direct relationships

with employers and providing workplace support for clients according to Supported Employment (SE) principles (European Union of Supported Employment [EUSE], 2010). The services were structured by fidelity-scale frameworks — either the IPS fidelity scale (Drake et al., 2012) or a modified scale developed centrally in the NAV, based on a combination of IPS and SE principles. The evidence-based IPS fidelity scale has 25 points that defines many features of the service at different levels, including organization, team, and frontline work practices. By the end of 2019, employment specialists had been introduced in approximately 110 of 326 NAV offices (Bakkeli et al., 2020). The offices had autonomy to decide whether to implement these services.

Frontline supervisors responsible for implementation faced contradictions between the intervention and existing organizational frameworks, procedures, norms, and beliefs, see also table included in the Appendix. The intervention introduced a set of new rules, as employment specialists did not follow standardized procedures, ICT-systems, and tools, but adhered to the distinct fidelity scale guidelines. The new frontline role represented a shift from generalist counsellors with broad tasks and large caseloads (between 45 and 130 clients in the two case offices) to a specialized role with low caseloads (max 20 clients). The content of the work differed significantly, shifting from nationally standardized procedural tools and client classification schemes to new boundary-spanning and brokerage practices involving employer engagement (Ingold, 2018). The intervention entailed a radical shift away from the standard workflow in the organization, from a purchase-provider model where counsellors referred clients to external service providers, to an integrated, in-house service involving comprehensive, long-term client follow-up. The intervention also introduced a set of new policy ideals that challenged existing beliefs and norms among staff and managers, moving towards strong individualization, user centeredness, and empowerment.

Methods and data

Qualitative research combining ethnographic fieldwork and interviews was used to inductively study policy implementation in the NAV offices. The data were derived from interviews from a period of almost 2 years (January 2017 to December 2018), as well as short-term ethnographic fieldwork carried out by the author. The two case organizations were selected based on expectations that they would have rich experiences with service development and innovation processes. At the time of the fieldwork, both organizations also had several years of experience implementing SE and IPS as part of their services. This study focused particularly on implementation of the In-house Follow-up team in the offices, from 2017 and onwards. Office A was located in a rural municipality with below 60 employees, while Office B was in an urban municipality with under 200 employees. Both offices had two employment specialist teams. The IPS team had clients with mental health problems who were referred from municipal and specialist mental health services outside NAV, while the "In-house Follow-up" team worked with broader target groups, including immigrants, youth, and people with health problems and/or substance abuse issues. Approval for the research project was granted by the Norwegian Ombudsman for Research at the Norwegian Centre for Research Data (NSD).

Semi-structured interviews (a total of 69 interviews with 51 informants) were conducted with office managers, middle managers, supervisors, other team leaders, counsellors, and employment specialists. In this article, the main focus is on the four frontline supervisors responsible for implementing the intervention in the two organizations. Key informants such as frontline supervisors were interviewed several times throughout the fieldwork period, some of them up to four times. The purpose of these repeated interviews was to gather data about organizational development processes over time, gain a rich understanding of informants' situated experiences and viewpoints, and revisit topics from earlier interviews in greater detail. Interviews with other actors were used to identify organizational tensions and contradictions. Interviews with managers and supervisors focused on their role, work tasks, experiences with implementing SE and IPS and concrete experiences with other organizational change processes (e.g., digitalization, reorganization). Interviews with frontline staff focused on experiences in their roles as counsellors and employment specialists, how they solved work tasks, experienced everyday life in the organization, and views on service development (Table 1).

The fieldwork comprised a total of 30 days in the two case offices. The author spent 15 days in office A in late autumn 2017 and 15 days in office B in spring 2018. Fieldwork included observing daily life in the organizations, participating in team meetings, and following employment specialists as they traveled to the local community and met with employers and clients.

Data analysis

Fieldwork, interviews, and subsequent data analyses were done within an interpretivist approach (i.e., focusing on the situated understandings of the actors

Table 1. Interviews.

Status	Office A (# informants)	# Interviews	Office B (# informants)	# Interviews
Management	Top managers (2)	4	Top managers (2)	5
	Middle managers (3)	3	Middle managers (1)	1
	Supervisors (3)	6	Supervisors, team leaders (4)	8
Frontline staff	Counsellors (8)	10	Counsellors (11)	11
	Employment specialists (8)	8	Employment specialists (9)	13
Total	24	31	27	38

in the field; Schwartz-Shea & Yanow, 2011). The analysis initially focused on service development and the use of manuals in the services. The focus on tensions in the organization and the situated work practices of frontline supervisors became clearer throughout the research process. An inductive research strategy that lets theory emerge from data is consistent with persuasive use of case studies.

The first step of the analysis involved coding the interviews in NVivo software, mainly working from detailed codes to broader, thematic categories through several iterative rounds (Braun & Clarke, 2006). The second step was within-case analysis, and an extensive report was written for each case. Third, using approaches from Miles et al. (2014), two within-case tables were made (case dynamics matrix) that focused on tensions in the offices and how supervisors approached these tensions. These tables were combined in a cross-case table that laid out similarities and differences between the cases. The final step of the analysis involved incorporating thematic categories, case reports, cross-case tables, and perspectives from prior literature. This led to the development of three categories of supervisor strategies: legitimating, interpreting, and shielding. Simplified tables presenting tensions and strategies with illustrative quotes are included in the Appendix. A strategy is understood as "a pattern, in a stream of actions" (Touati et al., 2019, p. 471), focusing on the specific activities of actors. The main emphasis when presenting results is on commonalities across the two cases, although key differences are also noted. The aim of the study was primarily to contribute to new theoretical insights through the analysis of rich, contextualized data, rather than drawing conclusions from these cases as representative of policy implementation processes elsewhere.

Findings

Legitimating

One of the main organizational tensions in both offices was related to the intervention's clashing with existing procedures, routines, and workflows. While existing workflows were structured around larger client portfolios and client referrals to external activation providers, the intervention involved individualized, in-house follow-up. Actors at the local and regional levels in NAV were critical of the resource-intensive nature of the intervention, arguing that working in the usual standardized way (i.e., larger client groups and higher volumes) was more efficient: "There is discontent on the house about all the focus on Supported Employment, forgetting the others. Most here work with 'the great mass' right, have many clients" (Team leader, office B). In office B, redirecting staff and resources to the intervention created tensions in other teams, since those teams experienced increased workloads.

Faced with these tensions, the supervisors enacted legitimation strategies to increase support for the intervention, to counter skepticism among local actors, and to move past contradictions between the intervention and the organization. A central legitimating strategy by frontline supervisors was to promote certain problem understandings in the organization and connect these problems with the intervention as a solution. They characterized NAV as a bureaucratic, rigid system, "a mastodont organization, huge, slow and bureaucratic" (Supervisor, office B) with "really weird management rules" (Supervisor, office A). Drawing on personal frontline experience, they criticized the standard, one-size-fits-all service model towards large client target groups, and emphasized problems caused by outsourcing services to external providers. They were critical of lacking attention to (evidence-based) knowledge: "Everybody really wants to do as they feel like [...] It's been like this in NAV, there's a lot of enthusiasts and happy-go-lucky projects, but do they have any effect? No one actually asks for this, that's quite scary" (Supervisor, office A). These problem framings resonated among other actors in the organization, as many managers, team leaders, and counsellors were also frustrated by bureaucratic proceduralism, the lack of client involvement, and problems with external activation providers.

To solve these problems, supervisors argued for the importance of moving towards more radical forms of service individualization in order to provide substantial help to clients with complex needs. As

participants in different organizational arenas and processes (e.g., office manager group meetings, weekly team meetings, work groups), they channeled views and connected problems with solutions. They highlighted the importance of focusing on "what works," emphasizing the importance of evidence-based knowledge, results, and outcomes in service development. Since considerable research showed positive effects of the intervention, it was vital to implement the intervention according to guidelines in order to reach high fidelity to the model. Ensuring appropriate work practices was central: "We know that if you work well and professionally, follow the method, you will get results" (Supervisor, office B).

A related legitimation strategy found in both cases was to communicate that the intervention worked in the local context. This was important because the services claimed considerable resources, and if they did not deliver, office managers could shut them down and use resources elsewhere: "You need to get results, without results there's no point" (Supervisor, office A). One way of doing this was to promote circulation of "success stories" in the offices. For example, employment specialists participating in counsellor team meetings told stories. The "barista story" appeared in several interviews in office A: "You heard about the coffee roaster? It's really a success story. The young man who sat within the four walls of his house, on disability pension, and didn't dare to go out. But he was genuinely interested in burning coffee at home, and the employment specialist said: 'Let's take a trip to the city'. And then he got a job, [. . .] it's really great." (Counsellor, office A). These narratives underlined how the new way of working related to the intervention was particularly successful in helping clients with complex problems.

A different tension in the two offices arose from the intervention clashing with existing beliefs and mindsets among staff. Supervisors framed beliefs and assumptions counsellors had about clients as a problem: "[Counsellors] walk around in the same 'porridge,' the large caseload you never get through, all the complaints, so it's easy to become negative" (Supervisor, office B). The solution in both offices was to "work with attitudes" in order to legitimate the new way of working: "We need to keep focusing on attitudes, like almost weekly, what attitudes do we have towards each other, what attitudes do we have towards clients [. . .] this needs to be kept up all the time" (Supervisor, office A). In office B, a strategy to "turn attitudes around" involved inserting one employment specialist in each team: "We distribute them in the teams, and work actively to keep them there, this can change the mindset about who actually can succeed and who can't, to use such terms." (Supervisor, office B). The goal of these efforts was to influence counsellor attitudes and strengthen policy ideals of service individualization (e.g., client-centeredness and empowerment).

Interpreting

The second way supervisors handled policy implementation tensions was through rule interpretation. Interpreting involves translating abstract guidelines into concrete frontline practices, e.g., when supervising, and channeling frontline experiences and concerns to office managers. There were significant tensions surrounding the new professional frontline role in both cases. To illustrate, we explore one central tension in office B more in detail. Supervisors and employment specialists had clashing views about how work should be done within the intervention. Supervisors argued that staff engaged too deeply in client cases, worked too broadly and performed too many NAV tasks (e.g., handling administrative issues). In contrast, the employment specialists emphasized how the role enabled them to work more comprehensively with each client and that this was central for achieving results. Nearly all had prior NAV experience and professional education in social and welfare work, and used professional resources and perspectives. This also involved working more holistically than the standard prescribed: "You really do a lot of things that are not counted, that you're not supposed to do, but you see that you have to do them, right." (Employment specialist, office B).

Here, supervisors influenced frontline practices through active and close supervision: "I need to get employment specialist to lay NAV things away. [. . .] let someone else take care of the noise. And then we can focus on employment" (Supervisor, office B). Based on their own knowledge and experience, they interpreted the intervention and translated this into local supervision practices. However, although the supervisors had a central role shaping frontline practice, there continued to be tensions between supervisors and staff in office B.

Another tension in both offices was difficulties with defining client intake criteria, a tension intensified by rising demand, lack of service capacity, and growing waiting lists. The in-house follow-up intervention had broad target groups, with youth and immigrants being prioritized. Counsellors on other teams referred different clients than the supervisors preferred. While counsellors in office A referred too many clients with lighter service needs and too few clients with complex service needs, counsellors in office B referred too many state clients (i.e., those receiving state-funded benefits) and

too few municipal clients (i.e., those receiving municipal social assistance). In office B, this was a problem since funding for the intervention mainly came from the municipal budget, and in order to maintain financial support, more municipal clients needed to be referred.

To alleviate these tensions, supervisors were engaged in discussions and organizational processes with other managers and teams, promoting their preferred solutions regarding intake criteria and routines: "The main point is that those who come in, should be people who need comprehensive follow-up, who actually have a need and struggle – either with mental health or other things. So we don't use a lot of resources on those who really can manage on their own". (Supervisor, office A). Their views centered around the ideal service for clients with complex service needs, as it was resource-intensive. In office B, office politics also entered into play, as supervisors needed to develop intake policies that underpinned further financial support from the municipality. Defining target groups and designing routines for accessing the service was a form of frontline policymaking where supervisors played a central role.

Supervisors also channeled interpretations, views, and experience from the frontline up to office managers: "They [office managers] listen to our advice, the advisory function we've had in the office has been appreciated all the time, they're good at bringing in competency before making a decision" (Supervisor, case B). Office managers also trusted their expertise and professional knowledge, particularly regarding the intervention: "I'm not really close-up concerning what they need to do in order to follow the method. [The supervisor] has that role" (Office manager, office A). This support was likely an important condition for supervisors' relatively autonomous position in the organizations, which enabled their influential role: "We have support that makes us able to create changes" (Supervisor, office B).

Shielding

A third central strategy among supervisors was handling tensions through shielding (i.e., efforts to protect the intervention, increase specialization, and buffer rules from the surrounding organization). In office A, there were tensions related to difficulties of establishing new roles and work practices within an environment characterized by existing identities and an institutionalized way of working. Initially, employment specialists were integrated into regular counsellor teams. According to the supervisor, they struggled to develop the new work tasks and role within the teams, being disturbed by colleagues and the normal ways of doing things in the organization. Hence, the supervisor formed a specialized team: "Now all employment specialists will belong to the employment specialist team [. . .] this is based on the experience we've had" (Supervisor, office A). This shielding move separated the team from the wider organization and strengthened the boundaries around the intervention.

A related shielding strategy in office A was supervisors enacting a radical new hiring policy, specifically to avoid NAV influence on the new practices. Supervisors viewed earlier attempts at transforming NAV counsellors into employment specialists as problematic: "I think people here enjoy being counsellors, they don't necessarily fit to be employment specialists [. . .] many who work in NAV have no understanding of the employer perspective" (Supervisor, office A). As a response, the supervisors started to only hire people with private sector backgrounds, prioritizing experience from business, recruitment, sales, and service, as well as personal abilities. These people had strong employer and work-life skills, and no NAV experience. This specific shielding strategy was only present in office A, as supervisors in office B aimed to integrate the service into other teams and mainly recruited former counsellors. With this move, supervisors in office A avoided the "NAV sickness" influencing the new practices that supervisors struggled with in office B. Hiring policies can be an important form of policymaking affecting frontline practices, e.g., by defining what competencies and skills are relevant (Rice, 2013).

Another tension involved pressure from office managers to rapidly increase service capacity in order to avoid waitlists and create better statistics from the intervention. This clashed with the view of supervisors who emphasized service quality and the importance of sticking to intervention principles. This tension was particularly visible in office B. Frontline supervisors argued that too rapid increase of workload would degrade service quality, negatively affect learning and performance, and clashed with the intervention: "My professional recommendation is to start with four and four users, otherwise you can't do all the things you should, with time outside and so on." (Supervisor, office B). The arguments supervisors used in these ongoing discussions referred to intervention rules and their own professional frontline experience. After several rounds, the supervisors mainly succeeded in maintaining the gradual approach to increasing caseloads, as top managers accepted the supervisors' reasoning.

A tension present in both offices was contradictions between NAV procedural requirements and intervention guidelines. A specific example involves production of

documentation in client cases. There was frustration among counsellors about lack of documentation and reports for clients who received follow-up from employment specialists. Normally, counsellors referred clients to external activation providers who produced extensive individual reports to document activity and progress in each client case (e.g., regarding client work ability and need assessments; Gjersøe, 2020). However, intervention guidelines specified that employment specialists should concentrate on employment services and not documentation: "We should use 96% of our time on work-related things, so this means that 4% of our work week should be about reporting. Then, it's kind of limited what you report" (Employment specialist, office A).

When handling these tensions, a central concern for the supervisors was avoiding excessive documentation tasks in the new service, as this would reduce the focus on core tasks. A supervisor in office B performed shielding by shifting the focus from lacking documentation practice within the intervention, to a matter of changing the mindset among other counsellors, emphasizing how integration and close collaboration would solve documentation challenges:

> We need to think all new. [. . .] Need to "de-learn" the whole outsourcing mindset, right. Counsellors ask, 'Will we get written feedback and reports?' Then we say, no, we sit together with you. That's so unfamiliar in NAV. We're so used to buying a lot of services (Supervisor, office B)

Supervisors continuously navigated the needs of counsellors and the other teams while protecting employment specialists from NAV requirements. However, these tensions continued to exist over time and were experienced by both employment specialists and counsellors as added work pressure.

Discussion and conclusion

This study examines how frontline supervisors handled tensions when implementing a policy intervention in two frontline service organizations in Norway and discusses implications for understanding the roles of supervisors in frontline policy implementation in complex frontline organizations. The findings suggest that frontline supervisors handle tensions by enacting three main strategies: legitimating, interpreting, and shielding. Legitimating involves framing problems and solutions in specific ways, both downward to staff and upward to managers. Interpreting entails drawing on professional and local knowledge to interpret and translate rules into frontline service practices and channel frontline experience upward in the organization. Shielding involves prioritizing some rules over others, thereby protecting the intervention and staff from the requirements, norms, and procedures of the wider organization. These strategies can overlap and influence one another.

This study joins a stream of literature exploring the local and contextualized nature of frontline policy implementation, focusing on change actors and their activities (Cloutier et al., 2015; P. Hupe & Keiser, 2019; McDermott et al., 2013; Saguin & Palotti, 2020; Wimmelmann et al., 2018). The present study adds to the literature by nuancing the activities of frontline supervisors in pluralistic organizational contexts. The article specifically highlights legitimating strategies as an important form of policymaking. Supervisors actively frame understandings of problems and solutions within their organizational environments. Legitimation have commonalities with conceptual work (Cloutier et al., 2015) and theorization (Lawrence & Suddaby, 2006) from institutional theory, as processes where field actors rework new concepts and practices into legitimate solutions.

An implication of the findings is that in increasingly plural and ambiguous environments, frontline supervisors' navigation between multiple rules, goals, and mandates can increase their opportunities to interpret and maneuver, hence increasing their influence on both policymaking and institutional change in frontline organizations. Furthermore, the findings suggest that the legitimacy surrounding the intervention also influence the status and influence of the supervisors themselves. Although this study involved actors implementing a standardized intervention, their strategies and activities have commonalities with social and institutional entrepreneurs, e.g., the focus is on working towards stakeholders, being attentive to problem framing, building teams, and leading by example (Arnold, 2021; Lowndes, 2005).

The study presented here is specific with regards to the context, organizational environment, actors, type of intervention and services involved. To expand knowledge on the role of frontline supervisors and managers in public frontline service organizations, future research should explore a wider range of change actors and settings. For example, studies can benefit from including more supervisors who are neutral or critical to the intervention they implement. They may enact other strategies, such as subversion or resistance to policy goals and interventions. To assess and improve transferability of the findings, there is a need for more comparative research designs spanning different contexts, organizations, and sectors. Overall, with increasingly complex, pluralist, and ambiguous public services, it is important to continue exploring the ways supervisors and managers influence policy implementation from a bottom-

up perspective, both to nuance theoretical understandings and to improve public service delivery.

Acknowledgement

The author would like to thank the editor and the anonymous referees, as well as Tone Alm Andreassen, Eric Breit, Rik van Berkel, Nicolette van Gestel, Helle Alsted Soendergaard, Mai Skjoett Linneberg and Aliona Ignatieva for comments on earlier versions of the paper. Also thank you to all the participants in the study.

Funding

The study was financed by the project "Front line innovations in the welfare services" (INNOWEL), funded by the Research Council of Norway (project no. 256706).

Disclosure statement

No potential conflict of interest was reported by the author(s).

ORCID

Vidar Bakkeli http://orcid.org/0000-0001-7020-0938

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Appendix

Table 1. Transformation from old to new activation service provision model

	Standard service model (Old)	In-house follow-up (New)
Organizing principles	National directives, standardized ICT-systems and procedural tools, performance management	Adherence to intervention fidelity scale principles, including performance management
Main frontline role	Generalist counselors	Specialist employment-oriented role, collaborating with NAV counselors
Objectives	Labor market participation assistance, income security	Labor market participation assistance
Frontline work content	Emphasis on standardized production, assessment and categorization of clients with reduced work capacity	Individualized, comprehensive in-house follow-up of clients and employers. Involves boundary-spanning and brokerage tasks, employer engagement and continuous workplace support.
External/internal service provision	Standardized referrals to external service providers (e.g., sheltered work enterprises, contracted providers)	Build in-house service capacity for comprehensive, individualized follow-up
Caseload per frontline worker	45-130	15-20

Article 2

Bakkeli, V., & Breit, E. (2022). From “what works” to “making it work”: A practice perspective on evidence-based standardization in frontline service organizations. *Social Policy & Administration*, 56(1), 87-102.
DOI: https://doi.org/10.1111/spol.12757

Received: 9 April 2020 | Revised: 29 May 2021 | Accepted: 14 July 2021

DOI: 10.1111/spol.12757

ORIGINAL ARTICLE

WILEY

From "what works" to "making it work": A practice perspective on evidence-based standardization in frontline service organizations

Vidar Bakkeli | Eric Breit

Work Research Institute, OsloMet—Oslo Metropolitan University, Oslo, Norway

Correspondence
Vidar Bakkeli, Work Research Institute, OsloMet—Oslo Metropolitan University, P.O. Box 4, St. Olavs plass, Oslo 0130, Norway.
Email: bavi@oslomet.no

Funding information
The Research Council of Norway, Grant/Award Number: 256706

Abstract

Evidence-based standards are becoming increasingly influential in frontline services connected to labor market inclusion of vulnerable citizens. To increase our understanding of standardization in such public service delivery, this study draws on interviews and ethnographic fieldwork from two frontline offices in the Norwegian Labour and Welfare Administration (2017–2018) that use the evidence-based Individual Placement and Support (IPS) standard. Adopting a theoretical perspective of organizational practices, the study highlights two distinct approaches to practicing IPS in the frontline organizations: as a "practice shift" in one organization (i.e., creating and legitimizing radically new service practices involving closer collaboration with employers) and as a "practice revival" in the other (i.e., reinstating more traditional service practices involving a holistic client orientation). Each approach relates to a specific constellation of recruitment practices, dynamics between frontline supervisors and staff, and team integration. The study contributes to the literature in two ways. First, it shows the underlying flexibility embedded in standardization and how standards may be implemented and adapted in ways that may either promote more radical change or revive traditional practices.

Second, it nuances positions in the literature on the impact of standards on professional service work. On this basis, the study suggests broadening the attention in research on evidence-based standards in public service delivery from discussions of "what works" to understanding the broader organizational dynamics involved in "making it work."

KEYWORDS
activation work, evidence-based practice, individual placement and support, professionalism, standardization

1 | INTRODUCTION

Driven by the "what works" agenda that spans across policy fields, frontline social services are increasingly being standardized to promote efficiency, transparency, legitimacy, quality, and accountability (Boaz et al., 2019; Ponnert & Svensson, 2016). Standards are typically explicit, written, formalized, and connected to the norms of a practice (Brunsson & Jacobsson, 2000). Many evidence-based standards, such as guidelines, programs, evidence-based practice (EBP), assessment tools, and interventions, are intended to support frontline decision-making and promote welfare ideals, like service individualization, user involvement, and improved inter-organizational collaboration (Ponnert & Svensson, 2016).

The literature focuses extensively on the challenges of implementing evidence-based standards in frontline service delivery and professional work (Bergmark et al., 2018; Gray et al., 2009; Høybye-Mortensen, 2013; Ponnert & Svensson, 2016; Skillmark & Oscarsson, 2020; White et al., 2008). A related debate concerns whether standards should be implemented with high fidelity or be adapted to local needs (Damschroder et al., 2009; Durlak & DuPre, 2008). However, a challenge with standardization is that standards do not exist in isolation but are introduced within institutionalized organizational settings—contexts that are "already populated by practices, tools, people and other standards" (Timmermans & Epstein, 2010, p. 79). Hence, implementing and using standardized services in local organizational contexts entails challenges and dilemmas of adapting the standard to local needs *as well as* adapting the local organizations to suit the standard.

This article aims to add to these debates by exploring the consequences that standards may have for the organizational contexts in which they are used in everyday work (Schatzki et al., 2001; Timmermans & Berg, 2003). As such, the article focuses on the standardization of labor market inclusion services involving a range of institutionalized forms of work to "activate" (e.g., motivate, compel, assist, broker, and negotiate) citizens to improve their likelihood of entering the labor market (Andreassen, 2019; Berkel & Aa, 2012). Importantly, these types of services are difficult to standardize because of the inherent heterogeneity of clients and their service needs.

Specifically, the article explores how evidence-based standards are "made to work" by frontline workers and managers in everyday service provision. For this purpose, the study draws on a perspective of organizational practices centered on everyday work activities and understandings (Schatzki et al., 2001; Smets & Jarzabkowski, 2013). The study is based on ethnographic fieldwork and interviews conducted from 2017 to 2018 in two frontline offices of the Norwegian Labour and Welfare Administration (NAV). Both offices have implemented the evidence-based standard individual placement and support (Drake et al., 2012), which has become an increasingly popular means of standardizing activation services in NAV.

2 | EVIDENCE-BASED STANDARDIZATION AND FRONTLINE PRACTICES

Standardization is central in frontline service organizations that deliver services to people with heterogeneous and complex needs (Brodkin & Marston, 2013; Hasenfeld, 2010). For example, standards allow for classifying and

categorizing clients according to their needs (e.g., with assessment tools). They also enable frontline workers to follow guidelines and procedures in their follow-up work, and since the standards are approved by authorities, this ensures a certain level of accountability for the services.

While different types of standards exist (including design standards, terminological standards and performance standards; Timmermans & Epstein, 2010), this study focuses on procedural standards, which specify the steps practitioners should take when carrying out their work (Timmermans & Berg, 2003). Standards may be more or less detailed, vary in scope, and focus on individual practitioners or cooperation between actors (Timmermans & Epstein, 2010). In accordance with the embedded research model of EBP (Nutley et al., 2009), standards are chosen by central authorities and implemented across local services. Thus, research knowledge enters frontline practice as it is "embedded in systems, processes, and standards" (Nutley et al., 2009, p. 555). Even so, a well-known challenge is that the standards may conflict with institutionalized professionalism and professional autonomy in the service contexts in which they are implemented.

The literature on standardization in public service delivery emphasizes standards and whether they strengthen or weaken professional work. Some authors have portrayed standards as mainly top-down managerial tools that restrict discretionary decision-making, override situated attention to complex client needs, and disregard ethical considerations in pursuit of performance, efficiency, and effectiveness (Gray et al., 2009; Petersén & Olsson, 2014; White et al., 2008). Others have argued that standards increase scientific legitimacy (Barfoed & Jacobsson, 2012), strengthen professionals' ability to solve (complex) work tasks (Skillmark et al., 2019), and promote empowerment, user involvement, and resource-oriented services (Natland & Malmberg-Heimonen, 2016). Authors have also uncovered that professionals use discretion to alter and modify standards (Sletten & Bjørkquist, 2020). Therefore, standards can impact the local context in various ways (Høybye-Mortensen, 2013), either positively (e.g., increased equity, consistency, and effectiveness) or negatively (e.g., increased paperwork burden; Robinson, 2003).

A related debate focuses on the implementation of EBP and whether programs should be implemented with high fidelity (i.e., the degree of faithful replication of the originally intended program) or whether local adaptation should be allowed (or encouraged). From the view of achieving fidelity, adaptation is often regarded as an implementation failure that will negatively affect service outcomes. For example, Bond and Drake (2019), Corbière et al. (2010), and Bonfils et al. (2017) argued that the IPS standard should preferably be implemented with high fidelity. In contrast, implementation frameworks proposed by Durlak and DuPre (2008) and Damschroder et al. (2009) emphasize the value of adaptation. When local actors adapt a program, it can result in better implementation, because they are knowledgeable and able to adjust an intervention to enhance its effectiveness in the given context.

This study aims to shift attention toward the relationship between evidence-based standards and the *organizational context* of professional work. Some studies have shown the importance of organizational-level factors, which can contribute to a potentially dysfunctional (or lacking) impact of standardization. For example, the literature on street-level bureaucracy highlights organizational factors such as resource limitations, policy directives, program content, and governance mode (e.g., new public management [NPM]; Fuertes & Lindsay, 2016). Skillmark and Oscarsson (2020) identified organizational factors that explained increasing deviance from a standard over time. These included lack of leadership, weak competency development, and lack of reflection arenas. In a study on frontline practitioners who deviated from standardized tools, Sletten and Bjørkquist (2020) highlighted the role of managers, who supported discretionary modification of the standard because of shared professional commitments.

Studies focusing on the organizational context have also shown the different influences that standardization can have on different groups of workers within the same organization. For example, Bosk (2019) found that workers' social status may impact their use of standards; workers with higher social status subverted the standard, while workers with lower status followed the rules. Other studies have highlighted the decoupling of the standard and actual practices in organizations (Sandholtz, 2012). Nordesjö (2020) observed that actors at different levels in an organization framed the standard in two different ways: actors at the department level emphasized conformity to the standard and outward legitimacy, while actors at the unit level framed the standard as supportive of professional perspectives and needs. The loose coupling of these framings emphasized how standards are tweaked and framed to serve different interests and needs.

These studies provide important insights into the significance of standards in frontline service delivery and professional work. However, they downplay the *interplay* between the organizational context and frontline work. Therefore, little is known not only about how the standards are used but also about how the organizations themselves change and differ as a result of standardization. Furthermore, while most studies have focused on established (semi) professions, such as social workers, few have examined standardization of frontline practices by workers with more heterogeneous professional backgrounds, such as activation workers. Moreover, previous studies have mainly focused on practitioners who perform routine case-processing tasks (e.g., use of standardizing assessment tools). Few have explored standardization of work involving boundary-spanning, inter-organizational, and entrepreneurial roles, such as employment specialists (Ingold, 2018). Therefore, to complement the existing research, this study offers an in-depth analysis of frontline activation work practices within a specific evidence-based standard that was implemented in two frontline service organizations.

3 | A PRACTICE PERSPECTIVE

This study adopts a practice perspective, focusing on the everyday work of organizational actors (Smets & Jarzabkowski, 2013). This perspective involves an empirical focus on people's actions in organizational settings and a theoretical focus on the mutually constitutive relationship between structures in organizational life and people's actions (Feldman & Orlikowski, 2011). In this study, the practice perspective allows for examining the standard's implementation in situated, everyday practice.

Practices are patterns of activities and actions that repeat over time in local, situated contexts (Nicolini, 2013) and can be defined as "organized human activities" (Schatzki, 2005, p. 471). These activities are made coherent by a common purpose, rules, and shared meaning (Schatzki, 2005; Smets et al., 2012). The main level of analysis is located above individuals and below the organizational level, focusing on work-level actions. This perspective also involves studying the "shared practical understandings" (Schatzki et al., 2001, p. 2) that individuals reproduce and modify.

Furthermore, the practice perspective acknowledges the roles of individual agency, initiative, and creativity (e.g., to modify and reinvent practices) while also situating agency within institutional and organizational structures (Nicolini, 2013). It focuses on the practical-evaluative dimension of agency, conceptualizing how actors get things done in everyday activities (Emirbayer & Mische, 1998). In their situated, here-and-now practices, actors draw on habits, routines, emotions, and knowledge to make choices and confront challenges (Orlikowski, 2002). This knowledge includes professional knowledge (from training and formalized expertise) as well as experiential, tacit, and common-sense forms of knowledge (e.g., lay "everyday" knowledge and shared societal values; Harrits, 2016). Therefore, at the individual level, evidence-based standards interact with and possibly challenge frontline workers and managers' efforts to structure and perform work tasks.

At the organizational level, standards can be powerful tools for organizational change by "challenging and altering institutionalized behaviour and identities" (Brunsson et al., 2012, p. 620). However, how the standards are implemented is a central factor influencing the outcome of standardization, in addition to the actual content of the standard (Timmermans & Berg, 2003). Managers and first-line supervisors are central actors in standard implementation (Brunsson & Jacobsson, 2000; Sandholtz, 2012). They work purposefully to influence frontline workers to practice in accordance with the standard. However, the rules of the standard are applied and enacted in emergent situations, thus requiring both managers and frontline workers to do reflexive and interpretive work. Furthermore, standards are introduced in the context of other institutionalized—and potentially differing—ways of ordering and performing services. This can create conflict between new and old configurations, thereby increasing the need for managers (and frontline workers) to navigate and resolve these tensions.

This navigation generates the dynamic between standards, frontline workers' adherence to them, and the organizational context. This study adopts the practice perspective to investigate how frontline service workers and

supervisors make a standard work in their everyday activities. The outcomes of such activities in terms of organizational-level variations in practices are also investigated.

4 | THE STUDY

4.1 | Research context

At the level of frontline services, NAV offices provide an ideal context for examining the standardization of frontline activation work. NAV offices are complex, multi-purpose, one-stop shops (Minas, 2014) providing integrated employment and welfare services, including social assistance, social security, employment, and other social services. The offices were established with the major administrative NAV reform instituted from 2005 to 2011, merging national employment services, the insurance agency, and municipal social assistance services. In line with international policy trends toward individualized and integrated service delivery (Heidenreich & Rice, 2016), the core objective of the reform was to establish holistic, coordinated services adapted to individual client needs (Fossestøl et al., 2015).

Tensions between organizational standards and conditions for frontline (professional) work represent a core dynamic in organizations like the NAV offices (Berkel & Aa, 2012; Fossestøl et al., 2015; Fuertes & Lindsay, 2016). In the years after the reform, the offices were increasingly standardized, with strong emphases on procedures, tools, routines, performance, uniformity, and rationality (Fossestøl et al., 2015). While practitioners' discretion, skills, knowledge, and ethics are central to achieving policy goals (Gjersøe, 2020), NAV staff have heterogeneous educational backgrounds (Sadeghi & Fekjaer, 2018). Such professional diversity, lack of a common knowledge base, and strong organizational demands are general features of activation work (Berkel & Aa, 2012). A government-appointed expert committee identified several challenges in NAV that prevented the delivery of individualized, user-centered services: overly strict and bureaucratic procedures, inadequate client involvement, lack of contact with employers, and overreliance on external activation providers (Ministry of Labour and Social Affairs, 2015–2016).

To develop individualized, work-oriented follow-up services for clients with complex problems, NAV implemented the government-funded In-house Follow-up program in 2017. The program provided funding to NAV offices for establishing in-house employment specialist teams. By the end of 2019, approximately one third of the country's 326 offices had these teams. The teams adhere to either the IPS model or a modified standard developed internally by NAV. While NAV counselors (i.e., the main occupational category in the NAV offices) assess and refer clients to external activation providers (e.g., sheltered work enterprises) and have caseloads of 40–130 clients, employment specialists provide more comprehensive and individualized follow-up concerning clients' employment and work context, in accordance with a "place- train" paradigm (Frøyland et al., 2018). The employment specialists also have smaller caseloads of 15–20 clients. Employment specialists collaborate with counselors, who are responsible for administrative follow-up (including finance and welfare benefit issues), and mental health professionals.

Like several other EBPs, IPS includes a fidelity scale (Drake et al., 2012). The 25-point scale indicates the extent to which the local service "adheres to specific model standards" (Bond & Drake, 2019, p. 874) and specifies many aspects of the service related to the organization, team roles, and work tasks. Central IPS principles include a focus on competitive employment (i.e., ordinary, paid jobs), rapid-start job search, systematic job development based on client preferences, time-unlimited and individualized follow-along support, integration of activation and mental health services, and service eligibility based on work motivation (Drake et al., 2012). For example, the employment service is structured into six phases: intake, engagement, assessment, job placement, job coaching, and follow-along support (Becker et al., 2015). The standard includes performance indicators to monitor activities of individual employment specialists (e.g., the number of face-to-face employer contacts per week on behalf of specific clients, percentage of work hours spent out in the community meeting clients and employers). The standard also requires biannual fidelity reviews performed by external evaluators.

Overall, the "new" occupational role of employment specialists is integrated into the institutionalized organizational context of NAV offices. In these processes, central organizational actors include the local NAV office managers

and frontline supervisors, the latter being in charge of implementing the standard in frontline work (e.g., by monitoring and supervising IPS teams). While the IPS standard systematizes implementation, managers have significant leeway in how the local services are organized. This leeway includes, for example, the team's structure and how the team is integrated in the organization. This balance between managerial and organizational autonomy (involving local needs and aims) and the pre-defined structure of the standard form the empirical background of the study.

4.2 | Methods and data

This article focuses on two NAV offices following the IPS model as examples of evidence-based standards and is based on in-depth interviews and fieldwork conducted in 2017–2018. The two offices were selected due to their longstanding experience with the IPS standard. They can be considered critical cases (Flyvbjerg, 2006)—that is, offices that are more likely than others to be attentive to following the standard. The standard had been part of regular services in these offices for several years, and the managers had a strong commitment to service development.

Both offices had two employment specialist teams providing follow-up to similar client groups. The IPS team provided services for clients receiving mental health treatment and had clients referred from these services. The In-house Follow-up teams worked with wider target groups (e.g., people with substance abuse problems or somatic health problems, youth, and refugees) referred by NAV counselors. Table 1 provides the key characteristics of the two offices.

The interview data consist of 60 interviews with office managers, middle managers, frontline supervisors, employment specialists, and NAV counselors; these interviews were conducted in several rounds between March 2017 and December 2018 (see Table 2). While some authors (Nicolini, 2013) have suggested that observation is more appropriate than interviews for studying practice because people have difficulties in talking about what they actually do, other authors have stressed the value of using interviews, asserting that people can talk in revealing ways about actions and routine practices (Hitchings, 2012). Interviews are also useful for deepening our understanding of "how people make sense of their work and the issues they believe are important" (Barley & Kunda, 2001, p. 84).

The informants were encouraged to talk about their role, professional background, the nature of their work with clients and employers, collaboration with other professionals and services, use of knowledge in their work, and views regarding the organization, managers, and the standard. Most interviews were performed by the first author, while some were performed by the second author and other researchers on the project team. The interviews lasted from 45 to 90 min. Prior to the interviews, informed, written consent was obtained from each informant. The interviews were recorded and transcribed by external transcribers, and the informants were coded to make the statements attributable to individuals while maintaining their anonymity. This coding was based on role (EMP for employment specialists, SUP for supervisors, MAN for managers), numbering for each informant, and office (A and B). Given the focus on employment specialist practices, the counselor interviews were not part of the analysis but were used as background material to inform the understanding of the two organizations.

The fieldwork comprised a total of 30 days in the two case offices. Field observation is useful for capturing work practices as they unfold, experiencing ongoing negotiations between actors, and avoiding overreliance on retrospective interview accounts (Smets & Jarzabkowski, 2013). The first author spent 15 days in office A (between November 2017 and February 2018) and 15 days in office B (from March to April 2018). The fieldwork involved observing daily life and team meetings in the organizations and shadowing employment specialists as they traveled in the local community and met with employers and participants. The fieldwork was documented in field notes.

4.3 | Analysis

The analytic process was abductive, involving iterations between raw data, themes, and theory (Schwartz-Shea & Yanow, 2011; Timmermans & Tavory, 2014). The analysis was primarily based on the interviews, but it was also informed by the fieldwork experiences and field notes. HyperResearch qualitative analysis software was used.

TABLE 1 Comparison of offices A and B

	Office A	Office B
Geographical setting	Rural municipality	Urban municipality
Staff	Under 60	Under 200
Organization	Three departments (specialized model): • Welfare (including social assistance) • Follow-up (including the youth team) • Employment specialists	Three departments (generalist model): • Each department covers all services • Staff further divided in teams • Two employment specialist teams
Managers	One top manager, three department managers	One top manager, two vice-top managers, three department managers, team leaders
Employment specialist teams	• Two teams: IPS and in-house follow-up • Both teams follow the IPS standard[a] • Staff: 13 in November 2018	• Two teams: IPS and in-house follow-up • Both teams follow the IPS standard[a] • Staff: 14 in November 2018
Clients per worker[b] (approximation, November 2018)	• Standard effort, situational effort: 100 • Specially adjusted effort: 40–45 • Employment specialist: 12–20	• Standard effort, situational effort: 120–130 • Specially adjusted effort: 60–70 • Employment specialist: 10–20

[a]The in-house follow-up teams also followed the IPS standard but were not integrated with mental health services.
[b]NAV allocates clients to one of four categories on the basis of an assessment of support needs: "standard effort," "situational effort," "specially adjusted effort," and "permanently adjusted effort."

TABLE 2 Interviews in offices A and B

Informant role	Office A	Office B
Office managers and middle managers	6	9
Frontline supervisors	2	3
Employment specialists	8	12
Counselors	12	8
Total	28	32

The analysis proceeded in several steps and was based on different analytical strategies. The first stage of analysis focused on a close reading of the informants' accounts of their work practices and what seemed to be the shared practical understandings in the offices. This part of the analysis provided an overview of the informants' comments. A thick case description was written for each office to explore the relationship between each interviewee and the broader office dynamics (Miles et al., 2014). Since the interviews were conducted at different time intervals, key findings and interpretations from each round of interviews were presented to the offices. Feedback from these sessions was used to refine the interpretations.

A thematic, grounded analysis of the interviews was then performed to procure a systematic overview of the material and organizational contexts (Braun & Clarke, 2006). This stage of analysis moved from codes to broader themes and relationships. Five themes, or shared practical understandings, were elaborated: views on the standard, team situation, client work, employer work, and collaboration. These themes were used to compare the two offices and identify differences between the informants from the two sites. Sections 5.1 and 5.2 examine the results of this analysis.

In the final stage of analysis, the organizational-level factors that seemed to influence and explain the variation between the two sites were examined. These factors were identified inductively by "zooming out" (Nicolini, 2009,

p. 130) and comparing similarities and differences between the two sites. This was combined with a sensemaking strategy examining interactions between "alternate templates" (Langley, 1999)—that is, between alternative interpretations of the dynamics in each case, based on the empirical material. Although the identified factors offered sensible explanations of case differences, other theoretical factors may not have been identified by this inductive approach. The results of this analysis are summarized in Section 5.3.

5 | "MAKING IPS WORK" IN THE TWO FRONTLINE ORGANIZATIONS

In this section, the organizational work practices and understandings in the two offices are compared. The analysis is summarized in Table 3.

5.1 | Office A: Standardization as "practice shift"

At the organizational level, office A sought to use the standard to shift the traditional practices and inward attention in the office toward a focus on employer engagement. Regarding *views of the standard*, the shared work practices in this office involved a strong adherence to the principles of the standard. According to two employment specialists in this office, "The results are evidence-based through 30 years. There's no point discussing whether it works or not" (EMP5A; EMP4A). Several others talked about belief and loyalty to the model: "I really believe in the model. The higher the score [in fidelity reviews], the closer to IPS it is, and better quality to participants" (EMP8A). Informants frequently spoke of "staying true to the intention" of the standard:

> Some of the points [of the fidelity scale] seem silly, until you understand the intention and thoughts behind [them]. […] For example, why you should spend 65 percent of your office time outside of office. […] The intention is that jobs are not created in the office, and you don't see them there; you have to go out. (EMP8A)

A key reason for this strong shift in attention and practices toward employer engagement was that the vast majority of employment specialists lacked previous experience in NAV and welfare services. Indeed, office A was characterized by workers with non-professional backgrounds from the private sector who instead had knowledge of employers, recruitment, and the labor market. One exception was an informant with a healthcare background. For these employment specialists, the standard was a way to grasp a new and unfamiliar role, providing "the frame around everything" (EMP5A; EMP7A):

> I didn't have any foundation for thinking differently than what I was trained in, in a way. […] Since I didn't have any prior NAV experience, I didn't have any other work method […] So, I thought it was really nice to have some frames to relate to. (EMP4A)

One core activity in the standard-based practices is individualized *client work* through pre-defined phases, from intake via job placement to follow-along support. Many clients have unstable life situations, such as periods of more acute mental health illness, personal crises, substance abuse rehabilitation, loss of work and starting over again, and economic difficulties. In this office, the employment specialists had limited professional competence or client follow-up techniques to draw on. Informants emphasized a common-sense approach to client work: "You have to have some healthy common sense […] you need to want to help those people; you cannot go in and have a bad attitude" (EMP7A; EMP5A). Several informants viewed client work as particularly difficult: "The most challenging thing is to relate to so many different personalities. You have to twist your head around all the time, right" (EMP7A; EMP6A).

TABLE 3 Comparison of work practices and understandings in offices A and B

	Office A	Office B
Views on the standard	Seen to reinforce a shift in attention and work practices toward employers	Seen to promote a methodological approach enabling work practices toward individual clients
Client work	Emphasis on common-sense approach Challenging because of limited professional competence	Adaptation of standard to enable a holistic client approach and use of professional competence
Employer work	Emphasis on employer engagement and relational work Use of professional competence and resources	Emphasis on common-sense approach Challenging because of limited professional competence
Collaboration	Emphasis on specialization and work division between employment and welfare-oriented tasks	Emphasis on coordination and networking with other public services
Team situation	Positive views on the work environment and performance management	Tensions and critical views on performance management

Another core activity of the service is *work towards employers*—that is, building relationships with specific employers over time. This was the strongest competency of the employment specialists in this office due to their extensive experience and knowledge of the private sector. Some had been employers before, while others had experience with business negotiations, business administration, coaching, recruitment, and sales. Therefore, they used this (professional) knowledge and experience in their work practices. As one informant formulated it, "It's about understanding employers and the job match. […] You adjust to the tribal language of the employer out there and make it open up" (EMP1A). Others emphasized adjusting their language and approach to different situations: "I'm like a chameleon; I adjust towards different employers. Maybe I'm like this here and like that with another" (EMP3A).

Concerning *collaboration*, employment specialists emphasized the task division as employer-oriented for them and welfare-oriented for the NAV counselors and other frontline professionals: "I'm not supposed to be a psychologist or to intervene in that way. [...] Others can take on their hats, and I can focus on work" (EMP7A). In fact, they did not have much competence regarding the NAV bureaucracy: "I know nothing about NAV things; I know jobs" (EMP4A; EMP7A; EMP6A). This was generally regarded at the office as a key advantage, as they were not stuck in institutionalized work practices. They tended to reinforce cultural work differences between them and the "bureaucratic slowness," rules, and complexities of the NAV system. For example, one informant noted a lack of mutual understanding: "NAV counselors hit their head against the wall and wonder what the hell we are doing. And we are annoyed with counselors; like, what the heck are they supposed to do?" (EMP6A).

Regarding the *team situation*, the standard-based shift was reinforced in team meetings, conversations, and discussions, which promoted adherence to the key elements of the standard (i.e., employer visits, rapid start of the job search, increased work hours spent out in the community meeting employers and clients). The standard was a central element in these meetings, where performance measures tracking the activities of individual employment specialists were emphasized. The shared meanings in this office involved positivity toward this way of organizing the evidence-based work, and many viewed the focus on performance as a motivating factor (EMP4A; EMP2A; EMP7A): "I like results. I think it triggers something positive in me. I think you need something to push you forward" (EMP5A).

5.2 | Office B: Standardization as "practice revival"

The standardization practices in office B were characterized by reviving traditional professional work practices through enabling the employment specialists to provide holistic client follow-up practices. For example, *views on the*

standard emphasized how it enabled employment specialists to "work methodically" (EMP7B) by being "a total package that helps us in daily work, […] it's really user-centered" (EMP4B). Such holistic client-oriented work was at the core of the traditional emphasis and reform objectives of the NAV reform, which were later marginalized by proceduralism and bureaucracy. Hence, the standard was adapted in this office to promote and re-institutionalize more traditional practices. An employment specialist provided an acute formulation of this general point:

> The method sounds like something very special and unique. But actually, what is it really about? […] Close follow-up of employers and jobseekers. This is what NAV has been trying to do for many years. (EMP9B)

The informants had experienced the switch from counselors to employment specialists as a shift from "controlling clients" to "focusing on possibilities" (EMP7B). Two informants emphasized that the standard promoted social work professionalism: "I think I'm more of a social worker in this role than elsewhere in NAV. […] You get a very different relation to the client" (EMP9B; EMP8B). The role focused on supportive tasks rather than administration of demands and rules. A central feature of office B was that all informants had prior experience as NAV counselors, and 10 out of 12 were educated as social workers or had related welfare backgrounds. This was an important factor influencing work practices within the standard.

A key feature of the standard-based practices in office B was promoting an individualized and comprehensive approach to *client work*. Employment specialists adapted the standard by enacting more holistic client follow-up practices than prescribed (e.g., with housing, social network, economy, and clients' personal lives). They valued addressing client needs in a broad way and argued this way important also to achieve work-oriented goals: "You really do a lot of things that are not counted, that you are not supposed to do, but you see that you have to do them, right" (EMP3B; EMP12B; EMP10B). Some also underlined the flexibility of the standard: "We're quite flexible and decide on many things ourselves" (EMP13B; EMP6B). For example, some employment specialists were involved in clients' social and family networks:

> We talk with family; it's like you become part of their close network in a way, almost become part of the family of each jobseeker. So, now I have 11 [clients]. I will have 18 by summer. So, that's a lot of families to relate to. (EMP3B)

Conditions defined by the standard, such as lower caseloads, were perceived as enabling the use of professional resources and skills (e.g., as social workers): "You need an understanding of the people you work with. They're not, to use NAV terminology, 'ordinary job applicants'. You need the ability to guide them" (EMP8B; EMP9B). Another informant utilized professional techniques from their professional background in mental health services:

> I use a lot of techniques from cognitive therapy […] to guide and bring up questions, be curious and find their strengths, in a way build them up. […] I use my background daily. (EMP4B)

Furthermore, many employment specialists mentioned the difficulty of tasks connected with *employer work*: "It's hard to have a bad day at work when you know you have loads of meetings out there" (EMP4B). Another claimed that "it's demanding. I should know the labor market well. You can run a bit empty, run out of ideas" (EMP6B). Informants had limited experience with employers. One particular challenge was to succeed with job placements: "The most difficult part is moving forward, […] from presenting a candidate, […] to get the employer to say yes, we have a need now. I think it's difficult" (EMP5B).

Regarding *collaboration*, frontline practices in office B emphasized coordination activities and inter-organizational networking with different public services: "Yesterday, I was in a responsibility group meeting with my participant [...]. It's a big, very fuzzy case [...] I was there with doctor, drug consultant, NAV, and therapist" (EMP7B). Some

employment specialists in office B deviated from the standard by performing administrative tasks to help clients: "It's easy to take care of other stuff, like finances and other things. They [clients] can be like, 'Hey, I have not received social assistance for two months, I cannot get in touch with my counselor—what's up?' Things like that" (EMP12B).

The team situation in office B was characterized by employment specialists being more critical of the performance measures integrated in the standard. As one employment specialist claimed, "There are high expectations about time spent outside and employer contact, and very individualized demands. You're scrutinized very often, much more than you are used to in NAV" (EMP9B). This caused a loss of motivation: "I lose motivation for the process, right, with all the focus on numbers. Even though I know the method is like this or that, I do not need that focus in daily work, like, all the time" (EMP8B). Two informants viewed these performance measures as less problematic: "I do not think it's been very challenging; it's okay. […] If I need to deliver some results, I just do it. I do not feel a lot of pressure" (EMP6B).

5.3 | Organizational factors contributing to practice variation

The two offices implemented the same procedural standard, and the office managers in both cases had quite similar views regarding the policy signals around employer engagement and the role of the IPS standard in providing services to clients with complex needs: "It's exactly the way we want to work" (MAN1A) and "We have to concentrate resources around what works" (MAN1B). Nevertheless, systematic differences existed at the organizational level regarding how the standard was followed. By focusing on organizational factors contributing to practice variation, this section seeks to develop "a sensible explanation of why the practising is the way it is and not otherwise" (Nicolini, 2009, p. 134).

A central difference between the two offices was in *recruitment practices* and, thus, the professional competence of the employment specialists. Office A hired frontline workers externally; both office managers and frontline supervisors emphasized the importance of employer knowledge and experience from the private sector. One stated, "We see that experience from business life is very useful, from recruitment, sales, or service" (SUP1A). Frontline supervisors also stressed personal suitability for the role, emphasizing commitment, sociability, and people skills. Hence, this recruitment strategy involved hiring staff without experience in the welfare field, who depended on the standard to structure and legitimize their work, instead of recruiting persons with professional welfare backgrounds and NAV experience. This strategy had partly developed in response to negative experiences of hiring internal counselors: "People here enjoy being counselors; they do not necessarily fit to be employment specialists [...] Many in NAV have no understanding of employers" (SUP1A).

In contrast, office B mainly hired employment specialists internally. Consequently, staff were welfare professionals with corresponding educational backgrounds and frontline experience. Reasons for this recruitment strategy could be found in the office managers' views regarding competency requirements, which emphasized the value of professional competence and frontline experience in the new role: "I think they have a great advantage because they understand the [NAV] system, the measures, and the vocabulary, and they have access to information" (MAN2B). Frontline supervisors emphasized that varied backgrounds were relevant and valuable in the role, and belief and trust were important: "You need that faith that anyone can work. That's the main focus" (SUP1B).

The *dynamics between frontline supervisors and staff* constitute another organizational factor that contributes to explaining the practice variation between the two offices. Frontline supervisors in office A actively involved staff in service development and created a good workplace environment: "I need to continuously make sure that people have a good time and are recognized for their work—that they feel attended to and can develop" (SUP1A). Supervisors formally involved staff by delegating tasks and prioritized competency development. They also encouraged their team's critical reflection and deliberation. Previous research has evinced how participatory processes can increase staff support for standards (Sandholtz, 2012), and this was true of office A; the staff highlighted the good work environment and team support they experienced.

In office B, supervisors emphasized the importance of sticking to the "regime" (SUP2B) represented by the standard: "I'm very direct, very result-oriented. [...] because I'm very anchored in the theory, the method" (SUP2B). The frontline supervisor role and team structure were hierarchical, and supervisors did not have clear strategies for involving staff in service development and delegation of tasks and roles, even though the staff comprised experienced professionals. The supervisors focused on the need to "unlearn former counselor habits" (SUP1B) and "cure NAV sickness" (SUP2B)—that is, deviation from the standard. Conflicts and tensions were greater in office B, particularly in one of the two teams, regarding standard requirements and loss of motivation among staff (e.g., because of performance pressure and a focus on activity indicators).

A third organizational factor was differences in *team integration in the local organization*. Informants in office A described the employment specialist team as an "island in the organization." Early in the study, the team was located on a separate floor and had their own logo and website. They developed a strong sense of group identity that was different from the traditional NAV identity, and this contributed to cultural differences and misunderstandings between them and NAV counselors. This lack of integration hindered collaboration. In contrast, the employment specialists in office B were integrated with the other teams in the organization, sitting physically with the NAV counselors. This form of integration contributed to holistic and collaborative practices with NAV counselors but also made the employment specialist team more fragmented.

6 | CONCLUSION

This study uses a practice perspective to examine the everyday usage and adaptation of standardized, evidence-based manuals in activation service delivery. The literature has focused extensively on the challenges of implementing evidence-based standards (Bergmark et al., 2018; Bosk, 2019; Høybye-Mortensen, 2013; Nordesjö et al., 2020; Petersén & Olsson, 2014; Ponnert & Svensson, 2016; Skillmark et al., 2019; Skillmark & Oscarsson, 2020; Sletten & Bjørkquist, 2020). Thus, this study's aim is to shift attention to the implications of standards for the organizational contexts in which they are used on a situated, day-to-day basis (Schatzki et al., 2001; Smets & Jarzabkowski, 2013; Timmermans & Berg, 2003).

From this perspective, the study demonstrates the existence of two fundamentally different ways of practicing such evidence-based standards: standardization to promote a shift in institutionalized practices (i.e., from inward emphasis to outward emphasis on employers) and standardization as a revival of traditional (ideal-type) professional work practices (i.e., from rigid, bureaucratized service provision to close, holistic, and personalized service provision). These are important distinctions in evidence-based services that more traditional implementation analyses may overlook or downplay. Focusing on everyday practices provides additional nuance to the organizational significance of evidence-based standardization. Furthermore, the study identifies organizational factors that contribute to explaining practice variations between offices A and B, including recruitment policies, internal formal organization, dynamics between frontline supervisor and staff, and team integration in the wider organization.

This study adds new knowledge to the literature regarding the standardization of frontline service work and activation work. First, the findings highlight the underlying flexibility embedded in standardization (i.e., flexibility within fidelity; Kendall & Beidas, 2007) and how standards may be implemented and adapted in ways that either promote radical change or revive traditional practices. In any case, the significance of this finding is that standards—through relational dynamics between practitioners, frontline supervisors, office managers, and organizational conditions (e.g., recruitment policy, internal formal organization, team integration)—have important implications for organizations. In other words, this finding emphasizes the broader, bidirectional, dynamic, and mutually constitutive relationships between standards, different groups of frontline workers, managers, and organizations.

Second, the findings nuance positions in the literature either for or against procedural standards. Far from promoting simple routinization, the case study suggests that standards can support and legitimize work styles with professional characteristics (e.g., by enabling practitioners to draw on professional repertoires, focusing on

supportive tasks, and by promoting client-centered approaches). However, the standard also introduced individualized performance measurements, structured work tasks, and strong managerial roles. Thus, the findings align those of authors who have identified heterogeneous and diverse consequences of standardization (Høybye-Mortensen, 2013; Robinson, 2003; Skillmark et al., 2019; Timmermans & Epstein, 2010). Yet this study goes further by showing how standardization not only creates tensions between old and new frontline worker identities, managerial and professional agendas, and old and new organizational configurations. It shows how standards can be embedded in organizational practices in ways that promote distinct service practices.

A limitation of this study is the reliance on data from only two research sites. In both sites, managers supported and prioritized the standard. A research design with more varied cases, including offices with more neutral or negative orientations to the standard, could have strengthened the analysis. To address this limitation, we drew on knowledge from other research projects about NAV offices that implemented standards. The limited research design also enabled more in-depth data gathering, which was an advantage for analysis. Another limitation is the rather short time spent doing fieldwork, making it difficult to grasp frontline workers' client and employer follow-up practices, as these unfolded over longer trajectories. We handled this by drawing on the extensive interview material collected through several visits.

This study highlights a need to further examine the mutually constitutive relationship between standards and practitioners, the standard's interaction with organizational factors, and how it affects various worker groups differently. Standards can promote innovative work practices based on central welfare policy ideals in bureaucratic contexts, but they can also engender increased managerialism and control. Therefore, further investigations of how rigidity can be balanced with flexibility and attention to worker skills and agency within frontline service environments are recommended.

ACKNOWLEDGEMENTS

This article is based on research funded by Norway Research Council, as part of the project "Front line innovations in the welfare services" (INNOWEL). We thank the two reviewers for insightful and valuable comments. We are also grateful to the employees in NAV for taking the time to participate in the study.

CONFLICT OF INTEREST

The author declares no conflict of interest.

DATA AVAILABILITY STATEMENT

Research data are not shared in order to ensure anonymity of research participants and due to privacy restrictions.

ORCID

Vidar Bakkeli https://orcid.org/0000-0001-7020-0938
Eric Breit https://orcid.org/0000-0001-5069-7406

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How to cite this article: Bakkeli, V., & Breit, E. (2021). From "what works" to "making it work": A practice perspective on evidence-based standardization in frontline service organizations. *Social Policy & Administration*, 1–16. https://doi.org/10.1111/spol.12757

Article 3

Bakkeli, V. (2022) Evidence-based activation work and service individualisation: client and frontline worker experiences with a standardised intervention, European Journal of Social Work.
DOI: https://doi.org/10.1080/13691457.2022.2083085.

European Journal of Social Work

ISSN: (Print) (Online) Journal homepage: https://www.tandfonline.com/loi/cesw20

Evidence-based activation work and service individualisation: client and frontline worker experiences with a standardised intervention

Vidar Bakkeli

To cite this article: Vidar Bakkeli (2022): Evidence-based activation work and service individualisation: client and frontline worker experiences with a standardised intervention, European Journal of Social Work, DOI: 10.1080/13691457.2022.2083085

To link to this article: https://doi.org/10.1080/13691457.2022.2083085

Published online: 02 Jun 2022.

EUROPEAN JOURNAL OF SOCIAL WORK
https://doi.org/10.1080/13691457.2022.2083085

Routledge
Taylor & Francis Group

RESEARCH ARTICLE

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Evidence-based activation work and service individualisation: client and frontline worker experiences with a standardised intervention

Evidensbasert aktiveringsarbeid og tjenesteindividualisering: Brukere og aktiveringsarbeideres erfaringer med en standardisert intervensjon

Vidar Bakkeli

Work Research Institute, OsloMet—Oslo Metropolitan University, Oslo, Norway

ABSTRACT

Evidence-based interventions standardise frontline social services, but may also promote policy ideals like service individualisation and client involvement. This article examines how clients and frontline workers experience activities within an evidence-based intervention known as Individual Placement and Support (IPS) in the Norwegian Labour and Welfare Administration. The article draws on interviews and fieldwork conducted in one frontline office from 2017 to 2019. The findings show how clients developed relationships with frontline workers, were given time to follow individual trajectories and received tailored support when facing challenges. Intervention activities were characterised by flexibility, a relational approach to clients and detachment from normal organisational procedures. The findings illustrate how evidence-based interventions can enable service individualisation in frontline organisations, but also indicate a need for additional professional resources due to the complexity of the work.

SAMMENDRAG

Evidensbaserte intervensjoner standardiserer sosiale tjenester, men kan også fremme idealer som tjenesteindividualisering og involvering av brukere. Denne artikkelen undersøker hvordan brukere og aktiveringsarbeidere opplevde aktiviteter innenfor en evidensbasert intervensjon kalt Individual Placement and Support (IPS) i ett NAV-kontor. Artikkelen er basert på intervjuer og feltarbeid fra 2017-2019. Funnene viser hvordan brukere utviklet relasjoner med aktiveringsarbeiderne, fikk tid til egen utvikling, og mottok tilpasset støtte når de møtte utfordringer. Intervensjonsaktiviteter var fleksible, relasjonelle og avkoblet fra vanlige prosedyrer i organisasjonen. Funnene illustrerer hvordan evidensbaserte intervensjoner kan muliggjøre tjenesteindividualisering i førstelinjeorganisasjoner, men indikerer også et behov for profesjonelle ressurser på grunn av kompleksiteten i arbeidet.

KEYWORDS
Supported employment; standardisation; personalisation; employment; individual placement and support

NØKKELORD
Supported employment; standardisering; personalisering; aktiveringstjenester; individuell jobbstøtte

CONTACT Vidar Bakkeli bavi@oslomet.no Work Research Institute, OsloMet—Oslo Metropolitan University, P.O. box 4, St. Olavs plass, 0130 Oslo, Norway

1. Introduction

Standardisation and individualisation can be viewed as two opposing trends in social service organisations (Nordesjö et al., 2020; Ponnert & Svensson, 2016). The provision of individualised activation services, understood as services tailored to individual needs and circumstances, has been emphasised as a central condition for promoting social and labour market integration, especially for the long-term unemployed and people with complex problems (Rice, 2017; Van Berkel, 2018). Implementing individualised services is challenging for frontline organisations, often characterised by rigid organisational frameworks and standardised 'one-size-fits-all' approaches that limit attention to individual client needs (Heidenreich & Rice, 2016).

Evidence-based practices (EBPs) and standardised interventions have become increasingly important in activation services, being implemented in frontline organisations as new service delivery models and practices (Dall & Danneris, 2019). On the one hand, these interventions standardise frontline practices, as research knowledge is embedded in systems, processes and standards, e.g. in the form of manuals, guidelines or checklists for frontline workers to follow (Nutley et al., 2009). On the other hand, many EBPs promote individualisation to client needs and other welfare ideals like user involvement and empowerment (Ponnert & Svensson, 2016), ideals that correspond with core themes in social work like the helping relationship, therapeutic alliances and dialogical relations (Payne, 2014). The diffusion of EBP and standardised interventions across welfare sectors has led to polarised and ongoing scholarly debates. Critical authors have argued that evidence-based interventions are rigid and limit frontline workers' ability to individualise services (Jacobsson & Meeuwisse, 2020; Lauri, 2016; Petersén & Olsson, 2014), while other authors have added nuance by emphasising how interventions can improve client follow-up and empowerment by enabling reflective practices and strengthening professional capacity (Barfoed & Jacobsson, 2012; Natland & Malmberg-Heimonen, 2016; Skillmark, 2018). However, few studies have focused on how such interventions affect service individualisation and the relationship between frontline workers and clients.

The aim of this article is to contribute to the literature by studying frontline worker-client relationships within an evidence-based intervention promoting individualised employment support for vulnerable clients. The research question is: How do clients and frontline workers experience intervention activities? A relational analytical framework is applied to examine how the intervention is made to work in practice through situated interactions between clients and frontline workers (Dall & Danneris, 2019; Koivisto, 2007). The article draws on an in-depth case study from one office in the Norwegian Labour and Welfare Administration (NAV) that implemented the manual-based intervention Individual Placement and Support (IPS; Drake et al., 2012). In the intervention, frontline workers with diverse professional backgrounds known as *employment specialists* assist unemployed citizens with complex service needs to find ordinary paid employment through personalised follow-up and workplace support.

2. Evidence-based interventions and individualised services

A dominant view in the social work literature has been that evidence-based interventions are part of managerialist trends that promote efficiency and effectiveness (Jacobsson & Meeuwisse, 2020), marginalise informal, relational aspects of practice (Skillmark & Oscarsson, 2018) and subvert practitioners' ability to personalise services (Dall & Danneris, 2019). A core concern is that clients' individual needs and circumstances are too complex to be handled merely by following standardised manuals (Gray et al., 2009). Lauri (2016) contends that evidence-based interventions promote 'rigid methods over a flexible and holistic approach' (Lauri, 2016, p. iii) to clients. Documentation requirements limit time with clients, and standardised work templates lead to routinised and procedural client interactions. Interventions are often combined with austerity measures and heavy workloads, creating stress and detachment for frontline workers.

However, other authors have argued that evidence-based interventions can promote 'more service-and client-oriented work where the rights of clients and their needs are in focus' (Ponnert & Svensson, 2016, p. 594). Empirical studies have found evidence-based interventions strengthened service individualisation by improving frontline practitioners' competencies and capabilities (Barfoed & Jacobsson, 2012; Malmberg-Heimonen, 2015; Robinson, 2003; Skillmark, 2018; Soydan & Palinkas, 2014), and enabled client empowerment, involvement and resource-oriented perspectives (Natland & Malmberg-Heimonen, 2016). Authors have noted the need for more nuances regarding the diverse local consequences of different interventions and tools (Björk, 2016; Skillmark, 2018).

Although service individualisation is a central topic in the literature on frontline delivery of activation services (Heidenreich & Rice, 2016), few studies have investigated evidence-based interventions and individualised services. Recent studies have highlighted the nonlinear complexity of client trajectories over time, necessitating follow-up approaches characterised by responsiveness and client influence (Danneris, 2018; Danneris & Caswell, 2019; Nielsen et al., 2021). In the literature on the IPS intervention, studies have shown that interpersonal dynamics are central to building client motivation and facilitating employment (Bonfils et al., 2017; Moen et al., 2020b; Nygren et al., 2016). However, this work is challenging and requires experienced and skilled practitioners (Bonfils et al., 2017). Nygren concluded that IPS is based on 'specialized relationship-based work that includes advanced problem solving' (2016, p. 49). Studies have shown high work pressure and considerable turnover among employment specialists (Vukadin et al., 2021), and collaboration problems with other professionals (Moen et al., 2020a).

While previous studies have mainly investigated evidence-based interventions in other domains, such as social work departments and child protection services, there is a need for more knowledge about evidence-based interventions and individualised activation services. Like other social services, activation workers are situated in organisations with many rules, laws and procedures, limited resources and high demand for services (Van Berkel & Aa, 2012). Across social services, there is increasing emphasis on client empowerment and involvement to participate in inter-organisational networks and develop outward-oriented, boundary-spanning practices (Heidenreich & Rice, 2016), all of which are features of the IPS intervention. Compared to professional fields like nursing, education and social work, however, activation work is characterised by educational diversity and a lack of a common knowledge base, although the work is also complex and requires considerable knowledge and skills (Van Berkel, 2018). This mix of factors makes it interesting to study the interactions between activation workers and clients within IPS as an evidence-based intervention. There is a need for more knowledge about whether and how evidence-based interventions can contribute to individualised services and a specific need for knowledge about client experiences within such standardised interventions.

3. Analytical framework

The article draws on a relational approach to analyse practices and interactions within a frontline service intervention (Dall & Danneris, 2019; Koivisto, 2007). In this framework, service interventions are conceptualised as situated, local activity and interaction involving different actors, such as frontline workers, clients, employers and broader social networks (Koivisto, 2007). A policy or intervention contains a 'script' (Akrich, 1992) that defines the actors and the activities and processes they are to perform to achieve given goals (e.g. a manual or methods book).

The framework is based on a relational ontology (Dall & Danneris, 2019; Koivisto, 2007). Social structures are understood as socio-material networks that actors continuously perform, produce and maintain. For example, workplaces, families and social communities are understood as heterogeneous networks that include both human and non-human actors, such as tools, conventions, artefacts, values, architecture, goals and norms. This approach seeks to avoid common dualisms, such as distinctions between human action and context, instead viewing context as networks and relations that actors are part of and continuously co-produce.

Most social interventions' aim to change the client's life in some way (Koivisto, 2007). In the framework, clients' life situations are also conceived of as socio-material networks performed and produced through daily activities. Their networks are affected by the intervention network and activities in complex and dialectical ways, creating both intended and unintended changes. Thus, the intervention's effects cannot be explained by the intervention method alone because the method is performed during situated, interactive activities and processes involving the central actors (e.g. frontline workers and clients).

In this article, the relational approach is used to analyse how the intervention is realised in frontline activities and interactions. More specifically, the analysis aims to examine (1) how clients and frontline workers experience intervention activities and (2) what frontline workers do when interacting with clients. While networks are expansive and complex, the goal is not to produce complete accounts but rather to do a 'modest analysis' (Koivisto, 2007, p. 535) by emphasising the most relevant actors, activities and elements in the interaction between frontline workers and clients.

4. Organisational context

The organisational context of this study is a midsized NAV office with fewer than 60 employees located in a rural municipality in Norway. NAV offices provide integrated employment and welfare services, including social assistance, social security and employment follow-up (Minas, 2014). A main goal is to provide holistic and individualised services to cover client's complex needs and obstacles for labour market integration (Gjersøe, 2020). Norwegian activation services are characterised by enabling policies, emphasising support and training to improve employability, although demanding policy elements with an emphasis on obligations and conditionality have also been introduced (Vilhena, 2021). While standardised tools and procedures like client classification and assessment systems structure the work in NAV offices, frontline work requires professional decision-making and knowledge (Hagelund, 2016).

The office was organised into three departments: the welfare department providing social assistance, the follow-up department and the employment specialist department. The employment specialist department had two teams – the *IPS* team and the *in-house follow-up* team – with a total of 13 employment specialists. Counsellors administer welfare benefits, conduct work-health assessment, refer clients to activation measures and provide follow-up, while employment specialists match individual clients to specific employers and provide follow-along support in the workplace.

The NAV office represents a useful organisational setting for exploring the experiences of clients and frontline workers within an evidence-based intervention. The office had several years of experience with the IPS intervention. The IPS service received high fidelity scores in annual quality evaluations and was perceived by managers as a successful innovation. Office managers emphasised service development and innovation. To increase service capacity, office managers acquired funding for employment specialists from the *In-house follow-up* programme in NAV and from the Norwegian Directorate of Health.

The IPS intervention combines the ideals of individualised services with a rather standardised service model. The intervention promotes comprehensive support to clients based on Supported Employment (SE) principles emphasising social inclusion, empowerment and recovery philosophies (Wehman, 2012). Standardising elements include a 25-point fidelity scale prescribing service organisation and frontline work tasks, performance measures, quality evaluation and strong supervisor roles (Becker et al., 2015). IPS is based on the following core principles: (1) focus on competitive employment, (2) eligibility based on client choice (i.e. client motivation), (3) integration of vocational rehabilitation and mental health services, (4) attention to client preferences, (5) personalised benefits counselling, (6) rapid start of job searching, (7) systematic job development and (8) time-unlimited and individualised support (Drake et al., 2012). The model requires close integration between mental health services and employment services and the parallel treatment of clients. The defined client groups (i.e. clients with moderate to severe mental illness, with or without substance abuse) are

referred from mental health services. IPS has been found to elicit better results than comparable services in securing competitive employment in several randomised controlled trials (RCTs) in different countries and service contexts (Brinchmann et al., 2020).

This study focuses on the IPS team in the office, but also includes interviews with two employment specialists from the *in-house follow-up* team and two clients receiving services from this team. The work in both teams was structured by the IPS fidelity scale and manuals, but only the IPS team was integrated with mental health services. These employment specialists were part of one or two collaboration teams with mental health professionals, participated in weekly treatment team meetings, and had clients referred from mental health services. They had office space both in mental health services and in the NAV office. The IPS clients had moderate to severe mental health problems (as well as other problems and needs, including substance abuse, unstable housing, language barriers and economic debt) and received mental health treatment. The *in-house follow-up* team also followed the fidelity scale and manuals except for integration with mental health services. Clients were referred by counsellors in the NAV office and also had varied problems and needs.

5. Study design

This study draws on empirical data from 12 interviews with service participants, 18 interviews with frontline workers and managers and approximately 90 h of fieldwork (15 days) in one NAV office. Data were gathered from 2017 to 2019. The fieldwork took place in November and December 2017. The author observed meetings, work and everyday life within the NAV office, and followed employment specialists when they left the office to meet clients and employers in the local community. The project received ethical approval from the Norwegian Centre for Research Data as part of a larger research project [name omitted for blind review].

Case studies allow for an intensive, in-depth exploration of detail and richness (Stake, 1995). The study focuses on client and employment specialist experiences, activities and interactions within the standardised intervention, situated in a frontline service organisation that emphasised implementing the intervention with high quality under the fidelity framework. This can be viewed as a 'critical case' having 'strategic importance in relation to the general problem' (Flyvbjerg, 2006, p. 229) being studied – that is, the relation between evidence-based interventions and individualised follow-up practices. As such, the case was chosen not primarily for the representativeness of other NAV offices but for being a useful example of client–worker experiences and activities within a standardised intervention in a public frontline service context.

The purpose of the interviews was to understand the actors' interpretations of the services and to gain an understanding of the world in which they live (Brinkmann & Kvale, 2014). Interviews with frontline workers and managers (i.e. 8 with employment specialists, 6 with counsellors, 2 with team supervisors and 2 with office managers) were conducted in March 2017, November and December 2017 and December 2018. Clients were interviewed in spring 2019 as part of additional data collection. The interviews were semi-structured, lasted 60–120 min, and all informants provided informed consent. All but one interview was recorded and transcribed. One client consented to participate but not to voice recording. In this interview, handwritten notes were taken. Interviews with the employment specialists involved work tasks and practices, interactions with clients and employers, professional competencies, collaboration and views on service development. These interviews were conducted in the NAV office. The material includes 6 interviews with employment specialists from the IPS team, and 2 from the in-house follow-up team. Interviews with supervisors and managers focused on experiences with service development, staff supervision and organisational processes.

The 12 clients comprised six men and six women, ranging from 20 to 57 years old. Clients were interviewed in their workplaces, in the NAV office and at home. Interview topics covered views regarding NAV services, their relationship with employment specialists, views on IPS services, positive and negative aspects of the services, general life situations and past work-life experiences.

Clients were recruited through employment specialists, following the selection criteria provided by the researcher. To ensure variation, clients should have at least six months of service experience, represent varied problems and barriers (e.g. regarding mental and physical health, substance abuse, social issues, or language barriers), be both women and men of various ages, and have different views regarding the service. While most participants held positive views about the service, two participants could be characterised as mostly neutral and one as relatively critical. The participants had varied life situations and problems. At the time of the interviews, seven were unemployed and five were working, either full-time or part-time. Out of the 12 participants, 10 had received mental health treatment and had been referred by mental health services to the IPS. The remaining two informants received support from the *in-house follow-up* team and had been referred to the service by a counsellor within the office.

The data were examined, then coded and analysed in NVivo. The main focus of the analysis was on interviews with clients and employment specialists, while the other interviews and field notes mainly provided background information. To identify and analyse patterns in the data, the data were coded following the thematic analysis approach (Braun & Clarke, 2006), which involves first becoming familiar with the data, developing initial codes, and searching for and reviewing main themes. The identified codes and themes were developed inductively and bottom-up, as this was an explorative study. For the client interviews, this process led to the development of three main themes, namely 'time', 'relation' and 'support'. As for the employment specialist data, the process resulted in the themes 'flexibility', 'building relations' and 'organisational detachment'. These six themes are presented in the following results section. Each interview was assigned a code to make the statements attributable to informants while maintaining anonymity (CLI for client and EMP for employment specialist).

6. Findings

6.1. Client experiences with the intervention

6.1.1. Relationships

In line with studies examining client trajectories (Danneris, 2018; Nielsen et al., 2021), clients' trajectories were nonlinear and characterised by ups and downs. The IPS approach involves a long-term follow-up. While six of the participants had received IPS services anywhere from six months to one year, six had been in the service for two to four years. When discussing the service, clients focused on their employment specialist and the specific relationship they developed. Out of the 12 informants, 10 described this relationship as supportive and empowering. Some informants were very enthusiastic when describing their specialists: 'Always pleasant, always forthcoming, always about finding solutions. […] She made me believe in myself again, that there wasn't anything wrong with me' (CLI3). Many participants emphasised the personal connection as central to their processes: 'You get a very close relation to the one you work with. […] I feel she has helped build me up again. […] This connection strengthens me, like a support' (CLI6). Informants emphasised the importance of feeling seen and respected as a whole person with a history.

Informants also indicated that this support gave them increased self-confidence: 'I was really stuck. […] She made me think in new ways, made me throw away the bad and ugly thoughts, and made me think I am actually good enough' (CLI3). They mentioned better self-confidence and autonomy: 'I feel she is a support person that enables me to help myself with those things, that I don't always need her with me' (CLI5). Informants also gained the confidence to expose themselves to new situations: 'She gives me motivation and confidence, and if things don't work out, that's OK' (CLI11). However, some clients preferred to keep this relationship work-oriented and not too casual: 'We talk about finding work for me; the talk is not very personal' (CLI1). The informants also distinguished between support and helper roles in their relationships with their

specialists. One informant had a more difficult relationship with his employment specialist and felt distrusted.

6.1.2. Time

The clients described the follow-up processes in IPS as allowing patience and developments to unfold over time: 'My experience (has) been that I control the tempo. […] They didn't push me' (CLI5). Informants viewed their employment specialist as understanding their ups and downs: 'I feel IPS works with you and builds you up, rather than pressure you into something to get rid of you' (CLI10). Out of the 12 participants, eight had experience receiving follow-up services from NAV. They contrasted IPS follow-up with regular NAV services: 'The NAV I was used to, everything needed to happen so fast. They wanted me to push so much, when I felt I didn't have capacity for it' (CLI5). Informants spoke of processes that were rushed, forced and feeling like a case being processed.

A participant who had been depressed and burned out in previous jobs highlighted the gradual and supportive approach of IPS as central to her positive development:

> A person you can trust, that you can talk to, who has time and the tools to bring you back into work. She's like, 'If that's what you have the strength to do now, we do that. And that's really good'. And what did I do that day? I managed to write two sentences on a paper about what I wanted to do. (CLI3)

One narrative that illustrates this patient, understanding approach can be found in a participant's account about sitting in a car with his employment specialist and preparing for a job interview she had arranged. However, he was in a tight spot due to personal problems:

> My employment specialist said, 'I see that you're not OK; do you want to drop this?' I was like, 'Well, you have to decide, but I'm not in top shape'. The plan was to have a meeting there [with the employer] for 45 min and drive half an hour back. But she called it off, and instead, we sat there [in the car] talking for two hours, only about me and the challenges I had. [… .] And this helped find solutions. That was so nice and really important for me, as I felt I was taken seriously for the first time. (CLI4)

This example demonstrates the service's flexible character as the employment specialist rearranged her day to prioritise the situation.

6.1.3. Support

Participants emphasised the crucial support role that employment specialists played when facing challenging situations regarding work and employers. Job-seeking processes can be challenging to navigate, as important decisions must be made quickly under uncertain conditions. The employment specialists were experienced in brokering and negotiating with employers; some had experience as employers, themselves.

One participant was helped during a serious conflict with a manager. To avoid exhaustion after heavy work pressure, the participant took sick leave: 'All hell broke loose. […] There were threats back and forth. […] He [the boss] was pissed that I had taken sick leave, but to protect my health, I had to do it' (CLI10). The employment specialist supported the client in several meetings with the manager and made an agreement that ended the dispute:

> I was totally exhausted and afraid I would go back to old habits, right. […] The support meant everything to me. For me, when I've met battles like that, I would just have said screw this, started taking drugs and made money in other ways. […] To have that support, to be able to deal with the situation and get through that period, it was the biggest and most valuable thing that had happened in my life in a very long time (CLI10).

Another participant had been to a job interview and leaned towards accepting the job to avoid disappointing the people around him, but upon seeing the room where he would work right after the interview, he got a bad feeling:

> I got a job offer. […] I asked for some time to think. (Over) the weekend, I had a big relapse; there were many triggers similar to the situation that had gotten me sick in the first place. I felt I wouldn't handle it. […] I talked

> with my employment specialist through the weekend, and she was so understanding. […] She helped me make the decision based on what was best for me. I ended up saying no. (CLI6)

Employment specialists also helped participants with NAV-related problems, which could involve taking the participants' side and questioning the demands imposed by NAV counsellors:

> I was very stressed at those collaboration meetings because the [NAV counsellor] constantly reminded me that my benefits would run out. So, I was just sitting there, saying, 'But what can I do? I can't work full-time'. I was so stressed, and [the employment specialist] noticed. […] When we finished the meeting, she said, 'Don't listen to that stuff right now. Just take things at your (own) tempo. We work the way we've done all the time and will continue doing that, and it will work out'. And it did. (CLI5)

Although they had limited knowledge about the NAV system, employment specialists sometimes acted as an advocate, for example trying to hasten processes, ensure that the client received relevant services and connect with other actors in the system that could help.

6.2. Employment specialist experiences with the intervention

6.2.1. Flexibility

Employment specialists helped clients through the challenges of their complex trajectories in and out of work. The intervention prescribed six phases of employment services: intake, engagement, assessment, job placement, job coaching and follow-up support. In practice, the unpredictable work required a flexible approach, moving back and forth between phases. Clients faced distinctive problems and situations: 'I have 18 individuals and a large variation. […] Some have physical challenges. […] Others are almost ready to work and quite well, physically and mentally. And it's everything from people with depression, bipolar disorder, some doing self-harm'. (EMP6)

Although the standardised intervention structured frontline work by defining employment service phases and tasks, key principles of the intervention opened a space for personalisation, agency and autonomy (e.g. fidelity scale points of individualised follow-along support, low caseloads and time-unlimited follow-up). The intervention script was translated into activities characterised by comprehensive, personalised follow-up. Employment specialists' day-to-day work involved matching clients to employers, workplace support and collaboration with other professionals. Employment specialists did various activities with clients: 'We meet participants where they are, join them in meetings, work with them, pick them up at work, drive them to work, right. We do a lot of things' (EMP7). Employment specialists juggled many processes simultaneously involving clients and employers in diverse networks and constellations:

> There's so many balls up in the air. […] I have only 20 participants, but need to have a plan for everyone and go out (and) visit employers; this fills up the days. Doing some reporting in between. And suddenly, things happen; we're dealing with people, right'. (EMP4)

Informants viewed work as varied, intense and demanding: 'It's a very intense job. […] I need to be on all the time' (EMP5). Support activities could reach beyond office hours and into weekends: 'I genuinely want to help and often stretch it far; sometimes, it feels like we're on twenty-four-seven' (EMP4). Because plans and arrangements frequently changed, there was a need to improvise and be flexible: 'You need to be prepared for the unexpected' (EMP7). The strong emphasis on client preferences and motivations could increase unpredictability.

> 'You find a job that satisfies all the criteria the participant had. It's served on a silver platter, but then they say no. […] You can get a bit fed up. It's challenging to motivate yourself and go out there again. But that's the job, to be able to reset'. (EMP6)

They experienced client follow-up work as demanding and emphasised the importance of motivation to cope: 'It's about being genuinely involved in the things I do. […] You need to be really committed to it' (EMP4). A driver of this intensity was intervention performance measures specifying the use of time and activities (i.e. 65 percent of office hours should be spent in the community, including

six face-to-face employer meetings each week, with 96 percent of office hours spent on employment services, limiting time spent on documentation tasks).

6.2.2. Building relationships

Unlike NAV counsellors meeting clients in the institutional setting of the NAV office, the intervention specified that employment specialists should meet clients in the community. Preferred places were cafes, clients' homes, taking a walk together, in a car visiting employers or clients' workplaces. These settings made social interaction friendlier: 'You get a totally different conversation. […] The white walls and red signs [of the NAV office] represent a certain power; you don't talk on the same level there as when you sit in a car together, listen to music and find some other references' (EMP8).

Informants viewed a relational approach to clients as crucial for creating positive processes for work and for providing job support. This involved establishing trust, a safe atmosphere, and open communication: 'Take them seriously and use a lot of humour and show that I'm there, that I understand and achieve this kind of trust-based relationship. I think that's the key to get that flow' (EMP7). This relational approach was also goal-oriented: 'The intention is to get quicker (at) finding a job. To find a job, you got to have the relationship and get a lot of knowledge in a short time about the person' (EMP8).

Employment specialists worked towards specific employers and workplaces. They worked to integrate their clients into workplace networks by connecting with relevant actors, learning about the workplace and embedding themselves in networks as supportive actors. To illustrate, one employment specialist helped a client with social anxiety and other diagnoses move from unemployment to full-time work. According to the intervention, the specialist started job development by visiting a potential employer several times. After persuading the employer, the client started working a few hours weekly. The employment specialist targeted improving the client's social skills and working on relationships in the male-oriented workplace: 'It's really a boys' kind of place, right. […] He didn't understand the jokes' (EMP5). Gradually, the client shifted to full-time work. The employment specialist emphasised the client's relationships with colleagues: 'Now, he's one of the guys. […] The colleagues have been so good with him. They've accepted him for who he is, and that really makes a difference' (EMP5).

6.2.3. Organisational detachment

While counsellors in the office followed organisational routines, procedures and requirements, employment specialists were exempt from these rules and followed intervention principles. The fidelity scale was central to their work. Informants contrasted their approach with normal ways of working in an organisation: 'I think we're experienced as a "breath of fresh air"'. […] We represent something else; we turn the mindset around' (EMP8). Unlike counsellors, employment specialists in this office had scant experience with social services: 'We don't understand NAV tasks from the outset […] I think that's an advantage in many ways because then you don't do tasks you shouldn't'. (EMP8). Regarding professional resources, they used knowledge from business, the private sector and the employer side, as they had backgrounds from these fields. This office's hiring policy involved external recruitment, not transforming former counsellors into employment specialists.

Employment specialists also assumed an advocacy role on their clients' behalf, sometimes opposing the counsellors. They problematised normal procedures and promoted an alternative approach: 'It's typical for counsellors to make choices for the clients. We focus on making participants choose themselves and give them opportunities' (EMP6). Informants avoided reading existing documentation in client cases because they wanted to meet clients without pre-conceived notions. Although informants emphasised the importance of collaboration, integration problems occurred between groups of frontline workers. Both counsellors and employment specialists mentioned cultural differences, professional tensions and the IPS team as a separate 'island in the organisation'.

7. Concluding discussion

This article examines client and frontline worker experiences and activities within a standardised, evidence-based intervention promoting individualised employment support. Clients developed rather strong *relationships* with their individual employment specialist. They were given *time* to experience individual processes and received work-oriented *support* through their difficulties. Clients contrasted these experiences with regular NAV services, which they characterised as stress-inducing, fast-paced and rigid. Generally positive client experiences are contextualised by examining employment specialists' experiences and activities. They were characterised by *flexibility*, a strong *relational* approach to clients and *detachment* from normal organisational procedures. The case study foregrounds complex relational processes between frontline workers and clients also identified in previous literature (Danneris, 2018; Vukadin et al., 2021). While many service aspects were standardised (i.e. implemented with high fidelity), employment specialists approached individual clients in a flexible, personalised way. There was dynamic interplay between intervention scripts, frontline worker agency and individual clients (Koivisto, 2007).

These findings contribute to nuance discussions of evidence-based interventions and service individualisation. Previous studies have emphasised how evidence-based interventions limit service individualisation through proceduralism, formalisation and routinised interactions with clients (Dall & Danneris, 2019; Lauri, 2016; Petersén & Olsson, 2014). The findings suggest how interventions can promote personalised frontline practices responsive to individual needs and preferences. This aligns with IPS studies emphasising supportive relationships characterised by client engagement (Moen et al., 2020b; Nygren et al., 2016; Vukadin et al., 2021). Interventions differ concerning content, the detail of prescribed actions, how they balance fidelity and adaptation and how they are implemented (Ponnert & Svensson, 2016). While some interventions restrict individualisation, others promote it. The study also adds to the literature by illustrating how interventions can surpass organisational barriers constraining service individualisation identified in the literature (Fuertes & Lindsay, 2016; Hansen, 2020; Howard, 2012). Interventions can specify the necessary organisational conditions to enable one-on-one engagement. In this case, these conditions included low caseloads, task specialisation and detaching employment specialists from existing organisational procedures, mindsets and norms.

An implication of these findings concerns evidence-based interventions and professionalism in activation work (Van Berkel & Aa, 2012). While standardised interventions can be a professionalisation strategy in semi-professional fields like activation work (Nothdurfter, 2016; Ponnert & Svensson, 2016), findings indicate a need for additional professional resources when working within evidence-based interventions. Supporting clients with non-linear trajectories to gain employment was challenging, as studies have demonstrated (Danneris & Caswell, 2019; Nygren et al., 2016; Vukadin et al., 2021). Frontline workers used their employer and labour market knowledge extensively, but their lack of professional social work resources intensified the challenges of client follow-up work. There were struggles in establishing professional boundaries. Performance measures accentuated the high-intensity, high-pressure character of the work situation.

Different organisational contexts and policy settings can influence implementation processes (Bonfils et al., 2017). The organisational context of this study was public welfare services. The mid-sized NAV office was characterised by a community-oriented, trust-based organisational culture. Managerial authority was not strongly emphasised. Funding was sufficient because the office had acquired additional resources for employment specialist teams. Other governance structures and resource situations may influence service individualisation in varying ways, for example, by constraining frontline workers' abilities to tailor to individuals' needs and circumstances (Howard, 2012; Rice, 2017). Policy contexts may also influence implementation. Norway's welfare system is characterised by enabling activation policies emphasising support and skills training to improve employability. However, interventions may be interpreted and implemented differently by actors in welfare settings with demanding policies, conditionality and sanctions.

Overall, this study provides an in-depth account of client experiences and interactions with frontline workers within a standardised intervention promoting service individualisation in a particular setting. A limitation is that only one standardised intervention in one setting was examined. However, this enabled an in-depth investigation into local dynamics and interactions. The findings related to detachment between the employment specialists and other frontline workers warrants further research. It would be interesting to examine how NAV offices cope with tensions caused by detachment. Further research could also examine how the demands related to additional professional resources and competence are handled in practice. Finally, an interesting avenue for further research would be to compare follow-up practices and client experiences with evidence-based interventions implemented in disparate organisational contexts and policy settings.

Acknowledgements

The author would like to thank the editor and the anonymous referees, as well as Eric Breit, Tone Alm Andreassen, Chris Rønningstad, Gudrun Rudningen and Kjetil Frøyland for valuable comments on earlier drafts of the article.

Disclosure statement

No potential conflict of interest was reported by the author(s).

Ethics approval statement

Approval for the research project was granted by the Norwegian Ombudsman for Research at the Norwegian Centre for Research Data (NSD). Ref 52008.

Funding details

The study was financed by the project "Front line innovations in the welfare services" (INNOWEL), funded by the Research Council of Norway (project no. 256706).

Note on contributor

Vidar Bakkeli is a PhD fellow in social work and social policy at Oslomet – Oslo Metropolitan University in Norway. His PhD study focuses on activation work and implementation of evidence-based services. His research interests include innovation and development in social services, the relationship between knowledge and professional practice, and street-level bureaucracy.

Data availability statement

Research data are not shared in order to ensure anonymity of research participants and due to privacy restrictions.

ORCID

Vidar Bakkeli http://orcid.org/0000-0001-7020-0938

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