**Organizational influence in autism diagnosis: Adaptation from imprinting**

Abstract:

How do organizations respond when a new practice becomes popular in the organizational field?  In this paper, I investigate how theories predicting isomorphism and theories predicting inertia are reconciled when the newly popular practice differs from practices already established in the organization.  Rather than competing with one another, I find that adaptation and inertia have a nuanced and complementary relationship.  I show that (1) inertial mechanisms of imprinting unintentionally shape the way that adaptation is enacted in an organization, and (2) the act of organizational adaptation leads to inertia in the form of new imprints.  My empirical setting is the diagnosis of Autism Spectrum Disorder (ASD) in a large healthcare organization, Kaiser Permanente Northern California (KPNC), between 2000 and 2012.  Consistent with increased field-level pressure for better diagnosis after 1998, rates of diagnosis increased and age of diagnosis decreased in KPNC.  However, upon closer inspection, substantial variation was found across three specialized ASD clinics, with diagnosis rates differing by as much as 30 percentage points.  In tracing the difference, I find that prior individual-level imprints on directors led to different diagnostic practices at each clinic and that a new set of clinic-level imprints contributes to remarkable stability of diagnostic practices at each clinic.   This theory-building paper illustrates how field-level changes typically expected to lead to adaptation and isomorphism can be moderated unintentionally by prior locally-institutionalized practices and result in practice variation.  The form of post-adaptation inertial forces is shaped by management decisions, often seemingly minor, during organizational adaptation.