The development and implementation of a social norms campaign to reduce alcohol consumption in 4 Welsh Universities.

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Intervention rationale

- Drinking in excess of public health recommendations is widespread among students in UK universities (Heather et al, 2011).

- High alcohol intake - negative impacts such as educational difficulties, psychosocial problems, antisocial behaviours, injuries and risky sexual behaviours among students (Wechsler et al, 2000).

- University health improvement interventions are therefore increasingly seen as important in reaching young people at risk from hazardous drinking.

The social norms approach to prevention

- Premise that perceptions of social norms strongly influence how we behave as individuals. Via descriptive norms (perceptions of what most people do) and injunctive norms (perceptions of what most people approve of/disapprove of doing).

- Seeks to correct misperceptions through the dissemination of information on the actual norms in a population

- Promising results have been reported from some evaluations of U.S. social norms interventions (Moreira et al, 2009) but cultural transferability?

Intervention Mapping

- Halls of residence campaign - high incidence of 'pre-loading', potential for targeting first year students (Bewick et al, 2008) and the opportunity to explore the utility of a halls based approach within a rigorous evaluation design.

- Attempt to influence behaviour without considering the contexts in which they are formed, are likely to be of limited and variable success (Ward, 2011). University-wide alcohol prevention guidance toolkit, to provide a supportive context for the social norms intervention.

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Exploratory clustered randomised control trial

- Test the effects of the intervention on anticipated change processes (e.g. impacts on perceived social norms) and to explore value and parameters of a possible definitive trial of effectiveness in changing behaviour

- 50 residence halls in 4 universities in Wales randomly assigned to intervention or control arms. Web and paper surveys (n=3800), assessing exposure/contamination, recall of and responses to intervention messages, perceived drinking norms and personal drinking behaviour at 6 months follow up.

- 554 (14.6%) students within 43 halls of residence (20 control/23 intervention) provided complete responses

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The process evaluation

- Student focus groups (N= 15), interviews with the project officer (N=2), and interviews with key university stakeholders (N = 19). To explore the role of alcohol in student lives and the process of intervention development and implementation.

- Structured observations explored the intervention contexts of participant universities and the implementation and impact of the social norm materials (SNMs) and toolkit.

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Social norm implementation

- Observations took place 6 weeks post-placement. Posters were found to be still visible, with portable materials far less common.

- Implementation problems in one site – poor hierarchical communication and time pressure during freshers

- implementation was confined to accommodation services and a number of universities lacked structures for cross department working, the social norm intervention was not fully integrated with university wide toolkit activity.

Social norm exposure and recall

- A large majority of students in the intervention group (74% N=176) reported having seen posters in their own hall. Focus groups highlighted high levels of awareness *'[posters] were very striking, they kind of, you see if you haven't seen them before they are kind of, they stand out'*.

- But students more likely to report exposure to pro-alcohol promotions than to intervention materials. Overall, 429 (82.7%) reported having been exposed to promotions for happy hours, 430 (82.8%) reported exposure to promotions for drinking based events such as drink the bar dry, whilst 484 (93.4%) reported exposure to promotions for student drinking nights in off-campus bars and clubs.

Social norm message reception

- Students who reported seeing at least one material, almost two-thirds (61.6%; N=242) reported that messages were believable, and just over half (55.9%; N =214) that they were relevant. Fewer (21.4%; N =89) stated that materials influenced their perceptions of other students' drinking. While 13.1% (N=50) stated that materials had impacted their own alcohol consumption

- Suggested they needed to be more site-specific to increase the credibility of norm messages amongst students, although still doubting whether it would actually influence their behaviour.

- Heavier drinkers were significantly less likely to perceive messages as credible and to have had an impact on their behaviours.

Impact of the social norms

- Intention-to-treat analysis (comparing intervention and control students) highlighted no differences in normative perceptions.

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- Small differences were indicated in per-protocol (i.e. whether students had seen/not seen materials), with significantly lower perceived descriptive and injunctive norms among students reporting exposure.

- However, students continued to significantly 'overestimate' actual norms and a majority of students who drank above recommended limits continued to perceive that a typical student drank more than they did.

- Students continued to report almost identical levels of alcohol consumption whether in intervention or control groups, and whether or not exposed to intervention materials.

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Toolkit implementation and reception

- The toolkit was initially disseminated to 4 or 5 key stakeholders in each university. These included accommodation managers, head of student services, SU managers and welfare officers, heads of health and safety, pro Vice Chancellors and heads of counselling. In two universities with more developed approaches to alcohol misuse, it was disseminated further, largely to staff within those departments.

- The toolkit was received well by stakeholders and proved easy to understand by most. Circulation by email met with approval, as it was easy to receive, forward on, replicate and use in campaigns. However, time demands on recipients led to requests for an executive summary and for interactive elements to be developed and included to ease document negotiation.

Toolkit diffusion and adoption

- Institutional contexts varied considerably, with some universities at a more advanced stage of problem recognition and readiness to change and with more developed systems for cross university working. Here the toolkit was more widely disseminated and reinforced existing policies and practices and policy as it *'mirrored [existing policy] and 'probably got me thinking a bit more widely' (University C).*

- In other institutions the toolkit appeared to act as a catalyst for the development of cross university working

- *'I'm not sure as a result of, but certainly after that and talking about alcohol and what it was doing on campus and I think at the time we could see the shift starting to happen there and we developed what we call the [title] campaign which is accommodation, student union, student services, medical' (Uni D).*

Impact of the toolkit

- It was generally felt a longer follow up than 6 months was needed to assess impacts. The short length of the academic year and university procedures complicated this further: *'everything seems to have to go through 10 layers of committees…and some committees only meet twice a year (PO)'.*

- Nevertheless, for some universities, the toolkit increased stakeholders understanding of wider environmental influences on student alcohol use, highlighted the need to formulate/review student alcohol policies and employ a cross department approach

- There was stakeholder support for alcohol issues to be addressed within the wider context of university health and well being and a call for a Welsh university network to consider these issues.

- Recognised that there are considerable obstacles to developing whole university systems and structures in larger and more complex institutions and that there was a need for a dedicated role within institutional staff to facilitate this.

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Conclusions

This research does not support the continuation of a social norm based universal population approach for students in its current format.

Whether social norm interventions should target the universal student population rather than targeting students who drink heavily? More targeted intensive approaches to complement any population approach

Universities face greater challenges from alcohol environments which are likely to drown out any social norm approach without sustained ecological interventions to support it. Intervention timetable led to parallel implementation of the social norms campaign and the toolkit in a less than fully integrated manner.

Size, systems and structures of participant universities impacted on implementation of both the social norms campaign and the toolkit. Those with established structures for inter-departmental working appeared to be more receptive and engaged in implementation.

Further support is needed to facilitate a whole systems approach and create identified role(s) within university staff which assume responsibility for taking forward activity Welsh Network for Healthy Universities ?

Promoting awareness and responsibility for the consequences of alcohol misuse. Locating this in a wider agenda of student well being, retention and attainment may be more successful with some universities.

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Recommendations

Universities/NUS

- To effectively tackle problematic drinking, universities each need an internal infrastructure to oversee and regulate alcohol policy and practice.

- This will also require an awareness of the impact of environmental factors at different levels, including the campus environment and the wider community, and auditing of those that affect their student population.

- Routine monitoring of patterns of alcohol use would allow universities to assess the needs of their student population in relation to alcohol policy and practice, thus enabling them to respond as needed and evaluate impacts of changes.

- Within this, there is a need for a recognised individual to coordinate and take responsibility for such audit and any resultant actions.

- Raising awareness of how alcohol problems impact on many different parts of the university (student well being, community interaction & cohesion, academic achievement) may help to achieve buy in within and between university departments.

- The high levels of exposure to and recall of key messages from some halls-based tools (e.g. posters) suggests that halls have potential as intervention contexts.

- Ways to meet the needs and problems of non-drinking students should be explored by universities and actions to meet these needs included in any alcohol policies and practices.

Recommendations

- **Welsh Government**

- Levels of recognition and awareness of the extent of problematic student alcohol use and associated interventions should be raised or established across all university bodies.

- The toolkit should be promoted as a guide for university alcohol policy/ practice.

- Universities should be supported in establishing positive pro-active attitudes to recognising and addressing student alcohol use and setting up university infrastructures to facilitate intervention consultation and action.

- Alcohol policy and practice consultations and actions should be developed and implemented within the wider context of an overall student health/well being ethos & approach.

- Establishment of a Welsh Healthy universities network, with a central resource to inform, co-ordinate and liaise between partners in the network, may facilitate this.

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Recommendations

- **Researchers:**

  – To explore student perceptions of and responses to site-specific social norms messages.

  – To explore the impact of social norms interventions on students with different drinking levels and alcohol behaviours.

  – To further understand the implementation of multi-level, whole system ways of working to reduce alcohol consumption.

  – To reconsider the contribution of social norms interventions within the context of a whole system approach.

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