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## Utilizing Social Media to Improve Health Education: Should We Hit Like?

Audrea Bose

*UVM Larner College of Medicine*

Naira Goukasian

*UVM Larner College of Medicine*

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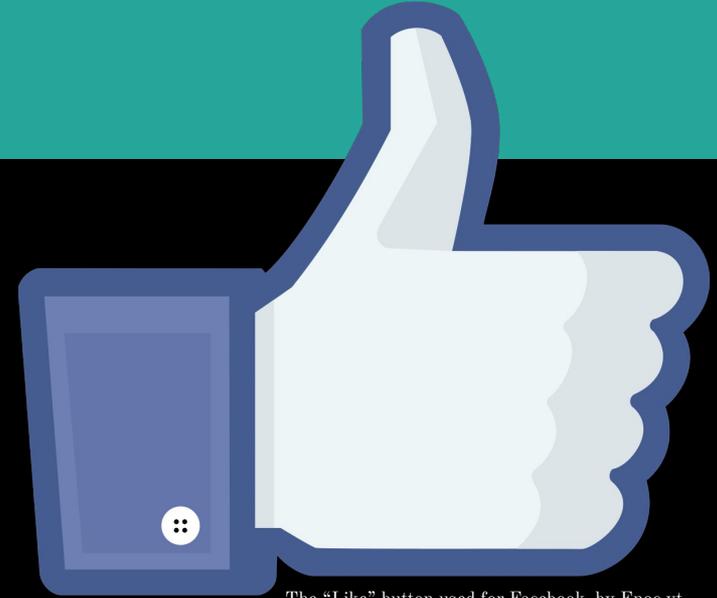
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# Utilizing Social Media to Improve Health Education:

## Should We Hit Like?



The "Like" button used for Facebook, by Enoc vt

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Brookfield and New Milford, CT

Audrea Bose & Naira Goukasian (February 2020)

Dr. Cornelius Ferriera

# Problem Identification

Social media presence in day to day lives is expanding, especially among younger generations. Preventative medicine is becoming the forefront of patient care. Where do the two meet?

Healthcare preferences have been shown to vary by age. The younger generation is essentially ready for virtual healthcare access (1).

In our clinical sites, we noticed a common theme of patients being unaware of preventative health practices, risk factors for diseases, or about diseases they already have. Many patients rely on their doctors for this information, but when they don't have immediate access to their doctor, don't regularly see their PCP, or maybe just forget what they were told, it can be difficult for people to find easily accessible and accurate health education.

We also noticed that 'accessibility' is different for everyone and with the rapidly developing technological age, we wanted to analyze how this difference is stratified, based on age in these communities, and if using social media would be an acceptable method in this community to increase health education in all ages. The question is, can we target the masses virtually and effectively with minimal cost? And is this something patients want?

# Cost Consideration

6/10 Americans live with at least one chronic disease, like heart disease, stroke, cancer, or diabetes. These are the leading causes of death and disability in America, and it is the leading driver of healthcare costs (2).

Chronic diseases and mental health account for 90% of the nation's \$3.5 trillion in annual healthcare expenditures (2).

Time spent by providers trying to educate patients and the overall cost for their time is also important. Spending on physicians and clinical services increased to \$694 billion in 2017 (3).

Ideally, the goal is to save healthcare costs in the long run with widespread knowledge of preventive medicine through social media. This could potentially cost money to implement, but will result in a net gain in the future from decreased healthcare costs.

# Community Perspective

“I don’t use social media because it is too hard to use, but if people want to use it, there’s nothing wrong with more education.” - Community Member

“I’m on [social media] a lot anyway, so might as well learn how to take better care of myself, as long as it’s correct information.” - Community Member

“I can see using social media to educate my patient on health issues being effective if the approach is a global one. Most of my patients know how to use a global search engine like Google and if there was a link that they can easily access to get to the social media page without having to create or log into an account, then I think this would be a great approach.” - Healthcare Professional

“Patients are consumers, paying a lot of money for healthcare, and what are they getting out of it? More and more patients are looking at the internet to see where they can go to get the best care that is most affordable. Given this approach, I can see patients being attracted to entertaining, but educational videos.” - Healthcare Professional

# Intervention and Methodology

Analyze what social media sites/websites are commonly used based on age and if members of this community would see a benefit in utilizing social media for health education by having them complete a survey.

Gathering this information will:

1. Inform us how we can better target these communities based on age
2. Determining if there is a platform that can reach all generations

# Intervention and Methodology

**Health Education Survey**

**How old are you? (Circle One)**

[10-20]                      [21-30]                      [31-40]                      [41-50]                      [51-60]  
   [61-70]                      [71-80]                      [81-90]                      [91 and above]

**Do you use social media at all?**      YES      NO

If yes, which:

- Facebook
- Instagram
- Pinterest
- SnapChat
- Tik Tok
- Twitter
- Other: \_\_\_\_\_

**Is health education and learning more about health conditions, such as high blood pressure, obesity, etc.; or wellness, such as preventive care or healthy living tips a priority for you?**      YES      NO

If yes, do you have a specific preference of which social media site and why?  
\_\_\_\_\_

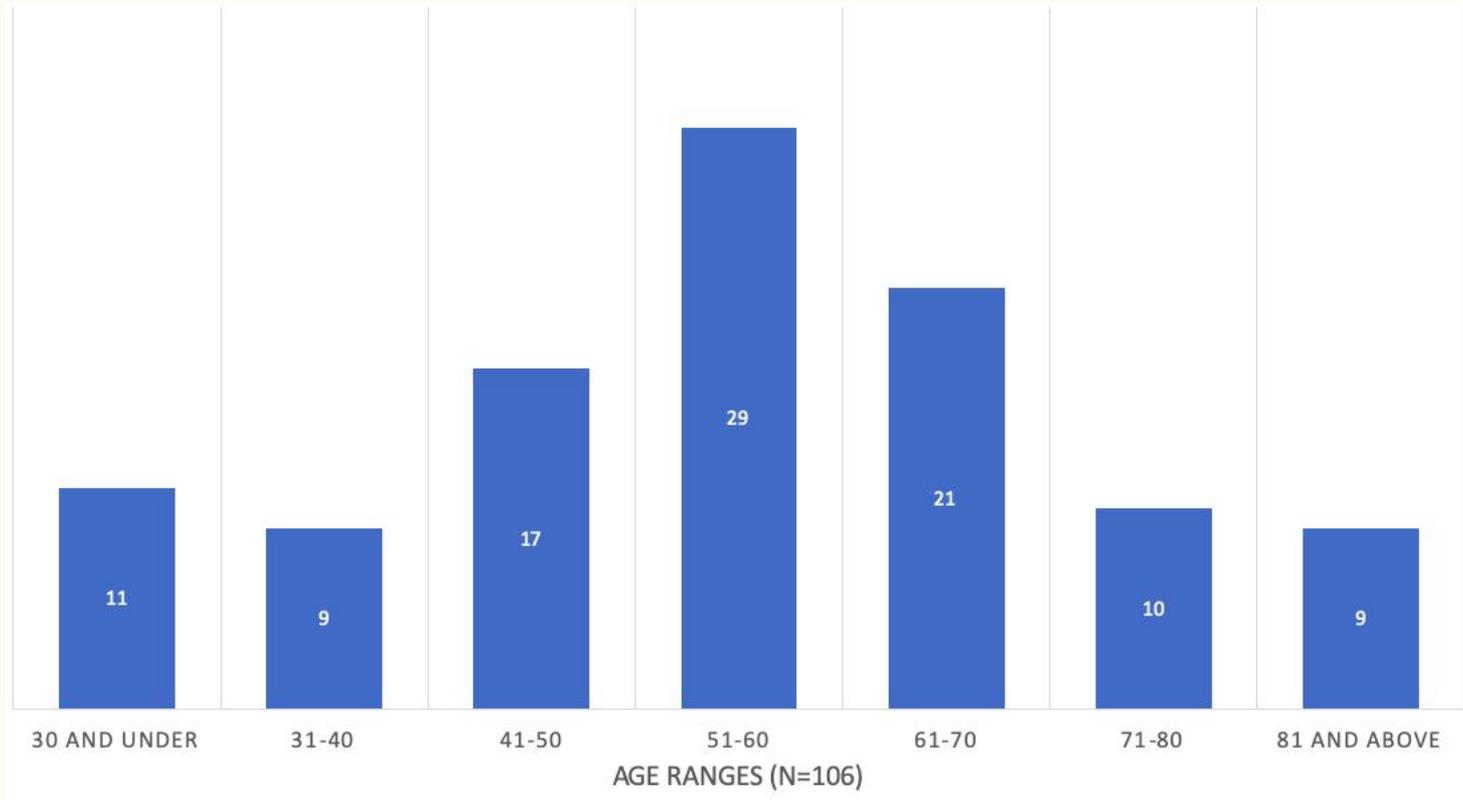
**What apps/websites do you use to obtain information about health?**

- Facebook
- Healthgrades
- Instagram
- Leapfrog
- Pinterest
- SnapChat
- Tik Tok
- Twitter
- Vitals
- WebMD
- Hospital app, website, or social media pages (for example: Danbury Hospital)
- Other: \_\_\_\_\_

**If you are not getting health information from social media or websites, where are you getting the information, if at all?** \_\_\_\_\_  
\_\_\_\_\_

**Would you find it beneficial if more health education information was incorporated in social media outlets?**      YES      NO      Why? \_\_\_\_\_

# Demographics



# Results

From our total sample of 106 individuals, 51% reported that they would NOT find health education via social media to be beneficial; of those, 52% do NOT use social media at all.

49% of individuals reported that they WOULD find health education via social media to be beneficial; of those, 88% do use social media.

- 63% of participants use Facebook, highest in 41-50 age group (82%), followed by the 31-40 age group (78%)
- The 21-30 age group had the greatest use of Instagram (64%) & SnapChat (73%) compared to Facebook use (55%).
- 50% of all participants use WebMD for health information

# Evaluation of Effectiveness and Limitations

The sample size of our study was large and this is a strength for our study, however, the sample was a convenience sample between two primary care offices and it did not capture as many of the generation X and millennials as we would like.

According to our findings, individuals that use social media are more inclined to obtain health education from such sources.

Those that have no social media would not be willing to go out of their way to create an account or log-in to access the information, so the current efforts to educate these patients would require a system that is easy and globally accessible.

We would have to ensure that health information displayed on social media sites look reputable and trustworthy, as this is one of the biggest concerns of using this strategy.

# Recommendations for Future Interventions

- Based on the data collected, it would be beneficial to present educational health topics for the public on social media platforms to help inform current social media users.
- In order to:
  - Ensure trustworthiness and reliability with users - utilize a WCHN account and site that presents verified information with a common logo used on all articles/videos/materials
  - Reach as many generations as possible - in addition to social media accounts, use a common site that all articles/videos/materials link to and is easily reached from search engines
- We recommend focusing efforts in building a social media presence, first on Facebook, since it is the most widely used social media platform over multiple generations. This includes 71-80 y/o (30%) and 81 and older (44%).

# References

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