Hidden in Plain Sight: Transactions of Moral Capital in Sick Leave Management Within the Corporate University

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Abstract
In this article, we argue that sick leave and its management within the university involves exchanges of moral capital. The circulation of moral capital supports a moral economy, in turn underpinning the political economy of the corporate university. The forms of moral capital are diverse, sometimes easily recognized as such, more often hidden in plain sight. Like other forms of capital, moral capital can be accrued, depleted, and exchanged as it is paid forward. The exchanges between employers and employees within this moral economy represent trading of moral capital over and above contractual exchanges of income and other benefits for labor. Sick leave transactions illustrate the many forms this moral capital can take: values and principles, entitlements and accruals of sick leave, bureaucratic compliance, discretion, vulnerability and deservingness, employment history, and work ethic.

Keywords
moral economy, New Zealand, university, sick leave, moral capital

Introduction
In this article, we argue that sick leave and its management within the university involves exchanges of moral capital. The circulation of moral capital supports a moral economy, in turn underpinning the political economy. The forms of moral capital are diverse, sometimes easily recognized as such, more often hidden in plain sight. Like other forms of capital, moral capital can be accrued, depleted, and exchanged across macro, meso, and micro levels of the moral economy as it is paid forward. The forms and worth of moral capital are nebulous and dependent on one’s standpoint (Ryan, 2005), and therefore can be highly contested by those inhabiting the moral economy.

Sick workers and accrued sick leave entitlements represent a significant liability for a workplace, at the same time representing a commodity or an asset that workers can trade when required. The exchanges between employers and employees within the moral economy of the university, the field site for this project, represent trading of moral capital over and above contractual exchanges of income and other benefits for labor. Sick leave transactions illustrate the many forms this moral capital can take: values and principles, entitlements and accruals of sick leave, bureaucratic compliance, discretion, vulnerability and deservingness, employment history, and work ethic.

We begin by describing the New Zealand (NZ) context and by outlining the theoretical background of the moral economy and moral capital.

The NZ Context
NZ has a welfare system that best aligns with Esping-Andersen (1990) liberal category of welfare capitalism. This is a tax-funded system that targets low-income earners and vulnerable citizens through strict entitlement criteria (Gray, 1994). The NZ public health system includes a universal no fault accident compensation scheme (ACC) for unintentional injury (ACC, 2021) and is supported by personal income, employer and company taxes, as well as alcohol, tobacco, goods, and services taxes. Secondary health care services are free, whereas primary health care services are subsidized by the State relative to personal income. Private health care services can be accessed by those who can afford them and

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represent a relatively small segment of the health care sector (Goodyear-Smith & Ashton, 2019). Since the late 1980s, NZ has followed an aggressive neoliberal agenda (Kelsey, 1995, 2015), and this is reflected in the tertiary sector with universities becoming increasingly corporatized and market-orientated (Shore, 2008, 2010a, 2010b).

Moral Economy and Moral Capital

The term moral economy was coined by Thompson (1971) in his analysis of food riots occurring in late 18th century rural England. Our own model of moral economy is based on Siméant’s (2015) description of moral economy as the moral architecture that underpins a political economy. The social science tradition of political economy describes the ways in which broader national and global contexts and trends that shape processes of production and exchange of commodities also shape human identities and subjectivities, see for example, Bourdieu (1998), Foucault (1988), Giddens (1991), Gramsci (1990), Marx and Engels (1992), and Weber (2002). All human activity is fundamentally moral in the sense that it is imbued with meaning, and political economic activity is no exception (Sayer, 2000, p. 81; Weber, 2002). As social science investigations of political economies show (Farmer, 2004; Jaye & Fitzgerald, 2010; Kelsey, 2015; Kleinman et al., 1997; Roseberry, 1989), moral economies are complex constellations with multiple and intricate articulations between macro, meso, and micro levels of operation (Jaye, 2018; Jaye, Young, Egan, & Williamson, 2018).

Within moral economies circulates moral capital (Jaye, Young, Egan, & Williamson, 2018). Bourdieu (1977) showed that many forms of capital circulate between members of any given society in addition to economic capital (loosely defined as finance and assets). The term “moral capital” derives from Bourdieu’s forms of capital (symbolic, social, and cultural), and describes how ethical and moral values are embedded within individuals, communities, and institutions, as well as the State, and also how they are transacted across these micro and macro levels (Kane, 2001; Silverstein et al., 2012; Valverde, 1994). Social capital can be conceived of as the resources accessed and mobilized by individuals via networks of obligation (Kawachi et al., 2008; Silverstein et al., 2012), while moral capital is what compels individuals to reciprocate or return these previously invested obligations (Silverstein et al., 2012). Silverstein and colleagues (2012, p. 1252) have described moral capital as the “value of values.” Like other kinds of capital, moral capital is a commodity which can be accrued and depreciated, accumulated and redeemed, and bankrupted (Kane, 2001, p. 10; Silverstein et al., 2012). In the arena of politics (Kane, 2001, p. 4), it is the judgments and perceptions of constituents and citizens that contribute to the accrual of a politician’s moral capital. Moral capital does not necessarily reflect ethical behavior. While moral capital can reflect moral prestige, service and political constituency also contribute to gains in moral capital (Kane, 2001, p. 7). Other forms of capital such as economic capital (finance and material commodities) can at the same time constitute moral capital, in that their exchange carries moral meaning. In this way, a salary can be viewed as a form of moral capital because it reciprocates (as well as remunerates) personal investment in a meaningful vocation such as medicine or the clergy, while employment benefits can be viewed as moral capital because they add value in the form of moral worth to an employment package. These might take the form of additional paid holidays, or other leave entitlements beyond those required by law (the Employment Contracts Act in NZ). As an example, the University awards one-off “long service” leave entitlements to nonacademic staff who have worked continuously for the university for more than 10 years, while sabbatical leave is available to academic staff.

Foucault’s theories of governmentality are also highly relevant to the investigation of moral economy and moral capital. The management of citizens in contemporary Western political economies occurs through several techniques. These include the surveillance and measurement of citizens through public health apparatus and government bureaucracy, and the generation of normative discourse about human populations and individuals by academic disciplines such as medicine, psychology, and social institutions such as family, education, and justice systems, and a range of discursive practices associated with these (Foucault, 1988). These technologies work through processes of socialization and enculturation from infancy continuing through the lifespan. Individuals are encouraged to work on themselves so as to construct identities that are aligned with these dominant normative discourses. In this way, individuals become habitually self-monitoring and self-regulating, continually tinkering on themselves, and in the process constructing ethical subjectivities that are aligned with normative discourses. Ideally, the result is a healthy and self-motivated citizen prepared for participation in society, who will enter employment, reproduce the next generation, abide by the laws of their society, and take responsibility for correcting self-deviance. As such, it is both a public and highly intimate process, and is profoundly ethical. Similarly, deviance is constructed through the generation of normative discourses within, for example, theology and religion, psychology and psychiatry (Foucault, 1990; Giddens, 1991), and public health and health promotion (Fugelli, 2006; Jaye, Young, Egan, Llewellyn, et al., 2018; Leichter, 1997; Lupton, 1995). In the university context, the adoption of corporate managerial styles and corresponding increase in the surveillance and measurement of workers has resulted in new forms of academic identity and subjectivities (Shore, 2010a; Shore & Davidson, 2014).

Managing Sickness

In a world dominated by neoliberal political economies, the productivity of a nation depends upon the health of its
workforce. For example, the assumption that prevention of chronic disease results in decreased costs to the health and employment sectors has provided justification for the development of public health and health promotion in State administration (Leichter, 1997; Ministry of Health, 2000; Parish, 1995; Wise & Signal, 2000). Managers and employers are preoccupied with occupational health and safety and managing risk in the workplace (MacEachen, 2000), as a means to maintain workers’ productivity (Rongen et al., 2013). A 2010 NZ Treasury Report suggested that employee hours lost to sickness equated to between US$4.1 and US$11.5 billion, 2.7% to 7.6% of the gross domestic product (GDP) (Holt, 2010). A survey conducted by Business New Zealand in 2014 estimated that US$6.7 million NZ work days are lost each year to sickness absence, with sickness absence per employee averaging 4.7 days per year. This study found that New Zealanders most often take sick leave for an injury or minor illness that is not related to the workplace, with providing care to a family member the second most common reason for taking sick leave. Manual workers use more sick leave per year than nonmanual workers. Attending medical appointments was the third most common reason for sick leave for nonmanual workers, while for manual workers, “throwing a sickie” vied for third most common reason for sick leave alone with work-related illness or injury. This study noted that NZ workplace cultures tend to be very positive in encouraging sick workers to take sick leave (Business New Zealand, 2015).

Bellaby (2019) observed that sickness is inherently moral. He suggested that while illness reflects the individual’s experience of being unwell, sickness choreographs moral relationships between social actors in the workplace. For Bellaby (1990), workplace sickness brings together three discursive technologies of power: workers’ resistance, workplace discipline, and medicine. Workplace absenteeism due to sickness can be interpreted as a form of resistance by workers to workplace disciplinary regimes (Bellaby, 1990). Recent research has examined sickness presenteeism where a worker continues to work while sick instead of taking sick leave. Presenteeism may indicate power imbalances between workers and employers, while not taking sick leave may lead to negative downstream effects such as injuries caused by accidents (Dew et al., 2005; Holt, 2010). A related issue is that a worker might feel pressured into sickness presenteeism because they are concerned about losing their job (Barnes et al., 2008). Overseas research has suggested a strong demographic element to sickness absences, with women and minority group workers most often having higher rates of sickness absence than men and majority group workers (Mastekaasa, 2000). Previous research shows how parents juggle work and family/household demands (Business New Zealand, 2015). The rates of older workers in the NZ workforce are already high with the proportion of workers aged 55 years and older predicted to increase 1.6 times by 2036 (Boyd & Dixon, 2009). This is likely to be associated with higher rates of injury and chronic illness. One U.K. study estimates that the prevalence of long-term conditions will rise by 23% in the next 25 years (Bramwell et al., 2016). These trends are mirrored in the university context.

**Method**

We adopted a qualitative research design within a critical interpretive theoretical orientation (Lock & Scheper-Hughes, 1990; Scotland, 2012). Within this framework, the lived experiences and interactions of social actors construct social realities. The aim is to comprehend “the complex world of lived experience from the point of view of those who live it” (Schwandt, 1998). This orientation supported the research topic particularly well because our aims were to (a) understand the ways in which workers made sense of policy and employment practices around sick leave and (b) develop a theory of the forms and value of moral capital circulating around sick leave management practices. The multidisciplinary team members were all highly experienced in conducting qualitative research within a social science framework. Authors 1 and 4 contributed a social constructionist and critical interpretive anthropological focus, Author 3 a critical nursing focus, while Author 2 contributed a phenomenological focus.

**Research Setting and Data**

As a large employer, the University can be described as a meso-level political and moral economy. Like other NZ universities, it has adopted neoliberal corporate and market-oriented values that have resulted in bureaucratic rationalization, prioritization of research income, and a strongly competitive academic culture. It employs approximately 4,000 demographically diverse staff, and its strategic documents indicate a clear vision of purpose and future direction. The organization is managed through a complex bureaucratic structure that includes a policy database and human resources (HR) which guide decision-making at all levels. The obligations of both the university and staff, including sick leave entitlements, are contained within employment contracts. At the time this research was conducted, NZ employees were legally entitled to a minimum of 5 days of paid sick leave per annum. The University gives general and academic staff on permanent employment contracts more than this—10 days of sick leave entitlement upon appointment and 10 days per annum after that. University sickness leave can be differentiated into short-term and uncertified absence for work (i.e., five or fewer consecutive days) and physician-certified sick leave in the case of absences that exceed five consecutive working days. As a further point of comparison, most other NZ universities did not have a sick leave policy for academics, taking an “as required” discretionary approach.
The research project was conducted during 2018, a period of organizational restructuring and unprecedented institutional upheaval during which many academic and administrative positions were disestablished in the University.

We conducted semi-structured interviews using a topic guide aimed at eliciting participants’ accounts in their own words (Supplemental Appendix 1). Separate interview schedules were developed for managers and regular employees. Broadly, the interview schedules sought to better understand how employers and employees respond to ill-health, and the way in which managers interpreted policies and procedures concerning sick leave to manage individual cases. Interviews were conducted in participants’ workspaces (most often their offices) and subsequently transcribed.

**Sampling Framework and Recruitment Strategy**

The sampling framework was designed to collect data representing perspectives from across the University, all academic divisions, the services and operations division, and the administration/bureaucratic division. We excluded the researchers’ School from the sampling framework and recruitment strategy so as to avoid any potential bias through collegial association. Recruitment occurred through two strategies. First, email invitations were sent individually to each department (excluding those in the researchers’ School) within the University with a request for an invitation to take part in the project to be distributed to each team member within that department. In addition to this, posters were distributed across the campus inviting staff members to take part in the project. Potential participants were invited to contact Authors 2 and 4 who ensured that they met the study criteria, and set up a time to conduct the interview.

**Participants**

Please refer to Table 1 for demographic details of participants. The participants who took part as employees were all aged between 18 and 70 years, were all on permanent contracts, were all working at least 0.8FTE, had all worked for the University for at least 5 years, and had all taken at least 2 days of sick leave in the previous 12-month period. The people who took part as managers/HR staff were all on permanent contracts, were all working at least 0.8FTE, and all had at least 3 years management experience. These criteria meant that participants were more likely to be invested in, or at least dependent upon the University, and had enough time to have developed some kind of moral relationship with the University. All participants identified as NZ European. We tested the interview schedule with a colleague who identified with the Pacific Islands; however, no one who identified as being Māori or as Pasifika took part in the project. The participants included professional (managerial and administrative) staff and academic staff. Ethical approval was granted by the authors’ university.

**Data Analysis**

The analysis was guided by both immersion crystallization and pragmatic approaches which are aligned with the critical interpretive theoretical orientation that underpinned the project. These approaches enabled us to explore the interview data in an iterative and intuitive way (Borkan, 1999; Braun et al., 2019). Each transcript was read by Authors 2 and 4, who identified emergent themes for individual participants and for the participant cohort as a whole. Authors 1 and 3 independently analyzed a sample of transcripts (comprising managers and employees in the service and academic divisions), and a series of whole team meetings established analytical concordance. A theory-informed approach complemented the initial inductive process. The primary thematic analysis led to a deeper secondary analysis of emergent themes and this supported theory building around moral capital. This secondary analysis was informed by the critical social theories of Foucault and Habermas (Foucault, 1998; Habermas & Blazek, 1987). We have elected to use a narrative style in presenting our findings (Moen, 2006) and preserve the narrative coherence of participants’ accounts.

**Table 1. Gender and Age for Employee and Manager Participants.**

| Gender/Age | Employees, N (%) | Managers, N (%) | Totals, N (%) | University comparison, N (%) |
|------------|------------------|-----------------|---------------|-----------------------------|
| Participants | 9 (31) | 20 (69) | 29 | 3,924 |
| Gender | | | | |
| Female | 5 (55) | 14 (70) | 19 (65) | 2,439 (58) |
| Male | 4 (45) | 6 (30) | 10 (35) | 1,770 (42) |
| Age (years) | | | | |
| 25–34 | 1 (11) | 1 (5) | 2 (6.8) | 659 (16) |
| 35–44 | 2 (22) | 3 (15) | 5 (17.2) | 991 (24) |
| 45–54 | 2 (22) | 8 (40) | 10 (34.4) | 1,148 (28) |
| 55–64 | 3 (33) | 8 (40) | 11 (37.9) | 886 (21) |
| 65–70 | 1 (11) | 1 (3.4) | 240 (6) | |
Findings: The Forms of Moral Capital

In this section, we use interviews with four of our participants to elucidate forms of moral capital from the perspectives of HR, managers, and employees. The excerpts are primarily drawn from interviews with Trevor (senior HR advisor), Paul (academic employee, no management responsibilities), Simone (senior manager, academic sector), and Bob (senior manager, service sector). These have been chosen as exemplars within the data because their interviews were particularly perceptive and insightful, eloquently illustrating various elements of the moral economy across micro, meso, and macro levels, and the forms and worth of moral capital circulating around sick leave. Each account represents a standpoint (Ryan, 2005) within the university, while illustrating the normalizing technologies that operate in the organization.

Trevor’s Account: Managing Boundaries

Trevor is a senior HR advisor. He offered insights into the balances that HR advisors juggle in managing sick leave, balancing discretionary solutions to the management of individual cases with the need for alignment with employment law, as well as maintaining consistency across the university. He acknowledged that he only becomes involved in the cases that have been escalated at department and school-level management—these are the most difficult cases. Despite the liability that sick leave accruals represent to the organization, he noted that the majority of sick leave accrued in the university is never taken—meaning that significant sick leave accruals dissipate when employees retire. This also positions the university as a generous employer (Jaye et al., 2020). For him, sick leave is a pragmatic means by which the university protects its human assets. Effective management of sickness can result in a better outcome for the employee (space to recover) and for the university (return to productivity). He used the concept of boundaries to describe the spaces where the interests of university and workers intersect; management practices at the department and institutional level; and the degree of discretion that can be exercised within bureaucratic parameters.

By distinguishing the university as a tax-funded institution, Trevor links the meso-level operation of the university with the macro-level national political economy, a positioning that is both moral and pragmatic. As an institution within the government sector, there is explicit accountability back to the public as tax payers. Trevor identifies several forms of moral capital that circulate in the management of sick leave. He acknowledges the rights that employees have as citizens such as an expectation that their workplace will be safe and supportive of health. Rights held as citizens comprise macro-level moral capital—in NZ, this includes strong human rights and the right to access public health services. Health itself is a form of capital across all levels of the moral economy. While good health can be viewed as a form of positive moral capital, poor health can become a liability for employers and individuals alike, an example of negative moral capital. Trevor notes that the university cannot support a sick worker indefinitely. Interestingly, vulnerability arguably constitutes a form of positive capital for citizens with regard to initiatives aimed at ameliorating the negative impacts of vulnerability (Jaye, Young, Egan, & Williamson, 2018).

While Trevor is guided by employment law, he acknowledges that university work and the work–life boundaries of its employees are often fluid—particularly for academic staff. This refers to the nature of university work which accommodates a high degree of flexibility as workers can satisfy productivity demands by working from home, although their absence from the workplace may be noticed. This speaks to a tension between the bodies of workers being visible to management—an illustration of the disciplinary technologies of the workplace, and the relatively invisible intellectual work associated with academic work. The degree of fluidity available to university staff seems to constitute both positive moral capital (from the standpoint of academics who argue that much intellectual work occurs outside the workplace) and negative moral capital (from the standpoint of managers who prefer that the bodies of academics be visible in the workplace).

This fluidity has an uneasy articulation with corporate requirements for compliance with the regulatory apparatus. Trevor offered the typical scenario of staff members working around sickness by working from home, or using glide time when they should be negotiating management plans with their line manager and HR. He also talked about the need for staff to declare the appropriate form of leave (sick leave rather than annual leave) when they are too ill to work. This illustrates a moral distinction between annual leave (which does not require justification) and sick leave which calls into question issues of legitimacy, authenticity, and deservingness. Another reading is that the reservation of annual leave for rest and recreation preserves sick leave entitlements as a disciplinary technology for sickness-impaired performance. Adherence to correct processes and procedures is a key factor that distinguishes effective from poor management of sick leave by managers. For staff at all levels, compliance
constitutes a form of moral capital; for managers, institutional knowledge also accrues moral capital in the eyes of their own line managers. This incorporates correct procedures for communication with workers, planning for rehabilitation, and following up. This would indicate that institutional praxis is a form of moral capital within a moral economy in which compassion and corporatism are in tension.

In dealing with difficult cases, Trevor is guided by “base principles of good faith and the employment relationship.” This is a strong moral statement that encompasses several values, including honesty, fairness, respect, authenticity, and communication. The employment relationship is an explicit reference to the unevenness of this relationship with regard to power. As Bellaby (2019) noted, while employees are legally obligated to obey and comply with their employer (within the parameters of employment law), employers are able (again in accordance with employment law) to terminate an employee’s contract.

It’s [sick leave] a security blanket for a serious illness. [...] for staff who’ve been at university for a long time—their ability to use more sick leave once they’ve been there for 10-15 years, and presumably are 10-15 years older, and 10-15 years more likely to have a health issue. [...] When you are working with a staff member who’s facing a significant health issue and they’re needing that two, three, six, seven months off. There is actually the sick leave to cover that time and they’re not going to have to factor in financial hardship on top of the significant health issue. Obviously it’s quite comforting for everybody working with that individual. Obviously much harder when it’s someone who is new to the organisation facing that and they don’t have that massive bank of leave. [...] it’s not like they’re [worker] trying to be sneaky. It’s simply that they are mismanaging or not necessarily appropriately managing the leave that they’ve got. (Trevor)

This excerpt illustrates how sick leave accruals provide insurance against difficult management or difficult cases for managers as well as capital that can be banked by employees. Accrued sick leave makes management of a difficult case much easier because the factors of deservingness and discretion are not thrown into tension. This reference to a ‘bank of leave’ supports the concept of moral capital that can be banked and paid forward to be expended or exchanged in positive accruals, and also the ways in which a balance of moral capital can be depleted. Trevor referred to cases where an individual has used up their sick leave, but remains sick and unable to work or perform to a satisfactory level. The weighting of factors that are taken into account in discretionary solutions to these cases rely in part on moral assessments of the investment the institution has made in the worker, and likely future productivity. The employment history includes length of service and other mitigating factors that together comprise deservingness. Trevor refers to the boundary between sickness and performance issues. When does sickness become a performance issue? Consequently, when does the organization make the decision that they can no longer support a sick worker? Is this the point at which the workers’ balance of moral capital zeroes out?

**Paul’s Account: Balancing Work, Life, and Health**

Paul is an academic employee with a long-term health condition who is supported by the University through a personalized and discretionary management approach. He told us he had previously (and unintentionally) mismanaged his sick leave by using annual leave when he was sick. Now he is using his significant sick leave accruals (one designated sick leave day per week) to manage his recovery—which he uses to work from home. In his interview, Paul weighed up the mutual benefits of this situation to himself and his employer. He is proud that he never missed a class due to illness in 30 years as an academic—positioning himself as a dedicated teacher who never lets down students. He is very much aware that his reduced research productivity as a result of his chronic illness has become a performance issue for management and is aware of the surveillance exercised over his work practices and productivity. He is trying to avoid becoming a burden to his colleagues and his department. He reflected deeply on the ethics and moral philosophy around work and sick leave—what is owed by whom in the employer/employee relationship? His story featured several key players, himself, his academic manager, HR, the university doctor, his lawyer, his colleagues, and his students. He resents his manager’s untrustful and suspicious stance—describing this as a form of social injustice. He appears to be resisting the spoiled identity (Goffman, 2009) and subjectivity of a poor academic performer he has accrued over the course of his illness, and is resentful of his manager’s prioritizing of research productivity issues over his dedication to his teaching commitment. He feels he is recovering slowly but nevertheless feels stigmatized by his experiences.

I’m always thinking, is my being here good enough for the university? Is it good enough for me? What are better alternatives, what is the best for both? And I am still here in part for the salary and the job and part for the motivation and the knowledge and the contact and part for my responsibilities with students. But, overall, mostly I feel that I can still contribute. I have the responsibility to the classes that I’m teaching, and we don’t have anybody else who can. (Paul)

In this excerpt, Paul examines his relationship with the university. The use of the term “good” signals the moral nature of this relationship. He emphasizes his responsibilities to students, a form of moral capital that references students not primarily as consumers of education, rather as learners (Giroux, 2002; Murphy, 2011). Another form of moral capital is the salary he draws in return for his services. What he offers in return is the uniqueness of his
field, the fact that he is needed, and his contribution as a teacher to the curriculum.

I don’t mind working six days a week even though I’m declaring four days a week. I know I’m not fully capable, but likewise, I’m a whole lot better than I was before and I figure I’m nearly back to full capability. I might wind up trying to remove the sick leave later this year, maybe not. I’m teaching on either three or four days per week this coming semester so I’ve got to be here anyway. We’ll see. In other words, my sick leave situation might change later this month when I find out when my fourth class is scheduled. It’s a post grad class so it could be on any day. I have to be here four days a week anyway […] I am feeling well enough now that I may actually try to pull off the sick leave. The problem is that then becomes internal political in the sense that if I am pulled off sick leave by either the doctors declaring that I am fully capable and I do not believe they would do that […] The latest letter from them said that I should probably be increasing my time off work, not more work and they felt the workload was excessive compared with others that they’ve seen. So I don’t think that’s appropriate. The lawyer is also advising me not to pull off of the sick leave even if I’m feeling 100% capable I shouldn’t pull off of it because as soon as I do, the university will put me back on a performance management and that’s a faster route to dismissal […] I don’t want to go. I know that I have a long […] I have another 25 or 30 years that I could be working productively. As soon as I get my health fully back and I can see that it’s coming […] It’s not a game in the sense that it’s totally serious. It’s my life and it’s my career. I’ve put 30 years into this university already and it’s where I figured I would be for 30. So I’m half way through and things all of a sudden didn’t work out right in the middle. Didn’t know why and now we’re understanding what’s effecting it, but not yet what’s doing the causing of it. (Paul)

Paul claims that the length of his service to the university is a form of moral capital that should be recognized by management (i.e., that should offset the negative moral capital of his chronic sickness). He also claims enormous moral capital by spending his sick day working and by stating that his workload was excessive—a claim corroborated by his doctors. His claim of recovery is a moral stand indicating the reciprocal nature of the sick role model. He is fulfilling his side of things by recovering which is a moral repayment of the investment in him of sick leave. He suspects that the university is attempting to use his impaired productivity (constructed as deviance) as a disciplinary means to dismissal. The fact that he has to have his interests (and his rights as an employee) represented by a lawyer is an indication of the negative moral capital he holds against the university—if they were fair and reciprocal, this would be unnecessary. He also positions himself as blameless and vulnerable—an appeal perhaps to the moral capital associated with being the victim. He identifies the very real risk that resuming full duties may set him up to fail—becoming more stressed and potentially even less productive. Given that he feels his own moral capital is not adequately accounted for (in part attributed to his spoiled identity as a difficult case), compliance becomes a critical moral enactment for him.

[...] he’s (academic manager) making sure he follows all the rules. I would also have to make sure that I follow all of the rules. He’s looking at it to make sure that job gets done. […] I would have to ensure the same thing. So there are all the standard things that would have to be done to make sure that things continue. Cover, for example. You know, if there’s supposed to be a lecture, that the lecture is done or there’s a notice put up or something. So all of that would be normal. I don’t know whether or not he expresses sympathy to people who have an illness [...] whereas in my view, the key thing if a person is ill, it’s actually their emotional health because that’s what can be affected the most by a relationship with someone else. In other words, I’m not their doctor. I can’t cure their illness, but I can make sure that their worries and concerns don’t get in the way of it … My second concern is to make sure that their role is covered, minimizing stress. I think that would be more the approach that I would take, is that the emotional, personal, social wellbeing of the person is equally important as their physical. They need somebody else to defend them. (Paul)

Compliance here is a form of moral capital that mitigates risk. Paul acknowledges that the pragmatic reason for compliance is to ensure that classes are delivered. The use of the word “normal” for arranging cover for a class is an appeal to standard practices of reciprocity among colleagues to cover for one another (in the previous excerpt, Paul claims he has never failed to deliver a class). In addition, for the manager, compliance might mitigate the risk of personal grievance in the case of dismissal based upon poor performance. For Paul, his compliance mitigates the risk of dismissal based upon failure to comply with his employers’ demands. It also reinforces his moral claim that he is a good worker. In his reflections on how he would manage himself if he was the academic manager, the vulnerability associated with illness becomes a form of moral capital that together with his appeals to dedication and service establish deservingness. These claims should elicit from management not only a deontological duty of care but also the virtue of compassion. The harm that he has experienced from the management of his case (the stress of defending his job and the legitimacy of his illness and deservingness) has depleted the university’s moral capital as a good employer in Paul’s eyes.

Simone’s Account: Balancing Compassion and the Rules

Simone is an academic senior manager responsible for a department. She prefaced her account by noting that sickness and therefore the management of sick leave within her department was unpredictable. This references the troubling nature of sickness—unanticipated and time-consuming for managers. Her account highlights the multiple challenges of balancing compliance with the corporate regulatory
apparatus and her characteristic care ethic and compassion for her staff. She asseverated that her support can have a positive impact for a sick staff member—in terms of their recovery and return to productivity. This is a pragmatic response to her observation that presenteeism can affect productivity negatively. She also acknowledges that a sick employee might be harmed through mismanagement. She claims her ability to mobilize rehabilitation plans as a form of positive moral capital. Her relationships with her staff are a priority, even where this requires the exercising of discretion that places her in conflict with the demands of the bureaucracy—offering the example of juggling teaching cover for someone undergoing a lengthy and time-consuming clinical treatment. Another factor in consideration is that the academic management position she holds is a fixed term rotation and she will rejoin the academic rank and file once her term is completed. She feels apologetic about having to follow the rules and enact bureaucratic requirements, and describes how she offers strategic advice to staff members about the forms of sick leave they should take (i.e., unspecified, stress leave, or family leave [the latter are both unofficial categories of sick leave that are covered by an individual’s sick leave entitlement. Stress related to the workplace might result in the worker being granted discretionary leave while being placed on a managed rehabilitation plan]) in any given situation. In this way, an academic manager can use discretion to game the system to a staff member’s advantage. As a line manager, she describes how she must lead by example regarding appropriate reporting and use of sick leave. This illustrates both compliance and accountability as forms of moral capital. Simone’s focus is on wellbeing because she understands that wellness is positively associated with productivity. Interestingly, she notes that staff have the responsibility to look after themselves because failure to manage an academic workload and take annual leave can result in sickness and compromised productivity—a perspective that mirrors those of the managers in MacEachen’s (2000) study of Canadian newspaper editors. In the excerpt below, Simone reveals her conflict of interest as she ensures bureaucratic demands for compliance are met (also demonstrating her own compliance and effectiveness as manager) while being humane and compassionate toward employees.

My staff know my management is quite clear and easy if they understand the rules and policy [. . .] They know that I will push them to follow the policy. [. . .] I think the challenge that I have, is when someone has already used up all of the sick leave. The challenge that I have is between feeling as a human, and then the same time I’m also manager, that I want the department running. It is a very difficult decision for me. Normally if I have that situation I ask advice from HR, what should I do? Because I cannot decide by myself . . . I have conflicting interests . . . because you build your relationship with your staff. You’re being like a friend, because to make trust. Otherwise, people hiding. For me, people has to [come first], it is on us. I do not want to punish them. It is my mixed feeling. It is not easy. [. . .] I think the more I work as a manager, you cannot just do rule and policy, because you are still human. That is what I’m afraid with all of the online system and things like that. People just sit and tick [boxes]. Sometimes it’s the most important to have explanations. (Simone)

In the excerpt above, Simone takes care to establish that institutional policy is her primary referent for sick leave management. Interestingly, she makes explicit reference to the need to avoid punishing sick people while acknowledging that the context for successful management lies in the nature of the relationship she can build with her staff. This resonates with Paul’s experience of how sickness can readily become a path to performance management and dismissal. In both accounts, sickness carries significant negative moral capital. Simone claims moral capital in her humane management of sick leave. Trust is a key value here, as is the principle of compassion; both are forms of moral capital. Her account illustrates that the management strategies that might accrue positive moral capital for herself in the eyes of her staff at the same time might accrue negative moral capital from the standpoint of HR. This excerpt concludes with a moral critique of a bureaucracy focused on surveillance, compliance, and audit trails that is not balanced by an ethic of care and compassion.

The moral capital involved in sick leave interactions, and the boundaries between discretion and regulation, appears more obvious in difficult cases. In the following excerpt in which Simone talks about a difficult case, she describes the relationship between sickness and deservingness and the impact of her suspicion of dishonesty or lack of integrity by a staff member upon their relationship.

I had a dispute. Someone has a treatment. We agree four weeks [of sick leave]. Then suddenly in the second week, that person sends me an email, “Yes, I can go to the conference. The doctor has released me from the treatment, and I can go.” Interestingly, that conference leave was been approved six months ago. [. . .] If you’re sick, how come that you can travel? I need an explanation from the medical certificates that he is safe to travel . . . because it’s linked to HR. It is around our responsibility as a good employer that we are looking after that person, [that] nothing [goes] wrong when you are flying back from the conference. It is not about the sick leave itself, but our responsibility of wellbeing that nothing happens during the transit. We already approved the sick leave. That person wants leave for no sick leave, just that period to let him go . . . [Elaborating on the notion of “responsibility of wellbeing,” Simone explained:] For example, if you are sick, then you forced to go to conference, something happened in the flight, or become worse. It means I give you approval while I know that you are sick. It is not I’m looking after your wellbeing. As a manager I have to be. Take responsibility. “No, you are sick. Stay at home. No, you cannot come.” (Simone)

This excerpt illustrates how a staff member can gain moral capital through vulnerability and deservingness only to lose
it because they appear to be gaming the system. There are several forms of capital in play here. One is honor. Simone is perplexed that this person appears to be reneging on a deal made to manage their workload in light of their sickness—exacerbated by the degree of discretion she has exercised on this person’s behalf with HR. Other potent forms of negative moral capital include potential manipulation and lack of respect, as well as the suspicion of dishonesty and lack of authenticity. The timeline is presented as critical evidence. Simone is asking if someone is genuinely ill, how they can travel to an international conference. There may well be other factors such as university or department funding for the conference being utilized even while a deal is being negotiated for “light duties” (inevitably this means that others must cover for the duties relieved of). The staff member appears to be flagrantly disregarding the sick role exemption that underpins their responsibility to be compliant and recover in the sanctioned manner. Through the trope of risk, Simone identifies the liability that a sick person represents to the university and to her as line manager when they violate the agreed sick role. Paternalism and neoliberalism can be read into this account as Simone criticizes the staff member’s irresponsibility. An individual’s right to take risks supported by principles of autonomy collides with the corporate values of neoliberal responsibilism and Simone’s paternalism via the sick role. This is the boundary of autonomy—the harm that the exercising of individual autonomy may cause to others. It also illustrates how deviance can be constructed through violation of normalizing technologies of appropriate behavior while on sick leave.

**Bob’s Account: Keeping Services Running**

Bob is a senior manager for several university services that are run under an explicit commercial business model, unlike the delivery of tertiary education which is funded from a core government grant to the university and student fees. His is a slightly different perspective because he is not managing academic nor administrative staff but fixed term and casual contracts held by students and young people working on rosters. The work they perform is unskilled and wages reflect this. Bob’s priority is to keep his services running despite staff absences.

So if someone’s contacted me and saying they’re sick, all I’m concerned about is, “fine, forget about the person who’s sick, are you okay to replace that person,” because I’m more concerned about my customers not getting service coz they’re under staffed. (Bob)

This instrumental and operational orientation is a claim of moral capital. He noted that the majority of the sick leave issues he deals with are from a very small number of his staff. This further illustrates that excessive sick leave can easily become a performance issue, and sick employees a liability. He takes a much more bureaucratic management style because there is no option for staff to work from home. Health and safety for both his staff and their customers is a critical consideration in his management of sick leave. He notes that fitness to work can become an issue for staff members who rapidly deplete their sick leave allocation. Fitness to work carries moral connotations—fitness refers not necessarily to physical fitness but to attitudinal factors and work ethics—subjectivities aligned with normalizing technologies of the “good” employee (Jaye et al., 2020). He acknowledges that because these staff are on a minimum wage, they have a low moral commitment to their employer. What is unsaid is that as students are the majority of his staff, their priority is to their study.

I still have to see the goodness in people and have faith in people, and try not to get cynical about it. And I do that. And I’m fortunate, and we often quote . . . that “2% of our staff cause us 98% of our problems.” And that 98% of our staff are fantastic, and do an admirable, superb job, and they’re worth their weight in gold . . . I hate to generalise, . . . Those two percenters, out of the 98 have no sick leave, are taking a lot of sick leave. They’ve got performance issues in the work place. Yeah. So they’re the issues. (Bob)

In the excerpt above, Bob is determined to retain his positive regard for his workers. Like Trevor and Simone, he attempts to be humane and compassionate within the bureaucratic regime. Given the unrelenting pressure of providing daily services to thousands of people, he can exercise less discretion around sickness and sick leave. In his interview, Bob distinguished between deserving workers such as the parent with a sick child and the “Mondayitis and Fridayitis” associated with young workers prioritizing their lifestyle over work obligations. While he disapproves of these practices, he is realistic about how much loyalty to customers, responsibility, and work ethic the minimum wage can be expected to purchase. The minimum wage represents much less moral capital than an academic salary; significant moral capital accrues to staff who are “worth their weight in gold” because they perform above the level that might reasonably be expected of someone on a minimum wage. The few workers whose use of sick leave has become a performance issue have accrued negative moral capital.

**Discussion**

Within participants’ accounts of sick leave management and the relationship work this entails, are evident several forms of moral capital. These encompass values and principles such as respect, trust, honesty, integrity, compliance, accountability, fairness, loyalty, duty, instrumentalism, service, collegiality, compassion, and care. These values and principles were frequently expressed through frameworks of autonomy, responsibilism, reciprocity and mutuality, authenticity, deservingness, and humanism and also encompassed vulnerability and rights. These carry a worth relative to each participant’s
These findings support Bellaby’s (2019) assertion that sick leave is inherently moral. For Bellaby (2019, p. 12), a sickness claim in the workplace is morally ambiguous because of its links with the “indulgence” thought to be owed to sick people—an expression of Parson’s sick role (Parsons, 1975). Institutionally, sick leave represents compliance with employment law, and allows for the enactment of compassion through discretionary interpretation by managers and HR. It represents a liability cost to the university, although as some participants indicated, the actual cost to the university is a fraction of the total liability potential or unrealised cost because most accrued sick leave is not taken. Sick leave represents a safety net for staff in the form of a buffer between compromised work performance and unemployment due to inability to perform work duties. However a workplace cannot support a sick worker indefinitely in cases where their capacity to work is impaired and rehabilitation is unrealistic. The standpoints represented by managers, HR, and staff with regard to sick leave represent contested moral discourses that choreograph relationships within the workplace (Bellaby, 2019, pp. 21–23).

Participants described how moral capital can be accrued and eroded through intentions, attitudes, and actions as perceived by others. These perceptions may differ from the moral claims made by an individual. Cultural and social capital (Bourdieu, 1977) as well as human capital (resilience, knowledge, skills, health, physical ability; Jaye et al., 2015; Wild et al., 2013) may illustrate similar disparities in what might be claimed by an individual and the assessments made by others. This exemplifies the relativity associated with various standpoints. It helps explain why and how claims to moral capital and its worth, in terms of what it can be exchanged for, are contested.

The subjectivities that individuals bring to the university result from their engagement with many societal disciplinary technologies across their lifespan (Foucault, 1988). Universities have been described as disciplinary blocks within which fields and academic disciplines align students through both overt and covert curricula (Frank & Jones, 2003; Grant, 1997; Jaye et al., 2010). Within the organization, a battery of disciplinary technologies operate—tinkering with the subjectivities of staff members (Shore, 2010a). These operate as normative discourses and expectations that are tailored to specific roles (support, academic, managerial). Alignment with these technologies brings success for individuals within the organization that are rewarded by promotion, tenure, long-term service entitlements, and bonus payments—all powerful institutional recognition of, and contributors to positive balances of individual moral capital. Ledgers of moral capital include these obvious indicators and also covert forms of moral capital that act as more subtle technologies.

What counts as moral capital reflects normative and therefore socially constructed discourses imbued with societal value. Some of these forms of moral capital can be distinguished as macro-level forms that are conferred upon individuals through citizenship. These include those that represent human rights and employment law. Some are unique to the meso-level bureaucratic praxis of the university—such as the organization’s sick leave allocation and institutional policy. Many forms of moral capital are relational in the sense that they are exchanged within micro-level interactions between individuals, notably between workers, their line managers, and HR. This level is where claims to moral capital, and the worth of moral capital balances are disputed and contested. The assessment of moral capital matters because the worth of moral capital can be paid forward to secure future benefits. In the case of the university, sick leave is a form of moral capital that is paid forward (as an entitlement upon employment) to be cashed in when required. Vulnerability, deservingness, and authenticity can be augmented by other forms of moral capital such as length of service, sick leave history, and compliance—all of which influence the degree of discretion exercised by line managers and HR managers in each case. This discretion is crucial in cases where sick leave entitlements have been used up, and therefore, the moral capital associated with them has been zeroed. These supplemental forms of moral capital can extend the discretionary boundaries in managing sickness and delay dismissal in cases where impaired productivity has become a performance issue.

Balances of moral capital can be depleted through perceptions of dishonesty, selfishness, manipulation, self-interestedness, being burdensome, and lack of compassion on the part of staff members, and by the prioritizing of bureaucracy over persons and lack of compassion on the part of managers. The different standpoints for evaluating moral capital means that it is possible for the same set of actions to accrue both positive and negative moral capital. Our findings show that compliance with the bureaucratic processes may accrue positive moral capital to a manager at the same time as it accrues negative moral capital from staff because of the perceived lack of compassionate discretion exercised. The moral capital ledger of staff members is always relative and contestable because it is assessed according to variable criteria by managers and HR. Discreet talk by managers and HR about the “invisible CV” and rumors of “black listed” employees attest to the power of these assessments and the consequences that they carry forward within the workplace. The spoiled identity (Goffman, 2009) associated with negative moral assessments of their illness career within the university saddened participants like Paul and the counter claims they offered as resistance appealed to the lack of recognition of or unaccounted moral capital. A study of managers’ careers following significant leaves of absence indicated a strong negative impact on evaluations of performance that had lasting impact (Judisch & Lyness, 1999). These conflicting reckonings of moral capital represent contested truth games (Foucault, 1997). As Bellaby (2019, p. 51) noted, the employer/employee power imbalance limits the ability of workers to contest dominant discourses about forms and worth of moral capital. Yet, our findings show how these
covert reckonings circulate among staff members through their relationships with each other and evaluations of each other’s work.

The moral economy of the neoliberal corporate university has been well examined and critiqued. The contestation of moral accountability (through reckonings of moral capital and its worth) may reflect the collision between values within the university over the previous 30 years as managerial praxis has become more concerned with accountability, compliance, and audit practices. The worth of collegiality and education as a public good (rather than a commercial commodity) has eroded, while the worth of academic performance is measured with quantitative assessments of publications and research funding secured (Giroux, 2002; Larner & Le Heron, 2005; Murphy, 2011; Shore, 2008, 2010b; Whelan, 2015; Winter, 2009; Winter & O’Donohue, 2012; Ylijoki, 2005). This explains Paul’s bitterness at his manager’s assessment of his poor performance based on research productivity (representing the erosion of moral capital), and failure to adequately account for his teaching record (a claim to positive moral capital by Paul). This also explains the apologetic prioritizing of accountability over care ethics by managers.

Shore and Davidson (2014) caution against a too simplistic reading of resistance by academics with regard to the neoliberalization of the university. One characteristic of modern biopower further cultivated within neoliberal and corporate regimes is the unrelenting and intrusive surveillance of individuals. The purpose of surveillance is to identify and manage deviance (Foucault, 1988; Frank & Jones, 2003; Shore, 2008). This is accomplished through self-disciplining by individuals—in the process (re)aligning themselves with normative discourses. This process might explain the collusion described by Shore and Davidson of academics in response to cultures of performativity and productivity that at the same time leads to new academic subjectivities (Shore, 2010a; Shore & Davidson, 2014, p. 17). The impact of constant surveillance and scrutiny on academics has created a managerial praxis in which there are winners and losers (Shore, 2010a).

The culture of performativity that is a response to constant surveillance embraces an overt normative discourse of continuous quality improvement—a relentless striving for excellence at institutional and individual levels. The discourse of continual striving for excellence suggests that one’s current performance (no matter how satisfactory) is never good enough. The standard is always being raised. This constitutes a powerful technology by which the institution tinkers with the ethical subjectivities of university staff (particularly academics; Foucault, 1998). Institutional standards of performativity offer a means by which university staff might accrue moral capital and conversely to lose it. Those who fail to perform satisfactorily are constructed as problematic and enter performance management. This may correct their deviance or result in the punishment of dismissal, confirmation that an individual was not a good “fit” with the institution. In this way, the discourses of excellence remain unchallenged. Sickness can be accommodated within the university until it collides with the normative expectations of performativity (with a strong emphasis on research productivity). The point at which poor performance becomes an issue may not overlap neatly with sick leave entitlements. In these situations, an individual’s impaired performance might persist while they use up their accrued sick leave. Sick leave policies provide some protection; however an individual becomes particularly vulnerable when their sick leave has been used up as the above accounts attest.

We acknowledge that there are other forms of moral capital and standpoints which we have not examined here. These fall beyond the scope of our focus on sick leave within the context of our chosen field site. These include the worth of grant funding secured and publications (particularly those with high impact factors) as potent overt forms of moral capital that are paid forward (in the case of academic staff) to meet performance indicators. The standpoints of students within the university are also outside the scope of our project, yet the relationships between staff and students and between students also offer potentially fruitful opportunities to observe transactions in moral capital.

We also acknowledge that our findings are likely to have been affected by the lack of ethnic and demographic diversity among our participants. We had hoped to recruit Māori, Pacific Island, and Asian staff members to the study, as well as higher numbers of staff with young children, and trade staff. Their perspectives may well have provided additional insights into the forms and value of moral capital associated with sick leave in the university. It cannot be assumed that the moral capital described by our predominantly middle-class NZ European participants reflects the experiences and views of those who do not share this relatively privileged demographic profile. Future research in schools, factories, prisons, and health care settings such as hospitals and aged care residential facilities is needed to develop our understanding of the forms and worth of moral capital circulating within a range of workplaces.

**Conclusion**

We have shown that sick leave provides a window into the moral economy of the university and the forms and worth of moral capital traded within it. This allows for a more nuanced understanding of the relationships between employers and employees and the discursive practices within organizations. The exchanges between employers and employees within this moral economy represent trading of moral capital over and above contractual exchanges of income and other benefits for labor. Sick leave transactions illustrate the many forms this moral capital can take: values and principles, entitlements and accruals of sick leave, bureaucratic compliance, discretion, vulnerability and deservingness, employment history, and work ethic. The worth of forms of moral capital is a moveable feast, dependent upon standpoint and therefore both highly subjective and relative. The forms of moral capital within the university may be unique to this institution, but
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