Going Viral: Sexual Health Education Uses New Media

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Health educators are providing sexual health information to individuals who send questions via text messages and websites. These innovative approaches are effective in reaching teens through the media they use most, enable education on how to prevent sexually transmitted infections and how to get tested, overcome limited opportunities for face-to-face education, and stretch the limited resources for public health programs.

Use of the Internet for education is commonplace. Web-based distance learning for completing college courses and high school home schooling through online classes are everyday occurrences. Some high schools are switching from banning cell phones to using them in class [3] for Internet research during discussion or polling student opinions and instantly discussing the results.¹

Since teens use the Internet and texting to learn about various topics, public health educators are incorporating these approaches into prevention programs on sexually transmitted infections and teen pregnancy. Health educators are offering sexual health education via text messages and websites, enabling users to get specific and quick answers to their questions. These innovations are an effective way to reach teens and young adults and overcome the limited opportunities for face-to-face personalized education, stretching scarce health education resources.

Teens’ use of Texting and Internet Increasing

Text messaging is growing much faster than talking on cell phones or Internet use in the U.S. More than 1.5 trillion text messages [4] were sent in 2009, increasing nearly 20 times since 2005.² By comparison, cell phone minutes used grew about 1.5 times over the same period and Internet users increased by about 12 percent [5].³ The Pew Foundation studies cell phone and Internet use, particularly in teens and young adults.

Its findings provide direction for policies on using the Internet and cell phones for sexual health education. Key findings include [6]:

- Teens owning cell phones have increased by two-thirds over the past five years; 75 percent of teens under age 18 now own cell phones [7], up from 45 percent in 2004. More than 90 percent of young adults ages 18 to 29 had cell phones in 2009.⁴
- Teens communicate through text messages more often than phone calls [7], computer messaging or face-to-face interaction. Nearly 90 percent of teens with cell phones send text messages and teens have adopted daily text messaging more readily than any other age group.⁵
- Nearly 93 percent of both teens and young adults in 2009 used the Internet [8], compared to three-fourths of all adults ages 18 and older.⁶
One-third of teens access the Internet for health information [9] and 17 percent go online for information on sensitive health topics such as sexual health. Many more, 72 percent, of young adults ages 18 to 29 use the Internet for health information. In addition to computers, nearly 1 in 3 teens [10] browses the Web from their cell phone [8].

New Media for Sexual Health Education
States, local communities and community-based organizations are innovatively using text messages and websites to educate the public about sexual health and prevent the spread of infections. Programs using text messaging focus primarily on health education and directing people to testing sites. The Internet programs attempt to provide easy access to the answers users are seeking. The program examples below capitalize on teens’ use of text messaging and the Internet and consequently can provide educational services at relatively low cost and potentially reach large audiences who are asking for information.

Individualized text messaging service:
North Carolina’s Department of Health and Human Services supports a statewide health education program to reduce teen pregnancy and sexually transmitted infections. Using its health educator staff, the program launched BrdsNBz [11], an innovative text messaging service, in 2009 to provide medically accurate nonjudgmental answers to teens’ questions on a confidential basis. The service is aimed at North Carolina teens between the ages of 14 and 19. Staff health educators respond to questions from teens within 24 hours and provide links to other resources and related topics when appropriate.

The program’s sponsor, the Adolescent Pregnancy Prevention Campaign of North Carolina, is a well-respected and authoritative source of sexual health education for teens and is supported by the state legislature and the state health department. It attributes the successful launch of the BrdsNBz text message service to this relationship and existing staff who were trained and experienced to provide accurate answers to teens in a timely manner. The service was launched with a $5,000 investment for equipment. Officials are now involved in a project to evaluate the program and expand it for specific audiences. Like other nonprofit organizations that offer this kind of service, the program uses Facebook and other social marketing sites to attract teens to the site.

Text message inquiry for testing:
Illinois’ Department of Public Health launched Text 2 Survive to provide confidential information on where to obtain testing for HIV/AIDS and to encourage others to be tested. Anyone can send their zip code to a secure site and will instantly receive a confidential text message with the nearest HIV/AIDS testing center contact information in English or Spanish. The recipient can then send their friends a text message urging them to get tested as well. The Department also provides text message subscribers with periodic educational announcements or information about free HIV and other health screening events [9].

Weekly text message to subscribers:
The California Department of Health co-sponsors Hookup 365/24-7 [12], a statewide weekly text message for youth ages 13 to 24 on sexual health topics. Based on focus groups with teens, health educators developed text messages on sexually transmitted infections prevention and testing, contraception, domestic violence and substance abuse. All messages include a prompt to request a nearby testing site and a website link for more information [13]. Subscribers can opt-out at any time by messaging STOP. The state partnered with California-based non-profit ISIS, Inc. to adapt a similar service, SexINFO, which has operated in San Francisco since 2006. SexINFO [14] startup costs were $35,000, and ongoing maintenance costs about $18,000 annually [11].

A primary goal of Hookup 365/24-7 is to promote the availability of free testing clinics throughout the
state. Initial evaluations indicate about 1 in 3 users requested referral to a testing site. The California Family Health Council operates the program and attributes its success to working closely with the state health department as well as local health and education agencies to market the service and to jointly agree on the text messages appropriate for their communities. Further evaluation is planned to determine the program’s effectiveness, as well as getting feedback from the local partners on message content.12

**Educational websites:**
The Florida Department of Health recently launched the educational website [www.FaceITFlorida.com](http://www.FaceITFlorida.com) (Florida’s Access to Comprehensive Education using Internet Technology) to educate teens on sexually transmitted infections, prevention and treatment. The website uses an interactive approach developed by a Tallahassee-based company, Wahi Media. Through the “web automated human interaction” or wahi, users engage in a virtual conversation with educators. In each short video segment, questions are answered and users are directed to their next interest area. The videos use actors and the conversations are based on real-life experiences. According to Wahi Media, the web videos can hold the users’ attention for 8 to 10 minutes, much longer than a traditional website where users tend to quickly click around the site before moving to another. The department used about $150,000 of grant funds to develop and launch the interactive learning tool. Next steps for the FaceITFlorida initiative are to continue marketing the tool, compare its effectiveness to other educational media and to develop cooperative efforts to include it in other youth sexual health programs.

The Illinois Department of Public Health [16] developed “Girl Did You Know [17]...” videos on YouTube that target Native American young women and emphasize that a woman tests positive for HIV every 35 minutes. In the videos, a teen conducts an in-depth interview with a young Native American woman who says what she knows about preventing HIV. Captions provide clarification, emphasis or correct misunderstandings. Similar video interviews with African-American, Hispanic and Asian American women are planned.

**National Internet testing site locator with extras:**
The Centers for Disease Control and Prevention’s national testing locator websites ([HIVtest.org](http://HIVtest.org) [18] and [FindSTDtest.org](http://FindSTDtest.org) [19]) provide English and Spanish users with locations for HIV testing and STD testing and vaccines in all states and four territories.

CDC’s partner, California-based [ISIS Inc](http://ISISInc.com) [20], has integrated the STD testing site locations into its website [inSPOT.org](http://inSPOT.org) [21], where users can send anonymous e-cards to sexual partners to “tell them” and encourage them to be tested. In addition, the site educates and provides links on the treatment of several sexually transmitted infections.

The Florida Department of Health is one of the states participating in this service on its [website](http://www.floridahealth.gov) [22]. Through an annual subscription of about $3,000 the Department provides access to both the e-cards and testing site locations in each Florida county, and evaluates the referrals made through the service.

**Next Steps for New Media Education Programs**
Evaluating educational program success [23] is the next important step for new media education programs. Most programs’ goals have focused on getting accurate information in the hands of teens who request it, so suggested outcome measures include the number of people using the program and referrals to medical centers for testing and treatment. These measures can be monitored with new real-time tools on the Internet and need to be coordinated with marketing efforts to determine the
efficacy of different marketing approaches in driving users to the website or text service.

Experienced program developers have several tips for new programs. They recommend:

- To be effective, new media educational programs must identify specific target audiences and determine if they are using the media.
- For cell phone-based programs, each user should opt-in to the program rather than pushing information to a user that may not want the information on their phone.
- New programs need to be pilot tested with the intended audience to accommodate local market acceptance and preferences, and to determine the program’s potential success.
- Communication programs attractive to teens are not judgmental, respect the user and constantly incorporate user feedback to select topics and modify ways information is presented.

After a program is launched, monitoring the technology and other social media innovations is important since changes can occur rapidly, such as the advent of Twitter in the last few years. In order to respond to the changes more efficiently, public health educators look toward developing national platforms and resources that would be available for state and local public health agencies to use in their areas, rather than investing in development of many similar programs around the country.

**CSG Resources:**

**State-by-State Data:**

- Adolescent and Young Adult Sexual Health [25]. October 2009.

**Briefs:**

- Adolescent Sexual Health: Preventing STDs, HIV & Teen Pregnancy [27]. August 2009.

**Articles:**

- “State Initiatives Address HIV, Sexually Transmitted Diseases among Prisoners” [33].” Stateline Midwest. July / August 2010.

**References:**

2 CTIA, the Wireless Association. “U.S. Wireless Quick Facts: Year-End Figures” [4].”
5 Ibid.
6 Lenhart, Amanda, K. Purcell, A. Smith, and K. Zickuhr. “Social Media and Young Adults” [8].” Pew

7 Ibid.


10 Braun, Rebecca. “Got the Hookup: Implementing a Text-Message-Based Sexual Health Information and Clinic Referral Service for California Youth [12].” Presentation to the National STD Prevention Conference. March 8-11, 2010.


12 Braun.

13 Levine, Deb. “Using New Media to Promote Adolescent Sexual Health: Examples from the Field [37].”


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