



## TECHNICAL DOCUMENT

# Utilising social media for HIV/STI prevention programmes among young people

A handbook for public health programme managers

July 2017

**ECDC TECHNICAL DOCUMENT**

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#### *Authors*

Clarissa Simas, Heidi Larson, and William Schulz at the London School of Hygiene and Tropical Medicine, UK; Maged Kamel-Boulos, University of the Highlands and Islands, UK; Franklin Apfel, World Health Communication Associates, UK; Andrew J Amato Gauci and Judit Takács at ECDC.

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## Abbreviations

EU/EEA	European Union/European Economic Area
ECDC	European Centre for Disease Prevention and Control
GPS	Global positioning system
HIV	Human immunodeficiency virus
LGBTQ	Lesbian, Gay, Bisexual, Transgender, Queer
MSM	Men who have sex with men
NGO	Non-governmental organization
PrEP	Pre-exposure prophylaxis
STI	Sexually transmitted infections

# 1 Introduction to social media

The target audience for this handbook includes public health programme managers working on STI/HIV prevention programmes for young people aged 15–24 years in EU/EEA countries. As some readers will already be well-versed in social media before reading the handbook, this introductory section is 'optional', however it may be valuable for readers who are already familiar with social media but have not explored sexual health content in this specific context. Box 1 offers background information on several major social media platforms.

## Box 1. Popular social media platforms

Instagram is an online mobile photo- and video-sharing social network that allows users to take, edit and share images and videos publicly and privately on the Instagram app. Users can follow each other and 'like' each other's posts. Content can also be shared on other social media platforms outside of the app. It is possible to place textual captions on images and receive comments (which can themselves be 'liked' by other users). Recently, Instagram added a new feature called 'InstaStories', whereby users can add short videos and images which will disappear in 24 hours. Fifty-five percent of the 150 million users of 'InstaStories' are under the age of 29 [1].

Twitter is a micro-blogging site for short messages or 'tweets'. Each tweet contains a maximum of 140 characters and pictures can be linked to them. Like other social media, Twitter can be used to stay in contact with a network of friends. However, it is also frequently used as a platform for sharing and receiving news and promoting business. Discussions on Twitter are organised around themes and common interests and not necessarily friendship connections. Twitter's reach made it vital for the distribution of information on Election Day 2016 in the US [2].

Facebook is a social sharing site that connects individuals with friends, families and acquaintances. It is the most used social media platform globally, with 1.8 billion active users as of 31 December 2016 [3]. It allows sharing of written content, images and videos. People in one's network can engage by liking (and, more recently, expressing a variety of other pre-supplied emotions or 'reactions') and commenting upon posts, as well as by sharing those posts on their own timelines, thus extending the reach of a post.

Snapchat is an app that allows video and photo messages to be sent to chosen friends. The images disappear a few seconds after opening. Users can also add images and video to their 'story', which lasts for 24 hours and can only be seen by followers. Snapchat is popular among teens and young adults. It does not include much text, being limited to a few words that can be superimposed on top of images.

YouTube is a video-sharing medium that allows users to upload videos, as well as view, rate and write comments. Available content includes video clips, TV shows, shorts, documentary films, and 'how-to' videos. Individuals have uploaded most of YouTube's videos and the platform includes celebrities and well-known vloggers (video bloggers).

## 1.1 Exploring the social media landscape in your country

Anyone starting out in social media can learn its format and content easily by creating an account for themselves or their organisation following the links below:

- **Facebook:** <https://www.facebook.com/pages/create/>
- **Twitter:** <https://support.twitter.com/articles/100990>
- **Instagram:** <https://help.instagram.com/182492381886913>

Even if you already use social media, searching for sexual health-related topics on these platforms can be very informative. This is the best way to understand material already under discussion and to obtain an idea of where your organisation might fit in.

## 1.2 Using hashtags

Hashtags are a way of designating a keyword within the body of a post on social media by preceding the keyword with the '#' symbol. Hashtags first arose on Twitter, and can now be used in most social networking platforms such as Instagram, Facebook, Pinterest and Google+. Anyone can add a hashtag label to their message.

Hashtags offer a way of categorising your own content, and searching for specific topics in the content posted by others. When you use hashtags, you help people who are interested in your topic to find your posts. When you search based on a hashtag (e.g. #love; #youth; #young), it will lead you to posts, conversations and discussions pertaining to that person, word, topic or theme.

When promoting a campaign on social media, you can also create your own hashtag (e.g. #Youth2017) and encourage others to add it to their posts. This will allow you to find posts related to your campaign and visualise its reach and impact.

At different times, some topics are discussed more than others – those with a large number of people talking about them are considered to be ‘trending’ topics. There is often a specific hashtag associated with trending topics. To include a trending and popular hashtag in your social media post means that you will expose that message to everyone discussing the topic and looking at the messages relevant to that subject.

### 1.3 Followers, likes and shares

On social networking sites, a follower is someone who subscribes to receive your updates. To make sure you are not speaking to an empty room, you will need to build a social media community of followers in order to ensure your message is heard. Aim to build a social following of people who are part of your target group. Make yourself known as an authority on the topic, in this case sexual health. Your followers should be able to identify you as a trustworthy source of information.

People engage with one another by ‘liking’ posts (social media platforms offer a ‘like’ button), sharing their own content (to receive ‘likes’ from individuals in their network) and sharing the content of others (e.g. retweeting or sharing a Facebook post created by others). It is important to share content frequently and regularly so your audience stays engaged and aware of your presence, always providing clear information. Remember to be responsive to individuals who interact with you via social media through public comments or direct messages, as this is also a good way to build up trust.

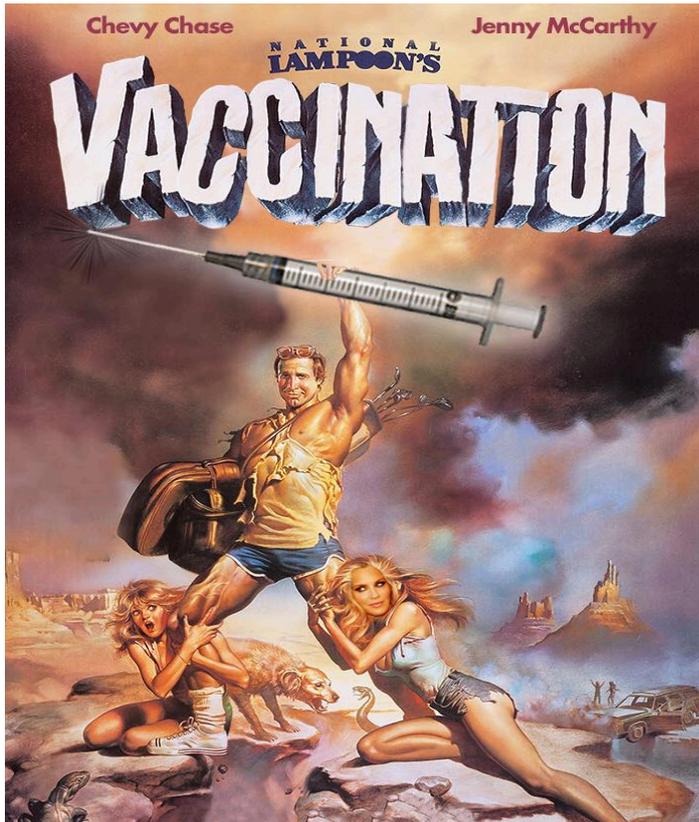
### 1.4 How to identify the prevalent slang terms used in your area

A variety of slang terms are used on the Internet, including abbreviations such as ‘LOL’ (Laugh Out Loud), acronyms and keyboard symbols. Slang is used in chat rooms, social networking, online games and online communities. It gives cultural and emotional context to computer-mediated messages, and it is important to be aware of slang terms when searching for content and crafting your own messages.

In addition to searching online to see how slang is used in posts, it is helpful to directly involve young people who can tell at a glance whether a message is appropriately worded and engaging. When trying to engage with young people via the Internet, it is important to sound authentic, otherwise your organisation may come across as behind the times.

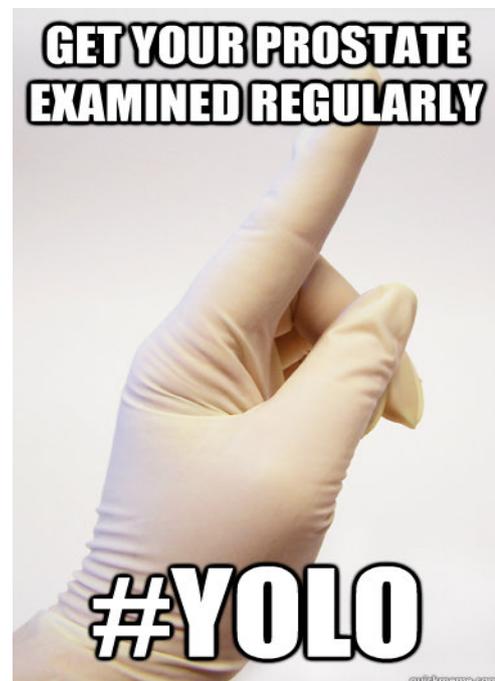
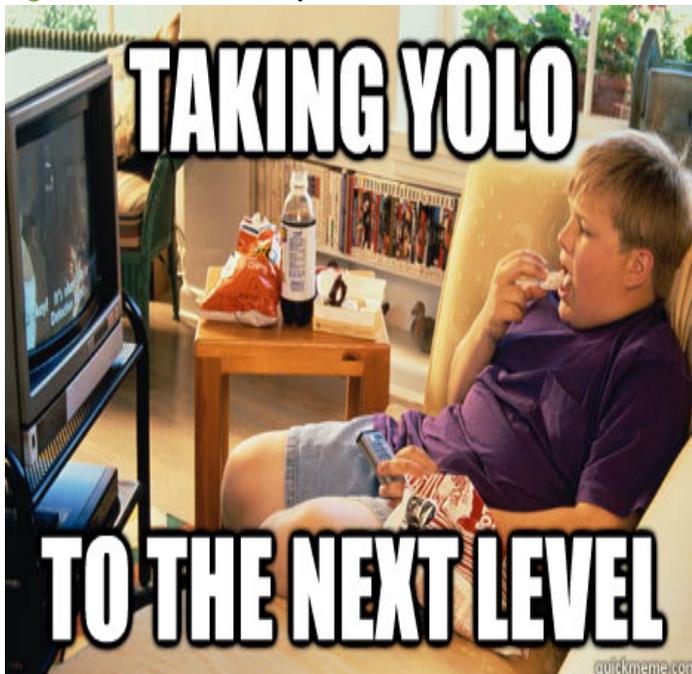
A meme, generally understood as a repeated thought or idea that is shared, takes new meaning in the social media landscape, where it can be a photo, overlaid with text, often drawn from popular culture, which is used to encapsulate and share a sentiment in visual form. Memes can be seen as a form of Internet slang, and it is easy to create your own meme to promote a message for sexual health, using services such as [imgflip](https://imgflip.com/memegenerator) (<https://imgflip.com/memegenerator>). However, not all memes are equally successful when it comes to engaging with young people (see Figures 1a and 1b).

**Figure 1a.** A meme depicting an unsuccessful attempt to engage with young people



Source: Facebook.com [homepage on the Internet]. Menlo Park, California, United States; 2017 [cited 13 July 2017]. Available from: <https://www.facebook.com/photo.php?fbid=10155760131119384&set=gm.817729495104247&type=3&theater>

**Figure 1b.** Further examples of unsuccessful memes



Source: quickmeme.com [homepage on the Internet]. Knightdale, North Carolina, USA; 2017 [cited 13 July 2017]. Available from: <http://www.quickmeme.com/YOLO/>

'YOLO' – 'you only live once' – is often used as a hashtag on Twitter to bring attention to exciting events or excuse irresponsible behaviour. It was made popular by Canadian hip-hop artist Drake ('The Motto', 2011). YOLO memes are now considered 'lame', 'uncool' and 'not funny'.

Emoji are also a form of Internet slang. Emoji constitute a language made up of digital images or icons, used to express an idea or emotion (see examples in Figure 2). Like memes, they are a way of conveying emotion in digitally-mediated messages, and a very important element of online communication.

**Figure 2. A selection of Emoji characters**



The 'eggplant' (aubergine) emoji is of particular relevance to sexual health, since it is commonly used to signify a penis, or sex generally, and therefore will frequently be encountered by programme managers working in this area (see <http://emojipedia.org/aubergine/>).

## 1.5 Managing and monitoring social media

In order to use social media effectively, it is wise to track and evaluate relevant content posted by others and measure the engagement that your own content receives. New quantitative data in the form of analytics and dashboards will certainly need to be part of any evaluation strategy. Many digital platforms and applications are now available that generate user profiles and usage pattern information. Social media dashboards (e.g. Facebook Page Insights) can be a valuable tool for monitoring and evaluating campaign effectiveness – and also allow for real-time feedback to facilitate on-the-fly campaign corrections.

There are a number of third-party services available that can help analyse content already on social media, manage and monitor your own social media postings, and evaluate the overall performance of your campaign:

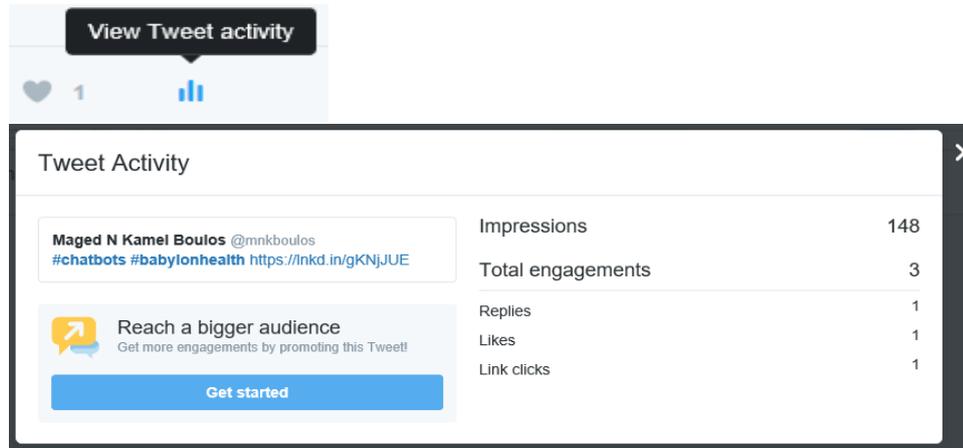
- **Analysis:** social media gives unprecedented access to conversations. To compile material for analysis, listening tools can help you take this flow of information and focus on the meaningful parts:
  - <https://www.tweetbinder.com/>
  - <https://www.meltwater.com/uk/>
- **Managing and monitoring:** different tools exist to monitor whether your voice and message are being heard, and also to manage your posts effectively:
  - <https://zoomph.com/>
  - <https://www.sysomos.com/>
- **Evaluation:** understand how well your campaign/organisation is performing in social media. Indicators of growth and progress can be measured in terms of followers, likes, and other metrics:
  - <http://crowdbooster.com/>
  - <http://simplymeasured.com/>
  - <https://www.truesocialmetrics.com/>

Analytical services are also available from social media platforms themselves. For example, **Instagram Insights** can measure the number of times a post was seen – 'impressions'; the number of unique visits to a post – 'reach'; the number of times the website link was clicked, and the average amount of time followers spend on Instagram on any one day<sup>1</sup>.

<sup>1</sup> <https://www.facebook.com/business/help/1717645641840196?helpref=search&sr=4&query=insights>

Twitter has also developed a Dashboard to monitor a number of features<sup>2</sup>. For example, Twitter account owners can track the reach of their individual posts (see Figure 3a). This feature is available on every standard Twitter account for use by account owners only.

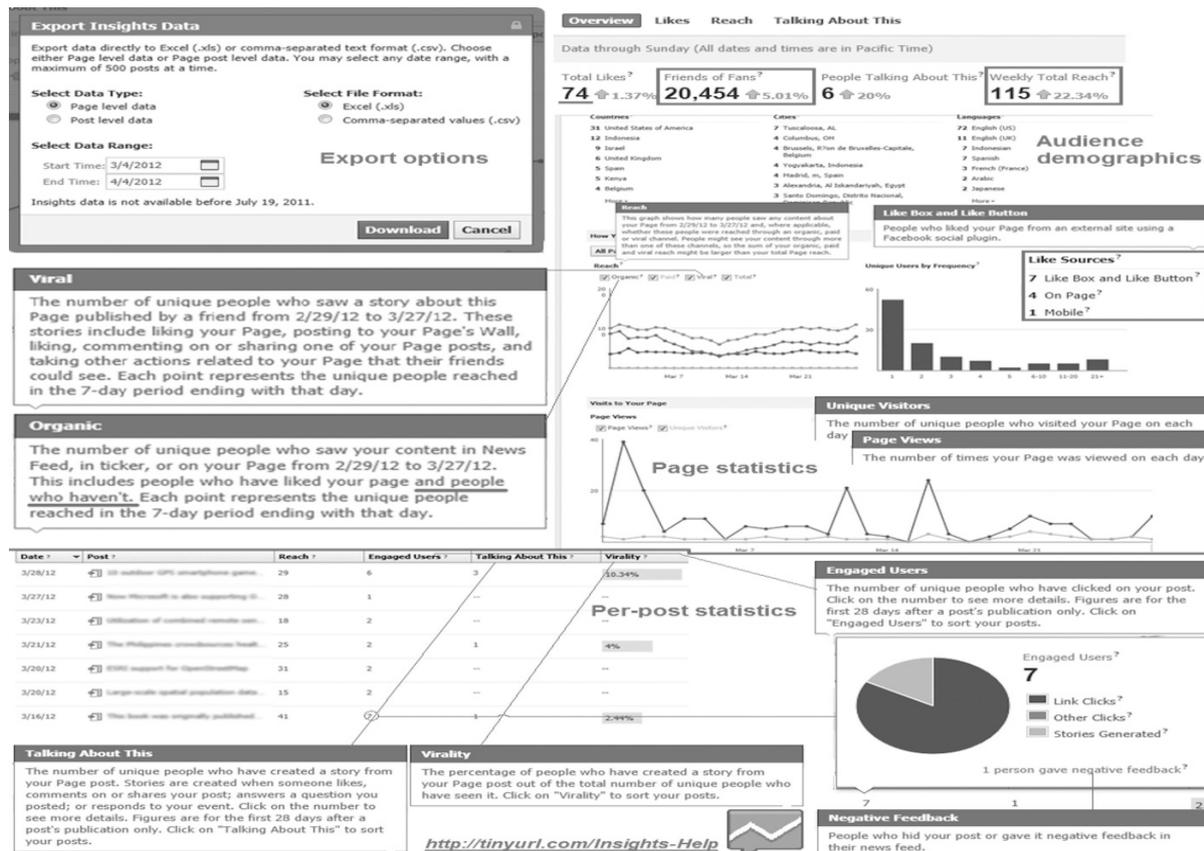
Figure 3a. Twitter activity tracker



Facebook (Page) Insights is a tool that can capture demographic information on who is visiting your Facebook page and how they are engaging with the page and its individual posts, as well as other metrics.<sup>3</sup>

Note in the Insights example shown in the screen-shot (Figure 3b) how only 74 fans (whole page 'likes') had a total of 20 454 friends ('friends of fans'), thus amplifying the total page 'reach' and exposure beyond the immediate group of page fans.

Figure 3b. Example of Facebook (Page Insights)



<sup>2</sup> <https://blog.twitter.com/2016/introducing-twitter-dashboard-0>

<sup>3</sup> [https://www.facebook.com/help/383440231709427?helpref=page\\_content](https://www.facebook.com/help/383440231709427?helpref=page_content)

## 2. Using social media for sexual health – identifying your goals

It is best to consider social media as a means to an end, rather than as an end in itself. There are many different ways to use social media, some of which are listed below in order to stimulate campaign managers' thinking about how its use can help meet different needs in their community.

### Promote services

Social media can be used to raise awareness about sexual health clinics, including their location, services offered, opening hours, and tips on how to take advantage of services while maintaining privacy and anonymity. Ratings functions can also be incorporated so service users can share their experience of the facility, which allows other users to make informed choices, and enables the facility to improve, on the basis on feedback.

### Provide information, link to information sources

Social media platforms are generally not suited to long messages, but brief messages can be used to announce the availability of new interventions, to debunk myths, and to link to webpages that provide in-depth information and evidence.

### Promote specific behaviour

Sharing posts about safe-sex behaviour, especially from users who are trustworthy and supportive, can help normalise this type of behaviour and raise the profile of underused interventions.

### Fight stigma

By promoting discussion of HIV and other STIs, social media can help lift the shroud of secrecy surrounding sexual health matters, facilitating an environment for the open discussion of taboo issues and making it easier for people to seek help and support where appropriate.

### Raise awareness of sexual health issues in general

In contexts where the importance of sexual health is under-valued, or the subject is taboo, generalised messaging on the topic can raise interest and awareness, to help mainstream the idea of sexual health as a routine aspect of self-care.

### Promote growth of mutual support networks among at-risk groups

A distinctive aspect of social media is the ability to connect people through networks of mutual interest. Creating and maintaining groups devoted to sexual health issues in at-risk groups can create a safe and supportive space for users to seek information and share their experiences.

### Reactively answer questions about sexual health posed by users

Social media that incorporate a (private) direct-messaging function can be used to receive and respond to questions on sexual health from users who may be embarrassed or otherwise unable to seek information in person or by posting public replies or comments on posts (Facebook, Instagram and Twitter reveal the usernames of those who reply to/comment on posts). Online fora can be used in a similar way, with the key difference that the questions and answers are publicly visible (although anonymity is still possible).

### 3. Key limitations of social media

It is important to be aware of the limitations of social media, as well as its benefits. First, using social media to broadcast a message does not automatically make the message youth-friendly. The message must be adapted to suit the audience and the medium. As discussed below, the distinctive characteristics of social media may best be leveraged by promoting and encouraging user-generated content, rather than transposing a traditional marketing campaign into the format of a social media post. It is wise to involve young people directly in the process of developing social media communications strategies, otherwise the resulting messages may be stilted and ineffective.

Second, the social media user experience is designed to be enjoyable. Therefore most platforms have methods for actively promoting content relevant to each user's distinct interests and filtering out material that is not of interest. Consequently, the audience that will receive a message on sexual health often consists of individuals who are already interested in sexual health. So, while social media can provide a channel to young people, it is not ideal for reaching individuals who are not already receptive to the message being promoted.

Third, social media messages must be brief, so it is important to take care when crafting messages to ensure that they will not be misconstrued or accidentally result in harmful behaviour. Although social media may seem informal, messages must still meet a high ethical standard, be based on good evidence, and be pitched at the average (health) literacy level of the target audience. Furthermore, copyright issues must be handled appropriately if using copyrighted third-party material, particularly photos and videos.

Fourth, social media can be susceptible to 'trolling', in other words, strangers making intentionally antagonistic comments on a sexual health message. This can be prevented by disabling the comments function, which is possible in some but not all social media. However, comments are a fundamental part of what makes social media truly 'social', and disabling them undermines this interactive element. An alternative approach to trolling is to invest in a communications officer who can moderate comments and delete those that are irrelevant, misleading, offensive, or otherwise undesirable.

Fifth, privacy settings vary across social media. Where stringent privacy measures are in place, they may limit access to online communities that managers may wish to observe and/or communicate with. Where privacy measures are lax or absent, this may expose private conversations, or make it easier for trolls to find and undermine health promotion messages. It is important to be fully aware of privacy settings for all social media platforms being used for health promotion, and select settings appropriate for your goals.

## 4. Comparing institutional versus user-generated content

While the text and imagery of traditional health promotion campaigns can easily be transplanted to the digital space, this does not fully capitalise on the social and interactive aspects of social media. For a more engaging campaign, it is best to involve your organisation's staff and clients/target population in sharing their own stories, even though this may come at the cost of not having control over the messages.

### User-generated content

- Incomplete control over message
- Content is personal and engaging
- Amateur photography gives the impression of authenticity

### Institutional content

- Full control over message
- Content is impersonal
- Professional photography
- Product or institutional branding

### 4.1 Examples: Facebook

Figure 4. Examples of posts on Facebook from NGOs and sexual health services



Content from organisations promoting sexual health tends to resemble traditional advertisement techniques, transposed to the digital space of Facebook, as shown in Figure 4. While this does expand the reach of a message beyond traditional media, it does not fully capitalise on the distinctive qualities of social media, such as personal connection and user-generated content. Furthermore, since Facebook's algorithms endeavour to tailor content to the user's interests, messages of this type are likely to reach those who are already engaged with sexual health issues, largely missing the ideal target audience (unless the messages are promoted through paid Facebook ads to target the desired audience demographics – e.g. gender, age group, relationship status, education and location<sup>4</sup>).

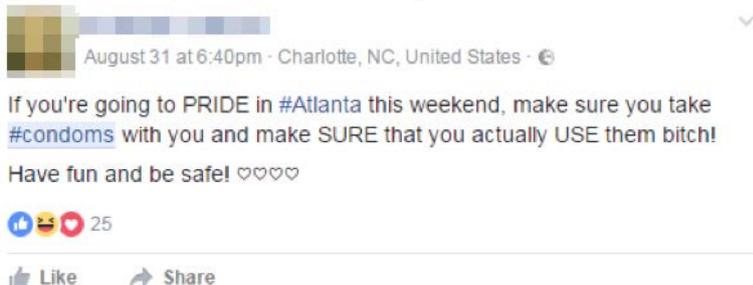
<sup>4</sup> See <https://www.facebook.com/business/a/online-sales/ad-targeting-details>

**Figure 5. Examples of negative user-generated content on Facebook**



User-generated content has the advantage of being engaging and authentic, but user-generated messages may be counterproductive to programme goals. The first example in Figure 5 (top left) describes condoms as an authoritarian imposition, and implies that their non-use is a desirable rebellious act. The second example (right) is posted by a user whose account appears to be impersonating a celebrity, and links to third-party content promoting the idea that women prefer unprotected sex. The third example (bottom left) stigmatises women who carry condoms, claiming it is a sign of promiscuity. Note the use of the eggplant emoji in the second and third examples to signify sex.

**Figure 6. Example of positive user-generated content on Facebook**



The post in Figure 6 encourages condom use in the context of an LGBTQ<sup>5</sup> pride event in the United States. In general, there appears to be more engagement and positive messaging on sexual health within the LGBTQ and MSM communities, than in similar themed content for heterosexuals.

## 4.2 Examples: Instagram

**Figure 7. Example of commercial content on Instagram**



<sup>5</sup> LGBTQ - Lesbian, Gay, Bisexual, Transgender, Queer

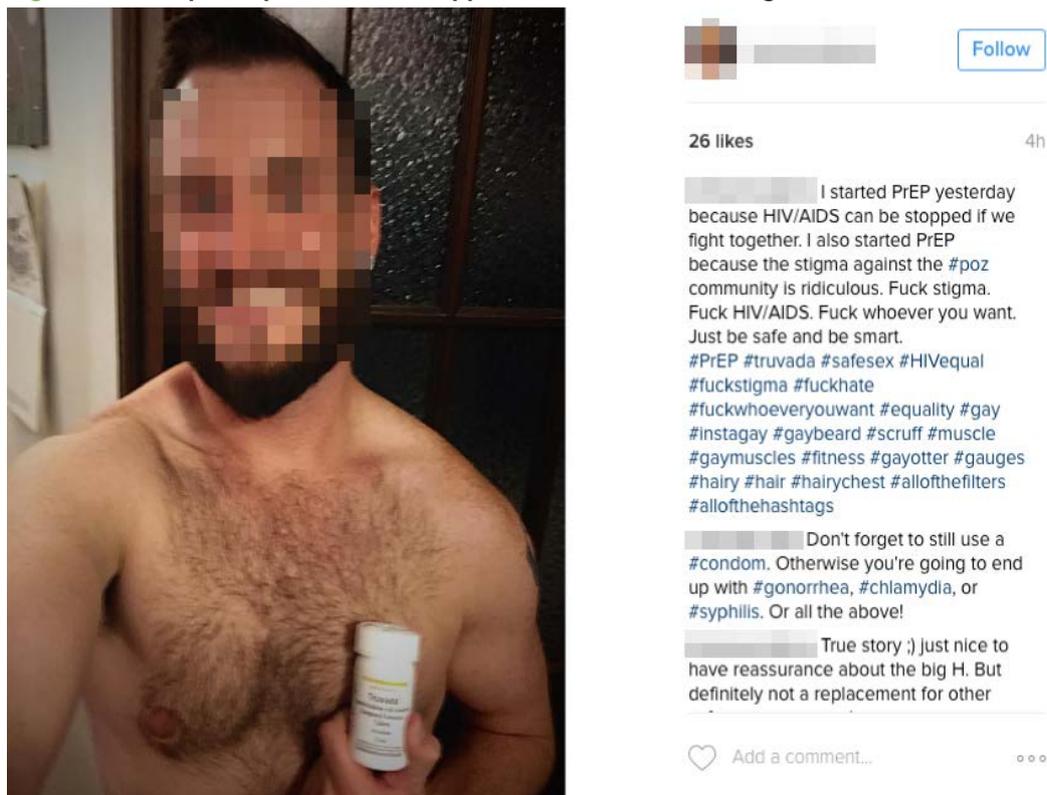
A significant amount of safe sex messaging on Instagram comes from accounts dedicated to marketing a particular company's sex-related products, such as condoms and lubricant. As shown in Figure 7, these posts are often professionally produced and are not sexually explicit – although they are often suggestive, they do not usually show nudity. This probably makes their content more acceptable to a wider range of audiences with varying sensibilities. However, they are generally restrained and impersonal, and their overt commercial intentions may make them less engaging to young people who use social media to connect with real people, express themselves and evince political opinions about sexuality, which corporate postings avoid.

**Figure 8.** Example of 'memes' on Instagram



One of the most common forms of expression on social media is the sharing of 'memes', or images overlaid with text, often with a humorous message and/or a quotation from a famous personality. Memes are easy to create, but often they are simply shared by copying a previous poster's meme and re-broadcasting it to one's own followers, meaning that the original creator of the meme is not known or credited. Although somewhat impersonal (since the person posting is sharing someone else's creation, without a personal story involved), posting a meme typically denotes endorsement of its message. In the example (Figure 8), a humorous quote from Woody Allen is employed against a suggestive backdrop. Although a post like this might be dismissed as a casual joke, it implicitly promotes masturbation as a safe sexual practice, and moreover as an expression of self-love, made explicit in the text added and the hashtags used.

**Figure 9. Example of personalised supportive content on Instagram**



Personal messages are considered most powerful, for several reasons: they facilitate connection and empathy among social media users; they provide an authentic mouthpiece for public health ideas, and they facilitate supportive messages among groups, such as MSM or the self-identified gay community online. Figure 9 shows someone sharing his personal experience of starting Pre-Exposure Prophylaxis (PrEP), using a message of togetherness to promote this method of safer sex between sero-discordant couples. Moreover, he explicitly decries stigma against PrEP and encourages its use. The photography is simple but highly effective: he holds the pill bottle against his naked chest, associating the intervention with sexual vitality, and his smile conveys a defiant positivity in the face of a potentially distressing topic. The photo is natural in appearance<sup>6</sup>, and even though the person is relatively attractive, the photo does not promote the unattainable standards of beauty associated with heavily-edited sexual imagery or professional model photos.

**Figure 10. Example of feminist content on Instagram**



Source: Instagram feed of The Center for Sexual Pleasure and Health: Available at: <https://www.facebook.com/thecsph/app/267091300008193/>

<sup>6</sup> Pixelated here for confidentiality reasons.

Feminist imagery and messages are also a common theme on social media. Figure 10 shows a post from an impersonal social media account promoting a variety of political messages related to sex and gender. This post encourages women to feel positive about their vulva, and not to judge their bodies against the standards set by pornography and other images of female sex organs which normalise a particular pubic hairstyle and anatomy, or may be photographically or even surgically altered to conform to perceived social preferences. The use of cartoon images rather than photographs helps avoid the objectification of the female genitals, which would distract from the poster's message. This also avoids the possible interpretation of the post as a form of pornography, making it easier for other users to re-post the image without fear of offending followers with more conservative social mores.

### 4.3 Examples: YouTube

Popular YouTube personalities straddle the divide between institutional and user-generated content. In some ways they are peers to their audience, but they also present themselves as authority figures and role models.

These people, sometimes known as 'vloggers' (video-bloggers) or 'YouTubers' can be valuable messengers. Programme managers may wish to partner with vloggers in their community to share a message about sexual health. Alternatively, they can encourage younger outreach workers to try their hand at vlogging as a way of expanding their outreach audience. Figure 11 shows Hannah Witton (left) and Laci Green (right), both active vloggers on the subject of sexual health.

**Figure 11. YouTubers talking about sexual health**



Green was one of the first people to bring sexuality education to the internet. Since its inception, her channel has gained over a million subscribers and educated many. She covers everything sex/sexuality related from differently shaped labia to prostitution to proper condom use. She also has an MTV show called "Braless", which just began its second season.

#### Box 2. Sexting and cyberbullying

'Sexting' is a portmanteau of the words sex + text; the act of sending someone explicit photographs or messages, usually via mobile phone but also via other digital devices. This may be done with or without the intention of having a personal sexual encounter.

'Cyberbullying' is bullying that takes place via electronic technology and commonly uses social media to identify and persecute the target. Electronic technology includes devices and equipment such as mobile phones, tablets, computers and digital communication tools, including social media websites, text messages, other direct messaging systems (which can include the sharing of video and image) and websites.

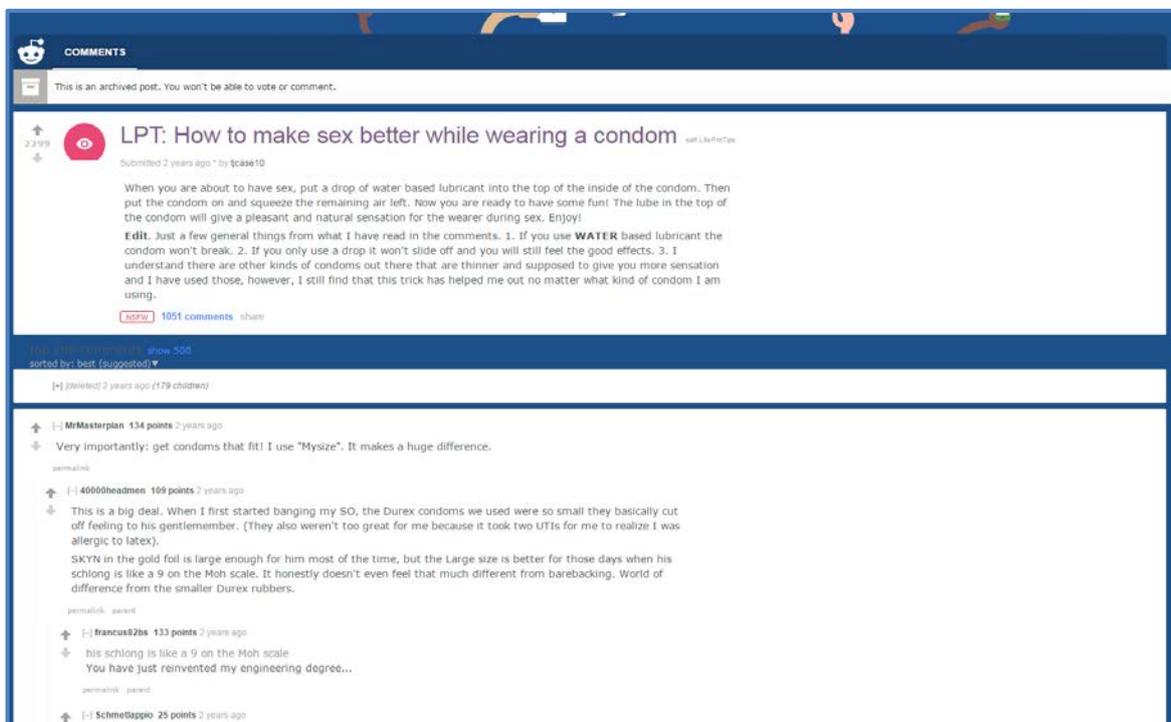
## 5. Anonymous social network sites

Anonymous social network sites, such as Reddit and Quora, allow for more insightful narratives than other social media platforms where individuals are identifiable. These sites, which allow anonymous discussion of a wide variety of topics, are digital social spaces. Young people (remaining anonymous but sharing information on their age and gender identity) can use these sites to ask questions about sensitive topics, such as sexuality and intimate relationships, in ways they might not be able to do in person with parents or peers. Another factor encouraging teenagers and young people to use anonymous social media is the increased parental vigilance on social networking sites such as Facebook which can make them self-conscious about what they post on social media [4].

### 5.1 Example: Reddit

Reddit is a social media platform that aggregates news and threads of anonymous discussions around any topic. Content entries are organised by area of interest called 'subreddits'. Themes can be voted on by users based on their relevance. Although anonymous, users can share information about themselves such as their age and gender identity, and reading discussion threads can yield insights into the narratives young people use to discuss sexual health. In such discussions, such as the one depicted in Figure 12, young people tend to discuss sexual health and condoms in terms of their intimate relationships rather than in an abstract context. Reddit can also be used as a platform for live Q&A sessions, known as 'AMA' or 'Ask Me Anything'.

Figure 12. Reddit thread discussing ways to wear condoms comfortably



## 6. Advanced techniques: advertisements, gamification and dating app integration

### 6.1 Paid advertisements

Paid advertisements can be placed on Instagram, Twitter, Facebook (see Box 3), and other platforms, as an alternative to propagating messages for free as a user. The advantage of paid advertisements, which sometimes take the form of 'promoted posts', is that they can be targeted to a specific audience based on their interests, demographics, and other information they share online. This provides a solution to the challenge noted in the Limitations section, of how to reach users who may not be interested in sexual health, since non-promoted posts will tend to be invisible to those who are not interested in the topic.

#### Box 3. Facebook ad case study [5]

Love, Sex, and Choices (LSC) is a 12-episode soap opera video series developed to reduce the risk of HIV among black urban women in high-risk groups. A video guide commentator was added to offer insights at critical dramatic moments. An online pilot study evaluated acceptability of the Guide-Enhanced LSC (GELSC) and the feasibility of Facebook advertising, streaming to smartphones, and retention. Facebook ads targeted high-HIV-prevalence areas. In 30 days, Facebook ads generated 230 screening interviews: 84 were high-risk, 40 watched GELSC, and 39 followed up at 30 days. Recruitment of high-risk participants was 10 per week, compared to seven per week in previous field recruitment. It was feasible to recruit young urban women from a large geographical area via Facebook and to retain the sample. The reach was extended to at-risk women by streaming to mobile devices.



Source: [5] <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4470490/>

Advertisements also offer advanced analytical possibilities, provided by the social media platform itself. For example:

<https://www.facebook.com/business/products/ads>

<https://business.instagram.com/advertising>

<https://business.twitter.com/en/help/troubleshooting/how-twitter-ads-work.html>

<https://www.google.co.uk/intl/en/ads/>

### 6.2 Gamification

Gamification is the enhancement of educational or other media through the incorporation of game-like elements (such as scorekeeping, rules-based competition and structured achievement milestones) to increase interactivity, engagement, and motivation. A wide variety of gamification techniques including avatars, achievement-based rewards, and social network sharing buttons have been implemented on sites that include educational content on sexual health and an STI symptom checker (see Figure 13)[6].

**Figure 13. Example of gamification technique [7]****'What should we tell the children?' – Game summary**

The game provides parents with realistic scenarios of sex and relationship communication with their children, all based around a virtual house. Once registered, players are able to select from two versions of the game – one for parents of younger children (aged 5–9 years) and one for older children (aged 10–14 years). Both versions have similar content and the same gameplay, with slight variations in the dialogue to reflect the nature of conversations at different ages. The game is a first-person role play, with players proceeding through rooms of a virtual house and talking to 'their children'. In each room they are faced with a different situation, such as children asking awkward questions or finding objects of concern in their room (e.g. messages on social networking sites). Scenarios include:

1. Child asks parent to explain a documentary in which lions are mating.
2. Parent finds variety of items (e.g. sexualised magazine, social media messages) in child's bedroom.
3. Child asks parents about same sex relationships.
4. Child asks about parents arguing.
5. Child discusses emerging feelings for someone at school.

In each situation, the player must choose how to respond and the scenario evolves accordingly, with the child reacting to the parents' choices. Scenes are interspersed with short quizzes to increase knowledge and raise awareness of key issues. Players receive feedback on their choices at the end of each scene and full feedback at the end of each game, with tailored advice on how to improve their skills. Voice-overs for the child characters and atmospheric music have been added to make the scenarios more engaging. All spoken text is displayed on screen so the game can be played with or without sound. The game takes approximately one hour to complete, but can be played at the parent's chosen pace.

Source: [7] <https://bmcpublihealth.biomedcentral.com/articles/10.1186/s12889-015-2545-0>

Figure 14. Screen-shot of an online game encouraging users to learn more about sexual health and STIs [6]



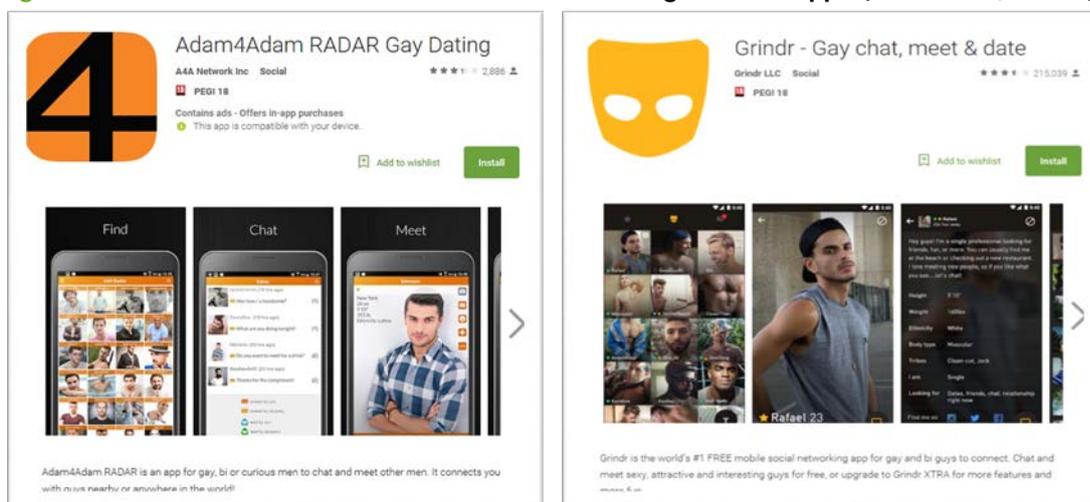
Source: <http://sjekkedeg.no/> (Reproduced with permission)<sup>7</sup>.

Gamification is an advanced approach to health promotion that can be integrated into social media campaigns. Games can be made available to play online, or published in mobile app stores so that users can download the game and play it on a mobile device. However, gamification requires significant behavioural expertise and computer science skills to be implemented effectively. Moreover, games produced for public health purposes must ultimately compete for attention with commercially-produced games designed for entertainment. One solution is to seek partnerships with pre-existing online games and platforms, such as Second Life, to incorporate sexual health educational material into the player’s experience, rather than trying to promote an entirely new game – e.g. the Sexual Health SIM that was previously available in Second Life for a number of years: <http://healthcybermap.org/slsexualhealth/>.

### 6.3 Dating and hook-up apps

Dating and hook-up apps are a genre of social media particularly relevant to sexual health programmes. These apps, designed for use on mobile devices, combine GPS and text-messaging to help users find partners in their area, contact them and potentially meet them. Different apps have different social connotations: some are designed for people looking for a long-term relationship, while others are more apt to facilitate short-term sexual encounters.

Figure 15. Screen-shots of the Android versions of two geo-social apps (A4A Radar, Grindr)[8]



<sup>7</sup> See also an additional case study recently made available on the use of social media for sexual health promotion: Gabarron E, Fernandez Luque L, Schopf TR, Lau AYS, Armayones M, Wynn R, et al. Impact of Facebook Ads for Sexual Health Promotion Via an Educational Web App: A Case Study. International Journal of E-Health and Medical Communications Vol 8, 2, April-June 2017 [11]

## 7. List of guiding principles

### Reframe your concept of 'evidence'

When it comes to digital media, current concepts regarding the hierarchy of evidence just do not work in the context of public health. The social media space is fast-paced and constantly changing. It looked very different two years ago and will undoubtedly have changed its appearance within another two years.

The central research challenges for programme managers, academics and other investigators are what constitutes evidence in such a rapidly changing field and how change should be measured. Our studies using netnography and on-line, in-depth interviews identify many of the problems researchers face when entering this territory. Challenges related to formative research online include the need to navigate a number of social media platforms and ethical issues, such as privacy and access to personal information online.

### Go to where young people are

Analytics can be used to determine where an audience is going online and to find ways of meeting them there. Interventions can take many forms and demand a wide array of resources. Most advisors suggest that you 'start simple, make connections, build audiences, ask questions and adapt' [10].

Understand your audience and their habits. Do formative research through focus groups, interviews, questionnaires, online polls, etc. Aim to gain insights into young people's social media habits and preferences, as well as key issues and concerns relating to sexual health. Identify the media platforms they use, the sites they visit, the apps they download and the games they play. Remember that multiple platforms are used for different objectives – identify what different media platforms are used for and in which context.

### Enhance your listening skills

There are a number of Internet tools and apps available to make it easier to listen to what young people are saying. There are free tools and those for which a fee is charged, to help monitor all aspects of social media, depending on your needs. If you are just starting out, we recommend you try a free tool so you can ascertain which functions are most useful before investing in expensive software. For example, Tweetreach helps identify the reach and exposure of a hashtag, while providing auxiliary information on hashtag users and timing.

Analyse what is being said: online environments are not neutral; what narratives are present? Is it fear? Pleasure? Racism? Homophobia? How can they be heard in a particular social environment? What is bringing people together and what is divisive?

### Local context is crucial

Consider the local social realities of your country or community before choosing your digital media strategy. Make sure you target the most-used platforms locally, remembering that not all communities have equal access to the Internet and mobile devices (e.g. poor or vulnerable populations.)

### Be willing to experiment

Try new approaches. If something does not work, think about how to change it so it will. Keeping records and reporting findings will help you determine what works best for you and your audience, and each opportunity becomes a reference to build on. If you are starting out and finding resistance to using social media among your communication team or stakeholders, it may be helpful to adopt low-risk solutions first before building on your successes later. Products such as podcasts and videos are easily downloadable, and can be accessed from partner sites and posted on your website.

Although social media is by no means the only solution to successful communication, it is important that you give it the attention it deserves.

### Encourage participation

It is increasingly important for organisations to adopt a digital culture. Sometimes this requires a culture change as many healthcare organisations are still catching up in terms of their awareness of the value of digital and social media. However, the quicker the whole organisation embraces the potential benefits that digital media has to offer, the better. This process is widely referred to as digital transformation. This transformation can be catalysed by issue-specific initiatives such as using social media to promote and support STI/HIV prevention, or by demonstrating successful, practical applications of new digital culture.

Tools, help and ideas on some of these methods for engaging staff are available here:

- Will Barker's internal communications template  
[http://www.skillsforhealth.org.uk/images/toolkit/ch4/Internal\\_social\\_media\\_update\\_template.pdf](http://www.skillsforhealth.org.uk/images/toolkit/ch4/Internal_social_media_update_template.pdf)
- How to turn your staff into a social media army  
<http://www.fastcompany.com/3053233/hit-the-ground-running/how-to-turn-your-entire-staff-into-a-social-media-army>
- 5 Ways to get your entire company on board with social media  
<http://www.socialmediaexaminer.com/5-ways-to-get-your-entire-company-on-board-with-social-media/>

## Be opportunistic

Bring your message to successful existing platforms, and join in on trending topics. If your social media analytics tell you that there is a trending topic that can be made pertinent to sexual health, share a message connecting the issue to your own work, and be sure to use hashtags from the topic that is trending. This will make your content visible to everyone following the topic, giving it much more attention than if it were only broadcast to your followers. It might even bring new followers to your channel as well.

## Create portable content

Develop portable content, such as mobile applications and online videos, that can easily extend reach beyond your website to provide credible, timely, and accurate content for partners and others who want to help spread your health messages.

Make it easy for people to share your messages and become health advocates (empowering the public and facilitating education for the people by the people). This can be done using social media sites such as Facebook and YouTube that encourage sharing among users.

## Engage young people as developers and co-creators early on

Early end-user involvement has many advantages in the development of social media strategies. It builds positive anticipation and support for the resulting products and programmes, as well as fostering a sense of ownership because users' opinions will have helped to guide their development and implementation. As 'digital natives' young people are in a position to offer clear and useful advice on development and distribution strategies.

Young people can help create and disseminate 'portable' materials and messages rapidly and inexpensively. They can disseminate content to other recipients through email, social networking websites, mobile phone applications, or digital media-dedicated websites such as YouTube. Some constituents and media content recipients may perceive this horizontal, or peer-to-peer, communication as more reliable than vertical or patronising health messages from experts.

## Aim to protect science and personal resources

Our research has identified two main concerns associated with the use of social media in sex and sexual health promotion and prevention interventions. First, the information accessed and/or received may be inaccurate or misleading. For example, young people may have poor health literacy and search for health-related information using slang terms which may lead to less credible websites and social networking conversations.

The second main concern associated with the use of social media to learn about sex and sexual health is that young people may rely on this form of information, rather than seeking advice from the people in their lives (parents, teachers, physicians, community members) who can help put information into context and potentially provide on-going support.

These challenges are opportunities for public health managers to position themselves as content developers/certifiers and help provide access to well-vetted, community-based resources such as peer groups, information sources, and clinics.

## Communicate clearly and adaptively

Wherever sexual health posts on social media are likely to influence behaviour, it is important to provide clear and full information, ideally linking to evidence-based sources if there is limited space to include information within the post itself. Where appropriate, messages should be adapted to suit the medium and audience by incorporating humour. Moreover, it is clear that many audiences engage with sexual health information primarily in the context of sexual desire. While it is not always appropriate, sexually suggestive content may greatly increase users' interest in sexual health posts. Although it may be difficult to take these 'desire dynamics' into consideration, they do have significant potential value.

An additional aspect of many social media platforms is the ability to send direct messages privately between users. This can be done to answer questions on sexual health submitted by users, but it is important to have clear policies on how to provide full information, and to be reliable. For example, it should be made clear to users when Q & A services are available, as if users do not know when their question will be answered, they will probably not bother asking it.

### **Remember: it is only social media!**

Social media can raise awareness, increase a user's knowledge of an issue, change attitudes and prompt behaviour change in dynamic, personalised and participatory ways. However, as with traditional communication, social media alone may not be able to meet all of your communication goals. It is still vital to take into consideration links between different media, as well as using social media to drive target audiences to other information sources and services.

## 8. Further resources

[https://www.cdc.gov/socialmedia/tools/guidelines/pdf/socialmediatoolkit\\_bm.pdf](https://www.cdc.gov/socialmedia/tools/guidelines/pdf/socialmediatoolkit_bm.pdf)

<http://ecdc.europa.eu/en/publications/Publications/social-media-strategy-guide-for-public-health-communication.pdf>

<http://ecdc.europa.eu/en/publications/Publications/translation-is-not-enough.pdf>

<http://ecdc.europa.eu/en/publications/Publications/impact-smartphone-applications-sti-hiv-prevention-among-men-who-have-sex-with-men.pdf>

<http://www.skillsforhealth.org.uk/toolkit-download>

### ECDC digital toolkits

ECDC digital toolkits on using Facebook, Twitter, YouTube, Google and Mobile Apps for effective HIV prevention will soon be available via the Terence Higgins Trust (<http://www.tht.org.uk/>) – publication pending 2017.

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**European Centre for Disease  
Prevention and Control (ECDC)**

Postal address:  
Granits väg 8, SE-171 65 Solna, Sweden

Visiting address:  
Tomtebodavägen 11A, SE-171 65 Solna, Sweden

Tel. +46 858601000  
Fax +46 858601001  
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