

NEW APPROACHES IN THE FIELD OF SUBSTANCE USE PREVENTION IN ADOLESCENCE – INTRODUCTION TO SOCIAL NORM APPROACH

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Abstract: *For a few past decades alcohol and other substances use has become one of the most critical social issues on a national level. A lot of primary and secondary schools involve into their prevention programs aimed at reduction of this phenomenon. Among the most frequently used methods we can mention providing information, peer groups and health education. Unfortunately, the effect of these methods is very limited. In the article we would like to introduce the preventive approach called Social norm approach that differs significantly from those aforementioned. Its authors found out that students typically misperceive the number of those students who are engaged in substance use. This phenomenon was named misperception. As many foreign research revealed, the correction of misperception and communicating a message related to the actual norm (number of the students involved in a risky behavior) contributes significantly to the decrease in students' substance use.*

Key words: social norm approach, substance use, misperception, correction of misperception

Introduction

Within the last decades we have been facing many social changes in our society, which on one hand make the life easier but on the other hand they include risk connected with the growing number of social – pathological phenomena, among which the leading position belong to substance use and abuse. We do not mean just alcohol and cigarettes, but it is necessary to admit that quite a lot of young people have already tried such narcotics that are likely to cause addiction. Primary school children and young people in adolescence belong to groups that are mostly jeopardized by this phenomenon. Research results indicate that the age level of substance users is getting lower in our country. None of us – grown ups has a guarantee that his/her children will have the power to resist and steer clear of drugs. There is a way that enables people to cope with this problem and we call it prevention. In our culture we distinguish three basic levels of prevention. First is primary or universal level which addresses the entire population and the basic aim of it is to protect young people from emergence of various psychological and social problems.

Second level belongs to secondary or selective prevention that focuses on harm reduction caused by the above mentioned problems. The last, tertiary or indicated prevention aims at recurrence of problems connected with substance use. Despite all demands to create and apply such prevention that possesses an attribute „effective“, providing information on drugs and their dangerous impact on humans still belongs to the most frequently used form of prevention. There is a preventive approach that has got the attribute „effective“ and its conceptual basis lies in social norms. The term that for many people belongs to social psychology has recently found his place in other areas of human's social life. In the US from the beginning of the 80th (last century) professionals started spreading and subsequently applying approach, that core idea is found in social norms. The idea of spreading the actual norm related to substance use seems to be a good “instrument” that helps professionals cope with this serious problem. In our country so far unknown approach belong to those preventive strategies that do not preach, do not lecture and never points to those students who drink alcohol, smoke cigarettes or engage in a risk behavior. Its strength is to focus on those students who decided to stay away from the influence of drug addiction.

Wider context of the term *norms*

The life of every single person is more or less influenced by norms. For many people the widely spread meaning of this word is connected with regulations or principles that are related to some particular activity. In „Dictionary of foreign words“ (1997) we can find the explanation of this term as „obligatory rule determined by regulations or habits. According to English psychology dictionary, norms represent commonly accepted standards of behavior within society, community or a group (Colman, 2001). The main distinctive criterion in approaching norms can be one's viewpoint. Accordingly there are norms on several levels: linguistic, legal, moral, technical and definitely on social level. Norms can operate on higher levels that means national, there are even such norms that are universally valid. Each norm is a part and a product of human life and in many situations it can be replaced by synonyms as:

- Rule – regulations developed by government authority. They are formal standards of behavior that might be considered as norms according to whether or not they are respected by people,
- Custom/tradition – they are common and ordinary ways of performing certain activities. Norms are described as customs in situations, that do not require their adoption (Krech, Crutchfield, Ballachey, 1969),
- Habit – refers to the set of attitudes and beliefs that prevail in the group and are inherited from the past. Using other words habits refer to the power that molds our attitudes and beliefs. Different point of view can represent the habit related to culture, that means such element that was formed spontaneously and naturally (Schlicht, 2001).
- Morals – norm or principle of right and wrong in human behavior, it is a specific representation of morality. It determines behavior with strong social importance.
- But there are others such as: directive, convention or principle.

Classification of norms within social psychology

From the aspect of fundamental determination of norms they can be viewed in two ways:

- the first one describes them as commonly accepted and respected rule,
- second one describes them as an individual perception of what people should do and what is allowed (Výrost a Slaměnik, 1998).

The above mentioned standpoints do not relate to norms as to rules or regulations, but they emphasize the direction of norms: whether they relate to the group of people or an individual. This classification closely relates to the term social norm and to the difference between this type of norm and a personal norm.

Social norms are described as rules connected to a social subject, for instance a group of people or any kind of community. Homišinová (2001, page 1) defines social norms as „requirements specified by society that are directed at one’s activity and his behavior towards other people, community; they are instructions how to behave in specific situations and a means of control over one’s behavior“. Social norm is not accepted by single individuals but it is a rule or regulation that was accepted by the group of individuals. If a certain rule is to become a norm, it is necessary to be accepted and promoted by all members of the social group. Moreover also individual perception of this norm enters this process – which means how the norm is understood by an individual. In general every single norm is defined on one hand as a rule accepted by the whole group, but on the other hand it is closely connected with its individual perception. What remains important is, what an individual perceives as a norm or what he considers to be a common rule. Also according to Lovaš (1998) in social psychology we underline the distinction of the aforementioned standpoints regarding norms in general. It is specific for social – psychological approach that norms are understood also as expectations. They determine how people should behave under particular conditions and circumstances. Norms are created in the course of repeated interpersonal interactions unless they acquire form of rules or regulations that are valid in a particular group of people or a community. Norms created in this way represent an inevitable element of group functioning. The group controls the adherence to norms among the members. Due to this fact a special system of sanctions was developed for those who do not adhere to norms or violate them.

The term *personal norm* is understood by Baumgartner (2003, s. 226) as „a personal rule accepted by a single individual or it can be a principle of solving a particular situation“. The fact that people are holders of both norms – personal and social – makes this distinction quite difficult. Rules and regulations become norms only in case they are accepted by single members of the group not by the group as a whole. There might be a slight difference among the members regarding the reason of norm acceptance: whether they are accepted because the individual really feels it that way or because it is necessary for his membership in the group. Apart from this, each person determines his own rules that do not have any succession to the membership in the group. Origin of group norms is various – it can be the consequence of internalized social norms or it may stem from accepted norms that are related to internalized values.

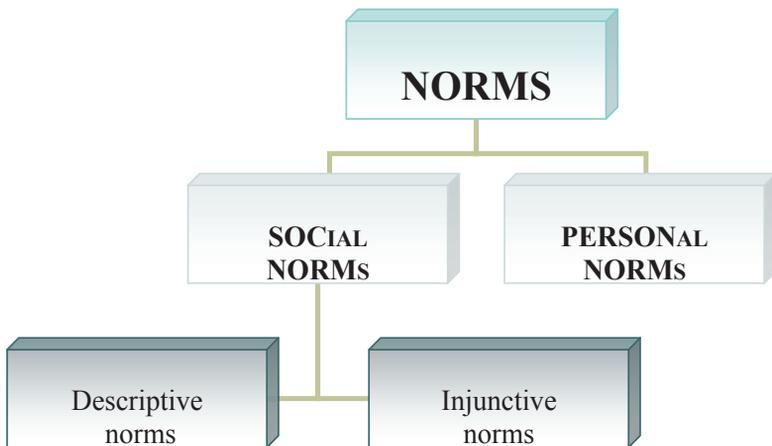
One of the main reasons of social norms acceptance is the interconnection between a person and a group. The reason of personal norms acceptance is subjective need to respect them and the need to act in accordance with them.

So norms in everyday life include social norms that represent informal obligations that are reinforced by social sanctions or rewards and personal norms that represent duties and obligations reinforced by internalized feelings to act, possibly might be reinforced by feelings of guilt, if we fail in our actions (Vandenbergh, 2005). Norms regulate adapting to social system people live in (Ruiselova, Urbánek 2008).

Research on substance use in adolescent people focuses on two types of social norms (Cialdini a Demaine, 2006; Elek et al., 2006; Borsari a Carey, 2003) and these are descriptive norms and injunctive norms.

- Descriptive norm relates to perception of quantity and frequency of drinking in other people, it is derived from observing people’s alcohol consumption in discrete situations (Borsari and Carey, 2003).
- Injunctive norm on the other hand relates to the perception of which behaviors (for instance drinking alcohol, smoking cigarettes) are typically disapproved or approved. In its essence this norm represents perceived moral rules of the peer group. Injunctive norms help an individual in determining what social behavior is acceptable or unacceptable (Cialdini et al., 1990).

In general descriptive norm (defined as the norm IS) is described as the one that relates to what is usually done in certain situations and it motivates people by providing evidence, what kind of behavior will be effective. Descriptive norms provide a picture about what is ordinary, usual, and normal – that means they tell us what is done. Motivational strengths of these norms stems from their informational value. Cialdini et al. (1990) claim that noticing what others do and copying this behavior seems to be a good strategy. It can be considered as the instruction that helps to resolve a problem, the instruction that is available to everyone who notice it. Injunctive norms (defined as the norm OUGHT TO) are concerned with what people feel is right or how people in general ought to behave in various situations and circumstances. As it was already stated, injunctive norms instruct people how to behave by means of social sanctions. Descriptive norms instruct about appropriate behavior by means of examples, injunctive norms do it by means of sanctions.



Picture 1: Norm classification in social psychology

Social norms play an important role in young people's decision making concerning substance use (Elek et al., 2006). Terminology used in empirical studies that uses social norms theory is not often unified. We decided to borrow Neighbors et al. (2006) classification of social norms on two levels: first level distinguishes between descriptive and injunctive norms and the second level views these norms from actual and perceived perspective. By using this classification it is clear that both types of social norms (descriptive and injunctive) offer two viewpoints. The first viewpoint focuses on the real behavior of an individual, what he usually does and how people ought to behave. The second viewpoint focuses on what an individual thinks other people do and how they behave in certain circumstances. Oleson (2004) defines actual norm as comprised of actual average attitudes, beliefs and behaviors of all group members. On the other hand perceived norm is defined as a group – wide assumption of extremity in the beliefs, behaviors and attitudes of all people in the group. Perceived norm is different from actual norm since it relates to what people think. Berkowitz (2004) adds that results of his research confirms the assumption that peer influence is mostly based on what we think other people do and what others believe (perceived norm) rather than on people's real actions and beliefs (actual norm).

Descriptive social norms are frequently used in interventions aimed at alcohol consumption in high school students and university students in the US. They are based on two core relations:

- a) perceived norm is typically higher than actual norm,
- b) perceived norm is positively correlated with alcohol consumption (Neighbors et al., 2006).

Social norm theory is based on the finding that people incorrectly perceive the frequency of how often their peers are involved in a risk behavior (drinking, smoking, using drugs) and this phenomenon has a causal effect on their behavior. Phenomenon of incorrect perception was in a scientific literature called misperception. The term misperception explains the contrast between actual attitudes or actions and what people think is true about behavior and attitudes of other people (Berkowitz, 2004). Misperception occurs when people overestimate or underestimate the prevalence of certain attitudes, beliefs or behaviors in a specific group or population. People can misperceive their social groups in many ways what subsequently influences their own behavior. As an example we can use the majority of people who are engaged in a healthy behavior but they believe that they are in the minority. On the other hand the minority who is engaged in unhealthy behavior incorrectly believe that they are in the majority. Also an individual might think that his behavior is more unique than it really is.

In the context of the above described phenomenon of misperception Perkins (1995) asserts that students typically overestimate the substance use and they have a tendency to overestimate permissiveness of their peers. Misperception fuels or supports problem behavior: students found themselves in an illusion or distorted image of their peers and subsequently adopt such behavior that their personal attitude would never allow them to adopt. The result is that problem substance use becomes widespread; students drink more (quantity and frequency) because they incorrectly perceive that this behavior is in accordance with what they peers really do. The concept of misperception was for

the first time used by Wesley Perkins and Alan Berkowitz in 1986. Based on existing findings in this field Perkins summarized main points related to this phenomenon:

1. Regardless of the drug type, there is a gap between actual and perceived norm.
2. Misperception of peer norms exist in high school and students come to universities with misperceptions of the norm related to substance use that even gets worse after entering university.
3. Misperception exists in both genders regardless of the extracurricular activities. Students are „carriers“ of the misperception, they pass it by means of conversations and they reinforce it in the culture.
4. Misperceptions have a potentially significant impact on substance use in students regardless of their own personal beliefs and attitudes and regardless of the actual norm. Misperception helps to activate and reinforce already permissive attitudes of some students. This subsequently create „pressure“ on other students with moderate attitudes that leads to heavier alcohol and other drug use.

Misperception of peer norms

One of the social norm approach pioneer Wesley Perkins (1977) in his cross-sectional study revealed that a peer influence (perceived norm related to drinking) seems to be a stronger predictor of alcohol consumption than those factors that include religion and parental attitudes. The strengths of peer influence seems to be crucial in understanding that students are engaged in drinking behavior that is in contrast with their personal attitudes. By the end of adolescence peers are regarded to be one of the most important and influential agents, especially in the field of alcohol and other drug use (Kandel, 1985). Young people in this period of life are prone to accept without any critical thinking most attitudes and behavior of their peers. This influence seems to persist until adulthood, having serious impact on individual use of wide range of substances.

Kopčanová (2001) defines these five main reasons leading to drug use.

- To reach feelings of satisfaction and relaxation. A lot of people use alcohol and other drugs just because they want to feel different, they might like feelings that are elicited by alcohol consumption or using other drugs. There are people who feel „better“ when using substances but they never become addicted to them. Despite this it is highly important to realize that once a person decides to use alcohol or other drugs there is a risk that he might become addicted.
- Curiosity. It is very „common“ reason of substance use. As it turned out, curiosity belongs to those factors that might have a serious impact on the age of the first use (Romanová, Čavojová, Sollár, 2008).
- Peer influence. A lot of people correctly suppose that during adolescence the individual's behavior is significantly influenced by the peer group. The impact of peers is obvious during the whole lifetime but in the course of adolescence this impact becomes stronger and more significant. For most adults using drugs just because other uses them does not seem to be a good reason for taking them. But for the children this could be the only way how to stay close to friends or remain a member of the peer group.

- External stress. It represents external pressure on the individual – that means all factors that stand outside the individual (for example school, work, family, and friends).
- Internal stress. This includes all problems or troubles that have their origin in the individual's inside world (low self-esteem, depression, moodiness). People are often desperate, helpless or weak to change those feelings or states.

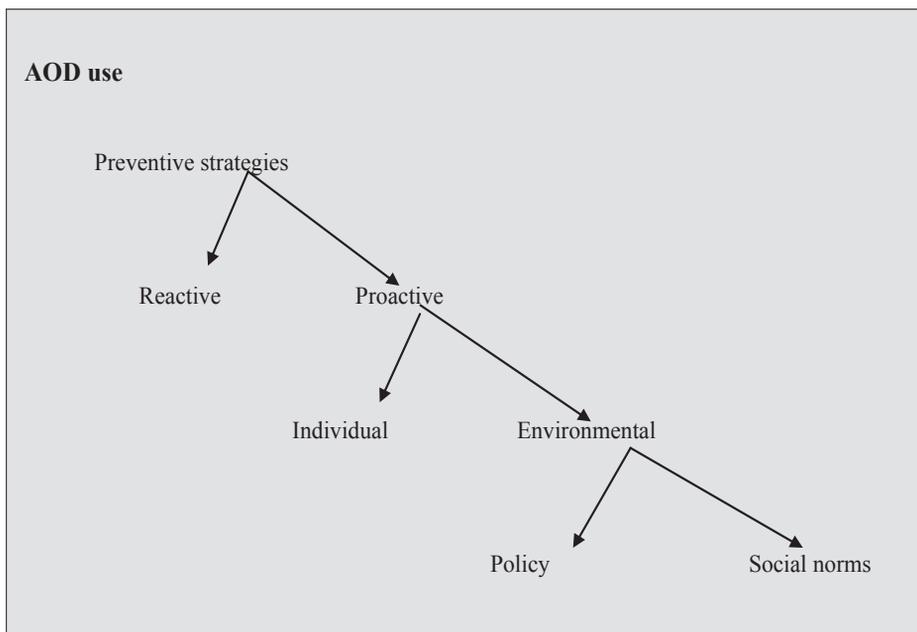
Peer norms that are more permissive in comparison with group norms seem to play more important role in life of young people. Research (Rice, 2006; Schultz a Neighbors, 2007; Scholly et al., 2005; Larimer a Neighbors, 2003; Pollard et al., 2000; Ott a Doyle, 2005 and others) clearly demonstrate the existence of a gap between what is believed to be a group norm and the actual group norm. These findings can be applied to both types of norms: most frequently attitudes related to low – risk behavior and most frequent behaviors related to alcohol consumption.

As it turned out most students are prone to think that their peers are more permissive in their personal attitudes in the area of alcohol consumption and they do believe that their peers drink alcohol more frequently than the actual norm is (Perkins, 2002). This research together with its findings was one of those that focused also on the perception of friends' or peers' behavior not just on the actual norm. These findings motivated also other schools (high schools and universities) that adopted the main idea and carried out similar research. In other study based on national data from several institutions it was revealed that every university had documented discrepancy between the perception of alcohol use and its actual norm. Overestimated perception of the norm related to alcohol consumption is deeply rooted in all schools in the US, private and public, regardless the school size or the region the school is situated in (Perkins, 2002). The aforementioned pattern of actual norm overestimation appears in all types of substance use (Perkins, 1995). Beck and Treiman (in Perkins, 2002) claim that norm misperception is not a unique phenomenon in university students but it can be found among high school students as well. Theoretical explanation of potential misperception causes can be found on psychological, social and cultural levels. On cognitive level psychologists demonstrate that there is a human tendency to make false inferences since people attribute behavior and action of another person to his own disposition rather than to the environmental context (Zanden, 1987; Baron et al., 1987; Sollárová, 2007). From the perspective of social norm approach we can illustrate it by using an example of an intoxicated student perceived by his peers who make inferences about his state. They can attribute his state to his typical life style or they might attribute his state to his personal disposition, in case that his behavior can not be explained or described as an atypical incidence. Without having enough information to make a picture related to occasional drinking, such behavior is gradually perceived as typical and relatively frequent what in fact does not correspond with the actual state or reality. Existence of overestimated/exaggerated perception in minds of many students can have a serious impact on their own AOD use (alcohol and other drug use), since they feel the pressure to be conformed with incorrectly perceived peers' expectations. AOD use increases as the students start to behave in accordance with inaccurate perception of peers' expectations related to substance use. Subsequently also actual norm increases. Misperceptions of actual norm discourage

the group of responsible students from expressing a public disapproval with substance abuse. Research of Prentice and Miller (in Perkins, 2002) revealed that when students with moderate or conservative attitudes to alcohol use incorrectly believe that their position is different than the norm, they feel alienated from their peers. In fact norm misperception exists in different types of schools, among members of various formal and informal groups, among members of various ethnic groups, among students of all religions and it exists between males and females. There are several studies (for instance Rice, 2006) that focused on gender differences in misperception and they found out that the differences between men and women in misperception of AOD use are statistically significant. As Berkowitz (2004) claims this can be caused by the fact that women are more influenced by environmental factors and they are less involved in the culture of alcohol use and thus their misperception is higher. The phenomenon of misperception has become a base for a new approach in the field of AOD use prevention – so called *social norm approach*, but its significant position can be found in prevention of sexual behavior, gambling, risk driving and other pathological forms of behavior. Social norm approach is not limited for a particular age group; it can be used in universities as well as in secondary schools, having the same or similar effects. In the past decade social norm approach has become frequently discussed issue related to health support. Its increased popularity stems from two facts:

1. Many of commonly used strategies aimed at problem behavior in the period of adolescence were not effective. Due to this finding the professionals have tried to develop and find new, more effective methods to prevent AOD use.
2. There is a real requirement in the field of prevention to focus on evidence based evaluation. In social norm approach the data obtained after its application are really promising.

Within the last decade we can observe a shift in the prevention, in the direction from reactive strategies to proactive ones. Reactive strategies using other words mean that first of all we must face a problem or difficult situation and just after that we start resolving it. In the field of prevention most of the work that was done concentrated on evaluation and diagnostic process and developing of rehab programs for AOD users and addicts. This strategy in fact did not reduce the rate of all above mentioned problems. So the attention started to move towards development of such proactive strategies that would address the problem before it really occurs. Much of this work was and still is based on traditional model of health education by means of health communication campaigns. In case of AOD use, communicated message is entirely focused on health risks and danger related to the substance use. This specific type of prevention that is based on „fear and scaring people“ loses its credibility when young people find out that the likelihood of facing depicted negative consequences is quite low.



Picture 2: Shifts in Prevention (Source: Perkins, in Haines et al., 2004)

Contrary to reactive strategies, positive proactive strategies focused on changing individual attitudes, using such techniques as values clarification and increasing self – esteem. Many of them are quite demanding and achieved reduction in AOD use is hardly noticeable (Haines et al., 2004). Most of proactive efforts is oriented on individuals, for instance by providing information or by an effort to change personal attitudes and values. The impact of these efforts is low and thus preventive activities began to shift their attention toward the environment. That means being oriented in those elements that stand beyond personality and values of individuals. Environmental approach may take two directions: one is based on strategies searching for a change in institutional and public policy by creating barriers to AOD access or by increasing punishments in order to reduce risk behavior. The second direction represents social norm approach that uses accurate information about the social context in form of positive group norms that lead to behavior change. Linkenbach et al. (2002) propose these key concepts in social norm approach:

- a) Misperception strengthens negative behaviors,
- b) accurate perception reinforces healthy behavior,
- c) social norm approach uses various intervention strategies,
- d) social norm approach relates to communities,
- e) social norm approach is a scientific method,
- f) social norm approach is an environmental strategy.

Social norm approach presents the idea that most of young people’s problems are partially caused by their desire – or social pressure – to be conformed with not accurately perceived group norm (Perkins, 2003). This type of a preventive strategy

proposes “instrument” that can correct misperception → to shift perceived norm closer to actual norm. The basis is formed by gathering credible or reliable data from the target population, then by using various health communication techniques consistently spread the truth about actual norm. Exposing the target group to repeatedly occurring positive messages (data – based messages), misperception (which sustained problem behavior) reduces. Consequently majority of target population starts to behave in accordance with more accurately perceived norm.

Baseline	identification of actual and misperceived norms.
↓	
Intervention	intensive exposure to actual norm
↓	
Predicted results	→ correction of misperception
	→ reduction of risk behavior
	→ increase of health behavior

Tab. 1: Social Norm Model (Haines et al., 2004)

We consider important to emphasize that social norm approach related to alcohol use proposed for adolescents (whether high schools or universities) communicates and spread just the norm related to non use. Social norm approach relates to correction of actual norm misperception and its task is not to induce the change of problem or not healthy norms (Berkowitz, 2005). The assumptions of social norms theory are these:

1.	Our actions are usually based on misperception of attitudes and behaviors of others.
2.	If misperception is defined and perceived as real, it has got real consequences.
3.	People passively accept misperceptions rather than being actively involved in their change, they hide their own feelings and beliefs.
4.	Misperceptions discourage people from expressing their attitudes and ideas that are falsely perceived as nonconformed but on the other hand they encourage problem behavior that is falsely perceived as normative.
5.	Appropriate information about actual norm encourages people to express beliefs that are consistent with true, healthier norm and they suppress such behaviors that are inconsistent with them.
6.	Individual whose behavior is not problematic or risk also contribute to this issue simply by the way he/she talks about it.

Tab. 2: Assumptions of social norm theory (Berkowitz, 2005)

Since we have no evidence that the above mentioned approach is utilized in our culture and environment and we suppose that people do not have enough information

about its positives and strengths we decided to introduce not only to professionals in the field of prevention, but also to teachers and school psychologists the preventive strategy which focuses on providing evidence about the gap between how the risk behavior (its different forms) is perceived by people and what the actual state (actual norm) is.

The method that is frequently used in the process of misperception correction, especially on the level of universal prevention, is *social norm campaign*. It uses all available media that can provide students with accurate information about actual norm of AOD use (DeJong, Langford, 2002). Well designed and prepared campaign is usually implemented in four basic steps:

1. Gathering data – all information related to the pattern of AOD use (smoking cigarettes, alcohol and other substances consumption) from the target population – identification of frequency and persisting perception.
2. Development of intervention strategy – identify what media are most frequently used by the target group, what is considered as credible and worth to remember. Choosing the best way to spread the positive message that was selected out of collected data. Developing a prototype of message that is simple, clear, positive and true.
3. Implementation – carry out the campaign that spreads the message as often and as consistently as possible.
4. Evaluation – find out whether the message really reached the target group, whether the students remember this message, what their reaction was, to gather and analyze obtained findings in order to assess effectiveness and impact of the campaign on problem behavior.

Handbook that resulted from collecting professional experience provides detailed depiction of the third and fourth abovementioned steps (Social marketing handbook, 2008)

- Very important step in the initial phase is to recruit a group of students - volunteers, and teachers for your team – interest and input of students is a crucial moment of a social marketing campaign.
- In the next step the whole team is actively involved in brainstorming – preparing creative, provoking ideas, themes for posters. The aim of this phase is to produce the most creative ideas – take advantage of everything what can be offered by PC. Over many years of working on campaigns it was revealed that especially students know exactly what is „cool“. It is useful to ask your students what are the trends on TV, movies, books, fashion – it means everything that would attract attention of other students. Language used on posters should be in accordance with the language of target population.
- Finding out how to use the best data is involved in the next step – look critically on the questionnaire or survey and find positive (good) data. For instance: Though 30% of students have a problem with alcohol, the majority (70%) does not have this problem. Facts like this one are the best and should be used on posters. It is good to choose a couple of key messages and constantly expose the target population to them. While the design of posters can change, it is necessary to keep the message consistent, if we really want our students to internalize it.

- The next step is preparing the posters' designs. If we already have an idea regarding the theme or slogan and we have already decided what data are going to be used, it is time to start working on posters' design – what kind of photos, pictures and graphics will be used, the size of posters, their colors. In the beginning quite a lot of projects aimed at social norm marketing use simple graphics, often they try to incorporate pictures of their students into posters. If there is enough money, it is possible to hire a professional photographer who can make the photos. It is highly important to cite on your posters where the data come from (their source) and what organization sponsors the campaign. Placing this important information on your posters helps increase credibility of the project in general.
- Feedback from students is an important element when preparing the posters' design and this process is crucial so that the staff or team can learn whether your slogan, design and message about the health norm is in the process of internalization or whether the students accept the message on the posters or not. When the message does not relate to students they will hardly internalize it that naturally leads to lower (if any) impact of the whole campaign
- Assessing the budget and planning steps connected with printing of prepared posters.
- Financial means are not necessarily important to start social norm campaign. In the beginning you can use posters from web since many students are not only PC users; moreover they can do „miracles“ on computers. As for the campaign material copies – it is necessary to determine the size of posters. It is useful to prepare a few large posters and many small ones.
- Assessing other marketing ideas that might be effective in target population. It is good to offer to schools and dormitories as many posters as it is possible. If the school principal agrees it would be efficient to create a commercial in the school magazine or local TV. Web site is a good idea to place the marketing message.

The fact that aforementioned way of managing social norm campaign was adopted from a different country (the US) does not decrease its applicability in our culture and settings. It is important to keep in mind possible differences – that can be hardly identified and predicted at the beginning of the project. Belief in the core idea of this specific approach is highly needed.

At the end of this paper let us introduce a couple of practical examples – research and studies aimed at misperception identification and subsequently social norm campaign application that were carried out in universities and high schools all over the US, together with their basic findings.

SOURCE	SAMPLE	METHOD	FINDINGS
„The Report on Social Norms“ – December 2003	11 800 high school students	Social norm campaign –three years implementation	a) decrease in perceived norm (closer to actual norm) related to cig. smoking in all grades b) decrease in cigarette smoking in all grades
Source: http://www.socialnorms.org/Resources/NC2003.php			
Ott, Doyle The High School Journal – Feb/March 2005	414 high school students	Interactive model based on social norm approach, called „Small Groups Social Norms“ – one session lasting for 2 hours	despite short intervention duration – misperception significantly decreased
Agostinelli (in Perkins, 2002)	Not specified number → experimental vs. control group	Social norm campaign using a feedback about actual norm related to alcohol consumption	Significant decrease in alcohol consumption in the group with a normative feedback and no change in a control group after 6 weeks
Scholly et al. Journal of American College Health, vol. 53, 2005	University students	Social norm marketing	Students consistently overestimated the prevalence of sexually transmitted diseases among their peers
Pollard et al. Journal of College Student, vol. 14, 2000	2642 Art college students	Survey aimed at identification of alcohol and other drug use within 3 years	Significantly higher level of predicted AOD comparing to actual state
Perkins, Craig (in Berkowitz, 2004)	University students – number not specified	Intervention that combined campaign by means of standard posters, electronic media, interactive web site, class projects and teachers trainings	a) 21% reduction in alcohol use b) decrease of risk alcohol consumption from 56% to 46% (two weeks difference) c) successful decrease in crime rate related to alcohol consumption within 4 year period d) reduction in misperception (reducing gap between actual and perceived norm)
DeJong et al. Journal of Studies on Alcohol, vol. 67, 2006	2939 university students	Social norm marketing	Students involved in social norm marketing exhibit less risk behavior related to alcohol use comparing to control group
Stephenson, K. R., Sullivan, K. T. The Canadian Journal of Human Sexuality, 18 (3), 2009	152 university students, specialization: psychology	Intervention based on social norm approach	Students exposed to intervention showed lower level of discrepancy between perceiving themselves and perceiving others in the context of sexual activity and tolerance

Tab. 3: Research in the field of substance use prevention using social norm approach

Aforementioned research studies document that social norm approach application is really an efficient preventive strategy that can operate in two key areas:

Correction of misperception – shift in the perceived norm towards the actual norm, it was revealed that also short-time interventions have a potential to correct misperception, which does not last long. There is evidence that correction of misperception is connected with the duration of intervention: longer period the intervention last, more serious impact it has on perception of risk behavior → students to a lesser extent overestimate the prevalence of AOD use.

Reduction of problem or risk behavior – which is a part of misperception correction, but as it was already mentioned this is possible only if we can guarantee its longer duration.

As a conclusion we would like to express the hope and belief that presented preventive approach will find its supporters who became inspired by its core idea and who in the process of health promotion are not afraid to use innovative and challenging method that does not scare young people and does not teach what is right. We propose and promote the method that points at and supports all those who make healthy decisions and who take responsibility for their lives.

NOVŠIE PRÍSTUPY V OBLASTI PREVENČIE RÔZNYCH FORIEM RIZIKOVÉHO SPRÁVANIA V OBDOBÍ ADOLESCENCIE – PREDSTAVENIE PRÍSTUPU SOCIÁLNYCH NORIEM

Abstrakt: Už niekoľko desaťročí je užívanie alkoholu a iných návykových látok u študentov považované za jeden z najzávažnejších sociálnych problémov v celonárodnom meradle. Na takmer všetkých základných aj stredných školách býva realizovaná prevencia a vzdelávanie zacielené na redukciiu tohto fenoménu. Medzi najčastejšie metódy ktoré sa využívajú patria poskytovanie informácií, rovesnícke skupiny, zdravotná osveta. Efekt týchto metód je však len minimálny. V príspevku predstavujeme preventívny prístup nazvaný Prístup sociálnych noriem, ktorý sa od tých bežne používaných významne odlišuje. Jeho autori zistili, že študenti typicky chybné vnímajú to, či a koľko ostatní študenti návykové látky užívajú. Tento fenomén bol autormi nazvaný mispercepcia. Ako vyplýva zo zahraničných výskumov, jej korekciu a šírením správy o skutočnej norme vzťahujúcej sa k samotnému užívaniu významne redukuje počet študentov, ktorí návykové látky konzumujú.

Kľúčové slová: prístup sociálnych noriem, užívanie, mispercepcia, korekcia mispercepcie