

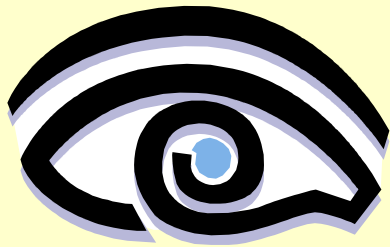
# Positive Deviance Approach For Behavior & Social Change



**POSITIVE**  
**DEVIANCE**  
INITIATIVE

**Tufts University**

# The Power of Positive Deviance



Solutions before our very eyes

In every community or organization there are certain individuals or groups whose **uncommon practices/behaviors** enable them to find **better solutions** to problems than their neighbors or colleagues who have access to the **same resources**

# Illustrative Impact - 2008

- ❖ Sustained 65-80 percent reduction in childhood malnutrition in Vietnamese communities with a population of 2.2. million people
- ❖ Significant reduction in childhood malnutrition in communities among 41 countries around the world
- ❖ Documented 30% to 62% reduction in MRSA transmissions in 3 US hospitals
- ❖ Reduction in neo-natal mortality and morbidity in Pakistan and Vietnam
- ❖ 50 per cent increase in primary school student retention in two districts participating schools in Misiones province, Argentina.
- ❖ Documented 30 % reduction in girl trafficking among 900 children in poor villages in East Java
- ❖ Thousands of female circumcision averted in Egypt over the last 8 years, and the creation of dozens of FGM free communities

# Positive Deviance Inquiry



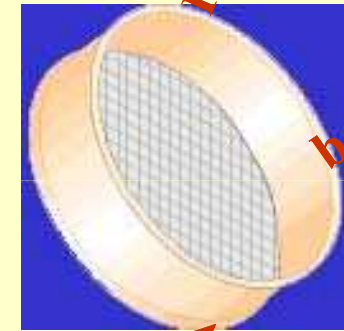
Enables community to discover  
successful **uncommon**  
**behaviors/ strategies** practiced  
by the Positive Deviants

# Analyzing PD Findings

*PDI findings are passed through a conceptual “accessibility sieve”*

Only those behaviors/strategies accessible to all are kept

The rest are “**TBU**,” True but Useless (i.e. not accessible to all) and are discarded



PD Behaviors

Behaviors

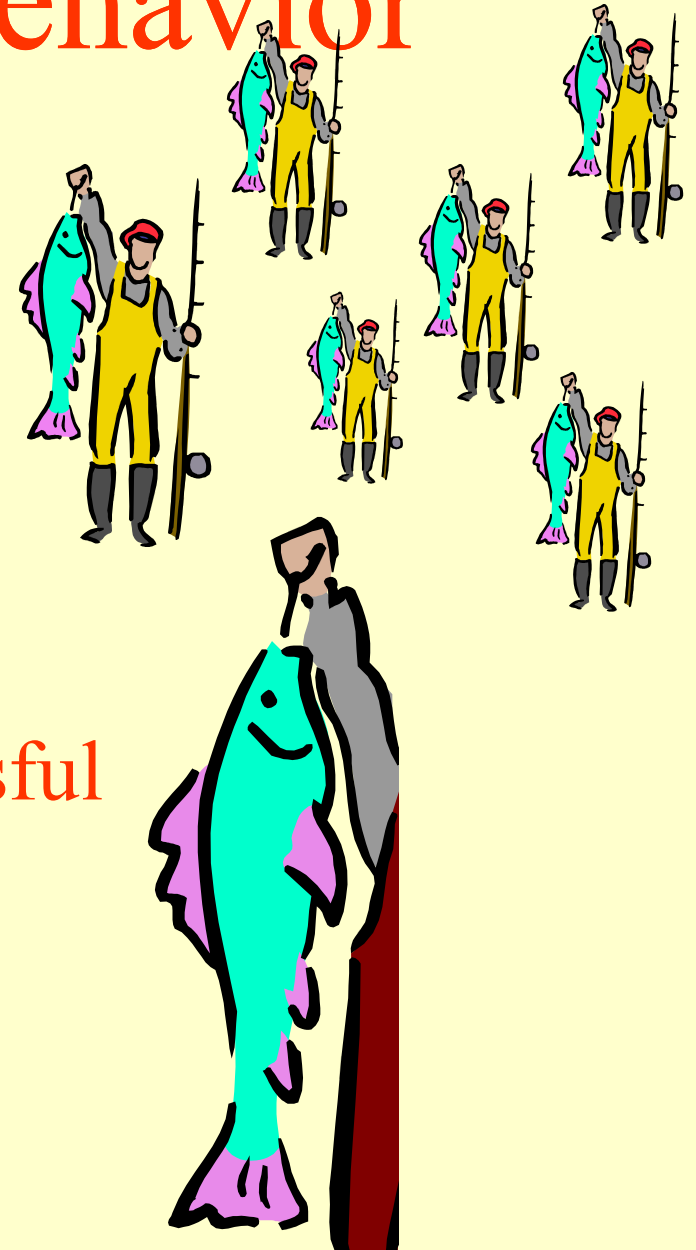
behavior

Accessible to All

# Focus on PD Behavior

We can't (yet) clone people

But we can adopt their successful behaviors/strategies

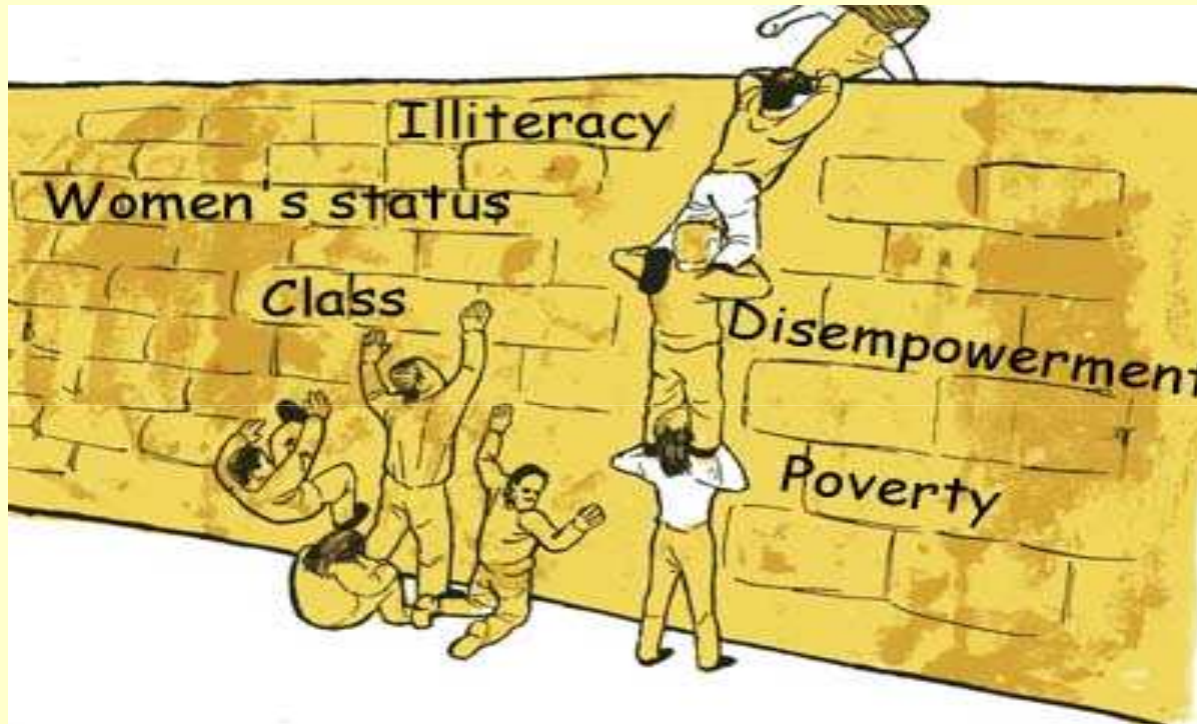


# PD Focus on **Practice** Rather than Knowledge



“It’s easier to **ACT** your way into a new way of **THINKING**, than to **THINK** your way into a new way of **ACTING**”

# PD Enables us to Act TODAY



The presence of Positive Deviants demonstrates that it is possible to find successful solutions TODAY before all the underlying causes are addressed



D

# The Four **D**s of the Positive Deviance Design

D

D

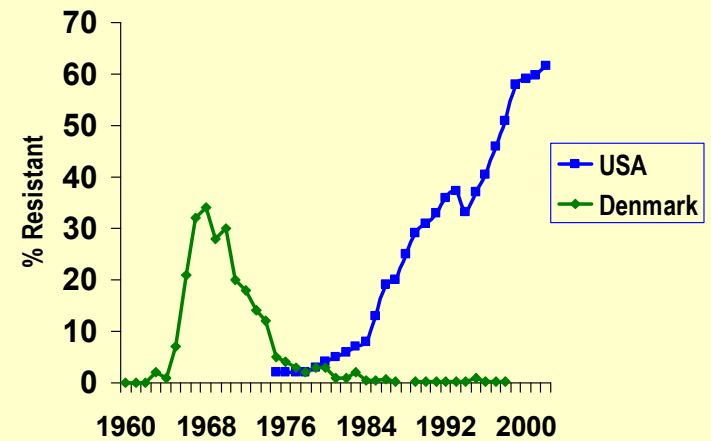
# Define

**Define the Problem**

**Define desired outcome**

(described as a behavioral  
or status outcome)

**Emerging Prevalence of Methicillin-Resistance Among *S. aureus* in U.S. Intensive Care Units**



# Determine



If there are any individuals or entities in the community who **ALREADY** exhibit desired behavior or status (PD identification)

Handwritten table on a flip chart titled "DESVIANTES POSITIVOS POSIBLES". The table has columns for "FZA", "NOM", "FE", "DIA", "GRU", "CIB", and "RIS". The data is organized into two sections: "DM" and "PREP".

	FZA	NOM	FE	DIA	GRU	CIB	RIS
DM	T	16	1023	4707	12 H	101.93	①
	T	20	1006	4767	11.20	94.27	②
	T	21	105.9	51.07	6.76	92.6	③
PREP	4	56	109.0	56.47	17.06	104.97	④
	4	66	104	53.07	34.00	121.77	⑤
	4	73	148.1	52.40	20.01	98.87	⑥
	4	66	109.3	50.07	14.57	100.67	⑦
	4	41	108.3	46.47	27.80	111.57	⑧
	6	71	104	53.07	34.00	121.77	⑨
	6	58	107	50.07	15.06	124.97	⑩
	6	58	107	50.07	15.06	124.97	⑪

# Discover

(through a PD Inquiry)



Uncommon behaviors or strategies enabling the PDs to outperform/find better solutions to the problem than others in their “community”

# Develop

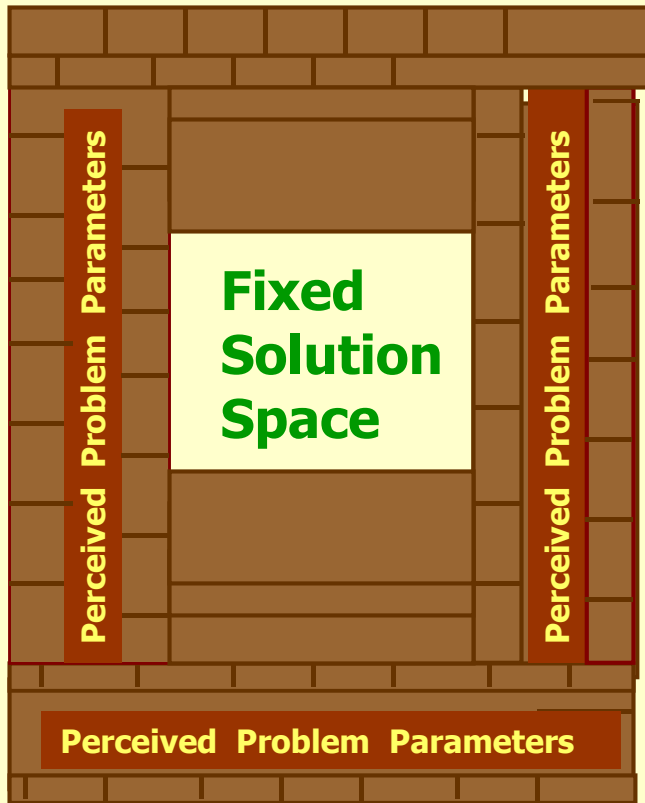


& Implement local initiatives and opportunities for others in the “community” to **PRACTICE** new behaviors and **CREATE** new solutions

# Traditional vs PD Problem Solving Approach

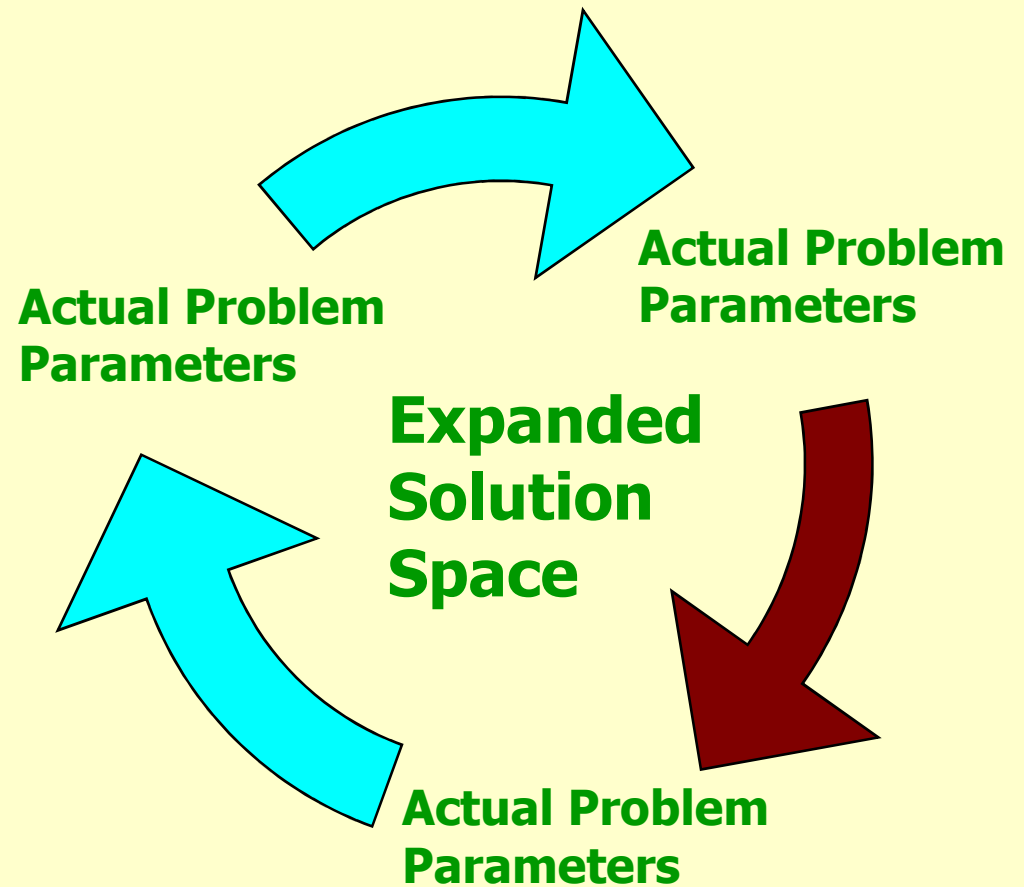
## Traditional

Flows from problem analysis towards solution



## PD

Flows from identification and analysis of successful solution to solving the problem



# LATENT POSITIVE DEVIANCE

PD PROCESS UNCOVERS  
EXISTING PD PRACTICES



AND CREATES CLIMATE WHERE  
**NEW SOLUTIONS EMERGE**

# BRIDGING THE “KNOWING / DOING” GAP





# PD and Attributes Dictating “Speed of Adoption of Innovation”

## Diffusion Attributes

Relative Advantage

Compatibility

Complexity

Triability

Observability

## PD Behavior Innovation

Identified as “advantageous”

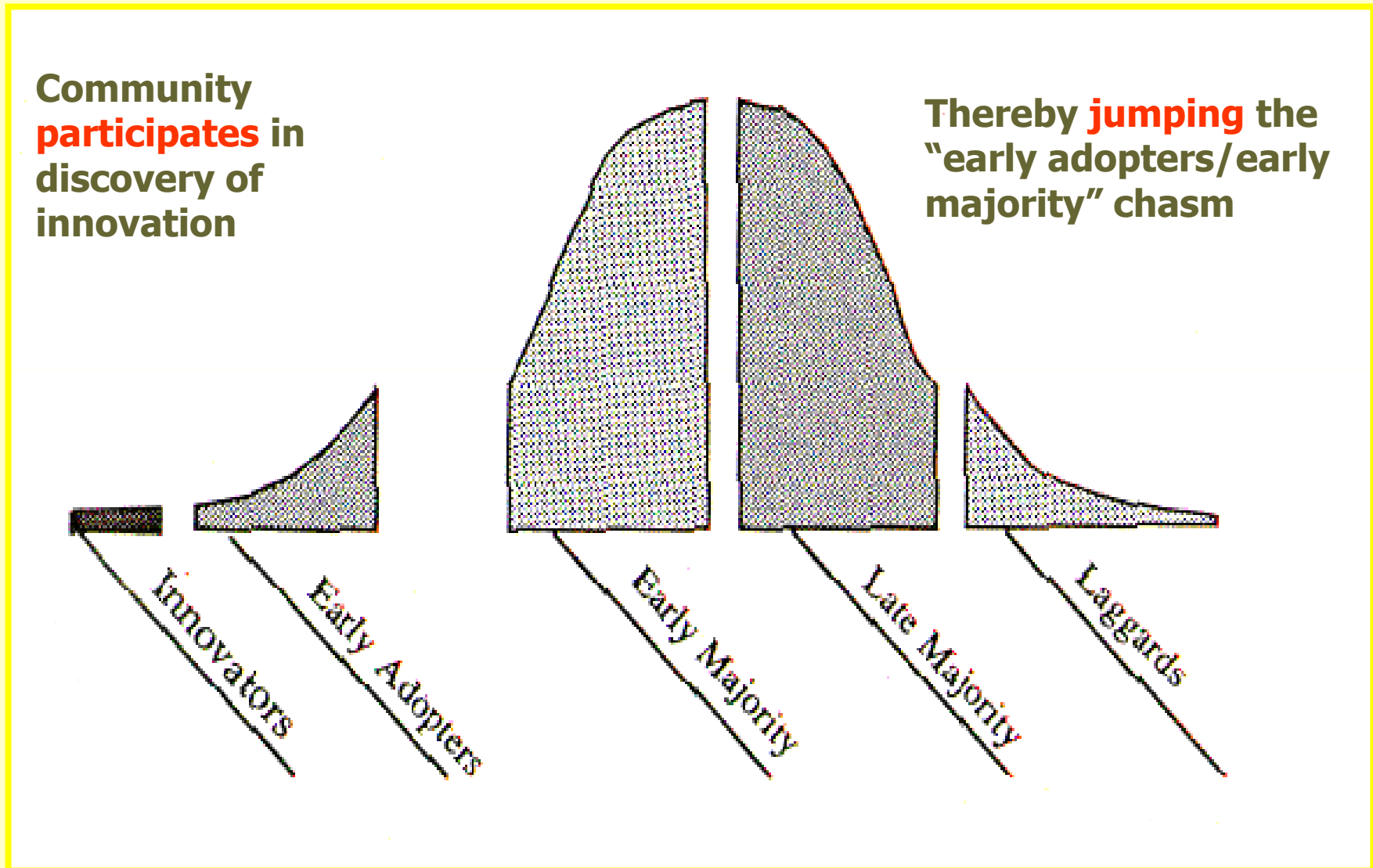
Created within cultural context

Requires no special resources

Opportunity to practice

Through PDI & personal experience

# PD & The Diffusion of Innovation Life-Cycle



## Current Applications of Positive Deviance

Programmatic context	Countries
Childhood development & Malnutrition (PD/Hearth)	> 40 countries throughout the world
HIV/AIDS risk reduction	Myanmar, Indonesia, Viet Nam, Ivory Coast, Burkina Faso
Antenatal care, Maternal & Newborn Care, Breastfeeding	Egypt, Pakistan Viet Nam, French Guinea, Sierra Leone
Female Genital Cutting	Egypt, Sudan, Ethiopia
Girl Trafficking	Indonesia, Nepal
Education Issues	Argentina, Ethiopia, US (NSDC)
Patient Safety & Quality of Care, Medication Reconciliation, conflict resolution	US: hospitals, VA Health System, Indian Health Services; Colombia

# When to use the PD approach

- Problem requires behavioral or/and social change (adaptive challenges versus technical challenges)
- Seemingly “intractable” problem – compelling enough to require a new approach
- Presence of Positive Deviants (individuals/ groups exhibiting desired outcome)
- Leadership commitment to address issue : “PD champions”
- Skilled facilitation

# Challenges

- Paradigm shift for practitioners, i.e.; from expert to facilitator (comfort with power sharing & lack of control)
- Scaling up strategies
- Time & human resources/labor intensive
- Requires comfort with uncertainty (donors, planners, implementers)
- Inability to forecast all outcomes & consequences

# Contacts & Networks

- Website: [www.positivedeviance.org](http://www.positivedeviance.org)
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[positivedeviance@positivedeviance.org](mailto:positivedeviance@positivedeviance.org)
- To join the PD network:  
<http://groups.google.com/group/Positive-Deviance.org>