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## Social media innovation: together we beat the tyranny of distance

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Social media provides a unique health innovation opportunity through the use of existing infrastructures that facilitates the provision of an effective pregnancy and parenting service, meeting the needs of rural and remote Australians without any direct face-to-face contact.

The Pregnancy, Birth and Baby service, operated by Healthdirect Australia on behalf of the government of Australia, provides a maternal child health nurse service across multiple communication channels, including telephone, video, website and Facebook to provide advice and support for parents and families from pregnancy through to children aged up to five years.

To achieve its charter to provide access to health information and advice to all Australians, Healthdirect Australia recognised the value in providing parents with trustworthy and clinically safe information in the place they are looking for it—social media.

Since June 2016 Pregnancy, Birth and Baby has hosted regular live interactive chat sessions on the Pregnancy, Birth and Baby Facebook page, where parents can ask questions and be answered in real time by a maternal child health nurse.

The Facebook Forums are guided Healthdirect Australia's social media research, analytics data and qualitative evaluation relating to consumers' expectations and how healthcare providers may operate in this dynamic environment.

### **Why is social media an important channel to reach parents?**

People's preferences for how they access health information and advice are changing and diversifying, and social media has become a key source of information among Australians. For health services such as Pregnancy, Birth and Baby which aim to provide trusted advice and information to as many parents as possible, branching out from a website into social media and having a presence in the same digital space as consumers was essential.

We chose Facebook because Pregnancy, Birth and Baby already had an engaged community there and it is by far the dominant social media network in Australia. Facebook is more than a social platform or marketing tool but is also a major publishing platform in its own right. Key Facebook technologies enable reaching a significant consumer audience which would not be reached by our own website and offers a powerful opportunity to increase engagement with our consumers.

Women aged 25-34 account for 79% of Facebook users, a demographic that almost perfectly matches the Pregnancy, Birth and Baby audience, of which the majority are women within the main birthing age range of 25-35 years.

The similarity between birthing age groups and social media users provides an opportunity to directly engage parents and address access their concerns. Australian parents, particularly mums, are increasingly turning to their social networks for information, support and advice around parenting topics.

The Pregnancy, Birth and Baby Facebook page, established in late 2013, at the date of writing has 50,921 followers. Page analytics combined with our research into consumer behaviours and digital trends revealed the following insights into our Pregnancy, Birth and Baby audience:

- **They are mobile**—the majority (96%) access the Pregnancy, Birth and Baby Facebook page via their mobile device.
- **They prefer social**—the main age group for the service (24-35 years) use social media as their first point of call for parenting information and advice. They are technically competent and very social-media literate.
- **They are engaged**—there is already strong engagement with the Pregnancy, Birth and Baby Facebook page. Weekly reach typically exceeds 200,000 and 1.8 million impressions.
- **They want reliable information**—consumers often struggle to judge trustworthiness, accuracy and appropriateness of online information.

Based on these insights, we developed a pilot program of Facebook Forums which aimed to connect parents with our maternal child health nurses and each other to share information, advice and build a social community.

## Pioneering a new method of health care provision

The initial proposal was to run a series of four live Facebook chat sessions with maternal child health nurses dealing with carefully defined topics.

There were many pertinent reasons for delving into this space, and a key one was that the format gave us the opportunity to reach large numbers of our target audience over a short period. It would also use fewer resources to answer the questions than traditional face-to-face or telehealth consultations.

Another driver was to reach the many isolated parents across Australia. For these parents access to content and the ability to interact in a live environment with maternal child health nurses can help them overcome the inaccessibility of healthcare created by distance and isolation.

This initial project initiatives aimed to explore several factors:

- The useability of Facebook as a medium for direct real-time interaction at scale
- User behaviour in this format including engagement, device type, and time of day
- Resourcing requirements as an ongoing service provision channel

- Skills required by Healthdirect Australia and maternal child health nurses participating in the Facebook forums
- Management and mitigation of any risks—both pre-identified and any emerging during the forums
- Further evolution of Healthdirect Australia’s social media strategy as part of the multichannel mix
- Impact of such events on contact centre call volumes, video call volumes and digital traffic.

For the pilot project to be considered a success an ‘end state’ was described within the project proposal. The four Facebook live forum sessions would:

- Provide Healthdirect Australia with the experience and data to be able to plan larger-scale exploitation of these highly engaged multichannel platforms
- Leave the Pregnancy, Birth and Baby consumer base more satisfied and engaged
- Result in a growth in overall consumer users for Pregnancy, Birth and Baby web, video and phone services
- Increase the body of staff within Healthdirect Australia and the Pregnancy, Birth and Baby service provider who have the expertise and skills required to deliver such activities successfully, at minimal cost and with mitigated risk.

The pilot forums that began in June 2016 were deemed successful and extended to the end of that year. A further review was conducted in 2017 that included an evaluation of the resources required to conduct Facebook forums as an integrated service channel. Due to the skill development over the course of the preceding year the human resources required proved to be sustainable such that the Facebook forums were incorporated as part of business as usual for the maternal child health nurses at Pregnancy, Birth and Baby.

### How does a Facebook forum work?

To get started, some basic training about login and admin posting rights was required as part of the significant pre-production planning. All staff were also briefed on appropriate protocols for handling off-topic, inappropriate or overly clinical comments and questions.

Forum topics are selected in consultation with maternal child health nurses and are often related to seasonal or timely health concerns. Many topics are chosen to reflect the top reasons people call the Pregnancy, Birth and Baby helpline. Each forum covers just one topic, such as sleep awareness or looking after a newborn.

Each forum is promoted using the events section of Facebook and is extensively promoted in the lead-up period, with pre-event questions encouraged from consumers.

The chats take place on the existing Pregnancy, Birth and Baby Facebook page in a series of posts and comment threads. At the scheduled time of the forum, a maternal child health nurse is online to respond to people’s questions in real-time.

The forums are live for an hour and then closed for comments. A statement informs people that the forum has closed and directs them to the website or telephone for further assistance. The maternal child health nurse will often continue answering questions after the hour has finished to ensure all questions asked within the hour timeslot are answered.

## Keeping it safe

When providing pregnancy and parenting health information and advice on a public forum there several risks that need to be considered and mitigation strategies put into place. Healthdirect conducted a significant and wide-ranging risk management workshop before committing to the commencement of Facebook forum pilot. This workshop identified and developed mitigations for any and all possible risks in providing health information via this channel.

Following the risk mitigation workshop, it was deemed that the benefit to pregnant and parenting consumers of our service being in their space as a clinically sound expert voice was safe, necessary and important.

Inclusion and exclusion criteria for the content topics were developed by the maternal child health nurse and Healthdirect Australia's Clinical Lead for Pregnancy, Birth and Baby.

The inclusion criteria included:

- Parenting topics for which there is content on the Pregnancy, Birth and Baby website to refer consumers for further information
- Topics that the maternal child health nurse self-assess as being competent and confident to deliver in this environment
- Parenting topics for which there has been high or consistent call volume
- Parenting topics that fall within the 1 to 5-year age bracket

The exclusion criteria included:

- Pregnancy or parenting topics, with or without supporting content on the Pregnancy, Birth and Baby website that have the potential to be sensitive, require specialised individual clinical advice or the potential to be polarising.
- Topics identified as having potential to be polarising in this user group social community context regardless of website content, such as:
  - vaccinations
  - home birth
  - vaginal versus caesarean births
  - pregnancy options (termination, adoption, foster care, surrogacy)

While considering risks that are within our control there were identified risks outside of our control. These include such things as disruptive, rude or aggressive participants. During the 2 years the forums have been running the incidents of these type have been extremely rare. Our experience has shown that as the participants are engaged and interested in getting the most out of the experience they are also quick to respond to any comments that are incorrect or misleading. The Pregnancy,

Birth and Baby audience act as their own moderators of comments, with the maternal child health nurses affirming or correcting as required.

## Where are we now?

In the two and a half years since the first forum, a further 20 have been conducted on the Pregnancy, Birth and Baby page, all without incident. We have broached the topic of vaccination through the colds and flu forum twice without any polarised commentary or activity.

The forums have increased the number of people who can access the expertise of our maternal child health nurses. One nurse can potentially reach 6–7 people in one hour when giving advice via telephone. During the forums, we have seen audience figures range between 700–4,000.

Through the forums we are developing a supportive online community. We see engagement increase after the forum as people continue to read the questions and answers and share this with the friends and families. We generally see a 250% uplift in engagement in the 48 hours following the forum, with those numbers reaching 10,000.

The forum content remains within the Pregnancy, Birth and Baby Facebook page comments section and is searchable and findable by our users should they wish to return and re-read the content.

One of our pregnant Facebook followers, Meng Chen, summed up the benefits of the Facebook forums when she said: ‘I’m a first-time mum and I’m not sure that the information I get from my family and friends is accurate, so I’ve been looking at the Pregnancy, Birth and Baby website and also following the Facebook discussions. I find these really helpful and the specialists cover all the questions I was wondering myself.’

## Presenter

**Dianne Zalitis** is a midwife with over 30 years’ practice, having worked the majority of her career in rural New South Wales—first as a clinical midwife at Wagga Wagga Base Hospital and then for 10 years as the Clinical Midwifery Consultant for the area health service. A city change move to Sydney was motivated by an enhanced career opportunity for her husband. A move that has in fact enhanced her career opportunities as well. Dianne continues in clinical practice in delivery suite at Prince of Wales Private, while working to enhance the services available to pregnant women and new parents nationally. Dianne’s main work is as the Clinical Lead for the Pregnancy, Birth and Baby Services at Healthdirect Australia, a COAG-funded company charged with procuring and providing online and telehealth services to all Australians. Dianne oversees the services provided by Healthdirect that relate to expecting parents and parents of children under five years.