

## Positive Deviance Approach

By Qian Liu (University of Otago)

The term, positive deviance, appeared in nutrition studies several decades ago when researchers sought to understand why some children in poor communities were better nourished than others (Zeitlin et al., 1990). Initially implemented as an intervention to reduce malnutrition among children in poor Vietnamese villages, the approach achieved extraordinary outcomes: within two years, malnutrition dropped substantially in every village that had adopted the approach (Pascale, Pascale, Sternin, & Sternin, 2010). Since then, the approach has been applied to and successfully resolved complex health-related problems including pregnancy outcomes, condom use, female circumcision, hospital infections and infant mortality (Bradley et al., 2009; Pascale et al., 2010).

The positive deviance approach involves “identifying individuals with better outcomes than their peers (positive deviance) and enabling communities to adopt the behaviours that explain the improved outcome (Marsh, Schroeder, Dearden, Sternin, & Sternin, 2004, p. 1177)”. In practice, it requires partnership with communities to (a) develop case definitions, (b) identify people who achieved unexpected good outcome, (c) discover uncommon behaviours that are associated with the good outcome through interviews and observations, (d) analyse findings to confirm that the behaviours are uncommon and accessible to others, (e) design behaviour change activities to encourage community adoption, and (f) monitor implementation and evaluate the results (Marsh, Schroeder, Dearden, Sternin, & Sternin, 2004).

According to Spreitzer and Sonenshein (2004), deviance can be understood from the statistical, the supra-conformity, the reactive and the normative stances. The statistical stance views deviance as behavioural outliers. As long as the behaviour differs from the average experience, it is deviant. This stance inadequately connects the behaviour to the relevant problem and social context. The supra-conformity stance views deviance as excessive conformity to norms, which leads to dysfunctions such as addiction. This stance attributes deviance to the over-reliance

on rather than the departure from norms. The reactive stance views a behaviour deviant only if a reaction occurs among the audience. In cases where theft is not caught, the thief is not deviance. The normative stance which aligns more with the positive deviance approach, viewing deviance as behaviours that departure from norms. It is statistically different from common practices, resulted from disconformity rather than supra-conformity and does not necessarily require social responses.

In extant studies, the positive deviance approach is portrayed with four characteristics. First, positive deviants are high performers. Second, positive deviants follow uncommon practices. Third, solutions are driven internally by the community rather than imposed externally. Fourth, solutions are sustainable within existing resource constraints (Baxter, Taylor, Kellar, & Lawton, 2015). These characteristics highlight the difference between the positive deviance approach and the classical approach to behavioural changes (Singhal, 2010). The classical approach to change is deficit- or needs-based, which identifies a deficiency through benchmarking and implements the externally acquired solutions top-down, often with a heavy reliance on additional resources (Baxter et al., 2015; Lapping et al., 2002). By contrast, the positive deviance approach is assets-based which utilises solutions that already exist within the community and emphasises social mobilisation (Lapping et al., 2002; Marsh et al., 2004). Because solutions are endogenous, they are likely to be sustainable without the support of external resources and compatible with the local culture.

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