

# Understanding positive and negative deviants and its determinants in relation to nutrition care practices in Dhading, Nepal

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## Introduction

Malnutrition among children under five years of age is a global public health concern with serious implication in health of children later in life. There are various interventions being implemented to reduce the child malnutrition along with Positive deviance approach. Positive Deviation (PD) approach focuses on identifying the positive determinants among the community, and running PD health sessions to transfer the knowledge among community members. PD approach is one of the most sustainable approaches in reducing malnutrition as it focuses on solutions that are available within the community.

## Rationale

Most of the nutrition program in Nepal are implemented with focus on holistic approach. Comprehensive and targeted approach such as positive deviance approach is seen to be more effective in addressing the issue of malnutrition. Positive determinants to prevent malnutrition are available within the community that can be helpful for malnourished families present within that community. Those positive determinants are not well studied and documented in Nepal, especially in remote areas.

## Objectives

To understand the behavioural practices and patterns in malnourished and healthy children's family

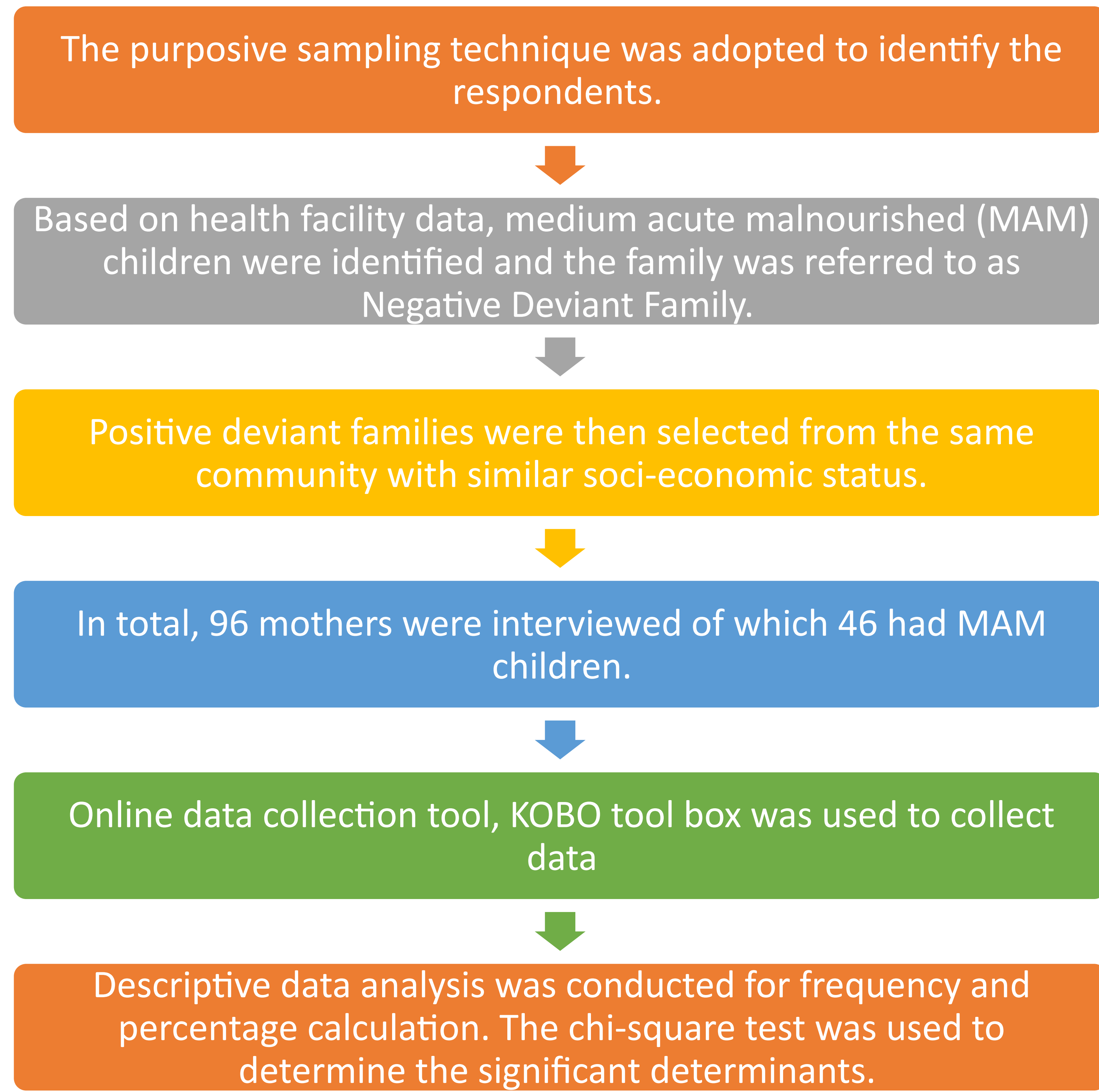
To understand the key determinants/factors associated with the nutrition care practices in communities of Dhading

To understand the linkages and differences in nutrition care practices among both family types

## Data collection method

A cross sectional study was conducted with a set of structured questionnaires. The questionnaires focused on Infant and Young Child Feeding (IYCF) practices, children care and health care practices.

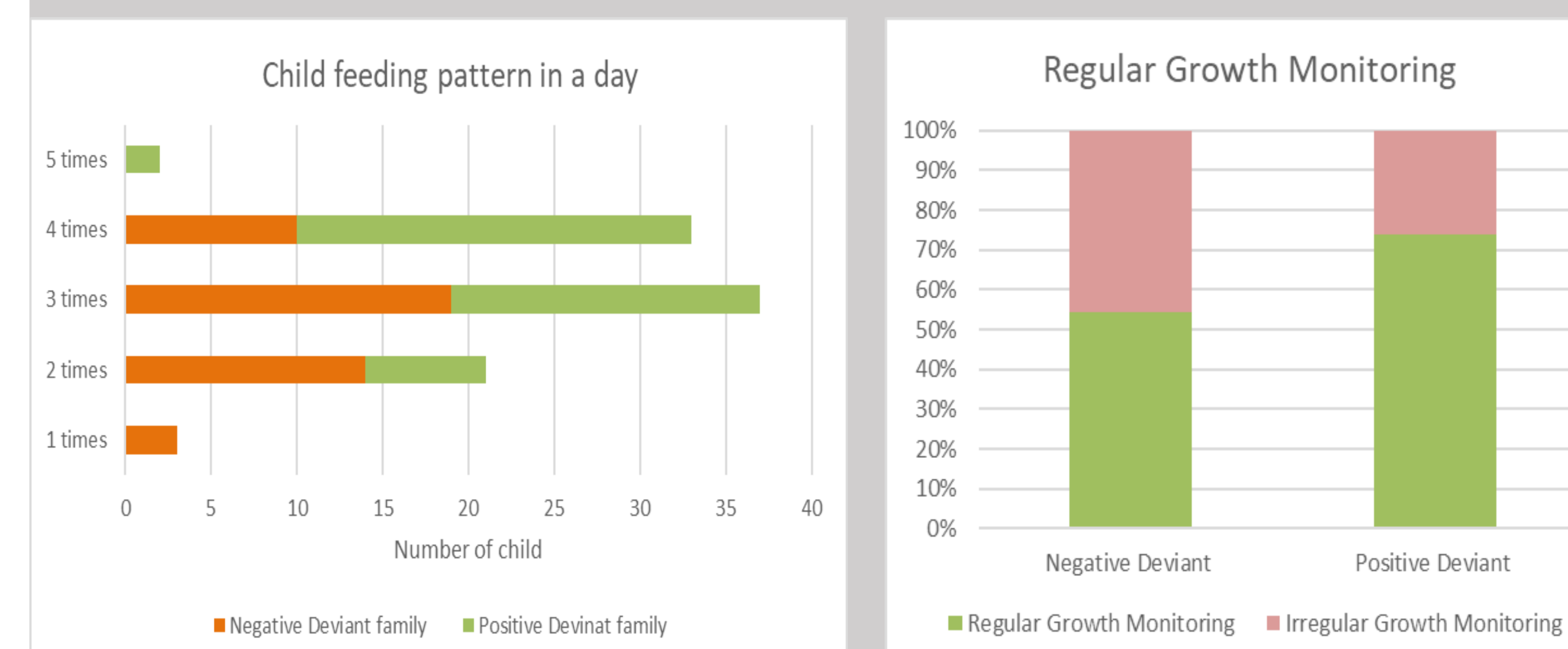
Study was done upper region of Dhading district from June 2022 to February 2023.



## RESULTS

The households with agriculture as a major occupation are more likely to be positive deviant (Healthy Family) whereas families with foreign employment and daily wage as major occupation are more likely to be negative deviant. With increasing education levels, households are more likely to be positive deviant ( $p < 0.05$ ).

But initiation of complementary feeding to children before six months is significantly ( $< 0.01$ ) more negative deviant (54%) than positive deviant HHs (30%). Almost 78% of negative deviant HHs feed their children less than 4 times in a day which was 50% in positive deviant HHs ( $P < 0.01$ ).



It was seen that more than 70% of positive deviant families participated in regular growth monitoring compared to slightly more than 50% of negative deviant family.

It was found that almost 65% feed the junk food to their children and 69% thought it is not good for health, there is no significant difference between the deviant HHs.

The positive deviant HHs are significantly ( $p < 0.01$ ) more likely to feed fruits to their children (66%) than negative deviant HHs (34%).

Vaccination and deworming medicine to children is significantly more in positive deviant HHs.

The positive deviant HHs were found to participate in more training and orientation on nutrition than the negative deviants HHs ( $P < 0.01$ ).



Jak Maya BK with her 11 months old healthy daughter Samishya BK after completing the PD survey.



Hari Maya BK with her 11 months old moderately malnourished daughter Parmila BK after PD survey.

## IMPLICATIONS

- Training and counselling on nutrition and care practices is crucial for adopting nutrition sensitive behaviour.
- Programs should be prioritized in plans and programmes.
- Feeding frequency and fruit consumption should be increased for negative deviant households.
- Further study on availability and consumption of diversified food to understand its relation to positive deviant households is required.



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