INSTITUTIONALIZATION AS AN INTERPLAY BETWEEN ACTIONS, MEANINGS, AND ACTORS: THE CASE OF A RAPE CRISIS CENTER IN ISRAEL

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In this article, I present an analysis of institutionalization as an interplay between three interrelated yet separate components—actors, actions, and meanings. Drawing on ethnographic data of a rape crisis center in Israel, where the entry of therapeutically oriented members resulted in the infusion of new meanings into originally feminist practices, I examine the role of organization members as carriers of institutions and their (possible) agency in infusing actions with meanings through interpretation; how meanings connect actors with actions; and institutional meanings as political resources.

The most important vehicle of reality-maintenance is conversation. . . . Thus the subjective reality of something that is never talked about comes to be shaky. (Berger & Luckmann, 1967: 152–153)

In this study, I argue that institutionalization should be analyzed as a nonautomatic interplay between three interrelated yet separate components—actors, actions (practices and structures), and meanings. The case study that supports this argument can be summarized as follows: Actors committed to feminism founded an organization, whose structure and procedures and their meanings all reflected a feminist worldview. With time, professional, therapeutically oriented actors joined the organization, changing some practices and infusing other (originally feminist practices) with therapeutic meaning. On the basis of a detailed ethnographic description of this unique pattern of institutional change, I reconsider the role of organization members as institutional carriers, the de-

gree of actors' agency, and the way institutional meanings are used as political resources. The article opens with the theoretical argument. I then explain my choice of ethnographic methodology and move on to the case study itself. I conclude by discussing the theoretical and empirical merits of analyzing institutionalization as such an interplay.

THEORY AND BACKGROUND

Institutions in Organizational Studies: The Interpretative Aspects

Neoinstitutional theory in organization studies is based upon Berger and Luckmann's work on the social construction of reality (Scott, 1995; Tolbert & Zucker, 1996) in which they defined an institution as "a reciprocal typification of habitualized action by types of actors" (Berger & Luckmann, 1967: 54). "Habitualized action" is a set of "behaviors that have been developed empirically and adopted by an actor or set of actors in order to solve recurring problems. Such *behaviors* are habitualized to the degree that they are evoked with minimal decision-making effort *by actors* in response to particular stimuli" (Tolbert & Zucker, 1996: 180; emphasis added). "Reciprocal typification" is understood as "the development of *shared definitions or meanings* that are linked to these habitualized behaviors" (Tolbert & Zucker, 1996: 180, emphasis added). Accordingly, institutions are procedures, practices, and their accompanied shared meanings enacted and perceived by members of an organization. Institutions come about as a result of social interaction between actors, but they acquire a reality-like status, and their social origin is forgotten. This taken-for-grantedness of institutions is considered to be the essence of their power, in that it

eliminates the need for explicit social control and justification and makes the institutions easy to transmit to newcomers, since institutional actions are carried out "naturally" (Jepperson, 1991; Zucker, 1977, 1987). Once an institution has gained domination, structures and procedures are assumed to go hand in hand with their "obvious," uncontested meanings. Within an institutionalized reality, social actors perceive, enact, and further reinforce these habituated behaviors and their shared meanings. In other words, institutions are embodied in a dialectical interplay between three components: *actions* (practices and structures), *meanings,* and *actors.*

Theorists of institutions in the field of organizational studies have stressed the importance of meaning, symbols, and cognition in institutionalization (e.g., Scott, 1995), but it seems that empirical emphasis has been put mainly on the behavioral and structural aspects of institutions. Hence, although the "meaning-full," taken-for-granted character of institutions is obviously an important part of the explanatory power of the theory, it seems to have gone underanalyzed (Jepperson, 1991). The assumption that a change in meanings will always manifest itself in actions (Bartunek, 1984; Ranson, Hinings, & Greenwood, 1980), and the tendency to study institutions on the macro level (DiMaggio & Powell, 1991; Zucker, 1991) and as a property rather than as a process (Tolbert & Zucker, 1996: 175) may partially account for this neglect. Whatever the explanation, empirical studies of institutionalization usually measure institutional change through change in actions alone. Changes in meanings and the demography of actors are less well documented.

For example, in his classical study of professionalization, Abbott (1988, 1991) measured the development of professional jurisdiction using various criteria like the rise of professional associations, licensing regulations, and the founding of professional schools, journals, and organized structures for professional work. Edelman (1992) measured the institutionalization of compliance to the equal employment opportunity and affirmative action (EEO/AA) law in U.S. firms as expressed in the adoption of EEO/AA offices and internal EEO/AA rules. Many other examples are available in which institutional change was measured in actions (structures and practices) with no reference to their meaning for the people who enacted them (Edelman, 1990; Holm, 1995; Sutton, Dobbin, Meyer, & Scott, 1994; also, see Strang and Soule's [1998] review of diffusion research).

Some studies have dealt with actions and meanings and showed how both account for institutional change. Hirsch (1986), for example, showed how the institutionalization of hostile takeovers was influenced by the cultural framing of the phenomenon. Kelly and Dobbin (1998) analyzed the institutionalization of antidiscrimination law, showing how the adoption of practices (like the establishment of offices and rules) was facilitated by change in meaning systems, as reflected in arguments published in professional journals (see also Edelman, Uggen, & Erlanger, 1999; Garud & Rappa, 1994; Haveman & Rao, 1997; Hoffman, 1999).[1] But these studies have not explored the role of actors as interpreters of actions and the way meanings connect actions to actors.

A small number of studies have measured (or attempted to explain) institutionalization by referring to changes in actions, meanings, and actors. Fligstein's work (1990) is a good and a rare example. He analyzed the history of U.S. industry from 1880 to 1980 as the outcome of many forces, including actors (managers and key actors in the government), meanings (concepts of the large firm and the way it should be controlled), and actions (practices like "cartelization," mergers, advertising, diversification, and structural arrangements). Still, Fligstein explored macro processes and did not explicate the theoretical implications of such an interplay between actions, meanings, and actors. I concentrate here, in contrast, on the micro level and, specifically, on the role of meanings and of actors in this interplay. On the one hand, meanings link (passive) actors to actions. Meanings are what attracts actors to action. In such cases, meaning govern actors and action. On the other hand, actors might become active in choosing and infusing actions with meanings through interpretive acts, which are part of political processes. In such cases, actors govern meanings. Hence, I will show that actors are carriers of institutional meanings, that their interpretations can be considered as expressions of agency, and that the politics of institutionalization involves not only actions, but meanings as well.

Actors, Actions, and Meanings

The pattern of change reported here—initiated by change in members' orientation, resulting in

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[1] Transformations of rationales given to the same practices over time (as part of actors' efforts to gain legitimacy) were documented also by Dobbin, Sutton, Meyer, and Scott (1993). Still, these retheorizations of old practices were not explored in the context of their broad implications for institutional theory as I try to develop it here.

changes in actions and/or meanings—will be used for reconsidering the role of organization members as institutional carriers, the degree of actors' agency, and the way institutional meanings are used as political resources. I join current discussions on questions of agency and politics in institutional processes, adding the emphasis on the role of meanings and of organizational members as interpreters of these very meanings.

Carriers of institutional meaning. Institutions are assumed to be carried by social structures, routines, and cultures (Scott, 1995: 52–55). Social structures are constructed by people, routines are enacted by people, and cultures are interpreted by people. Nonetheless, in portraying institutions as human creations turned into naturelike givens, scholars seem to have neglected the role of social actors in the maintenance of institutions (Karnøe, 1997). This neglect is especially apparent in relation to the role of culture as an institutional carrier. Culture—that is, symbols, meanings, and rules—do not exist in any abstract, consensual form. Rather, "*human agents* . . . are creating and applying these symbols, interpreting these meanings, and formulating, conforming to, disobeying, and modifying these rules" (Scott, 1994: 60; emphasis added). True, once meanings are socialized, members will understand them as the shared and unproblematic referential aspects of institutionalized practices and structures, their "legitimations," to use Berger and Luckmann's term. Still, actors are those who carry these meanings and, hence, changes in actors may result in changes in meanings as well.

Acts of interpretation as agency. The emphasis on the taken-for-granted nature of institutions can be understood to imply that individuals are passive carriers of institutional meanings. Indeed, meanings connect actors to action. But are actors always passive vessels of shared meanings imposed by organizational context (structures and practices)? Organizational structure and practice do not carry institutional meanings in themselves and by themselves. As Friedland and Alford argued, "There is no one-to-one relationship between an institution and the meaning carried by the practices associated with it" (1991: 255). Rather, their immediate meaning—though coming from sociocultural collectivities and not "created" or "invented" individually—are "given" to them or "perceived" in them by *actors* (and observers). Institutional meanings reside, not solely in structures and actions per se, nor in the heads of people, but in the interplay between them: in the ways structures and practices are perceived and understood, both consciously and unconsciously, by the members and the subgroups of organizations. Since actors can become active in

infusing actions with meanings, institutionalized meanings should be analyzed not only as qualities of actions and structures, but also as the cognitive process of interpreting actions and structures—as shared and, as I will exemplify, contested (not necessarily publicly) cognitive models (Strauss & Quinn, 1997).

In this context, individuals' interpretations can be seen as part of institutional agency—the social actions that create, reproduce, and change institutions (Karnøe, 1997). The concept of institutional agency was introduced into institutional theory in response to criticism of its neglect to account for development and change, but in fact agency has remained a narrowly defined concept: It usually refers to the introduction of, or resistance to, new structures or practices and is attributed either to an organization as a whole (Goodstein, 1994; Oliver, 1991), or to individuals who occupy central roles in an organization (Brint & Karabel, 1991; Zucker & Darby, 1997) or in an organizational field ("institutional entrepreneurs"; DiMaggio, 1988). Hence, meaning is excluded from the discussion, together with the role of nonmanagerial members of an organization. In contrast, I argue that scholars should extend their discussion of institutional agency. Fligstein, for example, pointed to the importance of *meaning* for institutional entrepreneurs, as they may "motivate cooperation of other actors by providing them with common meanings and identities" (1997: 397). Edelman, Abraham, and Erlanger (1992) showed how the interpretation given to an ambiguous law by legal professional communities determined its institutionalization within organizations. In addition, theories of "sensemaking" (Weick, 1995) teach that *all* members of any organization are involved in the creation of common meanings and identities, as they are constantly engaged in efforts to make sense out of the world around them. Hence, interpretations should be part of any discussion of agency, and it should be further broadened to potentially include all the members of an organization, as individuals may be or may become active participants in the process of interpreting institutions—refining, sustaining, or rejecting institutional meanings.

Meaning and politics. That institutionalization is a political process—imbued with power and individual interests—is now widely accepted (DiMaggio, 1988; DiMaggio & Powell, 1991; Friedland & Alford, 1991). I would like to emphasize meaning and interpretation as parts of the medium through which institutional power struggles and relations take place.

Interpretation is usually viewed in institutional studies as an automatic process, in which individ-

uals use and relate to institutionalized scripts and accounts. Still, these institutional worldviews were made available by means of political processes. Other worldviews had to be delegitimized or even hidden through interactions between people who negotiated their understandings. Those who hold power (managers or dominant subgroups), for example, try to turn their understanding (one of many possible understandings) into "truth," thus dictating institutional meaning by offering one official account of institutional structures and practices. Hence, the politics of socialization is part of the politics of institutionalization.[2] Moreover, in times of change or challenge to the accepted worldview, sense making and interpretation are parts of processes of influence and politics (Gioia, Thomas, Clark, & Chittipeddi, 1994). I will show that subgroups within an organization may negotiate not only about which structures and practices will be institutionalized and socialized, but also about how they will be understood and interpreted. Finally, interpretation (attribution of meanings to structures and practices) is not only a medium in which political struggles take place, but also a process with political outcomes. Hegemonic interpretations may influence power relations within an organization, the services the organization provides to its clients, and its impact on and relations with the environment.

In sum, in this study I explored institutionalization as an interplay between actors, actions, and meanings. In the remainder of this article, I describe the institutionalization of a feminist ideology in a rape crisis center in Israel, the introduction of a competing institution—the therapeutic profession—and the negotiations between them. I will show how the two institutions were carried by different members and how they competed over actions and meanings. Through my description and analysis of this institutional change, the potential role of interpretation as agency and as a central aspect of micropolitics in organizations will become evident. Overall, I attempt to establish that to fully understand the complex and delicate process of institutionalization, analysts must consider actions together with meanings and acts of interpretation by organization members.

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[2] Socialization processes (of both action *and* meaning) were indeed granted a central role in Berger and Luckmann's original model (1997: 61–62) but apparently have not received much attention within the neoinstitutional school in organization studies.

METHODS

Neoinstitutionalism and Organizational Ethnography

Neoinstitutionalism goes hand-in-hand with organizational ethnography as a broad research paradigm. From an epistemological point of view, qualitative methods and neoinstitutionalism in organization studies have much in common, as they both adhere to a constructionist and a cognitivist perspective (Scott, 1995: xv). In both the qualitative and the neoinstitutional frames, organizations and their environments are perceived as intersubjective, interdependent, and cultural phenomena. Against the seemingly objective, rational, and physical reality of organizational life, the metaphor of organizations as cultures (Morgan, 1986; Smircich, 1983) has shifted attention to interpretive processes of reality construction by organizations' members (Berger & Luckmann, 1967; Garfinkel, 1967; Weick, 1979), thus emphasizing members' intersubjective experiences and the symbolic and ideational aspects of organizations. According to this view, culture is not something an organization has, but what it is all about. Applying the cultural metaphor does not necessarily imply homogeneity within organizations. As in societies and communities, at any given time, there are generally accepted and taken-for-granted cultural meanings; other meanings on which members differ or disagree (forming subcultures), and still some other aspects that are in a blurred, unclear, or ambiguous state (Martin & Frost, 1996).

Of the qualitative methods used in organizational research (Lee, 1999), ethnography—close, detailed, and intensive observation of, participation in, and writing about organization life—is especially suitable to my emphasis on meanings and interpreters, as it can be aimed at uncovering not only overt behavioral patterns, but also the subjective experiences of organizational reality and the ongoing negotiations between members and subgroups over the interpretations and understandings of this reality (Bate, 1997; Czarniawska-Joerges, 1992; Schwartzman, 1993; Yin, 1989).

Research Site and Sociocultural Context

Established in 1978 by feminist women, the Orot (a pseudonym) Rape Crisis Center ("the center," as it is called by its members), the first of its kind and the largest in Israel, was founded as a nonprofit, nongovernmental, grassroots, and volunteer organization. Its annual budget in 1996 (the second year of my study), was equivalent to $150,000 U.S.; 25 percent of this budget came from governmental

sources, the rest from private donations and public funds. In that year, it was serving more than 1,500 victims of sexual assaults, primarily through a 24-hour hot line (the line received 2,200 phone calls in 1996, representing about 5 new victims a day) and through individual and group support meetings (more than 600 individual meetings with victims were conducted in 1996, and six support groups). Victims were also offered escort to medical exams, police interrogations, and legal proceedings. In addition, the center lobbied for legislation change and offered educational programs (the estimated audience—students, soldiers, and professionals—was 10,000). Most of the center's activity was accomplished by volunteers (of about 150 registered volunteers in 1996, 80 percent were women and 30 percent were active) who worked in the center part-time, usually working one weekly shift of three hours. Membership was conditioned upon participation in an 18-week-long training course, and since turnover was high, four to six courses (of 15 participants each) were given every year. Recruitment was carried out mainly through networking and a small-scale outreach effort.

My decision to study Orot stemmed from my original research question, which dealt with the problems involved in the implementation of a social movement ideology in organizational daily life. It turned out that important features of the organization—its place outside the formal and legal influence of the state and the professions, the high member turnover, and demographic change in the volunteer body—made it an interesting case for the study of institutional change.

Two characteristics of Israeli society—the status of women and feminism and of the therapeutic professions—are most relevant to my discussion. Like other heterogeneous Western societies, Israel contains conflicting tendencies regarding the status of women and of feminism. On the one hand, Israeli law protects women's equality and supports their involvement in public life (Radai, 1983). On the other, religious beliefs and social structures, the importance of the family as a social unit and the importance of motherhood, the experiences of men and women in the military, and the status of the military as a powerful patriarchal institution in Israeli society all reinforce traditional roles and marginalization of women (Izraeli, 1997; Levy-Schreiber & Ben-Ari, 2000; Radai, 1991; Safir, 1991). Although the feminist movement in Israel was officially established more than 20 years ago, it is still fighting to become an influential social and political force. Some feminist issues, such as violence against women, win much attention in Israeli public discourse, yet feminist ideology is not part

and parcel of Israeli political awareness. Central feminist notions (like "patriarchal order" and "domination") are absent from, or rarely heard in, public discourse, and individual-oriented explanations of women's inequality are more common than social and political ones (Izraeli & Tabory, 1988). Many women tend to avoid identifying themselves as feminist (Friedman, 1999). In spite of some positive changes, for the most part Israeli society is still an unfriendly environment for feminist activism (Rapoport & El-Or, 1997), as it was in the late '70s, when the center was established.

In Israeli society, as in other Western countries, therapy has become a cultural phenomenon (Bellah, Madsen, Sullivan, Swidler, & Tipton, 1985). Though therapeutic notions are especially salient in certain professional circles, they are deeply rooted in modern Western thought and have acquired the status of a "folk model" (Quinn & Holland, 1987), regulating daily processes of understanding, evaluation, and behavior. A therapeutic worldview is characterized by a focus on individuals rather than on wider sociocultural systems (relationships between individuals and their "significant others" are important mainly to achieve better understanding of the individual); emphasis on inner processes, like thoughts, emotions, and motivations; and the assumption that self-reflection, awareness, and a "talking cure" are preconditions for psychological change and well-being. Therapeutic practices in Israel are professionalized—that is, anchored in a body of abstract knowledge, formal and informal structures, and organizations with official power delegated by the state to regulate training, certification, and practice of therapeutic services (Abbott, 1988). As a feminist, grassroots, nonprofit organization, Orot was established with no affiliation with any helping profession, and it managed to escape any formal and legal accountability to state agencies responsible for the therapeutic professions.[3] Nevertheless, the center and its members—professionals and laypeople alike—were exposed to the therapeutic worldview. As education and professionalism are highly respected in Israeli society (as is evident, for example, in occupational prestige ranks [Kraus, 1977; Kraus & Hartman, 1994]), the center operates in a environment in which a therapeutic worldview is well-established.

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[3] As a nonprofit organization, it is required to report annually to the state. This report deals mainly with fiscal issues.

Data Sources

My field work in the center lasted 19 months in 1995–96. Members were aware of the purpose of my presence and cooperated generously. I collected data from three main sources:

Participant observation. I spent at least two days per week in the center, observing board and staff meetings, volunteer gatherings, and weekend get-togethers. I also participated in the training course and served as a volunteer, answering calls and meeting with victims of sexual assaults. In addition to keeping a detailed field diary, I recorded meetings and daily discussions, which were later transcribed. For ethical reasons, I did not observe support sessions held by phone or in person. I used indirect sources—mainly volunteers' stories and the activity log—to learn about this aspect of the organization's life.

Interviews. I interviewed 36 members who were theoretically sampled (Strauss & Corbin, 1990) to represent the various social categories and subgroups in the center—men and women, staff and volunteers, feminists and nonfeminists, senior members and newcomers. The semistructured interviews lasted 30–120 minutes and had three foci: the center's history, its feminist identity, and the feminist identity of the interviewee. Most interviews were held during volunteers' shifts (on duty). Although frequent interruptions disturbed the interviews (whenever a call came in, I had to stop the tape), it turned out that volunteers' comments in this context taught me a great deal about how they understood support practices. To learn the center's background, I asked for the organization's "life story". The interviewees' stories revealed, apart from basic "facts," members' (partly unconscious) perceptions of the center, its actions, and their involvement in it.

Administrative texts. I got permission to read all written material, and so I gathered literally all the memos, minutes, and other texts, including a support guidebook, training course abstracts and notes, the activity log, and public relations booklets, produced or in use during the study period. I also consulted archival materials in the center's library.

Analysis and Interpretation

The detailed observation of organizational practices, discourse, and dynamics set the basis for my depiction of institutional structures and procedures. Searching for institutional meanings, I looked for "common social accounts" of the existence and purpose of institutionalized structures and practices (Jepperson, 1991: 147). I asked interviewees to account for structures and practices and looked for spontaneous references of actors in relation to what they were doing and the meaning of their actions. I also followed how the structures and practices of the organization were explained to newcomers. Thus, I relied both on my "thick" descriptions (Geertz, 1973) and observations *and* on members' accounts and diverse collective memory.

In line with grounded theory research (Glaser & Strauss, 1967; Miles & Huberman, 1994), I identified recurring categories through a cyclic reading and rereading of the material (transcripts of meetings and interviews, administrative texts, field notes). My reading was inspired by a variety of interpretive and analytical tools: narrative analysis (Lieblich, Tuval-Mashiach, & Zilber, 1998), discourse and conversation analysis (Boden, 1994), and script analysis (Barley, 1986). The variety of the collected data and interpretive tools enabled me to "triangulate" my sources and examine how they related to each other (Denzin, 1978). I focused on two basic questions: (1) What meaning systems governed and were embodied in the center's structures and practices—that is, what principles explained the actions I observed? and (2) How do members understand their own and others' behavior and the center's practices and structures? In line with my theoretical interest, focusing on both concrete and ideational aspects of institutionalization as understood, interpreted, and enacted by social actors enabled me to explore the interplay between them.

A NARRATIVE OF INSTITUTIONAL MAINTENANCE AND CHANGE

Orot Rape Crisis Center is an organization with no documented history. Since its foundation in 1978, it has changed its location four times. At the time of my study, most volunteers had been members less than two years, and only two were among its founders. From the stories I heard, it seemed that staff turnover was high as well. In the small library, I found very few official documents (minutes, public relations brochures, and newsletters, which had been published irregularly through the years), and most of them were from the past two years.[4] The high rate of volunteer and staff turnover, the urgent nature of the work, and the constant lack of (wo)manpower may partially account

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[4] The activity log in which all calls were documented is an exception. Much emphasis was put on the need to document the calls, and the logs were kept in a special bookcase.

for the organization's inattention to documenting its history.[5] I have constructed the history of the center according to the data I gathered, basing it especially on members' stories. Combining their partial narratives is somewhat misleading, since I may have assigned much more clarity to the causes of events and to the intentions of organizational actors than they probably had at the time that changes unfolded (see March & Olsen, 1986). Furthermore, the stories provide a good idea of the process of change and of the past and present interplay of actors, actions, and meanings, but they lack a clear time table and demographic data.

As institutionalization is continuous (Tolbert & Zucker, 1996), both processes of institutionalization were still unfolding at the time of my research, and I could observe their enactment in practice and meaning. Using members' accounts, I tried to track their evolution. To sum up the narrative: The early years (roughly from 1978 to 1982) were marked by feminist institutionalization. With time, a new institution—the therapeutic profession—emerged (1982 onward). The emergence of the therapeutic institution caused some "deinstitutionalization" (Oliver, 1992) of feminism, but not its complete replacement. Hence, at the time of my fieldwork, the two institutions coexisted, or better still, competed with one another. In some major organizational aspects, the feminist institution maintained its effect. Other aspects reflected the therapeutic institution, and some formerly feminist practices were deinstitutionalized. Most strikingly, some practices remained intact (that is, corresponded to the ways the original feminist founders had constructed them); their meaning, however (for some members, the nonfeminists), had profoundly changed.[6]

I will present the center's history in a dynamic frame, as a competition between two institutional forces that controlled different aspects of the organization: The institutionalization of feminism, which started with the foundation of the center and was still apparent, in some organizational aspects, during my fieldwork, is the focus of the first sub-

section that follows; the institution of a therapeutic worldview, which entered the center approximately four years after its foundation and was still apparent, in other organizational aspects, during my study, is the focus of the second subsection. The competition between these two institutions over the same practices, as reflected in changes in meaning for some members, is the focus of the third subsection. The consequences of this competition—the deinstitutionalization of feminism—are described in the fourth subsection.

The Feminist Institutionalization

The women who founded Orot in 1978 were all affiliated with the feminist movement. Although Israeli society was unsupportive of feminist ideology, they saw themselves as part of a Euro-American feminist community and downplayed their dependence on, and belonging to, the Israeli local geopolitical and sociocultural environment. As one of them reflected:

> We knew about the existence of feminist rape crisis centers abroad, and through our connections with feminist groups [there] we received written guides as to how to establish and operate such a center. The rape crisis centers in Liverpool, England, and San Jose in California were especially helpful, spiritually and morally. The material we got helped us to design the first [training]. . . . We got no help from any Israeli organization, not even from the large women organizations, because we were feminists, and because of the subject matter [rape]. (Senior female volunteer, reflecting on the early days in a newsletter celebrating 21 years of center history, published after my fieldwork ended)

The "founding mothers" saw the establishment of the center, and its activities, as part of a feminist struggle to change society and end prejudice against women. In an intentional, self-conscious effort, they strove to establish a rape crisis center that would reflect their feminist ideology. The feminist orientation of the center was the basis for, and was reflected in, a particular understanding of the phenomenon of rape, the center's goals, principles of support activity, structure and managerial procedures, and the regulation of relationships.

As feminists,[7] the founders believed that women are discriminated against because of their gender.

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[5] One might argue that these very characteristics would make such an effort worthwhile.

[6] It would have been interesting to analyze the feminist and the therapeutic institutionalizations in the center as they corresponded to, and interacted with, the historical developments of feminism and therapeutic professionalism in Israel (in general, and as perceived and understood by the organization's members). As the histories of feminism and of therapeutic professionalism in Israel are yet to be written, this project was beyond the scope of the current study.

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[7] The use of the term "feminist" is misleading, as there are diverse voices of feminist ideology, theory, and social action, offering different views of discrimination against women and its consequences and diverse strategies for change (Whelehan, 1995).

They viewed sexual assaults in social and political terms—as the outcome of (the almost universal) inequality of women. They believed that men attack women because women are perceived as weak, inferior objects to be exploited and humiliated and that sexual harassment and rape are expressions of power and dominance, not of individuals' (men's) passion and aggression (Stock, 1991). This understanding of sexual assault is reflected in the following extracts:

> We believe that sexual assault is not some mishap, but rather a symptom of a social system. . . . not a deviation . . . but a social phenomenon . . . the most extreme expression of domination and oppression. . . . [This belief] stems from feminist worldviews. (Senior male volunteer and board member, interview)

> We help women . . . who are not different from ourselves. Women who suffered sexual assault are not different from ourselves. It [sexual assault] doesn't happen "there," it happens among us, and reflects women's fate in our society. (Veteran female staff member, interview)

The center aimed at the "prevention of wounds, instead of covering them with a bandage" (as a few of my interviewees stated). Although support activity was considered very important, the founders believed that rape, as a social phenomenon, could not be eliminated through individual support to individual victims.

> The center couldn't have been only, and today also cannot only be, satisfied with individual support to each victim, but must . . . also act against a more general background, and more, uh, to turn outward and change society, and change the . . . status of women in society and how . . . all these things influence the whole phenomenon [of rape]. (Senior female volunteer and board member, interview)

> Educational activity is very important. Giving support to victims is important, but it will never solve the problem. (Female volunteer, interview)

Hence, according to a center brochure,[8] the center was also engaged in educational activity "aiming at changing common perceptions regarding rape and its prevention" and in "lobbying for policy and procedural changes within the police, and the judicial, health and education systems."

Support practices were informed by feminist understandings of rape and feminist worldviews in general. They were offered by volunteers who were not necessarily trained in helping professions.

> We didn't accept the . . . social axiom that only professionals can treat [rape victims]. We set up this place not as a health care center run by professionals, but [as] support of women to women. (Senior female volunteer and board member)

> [We believe that] it has to be women who offer support, that support to rape victims cannot be given by professionals working for the state or [representatives of] the male-dominated society. (Male volunteer, interview)

> We come to help as equals. We don't come [from a professional perspective] with the authority of [expert] knowledge. We offer our help. I offer you my hand and I want to walk with you some distance, until you will be able to accept another hand, or feel strong enough to keep going by yourself. (Senior male volunteer and board member)

It was assumed that women's experiences in a patriarchal world, together with their feeling of "sisterhood," provided volunteers with basic skills for helping victims. Additional information and techniques, so it was believed, could be easily taught. Ideologically, the reliance on volunteers stemmed from a critique of professionals' tendency to medicalize and pathologize rape victims. Feminists argued, in contrast, that the victim of such a trauma would go through a perfectly normal reaction to an abnormal event—not a psychological rupture that entailed professional treatment. Support practices derived from these assumptions. Here is a short extract from an 80-page guidebook, called the blue notebook, written by veteran volunteers and first published in 1991, documenting and explaining support practices:

Support goals:

1. To restore victim's feelings of self control after the experience of a violent crime.
2. To support the victim and accompany her, practically and spiritually, through the process of overcoming the crisis.
3. To strengthen her belief in her own powers and capability to handle the crisis, by focusing on her strengths and good decisions.
4. To help her find support in her social environment.

Basic assumption underlying support:

1. Any woman who defines herself as a victim of sexual assault, and asks for our help, will be helped according to her own definition.
2. The victim is not responsible for the attack. There are no personal or behavioral factors that turned her into "a victim."

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[8] This brochure, like most other Orot documents, was not dated. I was told it had not changed since the early days. In light of my observations, it probably reflects the center's reality in those days better than its situation during my fieldwork, as will be apparent later.

3. It is reasonable to assume that before her attack she was functioning normally (if you feel this was not the case, you should think on further help). Thus, one should focus on changes and reactions initiated by the rape. We deal with crisis intervention, not with psychotherapy.
4. The victim did the best she could to prevent the attack.
5. Any sexual attack is harmful to the victim, but given the appropriate support, she can fully recover.
6. Only the victim has the right to define her needs and goals.
7. Each victim is a different woman, each case is unique.

The feminist founders tried to avoid power relations between a victim and a care provider (the volunteer), which might reproduce the relationship between her and the aggressor. Furthermore, as feminists view rape as a reflection of the social order (gender inequality), no victim was ever to be blamed for what had happened to her (individually so). Volunteers were taught to give the victim an opportunity to relate a realistic account of the rape, without the direct or indirect burden of guilt that is often attributed to rape victims by society. They were supposed to believe the victim's story and refrain from any implicit or explicit value judgments. Empowerment was the main goal of support. A rape victim had been denied, claimed the feminist founders, her right to say no; someone had taken command over her body, and she needed to reclaim her self-control. A caregiver might provide information and emotional support, but the victim was to make all decisions. Any resolution (including, for example, not filing charges), should be accepted with respect.

The structure and management procedures in the center conformed to feminist and collectivist ideals—minimizing inequality and power relations (Rothschild & Whitt, 1988). The center was run as a democracy of representatives. The board of directors, which was elected once a year from among the volunteers, was responsible for policy decisions and overseeing the daily management carried out by the paid staff. All volunteers were entitled to elect and be elected to the board, regardless of their tenure in the center. There was no formal hierarchy, and no status-based division of labor (for instance, no managerial or administrative roles). To avoid power relations, staff members were all paid the same salary, regardless of their experience, education, tenure, or specific responsibilities. Decisions in board, staff, and collective gatherings were reached by consensus. Every opinion had to be heard and considered. Except for support work, which was regulated by formal rules (and, over the years, became supervised to some extent), activities were carried out quite informally.

In their stories about the center's early years, veteran staff members and volunteers highlighted the atmosphere of friendship and warmth. The importance of friendly, positive, and equal relations among volunteers, staff, and board members, and between these groups, was perceived as part of the feminist struggle against domination. The center aimed at being a "women's space," where not only the victims of sexual assault, but the volunteers as well, would feel empathy and acceptance. As recruitment was based on social networks—that is, spreading the word in closed circles of feminist supporters (at demonstrations, rallies, and other political activities)—members felt affinity with each other. Many were friends, both in their daily life and in the general feminist sense of "sisterhood." As a senior female volunteer said, reflecting on the feminist characteristics of the center:

> Organization and order are important, but sometimes it is going too far, and we don't want to cross over a certain limit. We want to have a feeling of a family, a feeling of empathy, a feeling of cooperation, not a feeling of hierarchy. We don't want to build the center like a tower, or a pyramid. (Senior female volunteer, interview)

Most of these structures and procedures, which were introduced by feminist volunteers and staff, were evident at the time of my study, some 20 years after the center's establishment. Their persistence was the outcome of the efforts of a rather small group of feminist volunteers situated in key positions in the organization (board members, training course instructors). Most volunteers, in contrast, although actively engaged in the enactment of feminist institutional practices (for example, support practices), were ignorant regarding their feminist origins and rationales. Furthermore, some senior staff and board members, who put much effort into keeping alive these procedures and practices, were not aware at times of the rationale of what they had been doing. Here is how Amy, a staff member, responded to the question of a volunteer, a newcomer, who wondered about the origin of the "rotation" (Hebrew: *sevev*), the common practice of speakers taking turns in social gatherings:

> It was like that long before I joined the center . . . we consider it to be a feminist matter. I don't know, maybe they have rotations in other organizations as well, [though] I didn't see [that]. . . . But, we have here a few practices, procedures, which are built into the training course, and then we keep them on, like how speakers take turns, which we call "feminist." Now, what is feminist about that? Who gets to

decide whether it is feminist or not? . . . Someone, at the beginning, there were [feminist] women here, and they decided how we would do certain things. . . . [These procedures] take care of us. I think [that they] guard us, without our knowing. . . . Some of us don't know where it came from, or what is its meaning, or whether it is feminist . . . this is very interesting.

The rotation procedure was used, historically, by feminists to avoid domination and promote an open, respectful dialogue. Amy had been affiliated with the center for ten years, first as a volunteer, later as a staff member. She knew that the rotation was considered to be a feminist practice, but did not know why. Still, she respected and defended it. A similar pattern of ignorance is echoed in the words of a senior volunteer and board member, who reflected on the practice of reaching decisions by consensus:

> I have been told that decision by consensus is a feminist practice. I don't know if this is true . . . I really don't know whether the feminist movement decided that since women naturally work this way, that they will make it obligatory, I don't know. But this is what is being said, that this [decision by consensus] is feminist. (Senior female volunteer and board member, interview)

Reaching decisions by consensus is a practice intended to avoid domination and power relations. It was embraced by feminist groups to enable the expression of all voices, hegemonic and popular, marginal and unpopular alike, and to ensure that decisions would reflect all attitudes and perspectives within the group. A similar ignorance of the feminist origins of the center, and of feminist rationales for goals, structures, and support practices, was evident in many interviews I held with volunteers. When I asked about the center's history, many gave just a short and shallow story. My questions regarding the feminist characteristics of the organization were followed by an embarrassed silence. It may be argued that the institutionalization of a feminist ideology in the center was so successful, that for many members it became taken-for-granted. It was so "natural" that they were unaware of its ideological rationale. I argue, in contrast, that members' inability to account for feminist practices was the outcome of institutional change—a partial deinstitutionalization of feminism and the introduction and spread of a competing institution, the therapeutic profession.[9]

The Therapeutic Institutionalization

As time went by, members had become more aware of the immediate Israeli environment, its negative or ambivalent stand toward feminism ("the 'F' word," "a word with a mustache," "a rotten word," as some volunteers put it), and the negative consequences of their public and political identification as feminists. Moreover, members came to think that if they wanted to make a difference, they could not rely solely on self-resources and faraway support. Positive local public opinion and aid were considered crucial. Four years after its establishment, the center acquired the legal status of a nonprofit organization, a step that entailed a formal (legal) division from the feminist movement.

> We did start the center as a feminist project, and in 1982 we saw that we would get much more money if we weren't a project of the feminist movement, that if we were to become autonomous we could grow. [Alternatively], if we were to stay a project of the feminist movement, we were to become "those feminists" [imitates a dismissive tone], so we decided to separate, at least officially. (Veteran female staff member, interview)

As the center gained more attention and recognition (probably combined with a slow change in social awareness regarding sexual assault in Israel), a growing number of sexual assault victims sought its support. Members felt obligated to meet this growing need for their services. Faced with a shortage of volunteers, the requirements of a feminist commitment seemed too limiting. The center opened its doors to nonfeminist members.[10] And, in order not to discourage prospective and new volunteers, the organization's feminist orientation was downplayed.

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[9] To say that institutions are taken-for-granted is not to assume that institutional practices and meanings are "unknown"; rather, one assumes that they are habituated and not contested. Most of the time, people do not consciously deliberate about what to do, nor do they explicitly articulate the rationales of shared, generally accepted practices and structures. Nevertheless, in an institutionalized context, they are presumed to have a ready-made account for their behaviors if asked about them (Jepperson, 1991). Hence, volunteers' ignorance of feminist rationale does not fall under our understanding of the taken-for-granted nature of institutions. Indeed, as will be apparent shortly, this ignorance seems to have weakened the feminist institution.

[10] The very framing of the problem and its potential solutions is not neutral, but rather part of the social construction of reality. For example, with a volunteer turnover rate of 50 percent, trying to enlarge the body of volunteers by reducing dropouts through feminist consciousness raising was another possibility.

In my first training course as co-instructor, we were both new on the job, and I remember a meeting we had with Maya [staff member in charge of training], who was supposed to supervise us. . . . Her approach was that we may speak about the idealistic aspirations of the center, but not overdo this, that the training course is actually based upon feminist notions, but these should only enter through the back door. (Senior female volunteer and training course instructor, interview)

There was a feeling, and I think there still is, that feminism is important, but in order to achieve things in the world, we need at times to put it aside. (Same interviewee, reflecting on the status of feminism in a volunteer meeting aimed at discussing the early findings of my research)

Consequently, a novel type of volunteer was attracted to the center—students and novice practitioners of therapeutic professions, especially psychology and social work, who were seeking a supportive context in which to practice their newly acquired professional skills. No relevant information—such as volunteers' background characteristics—was kept in the center, and hence I cannot give a numerical estimation of this demographic change. Nevertheless, it was a recurrent theme in stories of veteran volunteers I interviewed. As one female volunteer put it, "Long ago there were feminists who had a center. Today there is a center with some feminist volunteers." Another female volunteer, a newcomer, confessed in a volunteer meeting that she overheard veteran volunteers saying that "these days all the volunteers either study law or psychology [laughter]. They all come here for their thesis and Ph.Ds."[11]

The new professional volunteers introduced psychotherapeutic jargon, such as "open/close group," "cocounseling," "resistance," and "intervention." On the basis of their experience in therapeutic organizations, they felt a need for professionally focused guidance, which resulted in periodic "supervision" sessions led by a psychologist and a social worker (a staff member and a volunteer, respectively). They were enthusiastic about counseling psychodynamic support groups for victims, and they tended to lengthen and deepen support relationships, working from psychotherapeutic models instead of from the feminist model of short and limited support. The issue of therapeutic professionalism was discussed in a volunteers' meeting at which I presented early findings of my research. A senior female volunteer, who had just joined the staff, made this remark:

I see many people [volunteers] whose support turns into therapy, and I believe this is not what we should offer . . . as women who set out to help other women, we should relate [to victims] from this position, not as therapists . . . some volunteers are carried away. They turn into therapists, and meet with victims time and again.

Therapeutically oriented volunteers who became involved in educational activity tended to highlight the center's professional work. They wanted it to be recognized as a "professional" helping organization, whose staff members were "experts" in rape-related issues, specialists who could teach their expertise to others. Hence, for example, when a conference on sexual assault was underway, two volunteers—both psychologists—joined the staff in preparing the event. The conference program emphasized the professional titles of the speakers. Three were also volunteers at the center, but this fact was not mentioned. One of them, a male volunteer, who gave a talk entitled "The Male Aggressor, The Male Victim, and Homosexuality," was presented as "a psychotherapist, family and couple therapy." Another male volunteer, who led a workshop called "Psychodrama in the Treatment of Sexual Assault Victims," was presented as "MA, Manager, Institute for Psychodrama and Group Therapy." The experience of the speakers as volunteers was not considered relevant. Only one of the eight presentations explicitly discussed feminist support practices. Otherwise, the same conference could have been organized by professional therapists. The unique feminist orientation of the center was not visible, and the significance of the fact that support was carried out by nonprofessionals—as emphasized in feminist thought—was brushed aside.

On another occasion, the board decided that when dealing with professionals, the center would be represented by its own professionals. The underlying hierarchical worldview was expressed in this short remark, made by a senior female volunteer: "You can't send a student to teach a professor."

Hiring practices had been changing as well. In the early years staff was hired mainly from among the volunteers, who were primarily chosen for jobs for their ideological commitment. One staff member, a veteran volunteer and a social worker by

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[11] During my fieldwork, I observed what might turn out to be the beginning of a new institution in the center. Interestingly, a group of volunteers from the legal profession started to extend the scope of legal consultation given to victims. In addition to providing the information on and moral support during legal procedures given by all volunteers, these law professionals made themselves available to meet with victims to discuss the legal considerations of their "cases."

training, told me that she was hired "despite [her] professional training," certainly not thanks to it. Another, a former volunteer who was hired as an administrative coordinator with no experience in working in—let alone coordinating—such a complex (albeit small) organization, said:

> Why did they choose me? I don't know who the other candidates were . . . [but I assume] that part of their reason was . . . that I am an insider, I understand it, I don't need explanations, and there is a good chance that I will act according to the center's ideology. . . . It seems that this was more important for the board than hiring someone with [professional] experience. . . . At that period in the center's life [it was important that there be] a unified staff, who will build the center with ideology and vision. (Female staff member, interview)

With institutionalization of the therapeutic, professional training and experience gained more value than prior voluntary involvement in the center. During my fieldwork, I observed deliberations over the recruitment of two staff members. In both cases, the professional training and experience of the applicants were explored and highly influential in the final decision. In both cases, professionals with no prior involvement with the center were preferred over veteran volunteers.

Subtle changes in discourse and relationships occurred as well, and I could observe their consequences during my fieldwork. In various forums, such as board, staff, and volunteers' meetings, I felt as if everyone was engaged in constant "therapy." People presented themselves, and related to others, in therapeutic terms. They talked about their own and other people's feelings, gave psychological explanations by referring to unconscious or unacknowledged emotions and motivations, and commented constantly about group dynamic processes. Members not only thought and spoke "therapeutically" but seemed to behave according to a script of support relations in which once one side has been identified as being in distress, the other is expected to offer some relief. Staff members perceived themselves as "supporters" of volunteers, helping them to be able to support the victims, including advising them on personal problems with no direct relation to their volunteer work. Board members, in turn, perceived themselves as "supporters" of the staff, helping them to cope with their endless stressing tasks. There was a constant sensitivity to people's moods, emotions, and well-being. When a volunteer finished a hotline phone call with a victim, everyone would ask her about her feelings, offering a shoulder to cry on. If a member expressed frustration in a volunteers' meeting, someone

would be quick to suggest a psychological insight, pointing out hidden feelings, and the group was always glad to try resolve those "deep issues." "How do you feel?" "What does it make you feel?" and "Why do you feel that way?" were common, much discussed, questions.

Hence, as I showed, the entrance of therapeutically oriented volunteers, together with the downplaying of the feminist ideology, had an impact on various dimensions of the center's reality. It seemed that the center was slowly transforming from a political into a service organization.[12]

Competing Institutions: Diverse Rationales of Shared Practices

At the time of my fieldwork, both the feminist and therapeutic institutions were apparent in the center. Goals, formal structure, and managerial procedures reflected a feminist institution. The therapeutic institution, in contrast, was evident in power structure, in hiring practices, in the center's presentation to the outside world, and in inner discourse and relationships. The very presence of the therapeutic institution testifies for institutional change as, according to veteran volunteers' stories, it was certainly not evident in the early years. Yet, the most interesting change—from a theoretical point of view—was that some organizational practices that originated from a feminist ideology were kept, while their meanings, for some volunteers, had changed radically.

This pattern of change in meaning, but not in practices, was discernible, for example, in relation to the practice of handling victims' guilt feelings. All volunteers acted the same: they ensured the victims that no blame for the attack was put on them and tried to lift the burden of guilt. Feminist volunteers followed this practice because they believed rape should be understood in its social context. Therapeutically oriented volunteers did the same to ensure the continuation of support relations. They believed that in the early stages of cop-

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[12] The literature is full of reports of social movement organizations losing their ideological zeal over time (e.g., Byington, Martin, DiNitto, & Maxwell, 1991; Farrell, 1995; Ferree & Martin, 1995; Gornick, Burt, & Pittman, 1985; Morgen, 1986; Reinelt, 1994, 1995; Simon, 1982). My analysis is different from similar studies of feminist organizations in three ways: First, I frame my case within institutional theory and explore its implications. Second, I focus on the detailed pattern of change (meaning/practice). Third, I examine the internal dynamics underlying the change, rather than concentrating on the (albeit important) external causes.

ing with a rape trauma, most victims were not capable of dealing with the issue of guilt, and hence any reference to it might drive them to hang up. Hence, they all enacted the same practice, yet infused it with very different meanings.

The handling of harassment calls is another example. Practically, all volunteers tried to put a quick end to such calls. Feminist volunteers did this as they believed harassment calls were yet another type of sexual assault, and they tried to avoid their own victimization. Therapeutically oriented volunteers, in contrast, seemed to be quite neutral toward such callers, as they thought these (men) suffered from genuine problems, albeit not the kind of problems volunteers in the center were trained to deal with. They tried to cut short these calls in order not to block the line for more appropriate calls. Thus, the same practice—cutting short harassment calls—was given diverse accounts, infusing it with very different meanings, reflecting (and further maintaining) different institutions. Again, the feminist practice (which was part of the feminist institution), stayed stable, but for those who gave it a therapeutic rationale, it turned into a therapeutic practice.

Socialization processes, especially the compulsory training course, had—paradoxically—an essential role both in the maintenance of such original feminist practices *and* in the introduction of therapeutic rationales. Feminist practices were taught in the training course. Yet in order not to intimidate newcomers—who were perceived as nonfeminist and even antifeminist—the feminist origins and rationale of these very practices were barely mentioned. In my training course, not once were the participants given even a short exposition of feminist ideologies or a summary of the history of the feminist movement or of the center, nor were there any presentations of the feminist rationale for shared organizational practices (these were also almost entirely absent from organizational texts, like the public relations pamphlets, support guidebook, and activity log). Instead, the training course instructors turned to therapeutic rationales. Hence, on the behavioral level, the training course reinforced the feminist institution (feminist practices were presented as "the way things are done here," and volunteers were strictly instructed to follow these procedures). Nobody challenged these practices or tried to undermine them. They were presented and perceived as the natural order. Yet, at the same time, these practices were given a therapeutic legitimization, and so, on the meaning level, the training course served to socialize prospective volunteers into the therapeutic institution.

Let me demonstrate how feminist practices remained the same while their meaning shifted according to a therapeutic rationale with an example taken from my training course. At the middle of each training course, a meeting was dedicated to "personal stories." In this meeting (which usually lasted two sessions, some six to eight hours total), each participant was asked to share with the group her experience as a victim of sexual assault. Many volunteers considered these meetings to be the course's climax point. Here is how the rationale for these meetings was described in the training course abstracts:

Why do we tell personal stories?

- To experience how it feels to tell personal and sad stories, in a protected space, to strangers.
- To appreciate the diversity of sexual assaults and rape cases.
- To allow the expression of experiences we deal with during the course; it is important that we work through our emotional reactions, so we will be capable of helping callers without [our personal problems] interfering.
- "I as a listener." To practice listening to victims. To develop our listening skills.
- Raising solidarity in the group—you are not alone.
- The capability to tell the story is connected to the capability of listening (if you cannot tell [your own story] how would you be able to listen to others?)

In my training course, the group was encouraged to "be there" for the teller and to offer her the support she needed. The instructors explained that by telling our own stories to the group, we would experience how victims feel when they tell their stories. It would also enable us to resolve our own vulnerabilities and difficulties regarding sexual assaults and abuse, which otherwise might interfere in our quest to assist other women. Furthermore, we were told that hearing the stories would improve our listening capabilities.

The very existence of the "personal stories" meeting originated from feminist understanding of rape as a social phenomenon. It was based upon the assumption, introduced by feminists during the '60s, that most women have experienced some sort of sexual assault, as they all live in a society where women's status is degraded and women are dominated by men and objectified as legitimate targets for assault (according to common estimates of rape crisis centers, much repeated in the center, one of every four women will experience some sort of sexual assault in her life). Moreover, the personal stories meeting echoed and reproduced consciousness-raising groups, which had a central role in the emergence of "second wave" feminism (Garcia, 1998). Like a consciousness-raising group, the personal stories meeting drove participants to reframe

their life experiences according to feminist notions[13] and to connect the personal (women's individual experiences of sexual assault) with the political (sexual assaults as a social phenomenon). For this meeting, the injunctions to be there for the teller and to listen empathically were particularly emphasized, and these rules reflected, and aimed to enhance, sisterhood, another feminist concept.

The feminist origins of the practice, and its feminist rationale, were not mentioned. Instead, a therapeutic rationale was given, emphasizing the benefits of the meeting to our training (resolving our own problems, learning to listen). Here again, a feminist practice used in volunteers' training had not changed, but it was given a therapeutic rationale, and hence its meaning and impact changed profoundly. Instead of raising consciousness and instead of enhancing volunteers' understanding, commitment to feminist ideas, and sisterhood, the course (as the center's formal socialization process) highlighted therapeutic explanations and rationales, thus turning into a professional therapeutic training. Only those volunteers who had prior knowledge of feminism and identified with it could recognize the feminist origins of and rationale for such organizational practices. The better part of the volunteers understood these practices as reflecting a therapeutic institution.[14]

The training course not only reflected the therapeutic institution, but reinforced it by providing future volunteers with the vocabulary and practical reasoning with which to perceive, understand, and evaluate their own and other's activities. All volunteers were actively engaged in the same practices, yet they infused them with different rationales.[15] The very same practices were interpreted differently by two subgroups in the center.

Still, if all members of the center acted the same, why should we care about the different ways in which they understood what they did? In other words, is the change in meaning only interesting as a reading (and as an explication) of complex processes of institutional change? Did it have any important practical effects on the organization?

Meaning Matters

The change in meaning had substantial effects on three domains of the organization: power relations within the center, the services the center offered to its clients, and its relations with its environment.

Inside the center. The very existence of the two worldviews differentiated two subgroups: feminist volunteers and staff members on the one hand, and the new, therapeutically oriented volunteers on the other. The few who had both therapeutic training and feminist commitment usually related themselves to the feminist subgroup, expressing what we may call notions of "feminist therapy" (Dutton-Douglas & Walker, 1989). The two subgroups were engaged in a power struggle, as one senior (and feminist) volunteer reflected:

> I think there is a conflict . . . I feel it, the conflict between idealistic [feminist] forces, and more mainstream [therapeutic] ones. How do you reconcile these two voices? . . . The more active and central figures can influence the center to become closer to their way. (Senior female volunteer and training course instructor, interview)

Through the years, the feminist orientation of the founders and committed volunteers resulted in an association between a feminist identification and a commitment to the organization. This tendency was further enhanced by the fact that the one-on-one support activity in shift work was not very apparent in the public organizational sphere. Feminist involvement—expressed in public discussions and participation in educational and lobbying activity—was more visible. Hence, feminist volunteers were considered to be "better" volunteers. As one nonfeminist volunteer told me:

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[13] When we were told, at the beginning of the course, about the personal stories meeting, I became anxious. I had no recollection of any incident of sexual assault. I was afraid I would have nothing to tell. During the six weeks until the meeting, I recalled three such incidents. Friends of mine had the same experience. In my group of 15 women, each had a story to tell.

[14] Because it is a Western folk model (Quinn & Holland, 1987), even nonprofessional volunteers could easily relate to the therapeutic worldview. The "feminist revolution," in contrast, seems problematical to explain. For example, Christie (1998) found that unless explained in much detail, feminist arguments tend to be misinterpreted.

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[15] On the individual level, one may argue that for most of the new volunteers, these practices were never infused with feminist meaning, and hence that no change had occurred. On the organizational level, however, these practices originated from a feminist ideology, and their association with therapeutic rationales is a clear indication of institutional change.

One gets the feeling that volunteering [on the hot line] is not enough, that one should also participate in the political [feminist] activity, and I am not committed to this, [so] I feel like I do less, that maybe I am an inferior volunteer, compared to someone who is also engaged in feminist activities. (Female volunteer, newcomer, interview)

With therapeutic institutionalization, therapeutic training turned into an alternative source of status. A senior volunteer with no therapeutic training who was involved in educational activity remarked in a volunteers' meeting:

I think that professionalism creates hierarchy ... both between the victim and the caregiver, and inside the center. As there are so many social workers who are trained in therapy, I [being a lay person] will not be assigned the role of incest-support-group coordinator, ... not that I care, but it creates hierarchy. (Senior female volunteer, volunteer's meeting)

In the early days, "hard" cases were assigned to dedicated veteran, as well as feminist, volunteers, who were also invited to lead training courses and victim psychodynamics groups—all socially desired positions. As more therapeutically trained volunteers joined the center, they were assigned these roles. Some were both feminists and professionally trained, and some were nonfeminist and professionally trained. None were *only* feminists.

Furthermore, feminist and therapeutic understandings and identifications were sometimes utilized as resources in power struggles between these groups. Struggles over status and influence were played out as struggles over the management of meaning (Morgan, 1986). People in the rape crisis center were very sensitive to hostility and violence, and organizational norms forbade any expressions thereof, partially because of the daily exposure to victims of power abuse, partially as part of a feminist legacy. An ideal notion of "a feminine space," free of conflicts and tensions, swept such intraorganizational struggles under the carpet. Ideological struggles offered a good cover for other types of struggles as well. Hence, the institutional worldviews created divisions in the social fabric, and those divisions provided an acceptable ground for the expression of overt and disguised power struggles.

Services. Meanings connect actors to actions. Hence, the change in meaning assigned to institutional practices had an impact on support services as well. With the strengthening of therapeutic meanings—the fact that originally feminist practices were given therapeutic meanings—feminist practices became much more vulnerable to change. First, they became susceptible to change because

feminist volunteers lost some of their authority within the center, and with it, their ability to teach and protect those practices. Furthermore, for the therapeutically oriented volunteers, some of these practices just did not make sense (for instance, why limit ourselves to "support," if we can offer "real" therapy?). Lastly, these changes in meanings implied a change in the perception of victims, which further enhanced changes in practices. As I explained above, according to a feminist view, victims were supposedly treated as equals. With the institutional change, they became "patients," or in a more politically correct phrase, "clients"; in any case, they became pathologized, bundles of symptoms. Hence, therapeutically oriented volunteers tended to prefer long-term, therapeutic relationships over short-term support. The value of nonprofessional support based on shared experience and sisterhood was still apparent in regular hotline support, but it was starting to fade out in relation to hard cases like incest victims and in the victim psychodynamics groups. In addition, some volunteers found it hard to deal with victims' guilt feelings, as they had doubts on this issue themselves (their difficulty was evident in activity log entries).

Relations with the environment. The changes in meanings affected the relationship between the organization and its wide environment as well. The changed focus of the center from political advocacy to therapeutic counseling helped it in gaining legitimacy (Meyer & Rowan, 1977). By downplaying its feminist orientation and highlighting its therapeutic-professional identity, the organization managed to survive. The professional volunteers and their ways of doing things bestowed prestige on the center but also limited its ability to change women's inequality in society. In fact, volunteers had become reluctant to engage in political activities and failed to understand the connection between advocacy and helping rape victims (an association well established in feminist thought and in the center's goals). Consequently, only feminist volunteers, and especially staff members, were responsible for such activities, their initiation, and coordination. And, during my fieldwork, a few initiatives failed because of lack of volunteers' participation.

DISCUSSION: MICRODYNAMICS OF INSTITUTIONAL MAINTENANCE AND CHANGE

This case challenges one to consider the relationships between actors, actions, and meanings as interrelated yet distinct features of institutionalization. These relationships were especially apparent in the ways in which actors assigned meanings to

actions as part of a political process and then in how these meanings—experienced as "natural"—connected actors to actions. By exemplifying the role of organization members as institutional carriers and as interpreters of institutions, this case also extends conceptions of agency and of institutional politics.

Institutional Carriers

The institutional change in Orot highlights the role of organization members as carriers of institutions. The role of the professions as institutional agents is well established in institutional theory (DiMaggio & Powell, 1983; Scott, 1995). In this case, however, it is the role of the profession*als* that made the difference. Both the feminist and the therapeutic institutions operated in the center only through the volition of its members. Both institutions gained their influence in the center through members' actions and interpretations. As I mentioned above, the center operated outside the jurisdiction of any state agency responsible for the therapeutic professions. The feminist movement did not have any regulative, rulelike power over the center either. Hence, whereas the professional volunteers who joined the center were part of an "occupational community" (Van Maanen & Barley, 1984), the feminist volunteers were part of the feminist "community of discourse" (Mansbridge, 1995: 27). Feminist volunteers felt morally accountable (Eisenstein, 1995) to their political commitment. Given the marginal status of feminist ideology in Israel, this moral accountability was quite conscious: The founders strove intentionally to establish a feminist organization. The feminist volunteers I met during my fieldwork understood the ideological significance of those structures and practices, and they invested much effort in maintaining them. The therapeutic professionals brought their occupational culture with them. Given the status of the therapeutic worldview as a folk model, this orientation affected nonprofessional volunteers as well. They were less conscious regarding the ideological and constructed nature of the worldview and practices they brought in or adopted. Nevertheless, their actions and interpretations constituted an institutional change.

Agency

The feminist and therapeutic institutions were carried by members of Orot, but not always passively. Interpretation as an active choice was possible in the center given the existence of different explanations for shared practices. Both feminist and therapeutically oriented volunteers were aware of these competing worldviews (although not all were equally familiar with the rationales), as questions regarding the organization's identity ("Are we a feminist or a professional organization?") were periodically raised. Hence, members' interpretations of practices and procedures reflected, at least partially, preference for one explanatory model (institution) over the other. The more reflective volunteers made various comments regarding the futility of efforts to socialize newcomers into feminism, implicitly suggesting that they were struggling within and among themselves regarding their power (or lack thereof) to adopt or reject a feminist worldview. As one senior and feminist volunteer told me: "You cannot force feminism upon these women . . . you cannot coerce someone into this way of life. It may happen with time, or it may never happen. It requires some personal initiative, some personal aspiration." This "personal aspiration"—the power people (sometimes) have to decide which explanation to use to interpret their world—is a reflection of agency.

Conceptualizations of agency, especially the strategic, rational actor type of agency, are not easily compatible with the emphasis on the habituated, taken-for-granted nature of institutions (see Beckert, 1999). Still, my emphasis on actors as mediators of institutions (carriers and interpreters) seems to fit the neoinstitutional notion of culture-dominated actors and, hence, it may offer another alternative for explicating agency while integrating it with the basic insights of neoinstitutionalism. Accordingly, the relations between actors on the one hand, and actions and meanings on the other, move between the passive (as hinted by the term "carriers") and the active (as implied by "interpreters"). Actors can be passive carriers of institutional meanings and actions, or they can be (or become) more active in associating or dissociating actions with specific meanings. For example, feminist volunteers, although acting within the feminist institution, actively determined which practices to teach (for instance, feminist support) and what meanings should be attached to these practices (for instance, a therapeutic rationale).

However, once the association between practices and meanings was established, these meanings further connected actors with actions. Once meanings and actions are associated, they acquire a reality-like status and influence further actions. The relative importance of individual support and political activity is a good example. Although both were official goals of the center, only feminist volunteers

infused political activity with positive meaning and were consequently willing to engage in political activity. Therapeutically oriented volunteers, in contrast, devalued political activity, and hence refrained from any involvement in it.

This interplay between actors, actions, and meanings is a continuing and cyclic process, usually reflecting and sustaining a natural, taken-for-granted, and hegemonic institution, which limits individual agency. As long as an institution is well established, most people do not reflect explicitly and critically regarding its meaning—their interpretations, just like their actions, are institutionalized. Nevertheless, organizational realities also contain marginal, submerged, or more openly competing counter or alternative institutions that are both within and without the organization (Scott, 1994). In "unsettled periods" (Swidler, 1986: 278), in times of crisis and change, or when competing institutions offer alternatives, institutional symbols and practices may turn from second nature into "resources manipulated by individuals, groups, and organizations" (Freidland & Alford, 1991: 254). Just as competition or ambiguity enables organizational agency (Goodrick & Salanick, 1996), it may enable individual and group interpretations to turn into institutional agency.

Micropolitics

In the Orot Rape Crisis Center, social actors, as carriers of institutions who attached meanings to practices, were involved in a political struggle in which acts of interpretation played a major role. An important arena of this struggle was socialization processes (Van Maanen & Schein, 1979), through which institutional worldviews and practices are taught and made available to, even forced, upon newcomers. Feminist volunteers had the power to construct the main socialization process, the training course. They socialized newcomers into feminist practices while downplaying their ideological rationales. Both tendencies can be explained by political considerations: By keeping the feminist practices, they maintained their own status and interests, and by concealing the rationales for these practices, they hoped to ensure the survival of the organization and its work. Continuing this line of thought, therapeutically oriented volunteers instilled these practices with therapeutic meaning, thereby enhancing their own status and interests. Hence, motivated by their different interests, different actors and subgroups used institutional prac-

tices and symbols to gain political power (Friedland & Alford, 1991: 253–256).[16]

The complicated relations between the two groups in the center may be seen as a political status quo. The two competing groups coexisted, dominating different organizational domains and infusing shared activities with different meanings. Their mutual dependence reflected a fragile equilibrium between the feminist and therapeutic institutions, which, for the time being, satisfied both sides.[17]

In Conclusion

I have explained the narrative of institutional maintenance and change at Orot Rape Crisis Center as a dialectical interplay between actors, actions, and meanings. These three separate components of institutionalization are interrelated. But they do not necessarily and automatically go together. As actions and meanings are interrelated yet distinct, a conception and empirical investigation of institutions must include them both. As I showed, in some cases, the same practices were associated with different meanings, hence reflecting and maintaining different institutions. The unique pattern of institutional maintenance and change documented here would have gone unnoticed with analysis by approaches that focus on the macro level and on structures and practices alone. Focusing on structures and practices, I would have concluded that the feminist institution was well established in the center. Focusing on meanings, however, I would have concluded that the thera-

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[16] Although they based actions on their own interests, they were not necessarily fully aware of this basis and strategically calculating their actions. Certainly, they did not have total control over the outcomes of their actions. The unintended consequences of their actions (Giddens, 1984) were far more radical than they had anticipated. The feminist volunteers I spoke with were quite surprised to understand that what they had believed to be a minor, cosmetic manipulation in the center's image had resulted in a profound change in its identity. The professional volunteers, on the other hand, did not aim at colonizing (taking over) the center.

[17] Delicate intra- and interpersonal dynamics, related to individual and organizational identity, were involved: Organizational effort was dedicated to creating and maintaining ambiguity, which allowed these changes to happen and yet be hidden—keeping the tensions between the feminist and the therapeutic institutions, and between the feminist and therapy-oriented members, from evolving into an open and potentially devastating conflict (Zilber, 1998; for a similar and interesting case, see Kleinman [1996]).

peutic institution took over as the dominant hegemonic interpretive paradigm in the center. Only by focusing on actions and meanings and on the interplay between them could I appreciate the dialectics of the institutional change in the center. Furthermore, acknowledging the role of organizational members as institutional carriers, their possible agency as interpreters, and the political processes involved, were all crucial for understanding the mechanisms involved in this unique pattern of institutionalization and deinstitutionalization.

My analysis seems to imply that if all actors enact the same institutional practices and associate them with the same corresponding institutional meanings (that is, practices reflecting the feminist institution are linked with feminist meanings by all volunteers), institutionalization will be stronger than if different subgroups reflect and enact different institutions (practices that originated in a feminist institution are infused later by therapeutically oriented volunteers with therapeutic meanings). In other words, institutions may become vulnerable to further change and to deinstitutionalization if institutional practices are not associated with their institutional meaning. As the opening quotation from Berger and Luckmann indicates, despite their "thinglike" quality, institutions—materially and symbolically alike—must be continuously constructed and reconstructed by social actors. It is the continuous enactment of practices *and* meanings by organization members that constitutes and maintains institutions, including their appearance and experience as taken-for-granted. This does not imply, however, that in reality institutions tend toward equilibrium between actions and meanings. Rather, taking into account their processual and dynamic nature, disequilibrium might be much more common than has been assumed, given scholars' partial knowledge of the interplay between actors, actions, and meanings in institutional processes.

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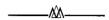
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