Feature Article: An Interview with Jeanne Far about the Small Group Norms-Challenging Model

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Jeanne Far has been involved with the social norms approach since 1988, participating in one of the first empirical studies of its effectiveness. Along with John Miller at Washington State University she developed the Small Group Norms-Challenging Model as a secondary prevention strategy for implementing social norms in small groups.

Alan Berkowitz (AB): What's been happening with the small group norms approach since you and John Miller first developed it at Washington State University (WSU)?

Jeanne Far (JF): When John and I first began working on the Small Group Norms-Challenging Model (SGNM) in 1988, the social norms approach wasn't that well developed. There were the original presentations and articles by you and Wes Perkins, and Michael Haines was using your research findings to develop social norms marketing at Northern Illinois University. Around the same time at WSU we were trying to develop a focused small group intervention aimed at the highest risk users.

A lot has happened in those fifteen years. One of the most exciting things is that social norms theory has become something accessible and useful, and interventions have been successfully implemented. People are thinking in a social norms framework, something that wasn't happening 15 years ago.

The SGNM has also changed a lot. When we first started developing this discussion-based approach, we were still "in the misperception." We collected and reported on negative behaviors and consequences of alcohol use, even though those behaviors and consequences represented a minority of students. Slowly we realized that we needed to be purists and trust the theory and data, so we stopped reporting the misperception

and expanded reporting of positive behaviors and events, like altruistic behaviors.

Because we would report the misperception and then the actual data our slides used to be a lot busier. Eventually we realized there was just too much information and that we needed to concentrate and focus on the accurate information. We learned that it is better to keep things a lot more simple, and let the powerful information work for itself. This has also been the experience of others — to keep our messages simple and to not report the misperception in media campaigns or small group discussions unless it is part of a longer, more intensive discussion.

AB: What happened at WSU as a result of using the SGNM?

JF: The model has worked well at WSU and we've seen campus-wide drinking decline here after it had been the same as a national average. We have also expanded use of the model to different groups of people. We've had success with Greeks and athletes, producing reductions in quantity and frequency of drinking that are correlated with changes in perceptions. We have even been successful in decreasing drinking in teams that were already drinking less than the campus norm. Finally, the public conversation about drinking at WSU has changed dramatically in recent years – both on and off campus. While we were widely seen as a "party school" for many years this perception is no longer popular.

We now know more now about what groups benefit from SGNM. Our findings indicate that SGNM is effective among people who have a strong group identity. As noted, the model has worked well with Greek students and student athletes. On the other hand, it has been less effective in groups of students who live together in residence halls or attend classes together. In these cases the groups are more ad-hoc and arti-

Editor's *notes*

The majority of this issue is devoted to the "Small Group Norms-Challenging Model" (SGNM) developed by Jeanne Far and John Miller at Washington State University. In recent years there has been considerable interest in this application of social norms, which can be used as a secondary prevention strategy with small groups alone or in combination with social norms marketing campaigns. In these pages are an interview with Jeanne, a report from the University of Virginia on the use of SGNM with Greeks, and brief reports on the use of SGNM with first year students (University of South Carolina and University of Rhode Island) and with men -- both to examine male gender roles (St. John's University) and as a sexual assault prevention strategy (Duke University).

In many ways these case examples reflect the state of the field as a whole. As Jeanne notes, one of the most important considerations for an effective small group norms intervention is to identify which norms are salient for the group receiving the intervention. This is complicated because saliency can differ from campus to campus. For example, at UVa it was determined that the most salient norm for Greeks was the campus norm and not the house norm. When the misperception that is corrected is for a norm that is not salient, the corrected norm may not produce behavior change (because the norm corrected was not a powerful influence on behavior to begin with.) Thus, issues of salience can explain the fact that correcting misperceptions may not always result in behavior change.

Another extremely important consideration noted by Jeanne is to use SGNM with groups that have some amount of cohesiveness and group identity. Differences in salience and identity may explain divergent findings among the four schools that evaluated their interventions. Thus, at both WSU and UVa successful interventions were provided to groups with strong identities using salient norms. Where the intervention was provided to groups with a less strong identity (at WSU and also at USC) the interventions were not effective. The greater success of the URI's intervention with first year students compared with an almost identical intervention at USC may be due to the fact that many first year students at URI participate in "learning communities" in which they attend a number of classes together. These URI students may experience more group identity and therefore classroom norms may be more salient. I am personally familiar with the SGNM at all of these schools and know that they are conscientious, well done and carefully evaluated. Thus, differences in findings appear to be due to issues of salience and group identity rather than differences in the quality or design of the intervention. This remains an important topic for future research.

This issue also contains information on resources for using SGNM, continuing coverage of publicity generated by Henry Wechsler's work, and new research—including an important study by Patricia Fabiano and colleagues that validates the use of the social norms approach with men to prevent sexual assault.

I hope that all of the above will be of interest to you, the reader.

Sincerely,
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the Gathering Place

The Gathering Place" brings together news, announcements, and important developments in the field of social norms.

IHEC Website Features Modules on SGNM. The Illinois Higher Education Center has posted on its website materials "that will facilitate campuses being able to implement the small group norm challenging model." This includes a comprehensive manual, sample consent forms and surveys, and a facilitation guide with overheads. Go to: www.illinoishec.org.

Wechsler Contacts College Presidents. At the beginning of this academic year a letter was sent by Henry Wechsler to all college and university presidents along with a copy of his recent study published in the *Journal of Studies on Alcohol* calling into question the effectiveness of social norms. The letter states that "we looked at social norms programs in every conceivable way to see if they had any effect in reducing student alcohol consumption" and reports that they did not. Critiques of Wechsler's study can be found on the website of the National Resource Center for Social Norms (www.socialnorm.org).

CDC's School Health Index Recommends Normative Correction. In the Center's for Disease Control's (2002) *SHI: School Health Index for Physical Activity, Healthy Eating, and a Tobacco-Free Lifestyle* one of the "Essential tobacco-use prevention topics" listed is "student overestimates of how many of their peers use tobacco" (Module 2-p.7). The SHI can be downloaded from CDC's web site: www.cdc.gov/healthyyouth/SHI/index.htm.

Associated Press Retracts Incorrect Statements about Social Norms in Montana. Newspapers in Montana printed an incorrect Associated Press story stating that "Montana's Most of Us"

Small Group Norms Efforts at Other Schools

Social Norms and Masculinity -- St. John's University. St John's University (SJU) in Collegeville, Minnesota is involved in a unique effort that uses social norms theory to devise ways of increasing men's understanding of themselves and their roles in society. The intervention uses discussion groups to examine students' perceptions and misperceptions of masculinity and the effects that contemporary understandings of masculinity can have on themselves and others. St. John's offers a unique environment for this research, being one of only four all-male colleges in the country. Research gathered over the past four years has shown that SJU students misperceive social norms related to self-sufficiency, physical strength/toughness, controlling emotions, and engaging in activities others would term feminine. Agreement with these traditional masculine norms has been correlated with unhealthy behaviors. The project currently under development will use small group social norms interventions to see if correcting these misperceptions of masculinity can in turn alter men's behavior. Our ultimate goal is to offer the workshop to all first and second year students if our pilot project with a dozen groups is successful.

Gathering Place

campaign was ineffective. This erroneous conclusion was drawn after the release of Henry Wechsler's study purporting to disprove the effectiveness of social norms, with the AP concluding that this meant that "Most of Us" was not effective. In fact, "Most of Us" was not included in the Wechsler study and extensive research has documented that "Most of Us" has been effective in reducing teen smoking, increasing seatbelt use, and lowering DWI. Along with their retraction the AP published an Op-Ed by "Most of Us" Director Jeffrey Linkenbach to provide an accurate portrayal. For information on the "Most of Us" project go to www.mostofus.org.

Through this project we hope to motivate men at St. John's to not only lead a healthier lifestyle but to alter their conceptions of their gender roles as men. *For more information contact Gar Kellom at gkellom@csbsju.edu.*

SGNM In a First-Year Student Seminar -- University of South Carolina.

USC has developed a small-group norms challenging intervention that is offered as part of a first-year student course. Students were randomly assigned to receive either standard alcohol programming (SAP, n=390) or a SGNM intervention about perceptions of alcohol norms (PAN, n=384). Both interventions were delivered in small classes by peer leaders in which students graphed and discussed their typical quantity and frequency of drinking, their perceptions of typical quantity/frequency for other students, and the norms for their class. Post-intervention results were assessed using the CORE survey. There was a small but statistically significant difference in perceived frequency of drinking by peers for PAN versus SAP (Cohen's d=0.23). However, there were no significant differences in the self-reported frequency of drinking, quantity of drinking, or frequency of high-risk drinking. In a second study those receiving the PAN intervention (N=402) reported significant reductions in perceived peer drinking in comparison with the SAP (N=472) group but minimal differences in self-reported drinking. *For more information contact Brad Smith at smithb@gwm.sc.edu.*

SGNM In a First-Year Student Seminar -- University of Rhode Island.

The University of Rhode Island offers URI 101, a required course for all first-year students. As part of this course a SGNM intervention was developed and tested. In the randomly assigned experimental group interactive feedback was provided by a team of graduate assistants or peer educators that highlighted discrepancies between perceptions and the actual behavior reported by the class. Misperceptions of alcohol and marijuana use were found in every section of URI

101. In addition to the normative feedback provided to the class about itself, data about misperceptions of the entire first year class (collected at summer orientation) were presented. At follow-up, the experimental group reported more correct perceptions of both alcohol and marijuana use while the control groups' perceptions remained unchanged. The experimental group also reported a smaller increase in negative consequences resulting from alcohol use than did the control group, although this difference was not statistically significant. In addition there was a statistically significant difference in marijuana use between the experimental and control groups -- while marijuana use in the experimental group was unchanged it increased in the control group. (From a Masters Thesis by Keith Labelle, Assistant Coordinator, Violence Against Women Project, URI, klabelle@uri.edu) *For more information contact Dan Reilly at dreilly@uri.edu.*

A SGNM Intervention for Men to Prevent Sexual Assault -- Duke University.

Data from the "What Are Duke Men Thinking" survey was incorporated into an interactive small group workshop for men. The data was collected during the workshop and then reported to the group. Men reported that they saw themselves as more willing to engage in consensual behavior than other men, and also as more willing to intervene to prevent sexual assault than other men, replicating research conducted on other campuses. *(See "Research Notes" this issue for one of these studies – Ed.)* As a result of the workshops, the number of men participating in Sexual Assault Prevention week increased from 22 to 110 and anecdotal information suggests that men are more willing to confront male peers and voice their displeasure with institutionalized sexist attitudes within their groups. (Presented at the 2003 American College Health Association Annual Meeting by Ray Rodriguez, Jeff Kulley & John Barrow). *For more information contact Ray Rodriguez at ray.rodriguez@mc.duke.edu.*

from *the* field

Small Group Norms
Interventions with Greeks at the University of Virginia

The Greek Environment Management project is a U.S. Department of Education grant-funded project at the University of Virginia (UVa) that seeks to improve the health and safety of UVa students by developing, enhancing, implementing, and evaluating campus-based strategies to prevent known high-risk drinking among fraternity and sorority members. A central strategy is the use of the small group norms challenging model (SGNM) in fraternities and sororities to correct misperceptions and reduce high-risk drinking among Greeks.

We used an experimental design, with a control and an intervention group, to test the efficacy of the SGNM with our fraternities and sororities. Early in the fall semester, staff in the Center for Alcohol and Substance Education and the Office of Fraternity & Sorority Life held informational meetings with the presidents of each of the four Greek Councils that represent our fifty-eight fraternities and sororities. Following those presentations, chapters assigned to either the intervention or control group were invited to participate in the grant activities. Additional meetings were held with the presidents of the selected chapters to discuss the project in more detail.

Although Greek Council leaders were involved in developing the programs for the grant, chapter presidents began to express significant concerns about confidentiality issues. The central concern was that the data collected would generate negative publicity about their chapter and/or fraternity and sorority life as a whole. In general, the chapter presidents, as well as representatives

from their national organizations, were extremely uncomfortable with the researchers collecting any chapter-specific data on alcohol related behaviors. Based on these concerns, and incorporating suggestions made by the students, we modified the data collection procedures so that individual and chapter data was anonymous. However, some groups still refused to participate, forcing us to randomly select additional groups.

Baseline Data Collection

A staff member or graduate assistant collected data from each chapter during a weekly chapter meeting. Pizza was provided as an incentive. The data collection process included consent forms, a twenty-item survey, and an alcohol and other drug resource sheet. Each student was instructed to create a unique code that they could remember at the posttest and use this as a survey ID. Similarly, presidents created a chapter code on an index card that was placed in the envelope with all surveys from that chapter along with a code to indicate Greek council membership and intervention or control condition. A total of 992 pre-test surveys were collected from forty chapters.

In February 2002, Jeanne Far and John Miller of Washington State University conducted a SGNM train-the-trainer workshop to help us gain a better understanding of the theories supporting the SGNM model as we adapted it to suit our institutional culture. They also trained 14 students to facilitate the model for their chapters. UVa staff held a training session for seven additional students resulting in fifteen chapters with trained representatives. Students received a facilitator manual with a presentation script and they used their chapter code to select the set of presentation overheads with their chapter-specific data. Students indicated they liked the training format and felt the training ade-

quately prepared them to present the program.

Discussion with students suggests that membership in one of the four Greek councils is not a salient affiliation for UVa fraternity and sorority members because they do not perceive their status as a Greek student or their chapter's membership in a specific Greek council to be the most important of their college identities. Rather, students identify themselves first as students at UVa, and second as members of their chapter. As a result, data comparing individual chapters to overall fraternity or sorority norms was not used in the SGNM presentations.

Of the fifteen chapters with members trained to host the program, thirteen completed presentations in the spring of 2002. Informal conversations with the student trainers seem to confirm that although students hold fairly accurate perceptions of their chapter's drinking norms, they are extremely surprised by the degree to which they overestimate the campus-wide drinking norms (i.e., "we knew we drank more than everyone else, but we didn't know we drank THAT much more"). Based on conversations with the small group facilitators, it also appears the program is having the intended effect of creating discussion among chapter members.

Post-Test Data Collection

In late spring 2002, post-test data was collected from members during weekly chapter meetings following the same procedures used for pre-test data collection. We brought lists of individual codes sorted by chapter code so that each president could select the correct set of individual codes based on the chapter code. Individuals who did not remember their code from the fall could review the chapter list in an attempt to

From the Field

recognize their code. This greatly increased the number of matched pre and post-test surveys.

Presidents wrote the same chapter code used on the pre-test on an index card and completed a brief questionnaire on their chapter's participation in each grant component, participation in non-grant related alcohol education activities, and any significant events or changes related to alcohol that occurred during the academic year. A total of 330 surveys with matching pre and post-test codes were collected from 21 chapters for a response rate of 33%.

Results

Since only thirteen of the twenty intervention chapters conducted the small group social norm presentations, the data were analyzed in three groups: by control group; intervention chapters that did not conduct the SGNM presentations; and intervention chapters that did conduct the SGNM presentations. The SGNM intervention appears to have had a favorable impact on the accuracy of perception of the actual drinking behaviors of the general UVa student population. Although the intervention did not appear to affect the amount of reported drinking, the intervention appeared to have a very positive influence on reported negative consequences due to drinking. Data obtained from our comparison of pre- and post-tests include the following:

Perceptions of Drinking Behaviors.
All three groups were equivalent on pre-test perceptions of drinking behavior among UVa students. On post-test, the group that received the SGNM intervention moved to significantly greater accuracy on perception of weekend drinking and number of drinking times per month compared to the groups that did not receive the SGNM intervention. Post-intervention group differences on number of drinks on a weekend night showed a significant decrease in the estimated number $[F(1,326)=61.5, p<.001]$, and a significantly greater

decrease for the group that received the intervention $[F(2, 226)=8.16, p<.001]$. Post-intervention group differences on number of drinking times per month showed a significant decrease in the estimated number $[F(1,317)=77.47, p<.001]$, and a significantly greater decrease for the group that received the intervention $[F(2, 317)=4.63, p=.01]$.

Drinking Behaviors. The three groups differed significantly on pre-test in reported levels of personal drinking, with the intervention group reporting less drinking. Controlling for pre-intervention level, post-intervention group differences on number of drinks on a week night and drinking frequency showed significant increases for all groups, but no significant effect by group. Number of drinks on a weekend night showed significant increase for all groups $[F(1,327)=308.73, p<.001]$, with the intervention group that did not actually receive the SGNM program having the greatest increase $[F(2, 327)=5.54, p=.004]$. Interestingly, the mean Blood Alcohol Concentrations for all three groups at both times remained unchanged.

Reported Negative Consequences.
Pre-test means on negative consequences from own drinking and others' drinking were significantly higher for the intervention group that did not receive the SGNM intervention than for the other two groups. On post-test the group that received the SGNM intervention reported significantly fewer negative consequences from own drinking (an average of 5.82 negative consequences) and from others' drinking (an average of 2.52 negative consequences) than the control group (6.9 for self, 3.3 for others) or the intervention group that did not see the SGNM program (9.16 for self, 4.63 for others). In addition, the intervention group that did not have the SGNM presentations had a significant increase in negative consequences from others.

Discussion

Our results suggest that the SGNM

intervention resulted in much safer drinking behaviors (i.e., less negative consequences) even though drinking rates went up for all three groups during the course of the study. Thus, while drinking rates went up in all three groups, only the group that received the intervention reported a decrease in negative consequences.

Several factors may have played a role in the decrease in reported negative consequences with a simultaneous increase in frequency and quantity of drinking among members of the SGNM intervention group. Some of these factors are related to the timing of the intervention and the composition of the groups. For example, the implementation timeline was significantly delayed due to the confidentiality concerns cited above. Baseline data collection was not completed until December of 2001 and the SGNM presentations did not begin until mid-February. The post-test was administered in mid to late April and as a result, some chapters saw the SGNM presentation less than 30 days before they completed the post-test. The survey asked students about specific time periods, but also "typical" behaviors. As a result, the time frames that students were asked to reflect upon were inconsistent. When students were asked about their negative consequences over the past year, they may have thought about the previous academic year on the pre-test, while considering the intervention year on the post-test. Students were asked about their frequency of drinking in a typical month and the quantity they consume on a typical weekend night and week-night. In particular, it is possible that the SGNM intervention suppressed an even greater increase in drinking behaviors that was seen in the other groups.

There may have been differences among the groups that affected our results. The post-test included the new members who joined the organizations

From the Field

in the early spring, who may have had different drinking behaviors from the pre-test group. The new members had been exposed to a social norms marketing campaign in their first year residence hall bathrooms, and the increase in accurate perceptions and decrease in negative consequences at post-test may be due to the synergy between the two campaigns. The media campaign began in the fall of 1999, so at pre-test, only two-thirds of members had been exposed to the campaign, but none were living in areas where the campaign was displayed. It is also possible that other protective factors were at work since the SGNM intervention group had significantly healthier behaviors at baseline compared to the other groups.

Limitations and Considerations

Only 65% of the intervention chapters completed the SGNM presentations. UVa has a strong culture of student-self governance, and there is no mechanism to mandate chapters to participate in activities. Each group selected for the intervention condition agreed to take part in all activities; however, if they did not, we had little leverage to encourage them to participate. As a result, self-selection did seem to play a role. The chapters that held the SGNM presentations tended at baseline to drink much less than the intervention groups that chose not to conduct the presentations.

Another limitation is the absence of significant quality control for the SGNM presentations. Due to confidentiality issues and a desire not to inhibit discussion during the presentations, outside observers did not attend any of the sessions. Although we believe the presenters all followed the script provided for them, we do not know how their delivery, body language, and facilitation skills may have affected the outcome for each chapter.

Future Plans and Lessons Learned

Despite the fact that actual drinking did not seem to be affected by this intervention, we are encouraged by increases in accurate perceptions and decreases in negative consequences. Based on this success, the SGNM program was offered to all fraternities and sororities at UVa beginning in the fall of 2002. As an incentive to conduct the presentation, chapters that complete the program are eligible to apply for mini-grant funds to hold alcohol free events. In order to better assess the quality and effectiveness of the presentations, student facilitators respond to a brief questionnaire after they complete their chapter presentation. Post-test data will be collected from all chapters in the spring of 2004.

Finally, schools interested in using the SGNM approach with their fraternity and sorority chapters should work closely with their Greek governing councils, chapter advising groups and alumni boards to address issues of confidentiality from the very beginning. Early and ongoing conversations can also gain real support for the program from chapter presidents. In some cases, chapters knew they had to participate in the program, but sent a newly selected member to a presenter training class instead of a member in a risk management or educational role. The new members often had no idea why they were attending the training session and were probably not as effective in the actual chapter presentation as an older member might have been.

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For information on social norms marketing at UVa go to: www.virginia.edu/studenthealth/hp/norms/index.html and for information on the Center for Alcohol and Substance Education at UVa go to: www.virginia.edu/case

Recent Research

Engaging Men as Social Justice Allies in Ending Violence Against Women: Evidence for a Social Norms Approach. (Forthcoming). Patricia Fabiano, H Wesley Perkins, Alan Berkowitz, Jeffrey Linkenbach and Christopher Stark. *Journal of American College Health.* This study presents data that "men underestimate the importance that most men and women place on consent in sexual activity and the willingness of most men to intervene against sexual violence." The authors found that men's personal adherence to consensual activity was affected by their perceptions of both men and women's norms for consent, while men's willingness to intervene to prevent sexual assault was predicted by men's perceptions of other men's willingness to intervene.

How Should We Talk About Student Drinking: And What Should We Do About It? (2003). Alan D. Berkowitz. *About Campus,* May-June p. 16-22. Problems with the "binge-drinking" label are reviewed and an overview of the social norms approach is provided. Recommendations are made for effective drug prevention programs in higher education.

An Interview with Jeanne Far

ficial than intentional groups that have ongoing interaction. Thus, in some cases we have been successful in correcting the misperceptions in less cohesive groups but their behavior remained unchanged.

We have also learned the importance of building safeguards into our handling of data for groups like fraternities and athletes, who are very concerned about potential misuse of the data. *(See Table 1 for a list of steps taken to create adequate assurances of confidentiality in these cases- Ed.)*

AB: What do you see as the next steps for SGNM?

JF: I'm particularly interested in expanding the model from the prevention of unwanted behaviors to the enhancement of desirable behaviors like social justice and diversity issues. We're also examining how to intervene in difficult areas such as sexual assault and partner violence prevention. I think those areas, which involve much more than just a personal choice about one's own behavior, will be best addressed indirectly. Perhaps we might assist men and women to examine their misperceptions about each other in relation to sexual matters and then talk together, or we might assist men in examining their own misperceptions about masculinity. This is all new ground and is very exciting as the possible future of the model.

AB: This does seems like an exciting area for future social norms efforts. What do you feel are some of the pitfalls and challenges of using the SGNM approach?

JF: I've become convinced that the most important thing about SGNM is the non-confrontational, accepting discussion of accurate data in a comfortable and respectful atmosphere. Therefore one of the biggest challenges is to be sure presenters understand and are agreeable with the role of facilitator. By "facilitator" I mean someone who brings information and helps create and maintain a discussion about the information, and who invites people's opinions about it rather than someone who tells others what to do or who imparts information in the role of "expert."

> "We have been able to expand use of the model to different groups of people. In recent years we have had success with Greeks and athletes, producing reductions in quantity and frequency of drinking that are correlated with changes in perceptions. We have even been successful in decreasing drinking in teams that were already drinking less than the campus norm."

With social norms we're always giving people information that they think is wrong. Many have made decisions and taken action on their misperceptions, and they may not always feel good about what they've done as a result, particularly if someone is telling them their justifications are inaccurate. So we have to be gentle, respectful, and not require that people think we know the answers. Whether the participants are willing or not to speak up in public and say our information is accurate, they can take these ideas away and think about them, and they can decide if they want to

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Table 1

Guidelines for Ensuring Confidentiality of SGNM Data

Note: These steps may only be necessary when there is an unusual amount of concern regarding how the data will be used.

1. Inform participants of confidentiality requirements for professional staff, of grant requirements of confidentiality, and that research information is exempted from Freedom of Information requests.

2. Handle data so that coaches and or administrators will not see data, and make sure that these individuals are not present during survey administration.

3. In fraternities, collect data at house meetings when there are no outsiders present, and have house members give the presentations.

4. Assign a unique code to each house or team that is known only to a few individuals.

5. Code all raw data with the unique group code so that individuals coding or analyzing data do not know who it refers to.

6. Limit production and handling of presentation overheads to a few key individuals.

7. Arrange to pick up survey packets immediately after the presentation.

8. Explain that individual ID codes are anonymous and cannot be used to identify the survey taker.

9. Have professional staff at training and recruitment meetings who can assure students that they do not have access to the data.

10. Explain guidelines for reporting data to the public so that no specific groups will be identified.

Guidelines developed at Washington State University for use of SGNM with fraternities and athletic teams.

An Interview with Jeanne Far

change their behaviors. We need to trust in the power of the information and allow people to change at their own pace, in their own time.

There are many ways to provide people with accurate social norms data. With social norms marketing approaches, people may see the information and accept or reject it without necessarily having to talk about it or process it (unless they choose to do so). Thus providing the opportunity for discussion of media can be a useful complement to social norms marketing. In the SGNM, we provide something more intensive by creating an intervention in which participants spend an hour or more looking into their own choices and motivations in an environment of care and respect.

AB: Are there any common mistakes with SGNM?

JF: Some interventions move too quickly, include too much information, add other kinds of interventions into the mix, or don't focus long enough and clearly enough on social norms ideas, information, etc. We start by talking about norms, misperceptions, how people are wired to take in and attend to social information, how our media interacts with social norms. We get people talking about how information is processed, and then we give them the information we want them to process. So we spend the entire 45 minutes following a "lesson plan" kind of structure, except it's in sort of a "game show" format -- informative, but entertaining as well. The very first

thing is a warm-up exercise -- really just a way to get people talking so they know talking is expected of them during the presentation. Every word, every move is part of a carefully structured plan to make this information understandable and acceptable.

AB: What have been some of the successes?

JF: I'm really pleased with what's happened at University of Virginia this past couple of years, where they got a grant to do a careful replication of our model in their Greek system. They brought us out to train their house presidents and their staff trainers stuck really closely to the spirit and the letter of our presentation model -- and they've gotten significant decreases in negative consequences of alcohol consumption in this difficult population, again with only a one-time 45 minute intervention. *(See "From the Field" in this issue for a description of the University of Virginia Program-Ed.)*

Another thing I'm really pleased about is our work with the Illinois Higher Education Center. Now they are putting the SGNM intervention on their website, in downloadable form, with a pretty intensive training presentation for facilitators and tech support available from John and myself. They will also offer online surveys and then send the data sent back to you. They hope to provide everything you'd need to do a pretty accurate replication of SGNM. *(See "The Gathering Place" this issue for information on the Illinois project- Ed.)*

AB: Any final comments?

JF: As I mentioned earlier, some of us really want to see this model expanded to lots of other areas, not just prevention but positive support for better understanding and communication. The principles of social norms theory are so broadly applicable -- it's all about how we're wired, how we understand and misunderstand each other, how we work together in so many ways to construct social behavior. I'm really pleased that so many people want to know how to apply this model to these areas other than alcohol abuse prevention. I remember so well when social norms-based interventions seemed really "out there" and now people everywhere know about this work. So people are starting to get creative and think "outside the box," and that's great. The old models don't work well enough, and now people are much more willing to consider new models. Maybe the paradigm is already shifted?

AB: Yes, it seems to be shifting. Thank you, Jeanne.

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