

Social media as a health promotion tool during the mpox outbreak in the UK

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Abstract



Objectives: Explore the use of social media as a tool of health promotion during the 2022-23 mpox outbreak in the UK and identify key lessons for future epidemic and pandemic preparedness.



Methods: Qualitative online focus groups and interviews with stakeholders (N=29). Data were subject to framework analysis.



Results: Participants emphasized the role of social media in the response to mpox. They highlighted several benefits (dissemination of relevant information, tackling stigma, and advancing advocacy and collaboration) and challenges (reliance on pre-existing networks, dynamics of exclusion, and misinformation).



Conclusion: Social media played an important role in informal and purposive health promotion during the 2022-23 mpox outbreak while also presenting significant challenges regarding misinformation and exclusion. Preparedness for outbreaks must consider social media as key tools for the dissemination of messages, and for real-time collaborating on message development. Attention should also be paid to the inclusion of underserved groups.

Background

- Since May 2022 non-endemic countries have experienced **mpox outbreaks** declared as public health emergencies (1,2). As of June 6, 2023, 87,929 cases have been confirmed worldwide.
- Social media played a key role in the response** to the Mpox outbreak in the UK and the world.
- The **use of social media for health promotion** has been described as simultaneously a “unique opportunity for public health” (3) and the “defining public health challenge of this century” (4).
- In the UK, there is **ample experience of the importance of social media** in health promotion gained through long-term HIV promotion and COVID-19 (5-7).
- Research has found that social media has several benefits and drawbacks:

Benefits	Drawbacks
Foster collaboration and engagement, support community, platform for advocacy, personal experience [6-10]	“Wild west for health information” [6, p.4] and “infodemic” [5, p.1393]

- Overall, there is **no clear agreement** that supports the “effectiveness of social media to improve public health outcomes and trends” (8).

Project and methods

- A qualitative study based on four online focus groups and seven semi-structured interviews with key stakeholder groups.
- Framework analysis (9) used to organise data in areas of focus: Healthcare, Vaccination, Communications, Stigma, Experiences, and Other.

Stakeholder groups

- Activists (n=9)
- Clinicians (n=8)
- Policy actors (n=9)
- Individuals with lived experience of mpox (n=4)

Check our full report:
Responding to Mpox: Communities, Communication, and Infrastructure



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Affiliations

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Findings

Benefits

Information dissemination

In the absence of reliable Government information about mpox, social media allowed for rapid dissemination of information, including vaccination:

The massive lines for our at-risk communities to get vaccinated are an example of how social media got the word out and got people in line and ready. (clinician)



Tackling stigma

Participants with lived experience of mpox used social media to tackle stigma at the personal level:

You'd see people with symptoms [...] talking about their own experiences [...]. People felt more comfortable with that information. (participant w/ lived experience)



Advocacy and collaboration

Social media facilitated collaboration to develop messages and generated community advocacy:

We had informal links with quite a few community members who are very active on social media, so we messaged them with information for them to share. (clinician)



Drawbacks

Reliance on networks

Effective use of social media relied on pre-existing social networks and audiences.

not having a massive audience on Twitter [...] made it difficult to put out our own messages. [...] it is quite hard to reach people. (clinician)



Dynamics of exclusion

Relying on community members to disseminate messages organically to their networks via social media deepened inequalities.

people who were already connected could find the information they needed but others, who wouldn't be looped in those networks, wouldn't think it was relevant to them. (policy actor)



Misinformation

At the same time, social media also facilitated the appearance of an “infodemic” (10) where accurate and misleading or inaccurate information was widely spread or foregrounded by platform algorithms

Key takeaways

- Effective mobilization of social media in the response to mpox relied on the availability of pre-existing audiences or networks in those platforms.
- The absence of audiences made it difficult—when not impossible—for organizations to reach their intended publics via social media.
- Participants' experiences point to concerning dynamics of exclusion: responses not only relied on pre-existing networks (as we just argued) but went further to entrench those audiences.

Recommendations

- Preparedness for outbreaks of infectious diseases such as mpox must consider the role of social media as key tools for collaborating on message development and the dissemination of information.
- Organizations should allocate funding to developing their social media skills and audiences at a strategic level. This may include developing content, identifying partners, or building relationships that may be deployed during an outbreak.
- Special attention should also be paid to ensuring that audiences and collaboration are built that promote inclusion of underserved groups.

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