Tamar Klaiman (Presenter) University of the Sciences; Anjali Chainani, University of the Sciences; Betty Bekemeier, University of Washington
Sharing Lessons Learned from Positive Deviant Local Health Departments in Maternal And Child Health
Poster Presentation
8th Annual Conference on the Science of Dissemination and Implementation.
Washington, DC
December 14, 2015
Learning from Positive Deviant Local Health Departments in Maternal and Child Health
Tamar Klaiman, PhD, MPH; Athena Pantazis, MPH; Anjali Chainani, MPH; Betty Bekemeier, PhD, MPH, FAAN

Objective: To identify and learn from local health departments that perform better than expected in MCH outcomes compared to peers

Framework: Positive Deviance Method

**STEP 1:** Identify “positive deviants”, i.e., organizations that consistently demonstrate exceptionally high performance in an area of interest.

**STEP 2:** Study organizations in-depth using qualitative methods to generate hypotheses about practices that allow organizations to achieve top performance.

**STEP 3:** Test hypotheses statistically in larger, representative samples of organizations.

**STEP 4:** Work in partnership with key stakeholders, including potential adopters, to disseminate the evidence about newly characterized best practices.

50 Positive Deviant LHDs Across 3 States

45 of 50 LHDs (90%) had better than expected MCH outcomes over 2 years

25 LHDs (50%) had 2 or more exceptional outcomes in a single study year

### RESULTS

#### Themes

Positive Deviant LHDs focus on assuring their communities have access to needed services, even when that means changing their roles and responsibilities.

Guaranteed continued funding and stability allow for innovation in the context of financial constraint.

Positive Deviant LHDs establish linkages with key partners and seek opportunities to capitalize on those relationships.

Positive Deviant LHDs have strong, informed leadership and decision making.

Positive Deviant LHDs have a culture of accountability and improvement.

### Conclusions

Developing and maintaining partnerships can help improve MCH outcomes, even with limited resources. Investing in staff training in population health allows for greater flexibility and expertise to address community health issues.

Tamar Klaiman, PhD, MPH; Anjali Chainani, MPH; M.S.W., Betty Bekemeier, Ph.D., M.P.H., F.A.A.N.

Research conducted in cooperation with the University of Washington School of Nursing. Funding provided by a grant from the Robert Wood Johnson Foundation.

---

**METHODS**

Local health departments (LHDs) are under increasing pressure to improve performance with limited resources. While research has found that financial resources may be associated with better health outcomes, there are LHDs that maintain exceptional performance, even with limited budgets.  

Using data from the Public Health Activities and Services Tracking (PHAST) database, an initiative of the Robert Wood Johnson Foundation through the National Coordinating Center for Public Health Services and Systems Research, we examined the performance of local health jurisdictions in maternal and child health in Washington State with Exceptional Maternal and Child Health Outcomes.

We surveyed 217 LHDs across 3 states: Washington, Florida, and Texas. We also conducted 50 interviews with LHDs identified as Positive Deviants in MCH outcomes.

**Outcomes**

- % of Low Birth Weight
- Infant Mortality
- Late or No Prenatal Care

**Key Findings**

- Positive Deviant LHDs establish linkages with key partners and seek opportunities to capitalize on those relationships.

---

**REFERENCES**
