What is The Role of Media in Women's Health?



As Reported by <u>Danielle Perro</u>, Postdoctoral Researcher: epidemiology to study period pain in adolescence and understand both its causes and impact on chronic pain later in life.

Context:

In an increasingly digitised society, most people stay up to date with the world around them through social media. It is therefore no surprise that people do the same to find out about their world within. Now more than ever, as health care systems continue to stretch beyond their capacity, women need answers about their bodies, and they need them quicker than existing health care

infrastructures can provide.

At this year's FemTechnology Summit in Basel (June 6th & 7th 2023), stakeholders working at FemTech Startups, Academia, Clinicians and social media influencers, joined forces to consider current challenges in the way the media is used to supplement women's health information, and how moving forward, these could be addressed.

Facilitated by <u>Dr. Mitzi Krockover</u>, key pain points and questions to be answered were identified.

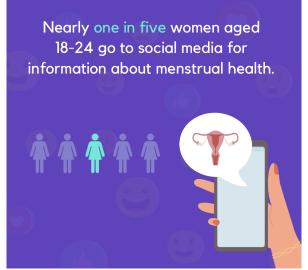
Social media offers a rich hub of women's health information and support, yet medical misinformation is rife on these platforms. As someone who has personally used social media to engage and translate my PhD research to different audiences, (especially Twitter during its less turbulent times), extra thought is required to ensure that the content is in the first instance accurate, but importantly, designed with your audience in mind. With such a plethora of information available online, it can be challenging for consumers to access robust health information, especially if possibly less credible health information is presented in a more engaging way.



How bad is this problem, and what does this mean for women?

According to a recent study done by Flo Health on menstrual and reproductive misinformation, 22% of women aged 18-24 are receiving their sex and reproductive information health from social media-however-10% of these women don't fact check through a second source, to ensure that what they're seeing is trustworthy and reliable. If you've ever done a deep dive into your own reproductive health questions on the internet, you may have noticed that it's not hard to find a convincing post on social media spreading inaccurate information. If this information comes from someone with a large following, or a professional accreditation, it is more challenging to discern fact from fiction.

As a group, we acknowledged that in our fast-paced world, many women play multiple roles in society and the household, which may reduce capacity to seek a



second source, while proposing that this process could be streamlined, and the burden, taken away from the woman. Could the future of women's health information dissemination online look like, as we saw with the COVID-19 pandemic, articles or social media posts flagging an article as containing misinformation or information from an untrustworthy source? I think this is crucial.

A further challenge we encountered was how we better bridge the divide between knowledge producers and users.

How do we incentivise the production of accurate information online by knowledge generators?

As mentioned above, women's health infrastructures within existing health systems are struggling. As a result of the pandemic, <u>wait times</u> for gynaecological procedures were in some cases, years, (though wait times have improved, they are still too long) and health care provider (HCP) <u>burnout</u> is on the rise. So, how do we incentivise the creation of engaging medical communications from leading HCP or researchers in the field? As of now, for many, it is done in their own time and without additional financial compensation. From personal experience as a women's health researcher, science communication and public engagement still aren't seen as integral parts of the science life cycle, rather a tick box exercise now required by some funders. Is it a researchers' duty (aside from funding body requirements) to engage the public with their research? I would argue yes, but this remains to be discussed by the research community.

Structurally, there still exists a disconnect between research and health care provision priorities and science communication or co-production. With Flo's report, and mounting evidence from researchers in the digital health space, it's clear that women are turning to social media for health information. When done correctly, disseminating information, and engaging with the public on social media can be mutually beneficial for the user and HCP alike. Women get access to evidence based information, and HCP/researchers increase the

awareness and impact of their work. The ultimate question though, is how do we fund this type of work, and how does it become prioritised in the women's health landscape?

What does the future of women's health and the media look like?

For online communications to be as beneficial a supplement to health care as possible, this work must be accessible, patient-centred, and crucially, accurate. Particularly as we see a stark move towards digital health platforms and FemTech solutions, these factors are even more important. From this workshop, Dr Krockover was 'energised by the depth of discussion and breadth of participant backgrounds' at the table to envisage this new future together. By canvassing the current situation, as well as identifying the need for health literacy, a solid foundation for considering next steps was laid. To action these, Mitzi outlined some necessary advancements:



- 1. A consensus on what is classified as credible information and sources, and from there;
- 2. Technology to cull through the overwhelming amount of new data generated daily, considering the consumer's educational background.
- 3. Increased health literacy, and possible guidelines for women to help them become aware of the credibility of information and the motivations of those providing it.

It's clear that a movement is needed, and perhaps it's one that we're already a part of, with *all* stakeholders at the table. If tech will be playing such a massive part of our health knowledge, literacy and care, infrastructure needs to be put in place to ensure that women are able to access and understand high quality health information on social media. On the other hand, and importantly, we must consider where our health information is coming from online. With

the momentum from the Summit, the impact of these conversations has only just begun.

Leveraging this with the diverse experiences, resources, and dedication from attendees, it will be promising to see how in a year's time, we've been able to further its impact.

Additional perspectives:

Daphne Petrich - Senior Business Development Manager @HelloBetter



We discussed the topic of ad censorship, which is a timely topic given the CIJ's recent legal complaint (Sign the petition here)

We discussed how women are taking charge of their health due to systematic misdiagnoses and disregarded pain. Trust is at an all-time low, especially for vaginal discomfort (BV, vaginismus etc.) and autoimmune diseases. We highlighted the power of social media in democratizing access to science. Women can make sense of their symptoms and turn to the best specialists to 'optimize' their health outcomes. At the same time, consuming health information in a bite-size format is limiting and potentially dangerous. We discussed how different stakeholders could protect us from misinformation.

Lily Pemberton - Women's Health Physician

I think one of the recurrent themes of our workshop was that women often don't feel heard in the medical system. Women often put themselves last when it comes to their health needs, and when they do make it to the healthcare system, their symptoms are often ignored or dismissed. This is multifactorial and has to do with a lack of physician education and awareness, a historical lack of information regarding women's specific health issues and natural history of disease in women, and stereotypes and gender biases that lead physicians to ignore or try to "normalize" women's symptoms as part of "just being a woman". My personal solution as a physician is to keep myself informed about emerging evidence in women's health, as well as practicing empathy and "believing" my patients



when they feel like something is wrong. I think a large part of the solution in addressing women's health is to first teach student physicians and other healthcare workers about these historical biases in medicine against women, and to build on the growing emerging knowledge regarding women's differences in physiology. I think the "male mode;" as normal has existed for far too long, and the teaching as well as the practice of medicine need to be adjusted.



Kathryn King - Founder @Bloody Honest

It certainly shocked me to learn just how poor education is on Women's Health when I first started having these discussions. Some of the most common questions I get on TikTok is "Where is the vagina?" and "How many holes do I have?". It's hard to tell how old some of these young people are but I would guess around 11-14.

I think while there are so many amazing people doing amazing work in the area, it's so easy for people who have knowledge and expertise not to realise just how low the bar is for health literacy.

I don't have an academic or clinical background so some people might wonder what gives me the right to talk about it. In reality, it's because I'm not a clinician or an academic that helps me communicate with the young people who so desperately need the discussions.

I am incredibly conscious of the damage misinformation can cause, and make every effort to be as responsible with my platform as possible. I tend to stick to personal experience or what's considered 'common knowledge' as far as possible; or ensure I cite anything further and will often discuss topics as theory vs fact. It can feel impossible, even for people who have some knowledge on the subject, to know where and how to access credible, reliable information.

It's imperative for the advancement of women's health literacy that there is constructive collaboration between media and experts, built on mutual respect and core understanding of the needs of the public.

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