Article

The Politics of Alignment and the 'Quiet Transgender Revolution' in Fortune 500 Corporations, 2008 to 2017

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Abstract

This study shows that when social movements achieve a general acceptance for the legitimacy of their cause in the institutional environment, they may start pursuing further demands by challenging their target entities through the 'politics of alignment,' meaning engaging these entities in professionally developed programs and demanding specific outcomes by introducing timed interventions in them. This study exemplifies this politics using the case of American LGBT workplace movement which used its Corporate Equality Index (CEI) program to extend reputational and economic benefits to its target entities—the Fortune 500 corporations—but also added an intervention to this program in 2011 to demand the adoption of gender transition-related health benefits by these corporations as a specific movement outcome which, if not met, would make these corporations lose the benefits they had been deriving through their performance in the CEI program. A longitudinal study of 456 Fortune 500 corporations from 2008 to 2017 conducted through hazard rate analysis indicates that corporations affected by this intervention, as well as by other movement factors, were the most likely to adopt these health benefits for their employees. Further quantitative analysis—using QCA—shows that early adoptions were explained largely by the LGBT workplace movement forces and the later adoptions by insider activism and isomorphic diffusion. These findings highlight that an incisive understanding of organizational change can be best gathered by examining social movements and institutional forces together.

Key words: institutional change, organizational change, policy diffusion, politics of alignment, social movements, strategic interactions, transgender, social movement outcomes

JEL classification: C6 fuzzy analysis, D910 prospect theory, L2 firm behavior

1. Introduction

How are social movements carried out? A range of studies draw attention to the non-disruptive means of carrying them out through theorizing such possibilities (e.g. Bernstein, 1997; Armstrong and Bernstein, 2008; Fligstein and McAdam, 2011) and considering them in practice in relation to social movements targeting various institutions such as the state (Harris, 2017), workplace (Creed and Scully, 2000), the military and church (Katzenstein, 1998). This non-contentious engagement with target entities provides several instances of meeting social movement demands, such as the LGBT-specific employment policies at work (Briscoe and Safford, 2008; Everly and Schwarz, 2015), corporations' compliance with the global labor standards (Helfen *et al.*, 2015) and the adoption of healthcare policies in emerging democracies (Harris, 2017). How do these tactics look like? Under what conditions do activists use them to pursue their demands? Why do some target entities comply to the demands earlier, and some later, when these tactics are used? And when a range of target entities comply to a social movement demand pursued through non-contentious tactics, to what extent should the forces of diffusion be credited for this change vis-à-vis to the social movement forces?

This paper answers above questions using an in-depth study of the adoption of gender transition-related health benefits, or simply transition-related health benefits, in recent years by Fortune 500 business corporations. An employer can be said to offer these health benefits to its employees if it fulfills several criteria going above and beyond what is conventionally understood as an equitable healthcare coverage for transgender employees, that is, having a plan coverage without any blanket exclusions for transgender people and making such documentation readily available to employees. According to the World Professional Association for Transgender Health (WPATH), transition-related health benefits include medical services necessary for sex-reassignment, such as reconstructive surgical procedures, clinical visits, laboratory tests, hormonal therapies, pharmacy needs, necessary non-transition services related to sex-reassignment, mental health services and other routine, chronic and urgent services (HRC, 2011).

Figure 1 summarizes the increase in the number of corporations adopting transition-related health benefits (adopters) between 2008 and 2017 among Fortune 500 corporations, showing a marginal increase from 24 in 2008 to approximately 40 in 2010, followed by a spike in 2011 to approximately 100. In 2014, a third of Fortune 500 corporations were offering transition-related health benefits, and this figure exceeded 300 in 2017. This surge was noticed by major media outlets, such as The Washington Post, The Advocate, Fortune, The Huffington Post, The Associated Press and Yahoo News, which reported that corporate America, through offering its employees transition-related health benefits, was increasingly becoming transgender-inclusive. The various reports highlighted how corporations referred to employee well-being as providing the business case for transgender inclusion, with some reports calling it a 'stunning tipping point' in being gay-friendly, 'changing gender at work', or a 'quiet transgender revolution' in the Fortune 500 Corporations.

Social scientists contend that social movements are a central factor in explaining adoption of diversity practices by corporations (Meyerson and Scully, 1995; Kelly and Dobbin, 1999). Business corporations are considered to have revised their employment nondiscrimination policies to include race and gender as protected categories largely due to social movement forces and coercive pressures from the state (Skrentny, 2006; Edelman *et al.*, 2011).
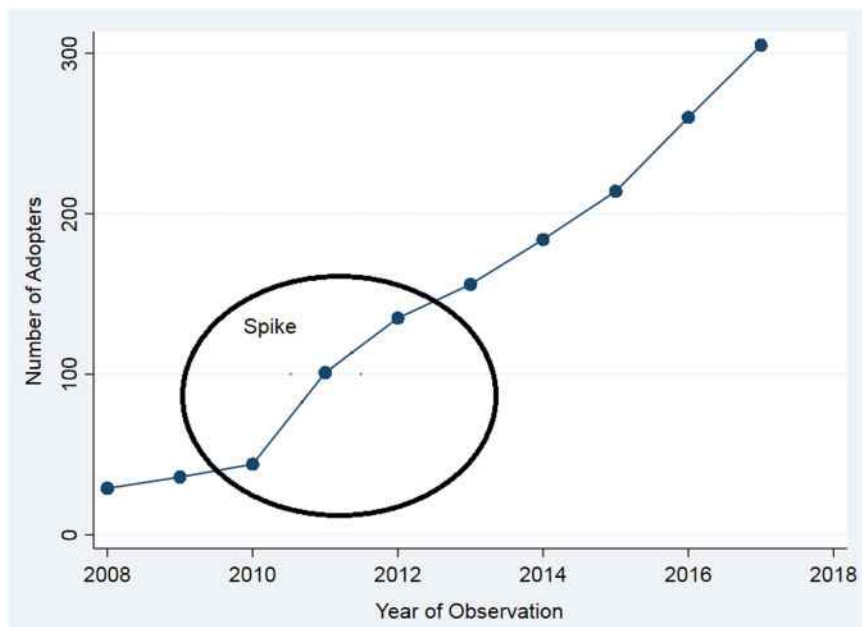
Figure 1 The number of Fortune 500 corporations offering transition-related health benefits to their employees, by year.

This paper examines the adoption of transition-related health benefits among Fortune 500 corporations between 2008 and 2017 as a phenomenon occurring due to social movement pressures, with primary responsibility for this change coming from the LGBT workplace movement. More specifically, this paper focuses on *what* the LGBT workplace movement did to produce that change. It also examines the cases of late adoption wherein certain businesses adopted these health benefits without being directly affected by the actions of the movement.

To explain the adoption of transition-related health benefits in Fortune 500 corporations, this study demonstrates how the LGBT workplace movement actors pursued these goals by conducting the politics of alignment with Fortune 500 business corporations as their target entities. The politics of alignment can be understood as challenging target entities to meet social movement demands by aligning these demands with the interests of these entities. It is argued that when Social Movement Organizations' (SMOs') programs benefit their target entities, these SMOs may conduct specific interventions in these programs, demanding certain outcomes from their target entities that would accomplish the movement goals. If the target entities do not meet these demands, they would stand to lose the benefits they had been deriving out of these programs. SMOs are more likely to make demands by introducing interventions in their programs at the time of a positive shift in the institutional environment for these demands. In this paper, the quantitative analyses of the adoption of transition-related employment health benefits show that corporations which would lose the reputational and economic benefits from the Corporate Equality Index (CEI) program of the Human Rights Campaign (HRC) as a result of not adopting these health benefits for their

employees—introduced as an intervention in the CEI program in 2011—were significantly more likely to adopt them than were those who would not.

Using a hazard rate analysis of a sample of 456 Fortune 500 corporations that had either adopted the transition-related health benefits for their employees or not by 2017, this paper demonstrates that, although several organizational and institutional factors highlighted in earlier studies (e.g. Bell *et al.*, 2011; Everly and Schwarz, 2015; Cook and Glass, 2016) were significant in predicting the adoption of transition-related health benefits over the years, an intervention introduced by the HRC in its CEI program, along with the insider activism from LGBT employee groups in corporations and the access of LGBT workplace movement organizations to corporations, had an overriding effect on those factors in explaining the adoption of these health benefits. A qualitative comparative analysis (QCA) of adopters showed that while the early adopters were largely those affected by the intervention, the late adopters—mainly the conservative corporations that were unaffected by the movement intervention—followed suit largely because of the isomorphic diffusion of these health benefits among an increasing number of Fortune 500 corporations within their respective industries or geographical locations.

This study illustrates how social movement actors can derive outcomes from their target entities through the 'politics of alignment', meaning engaging these entities in professionally created programs and leveraging these programs to pursue social movement outcomes by aligning the demands with the interests and vulnerabilities of the target entities. The current literature on organizations, social movements and behavioral economics offers compelling theoretical underpinnings to this approach of achieving movement outcomes.

2. The Politics of Alignment in Social Movements

Social scientists contend that social movements operate in broader fields of action heavily characterized by social movement–target entity interactions, many of which occur within institutional domains (e.g. Tarrow, 2011). These interactions often take advantage of the 'rich organizational life', that is, the dense array of institutionally available resources to pursue activism, as well as the power structures that activists can access through developing ties and proximity with their target entities (Von Eschen *et al.*, 1971). The social movements literature has long noted the process of 'dramatic ingratiation' whereby movement actors strategically accommodate the values and aims of their target entities to attain their own goals (Snow, 1979).

Recent theorizing on activism targeting business corporations observes that activists pay close attention to what matters to their target entities and *align* their goals with their target entities' objectives, making a business case for meeting their mutually compatible goals. Addressing these aligned interests creates a 'win-win' situation for both the target entities and the activists (Bernstein and Ghosh, 2015). The framework of politics of alignment draws on Bernstein and Ghosh's work on LGBT insider activism in corporations (2015) wherein they argue that these activists—who also are the employees of their target entities—use their access to the top management through employee resource groups and use strategic microencounters (Creed and Scully, 2000) to make the business case for adopting several LGBT-inclusive employment policies and practices, such as sexual and gender identity nondiscrimination policies, same-sex domestic partner benefits, other health benefits for same-sex families and outreach to LGBT communities through, for example, participating in pride

parades and AIDS walk. The insider activists make the business case by advocating how these policy changes and practices would help their employer in retaining (as well as attracting) talented LGBT employees and expanding their product markets to LGBT consumers. These advocacies also highlight the adoption of similar policies and practices by peer corporations and questioning these employers directly, 'don't we want to be become as good as [our peers]?' In short, insider activists' mode of challenging their own employers as target entities involves aligning the movement demands with these entities' interests. Bernstein and Ghosh (2015) characterize this form of advocacy as 'repertoires of alignment' which they define as 'a combination of strategies deployed by social movement actors to achieve their collective goals by working towards meeting the objectives and interests of their target entities'. For business corporations, attracting and retaining talented employees, expanding their product markets and a favorable benchmarking with industry and geographical peers constitute some of the primary interests, and the LGBT insider activists often had their demands met by successfully aligning them with these interests.

The social movement literature is favorable toward extending the tactics of alignment to outsider activism as well. To begin with, scholars have observed that current activism targeting corporations ought to be less contentious and less politicized when demanding specific benefits, policies and practices (see King and Pearce, 2010, p. 254). Recent empirical studies have suggested broader possibilities of achieving social movement success using the politics of aligning and developing proximities with target entities. For example, movement actors targeting policy reforms may seek alignment with organizations and institutional structures outside of their fields. Harris (2017) found that in emerging democracies such as Thailand and Brazil, the movement for universal healthcare access was led by progressive doctors and medical professionals through their ties with the government.

Movement tactics deployed by aligning with target entities are relevant to LGBT social movements because contemporary LGBT political organizing has moved on from an oppositional us versus them approach to a 'building bridges' approach (Ghaziani, 2011). Corporations are considered to have adopted domestic partner benefits for their lesbian and gay employees by using micromobilization as a tactical approach to initiate face-to-face encounters with policy-makers for advocating, educating and making claims that partner benefits were integral to the family lives of gay people (Creed and Scully, 2000). Briscoe and Safford (2008) observe that activists advocating for the adoption of domestic partner benefits by corporations avoided obstructive tactics and protests; instead, they drew on economic justifications that resonated with the employers to support their advocacy.

The instances of actor-target alignment are expanding the traditionally understood gamut of options used by social movements. Through combining the roles of insider activism (e.g. Katzenstein, 1998; Raeburn, 2004) and institutional forces such as markets and inter-organizational networks (e.g. King and Pearce, 2010; Pacheco and Dean, 2015), activists have been increasingly claiming a space within multi-institutional activism where they are no longer complete outsiders in relation to their target entities and instead can engage in non-disruptive interactions with them in various institutional fields of action. These interactions result from a deeper social movement understanding of target entities and of institutional channels, of how they are structured and how they function, which facilitates pursuing social movement goals (Snow, 2004; Van Dyke *et al.*, 2004; Armstrong and Bernstein, 2008).

Extending this approach, this paper conceptualizes politics of alignment in social movements which can be understood as engaging target entities in professionally created programs to benefit them while also leveraging these programs to demand certain movement outcomes from them. How do SMOs engage their target entities in such social movement programs? How could they leverage these programs to demand movement outcomes? Which target entities are most, and least, likely to be affected by this politics? The ensuing sections will answer these questions through a study of how LGBT workplace movement in the US targeted Fortune 500 corporations for adopting transition-related health benefits.

2.1 Social movement programs and intervention as tools for alignment

In her book *Changing Corporate America from Inside Out: Lesbian and Gay Workplace Rights* (2004), Nicole Raeburn notes that the LGBT workplace movement began in the early 1980s before gaining prominence in the 1990s; it demanded that workplaces should be equitable for LGBT employees. To that end, this movement advocated for the inclusion of sexual orientation and gender identity/expressions as protected categories within equal employment opportunity (EEO) policies in corporations and demanded that employers offer domestic partner benefits to their lesbian and gay employees. Raeburn (2004) notes that, although several social movement organizations had worked on these types of issues, the HRC and Out & Equal Workplace Advocates were the two most prominent organizations in LGBT workplace activism. The HRC initiated its workplace activism program, the 'Work-Net project', in the mid-1990s. In 2002, it consolidated the resources of this project into the CEI program, which intended to annually survey corporations and publish their ratings on the adoption of LGBT-friendly policies and benefits.

After gaining substantial wins for the adoption of nondiscrimination policies and domestic partner benefits (Raeburn, 2004), the HRC started publishing data on the adoption of transition-related health benefits in 2008. It published that information for another two years and, in 2011, made the provision of these health benefits as a 10-point criterion in the CEI. As a result, the fulfillment of this criterion became mandatory for attaining a 100% score in the index from 2011 (HRC, 2011). The corporations that were affected by this intervention were the ones whose index scores would plummet if they did not adopt these health benefits. These corporations were the ones that had enjoyed high scores, like 100 and 95% in 2010 without adopting the transition-related health benefits, and whose index score would have decreased to 90% in 2011 if they continued to be non-adopters given that their performance on the rest of the indexed criteria remained the same as in the previous year.

The use of third-party rating systems within the domains of corporate social responsibility, environment and sustainability and workforce diversity to influence corporate behaviors is well known. External ratings can provide buyers with useful information for making buying decisions that they generally cannot obtain on their own. Therefore, when improving a rating has potential benefits higher than the costs, corporations with poor ratings tend to make efforts to improve their rating. When a rating agency expands its rating criteria, it may cause an 'exogenous shock', driving corporations to meet the new criterion(a) (Chatterji and Toffel, 2010). When poorly rated corporations are surrounded by highly rated corporations, they are more likely to work on improving their rating, thus diffusing rating criteria even further by producing spillover effects (Sharkey and Bromley, 2015). These studies offer useful insights on how rating systems for corporations can be used by SMOs as well.

Expanding the rating criteria to make the rated entities work on achieving new milestones can be considered an 'intervention'. The term 'intervention' is seldom used in the social movements' literature, but the organizations literature understands intervention as a measurable 'step' introduced to bring about an internal change—mainly for improving the performance—in a corporation (e.g. Gist, 1987; Huselid, 1995; Sturman, 2000). Organizational studies exemplify interventions in corporations through numerous examples such as adding enrichment to current job descriptions for enhancing employee performance (Huselid, 1995), introducing scientific applications in investment decision programs (Sturman, 2000), and adding efficacy modules in existing training programs to enhance the capabilities of minority employees (Gist, 1987).

When the rating agency is a social movement organization, an expansion of rating criteria can be studied as an intervention to elucidate what makes a social movement organization introduce these interventions. When would a SMO bring an intervention to its program? Why would some corporations respond to them and others will not? Furthermore, do such interventions produce mere 'exogenous shocks' involving a sporadic achievement of social movement demands or could such interventions have longer lasting effects? If the latter, what makes that happen?

2.2 External environment and legitimacy to the movement

The decade of 2010 marked a steady positive shift in the social environment toward LGBT issues. For example, the data from Pew Research Center shows that favorable public opinion toward same-sex marriage had been steadily increasing, and the unfavorable opinion had been decreasing, since 2009. The year 2011, particularly, was the turning point when more Americans supported gay marriage than opposed it.[1] To gather insights on HRC's intervention of expanding its CEI in 2011, I contacted the HRC Workplace Equality Foundation for an interview on November 2017. The Deputy Director of the Foundation responded to my request and I interviewed her on December 5, 2017. In that interview, the Deputy Director informed that in their annual CEI survey administered to business corporations since 2002, the HRC had been asking since 2006 whether corporations had adopted transition-related health benefits. HRC began publishing this data in 2008 when it observed that corporations were starting to adopt these health benefits. While the Deputy Director contended that the HRC had long been educating employers on the medical necessity of transition-related health benefits which led to the surge in the adoption, my asking of why HRC made these health benefits mandatory in its CEI program in 2011, and not in any other year, gave me more information. The Deputy Director provided an explanation in terms of the 'critical math of the insurance corporations', which meant that, according to HRC's estimation, the market supply in 2011 of transition-related health insurance policies was sufficient to meet the demand for these health benefits if they were to become a mandatory component in the CEI.

A survey of medical policies published by Transcend Legal (https://transcendlegal.org), a nonprofit organization that caters to the legal needs of transgender people, supports HRC's estimation with relevant data. The insurers' data indicate that the benefits plan was first offered by an insurer in 1999, followed by a second one doing so in 2002. Two more insurers

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1 Pews Research Center https://www.pewforum.org/fact-sheet/changing-attitudes-on-gay-marriage/ accessed on December 18, 2020.
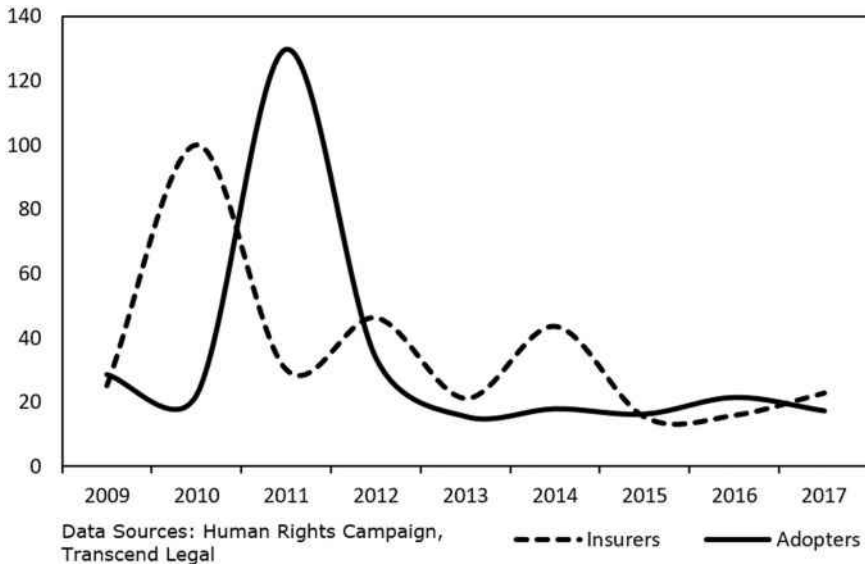
Figure 2 Percent increase in Fortune 500 adopters and insurance providers of gender transition-related health benefits.

followed suit in 2006, expanding the size of this group to 4. In 2008, the HRC observed corporations adopting these health benefits and started reporting the data on adopters among for-profit corporations. By 2008, 24 Fortune 500 corporations had adopted transition-related health benefits, which increased to 36 in 2009 and to 44 in 2010. The number of insurers offering transition-inclusive health insurance plans also increased to 10 in 2010 and to 13 in 2011. With enough availability of insurers in 2010 to ensure that a 'critical mass of insurers' was achieved for the supply, the HRC made the transition-related health benefits mandatory in its CEI in 2011.

Figure 2 compares the rate of increase in the number of insurers and adopters from 2009 to 2017. The spike in the rate of increase in adopters in 2011 was preceded by a comparable spike in the rate of increase in insurers in 2010. When the insurance for transition-related health benefits became available from insurers, the HRC stimulated a demand for them through introducing its criteria expansion intervention. If this intervention had been introduced earlier, few corporations would have adopted these health benefits because of a lack of insurance providers. The intervention HRC introduced in the CEI was timed to align the supply of transition-related health benefits insurance from insurers and their demand from employers to include them in their employee health insurance programs. In other words, the intervention was timed to leverage the favorable external environment for transition-related health benefits in order to demand corporations to adopt them.

The second question is: why some corporations responded to this intervention by adopting these health benefits while others did not? To answer this, social movement theory has long noted that economic actors, such as corporations, decide on bending down to social

movement pressures through assessing their own vulnerability and conducting a cost–benefits analysis on whether acceding to the social movement demands is beneficial to them (Luders, 2006). According to prospect theory in behavioral economics, decision makers are affected by the way the likelihood of sanctions is communicated. They are more likely to avoid what is perceived as a negative sanction than to embrace what can be perceived as a positive sanction when the outcome of both are same (Kahneman and Tversky, 1979). For example, a five-cent per gallon increase in the price of gasoline when paying with a credit card could be framed as either a 'credit card surcharge' or a 'cash discount'. Prospect theory suggests that consumers would be more likely to avoid using a credit card if the increase were framed and communicated as a 'credit card surcharge', because it would induce a fear of losing money (Aldag, 2012).

Likewise, organizations are more likely to react to a prospect of loss than of gain. For example, De Borger and Glazer (2017) found that if a toll increase for surface transportation is proposed, the lobbying efforts of driver organizations opposed to the proposal will intensify many times more than will the lobbying efforts of non-driver organizations (such as environmentalists and public commuters) in support of the proposal, even when the odds of implementing the proposed toll increase are low. The driver organizations' intensified opposition to the toll increase can be understood as a loss-aversion reaction of organizations that are readier to act when they anticipate incurring monetary losses. Likewise, it is known that corporations are more likely to act when protest events or boycotts are likely to tarnish their reputation and affect stock prices or shareholdings (Bartley and Child, 2014). Applying the same logic, corporations will also readily act when they are afraid of losing the benefits which they derive from social movement programs in terms of increasing their shareholding value and gaining reputation in the market.

Research shows that the CEI program has benefitted its participating corporations in enhancing their shareholding value and maintaining reputation among peers and in markets. The HRC became a 'certifier' of diversity achievement through releasing annual CEI ratings for corporations obtained through assessing their employment policies and health benefits for LGBT employees. The Fortune 500 corporations that wish to retain and attract talented employees and to portray a diversity-inclusive image to their customers and markets chase high scores on this index to demonstrate their diversity credentials. They often view the CEI as a benchmarking tool for diversity and inclusion (Bernstein and Ghosh, 2015), and they use their high rating on this index to tell their investors, customers and the public that they are inclusive of diverse populations (Wang and Schwarz, 2010; Everly and Schwarz, 2015; Cook and Glass, 2016). Corporations pay attention to their performance in the CEI rating also because they find it linked to their stock performance (Wang and Schwarz, 2010). Corporations that want to maintain a high score on this index, therefore, are also sensitive to any changes made in the definitions of this index that would potentially affect their rating. Therefore, when transition-related health benefits were made a 10% component in the CEI in 2011, corporations that did not offer them and whose index score threatened to fall because of this change were more likely to adopt them to maintain their score when compared with their counterparts whose scores were not affected by this change. The propensity to adopt these health benefits in the former group also accelerated because the monetary costs of adding them to employee health insurance were lower (Herman, 2013) than the costs of not doing so (Wang and Schwarz, 2010).

Based on these considerations, it is hypothesized in this study that the adoption of transition-related health benefits in 2011 and in later years by corporations occurred mainly because of the HRC's introduction of the intervention to expand the CEI program to include these health benefits. The preceding discussion shows that the HRC's decision to make them a mandatory component of the CEI ratings in 2011 leveraged a favorable institutional environment created by the legitimacy of LGBT causes and the inclusion of transition-related health benefits in the employment health programs offered by insurers. Thus, it is hypothesized that:

> H1: Business corporations whose CEI scores were to reduce because of the intervention introduced by the HRC in its CEI program were more likely to adopt transition-related health benefits for their employees than were those whose scores remained unaffected by this intervention.

3. Insider Activism and Social Movement Access

Social movement studies have underscored that insider activism, or activism within institutions that involves their own members and employees as activists, have been successful in achieving positive and substantive outcomes. Insider activists in the Catholic Church, in the military, and in business corporations have employed non-obstructive mobilization within institutional fields to achieve such outcomes (Katzenstein, 1998; Raeburn, 2004; Clair *et al.*, 2005; Ghosh, 2012) while operating within the values and logics employed by their target entities (Foldy and Creed, 1999). Activists have achieved more equitable spaces for women and LGBT people in their organizations through discursive politics using symbols, languages and artifacts specific to target entities (Katzenstein, 1998), as well as microencounters (Creed and Scully, 2000), and internal mobilization (Raeburn, 2004). Social movement scholars have found that LGBT employee resource groups within corporations were instrumental in their corporation's adoption of LGBT-inclusive policies when these groups were active over several years (Briscoe and Safford, 2008; Bernstein *et al.*, 2014). LGBT employee resource groups have linked LGBT employees and their allies within corporations to work toward aligning the diversity goals of corporations with the welfare of LGBT employees and external LGBT communities (Bernstein and Ghosh, 2015).

Hence, organizations that have had an LGBT employee resource group active for several years were more likely to adopt inclusive policies than those that did not. Thus, it is hypothesized that:

> H2: The longer a corporation has had an LGBT employee resource group, the higher are the odds of that corporation adopting transition-related health benefits for its employees.

Social movement scholars have long noted that an effective means for attaining desired outcomes is for social movement actors to have access to policy-making processes in target entities (Rochon and Mazmanian, 1993). Insider activism has rarely been studied in isolation from its networking ties with external movement organizations. Although insider activists have institutional access, they usually lack the resources (such as knowledge and informational networks) for effective long-term activism. External social movement organizations, on the other hand, have extensive networks and broader knowledge of corporate practices regarding employment policies and benefits. Hence, external social movement

organizations often equip insider activists with resources needed to successfully advocate for policy changes within the insider activists' particular organizational channels, meaning that when these two approaches combine, they complement each other (Katzenstein, 1998; Raeburn, 2004). This level of professional networking and advocacy cannot occur if employers block insider activists' access to external movement organizations or if employers prevent their corporations from being accessed by external movement organizations.

When employers become inaccessible to SMOs, employers are less likely to offer what these organizations demand. For example, the CEI reports published from 2011 have consistently shown that corporations that did not officially respond to HRC surveys typically scored very low on the overall index. In contrast, corporations that were accessible to external LGBT workplace movement organizations through sponsorship, advocacy or leadership[2] have consistently scored high on the index and were, therefore, more likely to adopt an additional LGBT-inclusive employment policy. Thus, it is hypothesized that:

> H3: Business corporations that had been accessible to LGBT workplace movement organizations were more likely to adopt transition-related health benefits for their employees than those who had not been.

4. Data and Methods

For this study, an original time-series quantitative dataset of Fortune 500 corporations was created. The unit of observation was the corporation and the unit of analysis was whether that corporation adopted transition-related health benefits in the year of measurement. In all, the dataset spanned from 2008 to 2017, and included 456 corporations and 3686 yearly observations. The components of the dataset are described below.

2   A survey of publications from LGBT workplace movement organizations, such as Equality magazine and the annual meeting reports from the HRC and Out & Equal Workplace Advocates, shows that corporations accessible to LGBT workplace movement organizations have helped the movement in three ways. The first is through monetary sponsorship and advertisements in those publications. The corporations are thus accessible to the social movement organizations through the monies they provide. The second is through letting their managerial level employees (mostly LGBT) network with those organizations and serve in leadership roles within the LGBT workplace movement. The annual meeting reports of the HRC and Out & Equal Workplace Advocates and the HRC's Equality magazine have routinely showcased such employee leaders. The third is through advocating for LGBT-inclusive policies at state level. The HRC and other LGBT movement organizations have long formed coalitions of employers to support immigration equality, marriage equality, and passing of the Federal Employment Nondiscrimination Act (ENDA). ENDA is intended to legally prohibit workplace discrimination of LGBT persons in the United States. To support ENDA, the HRC created the "Business Coalition for Workplace Fairness" in 2000. As of April 2014, the coalition included 100+ business corporations.

   Several of these corporations have testified before Congress in support of ENDA (https://www.hrc.org/resources/business-coalition-for-workplace-fairness-members, retrieved on May 29, 2018). These three means by which corporations made themselves accessible to LGBT workplace movement organizations exemplify how corporations help organizations meet their advocacy goals.

4.1 The dependent variable

Data for the dependent variable 'transition-related health benefits' were sourced from annual CEI reports, which are based on survey responses from Fortune 500 corporations and other for-profit corporations collected by the HRC each year from 2008 to 2017. The dependent variable was coded as dichotomous ('0' = No; '1' = Yes) depending on whether a corporation had adopted transition-related health benefits for its employees in the year of measurement. Corporations that had already adopted them prior to 2009 were not included in this dataset[3], and once a corporation within the dataset became an adopter, it was removed from the subsequent years of the dataset.

4.2 Predictor variables

The substantive predictor variables served to measure the intensity of LGBT workplace movement activity for each corporation. The data were largely derived from the archives and reports of the HRC and Out & Equal Workplace Advocates that are actively involved in the LGBT workplace movement.

The social movement intervention was measured as a dichotomous variable ('0' = no; '1' = yes), which showed the effect of the HRC's expansion of the definition of transgender health benefits[4] in 2011 on each corporation (HRC, 2011). The expansion of that definition to include surgical reassignment benefits had two distinct effects. First, the corporations that had adopted the pre-2011 version of transgender health benefits and scored 100% on the CEI would experience a drop of 10 points in their index score since, without including surgical reassignment benefits, the health benefits those corporations did offer would not count toward maintaining their index score. The second effect was that corporations that had not adopted any transgender health benefits by 2010 and scored 95% on the CEI would experience a 5-point drop in their index score. Corporations that potentially experienced a drop in the CEI score as a result of the intervention—by falling into either of the above two groups—were coded as '1' under the social movement intervention variable in 2011 and in subsequent years. The remaining corporations were coded as '0' in those years under

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3 The data pertaining to which corporations existed as adopters on a particular year was available from 2008 in the CEI reports. There was no way to find out on which year the corporations identified as adopters in 2008 had adopted these health benefits. And so, they were excluded from the dataset. This does not impact the results of the analyses much as only 24, or 5% of, Fortune 500 corporations were excluded from the dataset for this reason.

4 'Transgender health benefits' are different from 'transition-related health benefits'. Transgender health benefits correspond to the HRC's 2010 definition of non-surgical health benefits offered to transgender people, such as hormonal therapy and clinical visits. On the Corporate Equality Index score, transgender health benefits were then worth five points (out of 100 points). The surgical reassignment benefits of each corporation were indicated with a check mark '✓' (meaning it provided those health benefits) or a 'blank' (meaning it did not provide them). The provision of surgical reassignment benefits did not affect a corporation's index score. This scheme changed in 2011 and the health benefits for transgender people were now worth 10 points (out of 100 points) on the Corporate Equality Index. Corporations that included surgical reassignment benefits within the health benefits provided to transgender employees would now receive the full 10 points; those that would not would lose all 10 points available. For the complete 2010 and 2011 definitions, refer to the Corporate Equality Index report 2011 (HRC, 2011).

the social movement intervention variable. Because the intervention did not occur until 2011, the pre-2011 cases for all corporations were coded as '0' under the intervention variable.

Insider activism was measured as the number of years a corporation had an active and employer-recognized LGBT employee resource group in the year of measurement. This number was rounded up to the nearest integer. For example, if a group started in 2002, the value of the insider activism variable in 2011 was '10'. The data for this variable were sourced from annual CEI surveys.

The external social movement access was measured as an ordinal variable ('−1', '0' and '1'). A reference value of '0' was assigned to corporations that officially responded to the CEI survey in the year of measurement. A reference value of '1' was assigned to those corporations that, in addition to reporting their LGBT employment policies, also supported LGBT workplace movements through advocacy, monetary sponsorship or leadership in the year of measurement. The relevant data were obtained through qualitative coding of periodic publications such as Equality magazine and from annual meeting reports from the HRC and Out & Equal Workplace Advocates. A reference value of '−1' was assigned to corporations that did not officially respond to the CEI survey in the year of measurement, and non-responses were considered indicative of a corporation's inaccessibility to the LGBT workplace movement. The HRC indicates non-response in their CEI reports through either reporting the corporation's data in a gray font (when they receive this information through unofficial sources) or offering no report for the relevant corporations.

4.3 Control variables

Based on a review of current organizational research on the adoption of LGBT-inclusive employment policies by corporations, several institutional and organizational factors were used as control variables. Table 1 summarizes the organizational and institutional arguments for adopting LGBT employment policies. Based on these arguments, several potential predictors were controlled for in the quantitative analyses: firm size, human resource practices of the corporation, isomorphic diffusions across industry and location, ranking among peer Fortune 500 corporations in the industry, gender diversity in the board of directors in the corporation, democratic partisanship of the corporation and unionization of employees. Table 1 also provides a definition and measurement for each variable and the data source. As with the substantive variables, the control variables have also been measured for each year of observation.

Table 2 provides descriptive statistics and a correlation matrix for all variables used. The descriptive statistics are shown for adopters, non-adopters and for all cases. This classification also indicates whether the dependent variable and covariates were significantly different for the adopters versus the non-adopters.

4.4 Method of analysis

Social movement and organization scholars have long used Cox hazard rate analysis for examining policy diffusion across organizational entities using discrete-year series data (e.g. Chaves, 1996; Douglas et al., 2015). The hazard rate is defined as the odds of adopting the policy by an organization in a given year. Mathematically, the hazard rate can be expressed as

Table 1 Control variables used for examining the adoption of transition-related health benefits

Variable name	Argument	References	Measure/definition[†]	Data source
Firm size	Actuarial science suggests that the cost of adoption decreases as the number of insured increases. Hence, corporations with a larger pool of full-time employees are less constrained in the adoption of new health benefits.	Herman (2013); Briscoe and Safford (2008); Cook and Glass (2016)	The number of U.S.-based full-time employees within the corporation (rounded to the nearest thousand)	Securities and Exchange Commission: 10-k reports[‡]
Human resource practices	Corporations that already follow best practices on people management, innovation and employment benefits are more likely to adopt progressive employment policies, such as LGBT health benefits.	Davison and Rouse (2005); Briscoe and Safford (2008)	Whether the corporation is rated as high on its human resource practices on people management, innovation and management quality	Human Resource Executive Online
Isomorphic diffusion (industry)	Corporations benchmark their employment policies, practices, benefits and pay structures with their peers in the industry and in the region.	Davison and Rouse (2005); Briscoe and Safford (2008); Cook and Glass (2016)	The percentage of transition-related health benefits adopters among peer Fortune 500 corporations in the same industry	CEI Reports
Isomorphic Diffusion (Headquarter Location)	They do so to remain competitive both among their peers, and in attracting and retaining accomplished employees. Hence, the likelihood of adopting increases when a corporation belongs to an industry, or is located in a region, that is known to be LGBT-inclusive.		The percentage of transition-related health benefits adopters among peer Fortune 500 corporations in the same headquarter region.	
Ranking in the industry	Corporations that are highly ranked within	Raeburn (2004)	The corporation's ranking among its	Fortune ranking

Table 1 *Continued*

Variable name	Argument	References	Measure/definition[†]	Data source
	their industry are most likely to be the early adopters of emerging LGBT-inclusive policies.		nonadopting Fortune 500 peers in the industry	
Gender diversity in the board of directors	Corporations whose policy makers are gender diverse are more likely to adopt LGBT-inclusive policies.	Cook and Glass (2016)	Percent female in the corporation's board of directors	Securities and Exchange Commission: 10-k reports
Democratic partisanship	According to the institutional theory of 'corporate opportunity structure', corporations whose elites are known to have liberal political ideologies are more likely to support issues related to women and LGBT persons. With transgender-inclusion in healthcare clearly an issue that is favored by the Democrats, we are more likely to see adopters of transition-related health benefits among corporations that show a clear Democratic partisanship through financial outcomes, such as contributing to Democratic candidates in the Congressional elections.	Briscoe et al. (2014); Briscoe and Safford (2008)	Difference in dollar contributions to the Democratic and Republican parties in the two preceding Congressional Elections as per cent of total political contribution in those cycles = ($Dem-$Rep) ÷ ($Dem+$Rep) × 100	Center for Responsive Politics
Unionization of employees	Organizational scholars maintain that unions and collective bargaining agreements may limit the adoption of LGBT employment benefits. This	Bell et al. (2011, pp. 138–9)	Whether any portion of the U.S. employees were represented by a workers' union recognized by the corporation and/	Securities and Exchange Commission: 10-k reports

Table 1 *Continued*

Variable name	Argument	References	Measure/definition†	Data source
	limitation is largely in effect of the domination of heterosexual men within employee unions, the unrepresented nature of union leadership, the supersession of LGBT causes by racial and other popular causes and the silencing of LGBT employees through normalizing tactics in union meetings.		or covered by a collective bargaining agreement.	

Notes: †All definitions and measures are specific to the year of measurement. ‡Form 10-K is an annual report required by the U.S. Securities and Exchange Commission that gives comprehensive details about a corporation's financial performance and other business information.

$$\lambda_{iy} = P_{iy}/(1 - P_{iy}),$$

where P_{iy} is the probability of policy adoption in organization i at year y (Chaves, 1996). Because the hazard ratio is a function of both time and entity, it not only can be used to examine which organizations adopt the policy but also accounts for how quickly they do so (Zhou, 2014). To avoid endogeneity issues, all independent variables have been lagged by one year (Wimmer and Feinstein, 2010).

When covariates are examined, the Cox proportional hazard rate model can be mathematically expressed as follows:

$$log(\lambda_{iy}/\lambda_{iy0}) = \beta_1 x_1 + \beta_2 x_2 + \cdots + \beta_n x_n,$$

where $x_1, x_2, \ldots, x_n$ are the covariates; $\beta_1, \beta_2, \ldots, \beta_n$ are their hazard ratios to be estimated and λ_{iy0} is the baseline hazard function. λ_{iy0} varies for each covariate and is proportional to its hazard ratio. Therefore, the hazard ratio is the parameter of interest, which indicates the effect of each covariate over time.

Since the hazard ratio is the ratio of the odds of a policy adoption by a corporation when a covariate was present or active vis-à-vis when it was absent or inactive, a hazard ratio greater than 1 suggests that adoption would be more likely when the covariate was present or when its value increased over the years. A hazard ratio significantly less than 1 means that a policy adoption was less likely when the covariate was present, or when its value increased over the years. Hazard ratios significantly equal to or close to 1 mean that the presence or change in the value of a covariate over the years had almost no effect on policy adoption (Strober *et al.*, 1997).

A hazard rate analysis shows whether an increment or drop in the value of a covariate significantly predicted an increase in the likelihood of adopting transition-related health

Table 2 Sample characteristics and correlation among variables used for Cox proportional hazard rate models

	T	E	H	I_I	I_L	R	G	D	U	SMI	ERG	ACCESS
T: Transition-related health benefits	1.000											
E: Firm size (number of employees in thousands)	0.057	1.000										
H: Human resource practices	0.087	0.353	1.000									
I_I: Isomorphic diffusion (industry)	0.207	−0.003	0.006	1.000								
I_L: Isomorphic diffusion (location)	0.127	−0.023	−0.049	0.239	1.000							
R: Ranking in industry	−0.116	−0.198	−0.285	−0.163	−0.059	1.000						
G: Gender diversity in board of directors	0.127	0.067	0.035	0.178	0.095	0.010	1.000					
D: Democratic partisanship	0.056	0.015	0.039	0.010	0.012	−0.056	0.081	1.000				
U: Unionization of employees	−0.062	−0.023	−0.067	−0.149	0.011	−0.047	−0.169	−0.050	1.000			
SMI: Social movement intervention	0.287	0.033	0.079	0.270	0.166	−0.098	0.154	0.053	−0.011	1.000		
ERG: LGBT employee resource group (insider activism)	0.313	0.208	0.190	0.166	0.136	−0.133	0.273	0.146	−0.053	0.484	1.000	
ACCESS: LGBT workplace movement access	0.263	0.175	0.240	0.060	0.080	−0.093	0.286	0.209	−0.077	0.343	0.594	1.000
Adopters												
Mean	0.154[*]	46.981[*]	0.33[*]	0.224	0.148	8.907[*]	18.132[*]	−0.095[*]	0.475[*]	0.262[*]	3.359[*]	0.090[*]
Standard deviation	0.361	112.871	0.470	0.212	0.255	8.110	9.403	0.430	0.500	0.440	3.415	0.514
Minimum	0	0.187	0	0	0	1	0	−1.110	0	0	0	−1
Maximum	1	1500	1	1	1	42	50	1	1	1	16	1
N (Corporations)	264	264	264	264	264	264	264	264	264	264	264	264
N (observations)	1776	1776	1776	1776	1776	1776	1776	1776	1776	1776	1776	1776
Non-adopters												
Mean	0	21.736	0.153	0.217	0.149	11.734	14.297	−0.274	0.623	0.076	1.033	−0.716
Standard deviation	0	27.751	0.360	0.219	0.284	9.158	9.417	0.521	0.485	0.266	2.692	0.452

Table 2 *Continued*

	T	E	H	I_I	I_L	R	G	D	U	SMI	ERG	ACCESS
Minimum	0	0.111	0	0	0	1	0	−1.220	0	0	0	−1
Maximum	0	260	1	1	1	45	50	1	1	1	13	1
N (corporations)	192	192	192	192	192	192	192	192	192	192	192	192
N (observations)	1920	1920	1920	1920	1920	1920	1920	1920	1920	1920	1920	1920
Overall												
Mean	0.075	34.008	0.239	0.220	0.149	10.365	16.155	−0.187	0.551	0.166	2.159	−0.413
Standard deviation	0.263	82.004	0.426	0.216	0.270	8.780	9.602	0.487	0.497	0.372	3.276	0.575
Minimum	0	0.111	0	0	0	1	0	−1.220	0	0	0	−1
Maximum	1	1500	1	1	1	45	50	1.000	1	1	16	1
N (corporations)	456	456	456	456	456	456	456	456	456	456	456	456
N (observations)	3686	3686	3686	3686	3686	3686	3686	3686	3686	3686	3686	3686

*Significance of difference from non-adopters' average $P < 0.05$ (two-tailed).

benefits. In other words, hazard rate analysis reveals the conditions under which some corporations adopted, and the others did not adopt, transition-related health benefits. It does not answer why some corporations adopted them earlier and the others later. This is a case-centric question, and so, a qualitative comparative analysis (QCA), or more specifically fuzzy-set qualitative comparative analysis (fsQCA) (Ragin, 2014), was used to answer why some corporations became early adopters while the others adopted later. fsQCA analyzes 'causal conditions' (analyzed as predictors in statistical analyses) to arrive at 'causal recipes', meaning combinations of causal conditions with their anticipated directions that predict an outcome. The causal conditions analyzed using fsQCA are expressed as either fuzzy or crisp set conditions. In crisp sets, the membership of a case is either '1' or '0'. Therefore, binary coded variables examined under statistical analyses can be directly used in fsQCA as crisp sets. The remaining variables (ordinal, ratio and continuous) must be calibrated into fuzzy set conditions. A researcher calibrates the variables using their substantive knowledge of the cases to define the points of full membership, full non-membership and cross-over (ibid).

In order to examine why some corporations adopted earlier and some later, as well as the comparative role of social movement and diffusion forces in this process, five causal conditions were used. These were the three movement conditions, namely being affected by the intervention, movement access and insider activism and the two diffusion conditions—one across industry peers and the other across peer corporations in the headquarter location. All five causal conditions were used in the fsQCAs of both early adopters and later adopters. The social movement intervention condition, being categorical, was used as a crisp set and the rest of the conditions were calibrated to fuzzy sets. Table 3 lists the crisp sets and explains the calibration of the fuzzy sets used for the analyses. It provides the rationale for locating the points of full membership, cross-over and full non-membership for the calibration of fuzzy sets.

An fsQCA statistical package was used to test the models of early and late adopters; this package analyzes the models through truth tables based on Boolean algebra and the Quine-McCluskey algorithm (Ragin, 2014). The selected fuzzy- and crisp-set causal conditions were used to model early adoptions and late adoptions to arrive at causal recipe solutions. In a truth table, configurations involving combinations of conditions are produced in rows. An analysis of n conditions can produce 2^n possible combinations. Therefore, a truth table can have 2^n rows for examining a model with n conditions. For five causal conditions, a truth table can have $2^5 = 32$ rows. The truth tables for early adoptions (Table 4) and late adoptions (Table 5) for this study show 27 rows that were populated by cases.

A truth table also expresses the consistency with which each combination predicts a given outcome.[5] This enables the researcher to define a 'consistency cut-off' and code combinations with consistency values equal to or above that cut-off value as '1' and the rest as '0'.

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5   As with other statistical techniques evaluating quantitative models using parameters such as the level of significance and explained variations, fsQCA examines the degree to which a combination of conditions is a subset of the outcome using consistency and coverage values. Consistency is the degree to which a configuration accurately predicts the outcome and is similar to the level of significance in regression analyses (Ragin, 2009). Configurations with consistency above 0.85 have generally been considered stronger subsets of the outcome. Similar to the function of explained variations in statistical techniques, fsQCA quantifies the 'coverage', that is the proportion of cases covered by a configuration in explaining the occurrence of an outcome (Ragin, 2009).

Table 3 Crisp sets and calibration of fuzzy-sets for the early and late adoptions of transition-related health benefits

Causal condition	Calibration anchor points (Full membership, cross-over point, full non-membership)	Rationale for anchor points
EARLY: Early adoption (year of adoption)	(2011, 2013.5, 2017)	Because the spike in adoption was noticed in 2011 following a relatively flat and low adoption rate, the year 2011 has been defined as the year of full membership of early adoption. Then, because 2017 is the latest year in the
LATE: Late adoption (year of adoption)[†]	(2017, 2013.5, 2011)	study, that year has been defined as the point of full non-membership in the fuzzy set of early adopters. For late adopters, these points swap their places. By 2014, the popular media had already highlighted the achievements of adoption, so corporations that adopted in 2014 are unlikely to be viewed as early adopters. But the diffusion of adoption was also swiftly occurring, and many well-known corporations were still adopting transition-related health benefits, therefore corporations adopting in 2014 cannot be called late adopters either. Based on this knowledge, 2014 is explicitly neither an year of early nor late adoption. In order to avoid 0.5 in the calibrated fuzzy set conditions (Schneider and Wagemann, 2012, pp. 100–101), 2013.5 was used as a cross-over point for both early and late adoptions.
SMI: Social movement intervention	—	This is a crisp set derived directly from the social movement intervention variable, that is whether the corporation's CEI rating could plummet as a result of HRC's introduction of the intervention in 2011.
ACCESS: LGBT workplace movement access	—	Though LGBT workplace movement access was an ordinal variable in hazard rate analysis, it did not require calibration for fsQCA and was used as a crisp set. This is because none of the corporations coded as '−1' and completely inaccessible to the LGBT workplace movement SMOs were reported to have adopted the transition-related health benefits. Hence for adopter cases used in fsQCA, the data for this causal condition were distributed between '1' (corporations accessible to these SMOs through sponsorship, leadership and advocacy, in addition to officially responding to the CEI surveys) and '0' (corporations whose accessibility was limited to their officially responding to the CEI surveys).
ERG: Employee resource	(10, 5.5, 1)	ERGs are less likely to make an impact on its employer's policies in the first year of their formation and so, 1 was

Table 3 *Continued*

Causal condition	Calibration anchor points (Full membership, cross-over point, full non-membership)	Rationale for anchor points
group (insider activism)		assigned full nonmembership in this fuzzy set. Full membership was assigned to ERGs in the tenth year of formation, and those in the fifth year were calibrated as the cross-over point.
II: Isomorphic diffusion (industry)	(0.769, 0.356, 0)	This is a continuous variable having values between 1 and 0 without any strongly discernible breakpoints. So, the 95th, 50th and 5th percentile values have been used as the anchoring points.
IL: Isomorphic diffusion (headquarter location)	(1, 0.3, 0)	'0', indicating that no peer Fortune 500 corporation in the headquarter location had adopted these benefits, was taken as the point of no membership; the median of the rest of values, '0.3', was assigned the crossover point and '1', meaning all other peer Fortune corporations had adopted the transition-related health benefits in the headquarter location, was calibrated as the point of full membership.

[†]Late adoption can be described as the negation of early adoption in QCA terminology.

A consistency cut-off of 0.872 for early adopters (Table 4), and of 0.885 for late adopters (Table 5), was used. An analysis procedure using the Quine–McCluskey algorithm was then followed to arrive at the solutions.

5. Results

5.1 Hazard rate analysis

Table 6 presents the Cox proportional hazard rate models for the adoption of transition-related health benefits. The numbers associated with the covariates are hazard ratios that, for binary variables, indicate a contrast in the probability of adoption by one set of corporations (those which score '1') against the probability of adoption in the other set (those which score '0'). If the hazard ratio is greater than 1, then the odds of adoption show an increase over the years, whereas, if the hazard ratio is less than 1, then the odds of adoption show a decrease. When a covariate is continuous in a hazard rate model, the hazard ratio can be interpreted as the change in the odds of adoption for a one-unit increase in the covariate (Creek and Yoder, 2012).

As is standard practice in hazard rate analyses (e.g. Zhou, 2014), baseline models with control variables were first estimated. Model 1 used firm size as the first baseline variable. Although its hazard ratio was significant, it was almost equal to 1, and thus, did not have a substantive effect on adoption. The more important baseline predictors were examined in

Table 4 Truth table, outcome early adoption of transition-related health benefits

Social movement intervention	LGBT workplace movement access	Insider activism	Isomorphic diffusion among industry peers	Isomorphic diffusion in headquarter location	Number of cases	EARLY ADOPTERS	Cons.	PRI
1	1	0	0	0	1	1	1	1
1	1	0	0	1	1	1	1	1
1	1	1	0	1	3	1	0.997	0.995
1	1	1	0	0	5	1	0.997	0.996
0	1	1	0	0	6	1	0.974	0.967
1	0	0	0	1	8	1	0.955	0.913
0	1	1	0	1	1	1	0.951	0.919
1	0	0	0	0	10	1	0.946	0.909
1	1	1	1	0	4	1	0.881	0.746
0	1	0	0	0	1	1	0.876	0.768
1	0	1	0	0	33	1	0.874	0.821
1	0	0	1	1	8	1	0.872	0.752
1	0	1	0	1	19	0	0.826	0.703
1	0	0	1	0	13	0	0.777	0.634
1	0	1	1	0	21	0	0.755	0.619
0	0	1	0	1	2	0	0.740	0.298
1	0	1	1	1	21	0	0.726	0.524
0	1	1	1	1	2	0	0.716	0.522
0	0	1	0	0	8	0	0.708	0.420
0	0	1	1	1	3	0	0.707	0.203
1	1	1	1	1	4	0	0.658	0.364
0	1	1	1	0	4	0	0.621	0.429
0	0	0	0	1	13	0	0.593	0.296
0	0	1	1	0	7	0	0.550	0.106
0	0	0	0	0	21	0	0.549	0.314
0	0	0	1	1	19	0	0.441	0.103
0	0	0	1	0	26	0	0.407	0.132

Model 2, whose likelihood-ratio (LR) chi-square figure jumped to 120 from 8 in Model 1. The control variables in this model were: human resource practices, isomorphic diffusions, ranking among nonadopting Fortune 500 peers in the industry, gender diversity in the board of directors, Democratic partisanship and unionization of employees. All control variables showed significant effects in their expected directions.

To test hypotheses 1–3, LGBT workplace movement context variables were added, that is social movement intervention, LGBT employee resource group and LGBT workplace movement access, to Model 3. The hazard ratios for all three variables showed significant effects at the 0.05 level and in the expected direction. The LR chi-square figure jumped to 376 in this model, and the effects of all baseline variables except unionization and corporation ranking reduced in significance. A comparison of Models 2 and 3 showed that there was an overriding effect of the LGBT workplace movement context variables on most of the baseline variables. According to Model 3, in any given year under study, 1) corporations

Table 5 Truth table, outcome late adoption of transition-related health benefits

Social movement intervention	LGBT workplace movement access	Insider activism	Isomorphic diffusion among industry peers	Isomorphic diffusion in headquarter location	Number of cases	LATE ADOPTERS	Cons.	PRI
0	0	1	1	0	7	1	0.939	0.879
0	0	0	1	1	19	1	0.926	0.881
0	0	1	1	1	3	1	0.917	0.773
0	0	0	1	0	26	1	0.899	0.852
0	0	1	0	1	2	1	0.885	0.691
0	0	0	0	1	13	0	0.819	0.687
1	1	1	1	1	4	0	0.793	0.616
0	0	1	0	0	8	0	0.788	0.580
0	0	0	0	0	21	0	0.750	0.620
0	1	1	1	0	4	0	0.696	0.543
1	0	1	1	1	21	0	0.681	0.446
1	1	1	1	0	4	0	0.629	0.205
0	1	1	1	1	2	0	0.612	0.348
1	0	0	1	1	8	0	0.611	0.248
1	0	1	1	0	21	0	0.602	0.381
1	0	0	1	0	13	0	0.592	0.332
0	1	0	0	0	1	0	0.588	0.232
1	0	1	0	1	19	0	0.579	0.281
1	0	0	0	1	8	0	0.523	0.087
1	0	0	0	0	10	0	0.457	0.087
0	1	1	0	1	1	0	0.442	0.081
1	1	1	0	1	3	0	0.434	0.005
1	1	0	0	1	1	0	0.426	0.000
1	0	1	0	0	33	0	0.411	0.162
1	1	1	0	0	5	0	0.315	0.004
1	1	0	0	0	1	0	0.294	0.000
0	1	1	0	0	6	0	0.230	0.033

affected by the social movement intervention were approximately 1.6 times more likely to become adopters than were unaffected corporations ($P < 0.05$); 2) with every additional year of insider activism, the odds of adopting these health benefits increased by approximately 6% ($P < 0.05$) and 3) corporations that were accessible to LGBT workplace movement organizations were approximately 5.6 times more likely to adopt than were inaccessible corporations ($P < 0.05$). Hence, the null hypotheses for hypotheses 1–3 could be rejected at a 0.05 significance level.

The hazard rate analysis shows that the role played by the LGBT workplace movement context in the adoption of transition-related health benefits overshadowed the roles of most organization-related factors such as gender diversity in the board, human resource practices and the political partisanship of the corporation. Figure 3 shows the cumulative hazard estimates of the adoption of transition-related health benefits by year. Although the cumulative hazard rate surged after 2010, it remained below 1 until the end of the study period. This

Table 6 Cox proportional hazard rate models for adoption of transition-related health benefits

	Model 1	Model 2	Model 3
Firm size	1.001*	1.000	1.000
	(0.000)	(0.000)	(0.001)
Human resource practices		1.556*	1.044
		(0.218)	(0.153)
Isomorphic diffusion		2.122*	0.991
(Industry)		(0.638)	(0.308)
Isomorphic diffusion		1.472*	1.128
(Headquarter location)		(0.276)	(0.221)
Ranking in industry		0.959*	0.974*
		(0.010)	(0.010)
Gender diversity in the		1.032*	1.006
Board of directors		(0.007)	(0.007)
Democratic partisanship		1.493*	1.161
		(0.186)	(0.165)
Unionization		0.760*	0.673*
		(0.099)	(0.087)
LGBT workplace activism:			1.596*
Social movement intervention			(0.248)
LGBT workplace activism:			1.056*
Insider activism			(0.019)
LGBT workplace activism:			5.645*
Movement access			(0.856)
N (observations)	3686	3686	3686
N (corporations)	456	456	456
N (occurrences)	264	264	264
LR Chi^2	8(1)*	120(8)*	376(11)*

Note: Robust standard errors in parentheses. $^{*}P < 0.05$ (two tailed test).

indicates that, when all the corporations were considered together, the odds of adoption were lower than the odds of non-adoption in all years. The hazard rate estimates for each of the three LGBT workplace movement indicators provided further clarity regarding the patterns of adoption. The study graphs show that, in all years after 2010, those corporations affected by the LGBT workplace movement indicators were more likely than the unaffected corporations to adopt these health benefits.

5.2 fsQCA results

Table 7 shows the parsimonious truth table solutions for early adopters and late adopters. Four causal recipes were obtained in the solution for early adopters—three intervention solutions and one access solution. The first intervention solution shows that the combination of being affected by the movement intervention and lower diffusion of the adoption of the transition-related health benefits across industry and location peers explains early adoptions with a consistency of 0.887 and coverage of 0.405. The second intervention solution explains early adoptions, with a consistency of 0.896 and coverage of 0.158, through the combination of being affected by the movement intervention, diffusion of these health
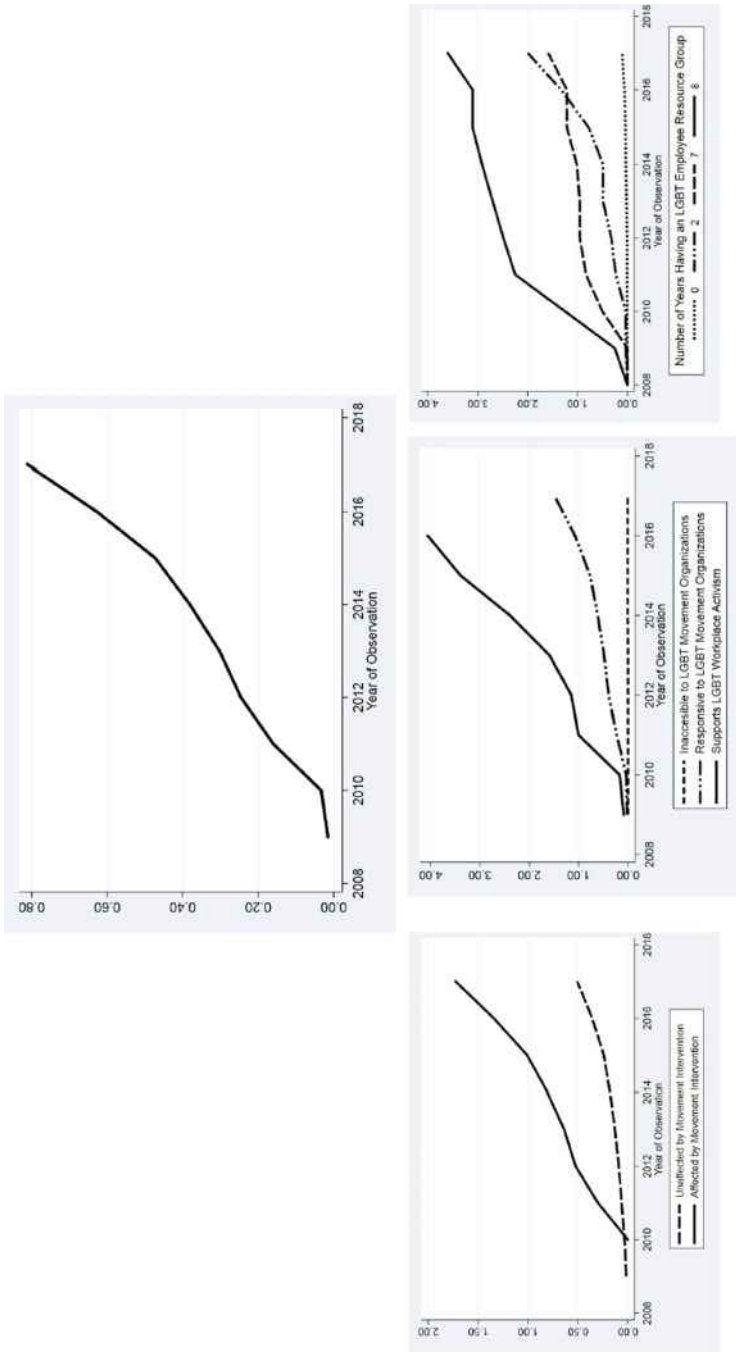
Figure 3 Nelson–Aalen cumulative hazard estimates for the adoption of gender transition-related health benefits by Fortune 500 corporations.

Table 7 Truth table results for the early adopters and the late adopters of transition-related health benefits

Early adopters

	(1) Intervention	(2) Intervention and diffusion	(3) Intervention and access	(4) Access
Social movement intervention	●	●	●	
LGBT workplace movement access			●	●
Insider activism		O		
Isomorphic diffusion among industry peers	O			O
Isomorphic diffusion in headquarter location	O	●	O	
Consistency	0.887	0.896	0.890	0.972
Raw coverage	0.405	0.158	0.077	0.133
Unique coverage	0.243	0.039	0.015	0.067
Solution consistency	0.868			
Solution coverage	0.530			

●, causal condition (present); O, causal condition (negated).

Late adopters

	(1) Diffusion	(2) Diffusion and insider activism
Social movement intervention	O	O
LGBT workplace movement access	O	O
Insider activism		●
Isomorphic diffusion among industry peers	●	
Isomorphic diffusion in headquarter location		●
Consistency	0.904	0.878
Raw coverage	0.362	0.085
Unique coverage	0.289	0.012
Solution consistency	0.895	
Solution coverage	0.374	

●, causal condition (present); O, causal condition (negated).

benefits across location peers and the negated condition of insider activism. The third intervention solution combines the conditions of being affected by the movement intervention, LGBT workplace movement access and lower diffusion among location peers to explain early adoptions with a consistency of 0.890 and coverage of 0.077. And finally, the access model combines the condition of the corporation's accessibility to the LGBT workplace movement SMOs and a lower diffusion of transition-related health benefits among industry peers to explain early adoptions with a consistency of 0.972 and coverage of 0.133. The access solution primarily explains the earliest adoptions of these health benefits before HRC

had introduced the intervention in its CEI program in 2011. The overall solution for early adopters has a consistency of 0.868 with a coverage of 0.530.

Two causal recipes were obtained for late adopters. The diffusion solution combines iso-morphic diffusion among industry peers and the negated conditions of being affected by the movement intervention and the LGBT workplace movement access to explain late adoptions with a consistency of 0.904 and a coverage of 0.362. The second diffusion solution, in addi-tion to involving the negated conditions of the first diffusion solution, combines the condi-tions of insider activism and diffusion among location peers to explain late adoptions with a consistency of 0.878 and coverage of 0.085. The overall solution for late adoptions has the consistency of 0.895 and a coverage of 0.374.

The fsQCAs show that early adoptions were more likely to occur due to the LGBT work-place movement forces, that is when corporations were affected by the movement interven-tion and were more accessible to the LGBT workplace movement SMOs through sponsorship, leadership and/or advocacy for LGBT rights. Corporations unaffected by these forces and who followed suit as late adopters did so under the conditions of insider activism within their organizations and isomorphic diffusion of these health benefits across peer corporations.

6. Discussion and Conclusion

This study shows that contemporary social movements do not always challenge their target entities through contentious protests. Nor should they be considered 'co-opted' by their tar-get entities when they stop launching protests against these entities. In more favorable envi-ronments, SMOs may be tactically shifting their activism from contention to alignment through professional and organizational approaches of challenge. An understanding of this approach draws on the extant literature suggesting broad possibilities of alignment between social movement organizations and their target entities through processes such as dramatic ingratiation (Snow, 1979) and suggested in theories such as the strategic action field (Fligstein and McAdam, 2011), identity deployment (Bernstein, 1997) and the multi-institu-tional politics approach to social movements (Armstrong and Bernstein, 2008).

Contributing to the above line of scholarship, this study delineates how the politics of alignment pursued by social movement organizations may result in achieving movement outcomes. It shows that when SMOs engage their target entities into social movement pro-grams which benefit these entities, they might introduce certain timed interventions in these programs to demand specific outcomes from these entities. These interventions would re-quire that the target entities either meet the social movement demands or lose the benefits they had been deriving out of the social movement program. This tactic helps in understand-ing how SMOs, through non-obstructive mobilization, can leverage a more favorable exter-nal environment while also strategically exploiting these entities' vulnerability of possibly losing the benefits derived from the social movement program. The findings show that the pursuance of movement outcomes through the politics of alignment can apply to a range of, and not just a few, target entities.

This study also evaluates the effects of insider activism and target entities' accessibility to social movement actors, in addition to the effect of politics of alignment, as the overall com-ponents of the movement context. The findings show that this movement context can play an important role in achieving movement outcomes. In the case of the adoption of

transition-related health benefits, the movement intervention and the corporations' accessibility to the SMOs played a more prominent role during early adoption, whereas insider activism and isomorphic diffusion largely accounted for late adoptions. The explanation of late adoption through the combination of isomorphic diffusion of the outcome and insider activism in corporations quantitatively confirms the argument made elsewhere (Bernstein and Ghosh, 2015) that insider activists often use benchmarking tactics, meaning citing practices employed by peer corporations, to advocate for change in their own corporation. Broadly, this study shows that the process of organizational change can be best understood by examining the social movements and institutional forces together.

This study's findings accord with an emerging stream of empirical studies highlighting how social movement organizations and actors have devised innovative organizational forms and practices to reduce any perceived radicalness of social change and allow desired social change to be accepted as gradual and incremental (e.g. Van Wijk *et al.*, 2013; Helfen *et al.*, 2015). SMOs often seek outcomes through forming inter-organizational networks with insider activists and target entities (Katzenstein, 1998; Armstrong and Bernstein, 2008). Through seeking participation in social movement programs like the CEI, SMOs can be successful in winning outcomes from their target entities, using tactics other than creating visible conflicts.

This study enhances our understanding of social movements within multi-institutional political environments by showing how social movements may attain desired outcomes using non-obstructive tactics. With an increasing number of studies in this area (e.g. Helfen *et al.*, 2015; Harris, 2017), the need to develop more evidenced insight into how social movement outcomes are obtained has become more urgent and to which this study makes an important contribution.

Acknowledgments

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