Please answer the following questions in English.

1. Is this your country’s ECPA entry or is it an additional project? (Only one ECPA entry per country plus up to two other projects.)

This is Denmark’s ECPA entry.

2. What is the title of the project?

The Ringsted Experiment (Ringstedforsøget).

3. Please give a short general description of the project.

A randomized experiment aimed at reducing schoolchildren’s normative misperceptions about other children’s risk behaviour.

4. Please describe the objective(s) of the project?

The experiment had two objectives. Firstly, to reduce children’s exaggerated beliefs about other children’s risk behaviour; secondly, to examine whether reductions in normative misperceptions of other children’s risk behaviour would impact the children’s own actual risk behaviour (tobacco, alcohol, drugs, and crime).

5. How was the project implemented?

A large questionnaire was distributed among both Treatment and Control classes. Smoking was used as topic for discussion. Results regarding smoking were discussed in the classroom with children from Treatment classes, as were reasons for the exaggerations found. Follow-up questionnaires were distributed six weeks and a year after the intervention.
6. Were partners involved in planning and/or development and/or implementation of the project? If so, who were they, and what were their roles?

The project was planned and implemented by the researchers with practical and logistical aid from the schools in Ringsted.

7. How did you build in plans to measure the performance of the project?

Through the use of a randomized experimental design involving both pre- and post-tests.

8. Has the project been evaluated? How, and by whom?

Yes, by the researchers involved.

9. What were the results? How far were the objectives of the project achieved?

Children’s normative misperceptions about other children’s risk behaviour were significantly reduced (when compared with the Control group). Actual risk behaviour in the treatment group was significantly reduced (tobacco, alcohol, marijuana, criminal activity).

10. Are there reports or documents available on the project? In print or on the Web? Please, give references to the most relevant ones.

Results have been published in a book (in Danish): Flemming Balvig, Lars Holmberg, Anne-Stina Sørensen (2005): Ringstedforsøget – Livsstil og forebyggelse i lokalsamfundet. Jurist- og Økonomforbundets Forlag. A summary of the results in English can be found at www.ringstedprojektet.dk

Please, write here a one page description of the project

The Ringsted experiment took its departure from three well-documented facts: First, that conventional prevention efforts aimed at reducing young people’s risk behaviour through information, scare campaigns, or education show little, if any, positive effect; second, that different kinds of risk behaviour are correlated; third, that children and young people often demonstrate normative misperceptions about their peers’ risk behaviour. They have exaggerated beliefs about others’ smoking, use of alcohol and use of drugs.

The overall idea of the project was to examine whether an intervention aimed at normative misperceptions would in fact reduce such exaggerated beliefs, and secondly, if such reductions would impact their actual risk behaviour.
Smoking was chosen as the subject of discussion, because smoking is 1) a highly visible form of risk behaviour, and 2) closely connected with the use of alcohol and marijuana. Based on the belief that prevention is most effective before the onset of the targeted behaviour, the intervention was aimed at children in 5th and 6th grade. A total of 374 pupils in 24 school classes participated in the experiment, which was conducted as a randomized, controlled experiment. 13 classes formed the Treatment group (T-group) while the remaining 11 classes functioned as Control group (C-group).

Before the experiment, all classes filled out an extensive questionnaire on their own risk behaviour, family and school situation, and their beliefs about other children and young people’s risk behaviour.

Results regarding actual smoking and beliefs about others’ smoking were computed for each individual class. These results were then used in a 4 hour intervention, conducted by an outside agent: a young soccer coach. The intervention consisted of 5 parts:

1. A detailed discussion about the findings on smoking from the questionnaire. Children were shown how their beliefs were exaggerated when compared to the actual smoking among their peers and those 2-3 years older.
2. Group discussion (3-4 in each group) of the possible reasons for the normative misperceptions, followed by reports in plenum.
3. Group discussion (same groups) of possible ways to reduce normative misperceptions, again followed by reports in plenum.
4. Group discussion (same groups) of concrete initiatives that children would undertake in order to combat normative misperceptions and stay away from smoking, followed by a plenary session.
5. The drafting of a “Class Contract” listing the ideas from 4). This contract was subsequently signed by all children and distributed among them.

6 weeks after the intervention in each class, a small questionnaire was distributed, showing substantial reductions in beliefs about smoking. A year after the experiment, another questionnaire was distributed. Overall results of the experiment were as follows:

- **Normative misperceptions:** Compared with pupils in Control classes, pupils in Treatment classes showed significantly lower misperceptions regarding their peers risk behaviour (44 per cent reduction). The reductions were especially prominent regarding alcohol.

- **Actual risk behaviour:** Smoking was reduced by 38 per cent, use of alcohol showed a 39 per cent reduction, use of marijuana an 80 per cent reduction, penal offences were reduced by 50 per cent, and traffic offences were reduced by 73 per cent. All differences between T-group and C-group – except actual smoking – were significant at the .05-level or lower.

The experiment shows that targeting normative misperceptions is very fruitful as a method of prevention, and that projects aimed at one kind of risk behaviour has significant ‘ripple effects’: A short intervention (4 hours) – in which only one kind of risk behaviour was discussed – resulted in substantial reductions in all measured kinds of risk behaviour, including the use of alcohol, use of marijuana, and crime.

Compared with traditional prevention strategies focussing on scare campaigns, information, and education (strategies that, when thoroughly evaluated, show at best very limited effects), the Ringsted approach focussing on normative misperceptions has proven much more effective in impacting young people’s risk behaviour. In Denmark, this approach has gained widespread recognition, and it is gradually replacing other, less effective strategies of prevention.