

Social media: A path to health literacy

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Abstract. Social media – websites and other online tools called social networks – serve as a tool to connect people and organizations around topics of common interest. Social media platforms offer tremendous opportunity to engage quickly and sometimes in depth with many and diverse stakeholders as people have the ability to communicate back-and-forth from anywhere in the world. As increasing numbers of people receive their news and health information online, it is important to ensure content delivered through online resources is accessible to diverse target audiences. This article discusses a mid-sized health literacy nonprofit organizations’ social media philosophy and tactics during the past 10 years, as both social media and health literacy strategies evolved continuously. The integration of social media in health literacy program content depends on the use with best evidence health literacy strategies, such as the use of plain language techniques. Strategy and technical considerations for the implementation and integration of social media within a health literate health communications model are discussed.

Keywords: Health literacy, social media, communication

1. Introduction

Social media include websites and other online tools (called social networks) that enable people and organizations to get, create, and share content by interacting with others about topics of common interest. Examples of social networks include Facebook, Twitter, Instagram, LinkedIn, YouTube, and more.

Social media are a powerful mode of communication because they enable adults and adolescents to align around interpersonal relationships and common interests. Social networks also make it easier for users to remain in touch through the sharing of content and updates. Social media quickly mobilize people around issues that matter to them, and help to keep them informed. In fact, almost one-in-three Americans now get their news online, often through social media.

Social media and health literacy are interconnected, especially in the field of health promotion. A meta-analysis from O’Mara suggests that broad, generic health promotion programs and campaigns often fail to engage diverse communities because their health communication strategies overlook the unique culture and language of segmented populations as well as health literacy principles [9]. O’Mara suggests some important health literacy principles that could be more applied to improve health promotion and communication include: knowing the audience, understanding the purpose of health messages, and creating social media messages to tailor to diverse populations.

Never before has it been more important to reach out to healthcare consumers online. The Pew Research Internet Project reports health information is one of the primary topics that people search on the

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Internet [1]. The use of digital media also has surpassed the amount of time most consumers spend with television, or other traditional media [1]. More than 60 percent of smartphone owners have used their phone to obtain information about a health condition, which makes social media a compelling platform for health promotion, health communication, and health literacy interventions [1].

Social media additionally are becoming a way to reach vulnerable populations and persons who are most impacted by health literacy barriers. For example, low-income and rural Americans rely on smartphones to access the Internet and are more likely to use a smartphone to look for information about life decisions, such as individual and population health conditions [2]. Forty percent of adults in rural communities use at least one social media site [2]. Fifteen percent of Americans ages 18–29 rely on a smartphone for online access, as do 13 percent of persons with a yearly household income less than \$30,000 [2].

The use of smartphone-friendly social media additionally provides a means to reach minority audiences. Twelve percent of U.S. African Americans and 13 percent of Latinos rely on a smartphone, compared with 4 percent of whites [2].

Social media are a powerful tool when they are used to widely disseminate clear and timely health information. According to a 2016 Pew Research Center survey, there are 1.86 billion monthly active Facebook users, 600 million monthly active Instagram users, and 317 million monthly active Twitter users [3].

No other mass medium provides similar direct-to-consumer interactive opportunities. No other mass medium provides real-time access where communicators can tell stories, release news, provide live-stream events, interviews, create original content, share and promote events, and pay to place customized content with the audience you seek to reach.

To optimize social media use, Korda suggests clear health information should be tailored to the demographic profile of the intended audience and users should be encouraged to participate and share content [6]. Korda adds that health promotion, health communication, and health literacy interventions can be based on theories of social and behavioral change [6].

Social media also are a powerful tool to spread clear health information, along with advancing partnerships among organizations that serve low-income populations, as well as face-to-face outreach, messages and messengers, and efforts to meet basic needs such as food and shelter [7].

With this background in mind, this article reviews the social media efforts of one organization that has tried to embed social media initiatives within health literacy principles. The article is divided into five sections. Section two outlines the history of Health Literacy Media, formerly Health Literacy Missouri, a nonprofit health literacy center located in the Midwestern region of the U.S. Section three addresses how HLM utilizes social media to establish its credibility and prominence as a health literacy expert and service provider. Section four focuses on how HLM uses its social media and digital expertise as a health literacy tool for its customers. The concluding section provides suggestions about how to use social media to improve health literacy for diverse populations.

2. The history of Health Literacy Media (HLM)

Health Literacy Media, established in December 2009 as Health Literacy Missouri, is one of the U.S.' largest health literacy, nonprofit organizations. Since its inception, Health Literacy Media's (HLM's) staff has created and implemented an in-depth menu of evidence-based health literacy services, and trained more than 16,000 health-related professionals who work with persons impacted by low health

literacy. Integral to its activities, HLM seeks to create and disseminate social media messages customized for private and public health organizations that seek to communicate information to diverse audiences. By harnessing health literacy best practices (such as summarizing information, encouraging reflection, and creating a more personal tone), HLM helps its healthcare clients engage in conversations through social media.

HLM's social media programs are grounded in the idea that social media and health literacy center on relationships – both on and offline. An individual's peers are an important source of information when it comes to making health decisions. To that end, social media helps to facilitate conversations between like-minded peers and healthcare professionals about pertinent health topics [8].

The idea for the organization was born in October 2003, when the Regional Health Commission (RHC) in St. Louis approved a plan for primary and specialty care health services for the region, which was submitted to the U.S. Centers for Medicare and Medicaid Services as part of an agreement with the U.S. federal government. A key component of the plan was to reduce cultural barriers to health care and improve health literacy.

In early 2004, RHC formed a Regional Health Literacy Task Force, co-chaired by Will Ross M.D., Washington University School of Medicine, and Mark Mengle M.D., St. Louis University School of Medicine. The task force was charged to develop recommendations that supported the RHC's mission to: improve access to health care services; reduce health disparities; and improve health outcomes for the residents of the St. Louis region.

To backup, the partial impetus for these efforts stemmed from an array of individual and population health challenges partially indigenous to the St. Louis metropolitan area. For example, St. Louis' diabetes and cancer rates are higher than in some other areas within the state of Missouri as well as in the U.S.

The task force was asked to develop recommendations to strengthen communication between providers and patients, improve patient access and their ability to navigate the healthcare system, as well as build an infrastructure to sustain health literacy efforts.

After an assessment of existing literature and programs, the task force completed an action plan that was approved by the Regional Health Commission in 2004. Throughout 2005, the task force worked to prioritize and further develop its recommendations and solicit feedback from its advisory boards and the broader community. In April 2006, the RHC hosted "Building a Healthier St. Louis," a community-wide health summit, which convened more than 500 participants to provide input about the next steps to build health literacy and community health.

Concurrently, in 2005, the Missouri Foundation for Health (MFH), an independent philanthropic foundation dedicated to improving the health of the uninsured and underserved, also turned its attention to health literacy. MFH convened a Strategic Planning Committee to discuss efforts to incorporate health literacy into grant-capacity. The committee identified underlying health literacy concerns within previous proposals from 2002–2005, examined research recommendations from by the Institute of Medicine and the CDC's Community Preventive Services Task Force, and reviewed the literature about the human and financial impact of low health literacy.

In response, MFH created the Missouri Health Literacy Enhancement Committee (MHLE) in 2006, chaired by MFH board member Will Ross M.D. MHLE subsequently convened state partners in health literacy to form the Missouri Health Literacy Coordinating Council, chaired by Dr. Ross. With funding infrastructure from MFH, the coordinating council voted to create Health Literacy Missouri (HLM) as a free-standing non-profit agency. Within its first year, HLM became one of the most active health literacy centers in the U.S. Immediately, HLM implemented provider-training programs, hosted a state-wide

health literacy summit, developed community-wide health literacy initiatives, and established an online library with more than 10,000 health literacy resources. Since 2009, HLM has continued to grow and build partnerships in the region, across the U.S., and around the world.

3. Social media's role in helping to build a health literacy non-profit

Since 2009, HLM has built a robust social media presence with more than 7,000 followers across six platforms. While the initial followers were mostly other health literacy professionals, HLM's social media's current users includes: health journalists; international health information companies; hospital systems; global pharmaceutical companies; and consumers of health care (the general public).

HLM's social media presence quickly became a linchpin of the agency's health communications efforts. In early 2010, the organization's health communications team launched HLM's first social media platforms in Twitter, Facebook, and LinkedIn. Initially, HLM's social media efforts were to create awareness about the concept of health literacy among the general public. Although the health literacy field was well established among researchers, HLM sought to boost the public understanding of the concept of health literacy and its social impact through the use of social media.

Hence, a primary strategy tried to help social media users increase their understanding of health literacy and to normalize and reduce communication chasms between health care professionals and the general public. HLM also intentionally decided to use social media to build public recognition and foster the organization's reputation as a trusted media source for healthcare issues. HLM's dual strategy was to provide information about health literacy into health related stories often covered by other news media outlets to potentially reach a larger audience. HLM additionally set a goal to involve stakeholders via the creation and maintenance of social media spaces to discuss health literacy issues. Finally, HLM sought to promote social media networking as a tactic to encourage potential stakeholders and partners to watch HLM's health information videos.

3.1. HealthLit chats

The first major opportunity to use social media to discuss health literacy occurred just six months after HLM opened and the 2010 U.S. National Action Plan to Improve Health Literacy was released. The latter document identified key stakeholders, suggested activities and contributions, and set forth seven goals to improve health literacy with a focus on information, communication, and informed decision-making, access to services, research, and practice.

Using the National Action Plan as a focal point, HLM hosted more than a dozen Twitter Chats meetings on topics related to health literacy during the next 1.5 years. Much like an in-person meeting, Twitter Chats are the virtual equivalent of bringing an audience together in a conversation. Hence, HLM's Twitter Chats encouraged participants to ask questions of one or more experts, read other people's questions, and ask follow-up questions. On the first Thursday of each month, HLM hosted monthly discussions on Twitter that focused on a timely topic in health literacy. Participants were encouraged to respond to questions, post messages, and interact with other participants about a given topic during the scheduled discussion using the hashtag #healthlit.

Some specific topics included: Healthy People 2020; health literacy's role in health care reform; health literacy curriculum in schools of health professionals; and the aforementioned National Action Plan to Improve Health Literacy. HLM's first HealthLitChat in October 2010 attracted 92 people who posted 553 tweets during the 1.5-hour period.

Other participants included: representatives from healthfinder.gov, an information site operated by the U.S. Department of Health and Human Services; and spokespersons from the United States Health Resources & Services Administration and the Agency for Healthcare Research and Quality; as well as other health and health literacy organizations.

The success of the initial discussion encouraged the HLM staff to continue to engage a growing health literacy following on Twitter in additional productive conversations about important issues within the field.

The Twitter Chat program met HLM's early social media goals to raise awareness on a local and national level about the organization as well the importance of health literacy. The Twitter Chat program also advanced HLM's initial social media goals to: provide ideas; encourage others to share ideas for how to better communicate and distribute health literacy messages; generate discussion around health literacy; develop relationships with key health literacy experts and practitioners; encourage collaboration among other participants, boost Twitter followers; and increase overall social media reach.

3.2. Engaging with legacy broadcast media

A key component of HLM's social media strategy has been to engage followers with original messages using video. In 2011, HLM partnered with the Higher Education Channel, HEC-TV, which is St. Louis' non-profit producer of education and arts television programming, to produce a 30-minute documentary about Missouri's health literacy challenges. Four different versions were produced (for health care professionals, policy makers, healthcare administrators and the general public). The latter approach was based on health literacy principles to provide materials tailored for specific audiences.

The documentary outlined the problem of health literacy as well as strategies to enhance health outcomes through improved communication strategies. The programs aired on public television and were promoted heavily through HLM's social media channels. The documentary won the 2012 Silver Telly Award and was nominated for a 2012 Mid-America Emmy by the National Academy of Television Arts & Sciences. This early project established one of HLM's core and unique services: health literate video scripting and production.

4. Social media and video: A service line

In mid-2012, the founding HLM Board staff, with the Missouri Foundation for Health leadership, began a process to transition HLM from a Missouri based nonprofit heavily subsidized by the Foundation, to a self-sufficient, sustaining nonprofit organization. A multi-year exit strategy from Foundation grant supports was developed, which included a business plan to ensure stabilization and success. HLM's early success in social media and video content services suggested these strategies should be prioritized as key services in the future.

While the goal continued to create health literacy awareness via HLM's media activities, these efforts were supplemented by new initiatives to use social media to improve health outcomes. The expansion of HLM's social media mission was partially based on recent research that suggested the use of social and digital media was tied to health promotional/educational outcomes within some settings. For example, a multi-media based curriculum that encouraged 9th grade students to evaluate media messages was found to reduce their intentions to smoke more than a standard educational program (that was provided for the same age group) [10]. The study also suggested attitudes and intentions among youth are more likely to change if social media platforms were integrated within health educational interventions [10].

4.1. Health insurance literacy social media

HLM created social media initiatives to help Americans understand how to obtain and understand insurance following the 2011 introduction of the U.S. Affordable Care Act. The challenge to obtain and understanding health insurance became a barrier for some Americans who sought to use the Affordable Care Act (ACA) to obtain more affordable, accessible coverage. For example, ACA enrollment initially was adversely effected because 60 percent of those eligible to enroll in ACA's health insurance marketplaces did not understand key health insurance concepts [4]. The wise use of the ACA also required consumers to navigate corporate and government health insurance websites, as well as be more mindful of insurance-related details, such as varying premiums, deductibles, and copays.

In response, the Missouri Foundation for Health led a charge in Missouri to infuse necessary health and health insurance information into public conversation and support policy implementation through the creation and support of the Cover Missouri Coalition. Currently, the Cover Missouri Coalition includes about 800 health related partner organizations in Missouri, many of whom employ the navigators and assisters charged with directly communicating with the public on how to find, keep and use health insurance.

Early on, Cover Missouri Coalition leaders identified health literacy and, specifically, health insurance literacy, as a key component of strategy toward the overall goal of reducing the rate of insured in Missouri to 5% by 2017. While the coalition has not yet met that goal, primarily as a result of the complexity of the policy issues surrounding Medicaid's failed expansion in Missouri, by the end of the 2015 open enrollment period the rate of uninsured in Missouri was reduced to 9.8% [11].

HLM provides health literacy technical support for the Cover Missouri Coalition. In this role, HLM extended its social media experience to the larger group and was responsible for the conceptualization, creation and coordination of social media messages that support health insurance literacy (HIL) topics.

Cover Missouri contractors provided scheduled messages through social media (Tweets, Facebook posts, and YouTube videos) that focused on health insurance awareness and enrollment. HLM supplemented these efforts with messages focused on topics that boosted consumer understanding of health insurance. Some of the topics for messages were informed by HLM's interactions with Cover Missouri Coalition members.

Since 2014, HLM has created weekly social media messages (two to five messages per week) and distributed them to Cover Missouri coalition members. To date, HLM has written and distributed approximately 550 social media messages, including graphics and videos. HLM has developed three health literacy insurance social media campaigns: #healthinsurancelit Word of the Week, which defines a new health insurance term each week to help consumers understand their coverage; #ImCovered... now what? The latter helps consumers understand and use free preventive care benefits; and #healthcarehacks, which provides tips on how to optimize health care and health insurance services within a general health and health literacy framework.

HLM and its project partners – the Missouri Foundation for Health and the 800 Cover Missouri Coalition member organizations – posted the messages on their social media platforms. While analytics are not associated with each of the partner groups' social media activities, within HLM's channels the messages were seen by an average of 257 people per Twitter message and 42 persons per Facebook message.

4.2. State of Oklahoma thrive social media

HLM provided social media technical assistance to the U.S. State of Oklahoma Thrive Employee Wellness Program, which supports a health literacy and consumer engagement program for state employees,

teachers and support staff, dependents, and state governmental retirees. This program potentially has an audience reach of more than 150,000 Oklahomans.

The goal of this program is to increase health literacy so state employees might better understand their health insurance coverage and make better decisions around seeking care. The program also empowers employees to become better advocates for their care and to leverage available financial resources.

HLM developed 53 messages and graphics for Facebook and Twitter. These messages highlighted and promoted a Health Literacy Webinar Series and supported health literacy and health insurance literacy topics. Some topics included: the importance of preventive care; ways to save money with health insurance; dates of open enrollment; and tips for seeing a physician. Since the Internet site Thrive recently rebranded and created Facebook and Twitter accounts, HLM also created messages to introduce Thrive. The State of Oklahoma Thrive Employee Wellness Program is now considered launched and is maintained entirely by State of Oklahoma staff.

4.3. Health insurance literacy consumer health insurance video series

Health literacy and adult education practitioners suggest that offering health information in video formats may be especially effective for low literacy populations. Widespread and diversified consumer access to computers and cell phones also now enable Internet-based video to diffuse culturally representative messages to diverse audiences. The potential of mobile phones to convey video-based is especially promising among Hispanic Americans, who are younger, more mobile, and socially connected than older Americans with a Latino heritage.

To supplement written materials, HLM developed 10 short videos using evidence-based health literacy principles to present health information to younger adults. The Health Insurance Video Series is a consumer-facing video series that educates consumers about health insurance, how to enroll in U.S. health insurance marketplaces, and steps after enrollment. Six of the videos were produced in English and four were in Spanish.

HLM worked with Bad Dog pictures and partners at International Institute of St. Louis (IISTL) to produce 10 consumer videos. HLM's communications staff wrote scripts for all 10 videos, which were reviewed by project partners. Other project partners edited and translated videos into Spanish. Another partner provided cultural and linguistic expertise during the script review and filming of the Spanish language videos.

All 10 videos were made available online (e.g., Vimeo, YouTube, Cover Missouri's website) by September 30, 2014, months before the beginning of the second open enrollment period in the U.S. health insurance marketplace portion of the ACA.

HLM designed and ordered 500 flash drives preloaded with pertinent consumer videos. HLM promoted and distributed the videos on flash drives and DVDs at in-person Cover Missouri meetings. HLM also made announcements through email distribution lists and social media. To promote the Spanish videos, other project staff at partner organizations shared the videos with seven St. Louis-based agencies and two statewide agencies organizations that serve Spanish-first speakers, such as Missouri Immigrant & Refugee Advocates (MIRA), Red Latina, and Office of Hispanic Ministry, through email announcements.

HLM continues to promote and distribute the consumer Health Insurance Video Series through meetings and emails, newsletter articles, social media, other messages for healthcare professionals, as well as the aforementioned media formats.

To encourage the use of the videos, HLM shared tips with consumers (e.g., play in waiting rooms and during enrollment appointments), and with staff at organizations (e.g., during staff meetings, new staff

training, and social media). HLM shared tips during monthly meetings and through written materials on ShareFile. The video series has been shared with assisters nationwide, as the videos were featured in the Families USA resource slideshow in January 2016.

To date, the videos have received almost 5,000 views online and been distributed on more than 800 flash drives. The video series received a 2015 Clear Mark Award of Distinction from the Center for Plain Language.

4.4. Health insurance literacy “Clayton & Candra got you covered” video series for enrollment assisters and health care professionals

As an effective alternative to print materials, HLM created ten training videos for enrollment assisters and health care professionals to enroll persons in diverse ACA programs. The videos supported and promoted health insurance literacy by explaining and demonstrating how to best communicate health insurance information to consumers.

HLM created a timeline to produce the assister how-to videos in two waves. The first five videos were produced to be released prior to the start of ACA’s open enrollment period in 2016. To generate a list of topics for the assister how-to videos, HLM gathered input from key stakeholders. The selected topics included: calculating a consumer’s modified adjusted gross income (MAGI); using teach-back to help consumers understand preventive care; providing clear action steps to help consumers talk to their insurance company; resolving myths related to the ACA’s insurance marketplace; and assisting consumers to select a primary care provider.

The first five videos and accompanying handouts were available online in mid-September 2016 via YouTube and Vimeo. In just one and a half months, the videos received nearly 900 views online; the MAGI video received the most views ($n = 253$). HLM also added the videos to the Cover Missouri flash drives and distributed more than 350 flash drives at Cover Missouri regional summits, in-person meetings, and HLM’s annual summit. HLM promoted the videos among assisters and healthcare professionals through email announcements and newsletter messages, Cover Missouri meetings and regional summits, as well as a health insurance literacy Google group.

To supplement the videos, HLM created a handout for two of the videos that provided: 1) a worksheet for assisters to use when calculating a consumer’s MAGI; and 2) a handout for assisters that provides consumer tips to talk to an insurance company. A link to each of these handouts was provided in the video description, and the handouts were available to Cover Missouri members through ShareFile. To obtain input about the videos from Cover Missouri Coalition (CMC) members, HLM developed an online survey to assess assisters’ increase in knowledge about the video topics, their intention to apply the information and skills to their work, and references to undergird the content of the next five videos.

Thirteen CMC members completed the online survey. The majority of the survey participants either strongly or somewhat agreed that the furnished videos helped them reached a better understanding of each video topic. The majority of participants reported they were ‘very likely’ to apply the knowledge and skills they learned from the video in their work.

Following feedback from CMC members and others, HLM developed the remaining five videos in early November and made the videos available online via YouTube and Vimeo. The videos have been viewed online more than 7,000 times and have received nationwide recognition.

Three of the “Clayton & Candra Got You Covered” videos were picked up by AccentHealth as part of their patient educational programming in up to 30,000 outpatient waiting rooms across the U.S. AccentHealth provides TVs in qualified outpatient waiting room environments for health providers of all

sizes across the U.S. AccentHealth's educational programming is customized by specialty and patient population and is produced by CNN's Medical Unit.

HLM's videos also received a 2016 ClearMark Award of Distinction and a 2015 Digital Health Award. Enroll America showcased the videos on its Health Insurance Literacy Resource Hub.

5. Conclusion: Recommendations for designing a social media strategy

This article details the experience of Health Literacy Media – a mid-sized health literacy nonprofit communications group – in digital and social media during the past 10 years. HLM's overall experience suggests an underlying preference to utilize social media as a health communications medium to advance health literacy practices.

However, the latter is a challenge because social and digital media platforms continue to evolve – often independently of the advances in theory and practice that occur within the field of health literacy. Nevertheless, HLM has found the integration of social and digital media with health literacy program content is fostered by the use of evidence-based health literacy principles, such as the use of plain language and communication strategies that are tailored for specific audiences.

In HLM's experience, the use of social media is enhanced by defined goals, such as helping uninsured consumers understand how to sign up for Marketplace coverage, educating people at risk for heart disease that they are at risk and specific strategies to lower that risk, and building an expert voice in the field to increase brand awareness.

HLM suggests health organizations should use specific goals to develop a plan of action to address the topics they want covered and build the conversation they seek to have, which positions their institutional voice within that conversation. For example, when HLM wanted to develop its presence as an important voice in the health literacy conversation, the organization used the Twitter-based HealthLitChat to make HLM visible in the field and to draw in and develop the voices already in the conversation. This combination of promoting both external and internal voices built good will, elevated a pluralistic conversation, and solidified HLM's place as an expert in the field. Overall, the equalizing influence of social media in building multi-level conversations fostered the aforementioned evolution.

5.1. Strategy considerations

HLM's experience is there are diverse considerations to take into account when launching a social media plan. First, health care organizations should know with whom they are trying to build a relationship, what business goals they are trying to achieve, whether the initiatives are evidence-based, in addition to clarifying potentially diverse leadership responsibilities. Second, health care organizations need to consider the tone/manner used with an intended audience, how to assess interventions, how to operationalize success, and how to create culturally appropriate content for an intended audience.

To avoid potential embarrassment, the social media information provided by health care organizations also should be consistent with (or at least not contradict) the available evidence about the health care status of different populations within a region. For example, Jha, Lin and Savoia found most U.S. state health departments social media messages, frequently on Facebook, are inconsistent with the BRFSS (Behavioral Risk Factor Surveillance System) data about their region's health status [5]. Overall, it is difficult to envision how a social media intervention can generate long-range therapeutic health outcomes if it is not based on and directly addresses evidence-based public health needs.

Conceptually, HLM's experience is the judicious use of social media is associated with improvements in health behaviors and boosting the public's health literacy. HLM's experience also suggests improvements in health behaviors and boosting the public's health literacy are accelerated by the use of social media – especially to communicate with vulnerable populations. However, the selection of social media platforms, the messages used, and the frequency of posts often are a byproduct of the specific health behavioral goals and health literacy enhancements established by an intervention's stakeholders, which includes the intended audience.

HLM emphasizes that getting to know your audience is both a strategy as well as a health literacy principle. Organizations need to define who they want to “talk to” through social media, and then make sure their content strategy and tone appeals to their desired audience.

Further, it is important to remember that in the world of social media the number of followers within organizations is relative. The number of followers on a social media page does not always suggest the engagement and relevance that resulted from a social media-based health intervention. Overall, HLM suggests that quality beats quantity and assessments (and goals) should be targeted to emphasize specific health outcomes more than broad ratings based on media use.

5.2. Technical considerations

HLM suggests the attraction and engagement of intended followers depend on the relevance of social media posts. HLM suggests when an organization is telling its story, the narrative should be authentic as well as reflect a therapeutic, evidence-based perspective about individual and population health.

Organizations also should pay attention to their audience's concerns, watch how posts perform, adjust accordingly, and develop imagery and language that attract more followers.

The determination of the latter mandates the use of metrics. Social media health communication/promotion efforts should base metrics on what they hope to get from social media (sharing, click-throughs, sign-ups, office visits, etc) as well as the health care objectives they seek to advance. While metrics help keep track of which content gets the best response (to create more of it), the assessment of the association between social media and health outcomes also is vital to the future of the fields of health communication, health promotion, health literacy and demonstrates the value of social media-based intervention efforts by smaller organizations.

For the best results, HLM also suggests the use of plain language principles. Keep social media posts simple and easy to read by checking for spelling and grammar errors. Also, avoid writing in ALL CAPS, using jargon and insider buzzwords, and making every word a #hashtag. For organizations that work directly with consumers, it is best to be as personable as possible. A friendly, conversational tone often is helpful and is a proven health literacy tactic to work with vulnerable populations.

Timing is also important. A few strategically timed posts are better than a constant delivery of content to most followers. Fortunately, there are available tools to help organizations ascertain the best time to post, such as Facebook's analytic tools.

In addition, it is important to follow social media etiquette and recognize that different social networks have different “rules.” For example, it is considered excessive to post more than once a day on platforms such as Facebook and LinkedIn. However, posting multiple times a day on Twitter currently is standard operating practice.

Social media managers need to be responsive when users or peers reach out via their social media links. Social media is an instant world; a line directly that connects a person or organization directly to their audience. Consequently, it is important to share content from like-minded organizations. This helps

build a social media presence and is a productive tactic to post compelling content, increase the reach for trusted sources, and enhance connectivity to other organizations and individuals.

Although developing an effective and health literate social media strategy is a complex undertaking, it helped HLM grow from a regional health commission to one of the largest nonprofits in the U.S. With a set of defined goals, a clear action plan, and a well-developed understanding of the platforms, social media can help organizations be the voice in the field that many want to hear.

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