Harnessing Social Media to Enhance Sexual & Reproductive Health Outreach for Mississippi Youth: Launching & Monitoring the Fact Not Fiction Website



Kathleen Ragsdale¹ Laura R. Walton¹ Sydney K. Hall¹ Jamie Bardwell² Carol Penick²

Background

- Inadequate and delayed comprehensive sex ed has been linked to teen pregnancy and childbearing [Kohler et al, 2008; Stanger-Hall & Hall, 2011]
- Mississippi has the **2nd highest teen pregnancy rate** (90 per 1,000) and **2nd highest teen birth rate** (50 per 1,000) in the nation [CDC 2011; NCPTUP 2013]
- In response, Mississippi's State Legislature passed HB 999 in 2011, which required schools to adopt abstinence-only or abstinence-plus sex ed in 2012
- Under HB 999, sex ed requires parental consent, sex ed content is restricted (e.g., condom use demonstration), and sex ed is not required to be comprehensive and medically accurate [SIECUS, 2012]
- Yet in a randomized survey of Mississippi parents (N=3,600): 92% endorsed age-appropriate sex ed, 90% endorsed birth control instruction during sex ed, 72% endorsed condom instruction during sex ed [McKee et al 2011]

FactNotFiction: Development

- To address HB 999 gaps, the Women's Fund of Mississippi launched the FactNotFiction website in OCT 2012 to provide comprehensive and medically accurate info to Mississippi youth
- We anticipated a strong mobile audience for the website because 91% of
 Mississippi households with children under age 18 have internet access, and
 75% of 12-17 yr olds now own a cell phone [Beaulieu & Gallardo, 2012; Lenhart et al 2010]
- However, the web developer decided to forgo a mobile responsive site based on experience in California that low income youth have internet-capable cell phones but not necessarily smart phones

Evaluation to Identify Challenges

- In DEC 2012, we reviewed Google Analytics data to evaluate of the first three months of the site using 5 Key Performance Indicators (KPIs): 1) visitors per day, 2) geographic distribution of visitors, 3) duration of visits, 4) percentage of mobile phone visitors, 5) bounce rate
- From OCT-DEC 2012, the site had 8,848 visits, of which 88% were new visits and 64% were Mississippi residents. Visits averaged 0.47 minutes on 1.5 pages
- Top 3 devices used by visitors included 2 smart phones—Apple iPhone (N=3,600) and Samsung SCH-I500 Fascinate (N=873)—and Apple iPod (N=923)
- Desktop users' 54% bounce rate was in 40-60% acceptable range [Google Analytics, 2013] However, mobile phone users' 79% bounce rate was unacceptably high
- Analytics had identified two key challenges:
 Challenge 1: High bounce rate among mobile phone users
 Challenge 2: Site was too static; first-time visitors were not returning

Results: Addressing Challenges

- Outcome 1: Re-examined developer's assumption that Mississippi youth don't have smart phones. Redesigned site to be mobile responsive for smart phones and launched 8 April 2013
 - Outcome 2: Converted static site into Tumblr site to create dynamic environment and launched on 5 April 2013
 - RESULTS: ► From APR-JUL 2013, total visits were 16,163 (up from 8,848 visits in OCT-DEC 2012)
 ► 26% were returning visitors (up from 12% in OCT-DEC 2012)
 - ► Visits averaged 1.03 minutes (up from 0.47 minutes in OCT-DEC 2012) ► Monthly visits in JUN 2013 was 8,647 (up from 4,201 in OCT-DEC 2012)
 - ► FactNotFiction's Facebook page now has 14,302 likes—97% from 13-24 yr olds in Mississippi

Conclusions

- When using social media to deliver sex ed to youth, the site outreach must be closely monitored with analytical tools to evaluate effectiveness
- Researchers must be able to quickly and effectively respond when gaps in outreach are identified

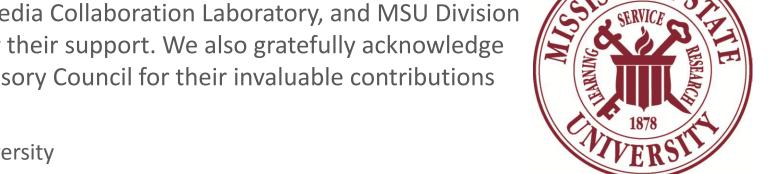
Implications

 Research on effective ways to deliver public health education through the strategic use of social media is still in its early stage. Lessons learned from this case study of the initial design and launch of FactNotFiction.com and responses once gaps in the site's outreach were identified—add to this growing body of knowledge



Acknowledgements

We gratefully acknowledge Kina L. Johnson of the Mississippi State Department of Health, Abby Rosenstein of Advocates for Youth, Arthur G. Cosby of the Social Science Research Center (SSRC) of Mississippi State University (MSU), the SSRC Media Collaboration Laboratory, and MSU Division of Agriculture, Forestry & Veterinary Medicine for their support. We also gratefully acknowledge The Ramey Agency and FactNotFiction Youth Advisory Council for their invaluable contributions to the project.



1 Social Science Research Center, Mississippi State University

2 Women's Fund of Mississippi