

# THE MAIN FRAME

## *Strategies for Generating Social Norms News*

A practical, easy-to-use resource for social norms practitioners who want to generate coverage of their projects and the social norms approach in general.

OCTOBER, 2002

## List of Contents

Introduction .....	3-4
What is Social Norms Theory? .....	5
How Can Social Norms Practitioners Use the Press? .....	6
How to Use This Guide .....	7
Key Concepts of Social Norms .....	8-9
Talking Points .....	10-18
Writing Social Norms Press Releases .....	19-20
A Sample Press Release .....	21-22
Writing Social Norms Op-Eds .....	23
A Sample Op-Ed .....	24-25
Ten Tips For Getting a Social Norms Perspective Into Press Coverage .....	26-27
Tips for Shifting Attitudes with a Member of the Press .....	28-31
Social Norms Works: A Few Examples of the Power of Social Norms Interventions ....	32-33
Talking Points: National Surveys Support Social Norms .....	34-35
Talking Points: Responding to Critical Questions about Social Norms .....	36-38
Example of a News Article Discussing Social Norms .....	39
References .....	40-44

## Lead Author

Jeff Linkenbach, Ed.D. - *Montana State University*

## Contributors

Alan Berkowitz, Ph.D. - *Independent Consultant*

Jamie Cornish, Ph.D. - *Montana State University*

Patricia Fabiano, Ph.D. - *Western Washington University*

Michael Haines, M.S. - *Northern Illinois University*

Koreen Johannessen, M.S.W. - *University of Arizona*

H. Wesley Perkins, Ph.D. - *Hobart & William Smith Colleges*

Richard Rice, M.A. - *Northern Illinois University*

# Introduction

A dramatic shift in public health promotion strategies has begun. For the last few decades, health promotion has been largely based on informing the public about the negative consequences of harmful behaviors. Yet, after years of using this traditional approach, there is little or no evidence to suggest that it changes behavior.

The social norms approach, listed by the *The New York Times Magazine* as one of the most significant ideas of 2001, is providing a challenge to traditional health promotion. Projects all over the country have used this science-based approach to achieve statistically significant behavioral change.

Social norms practitioners face many challenges in their efforts to publicize their work. Standing in the way are the very misperceptions that they are attempting to correct and the contradictory messages produced by traditional public health campaigns. While there are many resources available that discuss how to generate news, there are no guides to cultivating press coverage using the social norms approach.

Creating press coverage from a social norms perspective is critical because this approach is one of the most effective ways of changing behavior and saving lives, but it has not received much public attention. This is partly because it is controversial: it challenges the perceptions that shape people's everyday lives. If the social norms approach is to continue, politicians, health care workers, parents, educators and the public-at-large must be made aware of its success and potential.

The purpose of this resource guide is to provide practitioners who are implementing social norms projects with resources and advice on generating news coverage and shifting the public debate when it comes to issues of health and safety.

In press relations, “the frame” that a story is given is of key importance because this generally establishes the tone of public

discourse. Unfortunately, the way in which alcohol, tobacco, and drug use are typically presented or framed by the press is contrary to the social norms approach. The predominance of majority healthy behavior is downplayed, if it is even mentioned at all. Instead, atypical unhealthy behaviors are highlighted, public health “crises” are featured and “scare tactics” become the chosen method of attempting to change behavior.

The social norms field recognizes the need to create a new frame for public health issues—i.e., one that is based upon sound social science, accuracy in reporting and positive messages. In our relations with the press, therefore, we need continually to stress the positive attitudes and healthy behaviors that are the norm for a whole range of issues regarding health and safety.

Our efforts to promote the work that we do must become stronger, more sophisticated and more proactive. By creating our own coverage, we can foster an alternative frame to public health issues—one that is based upon an accurate portrayal of the norms. Of course, this needs to be done without minimizing the seriousness of certain troubling issues, such as alcohol abuse or underage drinking. Long-existing frames are difficult to alter, but they can be changed by the collective effort of a well-organized group of advocates.

**“The Main Frame: Strategies for Generating Social Norms News”** is intended to be an ongoing collection of the efforts of social norms interventions to create press coverage. As projects receive more coverage, the guide will grow and undergo revisions to reflect the successes and challenges encountered. In this way, it can serve as a compendium of the experiences members of social norms projects have in creating press coverage.

## What is Social Norms Theory?

Social norms theory states that much of people's behavior is influenced by their perception of how other members of their social group behave. According to social norms theory, people tend to misperceive, i.e., exaggerate, the negative health behavior of their peers. If people think harmful behavior is typical, they are more likely to engage in that type of behavior.

All too often, perceptions are incorrect. If unhealthy behavior is perceived to be the standard in a social group, the social urge to conform will negatively affect overall behavior of group members. Alternatively, by educating a group about healthy behavior that is in fact the usual practice among their peers, behavior can be affected in a positive manner.

Social norms is an environmental approach that seeks to impact social and cultural environments as the way to then influence individuals. It has been widely applied using social marketing techniques. Normative messages are designed for delivery using various media and promotion strategies in order to effectively reach a target population and promote its accurate norms of health and safety.

Social norms theory has also been successfully applied through other strategies such as curriculum infusion, creating press coverage, policy development, and small group interventions.

Relevant references: 6, 7, 10, 11, 16, 18, 29, 32,42, 67, 68, 70, 72

## How Can Social Norms Practitioners Use the Press?

The press often construct a “frame” of significant social health problems and their solutions and therefore influence public conversations and perceptions. Typically, the focus is on problems and extreme behaviors and misperceptions of true norms are then reinforced.

The strategy of this guide places the emphasis on reshaping the frame of the debate, i.e., changing the very context in which the issue is discussed. For example, social norms practitioners of college drinking projects would strive to replace traditional themes found in news coverage with more accurate ones. The “everybody’s doing it” and “students are out of control” themes would shift to the more positive and accurate themes highlighting the majority norms of healthy behavior.

The goal, in this example, is to change the way college drinking is framed by the press. To be successful, this change requires that social norms practitioners be able to make their points cogently and directly. This guide seeks to translate the theoretical precepts into easy-to-use examples and advice. In doing so, it allows practitioners to more efficiently educate the press and the public about social norms projects.

The **Main Frame** guide builds on the existing techniques used to create news. It incorporates the principles of social norms into the practical realities of generating coverage and working with the press.

Relevant references: 19, 28, 51, 72

## How to Use This Guide

The materials in this guide are intended to be used for both reactive and proactive efforts.

It is important to be ready to react when the press calls. As such, the guide includes materials to help practitioners when they are contacted regarding stories they did not initiate, e.g., another group's study or a campus tragedy. It is especially critical for social norms advocates to get their perspective across to a reporter who may be unfamiliar with the field. Reporters are typically intrigued by this new and refreshing approach to social issues as they too are frequently tired of the "if it bleeds it leads," negativity all too often associated with press.

Talking points are numbered so that they can be easily referenced. You may want to keep track of which points are most useful to you and how people responded to them.

These materials are also designed to assist practitioners in the sometimes-intimidating task of taking that first step to approach members of the press and generate coverage. The talking points can be used to construct press releases and op-eds. Examples of each are also provided.

In short, this guide can be used in several ways:

- to help your project develop an overall strategy to generate press coverage,
- to create a complete project-specific press kit,
- to generate one-time news events such as a news conference or op-ed, and
- to respond to requests from the press,
- to counteract skewed and off-balanced coverage of health issues.

# Key Concepts of Social Norms

1

Misperceptions of norms reinforce negative behavior

2

Accurate perceptions increase healthy behavior

3

Social norms uses multi-faceted intervention strategies

4

Social norms is community based

5

Social norms is a science-based method

6

Social norms is an environmental approach

This graphic lists the key concepts of social norms. Each of these concepts is listed with supporting talking points in the following pages.

## **Creating the Social Norms Frame:**

# **Key Concepts**

### **1. Misperceptions of norms reinforce negative behavior**

*Widespread misperceptions of norms can contribute to an increase in negative behavior.*

### **2. Accurate perceptions increase healthy behavior**

*Communicating accurate information about the prevalence of healthy behavior can lead to more healthy behavior. We must create environments that consistently communicate the truth about health as the norm instead of highlighting the individuals who make poor choices.*

### **3. Social norms uses multi-faceted intervention strategies**

*Social norms uses multi-faceted intervention strategies for varying levels of intervention that include policy, media, curriculum, small group intervention and treatment.*

### **4. Social norms is community based**

*Social norms is founded on a bottom-up, community-based approach that relies on the strength of positive attitudes, beliefs and behaviors of the group.*

### **5. Social norms is a science-based method**

*The importance of public health efforts demands that we use an effective and accountable science-based strategy like social norms.*

### **6. Social norms is an environmental approach**

*Social norms is an environmental approach that does not focus simply on individuals. Rather, it strives to change the perceptions that a group has about itself, thereby positively influencing individual behavior.*

# Talking Points

This section presents talking points for each of the key concepts of the social norms frame.

## **1. Misperceptions of norms reinforce negative behavior**

*Widespread misperceptions of norms can contribute to an increase in negative behavior.*

---

**1. a.** People's perceptions regarding the prevalence of unhealthy behaviors often diverge from reality.

**1. b.** The foundation of the social norms approach is that misperceptions of the prevalence of negative behavior can lead to more negative behavior. For example, if a young person believes that most of his or her peers drink heavily at parties, then he or she will be more likely to do so. Social norms projects have shown repeatedly that the pressure to engage in high-risk drinking is reduced when the true norm of moderation and safety is known.

**1. c.** Generally, we exaggerate negative or harmful behaviors, e.g., heavy drinking, and underestimate the positive behaviors, e.g., using designated drivers or wearing seat belts.

**1. d.** Misperceptions of norms are widespread. They exist in junior and senior high schools, college students, statewide with adults, parents, and among different demographic groups.

**1. e.** Over-emphasizing the negative consequences of a behavior only exacerbates misperceptions about the prevalence of that behavior.

**1. f.** Even well-intentioned prevention efforts can cause more harm than good if they reinforce negative misperceptions of true health norms.

**1. g.** Approaches which are built upon worry, fear, or shame distort perceptions and increase harm and risk.

**1. h.** Ample data exist regarding the harm-producing effects caused by reinforcing misperceptions of true norms.

**1. i.** The assumption that over emphasis of negative consequences will result in positive behavioral changes has not been demonstrated.

**1. j.** While an understanding of the consequences of negative behavior is beneficial, this knowledge alone does not necessarily effect long term change.

**1. k.** Prevention programs and media campaigns that fail to measure their impact upon misperceptions of norms must be challenged to do so.

**1. l.** Since misperceptions are widespread, a level of skepticism should be expected when efforts are being made to correct these inaccuracies. One should not be discouraged by this skepticism.

Relevant references: 3, 4,36, 49, 51, 55, 65, 76, 78, 80

## **2. Accurate perceptions increase healthy behavior**

*Communicating accurate information about the prevalence of healthy behavior can lead to more healthy behavior. We must create environments that consistently communicate the truth about health as the norm instead of only highlighting the individuals who make poor choices.*

---

**2. a.** Promoting already existing healthy norms (attitudes and behavior) can foster positive changes in attitudes and behavior.

**2. b.** Social norms theory contends that much of our behavior is influenced by how we “think” other members of our social groups think and behave and that our beliefs about what others do are often incorrect. Social norms marketing promotes positive, protective factors that already exist in the majority of a group.

**2. c.** Correcting misperceptions with social norms strategies empowers the majority who already have positive attitudes and behaviors to continue their healthy lifestyles and impact the minority who are not.

**2. d.** Perceptions of norms can be more powerful influences on behavior than actual norms.

**2. e.** We need to create a “virtuous cycle” that allows the norm of healthy behavior to lead to even more healthy behavior.

**2. f.** A social norm is not what *should* be done, but what is *already* the standard behavior or attitude of the majority of the group.

**2. g.** The social norms model is creating a paradigm shift in the field of health promotion based upon promoting healthy behavior to achieve positive outcomes.

**2. h.** If we want health we need to promote health.

**2. i.** Social norms builds upon what is healthy and is working to address that which is not.

**2. j.** Promoting positive norms is one of the best ways to impact the behaviors of people who are outside of the norm.

Relevant references: 1, 2, 5, 7, 10, 15, 18, 31, 32, 35, 49, 83

### **3. Social norms uses multi-faceted intervention strategies**

*Social norms uses multi-faceted intervention strategies for varying levels of intervention that include policy, media, curriculum, small group intervention and treatment.*

---

- 3. a.** Social norms marketing is one of the most effective tools for impacting the perceptions of large scale populations. It can be applied to numerous intervention strategies.
- 3. b.** Education and legislation are not enough to solve our problems. A necessary component to an overall public health framework is the communication of the reality of healthy norms.
- 3. c.** Social norms is an effective science-based methodology that can guide comprehensive environmental approaches to prevention.
- 3. d.** Successful social norms projects use multiple intervention strategies and operate in environments where there is an absence of competing negative messages.
- 3. e.** The focus of social norms projects can range from primary prevention to intervention.
- 3. f.** Social norms has been found to be highly effective for impacting high-risk behaviors such as heavy alcohol use.
- 3. g.** Social norms has been successfully used in multi-media such as television, radio, newspapers and billboards.
- 3. h.** Electronic media can be an innovative component of a multi-faceted social norms intervention.
- 3. i.** One of the most potentially effective components of a multi-faceted approach is infusing accurate portrayals of social norms into school curricula.
- 3. j.** Accurate portrayal of social norms can be used to help reinforce the need for intervention and treatment in individuals by shattering the myth that extreme substance abuse is typical.
- 3. k.** Accurate norms can provide a context for news coverage on all issues—even the most tragic.

**3. l.** Norms, attitudes and beliefs can be used to lend support to changes in policy.

**3. m.** For many public policy issues, a strong majority norm exists for increased laws and policies.

**3. n.** An awareness of true norms can remove obstacles to policy development.

**3. o.** Small group interventions based upon social norms have proven effective at changing both attitudes and behaviors.

Relevant references: 7, 12, 16, 18, 28, 29, 35, 42, 47, 54, 64, 70, 72

## **4. Social norms is community based**

*Social norms is founded on a bottom-up, community-based approach that relies on the strength of positive attitudes, beliefs and behaviors of the group.*

---

- 4. a.** Social norms is built on an asset-based model that joins with a community to celebrate and promote its positive features.
- 4. b.** Social norms is a groundbreaking approach that spreads positive messages that empowers people to continue making healthy decisions
- 4. c.** We must recognize and build upon the power of a community or group and their healthy choices.
- 4. d.** We should focus on the majority of the people within a target group who practice health and safety rather than over-emphasizing the few who do not.
- 4. e.** Social norms can build community pride by catching people doing things right and thanking them for it.
- 4. f.** Prevention efforts should focus on joining with, not fighting against, the group.
- 4. g.** Social norms works *with* a community or target population such as youth without going to war *against* them.
- 4. h.** Shifting the public conversation to talk about the strengths and good things going on in our communities motivates and empowers us to do more of the same.
- 4. i.** Policy, media, and other interventions must grow from within a community and not be imposed upon them from outside.
- 4. j.** This positive, inclusive community-based strategy is not only a refreshing change, but also an effective strategy for keeping people healthy.
- 4. k.** The public is tired of top-down government programs manufacturing the next health crisis as a way to justify changes in health policy. Communities are invested in things that they help create.

**4. I.** Social norms recognizes that the power of our country is in our people and our communities.

Relevant references: 5, 7, 10, 12, 15, 16, 29, 31, 32, 41, 70, 72

## **5. Social norms is a science-based method**

*The importance of public health efforts demands that we use an effective and accountable science-based strategy like social norms.*

---

- 5. a.** The public deserves to know how much money is being spent on programs and the evidence of their effectiveness.
- 5. b.** A science-based approach such as social norms is the best way to ensure that the public is getting its money's worth.
- 5. c.** Built upon a strong foundation of research, social norms projects produce data and track their impact on the public.
- 5. d.** Science-based methods allow the public to determine if projects are making a positive difference.
- 5. e.** Science-based methods can result in year-to-year comparisons of project success and the capacity to track behavior over multiple years.
- 5. f.** When investing in our children's future, we need to go with what works—with effective, outcome-based prevention practices.
- 5. g.** Public health issues demand long-term, comprehensive solutions based upon the positive foundation of the social norms approach. But we must also demonstrate short-term impacts.
- 5. h.** We have a commitment to treat the public's hard-earned money in a way that gets them the best returns for their investments as demonstrated with social norms interventions.
- 5. i.** This effective, science-based approach can demonstrate that fewer college students are drinking heavily, which in turn reduces the rate of alcohol-related problems on campuses.
- 5. j.** Prevention programs which operate without attention to their impact on perceptions of norms are ignoring one of the most powerful tools of social science.
- 5. k.** The public deserves accountability to the highest standards and rigors of science. Social norms meets these standards.

Relevant references: 10, 16, 18, 28, 29, 35, 64, 70, 72

## **6. Social norms is an environmental approach**

*Social norms is an environmental approach that does not focus simply on individuals. Rather, it strives to change the perceptions that a group has about itself, thereby positively influencing individual behavior.*

---

- 6. a.** We cannot continue using traditional, individual education approaches, while expecting them to somehow impact the social environment.
- 6. b.** Social norms reshapes the entire cultural environment which in turn impacts individual attitudes and behaviors.
- 6. c.** An environmental approach based on the framework of social norms allows people to celebrate what is healthy.
- 6. d.** We must build upon the normative protective factors that already exist in the environment.
- 6. e.** It is not enough to hang a few posters and expect to shift perceptions against a tsunami of negativity. We must shift the entire environment so that it reflects accurate norms.
- 6. f.** An environment which communicates clear messages about true health norms shouts, “Join us” so we can become healthier.
- 6. g.** Positive environments produce positive people.
- 6. h.** Social norms includes strategies targeting policy and laws but goes beyond them to address the social context of attitudes and behaviors by reshaping misperceptions.
- 6. i.** Projects that focus solely on the individual ignore the political system’s responsibility to address the problem.
- 6. j.** We must shift our focus from “youth at risk” to “youth living in risky environments” which are characterized by widespread misperceptions of norms.
- 6. k.** We must challenge the term *change social norms* when in most cases the norm or majority behavior is healthy and what we really mean to say is that the norm should be *strengthened*.

Relevant references: 6, 7, 16, 17, 70, 72

---

# Writing Social Norms Press Releases

Press releases are useful for communicating any special news such as: the implementation of a new social norms marketing campaign, a task force meeting open to the public, the release of data from a social norms project, or the start of a new school year.

Any information that is newsworthy and that you would like the public to know about can be submitted to the media in the form of a press release. Communicating through a short pitch letter or a phone call prior to submission can be helpful in explaining to reporters why the event is newsworthy.

Mondays and Tuesdays are often the slowest in terms of news, so it is a good strategy to release your press release or hold a press conference on these days.

If possible, a press release should be no longer than one page. It should be written on your letterhead and headed with information in the following order:

- **FOR IMMEDIATE RELEASE:** December 1, 2002  
(Avoid asking for the information to be held – it should be available for immediate release)
- **CONTACT:** Jane American, 555-5555, Student Drinking Task Force Chairperson  
(Make sure this person will be available when the press release goes out. Your project will lose credibility if the press cannot reach a contact.)
- **HEADLINE:**  
This should reflect the main point you are trying to convey. It must be as clear and as short as possible. The print should be bold and in all capital letters.
- **LOCATION:**  
The location where the story originated is printed in bold capital letters and followed immediately by the text of the press release.

**FOR IMMEDIATE RELEASE**

**CONTACT:** Jane American,  
555-5555  
DUI Task Force,  
Chairperson

December 1, 2002

## **YOUR SOCIAL NORMS HEADING GOES HERE**

**YOUR CITY** – Leading sentence and paragraph.

- **Lead Sentence& Lead Paragraph**  
The lead sentence lists **who, what, where, why, how, and when**. The release should begin with the most important information— new data, the kick-off of a new campaign, the start of a new school year, an important anniversary.

- **Body Paragraphs**  
These paragraphs provide additional information. Paraphrase the main point you are trying to make or offer new perspectives with quotes. Try to get quotes from significant people outside of your project. Some people will allow you to draft their quote for them and simply approve it.

Provide background information to assist reporters with understanding the context of your news. Be prepared for some of this information to be deleted from the version of the story that appears in the press.

- **Last Paragraph**  
End with a one-sentence description of your organization or project and do not summarize your press release. When you are finished, end with the journalism symbols ### or -30- to denote the end of the release.

## **A Sample Press Release**

FOR IMMEDIATE RELEASE  
#02-34

CONTACT: Donna M. Pinkham  
Press Secretary  
(717) 783-8864

(HARRISBURG) July 8 -- Over 300 of the nation's leading social norms researchers, theorists and practitioners will meet in Philadelphia for the **2002 National Conference on the Social Norms Model, July 10-12 at the Hyatt Regency Philadelphia at Penn's Landing.**

The Social Norms Approach, which attempts to dispel myths about human social behavior, has been widely recognized as a proven way of preventing binge drinking by young people. When surveyed, most college students will overestimate the amount of alcohol their peers drink. New social norms marketing projects reinforce the fact that most college students do not drink heavily. In doing so, these projects help to relieve pressure on young people to drink and may lead them to abstain from alcohol altogether.

Last year, *The New York Times* named the social norms approach as "one of the ideas that shook the world in 2001." Many schools have seen dramatic reductions in the rate of heavy drinking after using social norms marketing. At the University of Arizona at Tucson, heavy drinking dropped 28 percent in five years when a social norms campaign was conducted. At Hobart and William and Smith Colleges, it dropped 40% in four years. The social norms approach is also being used in college and high school settings to reduce tobacco use, improve academic performance, to promote sexual responsibility and to reduce violence against women.

Malcolm Gladwell, a writer for the *New Yorker* and author of the best-selling book *The Tipping Point*, will give the keynote address at noon on Thursday, July 11<sup>th</sup>. Gladwell's book is a provocative investigation

into the ways in which significant change can seem to happen overnight, and he will discuss his notion of positive “social epidemics” for the field of social norms.

The conference is organized and hosted by the BACCHUS and GAMMA Peer Education Network and the National Social Norms Resource Center with financial and technical assistance from the Pennsylvania Liquor Control Board.

For more information or a complete conference schedule, visit <http://www.bacchusgamma.org/socialnorms.asp>

###

# Writing Social Norms Op-Eds

In general, an op-ed (opinion editorial) explores an opinion about a particular issue and should provoke public debate. The best op-eds, and the ones that are most likely to be printed, are those that add new information to existing debates and frame issues in an innovative way. Op-eds written with a social norms perspective are especially suitable for this approach.

The following are general tips and guidelines to use when writing and submitting a social norms op-ed:

## Length

Op-eds are typically 600 to 700 words long. Check with a newspaper's policy before you submit an op-ed.

## Main message

Try to discuss only one main message per op-ed. Do not try to explain all the viewpoints that surround an issue. State your main social norms message in the first paragraph and begin the op-ed with an attention grabbing sentence. You must engage readers immediately.

## Clear Communication

Newspapers have a diverse audience. Your op-ed should be as clearly written as possible and avoid technical terms or acronyms with which the general public may not be familiar. Advance new ideas in a logical manner without being overly argumentative. Make sure that all statistics that you use are stated in a positive manner, for example, "70% of teens are tobacco free" not "30% of teens use tobacco."

## Submission

Submit your op-ed double spaced with a title and a photograph of the author. Include a paragraph of 25 words or less at the end that gives information about the author (name, title, employer, and any experience that is relevant to his or her expertise on this topic).

## A Sample Op-Ed

### Montanans are ready for a 0.08 BAC law

by Jeff Linkenbach

[printed in the *Billings Gazette* 5/28/02 and *Bozeman Chronicle* 6/18/02]

Recent coverage of proposed changes in Montana's DUI law has raised the question of whether Montanans really support changes or whether political and financial pressure from the federal government has propelled change to the forefront. Discussion has also centered on using the law to influence social change — in this case, increasing the public's support for stricter DUI regulations and reducing the occurrence of drinking and driving among Montanans.

But the debate over stricter DUI laws misses an important point. An alternative scenario exists. What if the social change has already occurred, but it is the law that lags behind?

A recent editorial suggests letting the public decide on the proposed change from a 0.10 Blood Alcohol Content (BAC) legal limit to 0.08. The Montana Social Norms Project, a health promotion and education project at Montana State University, has already researched this very question. Preliminary results indicate that there is already strong support for a 0.08 law. More than two-thirds of young adults support the change from 0.10 to 0.08, according to a November 2001 survey of 1,000 Montanans aged 21 to 34.

Interestingly, this survey also reveals a misperception regarding others' support for this change. While the majority of young adults in Montana support the change, they do not believe their "peers" feel the same way. The same 1,000 respondents reported believing that, on average, only a third of 21- to 34-year-old Montanans would support changing the legal limit to 0.08. There is a nearly opposite relationship between what people support and what they think their peers support.

This type of misperception occurs with behavior as well. For example, the same survey revealed that while a large majority of Montana young adults, 4 out of 5, do not drink and drive, more than 90% of respondents believe that the average Montanan their age does.

The overall conclusion from this research is that although there is a misperception that drinking and driving is "normal" in Montana, the evidence indicates it is not. Further, despite a perceived resistance to stricter

DUI laws, it appears there is strong support for them among the very segment of the population most likely to drink and drive — young adults. Older adults are likely to support the change as well because previous research shows that older segments of the population are more apt to support stricter laws in general.

Uncovering misperceptions helps explain how people might think there is widespread opposition to changing the legal BAC to 0.08. But when the reality of the healthy behavior that most of us engage in is made clear, suddenly the context surrounding these issues is altered. An accurate understanding of Montanans' beliefs and behaviors removes an assumed opposition and clears the path to establishing laws that accurately reflect the will of the public.

By realizing that these extreme negative behaviors are unacceptable and not as prevalent as we may think, we alter how we address these issues. Our efforts to implement prevention campaigns, to create useful policy and to form accurate opinions can benefit from the power of the majority who practice healthy, positive behaviors and who want our laws to reflect the same.

Any amount of impaired driving is a serious problem that affects us all. One of the most powerful tools we have to address this concern is an understanding that the majority of Montanans support a strong response to drinking and driving.

We must set the record straight by replacing the misperception that Montanans do not support stricter DUI measures with the reality that most of us want to prevent drinking and driving.

Drinking and driving in Montana is a serious problem. Setting the legal BAC at 0.08 has saved lives in other states, and it will in Montana as well. It is a law we should implement not to comply with a federal mandate or to change the culture of Montana, but because it would reflect the true behavior and the will of the people. Our culture is already there. Montanans are ready for a 0.08 law.

*Jeff Linkenbach, Ed.D., is the director of the Montana Social Norms Project, home of the MOST of Us<sup>®</sup> Campaigns, and an assistant research professor in the Department of Health and Human Development at Montana State University.*

# Ten Tips for Getting a Social Norms Perspective into Press Coverage

## **1. Social Norms is “New”**

Remember that reporters always look for something new. Show them how the social norms approach is a new and different method of health promotion.

## **2. Reverse the Ratio**

When approached with negative statistics, reframe them as positive and mention the “healthy majority” and the need to increase its size. For example, a 2% usage of methamphetamine by a population of youth can be reversed to be stated that 98% of youth are methamphetamine free.

## **3. Give Credit and Thanks**

Rather than placing blame for negative behavior, give credit to the public for engaging in healthy behavior and supporting each other. Offer thanks to those who help others make healthy decisions, e.g., parents, the school administration, counselors, law enforcement.

## **4. Start General, Finish Specific**

When commenting on behavior, begin with a general statement gets the point across cogently—for example, “The majority of our students engage in healthy behavior.” Then, offer a follow-up statement with specifics on the target audience and a statistic—“Eighty percent of our college students drink moderately or not at all.”

## **5. Highlight Positive Trends**

Focusing on increases in healthy behavior over time helps make the point that the majority of people are making positive choices. Stories initiated by a crisis or tragedy are especially apt to exaggerate the context surrounding the event, so they can benefit from a reminder that the event was extreme and out of the norm.

## **6. Piggyback on Other Events**

Use events that are likely to receive coverage to serve as a starting point for your news. Tailor a press release to coincide with events such as the first day of school, spring break, St. Patrick's Day, or New Year's. Anticipate the release of national reports to provide a local perspective that may reinforce positive findings or counter negative conclusions.

## **7. Share Norms About a Variety of Health Issues**

This often "raises your stock" with the press and allows you to share the relationship between health issues while you reinforce norms.

## **8. Scan the News**

Sometimes a new movie, or speaker or special interest story that "every one is talking about" will provide an opportunity for you to expose the positive norms of the majority as context for the "hot topic."

## **9. Provide "Media Friendly" Graphics**

Well-prepared pie charts, bar graphs, and examples of social norms marketing materials are visually appealing and offer an alternative way of communicating with your audience about norms.

## **10. Write a Letter to the Editor**

Norms can be exposed through short, non-judgmental letters that can clarify information or reframe information in a normative context.

## **Tips for Shifting Attitudes with a Member of the Press**

Social norms practitioners often interact with representatives of the press during or after critical incidents. For example, if an alcohol-related accident or death occurs on a campus or in a community, a social norms practitioner might be called by the local press to respond to the incident and explain what the university will do to prevent such tragedies in the future.

Similarly, local press might contact a social norms practitioner to elicit responses to the publication of data that focuses on extreme harmful alcohol-related behaviors of college students. Although not in response to a crisis, media attention to campus prevention efforts predictably increases at the beginning of each new academic year or before spring break occurs.

These moments in time are extraordinary opportunities to reframe the discussion of who college students are and what kinds of prevention strategies work. However, when the interaction between social norms practitioners and representatives of the media is crisis-driven, the challenge to positively focus and frame the issue under discussion is substantial.

The practitioner has two tasks to address: The first task is to cognitively reframe the focus of the discussion from a crisis or catastrophe orientation to one of health and hope. Second, the practitioner faces the personal, and sometimes emotional, job of shifting a potential adversary to an ally—of moving the conversation from a confrontational tone to one of dialogue and understanding.

The Key Concepts and Talking Points provide the social norms practitioner with the content needed to incorporate social norms theory into their media coverage. The following suggestions are a “process guide” on how to approach an interaction with a representative of the press and achieve a more accurate portrayal of target audiences

and the work that we do to keep them whole and healthy. These suggestions are not a “formula” but rather a way of thinking about the interaction with press representatives.

### **1. Listen to and reflect the seriousness of the catalyzing event or data.**

An essential ingredient to minimizing confrontation in the interview is listening to the media’s frame or interpretation of the event or data. Acknowledging the seriousness of the particular catalyzing event or data does not mean that you agree that the event is normative or that the data represent *all* of the target population.

### **2. Determine in advance what you can sincerely agree with.**

For example, we can all agree that reducing alcohol-related injuries or deaths among college students is a shared goal. We can agree to the seriousness of the catalyzing event or data while, at the same time, we introduce the idea that a relationship exists between “how we talk about tragedies (or data) like this” and our ability to prevent future tragedies or to reduce prevalence.

### **3. Affirm the media’s attention.**

Acknowledge that public awareness of the issue is important and that the media serves the community by reporting on such events or data. Simultaneously, include in this affirmation additional statements about the significance of the media’s role in accurately portraying the issue. Continue to build the bridge to the press representative as a potential part of the solution. Assist press representatives in seeing that what they choose to report and how they report are not without consequence.

#### **4. Differentiate the seriousness of the precipitating event or report from the prevalence of the event or data.**

One effective strategy for clarifying this typical confusion is a “double-sided reflection” which paraphrases the interviewer’s concerns, and goes on to present the social norms re-frame. For example, consider this double-sided response: “On the one hand, we, like you, are very concerned about \_\_\_\_\_, but, on the other hand, it is important to acknowledge \_\_\_\_\_.” Statements such as this provide the foundation to state and re-state the **Key Concepts** and **Talking Points** that the social norms practitioner wants to emphasize.

#### **5. Explain (educate) about normative data or the social norms approach.**

Proceed slowly, stopping frequently to ask for the interviewer’s understanding of what you are saying. Use every opportunity to reiterate the **Key Concepts** and **Talking Points** about the social norms approach that are outlined in the pages of this guide.

#### **6. Roll with resistance.**

Avoid argumentation about the normative data or the social norms approach. If the press representative does not accept the veracity of the data or the approach you offer, acknowledge how challenging it is to understand a completely new way of looking at college student drinking, or other issues. Remember that this could be the first time the press representative has heard the “other side” of the college student drinking story. One approach that social norms practitioners can use to decrease their own defensiveness is to approach the press representative with respect—as a person who is “teachable and reachable.”

**7. Shift from the pessimism of the precipitating event or data to the optimism of strategies that support health and offer a hopeful view of our youth.**

Keep your eyes on the prize of the “hopeful ending.” No matter how dire the precipitating event or data, see it first and foremost as an opportunity to shift the perspective of one person—the press representative—who can, in turn, shift the perspectives of many others. Affirm the interviewer’s budding interest in or understanding of the social norms approach and recognize his or her perspective on social norms as an important step.

**8. Offer to follow-up with more information or another interview about this “innovative, effective prevention strategy.”**

Accept that the precipitating event or data may be the focus of the story that gets written or broadcast. Celebrate the incremental steps the press representative makes in accurately portraying the target population or the social norms approach. Follow-up with an offer to do another interview that highlights the social norms approach or to write a guest editorial that focuses on the “healthy majority” of the target population.

**9. Be prepared to offer corroboration.**

Often reporters will seek verification or will want to expand their stories to include information about other public health projects that are using a social norms approach. Be prepared to provide such information.

# **Social Norms Works:**

## **A Few Examples of the Power of Social Norms Interventions**

### **Alcohol**

The social norms marketing approach has been and continues to be used most frequently to address heavy episodic alcohol consumption and related harm. By now, a number of colleges and universities, ranging from large, public institutions to small, private colleges, have achieved significant reductions in heavy episodic alcohol consumption after consistently promoting positive social norms. Recently, a number of secondary schools have begun to explore the use of the social norms approach as well.

Here is just a sampling of the successful social norms marketing interventions currently underway across the country. All of these projects have documented significant reductions.

### **Alcohol: The Effective Use of Social Norms Marketing**

<b>Institution</b>	<b>Reductions in self-reported high-risk drinking</b>
Northern Illinois University	44% reduction over 10 years
Hobart and William Smith Colleges	40% reduction over 4 years
University of Arizona	29% reduction over 3 years
University of Missouri at Columbia	21% reduction over 2 years
Western Washington University	20% reduction over 3 years
Rowan University	20% reduction over 2 years
DeKalb County Partnership: DeKalb & Sycamore Illinois High Schools	14% reduction over 2 years
University of Arizona, Sorority Campaign	12% reduction over 3 years

While most widely known under the guise of campus-wide, social norms marketing projects, the social norms approach has also been used successfully with small groups. These interventions have generally targeted segments of the population that are known to be at higher risk, such as Greeks, athletes, and first-year students. The following projects have demonstrated some success in correcting

students' misperceptions of the norms and in reducing high-risk drinking.

**Alcohol: Social Norms with Small Groups**

University of Washington	The Greeks 200 Project
Washington State University	Small-Group Norm-Challenging Model
University of Rhode Island	Interactive Social Norms Correction for First-Year Students
University of South Carolina	PAN: The Perception of Alcohol Norms

**Tobacco**

While the social norms approach has been most widely and effectively used to reduce heavy episodic alcohol consumption and related harm, it is now being successfully employed in interventions targeting tobacco use in university, high school, and community-wide settings. A number of projects are now reporting success in correcting misperceptions of the norms of tobacco use, with a consequent reduction in smoking rates or the rates of initiation.

Montana: <i>MOST of Us Are Tobacco Free</i> A Seven County Social Norms Campaign	41% reduction in first-time smoking rate after an 8 month media campaign
DeKalb County Partnership: DeKalb & Sycamore Illinois High Schools	34% reduction in the number of students reporting the use of tobacco in the last 30 days
University of Wisconsin Oshkosh <i>You Know You Want To...</i>	33% reduction in smoking rates

Other health and safety issues are also in various stages of evaluation.

Relevant references: 11, 16, 18, 24, 31, 32, 33, 39, 46, 48, 54, 57, 58, 59, 61, 70

# **Talking Points: National Surveys**

## **Support Social Norms**

### **NIAAA Report Encourages Use of Social Norms**

The use of social norms in addressing college drinking is of such promise that the National Institute on Alcohol Abuse and Alcoholism lists it twice in its report “A Call to Action.” First, “norms clarification” is noted as an effective strategy that targets individual drinkers. Second, the report cites social norms marketing as a promising strategy worthy of continued evaluation. It also notes that social norms marketing is a strategy applicable to the student population as a whole.

### **Harvard Study Confirms that Most College Students Drink Moderately**

Findings from the four Harvard School of Public Health College Alcohol Study Surveys (1993, 1997, 1999, and 2001) confirm that most students drink moderately, if at all. The studies, conducted by Henry Weschler, PhD, consistently reveal that about 3 out of 5 students are moderate drinkers or abstainers, and that serious consequences as a result of alcohol consumption are uncommon. [from [www.socialnorm.org](http://www.socialnorm.org)]

### **Monitoring the Future Survey Reports that Most College Students Drink Moderately**

Results from the Monitoring the Future survey of college students and adults from 1975-2001 show that 59% of college students drink moderately or not at all. This percentage is an increase from 1980 when the percentage was 56%. The surveys show decreases in the amount of drinking by college students since the 1980s.

### **CDC’s Youth Risk Behavior Survey Finds that Most High School Students Do Not Smoke Cigarettes**

Findings from the 2001 Youth Risk Behavior Survey confirm that most students are not current smokers. Results from the 2001 survey show that 75.1% of high school students reported that they are not current smokers (smoked cigarettes during the past month). Analysis of the data from 1991-2001 found that although cigarette smoking rates increased among US high school students during most of the 1990s, they have declined significantly since 1997.

## Stats

Lifetime smoking: 70.4% in 1999  
63.9% in 2001

Current smoking: 27.5% in 1991  
36.4% in 1997  
28.5% in 2001

Current frequent smoking: 12.7% in 1991  
16.7% in 1997  
16.8% in 1999  
13.8% in 2001

### **Monitoring the Future Survey Reports that Most 12<sup>th</sup> Graders Do Not Use Marijuana**

Results from the Monitoring the Future survey of high school students in 2001 show that 63% of high school seniors reported no past year marijuana use. In the 27 years that the MTF study has collected data, past year prevalence rates for self-reported marijuana use by seniors peaked at 50.8% in 1979 and declined to a low of 21.9% in 1992. Since then, it reached a relative maximum of 38.5% in 1997 and is now at 37% in 2001.

# Talking Points: Responding to Critical Questions about Social Norms

**1. Question:** Has research found social norms programs to be effective?

**Response:** Yes. The popularity of the social norms approach is gaining momentum because there is strong scientific support demonstrating its effectiveness in areas as diverse as high-risk drinking, seat belt use, and tobacco use prevention. While many health promotion efforts cite increased public awareness as an indicator of effectiveness, the key to being successful is demonstrating statistically significant behavioral change, which social norms projects across the country have documented.

**2. Question:** Do misperceptions exist?

**Response:** Misperceptions have been reported in over thirty studies published in peer-review journal articles for alcohol, cigarette smoking and other drug use, driving while intoxicated and driving with someone who is intoxicated, and in populations of adults, college students, and high-school students.

**3. Question:** Is there a such a thing as a “typical” person?

**Response:** While there may in fact be no such thing as a “typical person” from a statistical point of view, psychologically people do hold a picture of what they believe is typical among their peers. Due to the greater strength of local group norms some groups may in fact be more effectively reached through tailored interventions focusing on in-group norms, but this does not mean that correcting the misperceptions of norms on a larger scale is ineffective.

**4. Question:** Does social norms impact the highest risk groups?

**Response:** Yes, for example the social norms approach has been found to be effective with impacting heavy drinkers as well as moderate drinkers. Research demonstrates that students misperceive the drinking norms of their peer groups no matter how unhealthy or extreme these group norms actually are, and that even

in extreme drinking cultures protective behaviors exist that can be strengthened.

**5. Question:** What if there is no underlying healthy norm?

**Response:** If healthy behavior is not the norm, social norms campaign messages can focus on healthy attitudes, protective factors or values that are the norm.

**6. Question:** Does social norms minimize the problem?

**Response:** No. The statistics used in social norms projects reflect what *is* occurring, not what *should be* occurring. Acknowledging and reinforcing the healthy behavior of the majority does not dismiss the seriousness of a public health issue. For example, if anyone drives while intoxicated or engages in harmful drinking, it is a dangerous problem.

**7. Question:** Does social norms promote conformity?

**Response:** No. The use of social norms is meant to encourage critical thinking and create a dialogue about actual versus perceived behavior and attitudes. Social norms projects provide accurate information for people to use and evaluate when making judgments about how to conduct their own lives.

**8. Question:** What is the reaction to social norms messages?

**Response:** Reactions to social norms messages are often mixed. Many people will be relieved that their own attitudes and behaviors are similar to that of their peers. For others, a level of disbelief of social norms messages is expected. Skepticism is also evidence of the misperceptions the messages are attempting to alter. After repeated exposure to messages, people's perceptions begin to change and their disbelief of the statistics diminishes.

**9. Question:** Who funds social norms programs?

**Response:** Most social norms programs are funded by state, local or federal government agencies. When social norms practitioners cite their funding sources, it adds credibility to their efforts.

Relevant references: 10, 69 (many responses were taken from 10 with permission)

# Example of a News Article Discussing Social Norms

## Schools' strategy: Debunk image

By [J.J. Jensen](#)

*Seattle Times staff reporter*

Wednesday, September 25, 2002

(Copyright 2002 Seattle Times Company. Used with permission.)

College administrators in this state don't shy from admitting that underage drinking is among their top priorities.

But they'd like to break the stereotype that college is just one big beer bong after another or resembles chug-a-lug, boozefest movies like "Animal House" and "Road Trip."

In fact, dispelling that stereotype among students themselves is their major strategy in tackling drinking. Several colleges, including University of Washington, Western Washington University, Central Washington University and Washington State University, have active campaigns to do just that.

Says Holly Wilker, assistant to the vice president for student affairs at UW: "Some people feel others are drinking more, so they should drink more. The 'Social Norms' campaign educates students as to what their peers really are doing."

Through information gathered in campus surveys, statistics are touted on posters and in college newspapers. For example, in *The Daily* at the UW, advertisements say more than 85 percent of students drink 0-4 drinks when they do drink; advertisements at Western show students stop at three or fewer drinks, if they drink at all.

Also part of the campaign:

- **Small group schmoozes:** Counselors get together small groups in residence halls, classrooms, fraternities and sororities, and among athletic teams, and talk up responsible drinking and the everybody's-*not*-doing-it mantra.
- **More substance-free events:** Universities also are increasing the number of substance-free events, such as concerts, comedy nights and poetry readings, on Thursday, Friday and Saturday nights to provide more alternatives to drinking. They also are extending event hours to early in the morning.

"You can have a wonderful event, but if it's over at 10, students are going to find other things to do," said WSU's John Miller, director of prevention research.

Schools admit that pushing their message is tougher with students who live off campus — which is also where most parties occur. At WSU, to deter underage drinking at house parties, students face double-whammy penalties. The university gets copies of police reports, so students can suffer consequences both with the police and university.

At other schools, usually it is the local police who deal with off-campus students.

# References

1. Agostinelli, G., Brown, J. M., & Miller, W. R. (1995). Effects of normative feedback on consumption among heavy drinking college students. *Journal of Drug Education, 25*(1),31-40.
2. Andreason, A. (1995). *Marketing Social Change: Changing Behaviors to Promote Health, Social Development and the Environment*. San Francisco, CA: Jossey-Bass Publishers.
3. Baer, J. S., Stacy, A., & Larimer, M. (1991). Biases in the perception of drinking norms among college students. *Journal of Studies on Alcohol, 52*, 580-586.
4. Baer, J. S., & Carney, M. M. (1993). Biases in the perceptions of the consequences of alcohol use among college students. *Journal of Studies on Alcohol, 54*, 54-60.
5. Barnett, L. A., Far, J. M., Maus, A. L., & Miller, J. A. (1996). Changing perceptions of peer norms as a drinking reduction program for college students. *Journal of Alcohol and Drug Education, Winter 96*, 39-61.
6. Berkowitz, A. D. (1997). From reactive to proactive prevention: Promoting an ecology of health on campus. In P.C. Rivers & E. Shore (Eds.), *A Handbook on Substance Abuse for College and University Personnel* (Chapter 6). Westport, CT: Greenwood Press.
7. Berkowitz, A. D. (1998). The proactive prevention model: Helping students translate healthy beliefs into healthy actions. *About Campus, September/October*, 26-27.
8. Berkowitz, A. D. (2001). Critical Elements of Sexual Assault Prevention and Risk Reduction Programs for Men and Women. In C. Kilmartin (Ed.), *Sexual Assault in Context: Teaching Men About Gender*. Holmes Beach: Learning Publications.
9. Berkowitz, A. D. (2002a). Fostering Men's Responsibility for Preventing Sexual Assault. In P. A. Schewe (Ed.), *Preventing Intimate Partner Violence: Developmentally Appropriate Interventions Across the Lifespan*. Washington, DC: American Psychological Association.
10. Berkowitz, A.D. (2002b). Responding to the critics: Answers to common questions and concerns about the social norms approach. *The Social Norms Report, Working Paper #7*.
11. Berkowitz, A. D. (2002c). *The Social Norms Approach: Theory, Research and Annotated Bibliography*. Retrieved October 11, 2002, from <http://www.edc.org/hecsocialnorms/theory.html>
12. Berkowitz, A. D. (in press). Applications of Social Norms Theory to Other Health and Social Justice Issues. In H. Wesley Perkins, (Ed.), *The Social Norms Approach to Preventing School and College Age Substance Abuse: A Handbook for Educators, Counselors, and Clinicians*. San Francisco: Jossey Bass.
13. Berkowitz, A. D. & Perkins, H. W. (1987). Current issues in effective alcohol education programming. In J. Sherwood (Ed.), *Alcohol Policies and Practices on College and University Campuses* (69-85). Columbus, OH: National Association of Student Personnel Administrators Monograph Series.
14. Carpenter, John A. (1998). Back to School and Binge Drinking on College Campuses. *Recovery,1*(3).
15. Clapp, J. D. & McDonnell, A. L. (2000). The relationship of perceptions of alcohol promotion and peer drinking norms to alcohol problems reported

- by college students. *Journal of College Student Development*, 41(1), 20-26.
16. Craig, D., and Perkins, H. W. (2002). *A Multifaceted Social Norms Approach to Reduce High-Risk Drinking*. Newton, MA: The Higher Education Center for Alcohol and Other Drug Prevention, Education Development Center, Inc.
  17. DeJong, W. (in press). A Social Norms Approach to Building College Student Support for Policy Change. In H.W. Perkins (Ed.), *The Social Norms Approach to Preventing School and College Age Substance Abuse: A Handbook for Educators, Counselors, and Clinicians*. San Francisco, CA: Jossey-Bass.
  18. DeJong, W. & Linkenbach, J. (1999). Telling It Like It Is: Using Social Norms Marketing Campaigns to Reduce Student Drinking. *American Association for Higher Education Bulletin*, 52(4), 13-16.
  19. DeJong, W., & Winsten, J.A. (1998). *The Media and the Message: Lessons Learned from Past Public Service Campaigns*. Washington, DC: The National Campaign to Prevent Teen Pregnancy.
  20. Dimeff, L., Baerk, J., Kvilahan, D., & Marlatt, A. G. (1999). *Brief alcohol screening and intervention for college students: A harm reduction approach (BASICS)*. NY: Guilford Press.
  21. Edwards, G. et. al. (1994). *Alcohol Policy and the Public Good*. New York: Oxford University Press.
  22. Engs, R. C., & Hanson, D. J. (1988). University students' drinking patterns and problems: Examining the effects of raising the purchase age. *Public Health Reports*, 103, 667-673.
  23. Engs, R. C., Diebold, B. A., & Hanson, D. J. (1994). The drinking patterns and problems of a national sample of college students. *Journal of Alcohol and Drug Education*, 41, 13-33.
  24. Fabiano, P. M., McKinney, G. R., Hyun, Y. R., Mertz, H. K., & Rhoads, K. (1998). Patterns of alcohol and drug consumption and consequences among WWU students - An extended executive study. Focus: A research summary, *LifeStyles*. Bellingham, WA: The Office of Institutional Assessment and Testing, Western Washington University.
  25. Foss, R.D., K.S. Holladay, C.L. Bartley, and L.M. Marchetti (2000). BACs of University Students Returning Home at Night. *Proceedings of the 15th International Conference on Alcohol, Drugs, and Traffic Safety*, Borlänge, Sweden: Swedish National Road Administration.
  26. Freier, M.C., Bell, R. M., & Ellickson, P. (1991). *Do Teens Tell The Truth? The Validity of Self-Reported Tobacco Use by Adolescents*. Santa Monica, CA. The RAND Publication Series.
  27. Graham, J.W., Marks, G. & Hansen, W.B. (1991). Social Influence Processes Affecting Adolescent Substance Use. *Journal of Applied Psychology*, 76(2), 291-8.
  28. Haines, M. P. (1993). Using media to change student norms and prevent alcohol abuse: A tested model. *Oregon Higher Education Alcohol & Drug Newsletter*, 1(2), 1-3.
  29. Haines, M. P. (1996). *A Social Norms Approach to Preventing Binge Drinking at Colleges and Universities*. Newton, MA: The Higher Education Center for Alcohol and Other Drug Prevention, Education Development Center, Inc.
  30. Haines, M.P. (1997). Spare the Rod and Get Results: A Wellness Approach to Health Promotion. *Wellness Management*, 13(3) 1,4.
  31. Haines, M. P. (1998a). Community-generated protective norms reduce risk and promote health. *College Health in Action*, 37(4), 1,5.

32. Haines, M. P. (1998b). Social Norms: a wellness model for health promotion in higher education. *Wellness Management*, 14(4), 1,8.
33. Haines, M. & Barker, G.P. (in press). The Northern Illinois University Experiment: A Case Study of the Social Norms Approach. In H.W. Perkins (Ed.), *The Social Norms Approach to Preventing School and College Age Substance Abuse: A Handbook for Educators, Counselors, and Clinicians*. San Francisco, CA: Jossey-Bass.
34. Haines, M., Barker, G.P. & Rice, R. (in press). Using Social Norms To Reduce Alcohol And Tobacco Use in Two Midwestern High Schools. In H.W. Perkins (Ed.), *The Social Norms Approach to Preventing School and College Age Substance Abuse: A Handbook for Educators, Counselors, and Clinicians*. San Francisco, CA: Jossey-Bass.
35. Haines, M. P. & Spear, A. F. (1996). Changing the perception of the norm: A strategy to decrease binge drinking among college students. *Journal of American College Health*, 45, 134-140.
36. Hale, J.L., & Dillard, J.P. (1995). Fear Appeals in Health Promotion Campaigns: Too Much Too Little, or Just Right? In E.W. Maibach & R. L. Parrott (eds.), *Designing Health Messages: Approaches from Communication Theory and Public Health Practice*. Thousand Oaks, CA: Sage Publications.
37. Hancock, L. & Henry, N. (in press). Perceptions, Norms and Tobacco Use in College Residence Hall Freshmen: Evaluation of a Social Norms Marketing Intervention. In H.W. Perkins (Ed.), *The Social Norms Approach to Preventing School and College Age Substance Abuse: A Handbook for Educators, Counselors, and Clinicians*. San Francisco, CA: Jossey-Bass.
38. Hansen, W. B. (1993). School-based alcohol prevention programs. *Alcohol Health & Research World*, 17, 54-60.
39. Hansen, W. B. & Graham, J.W. (1991). Preventing alcohol, marijuana, and cigarette use among adolescents: Peer pressure resistance training versus establishing conservative norms. *Preventive Medicine*, 20, 414-430.
40. Horn, P. A. & Brigham, T. A. (1996). A self-management approach to reducing AIDS risk in sexually active heterosexual college students. *Behavior and Social Issues*, 6(1), 3-21.
41. Hunter, D. (1998). Taking control: A student initiative. *The Peer Educator: Social Norming - Trusting the Truth*, 21(1). Denver, CO: Bacchus/Gamma
42. Johannessen, K., Collins, C., Mills-Novoa, B., & Glider, P. (1999). *A Practical Guide to Alcohol Abuse Prevention: A Campus Case Study in Implementing Social Norms and Environmental Management Approaches*. Tucson, AZ: Campus Health Service, The University of Arizona.
43. Johnston, L. D., O'Malley, P. M., & Bachman, J. G. (1999). *National Survey Results on Drug Use from the Monitoring the Future Study. 1975-1998, Vol. 2: College Students and Young Adults*. (NIH Publication No. 99-4661). Washington, DC: U.S. Government Printing Office.
44. Kotler, P., Andreason, A. (1987). *Strategic Marketing for Nonprofit Organizations* (3rd ed.). Engelwood Cliffs, NJ: Prentice Hall.
45. Kotler, P. & Roberto, E.L.(1989). *Social Marketing: Strategies for Changing Public Behavior*. The Free Press.
46. Kumpfer, K. (1997). What works in the prevention of drug abuse: Individual, school and family approaches. In *Youth Substance Abuse Prevention Initiative: Resource Papers*, 69-106. Rockville, MD: Substance Abuse and Mental Health Services Administration, US Department of Health and Human Services.

47. Linkenbach, J.W. (1999a). Application of social norms marketing to a variety of health issues. *Wellness Management*, 15(3).
48. Linkenbach, J. W. (1999b). Building a Bridge: Applying the Social Norms Model to Sexual Health. *The BACCHUS & GAMMA Sexual Responsibility Manual*. (Available from the Bacchus & Gamma Peer Education Network, 4704 Colfax Ave. S. Minneapolis, MN 55409 or [www.baccusgamma.org](http://www.baccusgamma.org)).
49. Linkenbach, J.W. (1999c). Imaginary Peers and the Reign of Error: Binge Drinking Prevention Through Social Norms. *The Prevention Connection: A Publication of the Montana Prevention Resource Center and the Addictive and Mental Disorders Division of the Montana Department of Public Health and Human Services*, 3, 1-5.
50. Linkenbach, J.W. (1999d). Section 10 -- Social Marketing for Prevention. *The New Prevention Professionals Training Manual*. (Available from the Western Center for the Application of Prevention Technology, <http://www.unr.edu/educ/cep/prac/>)
51. Linkenbach, J.W. (2001). Cultural cataracts: Identifying and correcting misperceptions in the media. *Working Paper: a publication of the Report on Social Norms, 1*.
52. Linkenbach, J.W. (2002a). Marketing Highlight: Drinking And Driving. In P. Kotler, N. Roberto, & N. Lee (Eds.), *Social Marketing: Improving the Quality of Life* (2<sup>nd</sup> Edition) (pp. 162-166). Thousand Oaks, CA: Sage Publication, Inc.
53. Linkenbach, J.W. (2002b). Social Norms. In P. Kotler, N. Roberto, & N. Lee (Eds.), *Social Marketing: Improving the Quality of Life* (2<sup>nd</sup> Edition) (p. 173). Thousand Oaks, CA: Sage Publication, Inc.
54. Linkenbach, J.W. (in press). The Montana Model: Development and Overview of a Seven-Step Process for Implementing Macro-Level Social Norms Campaigns. In H.W. Perkins (Ed.), *The Social Norms Approach to Preventing School and College Age Substance Abuse: A Handbook for Educators, Counselors, and Clinicians*. San Francisco, CA: Jossey-Bass.
55. Linkenbach, J.W. & Perkins, H.W. (in press, a). Misperceptions of Peer Alcohol Norms in a Statewide Survey of Young Adults. In H.W. Perkins (Ed.), *The Social Norms Approach to Preventing School and College Age Substance Abuse: A Handbook for Educators, Counselors, and Clinicians*. San Francisco, CA: Jossey-Bass.
56. Linkenbach J.W. and Perkins, H.W. (in press, b). Most Of Us<sup>®</sup> Are Tobacco-Free: An Eight-Month Social Norms Campaign Reducing Youth Incitation Of Smoking In Montana. In H.W. Perkins (Ed.), *The Social Norms Approach to Preventing School and College Age Substance Abuse: A Handbook for Educators, Counselors, and Clinicians*. San Francisco, CA: Jossey-Bass.
57. Linkenbach, J.W., Perkins H.W. & DeJong, W. (in press). Parents' Perceptions of Parenting Norms: Using the Social Norms Approach to Reinforce Effective Parenting. In H.W. Perkins (Ed.), *The Social Norms Approach to Preventing School and College Age Substance Abuse: A Handbook for Educators, Counselors, and Clinicians*. San Francisco, CA: Jossey-Bass.
58. McAlister, A.L. (1991). Population Behavior Change: A Theory-Based Approach. *Journal of Public Health Policy, Autumn*, 345-361.
59. Manoff, R.K. (1985). *Social Marketing: New Imperative for Public Health*. Westport, CT: Praeger Publishers.
60. Marks, G., Graham, J.W., & Hansen, W. B. (1992). Social projection and social conformity in adolescent alcohol use: A longitudinal analysis. *Personality and Social Psychology Bulletin*, 18, 96-101.

61. Miller, D. T. & McFarland, C. (1987). Pluralistic ignorance: When similarity is interpreted as dissimilarity. *Journal of Personality and Social Psychology*, 53(2), 298-305.
62. Miller, D. T. & McFarland, C. (1991). When social comparison goes awry: The case of pluralistic ignorance. In J. Sullis and T. Wills (Eds.), *Social Comparison: Contemporary Theory and Research*, (chapter 11). Hillsdale, NJ: Erlbaum.
63. Miller, J. A. & Far, J. M. (2000). *Small group model - Norms challenging intervention*. *Project Culture Change*. Pullman, WA: Washington State University.
64. Perkins, H. W. (1995a). Prevention through Correcting Misperceptions of Alcohol and Other Drug Norms: Notes on the State of the Field. *Catalyst: A Publication of The Higher Education Center for Alcohol and Other Drug Prevention and the U.S. Department of Education*, 1(3), 1-2.
65. Perkins, H. W. (1995b). Viewing the Glass More Empty than Full. *Catalyst: A Publication of The Higher Education Center for Alcohol and Other Drug Prevention and the U.S. Department of Education*, 1(3), 2.
66. Perkins, H. W. (1997). *College student misperceptions of alcohol and other drug norms among peers: Exploring causes, consequences and implications for prevention programs*. *Designing Alcohol and Other Drug Prevention Programs in Higher Education: Bringing Theory Into Practice* (pp. 177-206). Boston, MA: The Higher Education Center for Alcohol and Other Drug Prevention, U.S. Department of Education.
67. Perkins, H. W., (2002). Social Norms and the Prevention of Alcohol Misuse in College Contexts. *Journal of Studies on Alcohol/Supplement*, 14, 164-172.
68. Perkins, H.W. (in press, a). The Emergence and Evolution of the Social Norms Approach to Substance Abuse Prevention. In H.W. Perkins (Ed.), *The Social Norms Approach to Preventing School and College Age Substance Abuse: A Handbook for Educators, Counselors, and Clinicians*. San Francisco, CA: Jossey-Bass.
69. Perkins, H.W. (in press, b). The Promise and Challenge of Future Work on the Social Norms Model. In H.W. Perkins (Ed.), *The Social Norms Approach to Preventing School and College Age Substance Abuse: A Handbook for Educators, Counselors, and Clinicians*. San Francisco, CA: Jossey-Bass.
70. Perkins, H. W., (Ed.) (in press, c). *The Social Norms Approach To Preventing School And College Age Substance Abuse: A Handbook For Educators, Counselors, And Clinicians*. San Francisco: Jossey-Bass.
71. Perkins, H. W. & Berkowitz, A. D. (1986). Perceiving the community norms of alcohol use among students: Some research implications for campus alcohol education programming. *International Journal of the Addictions*, 21, 961-976.
72. Perkins, H. W. and Craig, D. (2002). *A Multifaceted Social Norms Approach to Reduce High-Risk Drinking*. Newton, MA: The Higher Education Center for Alcohol and Other Drug Prevention, Education Development Center, Inc.
73. Perkins, H.W. & Craig, D.W. (in press, a). The Hobart and William Smith Colleges Experiment: A Synergistic Social Norms Approach Using Print, Electronic Media and Curriculum Infusion to Reduce Collegiate Problem Drinking. In H.W. Perkins (Ed.), *The Social Norms Approach to Preventing School and College Age Substance Abuse: A Handbook for Educators, Counselors, and Clinicians*. San Francisco, CA: Jossey-Bass.
74. Perkins, H.W. & Craig, D.W. (in press, b). The Imaginary Lives of Peers: Patterns of Substance Use and Misperceptions of Norms among Secondary School Students. In H.W. Perkins (Ed.), *The Social Norms*

*Approach to Preventing School and College Age Substance Abuse: A Handbook for Educators, Counselors, and Clinicians.* San Francisco, CA: Jossey-Bass.

75. Perkins, H.W., DeJong, W. & Linkenbach, J.W. (2001). Estimated Blood Alcohol Levels Reached by “Binge” and “Non-Binge” Drinkers: A Survey of Young Adults in Montana. *Psychology of Addictions, 15*, 317-320.
76. Perkins, H. W., Meilman, P. W., Leichliter, J. S., Cashin, M. A., & Presley, C. A. (1999). Misperceptions of the norms for the frequency of alcohol and other drug use on college campuses. *Journal of American College Health, 47*, 253-258.
77. Perkins, H. W., & Wechsler, H. (1996). Variation in perceived college drinking norms and its impact on alcohol abuse: A nationwide study. *Journal of Drug Issues, 26*, 961-974.
78. Pollard, J. W., Freeman, J. E., Ziegler, D. A., Hersman, M. N., & Goss, C. W. (2000). Predictions of normative drug use by college students: False consensus, false uniqueness, or just plain accuracy? *Journal of College Student Psychotherapy, 14*(3).
79. Posner, E. (2000). *Law and Social Norms*. Cambridge, MA: Harvard University Press.
80. Prentice, D. A., & Miller, D. T. (1993). Pluralistic ignorance and alcohol use on campus: Some consequences of misperceiving the social norm. *Journal of Personality and Social Psychology, 64*, 243-256.
81. Presley, C.H., Leichliter, J. & Meilman, P. (1998). *Alcohol and Drugs on American College Campuses: A Report to College Presidents*. Carbondale, IL: CORE Institute, Southern Illinois University.
82. Presley, C. H., Meilman, P. W., & Cashin, J. R. (1996). *Alcohol and Drugs on American College Campuses: Use, Consequences, and Perceptions of the Campus Environment* (Vol. IV: 1992-94). Carbondale, IL: The CORE Institute, Southern Illinois University.
83. Schroeder, C. M. & Prentice, D. A. (1998). Exposing pluralistic ignorance to reduce alcohol use among college students. *Journal of Applied Social Psychology, 28*, 2150-2180.
84. Walters, Scott A. (2000). In Praise of Feedback: An effective intervention for college students who are heavy drinkers. *Journal of American College Health, 45*, 235-8.
85. Wechsler, H., Davenport, A., Dowdall, G., Moeykens, B., & Castillo, S. (1994). Health and behavioral consequences of binge drinking in college: A national survey of students at 140 campuses. *Journal of the American Medical Association, 272*, 1672-1677.
86. Wenzel, Michael (June 2001). Misperceptions of Social Norms About Tax Compliance (1): A Prestudy. *Working Paper No 7: Centre for Tax System Integrity, Research School of Social Sciences*. Canberra: Australian National University.

It is the intent of the authors that this guide be a continual work in progress. Subsequent editions of the guide will be created periodically as new materials are added. Readers are encouraged to submit comments, suggestions, and examples of their press-related efforts (e.g., op-eds, press releases). Please send your input to [mail@mostofus.org](mailto:mail@mostofus.org) or visit [www.mostofus.org](http://www.mostofus.org). For additional social norms resources visit [www.socialnorm.org](http://www.socialnorm.org).