

The Eye of the Beholder

—Jeffrey W. Linkenbach, Ed.D.

—*Those who are successful at directing the public's perception of what is normal and acceptable are also those who will largely determine future health and safety trends.* —Linkenbach, 2001

We can document that people have been aware of the negative effects of alcohol use for centuries. The strategies used to impact alcohol abuse have run a gamut of philosophies and experiments in social policy. In 1327, the English tried (and failed) to control drunkenness by limiting the number of establishments that could sell alcoholic beverages. Six hundred years later, America enacted prohibition, which, by all accounts, failed in its attempt to apply a simple solution to a complex social problem. When prohibition died in 1933, buried with it was the hope that a single policy could ensure the improvement of social behavior.

Dozens of other strategies have also been tried—increased penalties, advertising restrictions, taxes and price controls, to name a few. Perhaps, though, the one element essential to social change has not been given the attention needed to effect real change. That element is *perception*.

What we *believe we see* shapes our behaviors and attitudes. That means that effective long-term solutions must include strategies that steer public perceptions about alcohol from hype and fiction to fact. In so doing, we will be able to transform the social norms attached to the use of alcohol.

Although there are many definitions, social norms can be framed as the behaviors or attitudes of the majority. For example, if most people in a community do not drink, then not drinking is the social norm. *Perceptions* of social norms are what people believe about the behaviors or attitudes of their peers. If the majority perceives that most people drink to excess, then drinking to excess is the *perceived social norm*. Perceptions of social norms are strong predictors of future health behavior, because people tend to behave the way they believe is most typical or accepted.

The fact is, most of us make positive decisions about health and safety. We drink in moderation, wear seatbelts and are drug and tobacco free. Even so, the common perception of our peers' risk-taking behavior is remarkably exaggerated. These are *misperceptions of social norms*.

Many studies have been published demonstrating that misperceptions positively correlate with drinking behavior or predict how individuals drink. Misperceptions about alcohol consumption can have profound impacts on prevention and enforcement. If people believe the majority overuses alcohol, the social norm appears to oppose the laws designed to reduce dangerous drinking. The fact of the matter is that our laws support and enforce behavior that is already in practice by the majority.

Several factors contribute to the misperceptions of social norms. While we are good at observing others' behavior, we aren't nearly as good at interpreting what we see. We tend to think that unusual behaviors exhibited by others are typical or characteristic because we may not observe people often enough to contextualize their behavior. Another reason is that casual conversation tends to focus on extreme escapades or high-risk behaviors. Stories may be exaggerated to make them funnier or more dramatic, but this can lead to the perception that such actions are more prevalent than they really are. Even those who are *not* engaging in dangerous behaviors can spread the misperception through repetition.

The third factor contributing to misperceptions of social norms can be attributed to the influence of the media, which carries the most dramatic, arresting or shocking stories of the moment. Vivid or emotionally evocative information increases the impact on perceptions, leading to exaggerated ideas about prevalence. The result? People worry about sociopaths with guns while the most common killers are obesity, heart disease, cancer and stroke.

Misperceptions have significant consequences. Those who might not otherwise practice a high-risk activity such as excessive drinking might engage in it if they perceive it to be the norm. Those who are already drinking heavily might wrongly conclude that their behavior is acceptable and practiced by the majority. This could reinforce their existing tendency to make poor choices. And finally, intervention efforts can be inhibited in an environment characterized by widespread misperceptions. It is very human to avoid risking social disapproval by being the odd person out.

The social norms approach to prevention shapes human behavior by correcting misperceptions and identifying the disparity between perceived and actual social norms. Social norms programs focus on the positive majority behavior or attitudes that are almost universally the norm, rather than the negative behavior and impacts of the minority. This strategy corrects misperceptions of social norms to more closely correspond with actual norms. This, in turn, leads people to make their choices in accordance with the actual, positive, social norms of the community.

—Linkenbach, Ed.D. is a Senior Research Scientist in the Department of Health and Human Development at Montana State University, and Director of the National MOST Of Us Institute for Social Norms. For more information, visit <http://www.mostofus.org>.

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