



# The Power of Positive Deviance: How Unlikely Innovators Solve the World's Toughest Problems

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The common approach many of us have used in problem solving is to look at the center of the bell-shaped curve, where the majority of those with the problem fall. We tend to ignore the outliers; the deviants. We, the 'experts' know the answers and present solutions to the community. We expect the people to accept what we say because we are the outsiders and the outsiders, the 'learned ones' must know what is best. The positive deviant approach turns that orientation on its head. It is what this important 'must read' book is all about.

The positive deviant approach celebrates and learns from the outliers, involves the community, listens, does not direct, and does not offer solutions but stimulates thought through questions.. Central to the positive deviant approach is community involvement. The people living in the community must make the discovery themselves. The people must own the process. The solutions are within the community and not brought from the outside, not 'foreign'. Solutions found in this way are much more likely to be sustainable.

The positive deviant approach is a participatory approach to problem solving:

1. "Solutions to seemingly intractable problems already exist
2. They have been discovered by members of the community itself
3. These innovators (individual positive deviants) have succeeded even though they share the same constraints and barriers as others."

The book is a series of positive deviant success stories:

**Childhood malnutrition in Bolivia and Vietnam:** Each household in the Bolivian community cooked from identical pots and ate the same thing; soup made from carrots,

potatoes, dried fish, and a local green leafy vegetable. However, not all the children were stunted and malnourished; there were a few outliers, a few "black swans". Why the difference? The outside "experts" only saw the what, not the how. It was members from the community who discovered the how. Instead of serving the children from the top of the pot, the mothers of the well-nourished scoped the nutritious ingredients from the bottom. This revelation resulted in a "new" way of proportioning the contents of the soup bowl so the bottom of the pot became shared with all members of the family.

In Vietnam there was a different discovery. The healthy children's diet was supplemented with tiny shrimps or crabs gathered from the rice paddies and with greens from sweet potato tops. The feeding routine was also different. Instead of three meals a day, young children were given four or five smaller portions, a size much more compatible with the smaller size of the child's stomach. Hence, over the course of the day, the caloric and protein intake was larger. It was not an issue of getting outside supplemental foods that would not always be there. The solution was within the community and the process could be sustained. It was only a matter of doing things a bit differently. When the families saw the changes in their children, the new behaviors were adopted.

**Another principle:** "a thousand hearings aren't worth one seeing and a thousand seeings aren't worth one doing".

**Female genital circumcision (FGM) in Egypt:** This very sensitive subject, this tradition, this custom was a bit 'tougher nut to crack'. Uncircumcised girls and women were hard to find and harder yet to convince them to tell their story. But when a few outliers were found and over time relationship developed and 'trust' was gained, the 'positive deviants' spoke out and others were encouraged to

*"Learn from the people  
Plan with the people  
Begin with what they have  
Build on what they know  
Of the best leaders  
When the task is  
accomplished  
The people all remark  
We have done it ourselves."  
The wisdom of Taoist sage,  
Lao Tzu*

come forward. Community building began. Village leaders and those in authority joined the movement to curtail FGM. Behavioral and cultural changes take place in a social context. "Unless new insights are embedded in the social system, they evaporate". Gaining 'trust' and seeing habits change takes time and patience. Sometimes slow is best. And bottom up discoveries and solutions beat top down edicts. Slowly the government got involved and established a Female Genital Mutilation Abandonment program and FGM dropped from 97% to 93% in the course of three years.

**Another axiom:** "listening is more powerful than speaking, asking questions more powerful than knowing".

These are good lessons for us to learn and to put into practice as work with our colleagues.

**Girl soldiers in Uganda:** The situation seemed hopeless. Young girls are abducted by the Lord's Resistance Army. Their initiation includes forced marches, rape and impregnation and the resultant responsibility of an unwanted child. Girls were often forced to kill family members. This all brought rejection by their kin and entire communities along with nightmares and intense feelings of guilt. They became 'psychological orphans'. Yet, a few positive deviants were found. Once again, it was not the outside 'experts' that discovered the solutions; it was the insiders, those

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involved who discovered and then they owned the way forward. The steps in the process were first meeting with the people informally and developing some degree of trust. This takes time and patience. Next was the asking of questions by both the 'outsiders' and informed 'insiders' but not supplying answers. The answers must come from the people. Group dynamics is the rule, not the usual focus group where canned questions guide the discussion. There are often long silences and the outsiders must refrain from breaking the silence; hard to do when you want to 'take over' and speed the process. You must not. It is a process of engagement and letting the people talk and then let mobilization take over. The positive deviant process is to facilitate and catalyze the empowerment of the people.

The process is a slow evolution. Remind yourself that the situation has been 'like this' for a long, long time and evolution is a long, long process. Behavioral change, social change must evolve from the people and all must be patient. The answers lie within the community. Our job is NOT to lay out solutions but to allow the community to discover them.

Infant mortality: Positive deviance worked in a very unlikely place with a problem that was not considered a problem; it is the "will of Allah". Oral stories transformed the 'what' to the 'how'. Cold claimed many newborns. The custom was for the traditional birth attendant (TBA) to put the newly born on the barren cold floor in the hut to allow prayers to be blown over the infant and the TBA would turn her attention to the mother.

One mother-in-law in the deviant group put the newborn on the mother's bare chest and covered the infant with a blanket. Another made a pillow of rags where the newborn was laid and the infant was covered with the rags. A role play involved marking a razor blade with a moistened felt pen and then cutting through a green onion simulating the umbilical cord to demonstrate how infection got to the baby. A custom of giving the newborn honey for three days in lieu of breast milk was difficult to overcome. Deviant households did not follow this custom and their newborns were healthier. The community of both men and women got involved, made discoveries, and devised solutions. The culmination was a "Healthy Baby Fair" to dramatize the results from the revelations of the community.

## Collaboration between ONE and the AAP

**Margaret McDonnell, Manager, Strategic Partnerships, ONE**

On December 8th and 9th, several of AAP's international health experts will join ONE for an advocacy day on Capitol Hill followed by a day at the White House to talk with officials about why it is important to preserve American programs that save millions of lives. This effort, which will be reported on in February's edition of AAP NEWS, is reflective of a broader national partnership between ONE and AAP to focus on improving the health of the poorest children in the world.

For those of you not familiar with ONE, we are an international advocacy organization co-founded by the musician Bono with more than 2.5 million members worldwide. ONE's mission is to fight extreme poverty and preventable disease, particularly in Africa. ONE advocates on behalf of those in the world's poorest places. While the AAP primarily focuses on the health of American children, the Academy's commitment to the "HEALTH OF ALL CHILDREN" means that both the AAP and ONE are committed to preserving low-cost, high-impact programs that provide life-saving childhood vaccinations.

Toward this end, AAP's President Dr. Robert Block joined ONE in April for the launch event of its vaccine campaign in advance of the Global Alliance for Vaccines and Immunizations (GAVI)'s pledging conference on June 13th.

As Dr. Block explained, "In the last 50 years, we've cut childhood deaths in half with the help of vaccines and now we have the opportunity

to save 4 million more children's lives in the next five years. As a pediatrician, I know the power of vaccines to protect a child for a lifetime. The AAP is proud to be a part of ONE's campaign to dramatically reduce childhood deaths and give every child a healthy start in life."



World leaders responded to the call and pledged \$4.3 billion to GAVI over three years including a \$450 million pledge from the United States. The U.S. contribution alone would immunize 250 million children, averting 4 million premature deaths.

Unfortunately, this funding is now threatened as we face dramatic and dangerous cuts to the foreign assistance budget, which represents less than 1% of the entire U.S. budget. This is hardly the solution to the current budget deficit. Federal budget cuts may be inevitable, however, we cannot allow programs that cost little but save millions of lives - like funding for life-saving vaccines- to take a disproportionate cut.

This is why ONE is working with AAP members to contact members of Congress to educate them about the importance of funding for global health programs like those that provide basic childhood vaccinations. To learn more about the current budget crisis and its implications for global health programs, check out ONE's budget update. Consider joining ONE.org. Adding your voice on behalf of children too easily forgotten could help make the real difference in their lives.