

# Normalisation of Deviance

*Just the way we do things around here.*

The term ‘normalisation of deviance’ was introduced by Diane Vaughan in her book ‘The Challenger Launch Decision’ (1996). She defines it as the process by which unsafe or “deviant” practices become accepted as normal through repetition without immediate negative consequences. Overtime, it leads to the gradual acceptance of what was once unacceptable behaviours, becoming embedded into daily work.

Deviation often occurs because of barriers to using the correct process, with drivers such as time, cost, or workload pressure shaping decisions more than policy or procedure. Conversations shift from “*why should we do this?*” to “*why shouldn’t we?*” because organisations gradually become socialised to the increased risks.

Importantly, normalisation is not simply “rule breaking.” People use their knowledge, professional judgement, and experience to navigate problems and find what feels like safe solutions. Evidence can show a credible risk (such as with the o-ring on Challenger) however over time nothing goes wrong to justify the risk aversion, so the risk becomes normalised.

Everyday life provides a parallel with the concept of speeding. It’s less about individuals deciding to speed, and more about the collective normalisation.

We take many risks when we’re driving, sometimes we’re not even aware of it. A study by Elephant Insurance found that around 65% of accidents occur within a one to five mile radius of home. Their interpretation was that drivers were in a “comfort zone” while driving on familiar roads, therefore paying less attention and accepting higher risks.

Ask yourself: how many times have you noticed the red light at the last second, or had a car pull out on you at a roundabout? In those moments, what were you thinking about? What assumptions were the other drivers making?

A lot of the time, normalisation only gets recognised in hindsight of an occurrence.

Quality assurance teams may focus on scheduled audits, picking up issues and becoming reactive, rather than preventing procedural drifts in the first place. Disasters rarely result from individual mistakes and emerge from a combination of systemic and latent errors, which have created the conditions for failures.

Normalisation of deviance is regularly applied to high risk industries such as oil and gas, aviation and health care as understanding the concept to improve safety and prevent unwanted outcomes, but it is not limited to them.

Between 200 and 2016, Wells Fargo’s intense focus on growth put pressure on staff to meet difficult sales goals. This aggressive sales culture led to personnel creating fake accounts, selling customers products they didn’t need, and shifting money

between accounts. The Consumer Financial Protection Bureau (2016) revealed that employees has created in the region of 1.5 million unauthorised deposit accounts and 565,000 unauthorised credit card accounts between 2011 and 2016. The figure later rose to 3.5 million.

Top managers were aware of the “gaming practices” in 2002, with a 2004 internal investigator calling it a “growing plague”. In February 2020, Wells Fargo agreed to pay £2.3bn to resolve the government investigation.

*“This case illustrates a complete failure of leadership at multiple levels within the bank. Simply put, Wells Fargo traded its hard-earned reputation for short-term profits and harmed untold numbers of customers along the way.” - US Attorney Nick Hanna*

The nature of deviance is highly complex with a multitude of factors contributing such as:

- Organisational pressures: unrealistic deadlines, cost cutting, production demands
- Social pressures: leadership expectations, cultural norms shared with an industry
- Technical processes: onerous processes that haven’t been updated to reflect real world leads to personnel using their “tribal knowledge” to create work arounds.

Diane Vaughan writes that the Challenger disaster was not caused by a single faulty component, with the Presidential Commission identifying flawed decision making within NASA as an explanation. However, she highlights that the investigation didn’t ask why the managers decided to proceed with the launch, despite knowing about the o-ring problems, and that there was a risk.

The key lesson is that cultures drift when accountability is absent. When small deviations go unchallenged, they accumulate into new norms. Saying things like “*we need this in three hours, just make it happen*” captures subtle ways leaders can set conditions for deviance, even unintentionally.

So, what can be done? Leaders, particularly middle managers who play a bridge role between strategy and operations, are crucial in resisting drift. By modelling curiosity, encouraging teams to voice concerns, and holding themselves accountable for consistent standards, they create the conditions to question rather than rationalise risk.

Normalisation of deviance is not simply about rules being bent, it’s about risky behaviours becoming accepted. Leaders shape the culture they reinforce every day, and they do it by example. So next time you feel the pressure to deliver, pause and consider what message are you sending to your team?”