

## The Adoption of Innovation in Collective Action Organizations<sup>1</sup>

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*This study used a quantitative/qualitative methodology to explore how collective action organizations (CAOs) remain open to organizational change and innovation. It examined the adoption of inclusion—a recent innovation in the field of disabilities—by local chapters of The Arc Michigan (a disabilities CAO). We found considerable variability in the adoption of inclusion by local Arc chapters. This variability was significantly related to the ecology surrounding these chapters. Local Arc chapters that had adopted an inclusion philosophy had significantly different internal and external environments from those that had not adopted inclusion. Our qualitative findings make it clear, however, that innovative Arc chapters were not the passive recipients of these internal and external influences. These chapters were proactive players in defining and shaping the nature of their internal and external environments. Strategies that were related to a chapter's ability to remain open to innovation included (a) a change orientation, (b) a conscious philosophy or vision, (c) a proactive strategy for achieving chapter goals and overcoming barriers to change, (d) the creation of a supportive organizational network, and (e) avoidance of resource dependencies that required them to engage in activities that were inconsistent with the innovation. These findings provide a framework*

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*by which CAOs can maintain an openness to innovation and remain on the forefront of social change.*

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## INTRODUCTION

Collective action organizations (CAOs) have long played a critical role in the promotion of innovative service philosophies and alternative forms of service provision. CAOs are membership-based agencies that challenge the status quo by advocating for alternative, innovative solutions to specific social problems (Knoke, 1990). Across a wide spectrum of social issues, these organizations have procured rights and services for disenfranchised groups.

Ironically, successfully influencing policies and practices can have significant consequences for the mission and/or viability of CAOs. When CAOs are effective at promoting change, funders and the targeted service sector often adopt some of the service delivery innovations advocated for by CAOs (Zald & Ash, 1966). This success may reduce the need for their previous organizational mission as a change agent and may create a new demand within their community for the services that the CAO advocated to create (Riger, 1984). Often, in order to remain viable in this changing environment and to be sure that the needed services are available, CAOs shift their focus, taking on a service delivery or dual service delivery/advocacy role, thus becoming partners with the system they once advocated against (Riger, 1984; Zald & Ash, 1966). Riger (1984) concludes that such a life course transition, from a focus on advocacy to a focus on service is a frequent outcome for many CAOs. There is evidence across a variety of sectors to support Riger's claim. This shift in focus has been documented in disability (Segal, 1970; Stone, 1996), educational (Gittell, 1980), community development (Knoke, 1990; Perlman, 1976), feminist movement (Riger, 1984), and rape crisis (Campbell, Baker, & Mazurek, 1998) CAOs.

Although the adoption of a service delivery mission by CAOs may have immediate benefits for their constituents and local communities (e.g., the provision of needed services), such partnerships with the traditional service sector also have significant consequences for the organizational practices and beliefs of CAOs. Riger (1984) argues that the development of formal relationships with the traditional service sector, through either the development of collaborative relationships or the receipt of external funding, will cause a CAO to look and behave more like a traditional service organization than a radical change agent. This argument is consistent with the views of

institutional theorists who believe organizations conform to the dominant belief systems in their external environment (D'Aunno, Sutton, & Price, 1991; Meyer & Rowan, 1977). Riger (1984) argues that increased involvement with the traditional service sector leaves CAOs unable to continue to function in the role of radical change agents.

Campbell et al.'s recent examination of the social change practices of rape crisis centers (Campbell et al., 1998) provides empirical support for Riger's conclusions. They found that the centers they studied had also taken on a dual service/advocacy mission. Although the centers maintained some involvement in important social change activities, these activities were much less radical in nature than previous advocacy efforts. Informants attributed this decline, in part, to the constraints placed upon them by their current funders and changing contextual demands.

One important consequence of such transitions is that these CAOs may lose their ability to adopt and advocate for innovations that significantly challenge the status quo. When new innovations that challenge the existing mode of service delivery appear on the scene, CAOs that have adopted a service focus may find themselves unable to adopt the new innovation. Innovation adoption is more likely to occur when organizations have the internal and external environment needed to support such change (Kimberly et al., 1990). Because the traditional service sector often does not propagate such environments, CAOs that develop partnerships with this sector often do not have the contextual support needed to facilitate such change.

One important question that arises from past work on the transformation of CAOs is whether or not CAOs that adopt a service delivery orientation necessarily face an inevitable decline in their focus on social change (Piven & Cloward, 1977; Riger, 1984) and in their ability to remain open to innovation. The history of one CAO in the disability arena suggests that this end state is not inevitable. For 50 years, The Arc,<sup>3</sup> a national disability CAO, has played a key role in bringing about social change in the disabilities arena (Braddock, 1992, 1998). Although all Arc chapters in Michigan started with the same advocacy focus, and most then transitioned into a dual advocate/provider role, some chapters were able to rededicate themselves to their social change mission and renew their advocacy for the adoption of innovations (The Arc Michigan, 1997). The Arc Michigan<sup>4</sup> provides an excellent setting for exploring how CAOs remain open to innovation.

<sup>3</sup>The Arc is the name of the national organization whereas The Arc Michigan is the name of the state-level organization.

<sup>4</sup>The Arc Michigan granted permission to identify the organization by name in published reports.

## The Arc

The Arc is one of the largest not-for-profit voluntary associations in the United States, with approximately 140,000 members organized into 1200 state and local chapters. Founded in 1950 as an advocacy organization, The Arc's membership is comprised primarily of parents of children with developmental disabilities. The Arc has been influential in dismantling the institutional care system, shifting state funds to community-based services, changing disability legislation, and shifting service delivery practices and public attitudes in order to help persons with developmental disabilities become more valued and integrated members of society (Braddock, 1992, 1998; Braddock & Fujiura, 1991).

Most Arc chapters began with a similar mission—to improve the quality of care in institutions and advocate for the development of community-based services for persons with developmental disabilities. Over the past few decades, however, there has been great diversification across Arc chapters in terms of both their activities and philosophies. Some chapters currently function as sheltered service providers (e.g., running group homes) and others act more as social change advocates (Segal, 1970; The Arc Michigan, 1997).

In recent years, The Arc's mission as an advocacy organization has been challenged by a significant ideological change in the developmental disabilities field. The ideology of sheltered care that has historically guided The Arc's activities is being replaced by a philosophy of inclusion. Although there are many definitions of inclusion, it usually refers to the full participation and integration of people with developmental disabilities in all aspects of community life (e.g., school, work, living, and recreational settings), regardless of their disability (Alper, Schloss, Etscheidt, & Macfarlane, 1995).<sup>5</sup> A critical component is the provision of necessary supports (Singh, 1995). This new philosophy departs radically from the tradition of sheltered services originally advocated for by The Arc, in which people with developmental disabilities live, work, or participate in activities primarily with other people with disabilities (Bradley, 1994). There has been considerable controversy within the field of developmental disabilities over the adoption of inclusion. Advocates argue that it is a civil right which results in improved outcomes and quality of life (Patton et al., 1996), whereas opponents believe that inclusion is not necessarily appropriate or beneficial for all people with disabilities (MacMillan, Gresham, & Forness, 1996).

<sup>5</sup>The word inclusion is also used more loosely to refer to the inclusion of people in regular education classrooms and community settings when possible, while maintaining a continuum of specialized and segregated services (e.g., Alper et al., 1995). In this paper the term inclusion is used to refer to full inclusion.

Given the radical change that inclusion represents, and the disagreement regarding its benefits and feasibility, it is not surprising that it has been a confusing and divisive issue within The Arc. Although some Michigan Arc chapters have adopted and even pioneered an inclusion philosophy, this new ideology is not consistent with the philosophy and current activities of other local Arc chapters. Some local Arc chapters have resisted inclusion, choosing to continue delivering segregated services that are at odds with an inclusion approach.

Taken together, the important role The Arc has played in bringing about social change for persons with disabilities, the diversity of organizational forms that has developed within The Arc, and the differential adoption of inclusion by Arc chapters have created a natural setting for exploring the adoption of innovation by CAOs. In this study, we examine how local Arc chapters that have adopted an inclusion philosophy differ from those that have not and explore how the process of adoption of innovation took place.<sup>6</sup> Given the role CAOs have played in promoting funding, services, and opportunities for disenfranchised individuals, it is important to understand how these critical entities can maintain their role as challengers of the status quo.

### **Characteristics of CAOs That Remain Open to Innovation**

The ability of a CAO to remain open to innovation is significantly influenced by the character of its internal and external environments (Kimberly et al., 1990). Because CAOs are dependent on their members and external supporters for funding and resources (Knoke, 1990), they are particularly vulnerable to and influenced by the predominant beliefs and practices of their organizational leaders, members, external funders, and key external contacts (Riger, 1984). Consequently, the extent to which these entities support an innovation or change significantly influences the CAO's capacity to adopt an innovation (Rogers, 1995). For this reason, in seeking to understand how Arc chapters that have adopted an inclusion philosophy differ from those that have not, we focused on the characteristics of their internal and external environments.

<sup>6</sup>It is important to note that in studying the adoption of inclusion, we are not implying that this approach to service delivery is necessarily superior to other approaches, appropriate for all individuals, or the preferred position to be advocated for by all disability CAOs. Similarly, we are not suggesting that all CAOs should have the same organizational mission (e.g., advocacy as opposed to service delivery) or that all Arc chapters should play the same role in their local communities.

### *Internal Organizational Environment*

Rogers (1995) argued that a key internal organizational factor related to the adoption of innovation is the extent to which the dominant belief systems within the organizational environment are compatible with the targeted change. Key to this internal belief system is the leader's attitude regarding the proposed change, because an organization's current ideologies and practices typically reflect the values of the organization's formal and informal leaders (Schein, 1985). The influence leader attitudes have on innovation adoption was well demonstrated by the results of Damanpour's meta-analysis of determinants and moderators of organizational innovation (Damanpour, 1991). Damanpour found that organizations, particularly non-profit organizations, were more likely to adopt an innovation when managers and members supported the change. Examining service transitions within the field of developmental disabilities, Magis-Agosta (1994) and Kiracofe (1994) also found that agencies were more likely to transition from providing segregated to inclusion-guided services when they had leader support for this change.

Because The Arc is a voluntary association, the members and the board of directors often play an important leadership role. We were therefore interested in examining attitudes of chapter leaders, board members, and members. We hypothesized that inclusion chapters would be more likely than other chapters to have leaders, board members, and members who have a positive attitude towards inclusion and a negative attitude towards segregated services. Inclusion chapters were also hypothesized to have more consensus among chapter members regarding inclusion.

### *External Environment*

Although The Arc itself is a loosely coupled organization (Segal, 1970; Weick, 1979a), Arc chapters are interdependent with other organizations in their environments. The values and beliefs (Meyer, Boli, & Thomas, 1994; Meyer & Rowan, 1977; Scott, 1994) and funding requirements (Pfeffer & Salancik, 1978) within the external environment help to determine an organization's structure, function, activities, and philosophy. Organizations conform to the dominant belief systems and expectations within their environment because they are rewarded for doing so with increased resources, legitimacy, and capacity for survival (D'Aunno et al., 1991; Meyer & Rowan, 1977; Pfeffer & Salancik, 1978). Based on the findings of past researchers (e.g., Campbell et al., 1998; Riger, 1984) and the writings of organizational theorists (e.g., Meyer & Rowan, 1977; Pfeffer & Salancik, 1978; Scott, 1994)

we were interested in exploring both the beliefs and funding requirements in the external environments of Arc chapters.

Understanding the characteristics of the external environment of Arc chapters is somewhat complicated by the fact that different Arc chapters function within different organizational fields (i.e., recognized areas of institutional life; DiMaggio & Powell, 1983). Stone (1996), in an historical analysis of the evolution of one Arc chapter from an advocacy agency to a multimillion dollar service provider, noted that an individual Arc chapter may function within multiple environments, each based on a unique belief system. Service-providing chapters may interact and identify primarily with the traditional service sector, social change chapters may view themselves as part of a social change movement, and those chapters spanning a dual advocacy/service role may interact with both sectors.

Because Arc chapters have the potential to operate in several organizational fields, we assessed the external environment in ways that allowed chapters to identify their own external context. First, we examined Arc leaders' perceptions of the service delivery attitudes of those who they viewed as the key players, organizations, and funders in their chapters' external environments. We hypothesized that the leaders of chapters that had adopted an inclusion ideology would be more likely to view these important players as supportive of inclusion.

Second, we examined the Arc chapters' organizational networks. An organization faces different ideological pressures depending on the other organizations it interacts with. Those chapters that interact primarily with traditional service providers and funders are exposed to a philosophy of care based on protection and segregation. In contrast, those chapters that function in the social change arena are influenced by a belief in empowerment and inclusion. We therefore hypothesized that chapters that had adopted an inclusion philosophy would have networks that comprised more advocacy organizations and inclusion-oriented settings (e.g., The Arc Michigan state office), whereas chapters that had not adopted inclusion would have networks that comprised more traditional service organizations.

Finally, we examined the funding requirements imposed on different Arc chapters. CAOs cannot survive without a continuous flow of resources from the external environment (Knoke, 1990). Reliance on external funds can compromise an organization's social change mission when receipt of funds requires an organization to engage in activities that are inconsistent with that mission (Gittell, 1980; Riger, 1984). We therefore hypothesized that chapters that had adopted inclusion would be less likely to have funders who require the delivery of specialized services and more likely to have funders who require the delivery of inclusion-guided services.

## Current Study

This study used a quantitative/qualitative approach to explore the adoption of innovation (i.e., inclusion) by local chapters of The Arc Michigan. We used a survey methodology to answer the question (1) What internal and external factors distinguish inclusion-oriented Arc chapters from other types of Arc chapters? We used qualitative interviews to answer the question (2) How have some Arc chapters come to adopt an inclusion philosophy and remain on the forefront of innovation in the field of developmental disabilities?

## METHOD

To enhance the local relevance of this study for The Arc Michigan, we used a modified joint insider–outsider research methodology (Bartunek & Louis, 1996). Key insiders, including the executive director of The Arc Michigan and the Council of the Executives of The Arc Michigan, provided information about the targeted setting and assisted the authors in research design and data interpretation. In addition, to better understand the past and current characteristics, activities, philosophies, and challenges of Arc chapters, we conducted two sets of key informant interviews. First, in order to inform our research questions, study design, and survey construction we interviewed leaders of five local Arc chapters who were identified by The Arc Michigan as representative of the diversity of types of Arc chapters. These leaders were also included in the survey sample and some were included in the interview sample.

Second, in order to further understand the historical development of The Arc Michigan and to confirm the validity of the chapter descriptions generated by our survey and interview data, we interviewed four former Arc leaders who were recommended by The Arc Michigan because they had founded local chapters, played a key role in shaping the evolution and development of The Arc Michigan, and were knowledgeable about local chapters and the state level organization. These former leaders were not involved in any other aspect of the study.

### Phase 1: Leader Survey

To answer our first question—What internal and external factors distinguish inclusion-oriented Arc chapters from other types of Arc chapters?—we surveyed Arc chapter leaders.

### *Procedures*

The survey was piloted with two Arc leaders and revised based on their feedback. Ninety-one surveys were mailed to two leaders from each of the 46 local chapters. To encourage participation, we enclosed a letter from the executive director of The Arc Michigan explaining the importance of this project and invited participants to enter in a lottery for a \$200 donation to their chapter. Follow-up, which included numerous phone calls and two remailings of the survey, began 3 weeks after the first mailing and continued for 2 months.

### *Sample*

We received at least one completed survey from 78% (36/46) of the Arc chapters in Michigan. The overall response rate was 69% (63/91). In many instances when we received more than one survey from a chapter, there was a great deal of missing data in one of the surveys. In order to maximize the number of chapters included in the study, we used one leader survey from each chapter. When we did have complete data from two leaders, we used the leader whose role made them likely to be the most involved in the day-to-day running of the chapter.

### *Measures*

The leader survey measured a local chapter's internal organizational environment, external environment, and current activities and philosophies.

*Organizational Environment.* Two aspects of organizational environment were assessed: (a) leaders' attitudes towards inclusion and specialized services and (b) leaders' perceptions of their members' and board members' attitudes towards inclusion and specialized services. Items were developed based on our review of the inclusion literature and its discussion of the costs and benefits of inclusion.

**LEADERS' ATTITUDES TOWARD FULL INCLUSION:** Leaders responded to Likert type items that assessed the extent to which they agreed or disagreed (1 = *strongly disagree*, 6 = *strongly agree*) with three full inclusion positions (i.e., All people with developmental disabilities should . . . live in fully integrated settings, work in fully integrated settings, be enrolled full-time in regular education classes with appropriate support services). An average score was created ( $\alpha = .92$ ).

**LEADERS' ATTITUDES TOWARD SPECIALIZED SERVICES:** Respondents rated the extent to which they agreed or disagreed (1 = *strongly disagree*,

6 = *strongly agree*) with six items focused on the potential positive impact of involvement in specialized services (e.g., Involvement in specialized services leads to . . . peer support and companionship, opportunities to become productive citizens). An average score was created ( $\alpha = .91$ ).

**LEADERS' PERCEPTIONS OF MEMBERS' AND BOARD MEMBERS' ATTITUDES:** Leaders responded (1 = *strong disagreement*, 6 = *strong agreement*) to one question assessing the extent to which members supported full inclusion and one question assessing their support of specialized services. They responded to the same items for their board members. Average scores were computed for member/board members' support of inclusion ( $r = .83$ ) and of specialized services ( $r = .66$ ). Leaders were also asked to characterize the consensus within their chapters on inclusion on a 4-point scale (1 = *very little*, 4 = *complete consensus*).

**External Environment.** To assess the chapters' external environments, survey items were adapted and modified from the measures of external environment and network linkages in the studies by Foster-Fishman, Salem, Allen and Fahrback (1999) and Foster-Fishman, Salem, Allen, and Fahrback (2001).

**LEADERS' PERCEPTIONS OF ATTITUDES OF KEY EXTERNAL AGENTS:** For each key external agent (i.e., key players, other organizations, and primary funders) leaders responded (1 = *strong disagreement*, 6 = *strong agreement*) to one question assessing the extent to which the external player supported full inclusion and one question assessing support of specialized services. Average scores for external agents' support of inclusion ( $\alpha = .48$ ) and of specialized services ( $\alpha = .77$ ) were computed.

**ORGANIZATIONAL NETWORK:** Leaders were asked to list and classify (i.e., service provider, advocacy group, disabilities funding source, general funding source, or other) the 10 most important organizations their chapters interacted with (i.e., organizations they interact the most with, who have the most influence over how their chapter functions, and/or who they depend on for chapter functioning). Three variables were calculated: (a) percent of advocacy groups in network, (b) percent of service providers in network, and (c) whether or not The Arc Michigan (state organization) was identified as an important organization in the chapter's network.

Leaders also responded to two items (1 = *not at all involved*, 4 = *very involved*) regarding the extent to which they and other key people in their chapters were involved in a variety of inclusion initiatives within Michigan. The two items were averaged ( $r = .47$ ).

**FUNDING REQUIREMENTS:** Leaders were asked to rate the extent to which their funders required them to be involved in the delivery of specialized services (1 = *not at all*, 4 = *a lot*). They were asked the same question with regard to inclusion-guided activities.

*Chapter Activities.* Leaders reported the percentage of their organizational resources that were dedicated to the following activities: (a) delivery of advocacy or education services (e.g., consumer advocacy training, community education, individual and system-level advocacy of all types); (b) provision of support and recreation activities (e.g., personal assistance services, respite services, play groups); and (c) delivery of direct care services (e.g., sheltered workshops, group homes).

*Chapter Service Delivery Philosophies.* Leaders reported the percentage of their organizational resources that were dedicated to providing services or pursuing activities guided by each of the following service delivery philosophies: (a) full inclusion (i.e., full participation and full integration in community settings); (b) partial inclusion (i.e., participation and integration in community settings at least some of the time or when feasible, depending on the needs and capacity of each individual); and (c) specialized services (i.e., involvement in services or settings in which people with developmental disabilities live, work, or participate in activities primarily with other people with disabilities).

*Validation of Data.* Although the process of using a key organizational informant to assess organizational policies and practices is recognized as a valid research strategy (e.g., Provan & Milward, 1995), we were concerned about the single method error variance and the possibility of self-report bias associated with this method. To address these concerns, we examined the validity of leader reports where possible (e.g., chapter activities and philosophies) by comparing the survey data with annual reports collected from Arc chapters. Although leaders are instrumental in generating these reports, they are board approved and thus representative of multiple organizational members' perspectives. We also authenticated our survey generated descriptions of chapter characteristics with key informants and state level Arc leaders. There was a high correspondence between these data sources. Although we must recognize that in our selection of leaders as key informants we are only getting one viewpoint on Arc chapters, these validation processes increase our confidence that the data is not significantly biased by the perceptions of individual leaders.

## **Phase 2: Qualitative Interviews With Chapter Leaders**

To answer our second research question—How have some Arc chapters come to adopt an inclusion philosophy and remain on the forefront of innovation in the field of developmental disabilities?—we used survey data to select four inclusion-oriented chapters and four specialized direct service or support/recreation chapters. This sampling technique, known as the most

similar/most different methodology (Przeworski & Teune, 1970), enabled us to compare and contrast chapters that emphasized very different activities and philosophies.

The leaders (i.e., executive directors or board presidents if no director position existed) from these eight chapters consented to participate in qualitative interviews. These telephone interviews took between 1 and 2 hours and were conducted by the third author. Leaders were asked to describe their chapter's current activities and philosophies, history, local community context and environment with regards to people with developmental disabilities, and the factors which contributed to their chapter's adoption of an inclusion orientation or their current status as specialized service providers. A phenomenological approach to inquiry (Husserl, 1975) was used which allowed the leaders' perspectives of their chapters' histories to emerge. In this approach, critical issues or areas of ambiguity that emerged in the interview were thoroughly explored with the leaders until the interviewer and the informant reached a mutual understanding (Holstein & Gubrium, 1995). To ensure this understanding, the interviewer paraphrased throughout the interview and sought informant verification of this interpretation (Holstein & Gubrium, 1995). Interviews were audiotaped and transcribed.

The qualitative data analysis utilized both a within-case and cross-case approach. First, all three members of the research team independently created a within-case narrative summary (Mishler, 1986) for each interview that described key events in the chapter's historical evolution. At weekly research meetings these narratives were compared for agreement. A modified, grounded theory approach (Glaser & Strauss, 1967) was then used to guide our cross-case content analysis. The three authors independently coded each of the inclusion chapter transcripts for themes that described factors related to the chapters' adoption of inclusion. At weekly team meetings, emergent themes were discussed and areas of disagreement were addressed until consensus was reached. Convergent and disconfirming evidence and additional themes were sought from subsequent interviews (Corbin & Strauss, 1990). Using these themes, a conceptual framework was then developed and, to ensure its applicability, applied to each interview. The specialized service and support chapter interviews were analyzed in a similar manner. In the end, a conceptual model that explained how the inclusion chapters maintained their social change orientation was developed. The trustworthiness of the final conceptual model was significantly enhanced by having three researchers independently extract themes and by verifying the final model against all transcripts. Key insider corroboration of this model also enhanced the authenticity of our conclusions (Guba & Lincoln, 1989).

RESULTS

Types of Arc Chapters in Michigan

In order to characterize the diversity of organizational activities and philosophies supported by Arc chapters in Michigan, we cluster analyzed the leaders' reports of their chapters' organizational activities and philosophies. The variables included in the cluster analysis are listed in Table I. We used a hierarchical cluster solution (Ward's method) in SPSS 7.0 (1995). Based upon our examination of the dendrogram produced, this analysis suggested that four distinct types of Arc chapters existed in Michigan. These chapters varied considerably in the degree to which they supported an inclusion philosophy and engaged in social change activities versus the delivery of specialized services. The clusters included (a) chapters focused on full inclusion-oriented advocacy, education, support, and recreation (N = 10), (b) chapters providing advocacy, education, support, and recreation from a

Table I. Hierarchical Chapter Clusters by Activity and Philosophy

	Cluster A (full inclusion guided activities) N = 10	Cluster B (mixed philosophy) N = 14	Cluster C (specialized direct service) N = 6	Cluster D (specialized support/ recreation) N = 6
Degree of Inclusion (%)				
Resources for full inclusion <sup>a</sup>	91	38	14	5
Resources for partial inclusion <sup>b</sup>	6	45	21	27
Resources for specialized services <sup>c</sup>	2	18	61	69
Type of Services (%)				
Advocacy and education activities	55	49	12	33
Support and recreation activities	31	45	18	67
Direct care services	13	7	66	0

<sup>a</sup>Full inclusion is the full participation and full integration of people with developmental disabilities in community settings, including typical classrooms, work settings, living environments, and recreational settings.

<sup>b</sup>Partial inclusion is the participation and integration of people with developmental disabilities in community settings, including typical classrooms, work settings, living environments, and recreational settings at least some of the time or when feasible, depending on the needs and capacity of each individual.

<sup>c</sup>Specialized services is involvement in special education classrooms, sheltered workshops, group homes, and any other services or settings in which people with developmental disabilities live, work, or participate in activities primarily with other people with disabilities.

mixture of philosophical perspectives ( $N = 14$ ), (c) chapters focused on specialized direct service provision (e.g., sheltered workshops) ( $N = 6$ ), and (d) chapters focused on specialized support and recreation activities ( $N = 6$ ).

The small number of chapters in our sample made it impractical to test the reliability of our solution using a split sample method (Rapkin & Luke, 1993). Instead, we used a method stability check. We ran a  $k$ -mean cluster analysis with a four-group solution, also in SPSS 7.0. Although hierarchical and  $k$ -mean cluster analyses use different algorithms, there was 80% agreement rate between the two solutions. We also tested for agreement using the adjusted Rand statistic, a conservative test which tests for agreement over and above chance agreement (Hubert & Arabie, 1985). The adjusted Rand was .51 indicating a moderate level of agreement between the two solutions. Examination of the crosstabs for the two solutions indicated that there was perfect agreement for Cluster C (specialized direct care), acceptable agreement for Clusters A (inclusion) and D (specialized support and recreation) and poor agreement for Cluster B (mixed philosophy). This is not surprising given that Cluster B contains chapters that mix elements of the other three clusters. Given the fact that we were the least interested in Cluster B (because these chapters did not adhere to one clear philosophy) and that we had external validation for our cluster solution by key informants, we felt confident using this cluster solution. See Table I for a summary of how the four organizational types differentially allocated their resources to specific organizational activities and service delivery philosophies.

### **Factors Associated With an Inclusion Orientation**

We hypothesized that chapters that were inclusion-oriented in their activities and philosophy would be more likely to have an internal and external organizational environment that was supportive of this innovation than chapters that did not adopt an inclusion approach. We conducted a series of ANOVAs and Chi Square analyses, using chapter cluster membership as the predictor, in order to test these hypotheses. ANOVA results are presented in Table II.

#### *The Relationship Between an Inclusion Orientation and Organizational Environment*

We found that the internal organizational environments of Arc chapters that had adopted an inclusion philosophy differed significantly from Arc chapters that had not adopted inclusion.

**Table II.** ANOVA Results for Factors Related to Chapter Clusters

Variable	Cluster A (inclusion guided activities) Mean ( <i>SD</i> )	Cluster B (mixed philosophy) Mean ( <i>SD</i> )	Cluster C (specialized direct service) Mean ( <i>SD</i> )	Cluster D (specialized support/ recreation) Mean ( <i>SD</i> )	Omnibus <i>F</i> ( <i>df</i> = 3, 32)
<i>Organizational culture</i>					
Leader attitudes					
Leader attitude – full inclusion**	5.10 (0.67)	3.79 (1.44)	3.28 (1.88)	4.11 (0.54)	2.88*
Leader attitude – specialized services**	2.95 (1.29)	3.94 (1.08)	4.64 (0.78)	3.72 (0.81)	3.43*
Leader perceptions of member attitudes					
Member/board attitude – full inclusion**	4.65 (0.67)	4.00 (0.85)	2.67 (1.40)	3.67 (1.17)	5.38*
Member/board attitudes – specialized services	3.85 (1.13)	3.89 (0.68)	4.75 (0.52)	4.58 (0.49)	2.70
Chapter consensus on inclusion**	2.90 (0.57)	2.29 (0.73)	2.00 (0)	1.83 (0.41)	5.45*
<i>External environment</i>					
Leader perceptions of external agents' attitudes					
Key contact support of full inclusion**	4.82 (0.52)	4.26 (0.72)	4.00 (0.56)	3.86 (0.31)	4.18*
Key contact support of specialized services	3.5 (1.22)	3.86 (0.94)	4.22 (0.81)	4.14 (0.78)	0.87
Funding requirements					
Funders require inclusion services	2.10 (1.20)	2.15 (1.14)	1.67 (0.82)	1.20 (0.45)	1.23
Funders require specialized services**	1.70 (1.25)	2.00 (0.91)	3.50 (1.22)	2.80 (1.10)	4.03*
Organizational network					
Involvement in inclusion initiatives**	2.95 (0.64)	2.39 (0.74)	1.65 (0.75)	1.83 (0.26)	6.12*
Interaction with advocacy organizations**	54.53 (17.83)	33.81 (19.79)	26.67 (25.28)	21.90 (21.79)	4.09*
Interaction with service providers	40.69 (24.32)	43.30 (24.50)	20.22 (19.87)	52.62 (40.91)	1.35

\*  $p \leq .05$ , Omnibus *F* test was significant.

\*\*  $p \leq .05$ , post hoc analysis using a Tukey test indicated that inclusion chapters differed from one or more of the other chapter types.

*Leaders' Attitudes.* Leaders of inclusion chapters (Cluster A) were more supportive of inclusion ( $\bar{x} = 5.10$ ) and less supportive of specialized services ( $\bar{x} = 2.95$ ) than specialized direct service chapters (Cluster C; inclusion:  $\bar{x} = 3.28$ ; specialized services:  $\bar{x} = 4.64$ ,  $p \leq .05$ ).

*Leaders' Perceptions of Member's Board Member's Attitudes.* Inclusion-oriented chapter leaders (Cluster A) described their members and board members as more supportive of full inclusion ( $\bar{x} = 4.65$ ) than specialized direct service chapters leaders (Cluster C;  $\bar{x} = 2.67$ ,  $p \leq .05$ ). Inclusion chapter leaders (Cluster A) were also more likely to perceive their members as having more consensus on inclusion ( $\bar{x} = 2.90$ ) than were specialized direct service chapter leaders (Cluster C;  $\bar{x} = 2.00$ ,  $p \leq .05$ ) and specialized support/recreation chapter leaders (Cluster D;  $\bar{x} = 1.83$ ,  $p \leq .05$ ).

### *The Relationship Between an Inclusion Orientation and External Environment*

We found that the external environments of Arc chapters that had adopted an inclusion philosophy differed significantly from Arc chapters that had not adopted inclusion.

*External Belief Systems.* Leaders of inclusion chapters (Cluster A) perceived their key external contacts to be more supportive of inclusion ( $\bar{x} = 4.82$ ) than did leaders of specialized support/recreation chapters (Cluster D;  $\bar{x} = 3.86$ ,  $p \leq .05$ ) and specialized direct service chapters (Cluster C;  $\bar{x} = 4.00$ ,  $p \leq .10$ ). Across the four chapter types, leaders did not differ in their perceptions of their chapter's key contact's support for specialized services.

*Funding.* Inclusion chapters (Cluster A) were less likely to have funders who required specialized services ( $\bar{x} = 1.70$ ) than specialized direct service chapters (Cluster C;  $\bar{x} = 3.50$ ,  $p \leq .05$ ). The chapter types did not differ in terms of funders' requirements for inclusion-oriented services.

*Involvement in Inclusion Initiatives.* Inclusion-oriented chapter leaders (Cluster A) reported more leader and member involvement in inclusion initiatives ( $\bar{x} = 2.95$ ) than did leaders of specialized direct service (Cluster C;  $\bar{x} = 1.67$ ,  $p \leq .01$ ) and specialized support/recreation chapters (Cluster D;  $\bar{x} = 1.83$ ,  $p .05$ ).

### *Organizational Network*

Inclusion chapters (Cluster A) had a higher proportion of advocacy organizations in their networks ( $\bar{x} = 54.53\%$ ) than specialized support/recreation (Cluster D;  $\bar{x} = 21.90\%$ ,  $p \leq .05$ ), specialized direct service (Cluster C;

$\bar{x} = 26.67\%$ ,  $p \leq .10$ ), and mixed orientation (Cluster B;  $\bar{x} = 33.81\%$ ,  $p \leq .10$ ) chapters. The four types of Arc chapters also varied in their interactions with The Arc Michigan,  $\chi^2(3) = 7.67$ ,  $p \leq .05$ . Fisher exact test results indicated that inclusion chapters (Cluster A;  $\bar{x} = .90$ ) were more likely than specialized support/recreation chapters (Cluster D;  $\bar{x} = .33$ ) to interact with The Arc Michigan ( $p \leq .05$ ). The four types of Arc chapters did not vary in the extent to which they interacted with service delivery organizations.

### **Understanding the Critical Underlying Processes of Innovative Chapters**

The above results clearly demonstrate that Arc chapters vary considerably in their current activities and guiding service delivery philosophies and that these differences are associated with significantly different internal and external environments. However, the question still remains—How did some chapters come to adopt an inclusion philosophy and remain on the forefront of innovation in the field of developmental disabilities? To examine this question, we conducted extensive retrospective interviews with the leaders of four inclusion chapters (i.e., the four chapters from Cluster A with the highest proportion of activities guided by full inclusion) and four specialized direct service or support/recreation chapters (i.e., the two chapters from Clusters C and D with the highest proportion of specialized services). Overall, we found that the eight chapters had started with almost identical missions and activities, but had taken divergent paths in the 40 years since they were founded. Below we describe the chapters' shared origins and describe the processes inclusion leaders described as critical to their chapters' maintenance of an innovative stance and adoption of a recent innovation in the field of disabilities.

#### *Similar Origins*

Despite their significant differences today, the eight chapters shared very similar origins. Founded in the 1950s by parents of children with developmental disabilities, they were all created to promote change within the field of developmental disabilities. Initially, they emphasized improving institutions and creating local community-based options for their children. Upon achieving some of these initial goals, the chapters then evolved into service providers, offering educational, vocational, and/or social activities and services for individuals with developmental disabilities that were not available in their communities. These services were primarily guided by the dominant service delivery philosophy of that time—specialized care.

### *Divergent Paths*

In the 1960s and 1970s, the eight chapters took different trajectories, with four chapters remaining in their role as a provider of specialized, direct care and support/recreation services. In contrast, the other four chapters each rededicated themselves to their role as an innovator and change agent and accordingly spun off their segregated services to other organizations. Although the four inclusion chapters are located in different types of communities, took different paths towards inclusion, and emphasized different aspects of service delivery innovation, they credited the same organizational characteristics as critical to their ability to remain open to innovation. Specialized service chapters did not share these attributes.

#### *Factors Associated With Arc Chapters Adopting Innovations*

Inclusion-oriented chapters were distinguished from the other chapters by the fact that they consciously and proactively shaped their internal and external environments to support their social change mission. These chapters had a clear vision, a change orientation, and a strategic approach to promoting change. They purposefully constructed a supportive network and avoided external dependencies that would interfere with their change mission.

*Organizational Environment.* Inclusion chapters had a clearly articulated organizational mission, were change-oriented, and acted proactively and creatively to overcome barriers to implementing change.

CHANGE ORIENTATION: A change orientation was infused throughout the history of the inclusion-oriented chapters. Early in the development of these chapters, leaders and vocal members embraced the belief that improving the lives of persons with disabilities would only be accomplished through proactive change. They refused to accept the status quo for persons with disabilities and continually sought ways to enhance the quality of their lives. Toward that end, these chapters viewed their role as being a catalyst for change. Throughout their histories they identified new service delivery philosophies and techniques, introduced their communities to these innovations, worked towards their adoption, and provided the resources necessary to facilitate change. Inclusion was just one of many innovations they embraced along the way.

We ended up saying: forget what exists . . . They've [parents] gotten used to what can I get from the system. And because that's what they've had to focus on so much that they kind of have lost track of the ability to say: What do I want? What does my son or daughter want? And not base it, not think about that, in relationship to what exists.

We're not just saying change. We'll also help implement it . . . People see that you're not just trying to create a problem but . . . what you're trying to do is provide solutions.

Although many leaders described themselves as the primary movers in pushing for change, all acknowledged that, in the long run, they could not have maintained a change orientation without the support of their board and their members.

I don't think any of the things that we did could have happened if there hadn't been parents who saw it, and believed it, and therefore wanted to carry it . . . I can enable. I can assist. I can talk about techniques. I'm a good organizer. But if there weren't parents who wanted to carry it and if there weren't parents who wanted it for their son and daughter, it just would not have occurred.

The board that I hired on with was very supportive of everyone's right to belong. We've created a momentum and a movement on the path and so we're able to carry on forward because people are accepting of that.

**CONSCIOUS PHILOSOPHY:** The inclusion chapters all had well-developed organizational mission statements and clearly articulated service delivery philosophies.

We've made changes because we kept our philosophy current . . . A lot of people have never gotten past the walls that were set up 40 years ago.

We all [Arc chapters] started in the same place, but some have developed a broader philosophy or expectation for people with disabilities.

This vision embraced the philosophy that all persons with disabilities should be fully included in their communities with the necessary supports.

We value inclusion. We value full participation and equal participation . . . people with disabilities must be provided those accommodations and supports that put them on an equal basis or equal footing with other people.

Perhaps most importantly, the leaders of these chapters recognized and accepted the consequences of their philosophical position. They were, in the end, willing to spin-off specialized services and activities which were incompatible with their philosophy, even though they all experienced some loss of members and funding as a result.

I'm telling you it was anguishing for us to give up the dollars that went with our residential program. Here we just get . . . healthy financially, and now all of a sudden we're gonna impoverish ourselves as a poor little advocacy agency now again. That's hard to do . . . But the values have to come first. Not everyone is willing to say that or do that.

Now we moved to inclusion and we lost some members. And when we moved on the institutional thing [closing it] and took a stance, we lost some members.

**STRATEGIC:** The inclusion chapters all had conscious strategies for promoting change both within their organization and their local communities.

Three of these chapters had a collaborative orientation, believing that change required strong, positive relationships with other key players in their communities. They viewed those within their community as capable and desirous of improving the lives of people with disabilities:

It was just kind of a different approach. It was more, more conciliatory, more community involved. I think one of the things that community building does is it, and it relies upon, has a whole different attitude about a community. First of all, we believe that people in the community are hospitable and they like to know folks with disabilities, and they like to hire them, and they like to include them in community places, and they like to become friends. And so we kind of had approached the community with that expectation.

In contrast, one inclusion chapter in our sample adopted a more aggressive, adversarial approach to change, viewing those within its community as entrenched within the status quo and resistant to change. It viewed itself as an outsider, responsible for challenging the system.

The system doesn't wanna do this stuff, doesn't wanna change from what it has always done. I mean, try to change education. That's a bigger institution than the military, and how quick are they going to change, right?

Within their own chapters, leaders also described strategies they employed to convince members of the value of inclusion. These varied across chapters and included persuasion, education, reliance on authorities, and demonstrations of how inclusion works in the community.

We have had workshops, brought speakers in, we've asked people to go visit places . . . we're constantly talking about what we believe in.

One leader described several creative strategies for demonstrating how inclusion could work.

In Canada in certain places . . . things were going on that clearly made sense . . . So I ended up taking [over 400] parents to see it. What struck one of those parents was . . . she cried all the way home saying "I never believed my child could have a friend."

I took any parent who would be willing to go . . . to see the disability twin of their child living in the community . . . So I had to find somebody who was more impaired than their son or daughter living in the community . . . and they got to see how those people lived and what they did. The settings were so much nicer, the things that occurred were so much nicer, the amount of attention they got, the number of staff. Everything about it was better, and they couldn't deny that.

*External Environment.* The four inclusion chapters all described themselves as strategically managing their external environment in order to maximize support for and minimize barriers to their change mission. Central to this strategy was a selective organizational permeability. They actively created a supportive environment, protecting themselves from the influence

of environmental forces that attempted to dictate their organizational path and choices.

**CONSTRUCTION OF SUPPORTIVE NETWORKS:** Inclusion chapters worked proactively to create a supportive local environment and to seek out individuals, settings, and organizations that supported their change mission and an inclusion philosophy. For example, leaders described the importance of promoting an inclusion agenda with local agencies.

I think we have some pretty good people at Community Mental Health who were key partners. I mean it [adopting an inclusion philosophy] couldn't have happened if we couldn't have gotten the mental health system to think differently about how they spent money to support people.

It's part of our ability to facilitate the changes—getting other people to buy into our philosophy—so we're not standing out there all by ourselves.

Interestingly, although chapters worked to create support within their local communities, they did not limit themselves to their local context in their search for innovative settings and resources. Leaders described traveling around the United States and Canada in search of innovative ideas and settings, taking advantage of state level and national professional training opportunities, and recruiting speakers to bring these ideas back to their communities. They created for themselves an external environment, beyond the geographical boundaries of their local communities, that included change-oriented individuals, settings, and organizations.

My board even empowered me to go find the best stuff. And then to bring it back, which is how we got supported employment ahead of anybody else in the state.

I've gone for instance to TASH Conferences . . . TASH is supportive of everyone's right to be included. So that . . . served for me to be constant reinforcement of a good attitude, the right philosophy. And so as I learned things at this conference, then I'd also be able to carry back things that I've learned . . . and implement them in our local county.

I was able to use the state [Arc] and the national [Arc] position on inclusion. On paper it's a very strong position. So I'd use that to our advantage locally, promoting that change toward everyone being included.

**AVOIDANCE OF DEPENDENCY ON SERVICE DOLLARS:** In addition to creating a supportive context, inclusion chapters consciously avoided the influences of external players who did not share their philosophy. Most notably, they did not accept funding, and in some cases gave up existing funding, from organizations that would require them to engage in activities that were at odds with their mission. Leaders talked extensively about the power of funding to influence a chapter's activities and philosophies. Amazingly, they were willing to sacrifice financial security and seek out alternative sources of funding in order to maintain their role as change agents.

It's nice getting the funding, but if it means we cannot abide by our own values and our own commitments, how do we do that?

Another way that I've been able to promote what I have, is by using them [an inclusion oriented funder] as funders and being involved in their activities. . . . It's given me a base of funding that if my local Community Mental Health did not see issues my way, I still have this other funding source that's very agreeable to our chapter's way of doing things.

*Negative Case Analysis.* In contrast to the stories told by leaders of the inclusion chapters, leaders of specialized direct service and support/recreation chapters did not express the proactive change orientation or the purposeful management of the internal and external environment described above. Instead, they expressed an allegiance to the status quo and a respect for tradition.

We've stuck to the mission that we had, you know, years ago, but have professionalized the delivery of what we give our clients, or as they're now called, consumers.

We don't abandon the traditional mode . . . . And I know that has been a strategy in some places where you just close shop and boom you go into something completely different. We've taken more of a gradual approach . . . . You try not to make a break with the past, because in the past some very wonderful things happened and there were very wonderful people that made today possible really. And the old way of doing things are really a stepping stone toward the future.

These leaders described playing a more reactive role in relation to their local communities. They viewed themselves as meeting needs, filling gaps, and being shaped by their local community, rather than as pushing the community forward.

We're providing a good service which, had there been someone else to take it over, years ago, like had Community Mental Health been able and eager to build a center and take it under their umbrella, we probably would still be just doing advocacy . . . but there wasn't that desire by Community Mental Health.

No agency took initiative to provide service and so this agency did. They saw that as their role.

We've tried to do what was necessary, a reactive mentality I suppose.

Finally, they described how their funding and service commitments influenced the kinds of activities they engaged in.

Then [the chapter] invested in the facility in a pretty significant way. So it was hard to spin that off.

Although you do provide advocacy through your service provision, still there are many things that maybe we should be doing as advocates that we can't. We just simply don't have time because we are in the service business and so I think it compromises some what our advocacy activity.

In summary, across inclusion chapters there emerged consistent elements of a social change strategy. These elements distinguished inclusion

chapters from those chapters that had continued to deliver specialized direct care and support/recreation services.

## DISCUSSION

The findings from this study suggest that CAOs are best positioned to adopt an innovation when they have an internal and external environment compatible with that change. Arc chapters that adopted an inclusion philosophy were more likely to have an internal belief system and external contacts and funders that supported inclusion. Our data also suggests that CAOs need not be passive recipients of these internal and external forces. According to chapter leaders and key informants, inclusion-oriented chapters were successful at innovation adoption because they proactively constructed a supportive context.

This strategic ability seems to have important implications for a CAO's capacity to maintain an openness to innovation once it transitions into a service providing organization. Certainly, as Riger (1984) suggested, for many Arc chapters the transition into a service providing role did result in a reduced focus on social change. Our findings also suggest, however, that the adoption of a service delivery role does not necessarily result in the loss of a CAO's ability to promote social change and embrace new innovations. Although the inclusion chapters had at one time delivered traditional services, they had successfully regained their social change mission through a strategic reconstruction of their internal and external environments. This strategic approach allowed them to create the context needed to support the adoption of innovation. The character of the internal and external environments of inclusion-oriented CAOs and the proactive strategies they used to construct such a context are described below.

### Characteristics of a Supportive Internal Environment

Overall, our quantitative and qualitative findings suggest that Arc chapters that adopted an inclusion orientation were more likely to have an internal belief system compatible with that change. According to leader reports, these Arc chapters were more likely to have leaders, members, and board members who had positive attitudes about and consensus on inclusion. The leaders' ability to build consensus among their membership regarding inclusion appears to be the result of two important practices. First, leaders worked to convince members of the value of inclusion by introducing them to this new service philosophy and seeking to demonstrate its effectiveness. Second, when efforts to build consensus failed, these chapters were willing

to lose members who held conflicting ideologies. These findings are consistent with Klein and Sorra's (1996) assertion that innovation is more successful when it is compatible with the existing organizational environment and with the findings of others that both leader and member attitudes are essential components of this internal environment (e.g., Damanpour, 1991; Schein, 1985).

Leaders' accounts of how their chapters came to adopt inclusion also highlight the fact that adoption of inclusion was a reflection of the chapters' overall view of themselves as proactive change agents. Chapters were more likely to have adopted an inclusion philosophy and to have maintained their social change orientation throughout their history when they had leaders who strongly believed in The Arc's social change mission and who proactively pursued change.

In summary, inclusion-oriented chapters created an organizational environment that supported the adoption of innovation by embracing a change mission, defining a clear guiding philosophy for the chapter, and by hiring or supporting a leader who worked to bring members to consensus regarding the chapter's direction. Within such an environment, chapters were able to make the tough choices that were required (e.g., giving up funding, spinning off services) in order to challenge the status quo and maintain their stance as an agent for change.

### **Characteristics of an External Environment Compatible With Innovation**

In order for disability-focused CAOs to remain open to innovation, it appears important for them to interact with other organizations that value change and to view the key players and other organizations in their environment as supportive of the innovations they adopt. Interestingly, inclusion chapters did not differ from other chapters with regard to their external environment's ideological support of the status quo (i.e., specialized services). They were not less likely to interact with service providers, nor did they view funders, key players, and other organizations in their external environment as less supportive of specialized services. In other words, inclusion chapters existed in the same traditional service environment as the other chapters. They appear, however, to also have players and settings in their environment that support innovation. This finding is consistent with Alford's (1992) description of CAOs as functioning in multiple orbits and with Stone's (1996) description of one Arc chapter's experience of dealing with these multiple environmental influences. Inclusion chapters appear to have more diverse ideological environments than those experienced by specialized service chapters. Although this exposes these chapters to more

potential for conflict (Oliver, 1991), it also exposes them to a diversity of beliefs, thus facilitating the adoption of new ideas.

The chapter's ability to manage its resource dependencies was also related to the adoption of inclusion. Inclusion chapters were less likely to have funders that required the delivery of specialized services. Interestingly, they were not more likely to have funders who required the delivery of inclusion-guided services. This suggests that adoption of inclusion is driven by the infusion of beliefs from the external environment, not by dependency on external resources.

Our qualitative findings are consistent with this interpretation and highlight the strategies chapter leaders adopted to proactively shape the external environment. Arc leaders describe a process of selective permeability, by which they sought out individuals, ideas, and settings that provided ideological and resource support for innovation. In addition they consciously avoided resource dependencies that would require them to act in ways that were not consistent with their goals, by avoiding and/or terminating funding arrangements that were incompatible with their mission. Perhaps what is most impressive is the financial costs such choices exacted on these chapters. Inclusion oriented chapters had on average, significantly smaller operating budgets ( $M = \$375K$ ) than those chapters that offered specialized services ( $M = \$1.4M$ ). Inclusion chapters in our sample may have been willing to lose the dollars associated with segregated service delivery because an alternative funding source, dedicated to the promotion of inclusion and other innovations in the disabilities arena, exists in our state. Although the grants available from this funder are not as large as grants available for traditional service delivery, the presence of this alternative funder within the state does make it more viable for Arc chapters with a social change focus to selectively choose their activities and funding sources.

Our findings are consistent with institutional theorists who have argued that, although the external environment exerts pressure on organizations, organizations can be strategic in how they respond to such pressures and may take initiative to shape their environments (Child, 1972; Goodrick & Salancik, 1996; Oliver, 1991). This is particularly true when, as is the case in the field of developmental disabilities, there are conflicting ideologies in the external environment (Oliver, 1991) and when there is a high level of uncertainty about what practices should be in place (Goodrick & Salancik, 1996). Although all Arc chapters exist to some degree within an external environment that supports and funds specialized services, inclusion chapters constructed their external environments to provide ideological support for their change mission and to avoid resource dependencies that would interfere with the adoption of inclusion.

### Study Limitations

While we did find consistent relationships between chapter types and the character of their internal and external environments in both our qualitative and quantitative data, it is important to interpret our findings with caution. The cross-sectional nature of our study makes it impossible to determine the causal direction of these relationships. In addition, it is certainly possible that leaders, our primary data source, have presented a biased portrait of themselves, their role in their chapter's history, and their chapter's character and history. Leaders, who ideologically supported an inclusion model, may have been more likely to describe their organization's activities as compatible with this model, given the social desirability of such a response. Leaders are also prone to attribute their organization's success and character to their own initiatives (e.g., Schein, 1985) and to describe organizational goals as proactive strategies, when in fact, these goals may be more accurately described as post hoc descriptions of organizational behavior (Weick, 1979b). It is certainly possible that other informants (e.g., members, board members) would tell a different story about these chapters.

However, our triangulation of qualitative and quantitative methods, our extensive interviews with chapter leaders and several types of key informants, and our analysis of written organizational documents provide support for the conclusions drawn. From all of our informants and different sources of data, we heard a consistent story about the adoption of inclusion. This story is also consistent with the findings of other researchers (e.g., Kiracofe, 1994; Magis-Agosta, 1994; Riger, 1984).

It is also important to discuss the other limitations of this study. The psychometric properties of some of our scales are rather weak. Four variables were measured with only one item (i.e., funding requirements to provide specialized services, funding requirements to provide inclusion-based services, member consensus regarding inclusion, and whether or not the chapter viewed The Arc Michigan as an important organization in its network) and some of our scales have somewhat weak reliabilities. Single item measures and scales with low reliabilities can contain so much error variance that it reduces the likelihood of finding hypothesized relationships. The fact that we found sensible patterns of relationships using these variables and the convergence of the qualitative and quantitative data minimize these reliability concerns.

Finally, there are competing hypotheses that may explain our findings. One alternative explanation for our findings is that different chapters of The Arc Michigan have evolved to serve individuals with different levels of disabilities. Some chapters may resist an inclusion philosophy because their constituents are more seriously disabled and inclusion chapters may be better

able to adopt innovations because they serve a less disabled consumer group. We checked this hypothesis with our key informants and were told that the inclusion-oriented chapters also serve a population with severe disabilities. These reports are further confirmed by the fact that all of the inclusion-oriented chapters received funding from an organization that requires an emphasis on serving individuals with the most severe disabilities. Although we have validated our data and our conclusions by using multiple methods and have authenticated these conclusions with multiple outside sources, we must treat our findings as formative and as providing a grounding for future longitudinal, multisource work.

### Conclusions

Although CAOs are at risk of becoming less radical over time if they embrace a service role, it appears that the careful construction of an internal and external environment that supports their social change orientation helps them maintain an openness to innovation. Strategies that appeared to help local Arc chapters maintain this openness to innovation included (a) maintaining a social change orientation, (b) creating a conscious philosophy or vision, (c) embracing a proactive strategy for achieving chapter goals and overcoming barriers to change, (d) constructing a supportive network, and (e) consciously avoiding dependency on funders who required them to engage in activities that were inconsistent with their social change mission and innovations. These elements are consistent with change strategies and processes described by other researchers (e.g., Kiracofe, 1994; Magis-Agosta, 1994).

One question that remains unanswered is—What is it about these chapters that led them to employ these strategies? One important distinguishing feature of these chapters appears to be the clear, strategic vision held by their leaders. This vision served as a basis for developing a strategy for action, constructing a supportive network, and making difficult decisions that would influence the future direction of the chapter. The power of an organization's mission to motivate it to respond actively to its environment has been described by other researchers (e.g., Oliver, 1991).

In the social services arena, not-for-profits, such as the Arc, have come to play an important role in the delivery of services (Saidel, 1991). CAOs, however, also have a continuing role to play in influencing the policy process and challenging the status quo with regard to a variety of social issues. As a key informant in Saidel's study of interdependence between state and voluntary-sector organizations expressed, "We are all better served to the extent that non-profits have enough financial and moral resources to stand

up to government, to point out what's right and wrong" (Saidel, 1989, p. 343). The results of our study provide a framework by which CAOs can take such a stance and proactively maintain a change mission.

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