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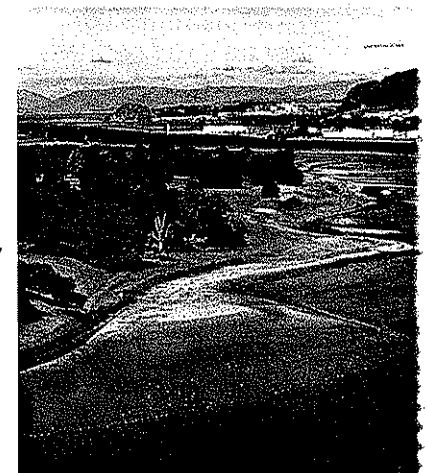
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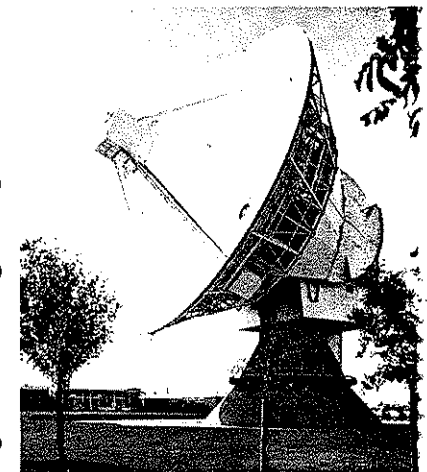
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WHO'S AFRAID OF AIDS?

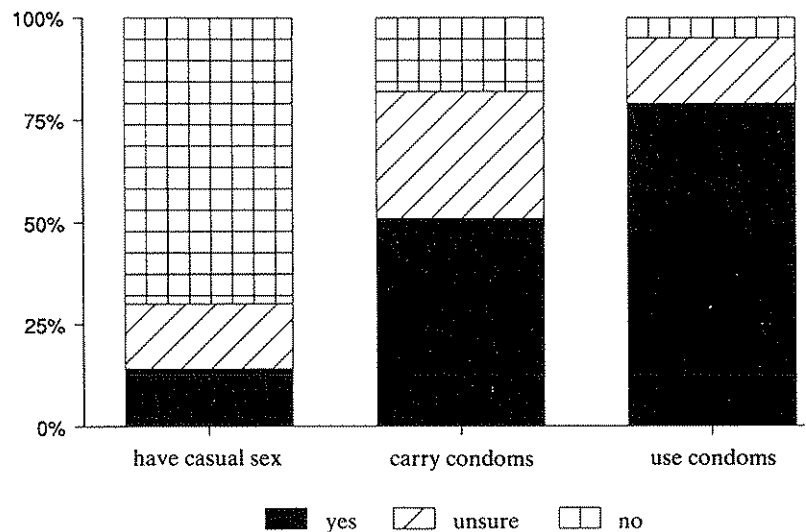
Health Education Authority research indicates that 25% of young people do not use a condom when having sexual intercourse. Dominic Abrams and his colleagues have questioned young people on their beliefs about sex and risk in an attempt to understand the attitudes of this minority.

IN THIS ARTICLE I shall be presenting findings from a study of 1000 young people from Dundee, in Scotland. Dundee was identified as a city in which AIDS/HIV would spread relatively quickly because of the high incidence of intravenous drug misuse. The aim of our study was to see what 16- to 19-year-olds in the city believed about the spread of HIV, and to track their behaviour. The research was funded by the Economic and Social Research Council.

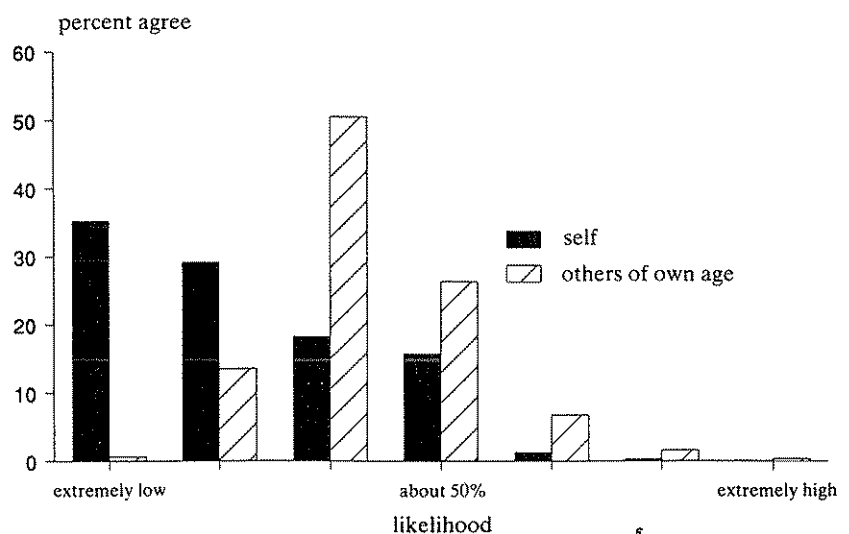
Recent research done by the Health Education Authority found that 25% of young people do not always use a condom when they have sexual intercourse. Two questions arise; how do those non-users justify their action to themselves, and what might encourage them to use condoms in future?

It is useful to begin by looking at young people's perceptions of the risk of being infected by HIV (the 'AIDS virus') in general. We were struck by an enormous disparity between judgments young people made about the risks to *themselves* compared with the likelihood that *others* would become infected. A substantial majority believed that they were extremely or very unlikely to be infected in the next five years. In contrast, respondents on average believed that almost half of their peer group would become infected in that time, and that half would be infected in ten years' time.

Clearly, this finding suggests that young people believe that their own behaviour and circumstances differ in some important ways from that of their peers. This phenomenon is generally known as 'false uniqueness' (the erroneous belief



What young people do.



Perceived likelihood of getting the AIDS virus in the next five years.

The sense of AIDS invulnerability could prove catastrophic at both a personal and societal level if it allows people to practise unsafe behaviour

that one is somehow different from others). In the context of HIV infection, we have dubbed the phenomenon 'AIDS invulnerability'.

AIDs invulnerability may be like many other forms of excessive optimism. In some contexts (e.g. among people with cancer) over estimation of one's prospects of survival can be psychologically healthy. It provides the energy and motivation which may actually help one overcome the illness or disadvantage one is suffering. However, the sense of AIDS invulnerability could prove catastrophic at both a personal and societal level if it allows people to practise unsafe behaviour. If we are to avert this catastrophe it is obviously important to understand *why* young people may feel invulnerable.

on average. We asked the 17-year-olds to estimate the average number of partners that most 20-year-old males and females would have had. Both sexes perceive men to have more sexual partners than women (10.94 and 7.94 on average, respectively). Male respondents believed the average number of partners of 20-year-olds to be 9.82, whereas females believe the average to be 6.69. Also there was an enormous disparity between the actual figures for 20-year-olds, and the estimates (which ranged

between over 6 to just under 11). In a nutshell, these young people thought that on average their peers, and especially men, would have had between three to six times as many partners as themselves.

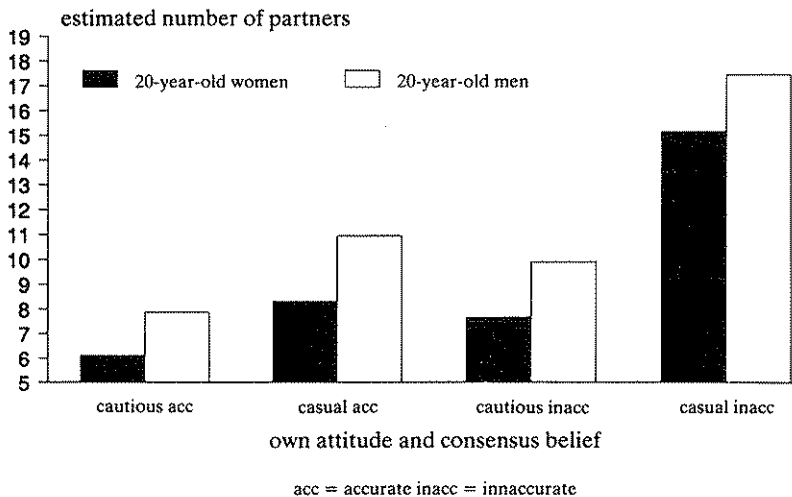
These young people thought that on average their peers, and especially men, would have had between three to six times as many partners as themselves

This partly explains why they think others are more likely to become infected with HIV; they believe others are exposing themselves to more risks. However, there is another factor which allows young people to assume they can avoid infection, namely their belief that their partners might be safe too. For example, over 60% would trust their partners to tell them the truth about their past sexual encounters, and only 14% thought that anyone they had a sexual relationship with was likely to have the AIDS virus.

Let us now examine the intentions and likely behaviour of the young people in our survey. In particular we shall focus on responses to three questions. Asked whether they would only have sex with someone they knew well, 70% agreed and 14% disagreed. Asked whether they would carry a condom if they thought they might be going to have sex with someone new, 51% agreed and 18% disagreed. And asked whether they would use a condom if they had sex with a new partner, 79% agreed and 5% disagreed. These findings reveal a small (5-18%) but important minority of young people who seem prepared to take risks with regard to HIV infection.

Consider now how these minority groups differ with respect to their sexual behaviour and their beliefs about others' attitudes and behaviour. Those who said they would have casual sex had also had significantly more partners than those who said they would not. However, and most important from our point of view, those who had most partners of all (6.34 on average) were the ones who mistakenly believed that the majority of people shared their own view that casual sex was OK. This form of mistaken belief is termed 'false consensus', and is a well established social psychological phenomenon. Those who themselves endorsed casual sex but correctly perceived that the majority did not share their view had 2.65 partners on average.

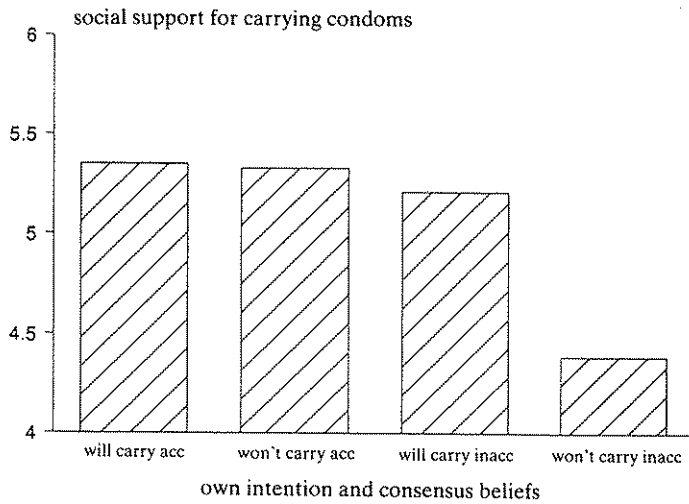
Just as important, is the fact that the erroneous minority believed that the average 20-



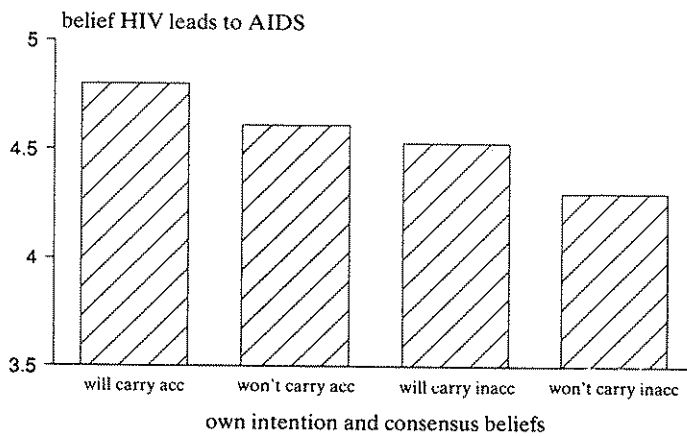
Estimated number of partners of 20-year-olds, and consensus belief about casual sex.

There are a few obvious reasons, such as that the person is a virgin and has never shared a needle to inject drugs. For such people it is true that there is a negligible risk of infection. However, there may be other reasons, such as not knowing anyone who has been infected or believing that one is part of a community that has not been exposed to the infection, which are clearly misguided. However, our research tends to demonstrate that AIDS invulnerability seems to result substantially from misperceptions about *other* people's behaviour.

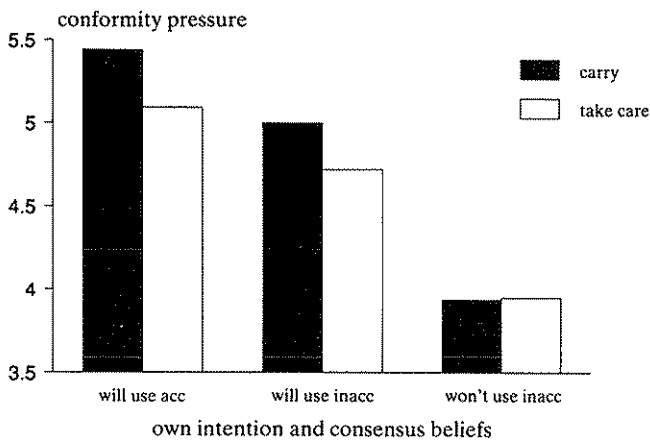
Let us take, to begin with, young people's estimates of the number of sexual partners the average 20-year-old has had. We questioned 20-year-old students and 17-year-olds. Figures for the two groups were quite similar, ranging between just over one and just under four partners



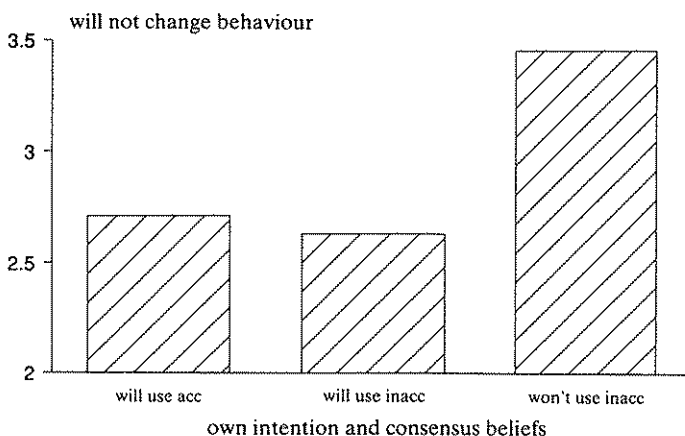
Social support for and consensus beliefs about carrying condoms.



Consensus beliefs about carrying condoms, and believing that HIV causes AIDS.



Consensus belief about using condoms and social pressure to carry condoms and take care not to get HIV.



Stating one's belief will not change, and own intention and consensus beliefs about using condoms.

The average scores for the cautious (majority) respondents who were accurate and inaccurate about the consensus, and for the casual (minority) who were inaccurate were as follows:

	cautious acc.	cautious inacc.	casual inacc.
social pressure to carry	5.44	5.00	3.94
social pressure to take care	5.09	4.72	3.95
own behaviour will not change	2.71	2.63	3.46

For the social pressure measures the scores can range from 0 to 6. For the behaviour change measure the scores can range from 1 to 5.

year-old would have had many more partners (15.16 for female 20-year-olds and 17.46 for male 20-year-olds) than did the accurate minority (8.30 for females and 10.93 for males). For the cautious majority, the estimates ranged from 6.09 to 9.87.

Now consider the 18% who said they would not carry a condom if they thought they were going to have sex with someone new. What distinguishes those who are aware that they are unusual in their views, and those who erroneously believe others share their view is that the latter report that fewer of their important social contacts (friends, family and partner) support carrying condoms. This group is also less likely to believe that HIV infection leads to AIDS.

The 5% who said they would not use a condom with a new partner believed that this intention was shared by the majority. Their friends were significantly less likely to advocate carrying condoms or taking care not to be infected with HIV, and they were less likely to say their behaviour might change because of AIDS than were the majority (79%) who said they would use condoms. What message can we take from these findings? Recent health-education campaigns, and indeed publicity, have focused attention on the fact that up to 25% of young people are not using condoms. This strategy risks backfiring. Our research demonstrates that those who are

most likely to engage in risky practices falsely believe that the majority do the same as themselves. That is, they believe there are social norms that validate and justify their actions. Campaigns that emphasize the possible promiscuity of one's potential partners, or that highlight the fact that some people do not use condoms with new partners, may inadvertently reinforce these false perceptions that irresponsible sexual practices are widespread.

We know that young people tend to see themselves as relatively restrained and limited in terms of the number of sexual partners they have. They may therefore assume that statistics about the spread of AIDS only apply to others because (as implied by the campaigns) it is others who are changing partners so often. This, then may exaggerate their sense of AIDS invulnerability.

Most young people are adopting safer practices, but among the minority who are not, the key seems to be that they are unaware that they are in a minority. Their specific networks of friends, and perhaps partners, are relatively unlikely to advocate safer practices, and these young people are unaware that these networks are unusual and do not represent majority opinion. This makes it all the more important to drive home the message that the majority is behaving responsibly, and that safer practices are the norm. If we were to redesign a health education campaign around these findings, we would advocate the following message: 'Most young people play safe. Don't let them down; use a condom', or 'Eighty percent of young people use condoms when they have sex. Don't risk your life with the other 20%. Use a condom'.

Behaviour change holds out the best hope for curbing the spread of HIV infection. A combination of continued national and local media coverage, and work with small groups of young people in schools and youth clubs would seem to be a sensible strategy. We also hope that our findings, and other research to date, suggest a positive outlook for the future. By emphasizing the socially responsible approach taken by the majority we may be able to influence the minority.

'Most young people play safe. Don't let them down; use a condom'

'Eighty percent of young people use condoms when they have sex. Don't risk your life with the other 20%. Use a condom'



Dr Dominic Abrams is Senior Lecturer at the Institute of Social and Applied Psychology, University of Kent, and associate editor of the British Journal of Social Psychology. He has a particular interest in social identity. This article is based on a collaborative study with psychologists Charles Abraham, Paschal Sheeran and Russel Spears. Charles Abraham, from Ninewells Medical School, Dundee, works on the application of social cognition models to preventive behaviour. Paschal Sheeran, from Sheffield University, has focused on unemployment, religiosity and AIDS-related behaviour. Russell Spears, from the University of Amsterdam, has published widely on stereotyping and social perception.