The Social Norms Approach to Student Substance Abuse Prevention

Healthy Truths Reduce Use
The evidence-based social norms approach to substance abuse prevention is a simple concept with a profound implication: sharing healthy truths can reduce student use of alcohol and other drugs. The reality is that many students around the world do not regularly use alcohol or other substances. By sharing this information with students, their parents, schools, communities, and especially peers, young people are taught to hold healthier, more realistic beliefs and to feel less pressure to “fit in” by using substances. Communitites that employ the social norms approach to prevention see decreased student use of alcohol and other drugs, no matter what initial levels of use look like. How exactly does the social norms approach to substance abuse prevention work? What is the evidence behind it? How can it be used to keep healthy kids healthy?

What Social Norms Look Like in Healthy Communities
The social norms approach is an evidence-based, outcomes-driven way to prevent unhealthy behavior. The approach finds that while many students of all ages, and most middle and high schoolers, do not use alcohol or other drugs, they perceive that the majority of their peers do use alcohol, marijuana, and other drugs and often in heavy doses. Therefore, the social norms approach to prevention rests on two primary components: (1) gathering information about real social norms—always healthier than students anticipate, and (2) correcting false normative beliefs. Once the whole community is committed and the data is collected, application of the social norms approach at a community level can be a rich and rewarding experience, one where student and adult false perceptions are replaced with healthy, accurate information, and any risky student behavior is replaced with a healthier counterpart rooted in true community norms.

Common terms used in the social norms approach:
A “social norm” is a real behavior or attitude of a group. Students often think that the social norms of their peers are less healthy than they really are.
A “normative belief” is a belief about what a social norm really is. Students tend to hold normative beliefs that exaggerate the amount of substance use really going on among their peers.
“Anticipatory socialization” is the way students think about their future social life. Students are more likely to drink alcohol or use other drugs when they imagine the need to do so in order to fit in later.
“False consensus” is the incorrect belief that others are like us when it comes to unhealthy behavior. For instance, very few students drink at higher risk, but those who do tend to think that “everybody does it.”
“Pluralist ignorance” is the incorrect belief that others behave differently than us when it comes to healthy behavior. For instance, many students choose not to drink alcohol but feel alone in this choice.

The Risk of Unhealthy Student Attitudes and Beliefs
FCD has surveyed over 65,000 students, across 25 countries and 120 schools, from 2009 to 2015, using its externally validated FCD Student Attitudes and Behavior Survey. From this data we can see that when a student perceives an environment to encourage alcohol use, a student is more likely to engage in that behavior. For example:
- Students in grades six through twelve who agree with the statement “it is cool to get drunk” are 5 times more likely to report binge drinking in the last month.
- About 82% of all FCD students either do not drink or drink once a month or less. Yet 45% disagree that most students at their school don’t drink or are light drinkers.
- Students who binge drink are 76% less likely to see a risk in binge drinking, whereas students who don’t drink are 13% more likely to see a risk in binge drinking.
Attitudes and behavior are linked together, and changing unhealthy attitudes can change unhealthy behaviors.

**The Influence of Younger Students’ Perceptions of Older Students’ Behavior**

Older students serve as role models, whether they choose to be or not. Younger students will observe their behavior and make choices based on what they perceive to be “normal behavior.” While we expect to see increases in alcohol use as students get older, larger increases can occur when the environment is perceived to encourage alcohol use. For example, 86% of FCD 8th graders do not drink, yet only 41% believe their classmates don’t drink. This gap widens as students get older: 70% of FCD 9th graders do not drink, yet only 15% believe their classmates don’t drink. As the attitudes shift, so does the behavior: 51% of FCD 10th graders do not drink, yet only 5% believe their classmates don’t drink.

Younger students not only hold false perceptions of their peers, but they also misperceive the grades above them. Only 2% of 6th-12th graders think that seniors don’t drink. In reality, 25% of 12th graders report not drinking alcohol, a healthier proportion than their younger classmates perceive.

**Next Steps in Prevention Using the Social Norms Approach**

We know from our data that schools that routinely use our services see improvements in their students’ attitudes and behaviors. Schools that have employed FCD’s Early Intervention Health Systems training see fewer students choosing to binge drink, up to 4% less. Focusing on prevention by tackling the misperceptions surrounding alcohol and other drugs use can make the difference in keeping healthy kids healthy.

**References**

17. FCD Student Attitudes and Behavior Database, 2015 edition.