Utilising social media to educate and inform healthcare professionals, policy-makers and the broader community in evidence-based healthcare

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Social media is emerging as key solution to increase collaborative discourse between individuals, institutions and countries. Although evidence of social media’s impact on health policy is limited,¹ its potential to promote knowledge dissemination and provide open forums for critical appraisal of evidence-based literature is increasingly clear.² Social media in many ways is the definition of dissemination. It can be an active tool for spreading evidence-based information to a target audience (population) via determined channels (social media platforms) using planned strategies. Social media has a heterogeneous array of definitions as it can describe particular platforms of use (ie, Twitter or Facebook) or a particular methodology of connecting users. Social media in medicine can be defined as any digital media that enables widespread connectivity between users using a defined methodology of approach (ie, blog, podcast and so on).³

Researchers in the field of social media and knowledge dissemination in healthcare have clearly put it ‘Let debates take place in open and public forums, rather than the isolated circles of individual clinicians or local groups. Engagement and participation can usher in a new era of transparency around clinical decision-making, knowledge integration, and evidence-based practice’.² The Evidence Manifesto¹ was conceived, with similar ideals, to address the growing challenge of integrating patient-centred decision making with the best available evidence: ‘Informed decision making requires clinicians and patients to identify and integrate relevant evidence. But with the questionable integrity of much of today’s evidence, the lack of research answering questions that matter to patients, and the lack of evidence to inform shared decision how are they expected to do this?’¹ One of the key steps identified in the Evidence Manifesto was to ‘Educate professionals, policy-makers and the public in evidence-based healthcare to make informed choices’.¹ There is no one best way to do this. In fact, policies that approach this issue through one methodology are likely to fail. One medium that is growing in academic activity and engagement is social media, including blogs, forums and social networks.

The ability to objectively determine the impact of social media on knowledge translation is challenging. However, there are ways to assess the quality of social media research,⁴ the quality of social media modalities such as blogs and podcasts⁵ and the potential impact of social media on dissemination of knowledge⁶ and case studies of the impact of social media on knowledge translation exist. As social media becomes increasingly accepted by the healthcare professional community, new terminology must be described and defined. For example, networks such as Twitter or Facebook need to be differentiated from specialist search and analysis engines such as Symplur or Semantria. The former being online platforms which deliver a distinct method of connectivity between users (the character limit of twitter being a popular example) and the latter being specific algorithms which analyse data on, or between, these platforms [Figure 1]. This analysis may be a simple quantitative description of the number of times a particular hashtag is cited or more detailed descriptions of the tone of a particular sequence of social media activity. For example, sentiment analysis can determine if activity around a particular topic is positive or negative.

A successful example of social media use is the free open-access medical education (FOAM) international movement that has brought together people from many backgrounds and specialties.⁸ FOAM has been described as a ‘dynamic collection of resources and tools for lifelong learning in medicine, as well as a community and an ethos’.⁸ It exists almost entirely on social media through websites, Twitter and other online platforms. The use of FOAM has made it easier for healthcare professionals to interact with colleagues from around the world to discuss new research, share and develop evidence-based medicine resources.¹⁰ Social media use, like the FOAM movement, is associated with the development of communities of practice that promote the transfer of information at scale, crossing institutional and geographical boundaries not previously possible. These forums also allow shared conversations around critical appraisal of new evidence that is transparent and accessible to users.

We have attempted to do this in neonatology with the formation of a Community of Practice¹¹ consisting of providers dedicated to leveraging social media for the benefit of evidence-based

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There are potential challenges, however, around the growing influence of social media in healthcare and research. Questions around the use of social media to disseminate evidence-based healthcare information currently subject to ongoing research and debate include:

1. What are the most effective ways of disseminating evidence-based healthcare information on social media?
2. How can trustworthy sources of social media be developed, coordinated and maintained to deliver information on evidence-based healthcare?
3. Is editorial oversight possible on online platforms?
4. How can we effectively involve patient and family advocacy groups in social media platforms to improve dissemination of evidence-based healthcare information and support shared-decision making?
5. How do we ensure that healthcare professionals, researchers, policy-makers, patients and families have the skills to determine what are trustworthy information sources derived from social media?
6. How do we create a safe environment for communication through social media between healthcare providers and the broader community?

We propose that social media can be a valuable tool to disseminate knowledge around evidence-based healthcare, including new research findings and critical appraisal of current practice. We look forward to the academic and clinical community, as well as patients and families and policy-makers, contributing to answering these questions.

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References


12. Evidence-Based Neonatology [EBNEO]. ALERT!! This group of devotees converged and recommended: using #NeoEBM as an umbrella term to tag content for the global community interested in promoting evidence-based neonatal practice, and #foamneo to tag free-open access content. We’ll try to adhere—let’s see if it sticks! [Tweet. https://twitter.com/EBNEO/status/993261436959887365 (6 May 2018).
