

The Report on Social Norms

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Three Reviews of *The Social Norms Approach to Preventing School And College Age Substance Abuse*

by Mary Larimer, Ph.D., Jan Gascoigne, Ph.D. and Barbara Ryan

The Social Norms Approach to Preventing School and College Age Substance Abuse: A Handbook for Educators, Counselors and Clinicians

Edited by H. Wesley Perkins with contributions by Gregory Barker, Alan Berkowitz, David Craig, William DeJong, Patricia Fabiano, Jeanne Far, John Frisone, Peggy Glider, Michael Haines, Linda Hancock, Neil Henry, Linda Jeffrey, Koreen Johannessen, Jeffrey Linkenbach, Demond S. Miller, John Miller, Pamela Negro, H. Wesley Perkins, and Richard Rice. Published by Jossey-Bass, San Francisco, 2003. ISBN 0-7879-6459.

Editor's Note

This Working Paper provides three reviews of the long-awaited first book on the social norms approach edited by H. Wesley Perkins, with chapters by many of the most-well known social norms practitioners in the field. *The Social Norms Approach to Preventing School and College Age Substance Abuse* provides detailed descriptions of eight social norms campaigns addressing alcohol and tobacco use in college and high school settings and of one statewide campaign, offers a wealth of empirical data and outcomes in support of the model, reviews the underlying theory, characteristics of effective interventions, and responses to common criticisms. It also extends our understanding of the model to a number of new topics, including parenting behaviors and other health and social justice issues. As the three review authors point out, it is an essential resource for anyone interested in using social norms as a prevention strategy to foster health and well-being.

Although the reviewers approach the topic from very different perspectives they are unanimous in stating that the social norms approach requires careful and thoughtful planning, follow-through, and attention to the unique culture of each campus or intervention setting. Therefore they each caution against a simplistic application of the model. There are two important implications of this understanding—first, that doing social norms is not simple or easy, and second, that the contextual nature of social norms interventions may not be amenable to conventional multi-campus or cookie-cutter evaluation designs unless the participating schools have some flexibility in designing campaigns that are suited to their campus. The reviewers also comment that even when the evaluation data in support of social norms is not as strong as it might be, that it is at least as strong as the evaluation data available for other AODT prevention strategies in higher education.

Barbara Ryan, in her review, enlarges the scope of the discussion by pointing out that campus based prevention efforts need to be combined with advocacy efforts on a national level to change the macro-drinking climate, a point I would agree with. I would like to add to her comment that the success of social norms campaigns is remarkable in light of the extensive beverage industry media that works to undermine it. Perhaps the success of these social norms campaigns is a sign that the beverage industry media is not as powerful or persuasive as we may think when they are matched with carefully designed and tailored campaigns that are local in origin.

This Working Paper ends with a Table summarizing the results of the nine case studies presented in the book.

As always, your comments and feedback are welcome.

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A Review from Mary E. Larimer, Ph. D.

As a researcher, I have been involved in college drinking prevention studies for nearly 20 years and was a contributing author to the NIAAA Task Force on College Drinking, responsible for the review of individually-oriented interventions (which formed the basis for the Tier 1 recommendations made by the panel). Much of my research and that of my closest colleagues has focused on cognitive-behavioral and social learning conceptualizations of excessive drinking, within which perceived and real normative influences are presumed to be critically important. My own research supports this link, and interventions developed at the University of Washington have included a normative correction component since the early 80's. As a result, I have followed the work on the social norms approach with great interest. As Principal Investigator (with co-PI's Pat Fabiano, Jason Kilmer, and Alan Marlatt) of an NIAAA-funded, longitudinal, quasi-experimental study of the approach applied to college drinking, I am also quite sensitized to the limitations of such designs, and the challenges of conducting research of this nature. Reading this book evokes similar responses—appreciation for the theoretical foundation of the approach and

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admiration for the creativity of the strategies used to operationalize the theory, coupled with a sense that the outcome research in support of the approach is still in the early stages. Depending on how one weighs the evidence, a range of conclusions from "cautious optimism" to 'honest skepticism' seems appropriate.

Regardless of how one weighs the evidence, and whether one agrees or disagrees with the enthusiastic tone, this book is an excellent resource for those of us pursuing and consuming research on this prevention approach. The book is structured to include an introduction to the theory supporting the social norms approach, followed by a mix of case examples of social norms interventions and basic research on normative misperception in several populations and areas of behavior. Some of the case examples are familiar, stemming from the original research at Northern Illinois University (Haines & Barker, Ch 2), Hobart & William Smith Colleges (Perkins & Craig, Ch 3), the University of Arizona (Johannessen & Glider, Ch 4) and Western Washington University (Fabiano, Ch 5), all early adopters of the social norms approach whose work has been previously well-described. The small-group norms challenging work conducted at Washington State University and previously described in journal articles is also reviewed (Far & Miller, Ch 7). In addition, there are several new intervention case examples, extending the approach beyond drinking and beyond the boundaries of college campuses. These include the Rowan University project targeting college drinking norms (Jeffrey, Negro, Miller, & Frisone, Ch 6), the Virginia Commonwealth University experience with social norms marketing to reduce tobacco use (Hancock & Henry, Ch 8), two examples from the Montana statewide "Most of Us" campaign targeting young adult alcohol use and drunk

"Each of the longer intervention case examples provides rich detail regarding the context within which the approach was implemented... The depth of this coverage is a strength of the book, as it allows for a much clearer understanding of the intensity and complexity of these interventions and the subtleties that might differentiate more from less successful campaigns...."

driving norms (Linkenbach, Ch 11) as well as adolescent tobacco use norms (Linkenbach & Perkins, Ch 13), and a high-school-based campaign targeting alcohol and tobacco norms among teachers, parents, and students (Haines, Barker, & Rice, Ch 14). Berkowitz (Ch 16) provides a thoughtful review of the literature on application of the approach to other health and social justice behaviors, and provides a brief case example of the approach as applied to men's perceptions of coercive sexual behavior and sexist language, and reducing bystander behavior in these areas.

Each of the longer intervention case examples provides rich detail regarding the context within which the approach was implemented. Examples of the media and other materials that were utilized, the development of the approach in each setting, the rationale for application of the approach and the particular implementation strategies chosen are included in virtually every chapter. The depth of this coverage is a strength of the book, as it allows for a much clearer understanding of the intensity and complexity of these interventions and the subtleties that might differentiate more from less successful campaigns. This is a particular advantage of the book in comparison to journal articles on the topic, as due to space constraints it is rare to find sufficient detail in journal articles to evaluate implementation fidelity. The book also illustrates very well the level of time, care, and thought invested in these case examples, and the multiple intervention components utilized, dispelling the notion that this is a simplistic intervention strategy that can be implemented in a cookie-cutter fashion or evaluated in the absence of context, content, or dosage of the message.

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A Review from Jan L. Gascoigne, Ph.D.

As someone who has been watching the social norms approach develop and grow from the perspective of a health education student, college drug and alcohol prevention professional and a director of a national organization division that focuses on collegiate health promotion, this handbook is a welcome companion. This resource provides an important framework for understanding the social norms approach, documentation of its effects in a wide variety of settings and guidelines for implementation of social norms projects in campus settings.

The first chapter serves as a history of the development of the social norms approach and serves as a foundation from which readers can jump to learn more about specific campaigns at Northern Illinois University, Hobart and William Smith College, University of Arizona, Western Washington University, Rowan University, and Washington State University. Although it is a nice introduction of the approach in a historical context, the opening chapter could have been expanded to delve into the various theoretical underpinnings of this model and how this type of approach has been used in disciplines other than health promotion. Additionally, this chapter could include discussion on the importance of building a stakeholder base and educating the campus community about the social norms approach.

The chapters following the introduction provide examples of different avenues and strategies that can be used to adapt social norms to the unique culture of a campus. This provides the reader with various examples that

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can be adopted to fit their individual campus rather than assuming a cookie cutter approach with similarity across different campuses.

Thus a campus with a strong health communications department may find the Northern Illinois University example as a better fit because it focuses on print media messaging while the Washington State approach involved small group interventions with specific target populations and may better serve other campus cultures.

Chapters 2 through 7 provide the reader with concrete examples of the implementation of the social norms approach in which each project was able to decrease high-risk drinking by delivering the message in different formats such as media, technology, peer education and co-curricular activities. It is my belief that with the foundations of these concrete examples, readers will be able to choose social norms interventions which fit with their campus culture and in turn will build upon these projects by adding new and innovative methods of delivery based to fit their individual campus needs.

The social norms approach may be adapted to address other health risk behaviors and social justice issues, as suggested in Chapter 16. This was my experience during the time I was working with six universities to address sexual health using the social norms approach. In our initial research we found that students perceived their peers to be engaged in higher risk behaviors than was actually the case, including overestimating the level of sexual activity of peers and the average number of sexual partners. Like the authors of the case studies in the book, we found that the social norms approach requires careful and thoughtful implementation and that it is important to have the necessary infrastructure in place to support a campaign before initiating one. In particular, we learned that campuses need to spend time prior to planning the social norms campaign

educating their constituents so that the campus and community power brokers understand the principles of the approach and the media campaign that

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will follow and can support the campaign. In addition, depending on the climate at the university around various health issues, it may be prudent to start using the social norms approach with less controversial health topics so the campus learns about the approach before moving on to applications that may be more controversial, such as sexual health.

The book also allows the reader to explore using social norms with different populations such as middle and high school students, parents, and statewide audiences. Additionally, the handbook explores applications of social norms to other health risk behaviors as well as its use in promoting the adoption of policies that support healthy behavior. These case studies add to the mounting evidence that the use of the social norms approach leads to decreases in misperception and in turn in risky behaviors, thus opening the door for more opportunities to address and correct misperceptions in a variety of settings and on a variety of topics.

As a primer for anyone working to eliminate or decrease high-risk health behaviors this handbook is extremely valuable and will help set the tone for overall campus prevention programs. The social norms approach is inviting, engaging and contagious, but most valuable for those who are: 1) educated on how it works, 2) knowledgeable as

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A Review from Barbara E. Ryan

Social norms marketing campaigns are an increasingly popular approach to alcohol problem prevention on college campuses. On the surface they are deceptively simple—telling students the real level of alcohol use by their peers corrects misperceptions about use and leads to reductions in high-risk drinking. All a campus needs is some information about student drinking levels and some marketing materials to get out the word on the true drinking behaviors of students. It seems like the long-hoped for silver bullet for the wicked social problem of high-risk student drinking that has seemed to be all too immutable.

But, according to *The Social Norms Approach to Preventing School and College Age Substance Abuse*, it's not so simple. An effective social norms program requires careful planning and a clear understanding of communication strategies to reach the intended audiences with tested messages, not to mention a commitment of institutional resources to support data collection, materials development and dissemination, and evaluation.

In addition to providing a comprehensive overview of the research supporting a social norms approach to reducing high-risk drinking among students, it includes detailed case histories of six campuses that have used a social norms approach to good effect. These case histories provide those considering

"The success of the social norms campaigns described here seem all the more remarkable given a media climate in the United States dominated by commercial interests."

adopting a social norms approach with real-life experiences, from the design and implementation of student surveys to get accurate information on student drinking behaviors and perceptions to the nitty-gritty of campaign design, implementation

and evaluation.

Editor H. Wesley Perkins coined the phrase "reign of error" to refer to students' rampant misperception of the normative guidelines and expectations that their peers use to guide their behavior. In Chapter 1 Perkins describes the emergence and evolution of the social norms approach, including the causes of misperceived norms. He reviews a comprehensive theory of the cause and consequences of the phenomena of misperceptions of norms surrounding drinking that is based on "attribution theory, social conversation mechanisms, and cultural media theory."

In Perkins' view, the role the cultural media plays in exaggerating the alcohol use of students takes the form of glamorizing drinking, making it seem more common than it is, and highlighting problem behaviors among youths. He points to the music and entertainment industry as well as the news media for perpetuating the story that "many people are involved with alcohol, tobacco, and other drug use."

As the case histories demonstrate, a social norms marketing approach to reducing high-risk drinking relies very heavily on media channels—newspaper ads, posters, tabletop tents, bulletin board displays, computer postings, radio spots, promotional items and giveaways, op-ed pieces and so on. Much of the time and expense of a social norms approach goes into developing and pre-testing messages for media campaigns; developing, pre-testing and disseminating materials for media campaigns; and evaluating the reach of media campaigns.

All of these media efforts are aimed at correcting students' misperceptions about alcohol use by their peers. However, the "big gorilla" in the media that contributes to those misperceptions is not addressed either in the theory or the implementation of the social norms approach—and that is the alcohol industry.

According to the Institute of Medicine in 2001 the alcohol industry spent \$1.6 billion on alcohol product

advertising in print media, broadcast media, billboards and other venues. It spent at least twice that much on promotional activities, such as sponsorships, product placement payment in entertain-

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ment media, discount promotions and other activities.

In a media environment fraught with attractive images aimed at normalizing and promoting drinking to protect existing markets or expand them, media campaigns aimed at telling students the truth about the drinking behavior of their peers are fighting an uphill battle. The successes of the social norms campaigns described here seem all that more remarkable given a media climate in the United States dominated by commercial interests.

In the case history of the University of Arizona's social norms campaign, Johannessen and Glider articulate the need for a comprehensive environmental approach, suggesting that "social norms and environmental change efforts require a college or university's commitment to a public health approach as well as a long term commitment of time and resources." At this school, a social norms campaign from 1995-1998 resulted in an impressive 29 percent decrease in heavy drinking.

As *The Social Norms Approach to Preventing School and College Age Substance Abuse* demonstrates, a social norms marketing campaign can be an important and effective piece of a comprehensive prevention effort. But achieving normative shifts on a larger,

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None of the case examples relied solely on print media marketing accurate descriptive norms for moderate drinking, the strategy most commonly identified with the social norms approach. This is an important observation, bearing directly on the validity of recent research purporting to evaluate social norms interventions without knowledge of the actual strategies implemented.

While the case examples are strong on detail with respect to intervention and implementation features, they are more variable in the level of detail provided regarding key elements of the outcome evaluation. All have at least some evaluation, which is notably superior to many interventions implemented in the college population. Furthermore, all evaluations included at least a pre-post assessment, at least some measure of behavior as well as normative perceptions and knowledge/attitudes, and several included a no-treatment comparison group of some sort. Most (but not all) chapters provide some information about the sampling and recruitment strategies, response rates, sample demographics, and survey items used to assess key outcomes. Some also provide information about possible threats to validity of the data stemming from sampling bias or other third variables and how these were controlled for in the analyses. Some of the best examples in the book in this respect are the chapters by Haines & colleagues (Ch 2 & 14), Perkins & Craig (Ch 3), and Fabiano (Ch 4) and all provide relatively strong quasi-experimental support for the interventions tested. However, all the evaluations suffer from at least one and often multiple limitations, including low recruitment, high attrition, non-random samples, significant differences in characteristics of the samples over time, lack of a comparison group, and/or lack of comparability between intervention and comparison groups. With the exception of two of the small-group norms-challenging interventions described by Far & Miller in Chapter 7 (one of which suffered from small sample sizes and very high attrition), none of the studies included randomized comparison groups. In addition, in some cases the description of the

intervention implementation process and/or the context within which the intervention was implemented suggests alternative explanations for observed changes in behavior, including policy or enforcement changes concurrent with or immediately prior to implementation of the intervention, social desirability affects, or attention/placebo effects. With the exception of the Haines, Perkins, & Fabiano chapters mentioned, case examples generally don't provide enough information to evaluate whether analyses of the program evaluation data statistically controlled for sampling differences, nor in some cases even what types of analyses were conducted. This speaks to the need for this research to continue to be submitted for peer-review in mainstream journals, to enable the scientific community to review not just the intervention methodology and the survey implementation but also the analyses and interpretation of the results.

While these general strengths and weaknesses apply to the book as a whole, there are several chapters that I believe deserve individual mention from a researcher's perspective. First, Chapter 8 by Hancock and Henry on smoking acquisition and cessation is well-written and provides a concise but comprehensive review of the data in support of the role of normative perception in smoking behavior. The evaluation is also relatively well described, and limitations (including sample differences and response rate/attrition problems) are appropriately noted. Chapters 11 & 13 by Linkenbach suggest that a statewide implementation of the social norms approach, with careful planning and attention to detail, holds promise for a variety of populations and behaviors. Although hampered somewhat by a lack of detail regarding the sampling strategy and refusal rates for the telephone survey portion of the evaluation and the

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analytic strategy employed, Chapter 13 arguably provides the strongest evidence available to date for the impact of this type of intervention on smoking acquisition in teens. Given evidence to suggest the "Most of Us" campaign also impacted driving after drinking (as cited in Ch 11), further evaluation of the behavioral outcomes and changes in hypothesized mediators of outcomes for this series of projects is an important priority.

Regarding the basic science chapters of the book, all are relevant to broadening our understanding of how norms operate, and how they might influence behavior. Data are emerging to support normative misperceptions in a variety of health behavior domains, including alcohol use, smoking, illicit drug use, gambling, and disordered eating. The book also includes chapters addressing misperceptions of support for alcohol control policies, and how correcting those misperceptions might help reduce reactivity to policy interventions (DeJong, Ch 9), as well as how parents misperceive the frequency of good parenting behaviors in their community (Linkenbach, Perkins, & DeJong, Ch 15). Both chapters make interesting

reading, and the level of misperception is quite high in both areas, suggesting substantial impacts in behavior might be achieved if the misperceptions were corrected. In addition, Perkins & Craig (Ch 12) provide evidence that normative misperceptions of alcohol, tobacco, and marijuana use exist as early as middle school. These findings support the inclusion of normative correction

components in adolescent substance use prevention curricula, consistent with findings from intervention research.

Perkins (Ch 17) concludes the book by countering common criticisms of the social norms approach, emphasizing the importance of dosage and the need to incorporate multiple cohesive messages (descriptive norms, injunctive norms, protective behaviors, resources) market-

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ed through multiple communication channels to achieve positive results. The chapter is well-written, reasonable, and articulate in responding to the most-often cited criticisms of the approach. However, limitations of the research evaluations to date and suggestions for alternative research designs to address lingering questions about efficacy of the approach are not discussed, and there is no acknowledgement that some continued skepticism might be appropriate. In the Introduction (Ch 1), Perkins argues that the consistency of findings across studies outweighs the limitations of any individual study. Certainly, replication of findings across multiple studies is one of the requirements for establishing scientific evidence. However, it is important to acknowledge that the book (appropriately for a practitioner handbook) compiles the best examples of the approach, with the most positive supporting data. A comprehensive review of such studies yields a more mixed pattern of findings. In addition, replication does not increase certainty when the replication studies suffer from similar methodological weaknesses to the original.

This critique is not intended to suggest that the social norms approach is not effective, nor that the body of research to date is not useful. It is also not intended to imply that campuses should not consider the social norms approach when planning prevention programming. Several other intervention approaches, including both environmental/policy and individual intervention strategies, are widely promoted despite similar limitations in the current research evidence. Rather, it is my intention to highlight the need for continued research using stronger designs for social norms and other prevention approaches. Currently, studies suggests that normative misperceptions exist in a variety of populations with respect to a variety of behaviors, that at least under some circumstances normative perceptions (and misperceptions) influence our behavior, and that changing normative perceptions can influence us to change our behavior. To what extent, under what circumstances, and for whom broad-based

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social norms campaigns in the absence of other interventions can achieve such a change in perceptions and behaviors continues to be an empirical question.

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more national scale regarding high risk drinking by students will require more than the campus-by campus success of campus-based campaigns to correct misperceptions of norms. What is also needed are national strategies to alter the highly funded commercial media environment that contributes to those misperceptions.

For example in its 2003 report *Reducing Underage Drinking: A Collective Responsibility* the Institute of Medicine calls on the alcohol industry to strengthen advertising codes to preclude images that have particular appeal to underage drinkers. It also calls for federal funding to monitor underage exposure to advertising and for colleges and universities to ban alcohol advertising and promotions on campus.

In summary, this book is an important resource for those considering using a social norms approach on their campus to reduce high risk drinking. Because it also includes chapters on ways social norms campaigns can be expanded to other issues, such as tobacco use, policy change and parenting, it is also of interest to those looking for a promising approach for promoting health and well-being on a range of fronts.

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Jan L. Gascoigne

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to why it works, and 3) willing to spend time and energy to create a well thought out and planned intervention.

It has been my experience from directing projects on twelve campuses with different health issues that campuses can benefit in other ways from conducting social norms campaigns. One of the comments I hear from these campuses (almost unanimously) is how valuable the campaign has been in creating recognition for the health education/promotion office on the campus. Often these programs on campus are under-funded, understaffed and unnoticed; the social norms approach creates an opportunity for numerous campus constituents to get involved in prevention that may not have been involved in traditional health education strategies. As the case studies in this book demonstrate, students preparing for careers in marketing, advertising, graphic arts, web design can be involved in the creation, implementation and evaluation of results thus creating more buy-in as well as unique messages that “talk” to the target audience.

Although it is mentioned in the closing, a stronger case should be made for viewing the social norms approach as one piece in a comprehensive prevention program. This section could be expanded to share with campus prevention specialists other prevention strategies that are complementary in nature and do not perpetuate misperceptions on campus.

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Outcomes of Social Norms Marketing Campaigns from *The Social Norms Approach to Preventing School and College Age Substance Abuse*

School and Study	Description	Outcomes
<i>Alcohol</i>		
Northern Illinois University (Haines & Barker, 2003, Haines, 1996, Haines & Spear, 1996)	1989-1998, cluster sampling, yearly n from 550-1,052	From 1989-1998 decrease in 6+ drinks when partying from 45% to 25%, increase in 1-5 drinks when partying from 46% to 56% and increase in abstainers from 9% to 19%
University of Arizona (Johannessen & Glider, 2003; Johannessen, et al 1999; Glider et al, 2001)	1995-1998, n = approx 300 each year	From 1995-1998 decrease in heavy drinking (>5) of 29%, 30 day use rate decrease from 74% to 65%, plus decreased negative consequences
Western Washington University (Fabiano, 2003)	1997-1998 n = 489 and 1,127	No change in drinking from 1992-1997 From 1997-1998 decrease in 5+ drinks weekend night from 34% to 27, and increase in 1-2 drinks from 34% to 49%, plus decreased negative consequences
Hobart and William Smith Colleges (Perkins and Craig, 2002, 2003)	1996-1998 n = 156, 274	21% decrease in 5+ drinks in a row, 20% increase in abstaining 14% decrease in average drinks at a party
	1995-2000 n = 232, 326	19% decrease in average drinks at a party, 18% decrease in days drinking last two weeks, 24% decrease in average drinks at a party, 50% increase in rarely or never experience negative consequences, 46% decrease in liquor law violation arrests
Rowan University (Jeffrey et al, 2003)	1998-2001 n = 483, 453	Decrease in 5+ drinks at a party from 40% to 30%, 5+ drinks in a row in last two weeks from 48% to 37%
Two Midwestern High Schools (Haines, Barker & Rice, 2003)	1999-2001 n = 317 – 380	Decrease in 5+ drinks in a row in last two weeks from 27% - 19%, Decrease in got drunk in last 30 Days from 32% to 26%.

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*Outcomes of Social Norms Marketing Campaigns**continued from page seven***School and Study****Description****Outcomes***Tobacco*

Virginia Commonwealth
(Hancock & Henry, 2003;
Hancock et al, 2002)

Fall 1999
Ten weeks apart
n = 371 VCU,
N = 163 control
(matched samples)

Mean #days smoked/month
and mean # cigarettes/day
stable at VCU and increases
at control school

Montana Youth (Statewide)
(Linkenbach & Perkins, 2003A)

2000-2001
229 intervention
counties and 258
control counties

In control group 17% of
adolescents initiate smoking
while only 10% of intervention
sample does = 41% lower rate
of smoking initiation

Two Midwestern High Schools
(Haines, Barker & Rice, 2003)

1999-2001
n = 317 – 380

Decrease in # cigarettes smoked
in last 30 days from 27% to 19%

Note: In all of these campaigns, alcohol and/or tobacco use remained unchanged in years prior to the social norms campaign. In addition, at the end of the evaluation period, decreases in alcohol and/or smoking were associated with decreases in the degree of misperception of these behaviors.

Coming Soon *The Social Norms Resource Book* . . .

A comprehensive 100-page resource binder focusing on the theory and practice of the social norms approach for working with individuals, groups and communities. This important new binder was created as a desktop resource that can be used by health educators, ATOD prevention specialists, sexual assault program coordinators, campus and community task forces and coalitions, teachers and researchers. For more information, visit www.Paper-Clip.com

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