Exploring Institutional Dynamics: Barriers and Opportunities for Health Through Sport

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Abstract

This thesis explored how multisport service organizations (MSOs) have responded to the institutional pressure to incorporate health into organizational practice. A qualitative exploratory methodology underpinned by an institutional theoretical framework facilitated a snapshot understanding of the institutional environment within the Canadian sport landscape. Data was collected from online document and policy sources, and later analyzed using Hartwig and Dearing’s (1979) two-step exploratory data analysis process. First, institutional theory was applied to capture the institutional change, institutional pressure, and organizational response within the Canadian sport sector. In a second round of analysis, data was re-expressed using archetype theory. Organizations were classified according to a Canadian Sport Policy (CSP) (2012) objective typology and the MSO response was revisited. The institutional environment was found largely marked by regulative pressures, and organizations most often responded with defiance. The findings suggest that system-level structural and financial mechanisms may be restricting MSO’s capacity to comply to health-related institutional pressures.

Keywords: Sport organizations, institutional change, institutional pressure, organizational response, organizational typology
Summary for Lay Audience

In understanding how sport may come to effectively promote health, this thesis explored sport’s institutional environment to understand the health-related challenges and opportunities at a systemic level. My project explored how sport organizations have adapted in response to changing pressures within their environments, specifically regarding the pressure to incorporate health into organizational practice. This project was guided by institutional theory which is aimed at understanding how organizations react and respond to environmental factors. Data was collected from various online website and policy documents and was analyzed in two phases. In the first order analysis, I summarized a historical review of Canadian sport protocols to demonstrate the changes that have occurred in the sport environment (institutional change). I then transitioned my focus to the current-day sport environment. Here, I was interested in learning about the pressures (institutional pressure) that act on sport organizations to incorporate health objectives into their practice. Finally, I also observed how organizations were responding to this pressure (organizational response), such as whether they did in fact comply to the pressure to tend to health objectives. In the second order analysis, I used archetype theory to systematically group (typologize) organizations and the organizational response was revisited. Findings indicated system-level structural and financial problem areas that may be restrictive for sport organizations and their ability to tend to health objectives.
Acknowledgments

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<th>Description</th>
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<tbody>
<tr>
<td>CMA</td>
<td>Canadian Medical Association</td>
</tr>
<tr>
<td>CSP</td>
<td>Canadian Sport Policy</td>
</tr>
<tr>
<td>FASA</td>
<td>Fitness and Amateur Sport Act</td>
</tr>
<tr>
<td>MSO</td>
<td>Multisport Service Organization</td>
</tr>
<tr>
<td>NPFA</td>
<td>National Physical Fitness Act of Canada</td>
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<tr>
<td>NSO</td>
<td>National Sport Organization</td>
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<tr>
<td>PASA</td>
<td>Physical Activity and Sport Act</td>
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<tr>
<td>PSPC</td>
<td>A Proposed Sports Policy for Canadians</td>
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<tr>
<td>PTRA</td>
<td>Physical Training and Recreation Act</td>
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<td>SCI</td>
<td>Sport Centres and Institutes</td>
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Chapter 1: Introduction

*Canadian Sport Policy (CSP) (2012)* is the current federal policy that outlines goals and objectives for the sport sector, its actors, and its activities within Canada. Throughout sport history, sport policies, including CSP (2012), have been found to each uphold distinct political priorities, agenda items, and values in accordance with the trends and demands of their given social circumstances (Comeau, 2013; MacIntosh et al., 1988; Thibault & Harvey, 2013). For example, Canada’s first ever sport policy, the *National Physical Fitness Act of Canada (NPFA) (1943)* was intentionally curated to resolve a national climate of poor health and fitness, motivated specifically by unfit military candidates (Comeau, 2013). The NPFA (1943) was thus marked by principles of health, participation, and national safety. *Game Plan 76’* was a shift in sport policy perspectives that espoused notions of excellence, competition, and high-performance sport in the lead up to the 1976 Montreal Olympic and Paralympic Games (Comeau, 2013). The NPFA (1943) and *Game Plan 76’* demonstrate the tension between the participation and excellence paradigms within Canadian sport policy – a trend that can be consistently observed throughout history. Over the ensuing years, excellence and participation objectives would continue to fluctuate political priority in accordance with the sport environment’s dynamic social context.

Today, living in a highly digitized and commercialized era, sport’s social context is marked by concerns for sedentary lifestyles and subsequent health issues, such as obesity and related co-morbidities (*Canadian Sport Policy 2012, 2012; Janssen, 2012*). Current day sport policies such as CSP (2012) are therefore situated within a theme of participation, demonstrated by their mandate of physical activity/sport promotion and
healthy living outcomes more than ever before (Canadian Sport Policy 2012, 2012). Despite a well-documented and on-going institutional shift between excellence and participation paradigms in Canadian sport protocols (Comeau, 2013; Thibault & Harvey, 2013), it remains to be seen in the literature as to how sport organizations have responded and adapted to this change, if at all. Specifically, how sport organizations are incorporating healthy living into their agendas (i.e., organizational response) – per their policy mandate (i.e., institutional pressure) – was of interest in this project.

Pressure and response dynamics are not novel sport management lines of inquiry (Greenwood et al., 2008; O’Brien & Slack, 2004; Slack & Hinings, 1994). In fact, many sport scholars have intentionally adopted an institutional theory lens based on fit and efficacy within the sport context (Washington & Patterson, 2011). Although studies have explored pressure and response dynamics in a variety of settings, ranging from professional sport organizations (Heinze & Lu, 2017) to community sport organizations (Sotiriadou & Wicker, 2013), fewer inquiries have targeted multisport service organizations (MSO). MSOs are a division of Canadian national sport organizations that provide services for the national sport community (i.e., ParticipACTION, Special Olympics Canada, Canadian Tire Jumpstart Charities, etc.). MSO services include developing sport programing, strengthening the involvement of marginalized groups in sport, and promoting sport participation, among others (National Multisport Service Organizations, 2020). MSOs primarily cater to differential sport outcomes (i.e., outcomes through sport, rather than direct sport outcomes) and although have diverse missions and objectives, overall more so algin with sport’s participation paradigm. An institutional inquiry looking at MSOs is therefore likely to gather insights related to how sport
organizations respond to change; and specific to the purposes of this work, how MSOs are navigating and responding to a changing political landscape around the agenda of healthy lifestyles.

Within the broader realm of organizational response inquiries, sport scholars have keenly applied archetypes to better understand change dynamics, such as why organizations respond to change (Greenwood & Hinings, 1993; Kikulis et al., 1992; Slack & Hinings, 1987). Organizations are dynamic, active, and strategic in response (Amis et al., 2002; Heinze & Lu, 2017), proving change dynamics to be difficult to generalize and rationalize. As a result, ‘how’ and ‘why’ response mechanisms are not well understood. Despite a strongly presumed complimentary fit between archetype and institutional theories (Greenwood & Hinings, 1993), empirical papers remain scarce, especially within the sport management and health spaces. My thesis capitalizes on both archetype and institutional theories to create a robust approach that “enable[s] the categorization of sport organizations in order to identify the nature and extent of change occurring” (Hoyea et al., 2020, p.582). Archetype theory therefore compliments my institutional inquiry in supporting my understanding of sport organizations and their response to change.

1.1 Purpose & Research Questions

The purpose of this research was to examine how and why sport organizations respond to institutional pressures, and to understand what that means for sport organizations and their role in health and health promotion. The research questions that guided this project are:
• What are the sources of institutional pressure for Canadian MSOs to incorporate health into their organizational practice?

• How are Canadian MSOs responding to health-related institutional pressures?

• What factors impact Canadian MSOs’ response to health-related institutional pressures?

My research project is an exploratory inquiry guided by an institutional theoretical framework. I focused on collecting data from MSO websites and online documents to gather an understanding of sport organizations and their environments. Data was analyzed using Hartwig and Dearing’s (1979) two-step exploratory data analysis process, where I also drew insights from critical policy (Chalip, 1996) and document analyses (Bowen, 2009). In the first analytic stage, Canadian sport protocols were summarized into a historical review to contextually situate the reader and document institutional change. Scott’s (2014) Pillars Framework and Oliver’s (1991) strategic response typology were also applied to identify and classify the health-related pressures and MSO responses. In the second analytic stage, archetype theory was applied to classify MSOs according to a proposed typology, and the MSO response was re-expressed within this typology to demonstrate potential response dynamics. Findings were graphically represented using pie graphs to offer an alternative interpretation of emerging trends and dominant themes.

1.2 Significance & Justification of the Research

Within many explorations of institutional pressure, organizational response, or even sport in general, MSOs often fall secondary to more popular sport settings such as that of national sport organizations (NSOs) and professional sport. National and professional
sport organizations are often interested in sport itself, whereas MSOs move away from a direct sport focus to prioritize differential sport outcomes (i.e., diverse outcomes through sport). The near absence of MSOs in sport scholarship may be preventing a holistic understanding of sport, sport organizations, and their roles/capacities in Canada; it may also suggest a limited understanding of differential sport outcomes, such as health and healthy living through sport. Thus, MSOs have real potential to be rich empirical settings in sport and health inquiries, and in helping scholars to understand how sport organizations may come to effectively promote health. Also, a dual archetype and institutional theoretical approach facilitates understandings of how and why response mechanisms – a longstanding puzzle in organizational research. Applying both archetype and institutional theories therefore presents the opportunity for novel findings to emerge from this work.

Empirically speaking, a better understanding of pressure (i.e., how protocols exert pressure to elicit the desired organizational response) and response (i.e., how and why organizations respond to mandates within their environments) dynamics may inform policymakers in creating more effective and actionable sport policies. Canadian sport policies have been critiqued for their ineffectiveness, specifically in generating mass sport participation (Thibault & Harvey, 2013), and so learning how protocols can become more effective is critical. Sport Canada is due to renew CSP (2012) in 2022, therefore implications that move toward more effective protocols are timely. Sport leaders may also come to learn how to more effectively achieve organizational goals, including those related to health. Physical inactivity and sedentary living are physically and financially burdensome problems in Canadian society (Janssen, 2012), and so it is imperative to
capitalize on Canada’s capacity to promote healthy living, including but not limited to avenues via sport. Finally, my findings may also provide insight as to how sport organizations respond and adapt to crises – an important and timely implication in today’s climate of the COVID-19 pandemic.

The thesis is formatted in the following way. Chapter two begins with a literature review introducing and detailing the three primary topics within this project: institutional theory, archetype theory, and sport/physical activity/healthy living. I also include a theoretical review to establish a foundational understanding of major theoretical tenets. Chapter three is focused on institutional theory, introducing its use as a theoretical framework, providing rationale for its selection, and detailing how it was applied for the study. I also dedicate space to the empirical context where I summarize the Canadian MSO landscape and justify why national MSOs were seen best fit. Chapter four addresses the methodology inclusive of the methods and data analysis processes. In chapter five, I present and discuss the findings in relation to institutional and archetype theories. Finally, chapter six summarizes main findings, drawing on practical implications for researchers and policymakers alike. I conclude with limitations encountered in the making of this thesis and submit my recommendations for future research.
Chapter 2: Literature Review

In this chapter, I review relevant scholarship to situate the present study within the field of sport management. In the first section, I provide a general overview of institutional theory and detail its major tenets of institutional change, institutional pressure, and organizational response. Next, I define archetypes and explain its application to this thesis, as well as its complimentary nature to institutional inquiries. In the final section, I define ‘health’ for the purposes of this project and introduce notions of sport and healthy living.

2.1 Institutional Theory in Sport Management

Selznick (1957, p.17) famously defined institutions as “organization[s] infused with value”. Institutions also exist outside of organizational structures to include processes, ideas, and ideologies, such as in socially constructed notions like marriage or racism (Washington & Patterson, 2011). Regardless of the institution’s structure (or lack of structure), institutional theory generally aims to explain structural adaptations, such as how institutions shape and are shaped by their environments and how organizations react and respond to institutional changes (DiMaggio & Powell, 1983). Critically examining how sport organizations respond to a changing environment is central to understanding the interconnected relationship of sport organizations and sport policies.

At inception, institutional theory was concerned with homogeneity, the concept of isomorphism, and was largely used to understand why different organizations often appear and operate so similarly (DiMaggio & Powell, 1983; Scott, 2014; Slack & Hinings, 1994). Since its debut in organization and management studies approximately
40 years ago, institutional theory has transitioned and evolved around the notion of heterogeneity with respect to institutional change, institutional work, and institutional entrepreneurship (Greenwood et al., 2011; Washington & Patterson, 2011). Although institutional theory has diversified and found fit within numerous fields such as engineering and economics, it remains relevant today with understanding how organizations interact and exist within the constraints and freedoms of the institutional space.

Sport management scholarship is no stranger to institutional theory applications. As there are numerous and diverse organizations and institutions within societies, institutional theory is as equally vast, diverse, and complex. In addition to inherent social complexities, sport scholars must also consider the sport environment’s unique political and social factors (Dowling & Washington, 2017). Sport scholars thus have much success with institutional applications as the theory has been found to effectively make sense of complicated settings, such as that of sport. Similarly, the sport environment was found to be a rich setting fit to highlight institutional theory’s many tenets, thus allowing sport scholars a unique opportunity for theoretical contribution. Although there are many components and applications of institutional theory both in and out of sport, for the purposes and interests of this work, tenets of institutional change, institutional pressure, and organizational response are highlighted.

**2.1.1 Institutional Change.** Institutions are known to change and evolve over time – a phenomenon appropriately known as institutional change. Institutional change can be dramatic and abrupt, or slow and evolving. For example, consider the radical change that can occur when an opposing political party is voted into office, or the slow
and ongoing evolution of racist notions over the past century. Recall that institutions are not confined to organizational structure (Washington & Patterson, 2011) and as such, institutional change is rooted in both external and internal organizational and environmental facets. Amis and colleagues (2004) observed leaders to initiate change throughout different parts of an organization and at varying speeds (Amis et al., 2004). Similarly, Washington (2004) found changes in organizational leadership as markers of institutional change. Other indicators of institutional change include “changing vision statements, the changing demographics of the top management team, or even changing headquarter location” (Washington, 2004, p.409).

Institutional change, whether it be dramatic or subtle, and external or internal, is equally impactful in shaping the broader institutional landscape (Mahoney & Thelen, 2010). Alongside institutional changes, organizations experience pressure to adapt their behavior alongside said change to remain legitimate and competitive within their environments (DiMaggio & Powell, 1983). Institutional theorists suggest that organizations that conform with dominant pressures and demands are more likely to be successful in maintaining legitimacy and accruing necessary resources (Heinze & Lu, 2017). Organizations that oppose or resist dominant pressures are likely to lose competitiveness and congruence within their environments. Institutional change is therefore the root of subsequent dynamic processes as organizations adapt and respond to pressures within their changing environments.

2.1.2 Institutional Pressures. Organizations are exposed to various societal facets (i.e., laws, regulations, norms, social expectations, etc.) and thus are constantly navigating and responding to pressures within their environments (Goodstein 1994). Using Scott’s
‘Pillars Framework’ (2014), these societal facets can be grouped according to regulative, normative, and cognitive pressure systems. In doing so, it is possible to identify and classify institutional pressures, and thus come to learn the nature of various societal structures/systems and the resulting pressures that they exert. Scott’s (2014) Pillars Framework emphasizes political and social systems. Therefore, at the onset of this thesis, I assumed that the Pillars Framework (Scott, 2014) would best capture the sport environment’s institutions according to the policy and document data sources that I retrieved. This does not discount the important work of scholars such as DiMaggio and Powell (1983) who examined institutional pressures in the form of coercive, normative, and mimetic pressures. However, DiMaggio and Powell’s (1983) approach emphasizes human resource insights that are necessary to grasp normative and mimetic systems, an area that I could not address under the current environment.

According to the Pillars Framework (Scott, 2014), regulative systems are explicit mandates and formal powers that often take the form of rule setting, monitoring, and sanctioning activities. Regulative pressures typically stem from government agencies, high-stake professions, as well as public and private interest groups (Goodstein, 1994). Regulative systems not only establish rules, but control conformity to those rules using tactful financial rewards/punishments as incentive for compliance. Regulative pressure conformity is therefore driven out of cost-benefit logic and the organization’s best interest (Scott, 2014). Non-profit organizations are particularly vulnerable to regulative systems – and especially those that are politically related – due to their dependency on federal funding and support (Papadimitriou, 2010). Regulative systems are the most explicit and stringent pressures and thus are often visible within a given environment.
According to DiMaggio and Powell (1983), the regulative system’s visibility suggests that organizations are largely controlled by regulative systems, and specifically the political environment (DiMaggio & Powell, 1983), which in turn speaks to the power and importance of regulative political pressures.

Normative systems prescribe social action through mechanisms of acceptability, morality, and ethics, whereby organizations are morally obligated to behave in a socially acceptable manner (Scott, 2014). Normative pressures appear in the form of values, standards, traditions, and norms, and not only define socially acceptable behaviors but also establish an appropriate way to pursue them. These systems stem from occupational groups, governing agencies, and even society itself, and therefore differ across various social contexts (Scott et al., 2000). Normative systems do not enforce compliance, rather they are self-regulated by an organization’s own moral governance and best interest. For example, organizations that cater their actions in favor of the normative system are likely to gain a consumer following, put forward desirable products/services, cater to a market demand, and ultimately survive within their given social setting (Scott et al., 2000). Organizations that defy normative systems risk losing social congruence and legitimacy and are likely to fail in the given social setting (Scott et al., 2000). The normative pillar defines the social parameters in which organizations exist and are especially crucial considerations for public-service organizations.

Cognitive systems are the perceptions and expectations of powerful individual actors that determine dominant belief systems and cultural frames (Scott, 2014). Cognitive systems reflect an individual’s desired behaviors and true intentions, rather than those that are socially acceptable, as in normative systems. Cognitive pressures stem
from powerful stakeholders and notable leaders within society, the organizational environment, and the organization itself. The cognitive pillar is entirely socially constructed with no explicit rules nor real enforcement, making it difficult to identify within the institutional space. Nonetheless, cognitive systems exert notable pressures on organizations and their environments.

This review of institutional pressures has taken an external perspective, but it is important to note that internal organizational pressures exist as well. Pettigrew and colleagues (1992) term the internal organizational environment as the ‘inner context’. Within the inner context, strategies, structures, cultures, management, and political processes were identified as direct sources of internal pressure (Pettigrew et al., 1992). Other internal pressures may include leadership, finances, and human resources (Inglis, 1997). Internal pressures may initiate change or, depending on whether the internal pressure is externally complimentary or contradictory, may contribute to organizational conformity or resistance (Amis et al., 2002). Further, Whelan and Muthuri (2017) found internal pressures capable of overriding and even contradicting external forces. Internal and external pressures are therefore equally critical in capturing a holistic understanding of an environment’s institutional pressures. Exploring inner pressures also lends a critical perspective regarding internal causes for organizational response. Scott’s (2014) Pillars Framework with the added consideration of inner pressures offered an important approach in examining health-related pressures within the Canadian sport sector.

2.1.3 Organizational Response. Organizations are “systems of coordinated and controlled activities” (Meyer & Rowan, 1977, p.340) and are composed of formal rules, objectives, and strategies that give organizations direction, purpose, and structure
Federal sport organizations such as MSOs are governed and partially funded by the state agency for sport, which therefore places them within a highly institutionalized context (Papadimitriou, 1998; Comeau, 2013). Further, MSOs are institutionally-specific organizations, meaning that MSOs experience similar pressures from state agencies regarding policy, program, and structural adaptations (Hoyea et al., 2020). The way that organizations interact with and respond to the demands within this context is what is known as ‘organizational response’. Studying a group of institutionally-specific organizations captures the breadth of various organizational responses to a similar network of institutional change and pressure.

Organizations are active agents that strategically respond to pressures and demands within their environments (Amis et al., 2002). An organization’s response is curated, strategic, and intentional, and can be both intrinsically and extrinsically motivated in pursuit of organizational goals. Responses may also be fluid and evolving alongside changes in the dynamic organizational environment (Heinze & Lu, 2017).

There are several organizational responses documented in management scholarship. According to Oliver’s (1991) strategic response typology, organizational responses include accede, compromise, avoid, defy, and manipulate. Acceding is simply a compliant response to institutional pressures. Acceding can be either incremental or fundamental, where an organization may only comply selectively across certain departments or throughout the entire organization (Heinze & Lu, 2017; Nadler & Tushman, 1990). Organizations may also respond with compromise when faced with conflicting institutional demands, exhibiting a partial compliance. Avoidance refers to organizations escaping from institutional rules, such as through use of concealment.
tactics in attempt to hide non-conformity. One form of avoidance is decoupling, whereby organizations superficially adopt legitimate-seeming practices, rather than doing so substantively (Heinze & Lu, 2017). Defiance is an active form of resistance such as ignoring or challenging institutional rules. Importantly, the absence of an explicit or changing response must not be overlooked as these may indicate a purposely defiant response (Slack & Hinings, 1994). Organizations most often resist when prescribed changes contradict organizational or member values (Amis et al., 2002). Finally, manipulation – the most active response – refers to a purposeful act against the institutional demand. Co-optation is one form of manipulation that involves “the organization recruit[ing] the source of pressure to neutralize opposition and enhance legitimacy” (Heinze & Lu, 2017, p.498). Thus, Oliver’s (1991) strategic response typology was applied in this thesis to identify and classify how MSOs are observed to respond to health-related institutional pressures.

2.1.4 Sport Management Institutional Inquiries. Comeau (2013) reported on the evolution of Canadian sport policies from an institutional perspective. They explored the institutional impact on policy making and discovered three primary factors: federalism, institutionalized relations, and ideas. Federalism speaks to the power relationship amongst government hierarchies and identifies the central power residing at the federal level. Institutionalized relations refer to the federal government’s relationship with various other actors within Canadian society. Finally, ideas speak to the diffusion and spread of ideas and beliefs from the central source – being, the federal government – throughout various other societal sectors. Comeau (2013) identified an institutional presence in Canadian sport policies by way of federalism, institutionalized relations, and
ideas, having claimed institutionalization as a powerful determinant in the development and orientation of said policies.

Other sport management scholars have applied institutional theory to understand institutional change and organizational response, including Heinze and Lu’s (2017) professional sport and Sotiriadou and Wicker’s (2013) community sport inquiries. One notable contribution – and one that is particularly relevant to this work – is that of Slack and Hinings (1994) who investigated institutional pressures regarding Canadian NSOs and Sport Canada. The authors discovered coercive pressures (comparable to regulative systems) were present in government mandated planning requirements; mimetic pressures (comparable to cognitive systems) stemmed from shared resources; and normative pressures (comparable to normative systems) emanated from hiring specialized employees. Slack and Hinings (1994) noted that these isomorphic processes resulted in organizational aggregates growing more homogenous over time, and that this shift was in direct response to an explicit Sport Canada mandate.

2.2 Introduction to Archetype theory

Archetype theory is applied to facilitate understandings of change, such as why change occurs, by use of typologies (Pinnington & Morris, 2002). Archetype theory is premised on organization and management systems being best understood through groupings or patterns rather than individual elements (Greenwood & Hinings, 1993). Archetype theorists suggest that all organizations are made up of varying foundational elements (i.e., values, beliefs, missions, structures etc.), and therefore all organizations may be theoretically typologized accordingly (Greenwood & Hinings, 1993). Archetype theory compliments institutional works, whereby institutional theory helps identify change and
archetype theory rationalizes said change. I apply archetype theory in my work as an analytical tool to understand why the MSO response was as observed. Importantly, archetype theory is broad, including additional tracks, momentum, and inertia tenets, among others. Additional tenets will not be included in this thesis as archetype theory was only applied for its typologizing ability.

An ‘archetype’ refers to an organizational typology that is designed to embody interpretive schemes. Interpretive schemes reflect patterns based on organizational goals, beliefs, values, and structure. Archetypes therefore are groupings of organizations based on patterns of interpretive schemes (Greenwood & Hinings, 1993). Kikulis and colleagues (1992) were some of the early authors in applying archetype theory to make sense of changes happening in the sport sector at the time. The authors identified Canadian NSOs belonging to one of three archetypes: kitchen table, boardroom, and executive office. Findings from Kikulis and colleagues (1992) and subsequent publications are among some of the top cited work in sport management scholarship to date, and continue to frame current organizational analyses and discussions (Hoyea et al., 2020). Although kitchen table, boardroom, and executive office is a long-standing reputable typology in sport management, much has changed in the landscape of sport governance since this work’s development in the early 1990s. Kikulis and colleagues’ (1992) typology was also developed in accordance with NSOs and not within the MSO context, and under different organizational circumstances. It was therefore unknown at the outset of my project if Kikulis and colleagues’ (1992) archetypes would prove suitable for MSO inquiries. Also, based on the exploratory nature of my work, a novel typology rather than one pre-existing was preferred to facilitate novel contributions.
There are many approaches to capture an organization’s interpretive scheme, but ultimately, it is the researcher’s decision to capture the interpretive scheme as they see best fit (Hinings et al., 1996). Tushman and Romanelli (1985) stress the importance of novel values, norms, and beliefs, which would indicate a new strategy or structure; Miller (1987) simply recommends sorting based on themes that unify and organize; Pettigrew (1985) refers to archetype typologies as dominating rationalities or core beliefs. Pettigrew’s (1985) work resonates the most with notions of institutional theory [e.g., ‘institutionalized’ practices are core, dominant, and often visible beliefs/behaviours (Washington & Patterson, 2011)], and therefore was selected as the most fitting guideline to produce ‘institutionally approved archetypes’ (Hinings et al., 1996). Importantly, institutionally approved archetypes encompass both internal and external organizational elements. I therefore sought an interpretive scheme that highlighted the dominant, core MSO beliefs/behaviours (existing both internally and externally) in producing an archetype typology for my work.

2.3 Sport & Healthy Living

In my thesis, I explored the Canadian sport environment for understandings as to how sport systems and structures pressure sport organizations to deliver health outcomes (e.g., termed ‘health-related pressures’ in my work). As such, my thesis leans largely on insights and understandings, including those related to health, from sport’s institutional environment, and namely CSP (2012). CSP (2012) was the one data source to loosely describe the sport organization’s expected role in health, and thus significantly shaped my understanding and application of health in this thesis. CSP’s (2012) health lens was intentionally mimicked within my own work to keep consistent with the sport
environment’s realities and thus maintain my project’s critical positionality. With that said, health, health promotion, and health outcomes are each engrained throughout CSP (2012), but are not explicitly defined or explained. Therefore, due to the mimicking approach that I adopt in this thesis, where I largely draw on insights from CSP (2012), it is generally difficult to define a singular understanding of health in my work.

Within sport’s institutional environment, and specifically within the CSP (2012), a physical activity rooted understanding of health is prevalent. CSP (2012) mandates sport organizations to deliver and promote physical activity through sport in response to nation-wide concerns of physical inactivity, sedentary living, and obesity (Canadian Sport Policy 2012, 2012). Therefore, within the context of this thesis, health is rooted in a physical activity perspective whereby those who meet the Canadian Physical Activity Guidelines’ standards are perceived as engaging in healthy behaviour. In taking a sport approach, I interpret sport as an opportunity for physical activity and explore sport and sport organizations as possible settings for health promotion (i.e., promotion of a physically active lifestyle). I recognize that health and healthy notions are complex constructs that extend beyond physical activity and sport perspectives (i.e., diet, mental wellbeing, absence of smoking, etc.), but my work focuses on this particular understanding of health.

The Government of Canada recommends physical activity as a necessary habit in keeping a physically, mentally, and spiritually healthy lifestyle (Healthy Living, 2019) (The World Health Report 2002 - Reducing Risks, Promoting Healthy Life, 2002). In Canada, adults are recommended to accumulate at least 150 minutes of moderate-to-vigorous aerobic training each week, and to participate in strength training at least twice a
week (Canadian Physical Activity Guidelines, n.d.). Participating in physical activity according to the Canadian Physical Activity Guidelines presents a myriad of health promoting benefits, such as increased strength and fitness, weight management, blood pressure regulation, and improved mental health. Physical activity also offers preventative health benefits for heart disease, osteoporosis, stroke, and some cancers (Canadian Physical Activity Guidelines, n.d.).

Despite physical activity benefits being well known, as well as having clear and concise physical activity guidelines, most Canadians continue to live sedentarily. Adults average 9.6 sedentary hours daily (excluding sleep), and only 16% of Canadian adults meet the national physical activity standards (Key Facts & Stats, 2019). As such, sedentary living has come to be the fourth leading risk factor for global mortality (Key Facts & Stats, 2019; Schulenkorf & Siefken, 2018) and costs the Canadian health system $6.8B annually (Janssen, 2012). Scholars have identified pervasive barriers to physical activity such as accessibility and cost (Salmon et al., 2003) that help rationalize physical inactivity rates in Canada. Urban developments and technological advancements have allowed humans to so easily live sedentarily, whereby physical activity has become increasingly difficult from a motivation perspective. Sedentary behavior is likely further exacerbated in today’s climate of COVID-19 because of stay-at-home orders and facility closures.

Social determinants of health may also impact one’s ability and/or desire to be physically active and thus present challenges in meeting the physical activity guideline standards. Social (i.e., disability, gender, race, education, etc.) and economic (i.e., housing, income, job security, etc.) determinants are known challenges that may
disadvantage one’s ability and/or desire to be physically active (Forchuk et al., 2016). Women, people with disabilities, and Indigenous peoples are recognized marginalized groups within the Canadian sport environment (Canadian Sport Policy 2012, 2012) and thus are likely groups to experience disproportionate challenges around physical activity and sport participation. I acknowledge that physical activity and/or sedentary living are choices for some, but not for all, alluding to the complexity of health and healthy lifestyles, especially across diverse populations. I recognize the importance of the many determinants in and around health and health outcomes, however these factors were not central to my analysis, or the broader inquiry aims.

Sport is often ambitiously overestimated in its capacity to deliver health benefits (Berg et al., 2015; Misener et al., 2018), where it is assumed that the mere provision of or participation in sport directly provides positive health outcomes. In fact, sport’s assumed inherent association with health benefits is one of the “primary justifications for the subsidization of sport by government authorities as well as the continual promotion of sport as beneficial to society” (Edwards & Rowe, 2019, p.1). Despite this idealistic view, empirical evidence supporting sport’s ability to deliver health benefits remain inconsistent (Edwards & Rowe, 2019). From a participation perspective, it is specifically moderate, rhythmic, regular, and safe exercise through sport that may carry significant and beneficial health outcomes (Waddington, 2000). Health outcomes may also include psychosocial benefits and personal development, especially for those participating in group sport settings (Eime et al., 2013). Organized sport participants have also been found less likely to partake in unhealthy lifestyle habits compared to non-sport participants (Torstveit et al., 2018). Organized sport settings may therefore have potential
to promote healthy behaviors, extending even beyond the sport context. From a provision perspective, scholars have argued that “sport could promote physical activity and health only if it were strategically and intentionally managed toward the achievement of such outcomes” (Edwards & Rowe, 2019, p.2). Importantly, this project was not aimed at investigating whether sport organizations can promote health, but whether they are doing so at all as per their mandate to promote health.

Importantly, sport may also present unique health-related challenges and disadvantages, such as experiencing failure, injury, disordered eating, and burnout (Malm et al., 2019). Professional, elite, and competitive sports perpetuate a culture that normalizes pain, injuries, and playing hurt, as demonstrated by the American saying: ‘you play unless the bone sticks through the meat’ (Waddington, 2000). I recognize that competitive sport notions are not always health promoting and therefore sport has obvious limitations with health and healthy living. I purposely avoided excellence-focused sport organizations such as Sport Centres and Institutes (SCIs) and NSOs based on my assumption that these organizations are likely not where sport’s primary health promotion potential lies.

Other limitations for health through sport are evident from organizational and resource dependency perspectives. Many non-profit sport organizations experience strained financial and human resource capacities (Millar & Doherty, 2016), and thus struggle to balance both sport and business objectives. The addition of health objectives is therefore an amplified challenge for organizations where health is not already a primary goal, which seems to be the case for many sport organizations (Casey et al., 2012). Sport organizations must “evolve beyond traditional approaches to delivering
sport” (Edwards & Rowe, 2019, p.2) if they are to find the capacity to effectively promote health.

It is only within the last ten years that researchers have investigated the sport and recreation sectors as a setting for health promotion (Casey et al., 2009). Today, researchers are still unsure how sport may contribute to healthy living at each of the individual, community, and national levels (Mansfield & Piggin, 2016). To date, population-level physical activity interventions have seen little-to-no success, proving physical inactivity and sedentary living to be complicated problems to fix. Mansfield and Piggin (2016, p.533) suggest that “the relationships between sport, physical activity and health reflect complex temporal and spatial struggles over political positions, social ideologies, policymaking and policy enactment”. Edwards and Rowe (2019) share similar findings, urging further investigation into the sport organization context to progress in this space. Investigating the processes and contexts surrounding sport organizations may therefore clarify sport’s ability and capacity to contribute to health outcomes (Edwards & Rowe, 2019). It is on this premise that I prioritize exploring the sport environment and not sport nor the actual sport organizations.
Chapter 3: Theoretical & Empirical Contexts

Chapter three provides the foundational theoretical and empirical knowledge to inform the remainder of this paper. I begin by re-introducing institutional theory, as a theoretical framework. I detail why institutional theory was selected and how it was applied in this project. A section is also dedicated to the empirical context of this paper, situating MSOs within the broader picture of the Canadian sport sector.

3.1 Theoretical Framework

Institutional theory served as the theoretical framework in my work. Beyond finding inherent fit with the context and purpose of this inquiry, the reasons for institutional theory’s application are two-fold. First, exploratory research is purposely flexible to allow for ‘openness’, however, flexible processes also risk weak or misguided work (Reiter, 2017). An institutional theoretical framework offered a pre-established ‘roadmap’ to guide my exploratory process, and thus strengthened my project’s structure and focus. Also, having guided my work based on theory, rather than developing an exploratory process of my own, minimized the potential to introduce personal biases and opinions. An institutional theoretical framework therefore also helped maintain my project’s critical and objective positionality. Applying an institutional theoretical framework was intentional to ensure high quality work and was not done out of convenience.

Second, institutional theory was directly applied as an analytical tool. Respected institutional work such as Scott’s (2014) Pillars Framework and Oliver’s (1991) strategic
response typology was used to identify health-related pressures and MSO responses. Institutional theory scholarship also guided much of the findings and discussion sections in making sense of the complex Canadian sport environment. Thus, my findings were data driven and supported by theory, again reinstating a structural component to my exploratory work.

3.2 Empirical Context

At the national level, Sport Canada identifies three divisions of sport organizations: Sport Centres and Institutes (SCIs), National Sport Organizations (NSOs), and Multisport Service Organizations (MSOs) (Government of Canada, 2017). SCIs were created by Sport Canada in partnership with the Canadian Olympic Committee, the Coaching Association of Canada, and the provincial governments. SCIs support Canadian high-performance sport development, research, and coaching in Canada through a network of training environments and supportive partners (National Multisport Service Organizations, 2020). These sport organizations are entirely excellence focused.

Previously known as National Sport Governing Bodies, or National Sport Federations, NSOs are the governing agencies for individual sports in Canada. These organizations share the responsibility to govern their respective sport and all related activities within Canada; develop and manage high-performance sport programs; and sanction national level competitive events, among other tasks (National Sport Organizations, 2020). NSOs are responsible for three of five CSP (2012) objective groupings which include competitive sport, high-performance sport, and sport for development, thus aligning NSOs within sport’s excellence paradigm.
MSOs, by contrast, develop and offer services to the national sport community related to coaching, post-secondary athletic programming, promoting sport participation, and developing inclusive strategies and programming for marginalized populations. MSOs are responsible for four of five CSP (2012) outcomes, namely: recreational sport, competitive sport, high-performance sport, and sport for development objectives. The chart below outlines CSP (2012) objectives for NSOs and MSOs, along with the corresponding paradigm for each. Note, introduction to sport and sport for development objectives include excellence principles but maintain focus within participation, and therefore are classified as such. I assumed that MSOs would be the most receptive to health pressures based on their pre-existing engagement with participation objectives, and thus would offer a richer empirical setting for the purposes of my work. MSOs, therefore, were selected as the empirical context in this thesis.

**Table 1 – CSP (2012) Objectives for National NSOs and MSOs**

<table>
<thead>
<tr>
<th>Canadian Sport Policy (2012) Objectives</th>
<th>Participation Paradigm</th>
<th>Excellence Paradigm</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction to Sport</td>
<td>Recreational Sport</td>
<td>Sport for Development</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Competitive Sport</td>
</tr>
<tr>
<td>National NSOs</td>
<td></td>
<td>High-Performance Sport</td>
</tr>
<tr>
<td>National MSOs</td>
<td>✓</td>
<td>✓</td>
</tr>
</tbody>
</table>

In Canada, there are 24 national MSOs that are supported and funded by Sport Canada. CSP (2012) outlines flexibility for sport organizations, including MSOs, to pursue policy objectives as the organization sees fit – the policy is designed as a
‘roadmap’ rather than a prescriptive obligation. Therefore, sport organizations are not required to pursue all policy objectives, simply those that align most with their position. With that, sport organizations, and MSOs specifically, are quite diverse in mission, values, and objectives; certain organizations choose to balance participation and excellence outcomes, while others strictly cater to excellence (i.e. Own the Podium) or participation (i.e., ParticipACTION). In taking a roadmap approach, governing structures within the Canadian sport environment, such as the Physical Activity and Sport Act (PASA) (2003) and the CSP (2012) do not differentiate MSOs across objectives and paradigms, nor do they specify which sport organizations are or are not responsible for health outcomes. I mimic this same approach in my thesis, justifying the inclusion of all 24 MSOs as my empirical setting, based on maintaining fit and alignment between my project and the realities of the Canadian sport environment.

The chart below lists the 24 MSOs included in my research. Importantly, I make the distinction that the organizations themselves were not necessarily studied. Rather, the MSOs served as a vessel to access the broader picture of pressure and response dynamics within the MSO environment. The organizational descriptions provided in the chart reflect each organization’s unique mandate and were retrieved directly from the Sport Canada website (National Multisport Service Organizations, n.d.). The purpose of these descriptions is to lay the foundation for investigating the integration of health-related outcomes for these MSOs as will be described in the following chapter.

**Table 2 – Canadian National MSOs and Organizational Descriptions**

<table>
<thead>
<tr>
<th>National Multisport Service Organization</th>
<th>Organizational Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. AthletesCAN</td>
<td>“AthletesCAN represents all Canadian national team athletes, including Aboriginal, Olympic, Paralympic, Pan and Parapan</td>
</tr>
<tr>
<td></td>
<td>Organization</td>
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<tr>
<td>---</td>
<td>--------------------------------------------------</td>
</tr>
<tr>
<td>1</td>
<td>AthletesCAN” (National Multisport Service Organizations, n.d.)</td>
</tr>
<tr>
<td>2</td>
<td>Aboriginal Sport Circle</td>
</tr>
<tr>
<td>3</td>
<td>Canada Games Council</td>
</tr>
<tr>
<td>4</td>
<td>Canadian Women in Sport</td>
</tr>
<tr>
<td>5</td>
<td>Canadian Centre for Ethics in Sports</td>
</tr>
<tr>
<td>6</td>
<td>Canadian Collegiate Athletic</td>
</tr>
<tr>
<td><strong>Association</strong></td>
<td>leadership, programs and services that foster student-athlete development through intercollegiate sport. The Canadian Collegiate Athletic Association caters to 7,500 intercollegiate athletes, over 900 coaches, and more than 150 sport administrators. Its membership consists of a wide variety of post-secondary institutions, including community colleges, universities, university-colleges, CEGEPs and technical Institutes. It is the largest intercollegiate sport organization in Canada with 94 member institutions representing 5 regional member conferences” <em>(National Multisport Service Organizations, n.d.)</em>.</td>
</tr>
<tr>
<td><strong>Canadian Deaf Sports Association</strong></td>
<td>“The Canadian Deaf Sports Association is a non-profit organization dedicated to the development of high performance Deaf and hard of hearing athletes. Through direct financial support the Canadian Deaf Sports Association helps athletes participate in international sport events sanctioned by the International Committee of Sports for the Deaf and the Pan American Sports Committee for the Deaf” <em>(National Multisport Service Organizations, n.d.)</em>.</td>
</tr>
<tr>
<td><strong>Canadians Fitness and Lifestyle Research Institute</strong></td>
<td>“The Canadian Fitness and Lifestyle Research Institute is a national research organization concerned with monitoring the physical activity levels of Canadians and sharing knowledge about the importance of leading healthy, active lifestyles. Supporting national organizations, federal and provincial governments, and Canadian universities, the Institute is a key leader in bringing knowledge on physical activity and sport to its users” <em>(National Multisport Service Organizations, n.d.)</em>.</td>
</tr>
<tr>
<td><strong>Canadian Olympic Committee</strong></td>
<td>“COC is responsible for all aspects of Canada's involvement in the Olympic Movement, including Canada's participation in the Olympic and Pan American Games, managing a wide variety of programs that promote the Olympic Movement in Canada through cultural and educational means, and selecting and supporting Canadian cities in bids to host Olympic Games and Pan American Games” <em>(National Multisport Service Organizations, n.d.)</em>.</td>
</tr>
</tbody>
</table>
| **Canadian Paralympic Committee** | “CPC is a non-profit, private organization with 43 member sports organizations. It is responsible for creating an optimal environment for high-performance Canadian Paralympic Athletes to compete and win in the Paralympic and Parapan*
| 11. Canadian Tire Jumpstart Charities | “Canadian Tire Jumpstart Charities is a national charitable program that helps financially disadvantaged children participate in organized sport and recreation by covering registration, equipment, and/or transportation costs. Since 2005, Canadian Tire Jumpstart has helped give more than 1.6 million Canadian children the chance to play, and the program is still growing” (National Multisport Service Organizations, n.d.). |
| 12. Coaching Association of Canada | “The Coaching Association of Canada unites stakeholders and partners in its commitment to raising the skills and stature of coaches, and ultimately expanding their reach and influence. Through its programs, the CAC empowers coaches with knowledge and skills, promotes ethics, fosters positive attitudes, builds competence, and increases the credibility and recognition of coaches. CAC coordinates the National Coaching Certification Program (NCCP)” (National Multisport Service Organizations, n.d.). |
| 13. Commonwealth Games Canada | “CGC is the international franchise holder for the Commonwealth Games and Commonwealth Sport Movement in Canada and an active, contributing member of the Canadian sport community. Led by a volunteer board of directors and supported by professional staff, CGC is committed to strengthening sport in Canada and throughout the Commonwealth” (National Multisport Service Organizations, n.d.). |
| 14. Go Le Grand Défi inc. | “The Grand défi Pierre Lavoie's mission is to encourage young people to adopt healthy life habits. It partners with schools to help kids make healthier choices in their everyday lives, to adopt habits that will become the norm for future generations” (National Multisport Service Organizations, n.d.). |
| 15. KidSport Canada | “KidSport is a national not-for-profit organization that provides financial assistance for registration fees and equipment to kids aged 18 and under. Through a confidential application process it provides grants so they can play a season of sport. Nationally, KidSport is comprised of a network of 11 provincial/territorial KidSport chapters and...” |
166 community KidSport chapters. Since its creation in 1993, over 750,000 kids across the country have been given the chance to play sport through KidSport grants and sport introduction programming” (National Multisport Service Organizations, n.d.).

16. Motivate Canada

“Motivate Canada is a Canadian charitable organization that specializes in improving the lives of young people by fostering civic engagement, social entrepreneurship, social inclusion and leadership among young people. The organization uses techniques from sport, physical education and community-driven development in their programming. It targets youth from 9 to 25 years old through its programs: Activate, Esteem Team and GEN7” (National Multisport Service Organizations, n.d.).

17. Own the Podium

“Own the Podium provides technical support to national sport organizations with the aim of delivering more Olympic and Paralympic medals for Canada. Own the Podium prioritizes investment strategies by making funding recommendations using evidenced based, expert driven, targeted and collaborative approach” (National Multisport Service Organizations, n.d.).

18. ParticipACTION

“ParticipACTION is a national non-profit organization whose mission is to help Canadians sit less and move more. Originally established in 1971, ParticipACTION works with its partners, which include sport, physical activity, recreation organizations, government and corporate sponsors, to make physical activity a vital part of everyday life” (National Multisport Service Organizations, n.d.).

19. Physical and Health Education Canada

“Physical and Health Education Canada (PHE Canada) champions healthy, active kids by promoting and advancing quality health and physical education opportunities and healthy learning environments. Supporting community champions with quality programs, professional development services, and community activation initiatives, PHE Canada inspires all to live healthy, physically active lives. Their members are predominantly educators working in the school system, the administrators who support them and the university professors engaged in pre-service teacher training and in research in physical and health education” (National Multisport Service Organizations, n.d.).
<table>
<thead>
<tr>
<th></th>
<th><strong>Organization</strong></th>
<th>Description</th>
</tr>
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<tbody>
<tr>
<td>20.</td>
<td>Special Olympics Canada</td>
<td>“Special Olympics Canada is dedicated to enriching the lives of Canadians with intellectual disabilities through sport. For decades, Special Olympics Canada has optimized the benefits of a healthy and active lifestyle through sport to improve the wellbeing of individuals with intellectual disabilities” (National Multisport Service Organizations, n.d.).</td>
</tr>
<tr>
<td>21.</td>
<td>Sport Dispute Resolution Centre of Canada</td>
<td>“Sport Dispute Resolution Centre of Canada (SDRCC)'s mission is to provide the sport community with a national alternative dispute resolution service for sport disputes and expertise and assistance regarding alternative dispute resolution. The SDRCC provides tools and guidance to help resolve minor disputes quickly and informally” (National Multisport Service Organizations, n.d.).</td>
</tr>
<tr>
<td>22.</td>
<td>Sport for Life Society</td>
<td>“Sport for Life exists to build physical literacy and improve the quality of sport based on Long-Term Athlete Development (LTAD). SLS is a movement led by a network of experts and champions working across sport, recreation, education and health, from community to national levels” (National Multisport Service Organizations, n.d.).</td>
</tr>
<tr>
<td>23.</td>
<td>Sport Information Resource Centre</td>
<td>“Sport Information Resource Centre (SIRC) is a not-for-profit amateur sport organization that empowers sport organizations and individuals by sharing credible and evidence based knowledge using relevant and innovative communication channels” (National Multisport Service Organizations, n.d.).</td>
</tr>
<tr>
<td>24.</td>
<td>U SPORTS</td>
<td>“U SPORTS is the national governing body for Canadian university sport. It oversees competition across 52 universities, in 12 different sports for 10,000 student-athletes and 550 coaches and 21 annual national championships. It is also the franchise holder for post-secondary international games (World University Games or Universiades), governed by the Fédération internationale des sports universitaires (FISU)” (National Multisport Service Organizations, n.d.).</td>
</tr>
</tbody>
</table>
Chapter 4: Methodology, Methods & Analyses

The following chapter outlines my research process in regard to the philosophical, procedural, and analytical components of this thesis. COVID-19 has challenged my original project feasibility and consequently I had to pivot and adjust my study design to its current form. I detail the pandemic-related challenges that I faced and how my completed project came to be. I also dedicate space to demonstrate the trustworthiness, particularly in light of these challenges, of my process and include the delimitations and boundaries of this research project.

4.1 COVID-19 Research Challenges

My thesis reads very different today than my proposed plan of research, largely due to COVID-19-related restrictions and challenges that impacted my research process. Although I am fortunate to have not had to terminate or transition my degree as have many, I did experience delays and shortcomings that forced me to pivot my project in the completion of this thesis. Initially I planned to conduct an instrumental case study project where I would interview key stakeholders at select health-focused MSOs. Here, I was wanting to triangulate inner-organizational perspectives against policy findings to identify and explain the discrepancies that I observed across the MSO landscape. However, with the lockdowns and sport cancellations in the early stages of the pandemic, I decided to transition my project away from interviews. While interviews may have taken place virtually, my early interactions with MSOs demonstrated the immensity of this challenge for potential interviewees because of their workload to manage the ever-changing environment.
I faced challenges in securing the necessary documents for the study. I wanted to retrieve MSO documents that would give insight to internal organizational dynamics and processes, in place of stakeholder interviews. Documents as such are publicly available but must be explicitly requested from the organization. Several document requests were made both by phone and email, and across various organizations, all without success. The organizations proved non-responsive or uncooperative in the matter, supporting my earlier decision to forgo interviews but also resulting in my failure to secure any internal documentation. Once again, I found myself needing to transition my project.

At this stage, I reached a point in my degree timeline where my next transition needed to successfully progress to completion, so I began to develop the exploratory inquiry that is detailed herein. From my trial-and-error research process, I learned that my study needed to be able to progress independent from participants, justifying the selected methods for this project, detailed below.

4.2 Researcher’s Positionality

According to Waddington (2000, p.11), “there are probably few ideas which are as widely accepted and uncritically accepted as that linking sport and exercise with good health”. Approaching the intersecting topics of sport and health without a critical standpoint has led to widespread taken for granted assumptions about sport and health that are not necessarily true. Without a critical lens, there is real potential to assume a ‘right way of doing things’ and to accept information for face value. Rather than adopting dominant assumptions and opinions from sources of power, I make a conscious effort to explore primary data for novel findings of my own (Maguire, 2017). Therefore, to capture an accurate and realistic picture of the sport and health space and thus be able to
fairly analyze and discuss it, it is imperative to do so with a critical lens. Importantly, ‘critical’ here does not refer to critical theory; rather, ‘critical’ refers to resisting findings for face value, approaching the work with objectivity, and to question ‘how’ and ‘why’ things are done. Questioning ‘how’ and ‘why’ helps drive important conversations around alternative – and possibly, significant – ways of thinking and doing, that otherwise may not be explored. A critical standpoint is applied to this work as a both a philosophical paradigm, but also as a mindset to keep critically objective throughout this project.

In critical inquiry, I take the ontological stance that reality is contextual and is entirely shaped by situational factors. It would be completely misleading to perform policy analysis without the understanding of the situational factors and contexts that brought that policy to fruition (Chalip, 1996). Based on these notions, I emphasize the investigation of the sport environment and not necessarily sport or the sport organization itself. From an epistemological perspective, I take an outsider position and acknowledge that my role as the researcher is not to co-create knowledge or to interact with the findings, but rather to simply deliver the findings from my research process.

Although a critical standpoint is often considered the gold standard in policy analysis, critical inquiries have their limitations (Eagleton, 2016). I am cognizant that by the very nature of humanity, objectivity is a challenge and may arguably be impossible. According to Eagleton (2016), even the most objective work has some component of subjectivity. To mitigate subjectivity as much as possible, two basic elements were strategically embedded in the research design. First, the research questions were intentionally developed to not require the researcher’s personal opinion, maintaining the
researcher’s outsider positionality. Thus, there is no need for the researcher to intentionally impose personal beliefs and opinions. Second, my research relied on the pre-existing and well-accepted concepts of institutional theory, archetype theory, and the sport management literature. Consequently, much of the discussion leans on credible precedence, and again, not the researcher’s personal standpoint. I acknowledge that it is impossible to fully remove my personal bias from this work, but every effort was made to maintain awareness of my own subjectivity.

4.3 Qualitative Exploratory Methodology

Scholars recognize that physical inactivity and sedentary living are problematic behaviors. As such, previous studies have attempted to increase physical activity levels through sport (Casey et al., 2012) and recreation (Lasby & Sperling, 2007) interventions, as just two examples. Physical inactivity and sedentary living are proving to be challenging problems, and so researchers remain unsure of sport’s capacity to promote health and/or deliver health outcomes. I therefore broadened my approach in conducting a system-level analysis to gather insights towards more effective avenues for sport and health inquiries. In taking an institutional approach, it is yet to be understood how the environment pressures organizations to promote health, and in turn, how MSOs are responding and adapting to this change in mandate. As such, my research questions are geared at understanding the pressures that act on MSOs to promote health, and whether MSOs have responded in some way to these health-promoting pressures. In seeking a more comprehensive understanding of organizational response, I also explore factors that may rationalize how and why MSOs respond to change. New and innovative insights are required in search for solutions around physical inactivity and sedentary living. In
addressing these gaps in our sport and health understandings, there is need to conduct exploratory research.

Exploratory methodologies are fit for projects that require an in-depth understanding of a problem or phenomenon, for generating new ideas, hypotheses, and insights, and to establish priorities for future research endeavors (Stevens et al., 2012). Exploratory inquiries are marked by openness, both as a data analysis method and a philosophical mindset to approach the research (Hartwig & Dearing, 1979). A philosophical interpretation of openness speaks to a receptiveness of unanticipated findings, ensuring that all findings are explored equally, not simply those that support the research inquiry. To ensure openness, exploratory inquiries lend the researcher flexibility and freedom to adapt and evolve throughout the research process in exploration of alternative findings. The flexible nature of exploratory processes therefore facilitated my pursuit of novel findings.

Due to its flexible nature, exploratory inquiries do not have any effective evaluative framework. Absence of an evaluative framework suggests that there is no formal structure to keep the researcher accountable for their processes and thus risk the project’s legitimacy (Hartwig & Dearing, 1979; Reiter, 2017). As such, exploratory work greatly benefits from transparent and calculated research procedures (Reiter, 2017). I aimed to detail my thesis as much detail as possible with transparency in mind. Also, an institutional theoretical framework enabled my use of pre-established tenets and assumptions, prescribing a calculated research plan based on sound precedence, while still allowing the flexibility for new perspectives to emerge. An exploratory methodology
was thus seen best fit for this work in gathering an in-depth understanding of the research questions.

4.4 Data Collection

Exploratory research offers the flexibility to select data collection methods that are best suited for the researcher, the research, and its context. The very nature of ‘exploratory’ alludes to a trial-and-error-like process in selecting methods that offer the insight and clarity that the researcher needs. Not that any selection of methods will suffice, but any method selected out of logic and fit with the research design is suitable (Stevens et al., 2012). For the purposes of this project, my data collection process sought out documents that gave insight into the sport organization environment, specifically regarding health-related pressures and organizational response. Documents were retrieved online and studied, then relevant information (i.e., quotes, diagrams, general themes, etc.) was extracted and systematically organized in an Excel spreadsheet to facilitate later analysis. Data collection ceased once a thorough understanding of relevant sport policies, MSOs, the sport environment, and the pressures that exist within had been achieved. All documents were retrieved from online public domains, so no consent procedures were necessary.

4.4.1 Institutional Pressures. My data collection process began with retrieving documents that demonstrated health-related institutional pressures in sport. An institutional theoretical framework provided precedence regarding known sources of pressure, allowing me to target my search for pressure-revealing documents. Pressures are known to root from regulations, norms, laws, and social expectations, such as those
delivered by government agencies, professions, and both private and public sectors (Goodstein, 1994). I therefore searched for evidence of health-related institutional pressures within the legal, political, social, financial, and inner-organizational domains of the Canadian sport sector.

Legal and political documents included sport acts and policies, namely the *Physical Activity and Sport Act (PASA) (2003)* and *Canadian Sport Policy (CSP) (2012)*. Social documents included reports and survey data that highlighted sport- and health-related social trends. Social items without explicit documentation, such as research and media trends, were also observed. Financial insights were gathered through the Sport Support Program and the Sport Funding and Accountability Framework. To be clear, the exact Sport Funding and Accountability Framework was not actually retrieved, but much eligibility, funding, and application information is widely available online (*Application Guidelines - National Multisport Services Organization*, 2017). Last, the internal organizational environment was explored using national e-survey data regarding participant and sport organization perspectives on sport and sport policy. By nature of this study’s design, internal insights were more difficult to attain. E-survey data proved extremely insightful regarding inner context constraints, but I acknowledge that my understanding of the internal environment was limited. All documents that I collected and later analyzed in the making of this thesis are summarized in the chart below.

**Table 3 – Institutional Pressure Documents Reviewed**

<table>
<thead>
<tr>
<th>Sector</th>
<th>Document</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social</td>
<td>The 2019 ParticipACTION Report Card on Physical Activity for Adults</td>
<td>2019</td>
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</tbody>
</table>
My thesis is not a retrospective project, however, as it can be seen in the chart above, archival documents were also included in my data collection process. Archival documents were not necessarily used to capture the pressure dynamics, but rather to document the relevant institutional change that occurred in the sport environment. Archival documents also served to situate and contextualize the findings within the broader sport space, ensuring a fair and comprehensive analysis to follow. Although the
federal government displayed interest in sport since the early 1900’s, they only became officially involved in sport with the enactment of the *National Physical Fitness Act of Canada* (NPFA) (1943). The NPFA (1943) therefore marks the beginning of the historical policies reviewed in this work.

My inquiry did not enable me to consider the full breadth of all sport protocols. I acknowledge that relevant discussion papers and frameworks such as *Active Canada 20/20* (2012) and the *Framework for Recreation in Canada* (2015) exist. Although extremely relevant, I was forced to be strictly selective with which protocols to include in my work to maintain a manageable volume of data. As such, protocols that emphasized sport were prioritized. The documents included in my project proved sufficient to explore pressure dynamics and institutionalized organizational practices.

**4.4.2 Organizational Response.** The website content of all 24 national MSOs was explored for demonstration of organizational response. My data collection process purposely focused on any demonstration of, or investment in health, healthy living, and health promotion. Specific items of interest were the organization’s purpose, missions, values, goals, strategic plans, programming, events, policies, news, and resources. Information demonstrating organizational response including quotes, diagrams, and general themes were extracted from each website and systematically organized in an Excel spreadsheet to facilitate later analysis.

Only MSO website content was explored to capture the organization’s response, and this was done intentionally. Institutional theorists would suggest that institutionalized practices are obvious and evident (Washington & Patterson, 2011). Therefore, should
health be an institutionalized MSO practice, as CSP (2012) would suggest, health notions should be relatively obvious from the organization’s primary external facing communication. Also, since health resources are developed for public use, they should be easily accessible, such as on a public web domain, as are MSO websites.

4.5 Exploratory Data Analysis

Hartwig and Dearing’s (1979) exploratory data analysis process is both an analytical framework and mindset applicable to both qualitative and quantitative inquiries. Exploratory analyses imply that the more familiar the researcher is with the data, the more the researcher can develop, test, and refine theory, rationalizing the same dataset to be revisited in various ways (Hartwig & Dearing, 1979). Differing from its confirmatory counterpart, exploratory analyses not only explain majority trends, but intentionally refine outlier data to comprehensively deliver all findings. I aimed to explore new insights rather than to confirm pre-existing theories and assumptions, thus exploratory analysis was deemed fit in supporting my project’s critical and objective aims.

Hartwig and Dearing’s (1979) exploratory analysis is a two-stage process marked by skepticism and openness. The first stage is an initial analysis supported by skepticism, which is the visual representation of data. Skepticism offers researchers to interact with data in a meaningful way, often beyond that afforded by statistical or rigid analyses (Cidell, 2010). In skepticism, the researcher may choose any visual representation that effectively displays the data and isolates its ‘smooth’ (majority) and ‘rough’ (outlier) components (Hartwig & Dearing, 1979). For the purposes of my work, pie graphs were found best to visualize findings. The second analytic stage is marked by openness. Openness speaks to an intentional effort to explore both anticipated and unanticipated
findings. Re-expression is a form of openness that involves revisiting initial findings from a new perspective, such as using different methods or visual representations (Hartwig & Dearing, 1979). Openness is conveyed in my work by re-expressing initial findings using archetype theory.

Within the broader exploratory analysis framework, I also adopted principles of critical policy and document analyses, as well as institutional and archetype theoretical tenets, in making sense of the organizational and social policy contexts in sport. In this sense, exploratory analysis was used to guide the overall analytic process, while critical policy and document analyses insights were the actual analytical tools. Critical policy analyses aim to appraise social problems and resulting social policies to ultimately derive social meaning and social change (Chalip, 1996). In critical policy analysis, the ‘critical’ aspect refers to an active reading process that involves reflecting on how and why the policy is as it reads. I drew upon critical policy analysis insights in making sense of the social policy contexts of health-related pressures in sport as identified in the CSP (2012) and the PASA (2003). Document analysis was used for all other non-legislative documents, including MSO website content. According to Bowen (2009, p.28), document analysis is a procedure that “entails finding, selecting, appraising (making sense of), and synthesizing data contained in documents”. My specific data analysis process is detailed below.

4.5.1 Exploratory Analysis Phase One: Institutional theory. The first data analysis stage largely called on institutional theory to identify institutional change, institutional pressures, and organizational responses. My process began with archived Canadian sport protocols. Drawing on insights from critical policy analysis, I studied and
summarized the relevant sport protocols within a brief historical review, embedded in the findings of this paper. A historical review serves to contextualize my findings and to demonstrate the institutional change that I observed in Canadian sport protocols. The historical review also primed my mindset as a researcher to ensure an informed approach as I transition my analysis to a current-day focus.

Next, I turned to current-day sport protocols and supporting documents in search of indications of institutional pressures. Scott’s (2014) Pillars Framework was applied to both identify and classify the health-related pressures within the MSO environment. Possible classifications included regulative, normative, and cognitive, with the additional consideration of the internal organizational environment. The identified institutional pressures were graphed according to their classification to demonstrate the spread of health-related pressures within the MSO environment.

The 24 MSO websites were explored for demonstration of organizational response. Oliver’s (1991) strategic response typology was applied to identify and classify each organization’s response according to accede, compromise, avoid, defy, and manipulate. Findings were graphed to display the presence and proportions of organizational response across the MSO landscape.

**4.5.2 Exploratory Analysis Phase Two: Archetype theory.** The second phase of my analytic process was a re-expression of phase one findings using archetype theory. I first classified organizations based on an institutionally approved archetype typology. I created an original typology derived from CSP’s (2012) MSO objectives: development, recreation, competitive, and high-performance *(Canadian Sport Policy 2012, 2012)*, listed in the chart below. Typology descriptions are provided to demonstrate
classification criteria. The descriptions maintain the original policy objectives’ integrity, but with altered language to better reflect an organizational definition.

**Table 4 – CSP (2012) Typology and Categorical Descriptions**

<table>
<thead>
<tr>
<th>CSP (2012) Objective Typology</th>
<th>Description</th>
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<tbody>
<tr>
<td>Development</td>
<td>Organizations that capitalize on sport as a tool for social and economic development and the promotion of positive values. Not involved in sport provision.</td>
</tr>
<tr>
<td>Recreation</td>
<td>Organizations that provide sport opportunities for the purposes of fun, health, social interaction, and relaxation. Directly involved in sport provision.</td>
</tr>
<tr>
<td>Competitive</td>
<td>Organizations that provide opportunities for athletes to improve their skills and participate in safe competitions. National focus.</td>
</tr>
<tr>
<td>High-performance</td>
<td>Organizations that provide opportunities for athletes to improve their skills and participate in safe competitions. International focus.</td>
</tr>
</tbody>
</table>

MSOs were typologized based on their observed fit within a given category, which may or may not align with the organizations’ self-identified descriptions. A CSP (2012) objective typology was strategically selected to facilitate analysis of MSO behavior in direct response to its primary governing protocol, bridging this theoretical paper with the reality of the sport environment. I also assumed that a CSP (2012) objective typology would be a fair and consistent grouping scheme, as policy objectives are ubiquitous throughout the Canadian sport sector. Findings were graphed to demonstrate the proportions of various organizational types across MSOs.

Once I typologized the MSOs, I then revisited the organizational responses for each category. Re-expression facilitated my understanding of how different organizational forms may vary their responses despite a unanimous institutional pressure.
A pie graph was used to visually represent the organizational responses for each typology category.

Hartwig and Dearing’s (1979) exploratory analysis process typically occurs in two stages. If needed, a third and fourth round of re-expression can occur until the researcher is satisfied with their understanding of findings. I ceased my data analysis process once I felt that I had a thorough understanding of pressure and response dynamics within the MSO environment and could rationalize what I had observed. Two rounds of data analysis proved sufficient in doing so.

4.6 Trustworthiness of Analyses

Within the discipline of qualitative research, scholars incorporate strategic protocols into study designs to convince their work’s trustworthiness and overall quality. This project was tailored to ensure trust by means of rigor, transparency, and confirmatory processes.

Rigor is a broad term that speaks to a project’s richness regarding theoretical constructs, data sources, and samples (Tracy, 2010). Rigorous research can be achieved by incorporating requisite variety, meaning to match the complexity of a given tool or framework to that of the item of study (Tracy, 2010). Institutional theory is highly applicable in sport management research as the theory’s complexity matches that of the sport environment. Requisite variety therefore ensures that the researcher is best prepared to approach and make sense of the data. Rigor was also strengthened in this project by face validity, which speaks to whether the project appears to be reasonable and appropriate (Tracy, 2010). Throughout this project, I practiced due diligence, taking time and focusing attention to achieve a thorough and viable approach to the project. Face
validity demands the project to be carried out beyond convenience (Tracy, 2010). My project’s design has evolved several times, navigated challenges that otherwise would have made this project unfeasible, and thus supporting my resilience in its execution.

In qualitative research, transparency is “the disclosure of the study’s challenges and unexpected twists and turns and revelations of the ways research foci transformed over time” (Tracy, 2010, p.842). I am transparent regarding the pandemic-related challenges that I experienced and how I persevered as a researcher to produce a complete thesis regardless. Transparent work affords the reader to make an informed decision, to accept or reject what they have read, knowing that it is the authors truth, and that no information has been withheld. Transparency also gives credit where credit is due regarding authorship, acknowledgements, and funding. As detailed above, COVID-19 has presented challenges that have made the research process difficult – more than it already is for a novel researcher, like myself. As a result, I have had to lean on the support of my supervisor, advisory committee, and research team more than I would have liked. It has been a humbling and rewarding experience to need help and to have had the support and guidance for this project when needed. I credit these people endlessly.

My colleagues’ support throughout this project has also allowed for confirmatory processes. I was able to refine ideas and talk through difficult concepts. My supervisor also had access to all research files allowing for the confirmation or redirection of ideas and writing. Importantly, confirmation helps reinforce the critical position in this work, allowing an outsider to help identify and navigate free of personal biases that I otherwise might have missed. Confirmation also helped my confidence as a novel researcher, and
for the audience to trust the findings, knowing that the process has been overseen and confirmed by a field expert.

4.7 Delimitations

This study has been delimited to include Canadian federal sport protocol documents within the period 1943-2012. In 1943 the federal government became officially involved in sport and sport governance with the passing of the NPFA (1943). The NPFA (1943) marks the outset of Canadian sport policy, such that examination of sport policy and its evolution be conducted over time. CSP (2012) is the most current federal sport policy and so 2012 marks the end of sport protocols reviewed in this work. The exclusion of provincial/territorial and municipal governments in my analysis prevents an entirely holistic understanding of Canadian sport governance. While provincial/territorial and municipal governments also play a role in sport and sport policy, the federal level is the central authority on the matter, and of primary interest for this project.

The study has also been delimited to include only Canadian national MSOs. As MSOs are the primary sport organizations to cater to differential sport outcomes, it was assumed that MSOs would best demonstrate health and health promotion. Federal level sport organizations, rather than provincial or municipal chapters, were also assumed to be the most receptive to a federal mandate. Again, the omission of certain divisions of sport organizations does not allow for a full appreciation of the sport sector, but decisions were justified based on the purpose of the research and research questions.

Another delimitation includes my collection of data from online domains. The evolving nature of online content means that my data only captures a snapshot understanding of what is going on in the online space in that given moment. This study
has therefore been delimited to include MSO website content dated from June through November 2020. Updates and changes to website content since then have not been included in this study and have not been considered in the findings of this project.

Last, this work was delimited by an institutional theoretical framework. Although institutional theory is vast and diverse in its application to the organizational environment, it limits my analysis to the environment space. I therefore do not have the capacity to analyze the organizational space or sport itself. Although this work does not aim to reach an analysis such as that, this project does not have the capacity to do so should the opportunity present itself.
Chapter 5: Findings & Discussion

In the following chapter, I present and discuss my findings. I begin with a historical overview of Canadian sport protocols to situate the research within its contextual space, and to demonstrate the health-related institutional change in sport governance. I then discuss findings that emerged from the policy and document analyses, related to institutional pressure and organizational response. Finally, I re-expressed findings using archetype theory to discuss organizational response according to a CSP (2012) objective typology.

5.1 Background: Canadian federal government & sport (1943-2012)

The Canadian sport sector is regulated by Canada’s state agency for sport, Sport Canada – a division within the federal Ministry of Culture, History, and Sport. Sport Canada has both created and collaborated on sport protocols over the years, outlining goals and direction for the overall sport sector. Sport protocols are largely developed based on the contextual community and environment for which they serve; therefore to explore the political space as I do in this project, the social contextual environment must also be considered (Chalip, 1996). A brief historical review of federal involvement, trends, and relevant protocols is included herein to demonstrate institutional change across Canadian sport history.

In Canada, the Ministry of Health has long recognized sport, fitness, and recreation as key actors in healthy living; and although Canada’s municipal and provincial governments were relatively involved in sport since the 1800s, it was not until 1943 that the federal government was first involved in sport legislation with the passing of the NPFA (1943) (Comeau, 2013). At the time, sport interest and physical fitness
ideals were growing in international popularity, but also, military personnel were returning home and rehabilitating from war. The Act was therefore concerned with notions of health, participation, and national safety per its contextual needs (MacIntosh et al., 1988) and aimed to promote health and physical fitness in school programs (Eisenhardt, 1945). The NPFA (1943) ultimately proved unsuccessful in achieving its goals and was dismissed in 1954 along with the federal government’s involvement in sport for the time being. Historical context around the NPFA (1943) demonstrates that Canadian sport policy were initially motivated by and focused on principles of health and fitness (Misener, 2001).

Following the collapse of the NPFA (1943) and the withdrawal of federal sport governance, Canadian health noticeably declined. Canadian’s deteriorating health was so noticeable that in 1959, the Duke of Edinburg openly criticized Canadians to the Canadian Medical Association (CMA) for their poor health and fitness (Comeau, 2013). The CMA was embarrassed by the public scrutiny and demanded the federal government reinsert itself in sport governance (Cosentino & Howell, 1971). The public event marked a pivotal moment for Canadians in linking national pride to both sport and health, as well as exemplifying the importance of federal involvement within the sport sector.

Into the 1960’s, the federal government used sport as a strategic vehicle to advance notions of fitness and national prestige through international athletic performance. The federal government therefore found a resurgence in sport policy in 1961 with the passing of Bill C-131, or the Fitness and Amateur Sport Act (FASA) (1961) (Comeau, 2013). The FASA (1961) was enacted amid concerns for Canadian health – primarily due to cigarette smoking – and in part motivated by Canada’s poor performance
at the 1956/1960 Olympic and Paralympic Games (Thibault & Harvey, 2013). The FASA (1961) aimed to establish funding guidelines to increase both national and international amateur sport opportunities. The Act also promoted and strategized recreational sport programming to ultimately get more Canadians involved in sport and recreation. Although the FASA (1961) failed to generate mass recreation participation, it maintained the overarching legislative framework for Canadian sport over the next 40 years, and inspired the subsequent Canadian Sport Policy (2002).

The federal government grew more invested in sport towards the end of the 60s and into the 70s, demonstrated by Pierre Elliott Trudeau’s electoral promise to attend to sport outcomes (Thibault & Harvey, 2013). A Proposed Sports Policy for Canadians (PSPC) (1970) was later released in 1970 by the Ministry of National Health and Welfare. The PSPC (1970) was enacted concurrently with the FASA (1961), and whereby the FASA’s (1961) primary role was to generate mass sport participation, the PSPC (1970) drove sport excellence entirely. At the time, sport excellence ideals were growing leading up to the 1976 Montreal Olympic and Paralympic Games, pushing sport excellence to the front of political objectives. The PSPC (1970) reallocated federal funding from recreation and grassroot sport programming to excellence-focused causes (Thibault & Harvey, 2013). The federal government soon after launched Game Plan 76’, which was a direct and explicit strategy reaffirming the above, specifically in the name of the 1976 Montreal Olympic and Paralympic Games. Excellence principles carried forward and were maintained as a political priority throughout the 70’s and 80’s.

The year 1990 marked a pivotal moment in Canadian sport policies (Thibault & Harvey, 2013). Following Ben Johnson’s 100-meter win at the 1988 Seoul Olympic
Games, and subsequent disqualification due to positive drug testing, Canada’s federal government launched a drug and banned substance in sport inquiry. The inquiry, titled ‘Inquiry into the use of Drugs and Banned Practices Intended to Increase Athletic Performance’ was led by Justice Charles Dubin, and thus was coined as the ‘Dubin Inquiry’. Many reports and discussions, and even a federal anti-doping policy, emerged directly from the Dubin Inquiry over the following years. Notably, these documents critiqued the federal government’s overemphasis on sport excellence, high-performance sport, and international athletic success; the documents also revealed “wilful blindness of both technical and administrative staff within the Canadian sport system, upsetting the preconceptions of the place of high-performance sport and its importance to Canada” (Thibault & Harvey, 2013, p.106). As such, high-performance sport and excellence principles – that were very much so the fabric of sport in Canada in the 70’s and 80’s – came to a halt. Context around the Dubin Inquiry reflect the regulative and authoritative nature of federalism in Canadian sport.

The Dubin Inquiry occurred alongside a social climate of financial crisis “where reducing the financial deficit became the primary political objective of the Progressive Conservative federal government of the day” (Thibault & Harvey, 2013, p.107). Sport objectives therefore adopted a ‘core sport approach’ which favored outcomes that ‘add value’ to Canadian society. As such, the Sport Funding and Accountability Framework (SFAF)(1996) – a framework to determine an organization’s federal funding eligibility from what is known as the Sport Support Program (SSP) – funded sport organizations that developed and delivered ‘valuable’ sport opportunities (Thibault & Harvey, 2013). The SFAF was intentionally curated to financially incentivize sport organizations into
advancing CSP objectives. Both the SFAF and SSP continue to be used in current-day federal sport funding, albeit with changes in funding priorities and allocation.

The start of a new millennia marked renewed strategic federal investment in sport. The Canadian government in partnership with the Secretary of State for Sport undertook “an extensive pan-Canadian consultation process” (Thibault & Harvey, 2013, p.11) which culminated with the enactment of Canadian Sport Policy (2002) and the Physical Activity and Sport Act (PASA) (2003). CSP (2002) claimed to equally tend to both excellence and participation outcomes. The Policy aimed to improve Canada’s national and international athletic successes, especially in the lead up to the Vancouver 2010 Olympic and Paralympic Games. CSP (2002) also targeted sport participation in attempt to lower sedentary living-related healthcare costs – the first official political acknowledgement of the problem of sedentary living (Thibault & Harvey, 2013). CSP (2002) was also the first policy to target aid for marginalized groups in sport, namely women, Indigenous groups, and athletes with disabilities. In the ensuing years, targeted policies emerged such as Sport Canada’s Policy on Aboriginal Peoples’ Participation in Sport (2005), Policy on Sport for Persons With a Disability (2006) and Actively Engaged: A Policy on Sport for Women and Girls (2009). Ironically, CSP (2002) was intentionally curated to increase the effectiveness of the Canadian sport system; however, Canadian sport policies, including CSP (2002), have consistently failed to meet their goals year after year. Not only did national sport participation not increase, but it in fact declined from 34% in 1998 to 28% in 2012 (Thibault & Harvey, 2013). Also, as of 2012, the SSP allocated 60% of funding towards excellence outcomes but only 40% towards participation (Thibault & Harvey, 2013), despite CSP (2002) purportedly placing equal
importance on both paradigms. Historical context warns caution in policy analyses, suggesting that policies may not function as they claim, supporting my consultation of supplementary documents in addition to sport protocols in the making of this thesis.

The PASA (2003) legally bound the federal government to fund and develop physical activity and sport in Canada; the Act also empowered the respective federal Minister to develop and enact sport protocols for the sport sector. The PASA (2003) is a notable act that legally reclaimed the participation paradigm in an era entirely dominated by excellence. The Act remains active today, situating current-day sport within a participation paradigm with emphasis on health outcomes.

Within the last decade, Canadians have increasingly lived sedentarily. According to the most recent ParticipACTION report card, most Canadian adults are sedentary for approximately ten hours of their waking day, and only 16% of these adults are meeting the recommended physical activity guidelines (The 2019 ParticipACTION Report Card on Physical Activity for Adults, 2019). Canada’s sport policy renewed in 2012 with CSP (2012) – the current federal policy for sport in Canada. Although the Policy includes both excellence and participation paradigm objectives, CSP (2012) emphasizes sport and physical activity participation in response to the problem of sedentary living. Under regulation of CSP (2012), all federal sport organizations have a joint responsibility to promote health and healthy living (Canadian Sport Policy 2012, 2012).

5.2 Institutional Change

The historical review above not only situates the reader within a Canadian sport protocol context, but also serves as evidence for institutional change. From the mid 1900s to current day sport protocols, the political environment has consistently fluctuated among
participation and excellence paradigms. Early sport legislation such as the NPFA (1943) and the FASA (1961) prioritized the participation paradigm. These Acts were either short lived or ineffective in achieving their goals, suggesting that participation language may have been used to justify the pursuit of excellence objectives (Comeau, 2013). Sport policies in the 1970s were heavily excellence focused, notably in a context of international recognition through Olympic and Paralympic successes. CSP (2002) claimed to equally support both excellence and participation sport outcomes. Then, the PASA (2003) and CSP (2012) situted current day sport governance within a theme of participation. It is here that my research inquiry is now situated: understanding how this change, from excellence to participation, created a pressure for sport organizations to promote health, and how MSOs are responding to this change and why. Figure 1 offers a summarized visual chronology of the sport environment’s thematic fluctuation, demonstrating institutional change from 1943 to 2012.

**Figure 1** – Visual representation of institutional change (summarized) across Canadian sport protocols
5.3 Institutional Pressure

The institutional change that has occurred in the Canadian sport environment suggests that there has been a paralleled shift in institutional pressure. In the 1970s, via policies such as *A Proposed Sport Policy for Canadians* and *Game Plan 76’,* the sport environment largely pressured sport to deliver excellence outcomes. Specifically, the sport sector and its actors were pressured to tailor programs and services towards building capacity and success within competitive and high-performance sport. Consequently, while under excellence-focused regulation, sport participation and development objectives went largely overlooked. The institutional change that occurred by enacting CSP (2002) and the PASA (2003) initiated a transition in the sport environment that moved away from excellence and towards participation. Years later with CSP (2012), both sport participation and health outcomes are clear policy objectives, securing current day sport within a theme of participation. As such, sport organizations experience pressures to deliver participation outcomes. Notably, institutional pressures are broad and extend beyond the scope of health; however, I only explored health-related pressures for the purposes of this work. The pressure, its sources, and its activity in today’s sport sector were investigated according to Scott’s (2014) Pillars Framework and are detailed herein.

Kikulis (2000) critiqued institutional scholarship for its narrow consideration of institutional pressures, encouraging future work to consider pressures beyond the political sector. Drawing from archival, document, and policy records, I considered pressures stemming from all aspects of the sport environment (that is, as much as possible with the given data). The data analysis revealed (1) PASA (2003), (2) SFAF/SSP, (3) CSP (2012),
(4) secondary sport policies, (5) society, and (6) the internal organizational context to be significant sources of health-related pressure within the Canadian sport environment.

5.3.1 Physical Activity and Sport Act (2003). The PASA (2003) is a regulative legal pressure in the Canadian sport environment – deemed regulative based on its governing structure and rule-like effect (Scott, 2014). The PASA (2003) legally establishes the federal government’s responsibility for and commitment to sport and physical activity. By affiliation, sport stakeholders and sport organizations, including provincial and municipal bodies, are also legally committed to physical activity and sport, through a top-down effect. In this sense, the Act seems to be the root of a sector-wide pressure and call to action regarding physical activity and sport in Canada. Following the former FASA (1961) legislation, which was largely criticized for its failure to generate mass sport participation, the PASA (2003) is an important pressure; the Act symbolizes the government’s acknowledgement of the problem of physical inactivity, its continued investment in the matter, and its desire to reinvigorate the sport space.

5.3.2 Sport Funding and Accountability Framework/Sport Support Program. The SFAF/SSP are regulative pressures within the political and financial sport sectors. The SFAF is a political tool that determines a sport organization’s eligibility for SSP funding. SSP eligibility, among other criteria, is largely correlated with advancing CSP (2012) goals (Application Guidelines - National Multisport Services Organization, 2017); simply put, the more goals that an organization can contribute to, the more funding they become eligible for. Sport Canada therefore regulates sport organization compliance to the PASA (2003) and CSP (2012) via SSP financial incentives – suggesting the regulative nature of all three concerted systems. The SFAF/SSP are sizeable pressures
considering that in 2018, MSOs each earned upwards of $6,000,000.00, and not less than $200,000.00 (Funding, 2021). By their very nature, non-profit organizations (i.e., MSOs) often depend on external funding for survival, and thus are highly vulnerable to coercion in exchange for funding (Edwards et al., 2009). My response analysis therefore calls on SSP funding to verify whether higher earning MSOs were more receptive to institutional pressures. Interestingly in 2018, no MSO failed to qualify for SSP funding, which should theoretically indicate that all MSOs effectively advanced CSP (2012) goals and were receptive to institutional pressures.

Also, new as of 2020, the SSP launched ‘Innovation Initiative’ – a funding portfolio that specifically hires “the testing of innovative quality sport approaches in order to develop evidence-based solutions to improve sport participation” (Funding, 2021). The Innovation Initiative supports and strengthens sport participation mandates enacted by CSP (2012), speaking to the regulative nature of SSP/SFAF and CSP (2012) systems. The Innovation Initiative also demonstrates Sport Canada’s awareness of problematic physical inactivity and their eagerness for a solution, thereby also serving as a regulative pressure in of itself.

5.3.3 Canadian Sport Policy (2012). CSP (2012) is the current policy that outlines specific goals, objectives, mandates, and an overall agenda for the Canadian sport sector. The Policy therefore was the primary document used in my work to operationally define the health-related goals and expectations for MSOs. CSP (2012) was intentionally designed as a ‘roadmap’ intended to support and guide sport leaders in achieving organizational goals. Although the CSP (2012) is not stringent in design, the Policy remains regulative by establishing general rules and directions as enacted by the
PASA (2003) federal legislation and enforced by the SFAF/SSP (Scott, 2014; Washington & Patterson, 2011). Institutional scholars have discussed the regulative and coercive nature of policies and the political environment, as well as government mandates in general, regardless of organizational response (DiMaggio & Powell, 1983; Edwards et al., 2009; Scott, 2014; Slack & Hinings, 1994). Sport management scholars have even specifically commented to the ‘politically controlled’ nature of the Canadian sport environment (Edwards et al., 2009). CSP (2012) therefore, regardless of the implementation by MSOs, is a prominent regulative political pressure within the Canadian sport sector.

The Policy identifies national MSOs to cater to four schools of objectives: sport for development, recreational sport, competitive sport, and high-performance sport. Below are a sample of CSP (2012) objectives that I have included to demonstrate the language and variety of health-related mandates.

Health-related CSP (2012) objectives include:

- “The vision for the Policy is to have, by 2022: a dynamic and innovative culture that promotes and celebrates participation and excellence in sport” (Canadian Sport Policy 2012, 2012, p.5).
- "Canada faces several challenges: obesity, physical inactivity and related health problems, an aging population, and increased diversity of the Canadian population. Sport participation must reflect and accommodate Canada's changing demographics" (Canadian Sport Policy 2012, 2012, p. 4).
- “Canadians participate in sport activities in a manner that strengthens their personal development, provides enjoyment and relaxation, reduces stress, improves physical and mental health, physical fitness and general well-being, and enables them to live more productive and rewarding lives” (Canadian Sport Policy 2012, 2012, p. 4).
- “Canadians gain physical literacy and sport skills that allow them to participate, compete and excel in sport, deriving personal pleasure and pride in their
accomplishments, and skills that can be transferred to other fields of practice” (Canadian Sport Policy 2012, 2012, p. 4).

- “Canadians improve their standard of living and economic well-being through sport; communities benefit from healthier citizens and the reduction of health care costs…” (Canadian Sport Policy 2012, 2012, p. 4).

The above objectives demonstrate CSP’s (2012) acknowledgement of the problem of physical inactivity and obesity, and that sport participation is promoted as a result. However, there are Policy challenges – such as vague and inconsistent language – that compromise mandate effectiveness. For example, CSP (2012) does not distinguish as to which organizations are responsible for health outcomes and in what capacity. Development and recreation objectives include language around sport participation and accessibility; competitive and high-performance objectives include language around physical literacy and safe sport. In both instances, health notions are present, but are not well defined or explained, and thus are left to each organization’s own interpretation. Additionally, CSP’s (2012) ‘roadmap’ design offers flexibility for sport organizations to pursue objectives as seen fit. I anticipated select sport organizations to capitalize on the Policy’s roadmap design as an escape tactic from health objectives. Competitive and high-performance organizations may have even neglected health outcomes by falling to the assumption that health is not their own responsibility, but that of recreation and development organizations.

Undefined terms and vague policy language, combined with an overall roadmap design, leaves much room for interpretation as to what is health, how health is to be promoted, and how sport organizations are to deliver health outcomes. CSP (2012) is therefore a complicated pressure that may cause scattered organizational responses. In this thesis, I interpreted CSP (2012) to impose a health mandate for all sport
organizations and therefore I expected all MSOs to demonstrate health in some capacity. I was receptive to varying degrees of attention to health. I also considered that different sport organizations prioritize various objectives, so health, health promotion, and health outcomes may appear differently for each organization.

5.3.4 Secondary Sport Policies. Sport Canada includes a collection of policies complimentary to CSP that target underserved groups in sport, including: (1) Policy on Aboriginal people’s participation in sport (2005), (2) Policy for sport for persons with a disability (2006), and (3) Actively engaged: a policy on sport for women and girls (2009). I adopt the term ‘secondary policies’ in this work to reference the above collection of complimentary CSP policies; ‘secondary’ here does not suggest of lesser importance or power. Secondary policies enlist unique mandates, but most notably extend CSP objectives to include Indigenous populations, people with disabilities, and women. Therefore, not only are sport organizations expected to deliver health outcomes, but for those health outcomes to be applicable and appropriate for all Canadians, including Indigenous groups, people with disabilities, and women. Secondary policies were also identified as regulative political pressures as they too stem from governing political structures and enlist rule-like mandates (Scott, 2014; Washington & Patterson, 2011).

5.3.5 Societal Pressures. Societal pressures were those identified from the general social space, such as cultural, media, and research trends. Long-term and popular social trends become social norms overtime, taking on rule-like and prescriptive roles within communities (Scott, 2014). Organizations that fail to adopt and comply with social norms are likely to compromise their efficacy and success within an environment (Scott, 2014). Sport organizations serve the public and must adapt their services alongside
community social norms to remain competitive and legitimate within that space, suggesting the presence of a normative system.

Cultural, media, and research sources indicate a shift in community recognition and concern for poor physical health. E-survey data identified participants that primarily participate in sport for health and enjoyment (Towards a Renewed Canadian Sport Policy Discussion Paper, 2011), suggesting that health outcomes are both important and desirable in Canadian communities. I observed that research publications regarding health, physical (in)activity, and sport have increased in volume by about 40% in the last 10 years. Media outlets have also more frequently publicized sport and physical activity discussions and campaigns via news, government, and sport marketing organizations. The growing volume of health content around the concern for physical inactivity and comorbidities suggests that health is institutionalized in Canadian sport (Washington & Patterson, 2011). Sport organizations therefore experience normative pressure to deliver health outcomes. According to the normative pillar, sport organizations must comply and deliver health outcomes if they are to maintain legitimacy within their communities.

5.3.6 Inner Organizational Context. The inner context was explored using self-report e-survey data dated 2011. No other documentation highlighting the inner context was retrieved. As such, any internal insights are not extensive but are telling, nonetheless. Two general pressure themes were identified from the internal organizational context. First, survey data indicated that sport organizations have an inherent desire to produce health outcomes. For example, specific rationales for promoting sport included: “to promote healthy lifestyles; to increase the exposure of children and youth to sport; … to increase individual and family-based participation and to contribute to community
building" (CANADIAN SPORT POLICY RENEWAL 2011 Electronic Survey Summary Report, 2011, p.5). Organizational rationales may already be in response to health-related pressures or may be implicitly driven by health-conscious leaders. Regardless, it appears that the organization itself may be its own source of pressure to deliver health outcomes.

Second, survey data also indicated that sport organizations struggle with health outcomes due to insufficient funds, facilities, and human resources (Towards a Renewed Canadian Sport Policy Discussion Paper, 2011). Resources are strong determinants of organizational capacity to achieve goals. Internal organizational insights suggest conflicting pressures, whereby sport organizations are interested in health, but experience restrictive capacities that may be impeding their ability to manage health outcomes.

The six identified sources of health-related institutional pressures indicate an apparent concern for physical inactivity; a call to action for the sport sector to manage health outcomes; and for health outcomes to be developed and applicable for all Canadians, including Indigenous populations, people with disabilities, and women. The six pressures stem from five sectors: political, financial, legal, social, and organizational. The vast prominence of health-related institutional pressures across the Canadian sport sector suggests that health is indeed institutionalized within Canadian sport. Three pressure classifications were observed: regulative, normative, and inner, with regulative pressures taking dominance, as depicted in Figure 2. No cognitive pressures were identified, likely due to data that did not highlight individual stakeholders.
According to the Pillars Framework, regulative and normative pressures are forceful actors whereby recipients feel coerced to comply (Scott, 2014). Similarly, internal pressures determine how organizations are both willing and able to respond to demands within the external environment (Whelan & Muthuri, 2017). I found a multi-sectoral prevalence of health-related regulative and normative pressures throughout the Canadian sport sector, creating an environment in which respondents are theoretically coerced to comply. Insights from the inner context add that sport organizations self-impose health-promoting pressures, but equally experience constraints that inhibit sport organizations’ capacity to promote health. Considering both external and internal pressures support my assumption that organizations may defy pressures out of obligation, and not necessarily due to disinterest or unwillingness to contribute to health.

**5.4 Organizational Response**

Organizational response to health-related institutional pressures was observed using MSO website content. Oliver’s (1991) strategic response typology was applied to classify
organizational response for all 24 MSOs, detailed below in sequence from most compliant to most resistant.

5.4.1 Accede. Acceding is a compliant organizational response whereby an organization fully succumbs to the demands enlisted by the institutional pressure (Oliver, 1991). For the purposes of this work, organizations who acceded to health-related pressures had clear demonstration of an active and on-going effort to promote health through sport; it was made clear that health was an institutionalized practice throughout the entirety of the organization. My analysis revealed eight MSO’s (33%) that acceded to the institutional pressure, including: Canadian Fitness and Lifestyle Research Institute, Jumpstart, Go Le Grand Défi, KidSport, ParticipACTION, Physical and Health Education Canada, Special Olympics Canada, and Sport for Life. All sport organizations experienced a unanimous, and largely regulative, health pressure, yet only a third of MSOs complied.

Recall that sport organizations are also mandated to target marginalized populations in sport, such as Indigenous groups, people with disabilities, and women. For the purposes of my work, the pressure remains within the boundaries of health and therefore is concerned with health outcomes for underserved groups in sport. Of the eight acceding organizations, Special Olympics Canada was the only MSO to also cater to an underserved population, and therefore was the only organization to fully succumb to the institutional pressure. One observed compliance across 24 MSOs insinuates a disconnect between sport organizations and their broader systems, or in other words, a defective ‘institutionalized relation’ (Comeau, 2013). The parameters of the identified defective relationship were explored in the remaining analyses. It is also interesting to note that
Special Olympics Canada is the highest SSP funded MSO, having earned approximately $6,000,000.00 in 2018 (Funding, 2021). Slack and Hinings (1994) would anticipate other MSOs to mimic Special Olympics Canada’s organizational practices in attempt to qualify for comparable funding. No organizations were observed to mimic the breadth of Special Olympics Canada.

**5.4.2 Compromise.** Compromising organizations attempted to work towards both excellence and participation paradigms; health was not an organizational focus but was incorporated to some degree. The compromise response appeared different for each organization but was typically marked by two or three passable health-related efforts. For example, an excellence-focused organization with a couple of secondary health-related initiatives may be compromising, as there was an attempt to appeal to both paradigms, but where health was clearly not priority. My analysis identified five MSO’s (21%) that responded with compromise, namely: AthletesCAN, Aboriginal Sports Circle, Canadian Olympic Committee, Canadian Paralympic Committee, and the Sport Information Resource Centre.

It is worth noting here that colonial understandings of health are prevalent across the sport sector and are engrained in Canadian sport protocols. Colonial health perspectives also pervaded my lens as a researcher and my thesis. Non-colonial understandings of health, such as Indigenous perspectives, were not considered and therefore may not have appeared in my analysis. My analysis of the Aboriginal Sports Circle and other MSOs’ Indigenous practices is therefore limited in this capacity.

**5.4.3 Avoid.** De-coupling is a type of avoidance where organizations adopt escape tactics to conceal their non-conformity (Oliver, 1991). De-coupling was interpreted as a
superficial compliance, such as adopting a health-related practice/program of little-to-no merit or value, with the remaining organizational facets entirely excellence-focused. The Canadian Centre for Ethics in Sport was the one MSO (4%) found to de-couple, based on their seemingly superficial compliance regarding the ‘True Sport Program’. The True Sport Program aims to leverage and provide sport opportunities within fairness, excellence, inclusion, and fun principles (True Sport Principles, 2016; What Is True Sport?, n.d.). However, no sport opportunities were observed, much program content was outdated, and the program did not seem to act on or deliver any real purpose. For example, True Sport’s webpage indicated “Anyone who has joined True Sport and continues to play, train, compete and/or offer a sport experience that is consistent with the True Sport Principles is part of True Sport” (What Is True Sport?, n.d.). Here, it is difficult to differentiate generic sport participation and True Sport’s offering, except that no sport provision was even observed. Importantly, the ‘get involved’ link was merely a newsletter subscription. Aside from the True Sport Program, all other Canadian Centre of Ethics in Sport website content was excellence related, up-to-date, and good quality overall. The True Sport Program therefore appeared not as an impactful sport program, but rather an intentionally cosmetic display of health to detract from the organization’s overall health omittance. No real fundamental or substantive organizational effort to incorporate health was observed, and this was interpreted as de-coupling, or an escape of institutional rules.

5.4.4 Defy. Defiant organizations were identified as having no demonstration of health and focused almost entirely on sport excellence. My data analysis identified ten defiant MSOs (42%) – the most frequently observed response across all 24 MSOs.
Defiant organizations included: Canada Games, Canadian Women and Sport, Canadian Collegiate Athletic Association, Canadian Deaf Sports Association, Coaching Association of Canada, Commonwealth Sport Canada, Motivate Canada, Own the Podium, Sport Dispute Resolution Centre of Canada, and U Sports.

SSP is intended to incentivize organizational compliance to CSP (2012); I therefore anticipated defiant organizations to receive little or no SSP funding as punishment for their inattention to prescribed mandates. However, in 2018, defiant organizations accounted for $18,115,530.00 or 49% of MSO SSP funding (National Multisport Service Organizations, 2020), suggesting that SSP does not effectively incentivize organizational compliance as intended, given that defiant organizations continue to be funded regardless of their response (Poisson-de Haro & Bitektine, 2014). The SSP’s continuous reward for defiant organizations is indicative of an ineffective institutionalized relation (Comeau, 2013).

According to Scott’s (2014) Pillars Framework, a coercive environment is likely to be met with compliant organizational responses, such as accede or even compromise. This was not found to be the case. In fact, the organizational responses proved quite diverse, consisting of four of the five strategic responses (Oliver, 1991): accede, compromise, avoid, and defy – depicted in Figure 3. No manipulation responses were identified. Overall, MSOs have not adapted well to the change in their environment, demonstrated by a majority of defiant responses. Organizational response findings support speculation of a problematic or ineffective institutionalized relation, likely rooted from or related to SSP. Alternatively, scattered MSO responses may also result from the ambiguous nature of CSP (2012).
The institutional analysis until now has revealed four primary findings. First, institutional change has occurred, shifting the sporting focus from excellence to participation. Second, health-related institutional pressures are categorically regulative, normative, and inner, and stem from political, legal, financial, societal, and organizational dimensions. Third, health notions are institutionalized in the Canadian sport environment. Last, the organizational response was counterintuitive to what institutional theorists would suggest, consisting of a heterogenous display of accede, compromise, avoid, and defy. In completing my first round of institutional analysis, much of what I aimed to understand remained unclear, thus rationalizing my need for a second round of analysis.

5.5 Re-expression by Archetype Theory

Re-expression is a second order analysis that revisits initial findings using a new approach to refine unclear data or to unveil novel findings (Hartwig & Dearing, 1979). Preliminary institutional analysis results proved counter-intuitive, thus begging further investigation. As such, I applied archetype theory to typologize organizations and re-
express the MSO response to both clarify and extend findings that emerged from the first order institutional analysis.

5.5.1 Organizational Typology. The re-expressed analysis began with categorizing all 24 MSOs according to the four CSP (2012) MSO objectives: development, recreation, competitive, and high-performance. Typologizing organizations revealed 15 (63%) development, two (8%) competitive, and seven (29%) high-performance organizations. No recreation organizations were identified. See Figure 4 for a visual representation of MSOs and their archetype classifications.

![MSO Classification per Archetype Typology](image)

**Figure 4** – Visual representation of the MSO classification per archetype typology

Classifying MSOs per a CSP (2012) objective typology was telling. Absence of recreation organizations suggests that MSOs are neglecting recreation objectives, marking a gap in the national sport community. Further, MSOs are spread sporadically across typology categories, suggesting disproportionate capacities in working towards each of the four objectives. For example, development organizations are plentiful and therefore experience heightened capacities to successfully fulfill development objectives. Competitive organizations by comparison are fewer and therefore have smaller capacities.
to achieve competitive outcomes. Competitive organizations are therefore unlikely to experience residual capacity to attend to differential outcomes, including health. Inner context insights support the finding that resource limitations actively prevent organizations from achieving the full breadth of their goals (*CANADIAN SPORT POLICY RENEWAL 2011 Electronic Survey Summary Report*, 2011). Re-allocating MSOs equitably across the four CSP (2012) objectives may help correct contrasting organizational capacities. In turn, MSOs may be better able to fulfil policy objectives and find the capacity to incorporate health into organizational practice.

Once I classified the organizations, I then revisited initial MSO responses according to each typology category. I explored MSO responses in relation to an organizational typology in search of rationale as to why certain organizations behave and respond as was observed.

**5.5.2 Development.** 15 MSOs were identified to correspond with CSP (2012) development objectives. Development organizations are tasked with leveraging sport for social, economic, and positive development overall. Within this definition, social development objectives may include social inclusion, social interaction, and gender equity through sport, as just a few examples. As development objectives strongly correlate with health outcomes, it was anticipated that development organizations would readily comply to a health-related institutional pressure. Although most development organizations did accede, the overall response was scattered: eight (53%) acceded, two (13%) compromised, one (7%) avoided, and four (27%) defied. *Figure 5* provides a visual representation of MSO response according to the development typology.
Development organizations represent 63% of the MSO landscape and in 2018, accounted for 68% of SSP funding, or $24,753,770.00. There is a disproportionate resource surplus allocated for development objectives. Development organizations therefore experience heightened capacity both financially and organizationally, making them the most able and likely typological classification to comply to institutional pressure. In fact, of the four typological categories, only development organizations displayed an acceding response. I speculated that development organizations displayed the largest acceding response because health outcomes were either already incorporated into organizational practice or were easily transitioned to their agendas. Casey and colleagues (2009) support this point in having found that organizations whose values are consistent with prescribed changes, as are development organizations, are more likely to incorporate that change. Although development organizations have benefited from this funding scheme, remaining MSOs and CSP (2012) objectives are consequently underserved, as demonstrated by the absence of recreation organizations.

![Development MSO Response](image)

**Figure 5** – Visual representation of Development MSO response
5.5.3 Competitive. Two competitive organizations were identified, both (100%) of which defied the institutional pressure. Competitive organizations promote and provide safe competitive sport opportunities, heavily aligning with the excellence paradigm. The presence of regulative health-related pressures therefore suggests that competitive organizations experience conflicting institutional demands (Oliver, 1991). Casey and colleagues (2012) support this point having found that organizations struggle to balance sport, business, and health outcomes, especially when health is not a primary focus, such as in the case of competitive organizations. As such, competitive organizations were not anticipated to accede, but compromise. However, both competitive organizations defied, as seen in Figure 6.

SSP funding reveals that competitive organizations received $1,174,650.00 (3%) in 2018. On an individual basis, competitive organizations were well funded by SSP, even despite their defiant response. Echoing earlier SSP findings, it seems that competitive organizations do not experience financial incentive to adapt to health-related pressures as they continue to be funded regardless. At the broader landscape level, competitive outcomes are severely underfunded, especially compared to development outcomes. Complying to institutional change often requires organizations to invest in new developments, which require time, effort, and money. In consequence of such a discrepant spread of resources across typological categories, competitive organizations likely have restrictive capacities, which may be impeding their ability to comply or compromise to institutional demands (Poisson-de Haro & Bitktine, 2014). Growing competitive representation within the MSO landscape may build organizational capacity
and in turn, facilitate competitive MSO’s ability to meet broader outcomes, including health.

**Competitive MSO Response**

![Circle Diagram](image)

**Figure 6** – Visual representation of Competitive MSO response

### 5.5.4 High-Performance.

Seven high-performance organizations were identified. Like competitive organizations, high-performance organizations are also concerned with safe competitive sport objectives, but differ by focusing on international opportunities. High-performance organizations were also expected to compromise, as they too experience conflicting institutional demands (Oliver, 1991). The analysis revealed a split response: four (57%) defied and three (43%) compromised to the institutional pressure, as depicted in **Figure 7**.

SSP data in 2018 identified that high-performance organizations received $10,785,395.00, accounting for 29% of total MSO funding – a relatively fair allocation of funding across seven organizations. The high-performance category was the most balanced in terms of organizational representation and SSP funding, and therefore supposedly had capacity to contribute to high-performance outcomes, and beyond. This may explain why high-performance organizations were better able to respond with
compromise compared to competitive organizations. Improving internal capacity issues within the MSO landscape may therefore improve external organizational compliance. Due to the ambiguous nature of the CSP (2012), it is possible that defiant organizations fell to the assumption that health is not an applicable objective for high-performance organizations. However, no clear response indicators were found to explain high-performance organization’s defiance. This is certainly where further probing with individuals within the organizations would have helped clarify these findings.

**High-Performance MSO Response**

![Pie chart showing 57% Defy and 43% Compromise]

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**Figure 7** – Visual representation of High-Performance MSO response

**5.5.5 Recreation.** Lastly, although no recreation organizations were identified, there is still merit in exploring why that may be the case. Recreation-focused sport organizations aim to provide sport opportunities for the purposes of health, fun, social interaction, and relaxation, largely aligning with the participation paradigm. It is counterintuitive to not have identified recreation MSOs seeing that there is a direct fit with recreation organization objectives and institutional pressure mandates. Absence of recreation MSOs suggests that no organization is effectively contributing to recreational
outcomes – an obvious gap in the MSO landscape, but also confirmation for the relatively few observed health-initiatives across MSOs. Although Canada’s National Recreation Framework was not included in my analysis, the framework has identified “unique yet complementary efforts” between sport and recreation (A Framework for Recreation in Canada - 2015 - Pathways to Wellbeing, 2015, p.16), and I observed this same disconnect in my findings.

CSP (2012) identifies recreation organizations to be directly involved in the provision of sport programming. For example, the Policy reads: “Opportunities are provided for persons from traditionally underrepresented and/or marginalized populations to actively engage in all aspects of sport participation” (Canadian Sport Policy 2012, 2012, p. 10). Throughout my analysis, certain MSOs were identified to align with recreation principles, however, their omittance of sport provision prevented any MSO to be recreationally typologized. National-level MSOs typically are not involved in sport delivery, but rather focus on sport governance and policy making. It is illogical for CSP (2012) to mandate an objective that is inherently unsuited for the designated organization. It is possible that CSP (2012) may have incorporated ‘provision’ language in attempt to cater to various divisions of sport organizations in its roadmap design. Findings related to recreation organizations provide further evidence of the CSP’s (2012) ambiguity.

Trends emerging from the re-expressed analysis continue to point to a problematic institutionalized relation between the overarching sport policy and sport organizations. Typologizing organizations defined the disconnect to exist within the realms of structure and capacity. Systematically assigning MSOs across CSP objectives may be a useful strategy to build structure across the MSO landscape and remedy some
of the ambiguity in policy objectives. A clear objective allocation framework may help hold MSOs accountable in achieving their goals and in turn, CSP’s efficacy in achieving desired outcomes may be improved.

Re-visiting the MSO response according to a CSP (2012) objective typology also reiterated a disconnected institutionalized relation regarding the SSP. Findings suggested that SSP funding was not properly rewarded to compliant organizations and withheld from defiant ones, as intended. Rather, all MSOs received SSP funding regardless of response, which likely inhibited financial incentives from motivating MSO compliance toward institutional demands. Should the SSP allocate funds as rewards and punishments as intended, MSOs may experience financial motivation to adapt to institutional change.
Chapter 6: Conclusion

The final chapter summarizes key findings and discusses theoretical and empirical contributions. I also include practical and timely applications to demonstrate the significance of this research project. Last, I address limitations experienced in the making of this thesis and include my recommendations for future work.

This project was an exploratory inquiry that aimed to understand how sport organizations (MSOs) respond to health-related institutional pressures. Data analysis using institutional theory initially revealed an institutional space dominated by coercive pressures, such as regulative, normative, and inner. As these pressures are constricting and rule-like, I anticipated observing compliant organizational responses, such as accede and compromise, in accordance with Scott’s (2014) Pillars Framework. This was not found to be the case. Rather, MSO responses were heterogenous, including accede, compromise, avoid, and defy, with defy being the most prominent. It is puzzling to have found a coercive institutional environment met largely with organizational resistance. Preliminary institutional inquiry therefore suggested a disconnected institutionalized relation within the Canadian sport environment.

A second analysis using archetype theory and organizational response was necessary to identify more comprehensive findings. First, typologizing organizations revealed a sporadic spread of MSOs across the four CSP (2012) objectives: 15 development, two competitive, seven high-performance, and no recreation organizations were identified. Findings suggest that a scattered allocation of MSOs across CSP (2012) objectives may have impacted organizational capacity to comply to institutional pressure.
Consequently, many defiant organizations are assumed to have selected their response out of obligation, and not necessarily by choice. Systematically allocating MSOs evenly across CSP objectives could reinstate structure across the MSO landscape. In doing so, capacity restrictions may be remedied, facilitating sport organizations to be better positioned in adapting to changes within their environments. Second, revisiting the MSO response according to a CSP (2012) objective typology continued to reiterate a disconnected institutionalized relation, this time regarding the SSP. I discovered that the SSP maintained funding for all MSOs regardless of organizational response. Defiant MSOs therefore likely do not experience financial incentive to comply to institutional pressures. Revising the SFAF to be more stringent in funding allocation may reinforce the SSP’s importance in motivating organizational compliance with policy mandates.

Overall findings point to structural, capacity, and funding related problems that help explain how and why MSOs respond to health-related institutional pressures. Canadian sport protocols (i.e., NPFA) have previously been critiqued for their stringent design. CSP (2012), by contrast, was designed as a liberal roadmap for organizations to select goals and objectives as seen fit. The result is a chaotic MSO landscape with no effective structure or accountability, which was found likely to impede MSOs’ compliance to institutional pressure.

Results from this project are both important and timely. Institutional scholars have identified the need to broaden and diversify understandings of institutional pressures to include those existing beyond the political space (Kikulis, 2000). I successfully provided a comprehensive review of institutional pressures emanating from five sectors, contributing to our understanding of how sectors collaborate to exude unified pressures.
Also, studying a population of institutionally-specific organizations facilitated my ability to capture a diverse representation of organizational responses. Further, response diversity was not only broadly observed across the MSO landscape, but even within typology boundaries, demonstrating similar organizations to exhibit varied responses. This thesis therefore provides empirical support for organizations being active, strategic, and heterogenous in nature (Amis et al., 2002), even within homogenous organizational groupings. Organizations are complex systems, and layered within the sport environment, sport organizations may arguably be even more complex. As such, scholars have struggled to identify why organizations exhibit certain responses. A dual application of both institutional and archetype theories proved effective at identifying how and why organizations respond to institutional pressures – a critical theoretical contribution in sport management scholarship. Although this was an exploratory project and warrants future confirmatory processes, it establishes a strong foundation for scholars to build upon in gathering a more comprehensive understanding of organizational response.

Empirically speaking, CSP’s upcoming renewal in 2022 presents the opportunity to reinvigorate Canadian sport governance. Generally, findings may inform policymakers in implementing more effective and actionable sport protocols. Lessons from this work could help sport policies become more effective in achieving their goals, including health promotion through sport. MSOs may also experience fewer capacity restrictions, thereby facilitating their ability to react and adapt to environmental changes and resulting institutional pressures. Here, it becomes clear how systemic financial and structural change may facilitate sport organizations to actively and effectively tend to health outcomes. COVID-19 layers interesting implications as well. Institutional change and
organizational response can be applied to understand how organizations respond to crises, such as the COVID-19 pandemic. My work identifies that organizations may be adaptive to change, but only if able to. Thus, organizations with heightened capacities may be better able to successfully adapt (Clutterbuck & Doherty, 2019) and essentially ‘survive’ through the COVID-19 pandemic.

6.1 Limitations and Future Work

It is well-known that COVID-19 has presented numerous challenges over the past year, of which research initiatives were not excluded. For example, person-to-person contact restrictions and lockdown scenarios have halted sport and sport organizations in Canada. Despite said challenges and limitations, my original project was adapted and has evolved over the course of its trajectory to protect its integrity and prove high-quality.

I attempted to interview sport organization employees which proved not possible due to non-responsive or uninterested staff. It would be interesting to know whether this response was the result of employee preoccupation with other matter such as return to sport strategy, or if they truly had no interest in participating in this project. The latter may have indicated a defiant organizational response and is telling of the organization’s commitment to health. Nonetheless, I could not interview any sport stakeholders and therefore was unable to capture a comprehensive view of the inner organizational context, as originally intended. Future research should seek to use my findings as a basis for further exploration and/or confirmation with key stakeholders.

MSO website content was strategically selected as a primary data source for organizational response to give indication as to whether health was an institutionalized practice. My decision to use MSO website content – although beneficial for the general
purposes of this work – may have equally presented limitations, especially within the context of COVID-19. One of my findings was that there were no recreation organizations within the MSO landscape. Recreation organizations were largely identified by sport provision. It is possible that COVID-19-related closures may have skewed my interpretation of a sport organization’s program offerings. I spent extra effort investigating programming such as searching for cancelled events or retro-dated calendar entries to mitigate unintentional oversight. However, if an organization removed all evidence of sport provision from their website, then it was understood that the organization does not provide sport opportunities.

In applying an exploratory methodology, my project moved away from a narrow inquiry to explore the broader role of systemic factors within the sport environment. Insights from a system-level analysis allow for the strategic redirection of research towards more promising avenues in understanding sport and health. Building on findings from my project, future work may consider an in-depth investigation into the observed financial and structural problem areas to help build organizational capacity to tend to health outcomes.

While my project was focused on the sport environment’s federal level, it must also be recognized that in Canada, the provincial governments are also critical in the implementation of sport and sport policy. Specifically, Canada’s provincial governments are highly involved in sport development and recreation objectives, and as such, the provincial sector may hold critical insights regarding health and health outcomes through sport. Replicating this study at the provincial level might look quite different than that of
the national level, and thus may help extend understandings of sport and sport
governance related to health and health outcomes.

The nearing renewal of CSP in 2022 presents a fantastic opportunity for scholars
to capitalize on a moment of institutional change and to observe its effect in real time.
Institutional change, institutional pressure, and organizational response are all known to
evolve over time. There is therefore opportunity to investigate pressure and response
dynamics at the inception of a new sport policy with potential to follow through for its
entire enactment – likely another 10-year period. A longitudinal investigation of
organizational response beginning at a pivotal time of change may provide a better
understanding as to how and why organizations respond.
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