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An integrative discourse perspective on positive leadership in public health care

Introduction

As a consequence of increasing research interest and evidence during the past two decades, positive leadership (PL) has turned into a prominent leadership approach (e.g., Cameron, 2008, 2012; Kelloway *et al.,* 2013; Zbierowski and Góra, 2014) and a part of positive orientation in organizations. This leadership style is based on positive organization scholarship (POS) (Cameron *et al.,* 2003), positive change (Cooperrider and Srivastva, 1987; Whitney and Trosten-Bloom, 2010) and, more widely, positive psychology (Maslow, 1954; Seligman and Csikszentmihalyi, 2000). Furthermore, PL is connected with some other leadership traditions, such as servant, transformational and authentic leadership (Searle and Barbuto, 2013). Arguments in favor of the PL concept have vigorously stood for various strategies or orientations supporting affirmative biases, behaviors and performances (e.g., Cameron, 2012; Kelloway *et al.,* 2013). However, the essence of the PL concept as a social construction has not been sufficiently captured, which we consider to be a fundamental deficiency in understanding PL's substantial meaning within the desired organizational context. In this paper, we address an integrative discourse perspective to expand the current PL conceptualization and investigate how the experience of the term "positivity" and its value for leadership is constructed in the Finnish public health care context. It is a characteristic of Finland that health care is the primary publicly funded field, with the aim of ensuring universal access to the health services required by the population and reducing health inequalities between different population groups. The joint municipal authorities (hospital districts) are mainly responsible for the services (Ministry of Social Affairs and Health, 2010).

Discourse analysis is a versatile field containing a variety of analytical approaches and scientific disciplines (Wetherell *et al.,* 2001). The perspective addressed in this paper is related to discursive psychology, concentrating on PL's subjective dimensions or micro-sociology (Potter and Wetherell, 1987). However, we are also interested in how PL discourse is connected with wider organizational practices and power (macro level). For this dual emphasis, the perspective can be considered to be an integrative discourse perspective. The key terms included in this perspective are PL's meaning variations, rhetorical strategies, subject positioning, organizational practices and power. The perspective and included terms, as well as the quality criteria and intertextuality, will be explicated after grounding the value of the perspective by reviewing the contemporary PL literature.

In previous research papers, the emphasis has been placed on PL strategies and orientations. According to Cameron (2012), three orientations should be stressed: a) facilitating positively deviant performance, b) focusing on affirmative bias and c) fostering virtuousness in individuals and organizations. Positively deviant performance entails exceeding normal performance dramatically. Affirmative bias refers to focusing on strengths and capabilities to enable organizations to thrive and flourish. Virtuousness refers to elevating the behavior of the organization's members. Lewis (2011) suggested that positively deviant leaders concentrate on what goes right and what is viewed as good.

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Kelloway *et al.* (2013) defined positive leadership as behaviors that result in followers' experiencing positive emotions. These behaviors refer to such activities as cheering people up, praising job performance and thanking individuals. Wooten and Cameron (2010) explained this (positive) strategy's significance as creating positive deviant performances in organizations, which can manifest through recruitment, training and professional development. Zbierowski and Gora (2014) also argued that developing positive strategies and building a high-performing culture is necessary but so is recruiting or creating positive human capital among existing employees. Both Salmi, Perttula and Syväjärvi (2014) and Syväjärvi and Vakkala (2012) highlighted the need for a more experimental perspective in positive leadership as well as acknowledging employees' authentic experiences.

Cameron (2012) also presented four of the most important strategies that enable positively deviant leadership. These include a positive climate and positive meanings, relationships and communication. According to Cameron, a positive climate can be fostered by enabling and displaying positive emotions; promoting compassion, forgiveness and gratitude and paying attention to language so that terms such as "courage" and "humility" are acceptable in organizations' vocabulary. Statements about caring are also recommended.

Demonstrations of altruism and kindness are considered essential in any endeavor to build positive relationships (Cameron, 2012). Also, identifying and building employees' strengths have produced better outcomes than finding and correcting their weaknesses. According to the argument, leaders who spend more time with their strongest employees, as compared to spending it with their weakest employees, achieve better or even double productivity in their units. Positive communication occurs when affirmative and supportive language replaces negative and critical wording. The ratio of positive and negative statements should be around five to one to achieve extraordinary results. Leaders can foster positive communication, for example, by modeling positive speech themselves. This includes positive feedback and expressions of support. Cameron (2012) stated that positive meaningful work can be facilitated by highlighting the work's long-term impact and associating it with core individual values. The aforementioned patterns of positive leadership can be implemented in day-to-day interactions between leaders and followers (e.g., meetings, discussions and one-on-one interviews), through organizational strategies and recruitment processes and by the leaders' own actions and example (Cameron, 2012).

On the basis of previous studies on positive leadership in the context of health care organizations, Cameron *et al.* (2011) and Kelloway *et al.* (2013) explained that a positive approach to leadership has a positive effect on employees. Cameron *et al.* (2011) stated that positive practices elevate organizational performance through effects that amplify (e.g., positive emotions), buffer (e.g., against negative effects of trauma and distress by enhancing resiliency) and are heliotropic (e.g., foster positive energy among employees). Kelloway *et al.* (2013) concluded that positive leadership behaviors are associated with greater positive affect, such as positive mood states and attitudes in employees.

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Positive leadership has been criticized for being too naïve and elitist as well as for creating delusional thinking and reckless optimism (e.g., Ehrenreich, 2009; George, 2004). The vocabulary and expressions used in the positive leadership literature, such as extraordinary, virtuousness or the best of the human condition, are thought to be quite seductive. This leadership style is also based on the principles of positive psychology, which, in its own right, has faced a great amount of criticism for emphasizing happiness (considered a vague concept) and ignoring the negative aspects of life experiences. Many scholars argue that positive and negative experiences are inseparable (Beehr and Grebner, 2005; Lazarus, 1966; Selye, 1976). Cameron (2012) has dismissed this criticism by arguing that the concept of "positive" is misunderstood. According to him, positive leadership practice does not ignore bad events and negative incidents. In contrast, negativity has a place in positive leadership practice, as difficulties and bad events often spark positive outcomes, such as effects on well-being.

Approaching PL from integrative discourse perspective

In this paper, as a baseline, we do not argue against positivity as a leadership concept. However, we take a critical stance toward a unanimously agreed-upon definition of PL. From a discursive point of view (Potter, 2012), PL is a social and contextual construction that does not mirror reality linearly. The meaning of PL is defined differently in the various organizational situations. This is due to the assumption that a language is an act that does not only describe but also builds reality (Potter and Hepburn, 2007). Consequently, the aim of the study is focused on the process of how the PL concept is built (action) within the desired context.

To capture PL as a social construction, we address the framing of an integrative discourse perspective through the following four fundamental propositions. First, people potentially have a variety of overlapping and competing meanings or views (Edwards and Potter, 1992) of PL that are recognized and tested but also developed during situations of interaction. For example, some people may praise virtuosity, whereas others might ascribe less extreme meanings to PL.

Second, to build a social construction, people endeavor to make their version of PL as available to and reliable for others as possible. The attempts, in turn, can be described as action orientation that is illustrated by different rhetorical strategies (Edwards and Potter, 1992). For instance, people have beliefs regarding why their specific meaning for the term "virtuosity" or some other PL term is the most appropriate.

Third, rhetorical strategies entail various subject positions to people (Davies and Harré, 1990). The possible subject positioning can be related to the low and high performers or to the leaders who are and are not capable of fostering virtuosity. Furthermore, in an integrative discourse perspective, rhetorical strategies have certain effects on subjectivity (Georgaca and Avdi, 2012). For instance, the use of the term virtuosity might provoke the people who feel themselves to be low performers or drive them to try harder.

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Fourth, PL is a situational concept. Variations in PL's meanings, though, are not dependent only on situations of interaction. Organizational context also creates different meanings for PL. As a consequence, PL's meanings lead to power questions that can be manifested at the interaction or organizational level. The illustrated term virtuosity might represent power if the use of the term is supported during the interaction situation or more extensively in the organization. In that case, the term has obtained a dominant status; it becomes objectivated (Mumby, 2004). A power perspective also highlights the question of resistance to variations in PL's meaning. From an integrative discourse perspective, resistance to a dominant PL meaning, such as the term virtuosity, might be valuable information containing the potential for testing and confirming the genuineness of the dominant meaning. Resistance, often illustrated as deviant cases (Potter, 1996), should then be included in the analysis of variations in PL's meaning.

Research aims

As a research aim, we investigate the use of the term "positivity" and its meaning for leadership within a public health care context. Following the presented propositions related to the integrative discourse perspective, we highlight four analytical questions: a) in what ways do PL's meanings vary contextually (variation), b) in what ways are they justified (rhetorical strategies), c) in what ways do they posit leaders and followers (subject positioning or effects on subjectivity) and d) in what ways are they connected to an organization (practices and power)? The first three questions relate to discursive practices that are considered to be individual dimensions of the PL concept. As a research tradition, the questions are characteristics in discursive psychology (Wiggins and Potter, 2008). The last question concentrates on a PL macro perspective that investigates how PL is connected to an organizational environment as well as maintains or suppresses certain practices. The emphasis of the last question associates it with critical discourse analysis (CDA) or a critical Foucauldian perspective (Willig, 2008). In the research literature, the two discourse traditions have mainly been distinctly availed. In integrating the two traditions, we endeavor to answer the demand for a more eclectic use of discourse analysis (Wetherell, 1998).

Methods

Research design

The present study examines data on leaders in the Lapland Hospital District (LHD) in Finland. By leaders, we refer to all persons defined as having managerial or leadership responsibilities in their LHD employment contract. The University of Lapland collaborates with the LHD and its leaders within the Humanly Effective Leadership research project, which aims to develop both more productive and meaningful leadership and organization development practices. The project runs continuously from 2014 to 2016. It consists of one major leadership inquiry, qualitative interviews, and two focus group sessions focusing on the health care districts' leaders. In this paper, we concentrate on data gathered in one focus group session dedicated to LHD's leaders in May 2015.

The focus group session was thematically independent of the research projects' other data gathering

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interventions. The session's theme, positive leadership, was chosen by the leaders that participated in the Humanly Effective Leadership research project. Before the session, the leaders had an opportunity to present propositions related to the leadership issues that they viewed as most topical to them, and PL was the most favorable issue.

According to the LHD's HR-unit, 263 leaders work under the LHD at different levels. The leaders received invitations to the focus group session, which were sent by the LHD's CEOs. A total of 51 (19 per cent) leaders participated in the session. Given the leaders' demanding responsibilities in their units, it was not conceivable to reach much higher participation. At the unit level, the leader group represented all the LHD's units (19), excluding those of the patient hotel and social work services. Participant numbers from each unit varied between one to three leaders. At the professional level, leaders represented medical leaders (55 per cent) and other leaders (45 per cent). Medical leaders were divided into head nurses (27 per cent), medical doctors (18 per cent) and nursing directors (10 per cent).

For the focus group dialogue, leaders were randomly divided into four sub-groups. Each sub-group participated in two-hour sessions, conducted by a facilitator who fostered open and honest dialogue and kept the session on track. The study's authors served in the facilitator role, asking two trigger questions for the group: A) How have you experienced the concept of positive and its meaning in the hospital's working context? B) What is the meaning of positivity in the context of leadership? Except for these trigger questions, the focus groups were not subjected to any other contextual directions as the facilitators concentrated on the process. They encouraged the group members to openly sharing their thoughts and asked for more description if the meanings of the presented utterances were unclear. For the most part, the dialogue went smoothly forward as participants appreciated each other and stayed close to the theme in their discussion. In a few parts of the dialogue, facilitators adopted a managerial role to control discussion among multiple participants. The facilitators also ensured that each group member had proper opportunities to participate in the dialogue.

The dialogue in each sub-group was first recorded and then extracted and transcribed into a written form that constituted the study's data. In some sub-groups, the dialogue was highly vivacious, and participants talked over each other, which made transcription a challenging task. A few blurred instances were excluded from the data. The transcribed data consists of 189 A4-pages (55,180 words). The data between subgroups varied from 34 to 57 pages. The data, capturing 19% of the LHD's leaders, represent PL discourse at the public health care organizational level. The data were limited in that more detailed conclusions about PL in certain hospital units and work performance within the units were not able to be drawn.

The leaders had been extensively informed about the Humanly Effective Leadership project and the fact that the dialogue sessions would recorded and utilized for research purposes. The authors were aware that this might constrain authentic expressions during the dialogue sessions in question. However, this was considered a minor restriction, because these leaders were already used to this research approach from previous sessions and the approach had worked adequately well in these

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encounters. To ensure the research procedure was ethical and to avoid misinterpretation, the steering group of the Humanly Effective Leadership project had an opportunity to see and comment on the data analysis results before their publication. As a characteristic limitation of discourse analysis, the dialogue sessions used in this study are unique, and they cannot be replicated as such. The quality criteria for the chosen discursive perspective will be discussed as part of the data analysis to decrease the constraints that uniqueness places on the study.

Analysis

As the analysis' preliminary phase, several close readings of the transcribed text were conducted for the researchers to become acquainted with the data and perform initial coding of PL meanings. By initial coding, we refer to a sense of the "flavor" of the data and the selection of extracts that appeared to be significant for the research aim and questions.

The analysis was divided into four levels to answer the research questions. The first analytical level (research question 1), characteristic in discursive psychology, concentrated on distinguishing between the themes or "bodies of instance" (Potter and Wetherell, 1987, p. 167) that represent the phenomenon under examination. In our case, we first endeavored to capture the variation of PL meanings and scrutinized all text contexts in which positivity and positive leadership were described or implied. The following example quote connects variations in PL's meaning to balancing the interaction and feedback situations.

1 (D) – I think that the feedback should be given immediately, that positivity is
2 manifested right away (.) but if the performance is negative, it should also be talked about
3 [promptly] (.)
4 (D, A1) – so that it doesn't lead to a situation where there are five unaddressed issues waiting
5 for you (.)
6 (D, A2) – if the negative issues are registered, but not dealt with, negativity will
7 accumulate (.) little by little (.)
8 (D, R) – but that [immediate feedback] doesn't work for everyone (.) if I lose my
9 temper, it's better that I don't say anything (.) I go outside, breathe, and, come back [after I have
10 calmed down] (.)
11 (R, A1) – in negative [feedback] cases, it might be better to sleep on it before processing
12 (R A2; D, A3) – it would be [a] good [thing] if you can sleep over the night (.) and then you
13 give that feedback (.) but if you don't give it…(.)
14 (D A4) – yes, it [the feedback] must be given (.)

Explanations for the abbreviations: D = an argument for the dominant PL meaning, R = a resistant argument, A = an auxiliary argument (supports or expands on the dominant or resistant argument)

For rich data description, we included both the dominant and the deviant utterances in the analysis (see Potter, 1996). In the example, the dominant PL meaning appears to be that feedback is a part of the leader's job description and a regular act (lines 1–2). Potential resistance exists in how and when negative feedback should be deciphered (lines 8–13).

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At the second level of analysis (research question 2), we paid more careful attention to the arguments (see, e.g., Hepburn and Potter, 2003, p. 185) for PL's meanings. As an underlying assumption, any rhetorical argument can be supported, negotiated or confronted. In the example, the arguments that appear to have reliable meaning connect feedback to leaders' duties and competencies (lines 1–2), well-being or time management (lines 4–5) and potentially to positive organizational culture (lines 6–7). The argument on lines 8–10 indicates resistance toward a unanimously agreed-upon definition of PL, suggesting more flexible feedback practices and linking PL to questions of personality. At first, a resistant argument seems to change the discourse's direction (lines 11–12), but then, the discourse returns to the dominant PL meaning (lines 13–14).

At the third level of analysis (research question 3), we examined who sustains or prevents positivity and what are PL's effects on subjectivity. Our interest here lay in distinguishing between the subjective positions and influences revolving around PL. In the terms of discourse analysis, positioning targets to individual identities is made significant through rhetorical strategies (Davies and Harré, 1990). Within the example extract, the leaders have an active position controlling the feedback process, while the followers have a more passive recipient position. The argument in lines 8–10 is a potential turning point in the text representing a new subject position of the leaders (feedback receivers). The argument suggests that unanimously agreed-upon or strict feedback practices might have negative effects on the person who is in the feedback receiver position.

The analysis' last level (research question 4) removes emphasis from PL's individual aspect to organizational practices. The assumption is that the dominant discourses that are taken for granted constitute a basis for standard practices. At the same time, dominant discourses inexorably suppress the alternative discourses that are often illustrated as resistance toward the dominant discourse. Consequently, dominant discourses are tightly connected with power settings (Georgaca and Avdi, 2012). The analytical interest here concerns the role of specific definitions for PL that are accepted as organizational practices. Furthermore, the analysis endeavors to distinguish between organizational practices and power settings that prevent bringing forth certain PL definitions. In the example extract, a dominant meaning for PL in the public health care context appears to be that the leaders should have capabilities of actively and efficiently giving feedback. Correspondingly, one illustration of potential PL tension might occur between undisputed and flexible practices related to negative feedback.

In summary, all PL meanings were identified and investigated through the four analysis levels. Within the analysis, PL meanings' intertextuality was taken into account by following two principles: identifying points of recontextualization within the PL discourse and defining the scope of the analysis (Koskela, 2010, pp. 50–61). In the analysis, the scope was a particular meaning for PL. The examination started from identifying PL meanings and followed how the meanings were recontextualized (with the terms of rhetorical strategies, positioning, effects and organizational practices) in each focus group. In the example extract, PL meaning is targeted to a balanced view between positive and negative feedback. More precisely, one dominant, one resistant, and six

auxiliary arguments for a balanced view were presented before turning the discourse into another PL meaning.

In regard to discourse analysis, many rather diverse quality criteria have been presented. In this article, the following criteria adapted from Georgaca and Avdi (2012) are considered to be the most thorough propositions. Internal coherence, referring to a consistent account of the data, and reflexivity toward the researcher's role with the data was discussed as part of the data gathering. Rigor, emphasizing careful attention to inconsistency or diversity, is included in the analysis as deviant cases (resistant arguments). Transparency and situational features are considered both by illustrating each analysis' levels distinctly and grounding a particular extract within a description of each PL meaning. The extracts are justifiable examples, as they will demonstrate and encapsulate the variation related to the discourse of each PL meaning. Finally, the usefulness of both the PL concept and practice will be addressed following the description of PL's meanings.

Results

Variation in PL was associated with following four meanings (views) in the analysis: a) situation-sensitive interaction and feedback, b) process quality and performance clarity, c) a transparent communication system and d) supportive expertise development and equal compensation. The first view, emphasizing direct interaction dynamics and behavior, gained most of the space in the discourse. The other views highlighted more structural issues, such as organizational frames, systems and tools. Naturally, the line between the views is not entirely distinguishable, as organizational structures set externally defined borders for interaction, and, during situations of interaction, structures can be variously availed. However, the first view is characteristic of the PL tradition, whereas the other views stress more managerial questions.

In this paper, considering the extension of the data, we will render a detailed analysis of a situation-sensitive interaction and feedback view with the terms of the four analytical questions. The view consists of four sub-meanings (sub-views). First, different roles and role conflicts during various feedback situations gained a lot of space in the leaders' discourse (a role-taking view). Second, the leaders highlighted the feedback from patients compared to that of colleagues and followers (a servicing view). Third, leaders examined the balance between positive and negative feedback (a balancing view). Fourth, leaders paid some attention to gathering information about feelings and work performances as well as discussing them (a deciphering view). The four sub-views are discussed below.

A role-taking view

The discourse invariably revolved around role-taking in different interaction and feedback situations. The leaders mostly positioned themselves within an active feedback-giver role. From this position, they emphasized leaders' sensitivity within a particular feedback situation that requires the ability to place oneself in the followers' position. As requirements for sensitivity, the leaders stressed empathy, discretion and self-esteem as well as functional practices demonstrating various

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feedback situations. A situation-sensitive view for feedback was widely viewed as a leaders' duty and "a part of the job." However, the positions of leaders to give such feedback appeared to be unequal between leaders from different units.

1 (R) – and what about the big units (.) how can the leader equally share positive feedback
2 to all [employees] (.) if there are 40 employees someone will suffer (.)
3 (R, A1) – if you don't have a physical presence [or] if you don't closely work with the employees
4 it's often a challenge (.)
5 (R, A2) – and [in the small units] you can listen [to the employees] after the workday (.) A
6 colleague thanks another [colleague] [saying] that we made it (.) this was a nice day (.)

The leaders vigorously argued against the situation of the larger units, which created a distance between leaders and followers (line 3 above). Along this line of argumentation, large and geographically fragmented units represented a faceless, mechanistic organizational culture. Correspondingly, small units were mostly seen in a romantic light, in which situation-sensitive feedback was a natural practice (lines 5–6). As a statement, the leaders who worked in smaller units appeared to have better opportunities for PL than the leaders working in larger units.

However, the leaders' meanings for "equal" feedback opportunities varied to some extent. On one hand, equality was related to feedback through explaining to each follower. On the other hand, equality was separated from similarity. According to this argument, each unit had different duties and practices, and the employees' demands for feedback varied. Consequently, perceiving equality entails both substance knowledge about a unit's core task and a sense of followers' individual characteristics.

Along with the situation-sensitive feedback-giver role, the leaders positioned themselves within the feedback-recipient role. From this perspective, three PL meanings characteristic to the hospital context were identified. First, the leaders were not used to receiving feedback from their superiors that appeared driving them to independent survivor's position expressed as "a chore of solitude." Second, the leaders' experiences related to peer feedback varied substantially. In some units, the leaders dared to talk "sometimes with a loud voice but constructively" or "with trust" to each other, affecting positively to solitude. Correspondingly, in some other units, the leaders carefully considered with whom they could "freely vent their feelings." Furthermore, some professional tacit assumptions appeared to be constraining the transparency of peer feedback. Notably, medical doctors were often considered to be "behaving over-collegially" or "covering each other's backs." Third, the leaders desired more feedback from their followers. However, the arguments related to feedback practices and forms varied. According to a dominant argument, a leader should have "high tolerance for critique," and a follower should express both the positive and negative issues "straight out to him/her." As a statement of practice, sufficient opportunities for feedback should be increased and supported. Some leaders, though, did not prefer such an up-front approach. Instead, they wished that a hospital's HR-unit could organize feedback gatherings "sensitively" without revealing the identity of the feedback giver. Ultimately, sensitivity related to unidentified feedback

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was not widely supported by the leaders, considering it as a high risk for faceless accusations and assaults.

A servicing view

A servicing view illustrates the dynamics of interactions between hospital personnel and clients, forming a tension between the two dimensions. A dominant argument of the view is that employees are highly dedicated to the health care field and put forth all their energy to demanding patient servicing situations. This devotion places the employees in a servant, even savior, position, which, in turn, has certain effects on personnel interactions.

1 (D) – the paradox is that we gain mostly positive feedback from the patients (.) but at the same
2 time [our] work community might feel sick (.) I found it peculiar (.)
3 (D, A1) – interaction [among employees] doesn't work, but it works with clients.
4 (D, R) – if the work community doesn't work [;] information isn't transmitted and people
5 don't trust each other (.) it will detract from client servicing (.) maybe you [the leaders]
6 don't see it here [at the hospital] but the problems might become visible later at the health center
7 [for instance,] instructions aren't given and recipes written [to the patient] (.)
8 (D, A2) – professionals will do their job (.) there aren't mistakes (.) but [you] don't
9 necessarily have the feeling that you want to go to work (.) you go there because you have to (.)
10 (D, A3) we are here [in the hospital] for the patients [,] and we give everything to them (.) but
11 the work community should empower you (.)

The arguments in the extract targeted two servicing views' effects. First, the leaders considered high-level patient servicing as a hospital's core task, but it is consumptive, negatively affecting personnel's interaction (lines 1–3), organizational climate (lines 8–9) and well-being (lines 10–11). Second, the leaders disagreed in their arguments targeting a servicing view's effects on patients. From an external position (here, the health center), the tensions between the employees negatively reflected on patients (lines 5–6). From a professional position (line 8), the deficiencies were not visible to the patients. As a statement, regarding a servicing view's negative effects on personnel, the leaders desired sufficient time and collective forums to discuss challenging patient situations.

A balancing view

A balance between positive and negative interaction and feedback was a noticeable view on display in the leaders' discourse; though, they prioritized the terms "appreciative" and "sensitive" over "positive." The most strongly held idea was that employees accepted both negative and positive feedback if they could trust the leader and believed the leader valued them. Correspondingly, if the followers did not know or rely on the leader, positivity was experienced as "false" or "suspicious" feedback. Hence, the question is more about appreciation than positivity. However, the leaders had many arguments related to the positive–negative dimensions of interaction and feedback. According to a dominant argument, positive feedback should be immediate and publicly given, whereas arguments associated with negative feedback varied (see the extract in a method description).

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Following the idea of appreciation, though, the challenge the leaders expressed did not mainly concern the ratio between positive and negative feedback in general but rather sensitivity to various interaction and feedback situations. Along this line of argumentation, as a baseline, the leaders felt that positivity tends to be unilaterally targeted to "active" followers.

1 (D) – how [you] could bring out the potential of all the employees (.) [so that] it's not only
2 some [employees] excel with their competencies (.) how to promote those [employees] who
3 haven't any special responsibilities or capabilities (?) how to highlight their special potential (?)
4 [so that] the enthusiasm would increase among them (.) and ultimately, positivity (.)

This argument focuses on a disparity between active and non-active followers and sees activity as power. It also proposes that the opportunities for PL lie on the hidden potential of unpretentious, humble employees. As an organizational statement, PL should not focus only on the ratio between positive and negative feedback but also toward whom positivity is targeted.

A deciphering view

The fourth PL meaning related to situation-sensitive interaction and feedback was a deciphering view. The view was targeted toward gathering information about feelings and work performance as well as discussing them. As a dominant argument, the leaders considered simple documentation to be an appropriate tool for enhancing positivity in an organization. For example, one unit had adopted a policy that if one employee caused a favorable experience for another, the beneficiary was encouraged to make a remark about the experience on a post-it note, for the unit to read and to thank the other employee. Another unit had launched a campaign in which they developed an etiquette of positive work behavior. The etiquette was tested by documenting and improving daily interaction situations. According to the leaders, deciphering documentation related to favorable experiences and positive behavior was a rather practical management task, but it might also have an affirmative influence on work climate and performances. However, the situation changed entirely if the "data" were negative. In negative cases, leaders preferred confidential dialogue opportunities instead of documentation.

1 (D) – we [in the unit] had an idea that an employee who felt that he/she had done
2 something wrong had an opportunity to talk about it [to others] (.) that 'I [an employee] feel that I
3 have behaved poorly, somehow' (.) and we [in the unit] talk about it (.) The point was that we had
4 courage to discuss those [bad] feelings fairly (.)
5 (D, A1) – an opportunity to confess the mistakes (.)
6 (R) – I have tried many years [to] sincerely tell my feelings in the unit's meetings (.)
7 but it's really hard to say that I feel bad (.) or something like that (.)
8 (D, A2) I have been a head nurse [in unit X] for two and a half years (.) In the [personnel]
9 meeting I said that I haven't ever worked such an awful unit (.) and I have worked [in the
10 hospital] for 30 years (.) and I explained why [I felt that way] (.) It was a good thing that I
11 managed to say it [my feeling] (.) but it took a courage (.)

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This extract illustrates that deciphering negative feelings and performances is an extremely challenging task, demanding confidential settings (lines 1–2), fairness (line 4), practice (lines 6–7) and courage (lines 4 and 11). The demand for both the followers and the leaders appears to be that they have regular opportunities to adopt a "confessing" position (line 5). If the confession recipients are capable of taking a compassionate position toward the confessor, in turn, it might have an affirmative effect on negative feelings and performance (lines 10–11). At the organizational level, however, a confessing culture was not an established practice in the LHD. The interventions of deciphering negative feelings and performances were derived from the endeavors of single leaders.

Discussion

Despite PL being a prominent leadership perspective, the concept has especially been criticized for an unrealistic emphasis on optimism and seductive vocabulary (Beehr and Grebner, 2005; Ehrenreich, 2009; George, 2004). Furthermore, adherence to one particular definition of PL can be considered to be a hegemonic use of the term "positivity," suppressing other potential uses of the term. This article partly confirms this criticism. The PL meanings identified in this study, have many contextual similarities with the PL research tradition (e.g., Cameron, 2012; Kelloway *et al.,* 2013; Zbierowski and Góra, 2014). From a discursive perspective, though, PL is a situational concept that cannot be scrutinized in a certain way. If the idea of social construction as action (e.g., Potter and Hepburn, 2007) is taken seriously, the external definitions for PL strategies and vocabulary, such as virtuosity or the best of the human condition, are unrealistic, indeed. Instead, capturing the PL concept requires an emphasis on the identification and entitlement of the various PL meanings, effects and connections to the organizational practices within the desired context.

In the public health care context, PL meanings are associated with situation-sensitive interaction and feedback from four points of views. A role-taking view, characteristic of the PL literature (e.g., Kelloway *et al.,* 2013), stresses a leader role as an active and competent feedback-giver. However, role-taking can be manifested as an oppressive and solitary view in the public health care context, as organizational culture encompasses only a few supportive opportunities for the leaders. The strain can especially be escalated in large or geographically fragmented units if a leader endeavors to play a situation-sensitive role in the same way as in smaller and coterminous units.

A servicing view is a characteristic of a public health care field. Derived either from the organizational culture or the people gravitating to the public health care field, the demands regarding quality criteria for patient servicing are extremely high. The leaders have strongly adopted a servicing view, as they mainly have an employee background history in the hospital setting. Accordingly, in a leadership position, a servicing view's negative influences on employees' interactions are recognized, but the leaders are reluctant to reconsider the quality criteria demanded.

A balancing view is thoroughly investigated in the PL literature (e.g., Cameron, 2012). However, a certain ratio between positive and negative statements appears to be a rather superficial perspective to balancing feedback and interaction, as stances toward "positive" and "negative" feedback vary among employees. From a discursive perspective, the words themselves are not the priority but

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rather how and to whom they are expressed in various interaction contexts. According to this point of view, PL can be considered as a partially unequal concept, preferring the active or strongest followers over the non-active or weakest employees, concealing the potential of the latter.

A deciphering view supports the conclusions related to those of a balancing view. According to the data presented in this paper, the leaders in public health care are aware of many strategies and practical tools focused on what goes right and what is experienced as good (Lewis, 2011) as well as those for supporting followers' positive emotions (Kelloway *et al.,* 2013). Despite the notion that the strategies might have an affirmative influence on the work climate and performance, a deciphering view's real challenge lies within the courage and opportunities to express negative feelings transparently. According to this study, a key to the problem is associated with various settings for confidential dialogue.

Research implication

In summary, the views offer a novel perspective capturing the PL concept within the public health care field. For leaders, an integrative discourse perspective provides tools for comprehending PL as a process: how to identify, negotiate and reconcile various PL meanings. The perspective represents a flexible approach to various leadership situations. For scholars, the perspective demonstrates a multidimensional process approach in a desired organizational context as a counterbalance to one certain PL definition.

The results of this study suggest that a few approaches are in need of future research attention. More precise examination should be targeted to the leaders and what profession and unit they represent in an interaction situation. This identification of leaders would give more detailed and specific knowledge about the structure of interaction between leaders and how possible power struggles are present in interactions between different professions and units, further refining the integrative discursive perspective on positive leadership.

Epistemology, a mainstream of PL research represents a descriptive approach. An integrative discourse perspective, in turn, stresses a relativist view. The fundamental assumption is that no objective ground for PL exists, as the meanings of the term are socially constructed within a certain context. A relativist assumption appears to be justifiable as long as PL meanings are related to varying interaction situations. However, the results were also associated with structural views. From this perspective, the objectives referring to a reality beyond discourse, such as remuneration, quality and information systems, should be investigated concentrating on their effects (see Parker, 2002) as part of the PL concept. As an epistemological proposition, the structural views appear to be shifting the focus of PL to a critical realist position.

Within the field of organizational studies, the structural views connect the PL concept to managerial operations (Northouse, 2007), which we consider along with leadership to be a leader's job description. The structural views, though, appear to have been overlooked in the PL literature, as most of the research focuses on the flourishing interactions between leaders and subordinates (e.g.,

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Cameron *et al.,* 2011). Even though this study presents the complex nature of organizational issues (e.g., face-to-face interaction and feedback) in positive leadership, there also are more practical, structural issues involved. These issues (e.g., payroll systems) require more emphasis by leaders on management practice than on leadership practice. Addressing the level of complexity of different interaction situations would produce vital information about where leaders should focus their time and resources. Every interaction situation does not appear to require utilization of the discursive approach. However, more information about PL's structural views is needed. The connection between the two meanings of PL, as well as an epistemological stance, should also be addressed in future research.

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