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(Article begins on next page)

The communicative constitution of epistemic and deontic authority: epistemological implications of a second order construct

Letizia Caronia & Nicola Nasi

Original Chapter for the *Routledge Handbook
of the Communicative Constitution of Organizations*

Contemporary debate on the constitution of organizations shows how and to what extent language in interaction - as well as other semiotic artifacts - are constitutive of what an organization is in terms of, for instance, social and professional identities, organizational statuses, roles, and even policies and practices. In this chapter, we focus on two distinct although related constitutive dimensions of any organization: epistemic and deontic authority, i.e. who or what, in a given circumstance, is or should be (recognized as) the one who knows and the one who decides. When dealing with authority, (Bencherki, Cooren, & Matte, 2020), one of the main issues is the analyst's positioning as to the typical dilemma between a top down, structuralistic approach according "causal power to [...] structures, divorced from linguistic and communicative constitution" (Kuhn, 2012, p. 546), and a bottom-up approach programmatically focusing on the emergent properties of language and on the constitutive role of communication as to social structures and orders. If the former bears the lingering assumption that human action is produced by a system of forces that "human subjects can neither control nor understand" (Duranti, 2004, p. 452), the latter conceives the subject as a novel Adam, free of constraints in his daily creation of local meanings which do not "survive" until the next day. As pointed out by Bencherki et al. (2020), interactionist approaches to organizations have often been criticized in relation to the latter "fallacy", i.e. "for their alleged incapacity to deal with questions of power, coercion and domination" (p. 8). Their commitment to a radically bottom-up perspective would prevent them from noticing how the macro (i.e. the structures of an organization) affects the micro (i.e. local interaction) as much as the micro-order of interaction locally produces the macro-order of structure.

Assuming the co-constitutiveness of agency and structure (Giddens, 1984), in this chapter we contend that an approach informed by constitutive communication theory does not necessarily imply underestimating structure or neglecting the passive side of human sociality. To illustrate this claim, we focus specifically on epistemic and deontic authority (hereafter, EDA) and make a case for its being *at the same time presupposed and constituted by participants in and through interaction*. As we will show, by means of the ways they manage their turn-at-talk and mobilize other available semiotic re-

sources, members constantly display their orientation to these dimensions of organizational authority (see the Montreal School notion of co-orientation, Kuhn, 2012, p. 551) and talk them into being by locally (re)creating “who knows best and who decides what to do”. From this perspective, agency and structure appear to constantly permeate each other, *at least from the analyst’s point of view*. Indeed, while aligning with the CCO perspective on the local interactive crafting of authority and power (see Bartesaghi, 2009; Benoit-Barné & Cooren, 2009; Taylor & Van Every, 2014), in this chapter we go one step further by claiming that the notion at the core of CCO theory, literally, the *communicative constitution* of organizationsⁱⁱ, does not necessarily mirror the members’ “natural attitude” (Schütz, 1967/1932) on their own communicative practices. With reference to the long-lasting debate on the emic/etic divide in organizational studies (see Morey & Luthans 1984, Peterson & Pike 2002, Kuhn 2002, Buckley et al. 2014), we advance and empirically illustrate that the communicative constitution of organization is an experience-distant, second order construct (Kohut 1971, Fuchs 2001) which appears significantly detached from members’ understandings and accounts of their everyday life-world. If one of the accomplishments of CCO-scholars has been to “denaturalize” the organizational world, i.e. to question members’ taken-for-granted notions regarding the ontological reality of organizational entities, it came at a price: surreptitiously, this perspective risks depicting members, or at least those who account for their behavior as caused by already given overarching structures, as naive inhabitants of their everyday world. As we illustrate by making the case for EDA, the CCO theoretical attitude risks granting epistemic primacy to the researcher’s viewpoint over members’ ways of describing and interpreting the reality “out there”. In doing so, it renews the relevance of the (perhaps unavoidable) clash between the members’ and the analyst’s stances, thus making researchers rethink the unresolved etic/emic dilemma in social sciences and compelling them to take a stance in relation to these fairly different modes of explaining organizational behavior. We argue that this possible clash should be explicitly addressed by scholars engaging in exploring the local constitution of (organizational) realities. When first and second order interpretations cannot be aligned (as is the case in our illustration), they should at least be juxtaposed, as they both are legitimate ways of making sense of organizations’ life.

The chapter is structured as follows. In the first section, we outline one of the main challenges CCO studies have to cope with: the micro-macro link (see Kuhn, 2012). The second section reviews CCO studies on authority and expertise, whereas the third shifts the focus to the contribution of Language and Social Interaction studies (hereafter, LSI) in setting the framework for investigating epistemic and deontic authority in organizations. Finally, an illustration from fieldwork in an Intensive Care Unit exemplifies how the epistemic and deontic authority of the Responsible Clinician are both presupposed and locally constituted by the members in interaction. We conclude by claiming that dealing with the communicative constitution of EDA makes it inescapable for the researcher to take a stance toward the never resolved emic/etic dilemma in social science research.

2. Communication and the micro-macro link

Since the phenomenological turn in social sciences (Caronia & Orletti, 2019), the ensuing groundbreaking notion of the social construction of reality, and the renewed attention to the micro (communicative) details people use to do “being ordinary”, a relevant concern has challenged the study of the social world: what relationship, if any, exists “between the way people construct social reality and the obdurate social and cultural reality that they inherit from those who preceded them in the social world” (Ritzer, 2011, p. 219)? How can the link between shared cultural worlds (e.g. norms, rules, folk and professional theories, cultural models) and local (inter)actions be conceived and analyzed?

Although the issue of the micro-macro link (Alexander et al., 1987) is anything but new, demonstrating how this link works and connects structure and agency, “cultural knowledge” and individuals’ everyday praxis, is still a challenging topic for organizational communication studies. To avoid the risks of over-interpretation, intentionalism, and even cultural determinism, scholars in ethnomethodological, conversation analysis and CCO traditions propose a clearanalytical perspective: following and analyzing (Cooren & Malbois, 2019) (talk-in-)interaction and the instances where people “talk in-to being” (Heritage, 1984, p. 290) supra-individual, structural entities such as principles,

statuses, norms as well as artifacts, spaces and the material configuration of the world around them. This restricted analytical perspective amounts to a “cautious” approach: the analyst avoids referring to any pre-existing, extra interactional dimension as an explanatory notion of what is going on, unless participants- do refer to it in the interaction under scrutiny, in an observable and demonstrable way.

Basically, this perspective has questioned the (in)famous “bucket theory of context” (Drew & Heritage, 1992, p. 19; for a recent uptake of the dispute on context see Antaki, 2012, Bartesaghi, Livio & Matte, 2020) and is extremely convincing: It is largely shared in social research and still provides the theoretical and methodological framework for a huge amount of empirical research. Less common is illustrating how culture, social structure, and moral horizons, as well as the plethora of entities inhabiting the social world, shape social interaction and the forms of talk. Investigating or taking into account (also) the *passive side* of human sociality is still an underexplored phenomenon in CCO scholarship (but see Caronia & Cooren, 2014; Cooren, 2010; Brummans, Higham & Cooren 2021). As depicted by Taylor (oral communication, 2015) while delineating the contemporary challenges of CCO-informed studies, the analytical cautiousness as to the role of context opens an analytical problem: narrowing the focus of analysis on the process (e.g., *organizing*, *authoring*, *positioning*) risks failing to account for the role played by the “constituted entities” (organization, authority, position) on the practices. This “restricted analytical geography” (Goodwin 2011) would amount to missing the point: showing how (constituted) entities have a life of their own and make a difference in the unfolding of interaction, i.e. have an independent agency (see Cooren, 2010; Brummans, 2018). If local interactions create a not-so-ephemeral array of agentive organizational entities – as the CCO perspective in organizational communication studies has demonstrated in the last twenty yearsⁱⁱⁱ – the reverse is also true: already constituted, maintained, and crystalized entities shape the forms within which agency is deployed and “haunt” everyday social action (Cooren, 2009). In the next sections, we illustrate this point by making the case of epistemic and deontic authority as, at the same time, presupposed and constituted by communication.

3. Knowledge, status and the communicative constitution of authority

Contemporary CCO approaches to authority try to further develop insights from Follett (1940), Barnard (1938) and Simon (1947) on its situational accomplishment and deeply relational nature (see Bencherki, Cooren, & Matte, 2020). Despite such references to mid-twentieth century scholars, the origin of CCO approaches on authority can be traced back to the seminal work of Taylor and Van Every (2000), which considered authority as an interactive and iterative phenomenon, both presupposed and recursively constituted by members on an everyday basis. Since then, several authors have tried to depict the micro-physics of authority and to reconcile the clash between *entitlement* – i.e. the perceived legitimate right to influence and decide on organizational matters – and *negotiation* (Benoit-Barné & Cooren, 2009, p. 10; see among others Cooren, 2009, Taylor & Van Every, 2014) as well as the entanglement between knowledge and authority subsumed by the notion of expertise (Collins & Evans, 2007).

Within organization studies, the fruitful distinction between *authority of position* and *authority of expertise* (Barley, 1996) has been revived by Taylor and Van Every (2014) to emphasize the tension that a misalignment between these two dimensions can cause. The recognition of expertise as a central tenet of the notion of authority amounts to the investigation of individuals' authoritative claims beyond and despite their structural position and their being (or not) grounded on knowledge (on the [interactional] management of knowledge and its significance for organizational matters, see Kuhn & Jackson, 2008; for an encompassing overview see Barley, Treem & Kuhn, 2018.) When grounded in knowledge, authority appears to be relative to a specific situation and to the actor's access to and skillful deployment of *relevant* knowledge (Alvesson & Kärreman, 2001). Ultimately, if authority is not something people have but something people do, one of the means to perform it is precisely the skillful management of (types of) knowledge in interaction (Ashcraft, Kuhn & Cooren, 2009; Caronia, Saglietti, Chieragato, 2019). This radically situated perspective on knowledge stresses the local nature of expertise, i.e. a heterogeneous accomplishment embedded in everyday workplace practices (Orlikowski, 2002). These practices involve a multiplicity of human and nonhuman actors (Kuhn & Porter, 2011) and represent the *locus* where decisions about expertise location and the deployment of relevant knowledge are continuously made.

In organizational interaction, these struggles over meaning become particularly visible in the actors' *classifications* (i.e., naming/defining/framing the situation) and

closures (i.e. establishing that a sequence is over, for example by selecting knowledge which is deemed sufficient) related to problem-posing/solving sequences (Kuhn & Jackson, 2008, p. 463; on the relevance of closures for the exercise of authority see also Cooren & Fairhurst, 2004). These actions can be considered part of the more general process of *decision-making*, in which “the turn-by-turn accomplishment of influence is made almost tangible” (van de Mierop, 2020 p. 596). Notwithstanding the growing number of studies on the local constitution of “who knows” (best) and “who decides” (Bencherki et al., 2020), demonstrating how the turn by turn negotiation of expertise and leadership in decision-making concurrently affects and is affected by organization hierarchical structures still represents a challenge for CCO scholars. In the next sections, we illustrate the contribution of Language and Social interaction studies in rethinking this issue in light of what has been called the epistemic and deontic order of interaction (Stevanovic & Svennevig, 2015).

4. Making epistemics and deontics actionable through communication: The contribution of LSI studies

Using at times a different vocabulary, scholars within the LSI tradition have also addressed the issue of authority, trying to avoid any “possessive epistemology” – i.e. the idea that authority is something people *have* (or achieve as the outcome of their having something; Bencherki et al. 2020, 3). Rather than speculating on its ontological nature, they define authority as a socially constructed category which participants (might) locally orient to, and focus on authority displays and negotiations in and through talk-in-interaction (Boden, 1994). In the last decade, this focus on the communicative constitution of authority has been narrowed down by distinguishing between *epistemic authority*, i.e. the (relative) authority of knowing best or being entitled to know best about a specific topic (Heritage, 2012b; Stivers, Mondada & Steensig, 2011), and *deontic authority*, i.e. the (perceived) right to establish what to do next and to determine future courses of action (Stevanovic & Peräkylä, 2012)^{iv}. Although these two entitlements (to know and to decide) are often embodied in and enacted by the same actor, they are not necessarily co-existent and co-extensive: their embodiment depends on situational factors (e.g. “a person may regard another person as an epistemic authority in a certain

field or as a deontic authority in a certain domain of action,” Stevanovic & Svennevig, 2015, p. 2) and is often distributed among human and non-human actors (as, for instance, when a physician consults a test as the knowledge source that entitles her to decide what to do [Sterponi et al., 2019]; see the notions of “textual agency” [Cooren 2004, Brummans, Higham & Cooren 2021] and “presentification” [Cooren, Taylor, Van Every 2009]).^v

Although LSI interest in epistemics can be traced back to several pioneering studies (among others, Labov & Fanshel, 1977 and Pomerantz, 1980), it is only since the seminal work of Heritage and Raymond (2005) that scholars have started to systematically account for the management of knowledge in interaction, i.e. for its central role in action formation and recognition and in everyday negotiations of participants’ identities, roles, and statuses (Heritage, 2012a, b; Mikesell et al., 2017). A central tenet of this perspective on knowledge is its *public nature*, i.e. its being both locally claimed by and attributed to interlocutors *and* influenced by social organization, that is, by the “rights and entitlements and obligations and distributions of knowledge according to types or categories of persons” (Drew, 2018). These two (intertwined) dimensions have been usefully addressed with the concepts of epistemic *status* and *stance*: the former refers to participants’ relative access, rights and responsibilities to (types of) knowledge, whereas the latter concerns participants’ situated displays of their epistemic status relative to one another (Heritage, 2012b). These studies clearly point out the situated, emergent character of (epistemic) authority: claiming and being granted an authoritative role, i.e. being the one who knows (best), depends on participants’ communicative competence in managing knowledge in interaction and making it “actionable-through-talk” or other semiotic resources, as when participants point to/evoke/refer to entities or sources of knowledge that make them more knowledgeable than others. However, epistemics does not cover the field of authority-in-action. As mentioned above, the act of deciding can be independent on epistemic status and stance: the notion of *deontic* authority is supposed to account for the possible negotiations around “who decides”.

Although the concept of deontic authority emerged as a topic in some early studies in the 1990s (among others, Peräkylä, 1998; Macbeth, 1991), a consistent research interest in a person’s “legitimate power to determine action” (Stevanovic, 2018) was sparked by an article by Stevanovic and Peräkylä (2012), which set the agenda for the

subsequent stream of studies (see among others Stevanovic, 2015; Svennevig & Djordjilovic, 2015). If epistemic authority concerns *knowing* how the world “is”, deontic authority refers to participants’ ability to *determine* how the world “ought to be” (Stevanovic, 2018). Recently, the distinction between *status* and *stance* has also been advanced for the deontic order: similar to what has been suggested for epistemics, the concept of deontic *status* refers to the relative position of power that a participant might be considered to have (or not to have) irrespective of what he or she publicly claims, whereas deontic *stances* concern participants’ situated, public displays of their “authority to decide” in a specific domain of action. A further, crucial conceptual distinction regards *distal* and *proximal* deontic claims (Stevanovic, 2015); while the former is relative to “people’s rights to control and decide about their own and others’ future doings” (ibid., p. 85-86), the latter refers to “people’s rights to initiate, maintain or close up local sequences of conversational actions” (ibid.). Therefore, the deontic order concerns the rights and responsibilities to decide about the local interactional agenda (i.e. what is talked about, and when, and how) *as well as* future courses of action.

LSI research has convincingly shown how deontic claims are both ubiquitous in social life and the object of continuous negotiations by participants; together with epistemics, they can account for ongoing authority and power^{vi} negotiations, underscoring the complex array of local strategies by which authority is enacted, acknowledged, and resisted in (organizational) interaction.

5. Epistemic and deontic authority in organizational communication: An illustration

The above-mentioned distinction between epistemic and deontic *status* and *stance* can help disentangle “the tension between the pre-discursive organizational structure [...] on the one hand, and the way the actual interaction unfolds and which identities (e.g. leader or follower) are constructed on a turn-by-turn basis on the other hand” (van de Mierop, 2020, p. 598). Notwithstanding the relevance of such a conceptual distinction, there are still few accounts of the complex interplay between these dimensions in organizational studies (but see Svennevig & Djordjilovic, 2015; Stevanovic, 2015; Clifton et al.,

2018). Furthermore, as EDA is deeply embedded in and enacted through situated interactions, a major aspect that needs to be explicitly addressed is participants' *interactional competence*.

In the next section, we provide an empirical illustration of how epistemic and deontic authority are, at the same time, presupposed by members and locally constituted through communication. Particularly, we illustrate how and to what extent interactional competence plays a role in such processes.

5.1. To treat or not to treat? Insights from antibiotic stewardship in a hospital ward

One of the most pressing contemporary challenges in healthcare organizations consists in rethinking antibiotic use to contrast the increase of multi-drug resistant bacteria (MDRB). Deciding when to prescribe antibiotics and under which circumstances is, therefore, a pivot moment in medical decision-making, especially when the single patient's immediate interest has to be balanced with the ecology of the ward. Drawing on an ethnographic fieldwork in an Intensive Care Unit (ICU), we focus on how this decision is collectively taken by the members of the team *as* aligned to the clinical line established by the *Responsible Clinician* (hereafter RC). We will show how his epistemic and deontic authority are communicatively constituted by means of the ways doctors manage their turn-at-talk and mobilize other available semiotic resources. The case is particularly perspicuous: no member has (or is recognized to have) specialized knowledge concerning the management of infectious diseases. Notwithstanding this flat epistemic hierarchy, one physician emerges as the one "who knows best and who decides what to do". We illustrate how his epistemic and deontic authority results from the entanglement of structure (e.g. pre-existing hierarchically organized roles) and the members' constant engagement in communicatively constituting who has the right and responsibility to decide.

CEICU is a Trauma-specific Intensive Care Unit. As is the case with most hospital wards, it is a highly hierarchical, structured organization. Andrea is the Responsible Clinician of the ward, i.e. the senior physician in charge of the clinical line of both the ward and any single inpatient. He is a renowned specialist in brain injuries and recovery, but he does not have any specialty in infectious disease management. The issue is

far from being irrelevant as Andrea adopted a policy of antibiotic stewardship that *strongly contrasts with the international guidelines for antibiotic treatment (ATBT) in ICUs* (Hranjec et al., 2012). In fact, while the guidelines clearly prescribe the use of empirical therapy *at the first signs of a possible infection* (i.e. they recommend starting treatment on the first suspicion of an infection), CEICU adopts the so-called “watch and wait” approach (Eggimann & Pittet, 2001). This policy consists in avoiding, as far as possible, the empirical therapy (i.e. not treating on suspicion) and prescribing ATBT only when it is clear: (a) that an infection is at stake, (b) what the germ(s) responsible for the disease are, (c) where the infection is located. Until all or – at least – most of these conditions are established: do not treat, “wait”, monitor and assess again 24 hours later. Although this approach relies on a broad range of clinical practices (see Caronia & Chierigato, 2016), still this guidelines-non-conforming policy has strong clinical as well as ethical implications: it gives relative priority to the ward ecology over what may be perceived as the single patient’s immediate interest (see Hranjec et al., 2012). CEICU’s “watch and wait” approach is not a written protocol, yet it is officially stated and acknowledged by CEICU members as the “line of the ward”.

How does the responsible clinician manage to (im)pose and pursue this policy despite its being “off label”, the team members’ explicit and implicit disagreement, and his not having an epistemic vantage point with respect to his colleagues? To investigate the local emergence of the RC’s epistemic and deontic authority, we have selected the “morning briefings” as the main locus of analysis as “meetings are the very social action through which institutions produce and reproduce themselves” (Boden, 1994, p. 81).



Fig.1 The Morning briefing: Orienting to RC's status through body and gaze.

Focusing on the local management of turns-of-talk, we identified the practices through which the RC managed to lead the ongoing diagnostic talk and make his clinical perspective prevail. The excerpts below illustrate how the RC: 1) manages the opening and closing of the sequences of the night physician's report, 2) behaves as the principal addressee, and 3) pursues the watch--and--wait approach by means of two main strategies, a) "doing nothing with treatment implicative information" and b) "making relevant no-treatment implicative information".

Excerpt 1: "the 30th he had?"

LEGEND: RC = responsible clinician, NP = night physician, CM = case manager

[CEICU_GAR_03]

1 RC the man, this [strange man in bed seven]
2 NP [the man, this strange man bed seven,
3 Garetti Gianluca, a fifty-year old man
4 he is in his fifth day, it is an aneurysm of the
5 anterior communicating artery, treated with embolization,
6 (.)
7 patient issues. temperature thirty eight point four

8 with an increasing trend in the past two days
9 (.)
10 the white cells are ten thousands but he has
11 foul smelling and dense secretions,
12 the urines from the 30th are negative,
13 there is a bas ongoing, the x-ray from the thirty
14 shows a probable right basal density
15 (.)
16 from a respiratory point of view
17 in the past few days there has been
18 [a progressiv-]
19 RC [the thirth he was]at? his third day, the patient?
20 NP yes.
21 RC hmm. ok.

In 1 the RC initiates the macro section concerning the patient in bed number 7, thus indicating the conclusion of the assessment and planning of the previously discussed case. In doing so, he also tacitly selects the next speaker, the night physician (NP), who has primary access to the inpatient status and is the institutionally ratified knowledgeable reporter. The NP takes the turn he has been given and repeats literally what the RC just said. In doing so, he contributes to defining the RC as the authoritative voice that--in this case at least--appears to be a joint communicative construction.

In 4 the NP provides information concerning the day of the patient's stay: he is in his fifth day. This information is relevant to decision-making concerning the beginning of ATBT: this patient is close to the typical day when patients in this ward usually begin an ATBT. This "merely descriptive" information is followed by data concerning the fever: his body temperature is rising (lines 7-8), which is a typical symptom of a possible infection. Right after the NP adds information that does not support an infectious disease diagnosis: his white cells are ten thousands (10), the implied assessment is that they are not as high as they are expected to be when an infection is out there. This no-treatment implicative information is immediately followed by an adversative introducing new information concerning the status of his bronchial secretions: they are foul smelling (note the

emphasis on the first syllable) and dense (11). When referred to the bronchial secretions of a patient in his fifth day of stay and with a rising fever, these report-formatted assessments make relevant that the (expected) Ventilator Associated Pneumonia is out there.

In 12 the NP adds the lab results concerning the urine test: it is negative. Referring to this negative result narrows the diagnostic field toward pneumonia as it excludes other possible (and less threatening) loci such as the vesicle and cystitis caused by the catheter. This latter infection is less treatment implicative than pneumonia, since cystitis often disappears without using ATB by simply removing the device. Note that no diagnosis has been delivered, although the symptoms of pneumonia are there. While the NP continues along this implied trajectory (lines 13-18), the RC takes the turn with a competitive overlapping (19), opens an insertion sequence and comes back to the urine exams. Note that the NP gives up his turn, therefore acknowledging RC's rights to interrupt.

Although the RC uses an interrogative form and, therefore, asks for confirmation, he introduces an element that makes relevant the possibility that the vesicle is the loci of the possible infection: these exams were done the third day of the patient's stay, and the fact that they appear to be negative cannot be meaningful, since in the meantime the patient could have developed cystitis that could cause the fever. With this insert sequence, the RC makes relevant a counter diagnosis with respect to the one silently suggested by the NP: whereas the NP's projective diagnosis is treatment implicative, the RC's is not. In 20 the NP confirms the information (the urine test was done three days after the patient's recovery) and the RC does not push forward. But still, he introduced the cystitis hypothesis, and therefore non-treatability, to the team's representational field (Heritage & Raymond, 2005, p. 16).

How does the conversation go on?

Excerpt 2: "That's ok go on"

22 [...]
23 NP the white cells yesterday were ten thousand . decreasing
24 today I don't know if::

25 CM nine thousands. (.) (here from the) cultures
 26 I am miss - I am missing a[bas
 27 RC [so that's okay. go on?
 28 (.)
 29 NP hum [(tram-)]
 30 RC [cultu]res [((name CM)), you were saying, should
 31 they be done?
 32 CM [but it is miss- no. but-
 33 they were repeated this morning but it is missing,
 34 I am missing the bas from the [thirty still.
 35 NP [it's not here, ()
 36 still ongoing it was written.
 37 RC that's okay.
 38 CM it is still ongoing.
 39 (.)
 40 NP so from a neurological point of view

The NP has resumed his account of the patient's clinical situation, therefore displaying his first-hand-knowledge-based epistemic status; after a few turns (not shown), he recycles already given information that is not treatment-implicative (the reduction of white cells, 23), thus aligning to the RC's watch-and-wait approach. The case manager (CM) intervenes with information confirming the decreasing trend of the white cells (25). Yet, right afterward, she recalls a piece of information (already provided by the NP in 13): the results of the exam of the last bronco aspirate (BAS) are not on the record yet. This information evokes the possibility that this exam could confirm the unstated yet implicitly projected diagnosis: pneumonia. In 30 and 31 the RC comes back to the status of culture tests and asks the case manager if they should be done: she specifies once again that the tests were done this morning again and that the result of the BAS taken on the 30th is missing.

The NP confirms this information by mobilizing the clinical record as an authoritative source of information: the BAS is still ongoing (lines 35-36). In 37, the RC closes the sequence (he opened in 30) with an agreement token and does not further explore the topic at hand, i.e. the possibility that the ongoing test confirms the

suspected pneumonia. The CM further insists on the fact that the results are in progress (38).

By underling three times that they are waiting for the BAS, the NP and the CM are doing at least three things: first, they highlight the pneumonia diagnostic trajectory (over cystitis); secondly, they project a possible course of action, i.e. calling the lab to have the intermediate results of the BAS which could confirm that a pneumonia is at stake (see Caronia & Chierigato, 2016) and, thirdly, they (therefore) point toward treatability. Note that the RC does not exploit any of the transition relevant points he could use to intervene regarding this information, making it relevant. In 15 he does not take the turn upon the pause; in 27 and in 37 he provides an acknowledgement token with a conclusive intonation, and in 39 he does not exploit the pause once again. In 37 he signals the possible completion of the report sub-sequence concerning information relevant to an infectious disease diagnosis (“that’s ok.”). The NP aligns with the suggested closing of this discursive trajectory by changing the topic and reporting on the neurological status of the patient (41). In doing so, he interactionally cooperates once again in constituting/confirming the RC as the authoritative voice of the team.

Although never explicitly formulating any diagnoses nor stating the decision not to treat with antibiotics, the team practically decided, that day, not to treat under what was (de)constructed as suspected but not yet confirmed pneumonia. As in most decision-making occurrences observed during our fieldwork, the RC silently guided decision-making according to the watch-and-wait policy.

5.2. The communicative constitution of epistemic and deontic authority: The role of interactional competence

During our fieldwork, we discussed several times the issues of “doing being off label” and of possible disagreement with different members of the team. As one of them told us, the watch-and-wait approach was “the line of the ward”, established by Andrea who – as a senior told us – is “our chief”. The overall priority was to follow one single policy, as Dr. Sylvia A. told us: “one ward one clinical line”.^{vii} Clearly enough, Andrea’s being the responsible clinician (the “chief”) made a difference: when accounting for their behavior, members justified it by invoking his status-based authority as if it were a

“real and enduring state of affairs” (Heritage, 2012b, p. 6) and his view weighed more heavily than others by virtue of skill and hierarchical advantage (Ashcraft et al., 2009). The “passive side” of their sociality was evident in the ways they accounted for their workplace life: he had the authority to decide. Despite this “evidence”, the typical CCO suspicion concerning any conception of authority as “possessed” by somebody constrained us to search for what possibly went unseen by members.

As our analysis shows, the RC appeared to skillfully manage the interactive competence required to do “being the epistemic and deontic authority” of the ward. First of all, he enacted an authoritative role by opening and closing the macro-sections of the briefing as well as the inner phases of any macro-section: the report, the assessment and the plan (see ex.1, line 1 and ex. 2, line 37; see Cooren & Fairhurst, 2004; Holm & Fairhurst, 2018). The RC’s ability in strongly influencing the decision-making process (i.e., in pursuing the watch-and-wait approach) is mostly apparent in his treatment of the NP’s first-hand knowledge: on the one hand, he made relevant non-treatment implicative information, e.g. by interrupting his colleague’s account and asking confirmation of a specific detail (ex.1, 19); on the other hand, he “did nothing” with treatment implicative information, as he did not exploit transition relevant places and used minimal acknowledgment tokens in response to his colleague’s treatment-implicative contributions, without expanding on the matter (ex. 1, lines 6, 9, 15 and ex. 2, lines 27, 37, 39; see the similar concept of “disqualifications” in Kuhn & Jackson, 2008, and the category “prioritizing” in Holm & Fairhurst, 2018). Further, he managed to delay the diagnosis, e.g. by avoiding undertaking the implicitly suggested action of calling the lab to know the intermediate test results (ex. 2, 37; see “delaying conclusion” in Holm & Fairhurst, 2018). As regards the “followership”, the other participants locally ratified the RC’s authoritative position by selecting him as the ratified addressee through body orientation and gaze direction (see fig.1), by aligning to his interactional moves (ex. 1 lines 2, 20 and ex. 2 lines 29, 40) as well as, at times, by lining up behind the clinical trajectory. For example, the NP also made relevant information which was compatible with the watch-and-wait approach endorsed by the RC, as when he reported the low level of leucocytes a second time (ex.2, line 23).

In a few words, participants clearly displayed their orientation to RC’s authoritative status, and yet the RC provided a significant amount of interactional work in order

to maintain this “state of affairs” and skillfully influence the decision-making process without imposing his view (see Pomerantz & Denvir, 2007; Wodak, Kwon & Clarke, 2011). By cooperatively staging the process as distributed, participants moved toward a collective decision informed by the guidelines-non-conforming clinical line of the ward endorsed by the RC. As the analysis illustrates, (a) hierarchical positions affected the decision-making process, even though they needed to be ratified and maintained in interaction, (b) deontic and epistemic statuses and stances were markedly influenced by the participants’ interactive competence, and (c) rather than being an *individual* property, EDA was claimed, attributed, and challenged collectively by several participants. In a few words, and borrowing John Heritage’s words, the RC’s epistemic and deontic authority appeared to be at the same time “a presupposed or agreed upon, and therefore real and enduring, state of affairs” (Heritage, 2012, p. 6) *and* “evidenced and made real and enforceable for the participants” through interaction (Heritage, 2004, p. 224).;

6. For whom is epistemic and deontic authority communicatively constituted? EDA as a perspicuous case of the emic/etic dilemma in CCO studies

CCO approaches to organizations share a major theoretical problem with emergentalist perspectives on human sociality: while they are very well suited to account for agency and the local production of social order, they are less equipped to deal with the reverse side of the recursive relationship between agency and structure, i.e. to show how structure and social orders impact on agency. In the aim of avoiding Whitehead’s fallacy of misplaced concreteness, constitutive approaches risk underestimating how *organizing* produces a given (observable, describable, analyzable, labelable) *organization* that - once communicatively constituted - sets constraints and projects possibilities for (communicative) action (Taylor, oral communication, 2015). The problem is far from being only theoretical. It becomes epistemological as it challenges one of the basic assumptions of constructivism-oriented social research: the mandate of taking an “emic perspective”, i.e. aligning second order constructs with first order constructs and describing the world “from the members’ point of view”. As we illustrated by exploring the communicative constitution of “epistemic and deontic authority” in a hospital ward, a question arises: for whom are these kinds of authority communicatively constituted?

Clearly enough, a CCO-informed theoretical framework coupled with coherent analytical constructs and techniques (see Cooren & Malbois, 2019) would allow the analyst to see how and to what extent the team members of the hospital ward communicatively and jointly produced who - in a given circumstance - was the one who knows and the one who decides. However, in accounting for their communicative behavior, members focused exclusively on the “passive side” of social action: they invoked structural entities (e.g. pre-existing hierarchically organized roles) as making a difference in the ways they acted. None of the team members naturally (i.e. independently from the researcher’s intervention) acknowledged their communicative contribution in crafting the RC’s epistemic and deontic status. Rather, when talking with the researcher, junior as well as senior members recognized that they acted as they acted because he was “the chief”, “our head”, and – as a senior physician told us – “you cannot always say what you think, there are power issues at stake”. In a few words, from the members’ point of view, structure determined the members’ attitudes as well as communicative behaviors, not the other way round: paraphrasing Moermann (1988, 102), deontic authority was a noun not a verb, a preformed thing not a social activity (see also Weick 1995).

Adopting a CCO perspective, it would have been pretty easy to claim that this position was affected by “the fallacy of misplaced concreteness” and to advance that, on the contrary, a jointly accomplished process of communicative constitution of EDA was at stake. In advancing such an experience-distant account, wouldn’t we have delegitimized participants as reliable witnesses of the world they lived in? Wouldn’t we have delegitimized our informants’ ability to account for their workplace life-world? A clash of stances was clearly at stake. To overcome it, we mobilized the (LSI) distinction between *status* (a static category pointing to presupposed and enduring structures of social action) and *stance* (the correlated dynamic notion relative to the contingent interactive bringing into being of any “enduring” state of affairs), which made it possible to account for the co-constitutiveness of organizational structures and members’ interaction. As we have shown, by means of the ways physicians and nurses managed their turn-at-talk and mobilized other available semiotic resources, they displayed their orientation toward the RC’s status (e. g. by their body posture) as an already existing state of affairs, and at the same time locally (re)created it. Once the analyst’s perspective was equipped with these analytical categories, the social world of the organization appeared

both a verb *and* a noun; a social activity *and* a pre-formed thing. But even in this case, our interpretation did not mirror nor was coextensive with the members' one.

The communicative constitution of organization and the denaturalization of social order: concluding remarks

As we illustrated by making a case of EDA, when assuming a CCO approach to the social life of organizations the analyst is most likely put in front of the never resolved epistemological and methodological dilemma of social research: finding a way to balance first order (i.e. members') constructs and second order (i.e. analyst's) constructs. In this chapter we argued that the analytical distinction between status and stance could partially rebalance the emic/etic divide by focusing on both the pre-discursive entities that affect members' local interactions (status) and their enactment/deployment and, ultimately, constitution in interaction (stance). Despite its limits (e.g. a privileged focus on human over non-human actors), this analytical construct permits to consider both sides of the agency/structure recursive relationship and, thereby, to "take seriously" members' accounts without leaving the *terra firma* of interaction. Having said that, this rebalance of the divide does not lessen the relevance of the epistemological dilemma *per se*: the *communicative constitution* of EDA (and, we contend, any other ontological trait of organization) is a second-order construct, not always nor necessarily oriented to members' perception or "natural attitude". If - as we suggest - the active role of members in communicatively constituting their organizations is an experience-distant concept, then we have to admit that in advancing it we risk perpetuating the same error post structural-functionalistic research attributed to structuralist approaches to organizations: considering members' as "cultural dopes" unable to reflexively account for their practices. Even if more subtly than in the past, we still risk situating our perspective in an upper position with regard to the informants' eyes upon the reality they inhabit, and treating their practices as nothing more than naive first-level data. Perhaps they are. But in this case, we have to accept that our analysis is often from "outside" and not necessarily aligned with the members' view. If one of the heuristic advantages of CCO approaches is the denaturalization of the organizational order and the capability to see what goes unseen (but still operating) for the members, then we have to admit and re-legitimize the heuristic advantages of the (in)famous "gaze from afar" (Caronia, 2018).

While fascinating and not easily contestable from a CCO point of view, the communicative constitution of EDA as well as other organizational entities is a claim that does not necessarily mirror the members' point of view on their life-world, nor an *emic* account of how organizing unfolds. Rather, it is a crucial advance in the scientific (and not always "emic") understanding of organizations' lives.

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ⁱⁱ As Cooren, Kuhn, Cornillissen & Clark (2011) contend, “several versions of the CCO approach can be identified”. However, they all share “the same general claim [...] if communication is indeed constitutive of organization [...] it cannot be merely the vehicle for the expression of pre-existing realities; rather it is the means by which organizations are established, composed, designed, and sustained. Consequently, organizations can no longer be seen as objects, entities, or ‘social facts’ inside of which communication occurs.” (p. 1149). For the purposes of this chapter, when referring to CCO research, we point to this basic theoretical claim which lies at the core of the different CCO approaches and stances (on the three main stances within CCO research see Kuhn, 2012).

ⁱⁱⁱ The local interactive constitution of collectives and organizational entities can be conceived of as the main empirically demonstrated assumption of CCO research, see note 2.

^{iv} Following Searle, Stevanovic and Peräkylä exemplify the distinction between these two orders of interaction by stating that “epistemic authority is about getting the *words to match the world*, and deontic authority is about getting the *world to match the words*” (2012, p. 298).

^v Claiming that authority is distributed between human and non-human actors raises an issue as to who or what embodies or attributes the competence of exercising authority. For reasons of space we cannot enter the long-standing debate on actor vs. agent, the different definitions of agency (see Ahearn, 2001, Duranti, 2004, Caronia & Orletti, 2019) and the related issue of the agency of non-human entities, i.e. their capacity of making the difference in the unfolding of interaction. Following the Montreal School of organizational communication and drawing on the notion of hybrid agency (Cooren & Caronia, 2014), we contend that human and non-human beings do perform authority (and leadership, see Clifton, Fachin & Cooren, 2021), although in different ways related to their different ontologies. As Latour (1996) had it, once delegated by humans and provided with the competence to act (or “authorize”), things set constraints and possibilities for action and actively participate in meaning making and in constituting intangible yet operating realities such as “authority” (e.g. a police badge authorizing a person to act as an authority).

^{vi} As Taylor and Van Every had it, power and authority are “commonly linked”, but it is difficult to clarify “the basis of their relationship” (Taylor and Van Every 2014, xviii; on the elusiveness of power, authority and related notions see also Bencherki et al., 2020). For the purposes of this study, we define au-

thority as the attributed, socially ratified, or emerging status that confers (a) the right to know and decide and/or (b) the power to do things and make people do things (on power as the probability of obtaining compliance see Weber 1968/1922). For reasons of space, we cannot elaborate on the issue of “unpacking authority” and on its (not mutually exclusive) constituents and articulations (i.e. epistemic, deontic, moral, and interactional).

^{vii} As we discovered during extensive fieldwork, coherence and consistency in the management of any single patient was perceived and positively evaluated by the patients’ relatives, who strongly appreciated the fact that, as the father of a young inpatient told us: “at least, here anyone tells us the same thing”. From the ward ecology viewpoint, coherence and consistency in the antibiotic policy was also a benefit in terms of reducing MDRB selection. Moreover, the consistent adoption of an “off label” clinical police was a kind of “identity badge” members used to mark their difference with respect the to other hospital wards, and to create internal cohesion in the face of disruptions and conflicts related to its adoption.