Using Peer Theater to Deliver Social Norms Information: The Middle Earth Players Program

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Editor’s Note

This Working Paper inaugurates year two of The Report on Social Norms. It presents a program that uses peer theater to deliver social norms messages, adding to a growing literature on small group norms interventions that can be tailored to specific audiences. These interventions, because they can be offered under experimental conditions with control groups, are more amenable to scientific study. As with similar programs, students receiving an in-class social norms intervention report more beneficial changes than those receiving a traditional AOD lecture. The data also indicates a reduction in high-risk drinking in the intervention group at a time when high-risk drinking increased among control group members. Thus, this working paper contributes to the literature in three important ways: by offering a powerful new technique, by adding to the support of social norms’ effectiveness, and by augmenting literature suggesting that social norms interventions can be effective with high-risk drinkers.

The authors also raise an interesting question: can a tailored, small group intervention be used to strengthen the impact of an already-existing social norms campaign? While not definitive, these results suggest that it can. This represents an important stage in the evolution of social norms – the development of multiple, mutually reinforcing social norms interventions that create a synergistic effect when offered together.

This Working Paper is the first of four to be published this year. (Six other publications from The Report on Social Norms will also be forthcoming.) A Working Paper is a “work in progress” focusing on a particular aspect of theory, research, and methodology with the hope of stimulating discussion and advancing the field. Please feel free to respond with any comments or reactions to the Editor or to the senior author of this paper.

Thank you!
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Theoretical Context

The Impact of Peer Educators.

Role theory suggests that students will learn more effectively from their peers (role models) than from teachers who are older and of a different generation (De Volder et al., 1985). This notion underlies the promotion of formal peer education programs on university and college campuses. There is wide varia-
tion in peer education programs and, as such, peer educators are used in varying capacities by health education organizations. These diverse activities have included counseling and giving information to individuals and groups, facilitating outreach programs to a target audience, presenting programs that may include dramatic skits, role plays or games for small groups, and staffing resource centers, hotlines, and outreach offices (Lindsey, 1997). Peer educators are frequently used in social norms efforts in a variety of capacities.

Although the majority of outcome research on peer education focuses more on process evaluation than on behavior change (Sawyer, et al, 1997), a few studies lend support to the efficacy of peer education programs in the promotion of healthy behaviors. For example, Sloane and Zimmer (1993) found a significant relationship between a peer AIDS education initiative and the practice of safer sex. Richie and Getty (1994) found that an AIDS peer education program increased student engagement in protective behaviors, and a peer education program emphasizing male responsibility in decreasing sexual assault led to a decrease in rape tolerant attitudes (Smith, 2000).

Some forms of peer education may be more effective than others. Thus, a National Institute of Justice report concluded that "theatrical presentations can simultaneously educate and entertain, adapting concerns to the interests, vocabularies and attention spans of their audiences" (Epstein & Langenbahn, 1994, p.80). Numerous studies have found that theatrical interventions, ranging from interactive dramas to vignettes that were acted out and discussed, are effective in producing significant positive changes in attitudes of college students toward sexual assault and rape (Frazier, et al, 1995; Heppner et al, 1995; Gilbert et al, 1991; Black et al, 2000). In addition, studies have shown that role-play interventions result in increased knowledge about the topic area (Duveen & Solomon, 1994; Perlini & Ward, 2000). These findings suggest that dramatic methods may be a viable alternative to traditional lecture and video methods for enhancing knowledge in adolescents.

**Peer Theater as a Vehicle for Intervention.** One method of peer education is the use of peer theater. The peer theater model has evolved over time from the work in sociodrama pioneered by Moreno (1948) to psychoeducational drama groups (Urtz & Kahn, 1982) to modern day peer theater programs. As the peer theater model has evolved, it has become a more specific and structured approach to educational programming geared toward college students (Caso & Finkelberg, 1999). To date, however, there have been no outcome studies assessing the impact of peer theater interventions. Further, the effectiveness of social norms data presented in the context of peer theater performances has not previously been evaluated or compared with the effectiveness of conveying information through media campaigns alone or with traditional lecture-based interventions about alcohol.

The *Middle Earth Peer Assistance Program* includes a peer theater intervention based on social norms theory. The *Middle Earth Players* peer theater group is comprised of thirty undergraduate peer educators who use theatrical vignettes to communicate alcohol abuse prevention messages to peers. The programs combine spontaneous dramatic methods (e.g., acting out scenarios) with factual information (e.g., social norms data) and modeling of protective behaviors to educate students, change attitudes and behavioral intentions, and change behaviors toward reduced alcohol use, decreases in associated high-risk behaviors, and increases in protective behaviors.

**Research Goals and Design.** In fall 2000, four experimental and four control sections of a mandatory freshman first semester course were randomly selected for a test of the interactive social norms peer theater approach. Pretest baseline survey data clearly indicated misperceptions of use. The presentations were made by trained undergraduate students from the *Middle Earth Peer Assistance Program* to the experimental condition classes, and a standard lecture on the effects of alcohol was presented to the control group classes. The goal was to determine whether social norms information presented by trained undergraduate students in an interactive peer theater format demonstrated an additive effect as compared to media campaigns alone in decreasing misperceptions and in reducing the level of high-risk drinking and associated negative consequences for the experimental condition classes. Specific project objectives were:

- To increase the percentage of first-year students who correctly believe that their peers drink once a week or less by 10 percent;

- To increase the percentage of first-year students who report that they engage in protective behaviors by 5 percent;

- To reduce the percentage of first-year students who report experiencing high-risk behaviors associated with alcohol use by 5 percent.

**Project Overview and Design**

*Middle Earth.* The University at Albany is a coeducational state university in an urban location with an enroll-
ment of over 11,000 undergraduate and 5,000 graduate students. The Middle Earth Peer Assistance Program provides peer counseling and peer education services that assist students in meeting their educational goals and in coping with emotional, social, and other life issues that they face. Since its inception in 1970, its primary focus has been on alcohol and other drug prevention as it relates to these issues. An additional mission is to strive toward increased diversity within the organization so that services offered may be more sensitive to the individual needs and experiences of the widest cross-section of students.

The program is comprised of three primary service units—the hotline service, the outreach education service, and the training program. Staffing for the program includes a Director, a psychology intern and four graduate assistants who coordinate daily operations and a front-line staff of over 140 peer counselors and peer educators. Because of student government funding there is also an active executive board of student leaders who influence the direction of the program and who assist student buy-in regarding social norms information disseminated by the program.

Perhaps our strongest and most visible outreach education initiative is the improvisational theater group described here, the Middle Earth Players. Begun in 1997-98, the group addresses conflictual situations around alcohol and other drugs and involves audience members in generating their own constructive and positive solutions to resolve these issues. The Middle Earth Players have presented sessions to all new students during orientation for the past five years, routinely perform in residence halls and for student groups, and have made presentations to local colleges and universities, local high schools, and local, state, and national conferences addressing AOD prevention.

Student members participate in a comprehensive training program focusing on AOD prevention and related issues, such as sexual assault and HIV/AIDS, listening and communication skills, workshop and peer theater techniques, crisis intervention, and human diversity topics. In 1994 the Middle Earth training program began offering four 3-credit academic courses in peer education, peer counseling, and peer supervision. Selection for the program is very rigorous, with less than one third of applicants selected for training based on skill, leadership, and commitment to alcohol and other drug prevention. Middle Earth is the only campus-based undergraduate internship training opportunity in the human services field at the University, and research indicates that over 90 percent of program participants pursue graduate careers at the masters and doctoral level.

The program also offers training for masters and doctoral students in human services. Graduate trainees receive both individual and group supervision and participate in a series of training seminars on prevention and social norms research and practice. Middle Earth is part of the Counseling Center’s doctoral internship program in psychology.

Program Effectiveness. The Middle Earth Peer Assistance Program has shown evidence of a positive impact on the campus community since its inception. That impact has been evidenced as follows:

1. Students who join the program report significantly lower rates of alcohol and other drug use as compared to the overall campus community, making them model peer leaders;

2. Participation by students in social norms-based initiatives, including peer-driven ad campaigns and associated education and hotline services, have produced significant yearly increases in numbers and high rates of satisfaction as well as movement toward reduced drinking rates;

3. Annual survey research begun in the summer of 1998 on a total of over 10,000 new students suggests that participation in its Middle Earth Players programs is associated with intentions to reduce drinking and drug use behaviors as well as reported reductions in drinking rates when measured at a 3-month follow-up date.

Method

Study Participants. Participants consisted of first-year students enrolled in eight sections of a freshman seminar. Each section had 20 students. Half were assigned to receive the interactive peer theater intervention and the other half a standard lecture on alcohol and its effects. The age of participants ranged from 17 to 20, with an average age of 18. 51% of participants self-identified as female, and 49% self-identified as male.

Project Design. The eight freshman seminar sections were randomly assigned to either condition. The four class sections assigned to the experimental condition received the interactive peer theater intervention, and the four class sections in the comparison condition were exposed to a lecture on alcohol and its effects delivered by the University’s AOD coordinator. All participants were also exposed to our campus-wide ongoing social norms media campaign, and, as a result, this exposure was controlled across all subjects. Baseline pre-test data was collected immediately prior to their exposure to
the assigned intervention (October 2000) and post-test data was collected six weeks subsequent to the intervention. Both pre- and post-test data was collected in the classroom, minimizing participant dropout over time.

The evaluation measures consisted of selected questions from both the Core Survey of Alcohol and Drug Norms (CORE Institute, 1999) and the National College Health Assessment of the American College Health Association (2000). The survey required approximately 20-25 minutes to complete.

Target behaviors to be evaluated were frequency of alcohol use, frequency of high-risk drinking, frequency of engagement in high-risk behaviors and frequency of the use of protective behaviors. An increase in the percentage of students who held an accurate perception of peers’ alcohol use on campus was also expected.

Recruitment and Training. Peer theater instructors for this project consisted of two Graduate Assistants in Counseling Psychology selected through a competitive application process and supervised by both the program director and the AOD coordinator. The total time devoted to the project between both Graduate Assistants was ten hours per week.

The six peer educators were initially selected and trained through the standard program recruitment process. In addition, all peer educators filled out a questionnaire assessing their opinions about alcohol use on and off campus, the age 21 drinking law, and the extent to which they believed our social norms campaign statistics, as well as additional peer educator ethical codes (including a requirement to not engage in high-risk alcohol-use behaviors.)

Structure of Peer Theater Performances. The peer theater presentation used in this project is a structured performance designed to depict conflicts related to alcohol use faced by college students. The rationale, based on psychodrama, posits that it is only through the expression of emotion that attitude and behavior change can take place. The performance is made up of six distinct stages (see Table 1).

An interactive approach (i.e., directing questions at the audience) engages audience members and encourages communication, participation, and modeling of protective behaviors. The presentation is typically one hour in length and is structured to include two separate topical scenarios with two to four student actors per scenario. In addition to the presentation of social norms data by actors at the end of each scenario, social norms statistics are integrated into the performances through the projection of slides behind the peer educators as they are performing. (see Table 2, p. 5)

Social Norms Data Collection and Message Development. The social norms component was based on data collected during the 1999-2000 academic year with state funding. The Core Survey was administered in September 1999 to 1,300 first-year and upperclass students. In late fall of 1999, a social norms campaign was planned and implemented using posters, radio and newspaper ads, and presentation of norms information within peer education workshops. In developing the media message, which focused on the statistic that 74 percent of University at Albany students drink once a week or less, focus groups were held with key subgroups of students, including first-year students, fraternities and sororities, and athletes. The resulting media campaign, entitled “The A-Files” after the popular TV series, was launched in the spring 2000 semester. The A-Files campaign statistics, as well as additional statistics on student protective behaviors from the 1999 Core norms survey administration, were used for this project and were integrated into peer theater performances.

Audience Satisfaction with Theater Performances. In addition to the outcome data collected, evaluations of student satisfaction with peer theater performances were assessed as a cross-check of performance quality. Satisfaction elements included: amount of new information learned, presenter’s knowledge of subject, presenter’s style, pace and flow of program, quality of audiovisual materials, overall value of program, and specific quality of each
Table 2 • Scenarios

Scenario #1: "Are We Here to Party?"

Two friends/roommates are talking about a potential problem. One subtly and gradually focuses the discussion on several behaviors of the other student that are of concern, such as missing classes, not talking to family members, not going to the gym anymore, and GPA dropping from "B" to "C." The concerned roommate outlines how the others’ drinking affects him/her, focusing on issues of respect. The concerned student also addresses the impact on other friends and disruption of daily routines. At this point, the audience is brought into the discussion and the facilitator and actors focus on possible ways of resolving or preventing this potential conflict, addressing and modeling protective behaviors during the discussion.

At the close of the scenario the facilitator reads statistics with accurate normative information about drinking on campus, including the fact that most students (88%) have not allowed alcohol to interfere with their performance on exams, papers, and course grades or from successfully completing a course.

Scenario #2: "The Next Day"

Four students are in a bar. The "designated driver" begins drinking and is confronted by another student. The designated driver refuses to stop drinking and will not let anyone else drive, though the one student who has confronted the driver tries to take the keys away. The next day the same friend again confronts the driver. At this point, the audience members are brought into the discussion at this point. The driver initially tries to minimize what happened. The friend, using positive role modeling, social norms information, and help from the audience, persists in talking to the driver about the behavior, its potential consequences, and possible alternatives (protective behaviors). The driver eventually makes a commitment to engage in protective behaviors in the future.

At the close of the scenario, the facilitator reads statistics indicating that 94% of UAlbany students do not drive after drinking more than 4 drinks, and 80% report they always or usually use a designated driver.

Results

Repeated measures ANOVAS were used to analyze the data. Pre- and post-test data from the experimental (peer theater) and comparison (academic lecture) groups was subjected to a variety of comparisons, including the evaluation of data on reported drinking rates, attitudes and perceptions about alcohol use, and reports of protective and high-risk behaviors associated with alcohol use. Further, separate analyses of data obtained from students classified as "high-risk drinkers" were conducted to assess for any evidence of or trends toward program impact for this challenging and resistant population. Here, high-risk drinkers consisted of the twenty percent of respondents who engaged in eighty percent of the drinking occurring on and off campus.

Frequency of Drinking and Perceptions of Use. For students who participated in the social norms-based peer theater intervention, results showed a significant decrease in frequency of reported alcohol use from pre-test to post-test, in driving after drinking any amount of alcohol (F=9.47, p<.01), in behaviors after more than four drinks that were later regretted, and in students’ definition of acceptable drinking in terms of occasions per week. Additionally, there was a 29% increase in the number of first-year students in the peer theater condition who perceived that their peers drink once per week or less, a finding that far exceeded our objective of a 10 percent change (see Table 3A).

Participant Engagement in Protective and High-Risk Behaviors. Project results indicate a consistent and statistically significant increase in intervention participant engagement in a number of protective behaviors, including use of a designated driver (F=7.79, p<.01), pacing drinks to one or fewer per hour, and keeping track of how many drinks have been consumed. There was also evidence of consistent and statistically significant decrease in negative consequences reported that are sometimes associated with alcohol use, including missing classes, physical injury to self, and having unprotected sex.

Alcohol Use by High-Risk Drinkers. Students classified as high-risk drinkers who participated in the peer theater intervention also reported a 9 percent decrease in the frequency of alcohol use, while high-risk drinkers in the academic lecture group reported a 9 percent increase in alcohol use (see Table 3B).

Additional Impact of Peer Theatre. The peer theater interventions may have had an additive effect compared with the social norms media campaigns alone. This is suggested by comparing the relative changes in reported student drinking rates after exposure to the media campaign alone as compared to the peer theater intervention. Our social norms media campaign pilot
work, conducted in the fall of 1999, found that students exposed to our social norms media campaign without any additional interventions reported a twelve percent decrease in drinking rates, while those exposed to social norms information in the context of interactive peer theater scenarios reported much greater reductions in drinking rates (18 percent). While these results suggest the power of an interactive social norms-based peer theater intervention, further controlled research must be conducted to identify and evaluate the multiple and unique factors that make peer theater interventions influential, including the specific effect of the social norms component.

### Discussion

**Impact of Peer Theater.** Our results suggest that trained peer educators can have an additive effect in carrying out social norms interventions. In particular, peer theater was more effective than an academic lecture on alcohol in leading to reduced reports of drinking, increases in reports of protective behaviors, and decreases in reports of high-risk behaviors associated with alcohol use.

These findings may be explained in two ways. First, peer educators may be more believable in the eyes of college students than other methods of delivering the same information. Second, in the context of our peer theater programs, peer educators model protective behaviors and encourage audience members to generate solutions to conflicts portrayed by suggesting protective and healthy behaviors.

The impact of our peer theater programs on high-risk drinkers was striking. While high-risk drinkers, a very resistant population, showed a trend toward greater reductions in alcohol use, reductions in high-risk behaviors, and increases in protective behaviors as a result of the peer theater intervention, reports of alcohol use by high-risk drinkers actually increased when presented with a lecture on alcohol. An examination of reactance theory in social psychology offers a possible explanation. More specifically, high-risk drinkers may be more likely to exhibit reactance in response to suggestions and information from authority figures. On the other hand, peer educators may be seen as more credible and less threatening to high-risk drinkers, and therefore mitigate this effect.

**Lessons Learned.** As we conducted this project, there were a number of very important lessons learned. These include: (1) pick your peer educators carefully; (2) make sure they are acting, not "acting out"; and (3) with improvisation comes supervision (and lots of it).

When we began the peer theater group, it was our goal to be able to reach traditional high-risk groups such as fraternities and sororities, student-athletes, and first-year students. To accomplish this we made efforts to reach out to and train students within these groups in the hope that we might be better able to intervene with their peers. However, we found that it was very difficult to select students who could serve as role models for other students without compromising the strength of our social norms messages. In fact, those students who were representing high-risk groups during peer theater presentations in a classroom during the day were often the same students who were found to frequent bars at night. As a result, we have learned that the net gain from including students from high-risk groups was very small, and students who were not members of high-risk groups were equally as effective as role models and change agents.

The remaining two lessons learned go hand in hand. That is, with the use of improvisational peer theater comes a level of risk that peer educators, in their efforts to act, may instead "act out." We observed that, whenever our actors became anxious, they tended to behave in more extreme and negative ways when playing out scenarios, and their language became increasingly more vulgar. In their efforts to gain reactions from audience members in the face of limited scenario structure, performances began to deteriorate.

Based on our experiences it is recommended that when improvisational theater techniques are employed with peer educators it is critical to have as much "skeletal structure" as possible

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<td>Table 3A. Percent of Students Accurately Perceiving the Norm for Alcohol Use at Pre- and Post-test for Peer Theater vs. Academic Alcohol Lecture Interventions.</td>
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<th>Table 3B. Pre-Posttest Changes in Reported Alcohol Use of High-Risk Drinkers Participating in Peer Theater vs. Academic Alcohol Lecture Conditions</th>
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within the performance. For example, a scripted introduction is essential, as is a rigid script regarding when and how actors should present social norms information. Scenarios, too, should be fairly tightly scripted, with a high level of professional supervision and practice time built into the training process. Debriefing of actors after performances is also essential so that the impact of actors’ behavior on stage can be discussed and, when necessary, confronted by both the supervisor and the actor’s peers. Additionally, whenever possible, it is important that the peer theater group supervisor or other professional staff member accompany the actors to each of their performances.

**Bringing This Program to Your Campus.** The social norms-based peer theater intervention may be easily replicated. What is needed most is dedication to the work that is involved in the process as well as university and student commitment. First, time and care must be taken to develop and test any social norms marketing messages. Create a catchy theme and campaign, and test it with focus groups. Evaluate the effectiveness of your campaign with survey data from state-of-the-art instruments and methods in the social norms field. Even further, consult with campuses that have active campaigns, and do not hesitate to borrow ideas that have been found to be successful from campuses similar to your own in size, location, and other important dimensions.

Staffing and resource issues are crucial. Recruit dedicated, representative, and positive students to train in the peer theater model, and offer course credit or other compensation if possible. Get campus support and make contacts with campus media. Look for external grants and other sources of funding to maintain and enhance your program.

Most importantly, don’t give up. Perhaps the biggest pitfall in conducting work in the social norms area is giving up too soon. Social norms campaigns require time to develop, implement, and evaluate, and campaigns need to be administered both broadly and often. If we add peer theater script development and the training of students to the formula, it will require even more time. In the long run, however, this is time well spent, as we are putting together a complex but very effective recipe for student behavior change and potential long-term changes in student culture around alcohol use.

**Summary**

It is clear from this project that peer educators, in their capacity as positive role models, can play a critical role in the dissemination of social norms data and messages and possibly augment the impact of a social norms media campaign. With national and local trends suggesting that moderate use is the norm, it behooves us to capitalize on the number of non-drinkers and low-risk drinkers on our campuses and to use them as role models through their involvement in new and innovate programs and interventions. It is important for us as prevention professionals to help our healthier students "get with the program," expose them to healthy social norms data early and often, and have them assist us in promoting positive norms.

In the area of social norms and peer theater, the adage, "Each one, teach one" applies well. The results from this project suggest that we can teach peer educators to be ambassadors for our social norms messages, and, more importantly, that they can be a powerful vehicle for campus change. As social norms theory tells us, there is strength in numbers, and, likewise, with increases in the numbers of trained peer educators passing on our social norms-based prevention messages, there is an increased role for them in paving the way toward further advances in the prevention field.

**Note:** For more information on how to develop and implement a peer education/peer theater program on your campus, contact M. Dolores Cimini, Ph.D., University Counseling Center, Health and Counseling Building, Second Floor, University at Albany, SUNY, Albany, NY 12222. Phone: 518-442-5800: Email Address: dcimini@uamail.albany.edu.

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