

# The role of social media in accessing and utilizing Sexual and Reproductive Health Services among adolescents and youths in Lower and Middle-Income Countries:

Rapid Evidence Review [31<sup>st</sup> August 2024]

## Key messages

- Social media has a positive effect in promoting the sexual health behavior of adolescents and youth when professionally guided.
- Social media contributes to the development of young people's sexual identities and intimate practices by avoiding embarrassment and shame to ask any questions confidentially.
- Adolescent and youths who use social media are more likely to be exposed to sexual activity compared to their counterparts that use other forms of media.
- Special attention needs to be given to protect inexperienced Adolescents and youths from social media related abuse.
- Sexual health messages and updates being delivered should be through humorous posts, links and clips.
- Using role models and guiding the content facilitates the social media use for access and utilization of reproductive health services.

## Implication for policy and Practice

- Social media is a good medium for accessing sexual and reproductive health services.
- Using social media for SRH service requires preparing and implementing proper guidelines and its enforcement.

## Implication for research

- To inform country or region-specific social media guides; context specific formative research is required.
- The effect of social media on utilization of SRH services need further studies

## Why is this Rapid Evidence Review Prepared?

The EPHI Knowledge Translation Division prepared this document in response to a question from the Oromia Regional Health Bureau, Oromia, Ethiopia to inform the social media guide planned to be developed in collaboration with Oromia Education Bureau.

### Included:

- **Key findings** from research
- **Considerations** about the relevance of the evidence for social media guide development in Oromia Region, Ethiopia.

### Not included:

- Recommendations
- Detailed descriptions



## I: Introduction

Sexual and reproductive health and rights (SRHR) are fundamental to universal health coverage (UHC) and ensuring that all individuals can access and receive quality health services and information, without discrimination or financial distress. Its domains encompass sexual health; reproductive cancers; sexually transmitted infections (STIs), including HIV; infertility; intimate partner violence and sexual violence; contraception and family planning; safe abortion; maternal and perinatal health; menopause; comprehensive sexuality education; and female genital mutilation (1,2). Services and care for health issues within the SRH domains should be provided based on need and within a rights-based and life-course approach (3).

Adolescents and youths are defined as age between 10 - 24 years of age group (4). These age groups in Low-and Middle income Countries (LMICs) often face significant barriers to accessing traditional (routine) SRH services. These are cultural taboos, stigma, lack of youth-friendly clinics, and limited access to information. However, the wide use of social media has the potential to overcome these barriers and empower adolescents and youth to take a more active role in managing their sexual and reproductive health (5,6).

Some of the benefits of using social media include serving as an important channel for providing SRH information, promoting health-seeking behaviors, and connecting young people to relevant services. Social media can help adolescents and youth access accurate, age-appropriate, and culturally sensitive SRH information, including topics related to contraception, sexually transmitted infections, healthy relationships, and family planning.

The social media platforms can also serve as a safe and discreet space for young people to ask questions, seek advice, and connect with their peers, breaking the silence around SRH issues (7,8). Moreover, social media can be leveraged to raise awareness, destigmatize SRH topics, and mobilize communities to advocate for the expansion of youth-friendly SRH services. By harnessing the power of social media, stakeholders in the SRH sector can reach a wider audience of adolescents and youth, ultimately improving their access to and utilization of essential SRH services (9–11).

Social media refers to the various online platforms and tools that enable users to create, share, and interact with user-generated content. Some key characteristics of social media include user-generated content (allows users to create, upload, and share text, images, videos, etc), social interaction (facilitates two-way communication), networked connectivity (connects users to their friends, and family, and communities, as well as to strangers with similar interests) and real-time updates (provides a constant stream of new content and information). Some examples of social media include Facebook, Twitter, Instagram, LinkedIn, YouTube and TikTok (12).

The National Adolescent and Youth Strategy of Ethiopia (2020-2025) estimates the proportion of adolescent and youth population as 33% of the total population, implying the high health, economic, social, and political significance of the adolescents in the country. This Strategy has set an overarching goal of reducing

overall mortality among adolescents and youths by 15 percent. This has to be done through enhancing health literacy among adolescents and youths, improving equitable access to adolescent and youth health services, improving the quality of adolescent and youth health services and Strengthen leadership and accountability (13).

Social media has become highly prevalent in the lives of adolescents and youth globally, evidence about its role in accessing and utilizing SRH services in LMICs is not well synthesized (11). This is a significant gap given the fact that, the region is home to a large and growing youth population that faces significant SRH challenges, including high rates of unintended pregnancy, sexually transmitted infections, and limited access to quality, youth-friendly SRH services (7).

Ethiopia, like other LMICs, also need more review of the available research evidence to explore the nuances of social media use among different sub-populations of young people. Particularly, their specific SRH information and access and utilization of the service, and the most effective ways to harness the power of social media to improve SRH outcomes is required to be addressed. Without a deeper understanding of this critical intersection, efforts to strengthen and expand access to comprehensive, youth-friendly SRH services in Ethiopia in general and sub national in particular will have limited impact. Closing this knowledge gap found to be a priority for policymakers, program planners, and researchers working to promote the health and well-being of adolescents and youth in LMICs like Ethiopia. Understanding the above gap, the Oromia health Bureau research team requested for rapid review on the role of social media in the access and uptake of SRH services at LMICs level.

The purpose of this review thus is to synthesize the current evidence on the role of social media in accessing and utilizing sexual and reproductive health (SRH) services among adolescents and youth in LMICs. By bringing together this body of research, the review aims to provide insights into:

1. The effect of social media in accessing and utilizing SRH services in LMICs.
2. The key barriers and facilitators that influence the use of social media by adolescents and youth for SRH-related purposes and
3. Lessons learned and best practices for effectively utilizing social media to improve SRH access and utilization among LMIC youth populations.

This evidence synthesis is particularly timely and important given the rapidly growing penetration of social media and mobile technology among young people globally, including in resource-constrained LMIC contexts. Understanding the current dynamics around social media use for SRH can inform the design of more effective, youth-centered digital health interventions.

Importantly, the review findings can help guide policymakers, program planners, and civil society organizations in developing strategies to maximize the potential of social media as a tool for addressing persistent gaps in SRH service access and utilization among adolescents and youth in low-resource settings. By identifying the key barriers and facilitators, the review can inform the development of tailored, contextually appropriate approaches to leverage social media platforms to improve SRH outcomes.

## II: Review Methods

This rapid evidence synthesis approach, adapted from the ACRES Rapid Response Service, was applied to search and summarize the best available evidence on social media's role in supporting adolescents and youth to access and utilize reproductive health services in low- and middle-income countries (LMICs).

The databases searched include the Cochrane Central Register of Controlled Trials (CENTRAL), MEDLINE (via PubMed), EMBASE (via Ovid), and Health evidence. To enhance the comprehensiveness of the review, non-peer-reviewed sources (unpublished studies and gray literature) from Google Scholar were also included.

The search engine was built based on the JBI framework for undertaking a mixed-method systematic review (i.e., Participant, Intervention, Control, and outcome (PICO) and Participant, phenomena of Interest and Context (PICo) (14). The search limited to studies published in English after January 2004 with no limit to research designs. The final date of search is 18<sup>th</sup> of August 2024.

Accordingly, a total of 487 records were located from all the databases (EMBASE through OVID=241, PubMed=140, health evidence=41, Cochrane library=23, Google scholar=42). Finally, double screening (for title and abstract screening and full screening) was done which later came up with seven studies that fulfilled the inclusion criteria.

## III: Review findings

The included studies employed a range of methodologies: four quantitative studies (two descriptive surveys, one quasi-experimental, one randomized control trial (RCT)); two qualitative studies and one mixed method (survey plus qualitative study). Regarding study areas, three of the studies were from Nigeria, while the remaining four were each from Nepal, Tanzania, Senegal, and Vietnam.

The findings from these studies are thematized into three categories based on the objectives of the review. 1. The roles of social media on sexual and reproductive health access and utilization 2. The social media-related facilitator and barriers of reproductive health service access and utilization and 3. Lessons learned on use of social media to facilitate access and utilization of RHS.

### **3.1. The role of social media on sexual and reproductive health service access and utilization**

Social media has a positive effect in promoting the sexual health behavior of adolescents and youth, however it has also a chance to increase the sexual activity of the group which necessitates the importance of professional guidance. Among other social media types, Facebook has significant potential for sexual and reproductive health campaigns that aim at reaching youth. Social exchange and self-representation seemed to be the driver behind the popularity of Facebook.

A cross sectional study in Nigeria (15) found 42.4% of the respondents had heard of

contraceptives from the Internet/social media. A quasi experimental study in Nepal (14) indicated that Social media-based health education interventions played a significant role in promoting the sexual health behavior of adolescents. According to this study utilization of social media platforms such as Facebook messenger groups is an effective and cost effective medium for promoting the health and sexual behavior of adolescents.

A study in Nigeria (16) revealed that users of social media in the age group 10-14 years old are close to five times more likely to be exposed to sexual activity. Moreover, adolescent users of social media with primary education are 27 times more likely to be involved in sexual activity. Those who use social media like Twitter, Facebook, YouTube and Instagram are seven, four, four and three times (respectively) more likely to be exposed to sexual activity compared to their counterparts that use other forms of media.

A Randomized Control study in Nigeria (17) which aimed to test the Social Media Adherence and Retention to Treatment (SMART) Connections group versus the standard of care alone (control group) found that improved HIV knowledge and high acceptability are encouraging in the intervention group. Regarding ART adherence there was no statistically significant difference in both groups.

A mixed method study in Tanzania (18) have shown that social media platforms such as Facebook have significant potential for sexual and reproductive health campaigns that aim at reaching youth, particularly boys. Social exchange and self-representation seemed to be the biggest driver behind the popularity of Facebook, which was the favorite site for communicating with friends (19).

### **3.2.Social media-related facilitator and barriers to reproductive health service access and utilization by adolescents and youths**

The internet in general avoids the embarrassment and shame of asking any questions confidentially. The internet contributes to the development of young people's sexual identities and intimate practices. The internet as a medium for communication is a source of knowledge and information with little risk for social censors. Yet some programs on social media are perceived as inappropriate for young children or raise issues that families do not want to discuss. Thus, families perceive that overexposure on Facebook and other social media programs can harm youth and adolescents' reputation. Adolescent and youths who use social media are more likely to be exposed to sexual activity compared to their counterparts that use other forms of media.

A qualitative study in Senegal (19) has shown that SRH represents a major information need that new media technologies may address among the youth and adolescent population. Adolescents want more information to guide them and prevent ignorance. The internet is mentioned as a means by which one could avoid this embarrassment and shame by confidentially asking sensitive questions as if they were in front of a friend.

A qualitative study in Vietnam (19) revealed that the internet contributes to the development of young people's sexual identities and intimate practices. First, the internet is a source of knowledge and information. Second, the internet is a medium

for communication in which teenagers can publicly discuss sexual information gleaned from online media and other sources (e.g. parents, schools) with little risk for social censure.

With regard to barriers, a qualitative study in Senegal (19)) indicated perceptions and attitudes towards social media as barriers. Some programs are perceived as inappropriate for young children or raise issues that families do not want to discuss (e.g. sexual content). Privacy concerns are also raised; many believe that overexposure on Facebook and other social media programs can harm their reputation.

### **3.3. Lessons learned on use of social media to facilitate access and utilization of RHS**

Social media can be taken as a source of knowledge if it is effectively utilized. Yet special attention needs to be given to protect inexperienced youth and adolescents from social media related abuse. Using role models in social media is very important. Besides that, sexual health messages and updates should be delivered through humorous posts, links and clips. Among other social media, Facebook was found to be cost effective for adolescents and youth.

The study in Nigeria (16) stated that the social media is used as a source of knowledge by adolescents and youth and special attention should be given to protect them from associated abuses. The following quotation from this study is worthwhile when it comes to stating limitation of the use of social media among the youth: “While social media could serve as a knowledge source for adolescents, the observed common activities they perform on or with the media they have access to signals that abuse of social media usage is inevitable. Common activities such as texting and sending of pictures among inexperienced young folk and in a sexually risky environment like Nigeria, portends danger and could jeopardize the sustainable development agenda of not only the country but also other developing countries with larger younger populations”.

A study in Nepal(20) which focused on Facebook Messenger stated that “Facebook Messenger groups were proven to be cost-effective for adolescent health education, showcasing digital tools’ potential in addressing sexual health challenges.”

The other study from Tanzania (18) highlighted that role models in using social media are very important if used effectively and carefully. And they quoted “Sexual health messages and updates being delivered should be through humorous posts, links, and clips, as well as by youth role models like music stars and actors that are entertaining and reflect up-to-date trends of modern youth culture”.

## **IV: Conclusion**

In conclusion, social media has a positive effect in promoting the sexual health behavior of adolescents and youth especially when guided professionally. The internet in general and social media in particular contribute to the development of young people's sexual identities and intimate practices. It helps avoid embarrassment and shame to ask questions confidentially. Using role models and guiding the content facilitates social media use for access and utilization of reproductive health services.



Regarding the content, special attention needs to be given to protect inexperienced adolescents and youths from social media-related abuse. Adolescent and youths who use social media are more likely to be exposed to sexual activity compared to their counterparts that use other forms of media. Thus, sexual health messages and updates being delivered should be professionally guided and the messages should be communicated through humorous posts, links and clips.

### **Implication for policy and Practice**

- Social media is a good medium for accessing sexual and reproductive health services.
- Using social media for SRH service requires preparing and implementing proper guidelines and its enforcement.

### **Implication for research**

- To inform country or region-specific social media guides; context specific formative research is required.
- Information on the effect of social media in accessing and utilization SRH services in LMICs are insufficient and therefore further research is needed.

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### **Conflict of interest**

There is no conflict of interest

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