



## AVOIDING FREQUENT MISTAKES IN HAZING PREVENTION

**By Dan Wrona**

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There is a great deal more expertise now available about how to address a complex, multifaceted problem like hazing.

Unfortunately, higher education professionals still tend to rely on outmoded ideas and techniques in dealing with the problem. With increasing emphasis on hazing prevention at the collegiate level, it's time to bring our approach up to date.

The first step is to acknowledge that hazing is a complex, cultural phenomenon, that it is not isolated to specific individuals or groups, and that focusing on individual incidents alone ignores the underlying systemic causes of the larger problem. These premises align with the public health prevention framework, which has been successfully applied to other complex problems and shows promise as a process for addressing hazing. In summary, this approach targets the cultural precursors to hazing, advocates a comprehensive effort targeted to specific causes, and engages multiple stakeholders in understanding and addressing the problem. This is not a new approach, but it is new to the field of higher education and to the topic of hazing.

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practice of student affairs professionals. In the meantime, below are a few of the most frequent mistakes that professionals make. Use this list to check your current efforts against the model.

### **Mistake #1: Overcorrection**

It happened in New York, then in Florida, then Virginia, and then a few others that never made headlines. In response to a dramatic increase in the number of reported hazing cases on campus, administrators immediately halted activities and cracked down on fraternity/sorority new member education practices.

This may have been the way to protect the health and safety of students at the time, but as a hazing prevention effort, it is dangerously misguided. In situations like these, it is tempting to automatically jump to the conclusion that hazing is a new problem, and to assume that a severe and sudden punitive response is the best plan. Many times, a spike in reports simply means that years of increased public attention, enforcement, and training is working.

### **Mistake #2: "We have met the enemy, and it is us"**

I long ago lost count of how many times a growing prevalence of hazing is fostered by the actions of well-meaning administrators. Before pointing fingers at students, examine the consistency of your policy, communications, and implementation across multiple departments, including campus safety, conduct, residence life, health and wellness, and athletics. Reevaluate your personal philosophy and compare it to research and good practice. It turns out that inefficient conduct policies, mixed messages, personal preferences, and failure to respond can be the most significant contributors to a hazing problem.

### **Mistake #3: Scare them into submission**

Scare tactics have many flaws: they might encourage students to do nothing, they can have the opposite effect on adolescent thrill-seekers, they assume that consequences are considered in students' decision-making process, "it won't happen here," and the sentiment about "submission" (though often unspoken) raises red flags. Despite these flaws, of greatest concern is how badly scare tactics can damage the relationship between students and administrators. Consulting the research, as the prevention model would have us do, we learn that scare tactics can decrease

approachability, preventing students from seeking information, advice, and assistance when they genuinely want to address a potential hazing problem.

### **Mistake #4: "Everyone needs to hear this"**

Imagine you just learned some new fascinating idea, and you want to share it with everyone because if they had this information, they would come to the same conclusion and choose not to continue hazing. Right? Try applying this logic to a few other areas:

- If only everyone knew the speed limit, they would stop speeding.
- If people knew how much time they wasted on social media...
- If they knew that smoking / eating unhealthy food / not exercising leads to...

It's tempting to assume that people would make better decisions with more information, but this ignores all the situational, social, cultural, and institutional factors that also play a role in decision-making. Based on research in prevention, we learn that, although an important component, knowledge alone does not alter behavior.

### **Mistake #5: Starting with policy**

Yes, there are hazing laws and policies, but that doesn't mean that all hazing prevention efforts should be built around them (see #4). Forget the policy. Ultimately, this is about dignity, safety, and respect of the members of our community. Let's start there.

## Avoiding Mistakes

Think of these mistakes as warning signs. The next time you enter a discussion about hazing prevention, listen for these ideas. When they emerge, stop, retrace your logic, and rethink the approach. Examine the research, study the public health prevention model, and consider a more targeted, comprehensive, evidence-driven approach for addressing such a complex problem. Use the following ideas to guide your work:

- Symptoms will persist until you address their underlying causes.
- What you see on the surface is simply the natural, obvious result of cultural beliefs, assumptions, and perceptions.
- There is no single cause, but many interconnected factors that combine to create the problem.
- Knowledge is one part of the equation, but alone, it does not change behavior.
- Many of the tools we often use are important, but they require careful, well-intentioned use, and they are not the only techniques available

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