The relevance of social norms theory for health promotion interventions

This brief summarizes the main concepts of the first webinar in our introductory series of social norms trainings for the Learning Collaborative to Advance Social Norms Practice in Nigeria. This series of four webinars will lay the foundation for understanding social norms, different approaches to identify them, strategies for norm change, and monitoring and evaluation for social norms programs.

Introduction

All human beings comply with some social norms in their daily actions and interactions, to the point that many of the choices that they make every day are conducted under the influence of one or more of norms, albeit that often happens unwittingly.

Global health practitioners and scholars in the past have overestimated the role that new knowledge alone can have in influencing people's attitudes and practices. Despite a tendency to focus on providing knowledge and material resources to change attitudes and practices, an increasingly larger field of action and research has been advocating for a wider understanding of how different institutional, material, individual and social factors intersect in influencing people's choices and actions. Among these several factors, social norms play an important—and often underestimated—role.

What are social norms?

Despite multiple, and sometimes contrasting, theories of what are social norms, several agree that, at its simplest, a social norm is a (mostly unwritten) rule about what actions are appropriate in a given group. Examples of such norms might include: shaking hands when you meet someone or saying bless you when someone sneezes. Most global health practitioners use the definition of social norms advanced by Cialdini and colleagues (1990) which views social norms as one's beliefs about: 1) What others in one's group do (*descriptive* norm), and 2) What others in one's group approve/disapprove of (*injunctive* norm).

The influence of descriptive and injunctive norms

Descriptive and injunctive norms can be powerful drivers of behaviour when they work both independently and together. Experts in public advertisement have used for years the influence of descriptive norms: when people believe that many others are doing something, they will be more favourably oriented towards doing the same (see Figure 2). Much empirical evidence on the influence of descriptive norms comes from studies conducted in high-income countries, many of which carried out by researchers interested in: 1) increasing pro-environmental behaviour (de Groot & Schuitema, 2012; Griskevicius, Cialdini, & Goldstein, 2008; Hamann, Reese, Seewald, & Loeschinger, 2015; Priolo et al., 2016); and 2) reducing consume of alcohol in university campuses (Borsari & Carey, 2003; Dams-O'Connor, Martin, & Martens, 2007; H Wesley Perkins, 2002; H. Wesley Perkins & Berkowitz, 1986; Prestwich et al., 2016; Reilly & Wood, 2008).

Figure 1. Social Proof on a McDonald's sign

Injunctive norms have also been studied in isolation as powerful drivers. Injunctive norms are also found in advertisements; very often injunctive advertisements are linked to gender roles (see Figure 3). Injunctive messages tend to shape ideas of what it's like to be an approved person: using the right product will make you popular, likeable, or accepted. Studies that looked exclusively at injunctive norms do exist (e.g. Prince & Carey, 2010; Taylor & Sorenson, 2004), although researchers more commonly integrated in their empirical studies analysis of both injunctive and descriptive norms. Most studies have looked at the combined and relative effect of descriptive and injunctive norms. The evidence is mixed about which of the two types of norms is stronger, suggesting that the difference in the strength of their influence might be due to the behaviour being influenced, as well as the characteristics of the population influenced by the norm (age, gender, or economic status), the relation between the influencers and the influenced (perceived social distance or proximity), or the characteristics of the context in which the influenced live (urban or rural, familiar or unfamiliar, for instance) (Bosson, Parrott, Swan, Kuchynka, & Schramm, 2015; Hamann et al., 2015; Smith et al., 2012).

The difference between a norm and an attitude

Norms and attitudes are different. One person can have an attitude towards something – say, for instance, an adolescent who doesn't like to smoke – and yet comply with the norm to achieve a positive sanction – smoking with their classmates to be part of the group of the cool guys. When attitudes and norms conflict, people might decide to do what the norm commands, even when that includes a portion of self-harm. Anecdotal evidence during the Ebola crisis in West Africa showed that people preferred to shake hands rather than come across as impolite.

What is a Reference Group?

We mentioned that social norms are one's beliefs about what others do and approve of. These "others" are frequently referred to as members of one's reference group. Reference groups are the people whose actions and opinions matter when individuals decide to comply with the norm.

Is the reference group a specific group of people or just others?

Often (though not always), the feeling of being in the group is a strong pre-condition for following a groups' behaviour. In other words, the group is likely to exert a strong influence on behaviour when the individual identifies with it (Terry, Hogg, & McKimmie, 2000; Terry, Hogg, & White, 1999). For this reason, some theorists argue that social norms are always in relation to a given reference group of people that matter to the individual conforming with the behaviour under study (e.g. Bicchieri, 2006; Park & Smith, 2007). However, as Reid, Cialdini, and Aiken (2010) observed, the behaviour of others can be normative even when the group is not particularly meaningful, as, for instance, in the street, where we might align our behaviour to what we believe is appropriate in front of complete strangers (Cialdini, Reno, & Kallgren, 1990; Munger & Harris, 1989).

Figure 2. Injunctive advertisement about "appropriate" women look

The role of sanctions to maintain compliance

There is no widely shared agreement on why exactly people do comply with social norms, although most likely the answer is not to be found in one reason or mechanism alone. There are several mechanisms that increase norms compliance. The most frequently mentioned are anticipation of rewards for complying with the norm and punishments for not complying.

The social norms literature often refers to these rewards and punishments as positive and negative sanctions. Positive sanctions include: words of praise, a promotion, access to resources etc. Negative sanctions include: gossiping, threats of violence, actual violence, etc. It doesn't matter whether sanctions would actually take place. What matters is that people believe that they will take place. People might want to comply with a norm as they seek rewards and try to avoid punishment.

How are norms relevant to health?

There is a large body of evidence that social norms can have great influence on health-related practices. Although most of the evidence comes from high-income countries, a substantial amount does come from low and middle-income countries. These studies include research on handwashing, sexual and reproductive health, child marriage, female genital cutting, open defecation, and intimate partner violence, to cite a few examples.