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The impact of social media on health related outcomes behaviour in South Africa .

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The Impact of Social Media on Health Related Outcomes Behaviour in South Africa

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A research report submitted to the Faculty of Commerce, Law and Management, University of the Witwatersrand, in partial fulfilment of the requirements for the degree of Master of Business Administration

Johannesburg, 2017

ABSTRACT

The social media landscape in South Africa is continually growing and has presented vast opportunities for the healthcare industry. This research report explored the behavioural change impact that a health awareness social media campaign had on its followers.

The research method was qualitative research and semi-structured in-depth interviews were conducted in order to gain a better understanding of the impact the @BrothersSA account had. The participants interviewed were individuals who followed the Brothers For Life (BFL) account on the social media platform, Twitter.

The results indicated mainly two important findings. Firstly, an individual's social network has influence over their behaviour and secondly, social networking sites play a crucial role in behavioural change. From the data, the participants displayed that there was knowledge gained as a direct result of BFL on social media and furthermore this newfound information was enacted upon.

DECLARATION

I, Sivuyile Madikana, declare that this research report is my own work except as indicated in the references and acknowledgements. It is submitted in partial fulfilment of the requirements for the degree of Master of Business Administration in the University of the Witwatersrand, Johannesburg. It has not been submitted before for any degree or examination in this or any other university.

Sivuyile Madikana

Signed at ……

On the …….. day of …… 20…..

DEDICATION

This paper is dedicated to my mother Lindiwe Madikane and grandmother Nombulelo Siqhola.

ACKNOWLEDGEMENTS

It takes an entire village to raise a child.

Firstly thank you to Wits Business School for affording me the opportunity learn and grow in becoming Master in Business Administration. Thank you to my family and friends who managed to keep me sane throughout the whole process and encouraged me every step of the way in this journey. Without their loving kindness and support, this journey would not have been possible.

Thank you to my supervisor Antony Soicher for the guidance and giving me free range to explore a field not many understand.

Thank you to the Brothers For Life for allowing me to use them to break new ground, Brenda, Sara and Rogers.

To the MBA Class of 2017, thank you for making the journey so very worthwhile. We grew, slipped, got back up and stood together. Always remember, success is not a destination, it's a journey in the process of becoming.

Lastly, I learnt again this past year that every wonderful and beautiful thing comes from the Lord, without whom, none of this would have been possible.

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CHAPTER 1. INTRODUCTION

1.1 Purpose of the study

The purpose of the research is to explore the behavioural impact that open social network healthcare accounts have on the user followers in the South African context.

1.2 Context of the study

The space of social media in South Africa has grown in leaps and bounds over several years, with current statistics indicating that growth has been significant, especially with the larger open social media networking sites such as Twitter and Facebook. South Africa currently has 7.4 million users on Twitter and 13 million users on Facebook (Goldstuck, 2016). This growth of the social media industry has provided useful new opportunities for many sectors, including that of healthcare. There are both open social media platforms and intentionally designed online health communities (Centola, 2013). However the latter is not as popular in the country for various reasons. The theories of social networks, influence and social diffusion have been researched widely. More specifically in the health context, the notion that people are Interconnected and therefore, their health is interconnected (Smith & Christakis, 2008). In the adoption of certain health behaviours, social influences have been identified as a key factor in the process, affecting acts such as dieting, smoking cessation and exercise routines (Centola, 2013). Unlike developed countries, the burden of disease is different in South Africa; the country has faced the challenge of the Human Immunodeficiency Virus (HIV) and Acquired Immunodeficiency Syndrome (AIDS) for decades and it is said to have one of the highest rates of infection and prevalence in the world with an estimated 6.3 million people living with HIV in the country in 2013 (AVERT, 2013). With numbers as high as these, it is clear that many avenues have to be explored and utilised to increase awareness and prevention of the epidemic, and one such tool is social media (Mpofu, 2014). With the understanding of social influence as a

driver for health behavioural change, social media has a significant role to play in the sphere of health. Organisations in the field of health have new found opportunities in investing in a different space to promote healthcare, such as social media campaigns as opposed to traditional means of media, however currently unknown are how far reaching these effects are.

1.3 Problem statement

1.3.1 *Main problem*

The purpose of this research is to explore the behavioural change impact on user followers who follow an HIV awareness campaign in South Africa on Twitter.

1.4 Significance of the study

The study provides guidance to health organisations and individuals in the area of health communications to understand how better to utilise the digital social media platforms currently available. Furthermore, to understand the significance of behavioural change in user followers on a social media platform.

1.5 Delimitations of the study

1.5.1 *Delimitations*

- The open social media platform that is explored is that of Twitter. Intentionally designed social media platforms are rarely used in the South African context and the number of online users are lower compared to those of open social media platforms. The interactions on this platform are continuous and dynamic as compared to other forms of open social media platforms (Centola, 2013).

- The Brothers For Life campaign (account @BrothersSA) is the open social media account on Twitter being reviewed.
- Followers of the account @BrothersSA are the users that have been identified as potential participants for the interviews in this study, based on their interaction with the account @BrothersSA.

1.5.2 *Limitations*

- The users who follow and interact with the @BrothersSA account are eligible for inclusion in the study and not any Twitter user who may interact with the account.
- The study is only being conducted on Twitter and not any other social networking site.
- The study is limited to people who have access to the Internet and mobile devices and thus excludes certain individuals who do not have access to these means.

1.6 Definition of terms

Social network: the relationship between individuals that is interdependent and formulated by social ties such that there is a flow of information and influence (Smith & Christakis, 2008)

Twitter: it is an online digital social networking platform used by millions around the world to stay connected. Communication is passed on through 140 characters per tweet (Huberman, Romero, & Wu, 2008)

Trending Topic: this is a topic or hashtag determined through an algorithm on Twitter to be popular at a particular point. This is tailored depending on the user's location and the people they follow (Twitter, 2017).

Username: this is how an account on Twitter is recognised; it is preceded by the symbol @. This is also known as a Twitter account handle (Twitter, 2017).

Hashtag: this is a word preceded by the sign # in Twitter, when a user clicks on the word, it will reveal other tweets containing the same keyword (Twitter, 2017).

Brothers For Life: an HIV awareness and prevention campaign directed at males in South Africa aiming to challenge stigmas around HIV and AIDS.

1.7 Assumptions

- There were individuals willing to participate in the research project given the nature related to the research object.
- Participants responded honestly with regards to change in behaviour.

CHAPTER 2. LITERATURE REVIEW

2.1 Introduction

South Africa has a growing interest in social media, as evidenced by the statistics and thus creating an opportunity to take advantage of this growing medium to be used for good. In a survey conducted by The South African Broadcasting Co-operation (2007), many youth reported that the media plays a big role in their lives and they are open to receiving more awareness around HIV/AIDS from this medium. This presents a unique opportunity to utilise all forms of media to create as much awareness as possible around HIV/AIDS. Therefore, understanding the fundamentals of how to influence a change in behaviour is a key concept researchers need to know. Further, using the tool that is open social media will assist in growing this influence and change in behaviour. Health interventions can be delivered through different forms of medium and it is important to learn how these need to be utilised for a sustainable and better outcome.

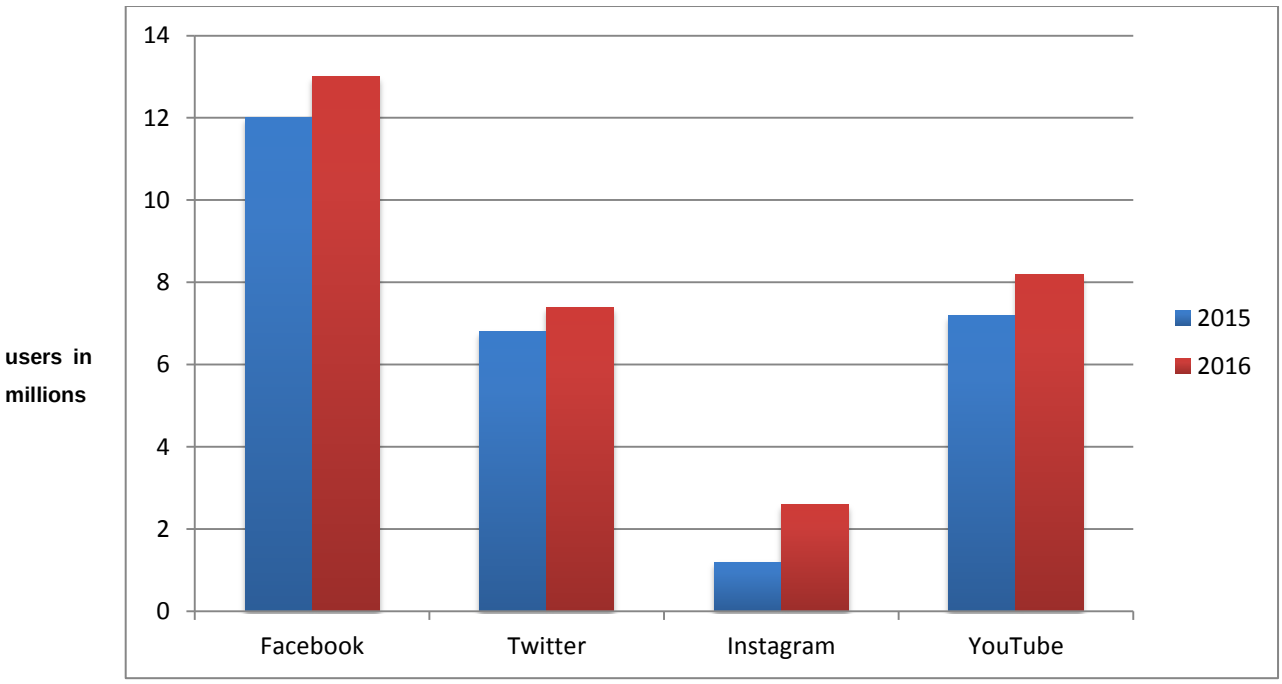


Figure 1. Snapshot of Social Media in South Africa (Goldstuck, 2016)

2.2 Background discussion

Open social media platforms are widely used around the world and in South Africa. Understanding the behavioural impact this new form of media has on user followers needs to be explored. This behavioural change impact is explored on the basis of the social network theory allowing for social influence on user followers. These concepts are explored on the basis of their use in health related outcomes.

2.3 Social networks, diffusion and influence on behavioural change

Social ties have been under investigation by researchers for many years and most recently, social ties and health have taken a leading step to truly explore the different facets of how these networks affect health (Umberson, Crosnoe, & Reczek, 2010). In the following section, we explore the idea of social networks and their influence on individuals and most importantly, their health. Included in this is how the phenomenon of behavioural change, can be accounted for by social ties.

2.3.1 *The phenomenon of social influence in social networks*

As noted earlier, people are interconnected and so their health is interconnected (Centola, 2013). The concept of social networks has been under study for many years, more notably in the fields of sociology, psychology and more recently, the field of health and related matters. The focus in the last number of years has been in trying to understand how social influence in these social networks affects behaviour over a long period of time (Newman, 2003). There has been much research conducted around the effects of social influence on health with different groups of individuals (Smith & Christakis, 2008), there were notable studies that looked at different health related conditions such as obesity, smoking and sexually transmitted diseases (STD's). In these studies it was found that various health related phenomena have a linkage to social influence and the networks that people share (Rosenquit, Murabito, Fowler, & Christakis, 2010). In a longitudinal

study by Christakis and Fowler in 2007, measuring obesity in a social network, it was apparent that obesity could spread amongst social networks in the same manner as that of an infectious disease. In Figure 2 we note two social networks that are interconnected, individuals connected to one another and two networks connected by one individual. Notably, if a person's friend was obese, there was a 57% likelihood that the individual would also become obese, and even higher if the individual was the same sex (Smith & Christakis, 2008). It then slowly becomes evident that an individual's social network has direct influence on them and thus on their behaviour. With this knowledge in hand, many studies have attempted to understand these links between behaviour and social influence, however, as many studies have been unable to address the issue of causal identification (Centola, 2013). In a sense, they have been able to draw an assessment that there are links between behaviour and the health of individuals in a network, however, have been unable to fully correlate the extent to which social networks have an influence on behaviour as compared to behaviour being influenced by exposure to shared external signals. It is noted that determining the extent of the behaviour is both difficult and complicated, the reason behind this being a fundamental understanding of the timing of the change in behaviour, and that of a population's social network structure (Centola, 2013).

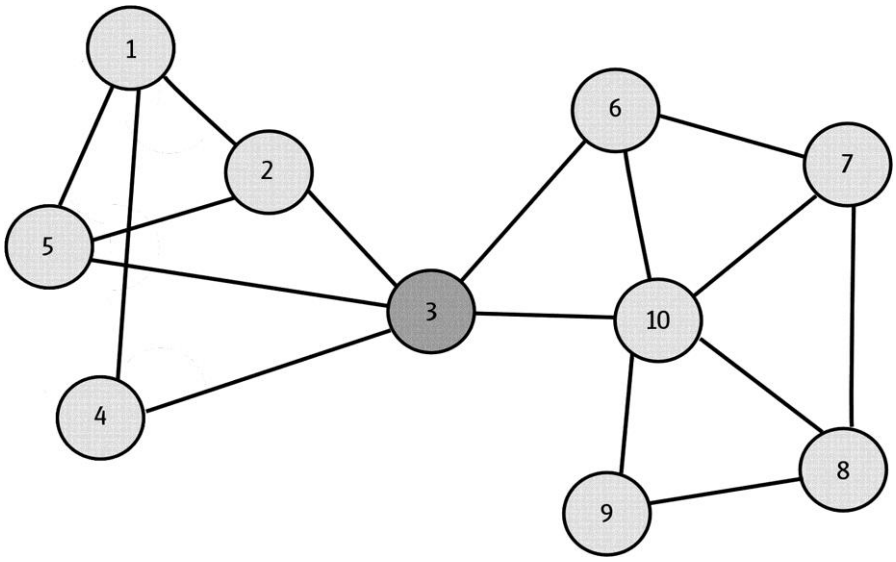


Figure 2: Social network theory (Coleing, 2009)

Research tends to look at the negative effects of social influence and how these impact negatively on the health of the observed participants. However, a study conducted in 2010 titled *The Spread of Alcohol Consumption Behavior in a Large Social Network,* found that social network effects could be bidirectional, meaning both positive and negative consequences on health behaviour can be noted. In a practical world example, a group like Alcoholics Anonymous (AA) has used the same notion of formulating a large social network to spread a message and eventually a behaviour to encourage abstaining from alcohol (Rosenquit, Murabito, Fowler, & Christakis, 2010) in a sense creating a positive network that eventually promotes positive behaviour.

In conclusion, the paper by Rosenquit, Murabito, Fowler, & Christakis (2010), demonstrated that health behaviour can be correlated to social influence and in order to tackle a public health issue, it would be right to target groups of social networks and not just individuals, in a sense, influencing the network as a whole to change the health related behaviour.

2.3.2 *Dyadic and Supradyadic Effects*

Individuals with the same network ties tend to display the same behaviour or change in behaviour due to a number of reasons, some of which include exposure to the same external media signals, individuals that are geographically constrained to the same region or area, choice homophily and social influence (Centola, 2013). Social network ties have been found to have implications and advantages with numerous fields and it is hypothesised that they possibly have implications in health as well (Smith & Christakis, 2008). When analysing social networks, one needs to look at both the individual (egocentric) and the social ties the individual holds (sociocentric), thus essentially analysing those who influence and those who are being influenced. When analysing network ties, one can note both dyadic and supradyadic effects (Smith & Christakis, 2008). In this paper, we focus on the supradyadic effects in social networks. There is evidence that notes the health of one member of a dyad (a pair) affects the health of another member of the dyad, thus demonstrating the interlinkage of health between humans with a

social tie (Smith & Christakis, 2008). Supradyadic effects measure the influence individuals that are not directly related in pairs have on each other. Research studies have made advances in our understanding of how social networks have influence over health behaviour (Centola, 2013).

2.3.3 *Proposition 1*

An individual's social network has influence over their behaviour and thus will lead to behavioural change.

2.4 Open social media platforms and health behaviour

The digital age has taken over the world and social media is fast becoming an integral part of our society and lives. There is no denying that many avenues of life are affected by the new technology, including that of health. The Internet and social media are changing the way communication is occurring, no longer just a one-on-one basis, however, one to many people. A doctor or even health organisation can tweet or even put up a blog post that can be shared, thus sharing of accurate and expert opinionated information occurs (Hawn, 2009). Included in this, is the idea that people can now use Facebook, YouTube or Twitter to share health stories from around the world as they emerge. According to Maher et al., (2014), social networking sites account for a quarter of the total time that people spend online on the Internet, creating ample opportunity to target health interventions through this medium. Health conferences can be followed and shared using web links, searching for a health topic on Twitter, such as Ebola, can lead to new networks, new information and sharing (McNab, 2009). In the following section we analyse the use of open social media platforms and health interventions and how they can possibly affect change in behaviour. The linkages between social influence and behaviours can now be studied in much greater

depth of detail and at an even greater scale with the advent of the Internet and social media sites(Centola, 2013).

Table 1. Social Influence on Health Behaviour methods of study (Centola, 2013)

	Traditional Observational Data	Laboratory Experiment	Digital Observational Data	Internet Experiment
Scale	✓	×	✓	✓
Measurement	×	✓	✓	✓
Replication	×	✓	×	✓
Structural Control	×	✓	×	✓
Behavioural Fidelity	✓	×	✓	✓

2.4.1 *The age of Facebook and Twitter*

The global stage for social media has grown in the last decade with Facebook reporting more than 1.2 billion users and Twitter reporting 500 million users, however Twitter has a high defaulter user rate of about 30% (Laranjo, et al., 2014). The social networking site Facebook, reports much higher retention rates, noting that about 61% of its users log into the site on a daily basis. Furthermore, using these platforms allows the researcher to look closer at data and calculate

with a certainty the reach, engagement and retention of users in relation to health interventions initiated (Maher, et al., 2014). The numbers of users of social media, as noted earlier, are smaller in South Africa, however still representing a growing industry and platform of digital media. It is hypothesised that online social media platforms could possibly be more effective than traditional forms of media due to the level of engagement needed by the users. Traditional forms of media, such as broadcasting or even web advertising, have a passive nature about them with the users (Maher, et al., 2014). The same authors found that in a health intervention study on Facebook by Foster, there was a high engagement rate with users that already knew each other outside of the social networking site. This was atypical compared to other studies that found that user engagement was low, even with high retention rates. The advent of social media has brought about new avenues to connect people, whether it is people with already existing relationships or new individuals who connect through different and varied interests (Boyd & Ellison, 2008). Open social media platforms are being increasingly used as tools of communication to a wider, bigger variety audience, much larger than before (Boyd & Ellison, 2008). It is these same platforms that are discussed in this paper and not intentionally designed forms of social media.

Open forms of social media as opposed to intentionally designed health social media platforms are regarded as being better for studies related to health interventions. This includes the fact that there are millions of users with already existing social networks online, the platforms also form part of the users' daily routine and not an extra site they need to attend to specially and this improves engagement and retention rates of users (Laranjo, et al., 2014). It is stated that intentionally designed health sites have the bias that individuals who join them were/are already motivated to change their behaviour, hence the participation (Maher, et al., 2014). These social networking sites include the likes of TuDiabetes, which is aimed specifically at patients suffering from diabetes and PatientsLikeMe, which is a site for patients with all types of chronic conditions (Laranjo, et al., 2014). As can be noted, these special sites are designed with a

specific purpose in mind and those that join, would be joining with the idea of a specific outcome.

The question still remains, how can social media be used to evaluate the effects of social influence on behaviour change? A meta-analysis conducted around the influence of social networking sites (social media) on health behaviour change found there was a significant statistically positive effect on behaviour by social networking interventions (Laranjo, et al., 2014). A study by Young and Jaganath (2013) in the United States of America (USA) was conducted on online social networking for HIV prevention and education using a secret group on Facebook. Participants were asked to join an online group, which no one else could access except for the invited users and which prompted positive messages about health and HIV. The researchers found that participants were willing to engage in conversations around HIV and STD prevention on the open social media platform (Young & Jaganath, 2013). The study concluded that open social media platforms are a feasible way of communicating health related messages, specifically around HIV testing and education. However what was not known was how these platforms can be used efficiently and secondly, how they can increase long-term communication and retention (Young & Jaganath, 2013). This study however focused on the level of communication and could not measure actual change in behaviour; also of note is that the nature of the secrecy of this group on Facebook made it questionable whether the page could still constitute a form of open social media when the group is secretive, even though participants use their own accounts. A change in behaviour was not measured in this paper, however what was found was that conversations around the health issues were evident once introduced, to what extent this relates to behaviour change one cannot be certain.

A Randomised Control Trial (RCT) by (Bull, Levine, Black, Schmiege, & Santelli, 2012) which utilised Facebook, concluded that open social media health interventions in the short term can be used to change behaviour (in this trial,

prevention of decline in condom use was the measure of change in behaviour) amongst high risk teenagers in the USA. The paper also noted that youth using open social media do not actively seek out health pages on social media. We must take cognisance of the fact that this paper used JUST/Us which is a special page created for this type of intervention – thus using Rich Site Summary (RSS) feeds to deliver messages to the youth that had prescribed to it.

Other domains for research besides open social media platforms that can be explored include other forms of social networking sites such as blogs, websites and discussion boards (Laranjo, et al., 2014). A meta-analysis conducted around Internet and computer based interventions demonstrated that groups at risk showed improved sexual health outcomes with the use of health promotion interventions (Bull, Levine, Black, Schmiege, & Santelli, 2012) and that these interventions were as effective as non-technology based ones. However the extent to which these outcomes were carried out is unclear. Other studies have found that social reinforcement is needed if certain behaviour is harder, costly or even deemed difficult (Laranjo, et al., 2014).

Using social media can be a powerful tool to reach larger numbers of people who continually use the Internet and the new digital space available to them (Bull, Levine, Black, Schmiege, & Santelli, 2012). A suggestion by the same authors was whether having clinics and other health facilities that promote health, and in their case sexual health, gaining an online presence would be beneficial to improved behaviour around sexual health (Bull, Levine, Black, Schmiege, & Santelli, 2012). Another systematic review asked the questions whether behaviour change is related to the information being continually delivered or would the engagement cease once the intervention has stopped? (Maher, et al., 2014). Further research is needed and must look at the possibility of further increasing engagement and a look on how to sustain the behaviour change that is noted. (Maher, et al., 2014).

Lastly, social media is quickly changing how people all over the world communicate, no more borders and almost near face-to-face communication occurring (McNab, 2009). When it comes to health, the information relayed needs to be clearer, correct and effective. Health professionals should not just pass on information; however they should use it as a tool to engage (McNab, 2009). Different members of different communities share information about health because of Internet based resources and new social media; geography is no longer an obstacle in obtaining certain information about health (Centola, 2013).

2.4.2 *Proposition 2*

Using health interventions on open social media platforms can be used to influence change in the health behaviour of individuals.

2.5 Conclusion of Literature Review

A number of fundamental issues have been gathered from the above literature and are highlighted. Social networks have a bearing on behaviour through the process of social influence and diffusion. Studies demonstrate that once individuals are interlinked, individual behaviour can become adopted. This behaviour can also be bidirectional. Using social media health interventions works. However, the extent to which the effect occurs on the individual cannot be ascertained. In the context of South Africa, this information can be used to tackle one of the biggest epidemics facing the country, however, it is important to understand how far reaching the change in behaviour is and does social media in our context as a developing nation work. Lastly, there is a great limitation to studying behavioural effects through social network interventions as some of the information could possibly exclude certain people in the population due to socioeconomic circumstances (Centola, 2013).

2.5.1 *Proposition1:*

An individual's social network has influence over their behavior and thus will lead to behavioral change.

2.5.2 *Proposition 2:*

Using health interventions on open social media platforms can be used to influence change in the health behaviour of individuals.

CHAPTER 3. RESEARCH METHODOLOGY

In this chapter we explore the research methodology of the study. This is an important aspect of any research; according to Green and Thorogood (2013) it is important to understand the principles of sound methodology. The researcher, now more than ever, may be called upon to describe and explain the basis on which their findings are grounded.

The principles of how the research data was collected, analysed and understood is explored in this section; conclusive examples of the research questions that were used and applied with the participants are included and lastly, considerations of the actual intervention being explored.

3.1 Research methodology

This research paper used a qualitative approach to gather data to deal with the research problem at hand. Qualitative research according to Green and Thorogood (2013) is about understanding the “what”, “how”, and “why” of the research phenomenon being investigated and not necessarily the “how many” and “ how much ”. Specifically in this case, the phenomenon under question is human health behaviour, which refers to actions by individuals that affect their health (Umberson, Crosnoe, & Reczek, 2010). Exploring and understanding the behavioural change impact of the social media health interventions on user followers is the outcome that is desired. Previous similar studies, as mentioned before, have attempted to relate behaviour change to interventions from a quantitative perspective. However to fully gain an in-depth understanding of an individual’s behavioural choices and experiences, one must approach such a research problem with a qualitative approach (Logie-MacIver, Piacentini, & Eadie, 2012). Green and Thorogood (2013) further state that qualitative studies should be characterised by the aims of the study and much less by the process of data.

3.2 Research Design

There are many different approaches when conducting qualitative research. The methodological instrument that was applied in conducting this research was semi-structured interviews. There are two other major categories of interviews that can be utilised, mainly, structured/ formal/ standardised and unstructured/ informal/ unstandardised (Ayala & Elder, 2011). The choice behind this type of interview process is guided by the notion that structured interviews may be too formal and we possibly stumble upon some difficulty in eliciting other information related to the reasoning behind the participant's behavioural change. Unstructured interviews are too informal and may lead to digression from the topic at hand for both the interviewer and interviewee (Ayala & Elder, 2011). Semi-structured interviews allow us to gain a better understanding around the result we are trying to elicit. There could possibly be different reasoning behind change in behaviour or lack thereof; it could be as a result of the social media campaign or possibly not. Understanding these sentiments and being able to elicit them from the participants is pivotal for a full comprehension of the outcome. Semi-structured interviews also allow for further probing of new information that may arise during the interview process, that the research team may have missed or not have thought of as important (Gill, Stewart, Treasure, & Chadwick, 2008)

3.2.1 *Advantages semi-structured interviews*

- Allows for interviewer to add on to questions already asked that are not on the original interview schedule, depending on each participant.
- Interviewee able to add on additional answers as this is an open-ended interview setting
- Two-way communication can be obtained between the participant and the interviewer

3.2.2 *Disadvantages of semi-structured interviews*

- Interviewer must be able ask relevant questions for probing.
- May lead off-track if structure of interview not maintained.
- Time consuming, interviews are in-depth and thus gaining a thorough understanding takes time.
- Experience is needed to elicit the best answers

3.3 Population and sample

3.3.1 *Population*

The Brothers For Life campaign is a mass media national and community mobilisation campaign across South Africa by different organisations, targeted at men with a focus on risk factors for driving the spread of HIV/AIDS (Sonke Gender Justice, 2011). Part of this mass media campaign includes interaction on Twitter under the handle @BrothersSA, thus the population upon which the research was conducted were the followers of the campaign on this open social media forum.

3.3.2 *Sample and sampling method*

Once the correct population has been found, the next consideration is the understanding and selecting of the correct sample frame (Ritchie & Lewis, 2003). In the case of this research, we used the method of purposeful convenience sampling, which according to Hardon, Hodgkin, and Fresle (2004) is when future participants of the research project are conveniently available for data to be collected from them. One of the possible drawbacks of the method of selection is that there may be bias, over-selection and possibly under selection of certain individuals (Hardon, Hodgkin, & Fresle, 2004). The research utilised, as mentioned, followers from the Brothers For Life account on Twitter, which is active, has followers and is used by the campaign to promote positive health norms, prevention messages and abstinence from risky behaviour related to

HIV/AIDS in men in the country. The sample the research was conducted upon included participants who:

- Follow the Brothers For Life account on Twitter.
- Have interacted with the account in the form of a reply to a tweet, retweet of the one of the tweets of the account, like of a tweet from the account or those who have sent a direct message to the twitter account.
- Followers that are male, as the health awareness campaign Brothers For Life is targeted at men.

Participants of the study were reached out to on Twitter, which is the open social media forum, firstly through tweets from the Brothers For Life account and respondents were considered according to the criteria set above. Secondly, other participants for possible interview were messaged through the direct message tab on twitter and it was those individuals who, again, fit the criteria set out above.

Twelve participants were required for the interviews. Ritchie and Lewis (2003) mention that qualitiative research uses non-probability samples to reflect features of a group and these need to be small. Futhermore, in a qualitative study conducted by Guest, Bunce, and Johnson (2006) looking at data saturation and variability, saturation occurred in the first 12 interviews and metathemes were already noted within the first six interviews. Therefore qualitative research does not need large number of particpants to gain an understanding of the themes that arise.

3.4 The research instrument

In this research, we conducted in-depth semi-structured interviews to address the research problem.

"..personal accounts are seen as having central importance in social research because of the power of language to illuminate meaning."(Ritchie & Lewis, 2003, p. 138)

The questions in the interview, addressed issues relating to behavioural impact and change thereof from the HIV/AIDS awareness campaign. Exploring the nuances related to the behavioural change or the lack thereof is ultimately what we were looking at in this research; the reasoning behind the actions taken by the participants and how far-reaching are the actions of the awareness on user followers or were there factors related to behavioural change that have not been explored. The fundamental key messages by the BFL campaign were formulated as the base of the questions in the interview, however leaving room in the interview to explore other aspects of the answers received that may not be on the original interview schedule. Understanding all these elements is fundamental to the research at hand. A key feature when conducting in-depth interviews is that the researcher combines a flexible approach with structure (Ritchie & Lewis, 2003).

The interviews were completely anonymous, thus participants were assured anonymity due to the nature of the research relating to a health issue in South Africa that is considered to be an epidemic. Secondly, ethical issues have been considered and thus ethically compromising questions were left out of the study. Lastly, the interviews were recorded with the permission of the participant. This instrument assisted the researcher in collecting the correct information and also the flow of the interview process. In the case of refusal for recording, written notes were the instrument used to collect the information.

Interview Schedule - Please refer to Appendix A

Letter requesting interview participation - Please refer to Appendix B

3.5 Procedure for data collection

The data was collected in a written form and also voice recorded with the permission of the interview candidate. In the case where in the participant of the interview refused a voice recording, written notes sufficed for the interview.

Interviews were also conducted ideally face-to-face, however, these have been noted to be costly, time consuming and apparently less effective (Ayala & Elder, 2011), however they do allow for clarification and development of rapport with the participants. For participants who were unable to perform interviews face-to-face, they were conducted over the telephone verbally.

3.6 Data analysis and interpretation

Once the data was collected during the interview process, it needed to be analysed and schematically drawn up. Data processing and analysis is an on-going process in qualitative studies, it is important to organise the information collected immediately after an interview is conducted (Ritchie & Lewis, 2003). In this research paper, themed content analysis was used to analyse once the data was gathered. Themes from the data collected arose as well as patterns. The frequency of these were identified and conclusions drawn (Ritchie & Lewis, 2003). Within the context of behavioural change, the reasons behind the change, the themes arising from that reasoning and the frequency were analysed and assessed and recommendations drawn.

3.7 Limitations of the study

- The study as noted already when dealing with sampling may have had bias, over-selection and possibly under selection of certain individuals (Hardon, Hodgkin, & Fresle, 2004) from the Twitter account followers.

- The process of data collection may have proven to be of difficult, followers of the BFL twitter account are from different sections of Southern Africa, thus face-to-face interviews may not have been completely possible. This would have taken away from the rapport that is needed with the participant.
- Due to the nature of study and methodology selected, the frequency of behaviour change was assessed, however more importantly the extent of behaviour change and the themes occurring from there.
- Participants may have been difficult to attract to the study as a result of the small number of followers the Brothers For Life account has on Twitter.

3.8 Validity and reliability

Validity in qualitative data is not easy to achieve and prove, this due to a number of reasons as noted by Roberts, Priest, and Traynor (2006), mainly there is the possibility of interviewer bias and interpretation thereof due to personal perspectives.

3.8.1 *External validity*

The nature of the study produced a small sample for study, making external validity difficult to adhere to. However, it has been suggested in literature that the use of triangulation will assist in gaining external validity, more specifically, triangulation through multiple analysis (Ritchie & Lewis, 2003). This entailed using more than one interviewer to conduct the interviews.

3.8.2 *Internal validity*

The research was set to explore the change in behaviour with the use of an open social media health intervention. The questions set out, measured that change and thus made the research internally valid. However due to the qualitative nature of the methodology used, there is a risk of data distortion secondary to personal analysis (Roberts, Priest, & Traynor, 2006). To steer away from this Ritchie and Lewis (2003) suggest the methodology be reassed on a continual basis looking at

the sampling, capture of the phenomena, identification of the behavioural change and interpretation, without bias.

3.8.3 *Reliability*

The research data collected and instruments used to collect the data made it reliable data. The interviews utilised the assistance of audio-aids and transcription if the participant opted out. Roberts, Priest, and Traynor (2006) denote that accuracy in both the transcription and recording of the data collected improves reliability. The data collected during this research proved to be reliable, and this was improved because transcription occurred immediately after the interviews occurred.

CHAPTER 4. DATA ANALYSIS AND INTEPRETATION

4.1 Introduction

This chapter of the paper focuses on the presentation of results obtained during the semi-structured in-depth interviews conducted. The interview process was facilitated by the interview schedule that was used as the research instrument. Initially there is a description of the data sample and later presentation of results obtained.

Themes noted throughout the interview process are presented in an attempt to answer the research propositions defined in the second chapter of the paper. Initially there is a focus on understanding how social networks, especially those created by the social media environment, have a social influence on individuals. The section that follows then looks at how this social influence has an effect on individuals and thus causing a change in behaviour. Throughout the chapter, the findings obtained through the interviews are correlated to provide a comprehensive collection of findings.

4.2 Sample

The sample of the research is made of 12 individuals who follow the Brothers For Life Twitter account. As noted in chapter 3, the sample was obtained through the BFL Twitter account using a tweet, requesting participants to partake in the study. Followers interested then approached the researcher with their details. The concepts of confidentiality and anonymity were explained to the participants and they were promised the former due to the nature of the study. Consent was obtained verbally from each participant.

Consent form - Appendix C

The sample varied geographically, with age, occupation and location, however most participants were from the greater Johannesburg area. The majority of the interviews were conducted face-to-face and a smaller number, those living in other parts of the province, were completed over the telephone.

All participants were male, as the account's focus is on men and creating awareness around the responsibility men have with regard to taking care of their health. The mean age of the participants were 25 years old, the youngest participant was 22 years old and the oldest was 34 years old. This is in keeping with the target market the Brothers For Life campaign is mandated to reach in the market. The participants' demographic also varied with regards to occupation; it was a mixture of young working professionals, university students and self-employed males. The participants have access to smart phones and were regular users of the social network site Twitter, logging on regularly to tweet or to read tweets on their timelines.

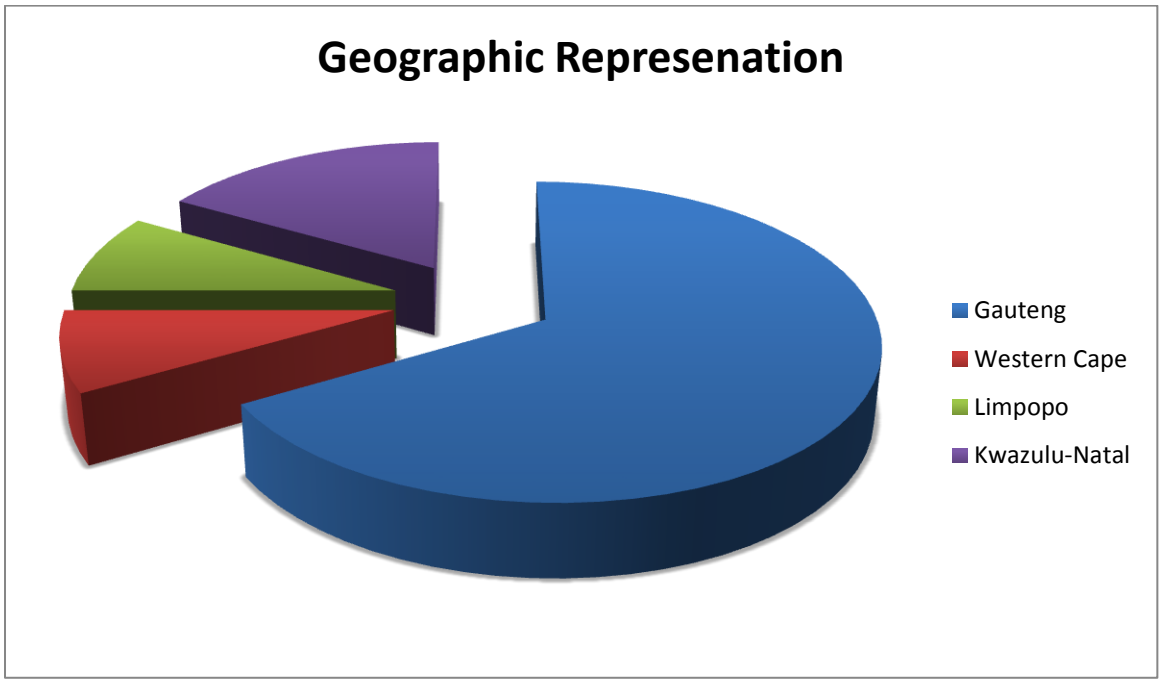


Figure 3: Geographical distribution of the sample

The next section explores the themes that came across in the interviews and it is analysed and grouped together to answer the hypotheses. According to Braun and Clarke (2006), thematic analysis in research is the process of analysing and identifying patterns within data, such that themes are identified. This tool of data analysis allows for better presentation of results in an organised manner. Furthermore, a theme highlights important aspects of the data that relates to the research question at hand, it picks up a pattern from the group of respondents (Braun & Clarke, 2006).

4.3 Results Pertaining to Proposition 1

4.3.1 *I Follow Because They Follow*

The first proposition of the paper is that an individual's social network has influence over their behaviour and thus will lead to behavioural change. Participants were asked why they follow the BFL Twitter account and for how long they had been following it. The overwhelming response pattern noted from the participants was that the twitter account had showed up on participant's timeline regularly, in the form of retweets from the people they follow. It must be noted that a Twitter user does not have to be following an account for that account's twitter feed to appear on their timeline. Candidate 10 explained that, after he had seen the tweets on his timeline, he enjoyed learning the new information that the Brother For Life account displayed, found it interesting and decided to follow it. Candidate 4 also agreed that the account's tweets appeared often on his timeline because common friends were following it; he found the Brother For Life account to be a great combination of a platform and content. The information and new knowledge that was being given out by the Brothers For Life account seems to have played a role in the decision individuals took to follow the account. An overwhelming number of candidates used words such as 'it was something of interest'; 'the information seemed really cool'; according to Candidate 3, the messaging was 'cool and relevant'. Another Candidate noted that 'tackling social issues in this manner was 'new and different' and that made it interesting and a

page that should be given a try. Thus the messaging played a pivotal role on the decision taken to follow the account.

The candidates also gave a sense that they did not want to feel left out. Most of the influence to follow the account came from the notion that the people they follow, i.e. the twitter users influencing what will appear on their timelines, were following the Brothers For Life account on Twitter and the users did not want to be left out of the loop. The fact that people they know are following Brothers For Life, made them want to follow the campaign.

4.3.2 *The Trending Topic*

A few of the candidates indicated that the reason for following Brothers For Life was because they had seen it 'trend' on twitter. When a topic is deemed to trend on social networks, it is perceived to have received talkability with a significant number of individuals in the social space. Candidate 7 came across the Brothers For Life Twitter account because it was trending and receiving a number of mentions on social networking site. For these reasons, he decided to take a look at the page and then consecutively, decided to follow it thereafter. Candidate 12 was of the same mind, he had seen the account trend on twitter a number of times, for him that meant a lot of people were following the account and it had something great, interesting or controversial to discuss. After looking at the contents of the Twitter page, he followed it based on the information that was contained in it.

Candidate 2 discussed how he had heard a radio advert which was then followed by a radio interview, the information contained in those segments of that medium caught his attention and he went on Twitter to look for the Brothers For Life twitter account. The approach by the Candidate 2 shows us the interlink between different forms of media. For had it not been for the radio interview, the candidate would have probably not have known about the Brothers For Life campaign. The broadcast media interview sparked the interest of the candidate to search on Twitter for the account.

Another candidate mentioned that he had been on a different platform of open social media, Instagram. The picture posted on the platform had been eye-catching and slightly informative. The banner posted, contained information regarding where to find the Twitter account of the campaign and some details about the awareness. From the one picture, he believed there would be more information on Twitter with regards to HIV/AIDS on the campaign account. This again goes to show how different forms of media are interlinked, where one will lead users to find another. There is less isolation and more cohesive action of how people collect information.

The Brothers For Life campaign managed to have many people tweet about it, to a point where it trended, according to the candidates. The perception of a trending topic means that something interesting around the issue is occurring in the users' social networks, thus attracting more and more people to want to look for the account and follow the campaign.

4.4 Results Pertaining to Proposition 2

The second proposition of the study was that open social media platforms using health interventions could be used to influence change in the health behaviour of individuals. Specifically, we look closer at the actual work of the Brothers For Life campaign on Twitter, more specifically their messaging and health awareness efforts and whether the followers displayed any change in behaviour as a result of the campaign.

4.4.1 *#Testaboi*

The participants were asked around the messaging of Brothers For Life, specifically, what the key messages of the campaign were about and secondly, which message stood out for them. This is important as a fundamental basis of the campaign's work.

70% of the candidates cited getting tested for HIV/AIDS or knowing your HIV status was the one message that stood out for them. The hasthtag #testaboi, meaning get tested and specifically referring to men was the overriding strategy for the current phase of the campaign. So, the majority of participants understood this and remembered it. Other participants were not far off with their responses; some answers included knowledge around safe sexual practices. Candidate 1 highlighted practicing safe sex, while candidate 7 said medical male circumcision, which has been a pivotal concept around the Brothers For Life branding. Circumcision was discussed even outside the space of Twitter, including TV and radio.

When asked about the key messages of Brothers For Life as a whole, the candidates displayed knowledge that was very informed and in keeping with the campaign's strategies and guidelines. Candidate 2 noted the messages that stood out for him included knowing one's HIV status and being informed about healthy sexual practices. The participant with the most comprehensive response was Candidate 7, he highlighted safe sexual practice, using a condom as a prevention method, the importance of Male Medical Circumcision in prevention of sexually transmitted infections, the importance of brotherhood in order to curb the scourge of HIV/AIDS and lastly, being able to discuss taboo topics as men/brothers without being scared of feeling ashamed. Other candidates noted that the messages that stood out for them were helping men understand their roles in the HIV epidemic in the country, furthermore, ridding men of the phobia of informing themselves about their health and risks involved.

One candidate was slightly unsure of the messaging of the campaign; he highlighted health and awareness as the key messages for which the campaign stood.

However, the responses highlighted by a majority of the participants, display that followers of the campaign are assimilating the information being given out by the Brothers For Life. A solid understanding of the principles and having a base knowledge are the initial steps to eventually changing behaviour.

4.4.2 *Practice What You Learn*

Question: Brothers For Life promotes testing regularly every three months and knowing your HIV status. Have you followed these messages? And why?

The whole sample answered yes to the above question, however most did not know about the regular three-month testing periods.

Two candidates in the sample answered that yes they did follow the messaging about testing for HIV/AIDS, however the reason behind it was that they were part of a rewards programme with their medical aid. There are certain medical aids around the country with certain rewards programmes for their members. This is seen as a way to keep them healthy and fit. Members are rewarded with points for good healthy practice. Testing in their cases gained them more points with the rewards programme. One candidate noted that this was a big motivator to getting testing and further, keeping healthy.

One candidate believed that testing regularly is vital and important, however had not been doing as often as stipulated. Every time he would get a chance to get tested he would do it. The 3rd candidate indicated that he had been tested since the start of the new Brothers For Life campaign and since he had begun following it, this was as a result of the campaign's messaging according to him.

When the participants were probed further about getting tested and the reason behind this move, half the sample informed the researcher that this was information they knew already, i.e. getting tested for HIV/AIDS regularly. One candidate had seen posters and other activations at university on a regular basis. Three of the six candidates affirmed that the information was not really new and they had gained this knowledge from past experiences such as watching certain TV programmes like Soul City or Intersexions, or listening to radio shows and advertisements. Half the sample of participants affirmed that Brothers For Life had

re-enforced information that they already knew. One candidate said the Twitter page serves as a great reminder to get tested on a regular basis because without these signals, people forget to look after their health if they are not immediately sick. Candidate 7 reaffirmed this notion, he named it ‘that thing one is supposed to do and never gets around to doing it’, Brothers For Life now put the agenda of getting tested at the forefront the things he needs to do with regard to taking care of his health.

One candidate cited not being sexually active, however still saw the need to get tested, as it was good practice. This information about getting tested he said was information that he learnt from Brothers For Life aswell.

The participants in the interview as a group seem to have gained knowledge from the efforts of the Brothers For Life account. The messaged about getting tested regularly was assimilated by the group as indicated by the sample interviewed. Whether the knowledge was new or re-enforced, candidates’ responses seem to be in agreement with information gained and practiced. The motivations for following the recommendations are varied, however there is a sense of unity.

Question: The account further promotes prevention methods, have you adopted any of these interventions and was this as a result of the campaign?

As part of spreading positive messages about HIV/AIDS, Brothers For Life’s messaging includes prevention of contracting HIV/AIDS. This message is delivered in the same manner as other messages of Brothers For Life.

A large portion of the sample agreed that they have been following the prevention methods promoted by the campaign. Candidate 2 stipulated that the reason for the prevention practice was not as a result of Brothers For Life alone. It is previous knowledge he had known and this was through different media signals in the environment. He noted that the space he comes from is privileged and thus he was exposed to constant information about such messaging. Another candidate

said the prevention methods he utilised are those he had previous knowledge of from the past, Brothers For Life served as great reminder and added to his knowledge base and of other things he can do to protect himself. Candidate 3 believes had the information not been re-enforced constantly, from pages and campaigns such as Brothers For Life, he does not believe he would have made the prevention methods a rule as he does currently.

Candidate 11 spoke about how the messaging about safe sexual practice from Brothers For Life influenced him to change and understand the importance of prevention. Even though he had heard this information previously, it was something he did not take entirely seriously.

A recurring term from the participants was the word re-enforced. According to a significant number of the people, the information about HIV/AIDS prevention methods they had heard numerous times, from mediums such as radio, TV, newspapers and government advertising. One gets the sense that, at some point and time, the participants feel as though they had been bombarded with information for a certain period of time. However, the consensus was the fact that that Brothers For Life included these messages as part of the principles they promote; it served as a great reminder and thus influenced the decisions they were making further into the future.

Candidate 5 summed up the above succinctly by stating ‘its stuff that you already know, it feels like it is always there. The page reminds you, keeps you on your toes’. He further went on to explain that, personally he still learnt new information with regard to prevention over and above the knowledge he had.

4.4.3 *Social Media Power*

The participants were posed with questions relating to the usage and power of social media and the effects it had on them personally; more specifically, the effect Brothers For Life’s social media efforts had on them.

‘Question: Do you think the Brothers For Life messaging on Twitter is effective?’

An overwhelming number of participants agreed that the messaging on social media was effective. They further explained their own understanding of this effect and power that social media holds in this new generation.

Two candidates discussed how they believe that social media and more specifically, Twitter, might as well be the new form of communication. Candidate 7 pointed out that the newer generation is not always watching TV or even listening to radio and that they are always on their phones and laptops. This means that they use these devices more often and are more likely to use Twitter than switch on the radio. This is why he believes social media is more effective for making people aware of HIV/AIDS. Candidate 9 highlighted that young people are fast and mobile and thus will stick with forms of communication that are as fast and mobile as they are. He also noted that Twitter as a platform is less boring than having to read pamphlets or look at infomercials.

One participant alluded to the messages being relayed in a medium that is culturally and specifically relevant to the South African demographic, a demographic that is highly active, however in need of information. He believes the messaging speaks directly to the public and him.

Candidate 2 discussed about how he likes that Brothers For Life on social media used a mixture of medical professionals, personalities and real life people to deliver the messaging. This made the messaging more authentic and relatable.

In order for a message to reach its desired audience, it has to be part of their culture. According to Candidate 1, Brothers For Life tapped into the youth culture. He believes young people in the 21st century are using social media constantly and therefore the need to use these current tools as they are, using them to deliver the message they need to hear. The messaging needs to be packaged as something cool that people can relate to as well.

Two candidates spoke about the name of the Brothers For Life account on Twitter '@BrothersSA' and how it gave them the sense that the account enclosed a community of brothers that will look out for one another.

Candidate 12 highlighted that Brothers For Life on Twitter made questions and answers more accessible to the public. A follower would be able to pose a question and they would receive an answer or even possible direction where they could find the right answer for themselves. This, according to him, is where the effectiveness lies. Another participant pointed out that the objective of Twitter is to capture audiences within 120 characters, make a point and move on and this part of the strategy the campaign did well, capturing the audience early.

Candidate 5 believes that the Brothers For Life message would be more effective if they utilised a closed platform as opposed to the open social media platform being utilised currently. The reason behind this he said, is that a closed network is personal and private and builds a sense of trust and confidence where people are able to share their stories more freely. However candidate 10 disagreed with that notion. According to him the campaign on Twitter made it easier to start a conversation as opposed to having it in a hidden forum. Furthermore, on Twitter one can be anyone they want to be, because people are allowed to use handles, which could be different from their actual names. This he believes has made it easier for people to ask questions and engage without feeling stigmatised or alienated, because they are handles.

The rest of the sample agreed that the messaging on Twitter is effective, however they had areas of improvement that they believe would make the future campaigns more compelling. The suggestions are explored a bit later in this paper, when candidates were asked to how they would make the campaign better.

'**Question: In your opinion, has the Brothers For Life account helped change your behaviour?'**

When posed with this question the sample presented a mixed response. About 7 of the respondents agreed that the account has helped change some their behaviour.

Candidate 6 believes that the information he received from Brothers For Life helped change the way he looks at approaching HIV/AIDS. There was information that he had not known before, that he now puts into practice. Furthermore, he pointed out that retweets, especially those that came from people he knew and trusted, made him listen and act on the information that he was being given.

Both candidates 3 and 7 agreed that the twitter account helped it become easier to talk more openly about HIV/AIDS, be it on social media or in person to friends. The information given was not too high-level as well, it was made easier to understand and explain. Candidate 3 further highlighted that it became less taboo to talk about HIV/AIDS; he said that Brothers For Life helped in opening the door for people to start talking openly without fear of stigma.

The re-enforcement, according to one of the respondents, made him more aware about his health and that of other people. Had it not been for the reminder and new additional information from this signal, he probably would not have acted upon his previous knowledge. He added that testing is important.

Candidate 9 added that he no longer treats the whole topic with stigma as he used to previously.

The rest of the candidates disagreed with the notion that Brothers For Life changed their behaviour. Most of them used the word re-enforce. This was used in the context that they were given information they already had knowledge about. The Twitter account re-enforced the information. Candidate 4 believes it just changed his perspective of looking at HIV/AIDS. He found it astonishing that men do not get tested as often as they should.

Both candidate 11 and 12 agreed that the account did not necessarily change their behaviour; rather it made them more aware. Candidate 10 said he started sharing information more readily around the topic and in a sense that is how it changed some aspect of him.

The group’s point of conversion was that the information gained from following the account had assisted them in making decisions about their future, whether the

information was new or already known. Those who knew already were at a better place than before.

‘Question: Traditional media vs. Digital media’

A succinct response from candidate 10 when asked which medium did he think is more effective for our modern day. He noted that it all depends on the market one is speaking to. He does not believe there is a form of medium that is more important than the other as these speak to completely different demographics. An example was made of Twitter and how the messaging on the platform is fast paced and if one missed a message, it is difficult to gain back if they are not there at the moment. This is opposed a billboard that an individual can look at many times as it stays on the same position for a longer duration of time.

Two participants agreed that social media/digital media is where the world is moving to currently and therefore it will be more effective as time moves on. Candidate 1 lamented that it would be irresponsible as a society not to utilise more social media, as that is where the youth lives. In order to gain the HIV-free generation the government speaks about; organisations will reach out to young people in the space in which they reside.

Another respondent added that social media has very light hearted and sometimes frivolous conversations and talking points. The new addition of such great information, which is both serious and yet talkable will balance the platform. He added that more accounts like Brothers For Life are needed.

Three respondents discussed how they do not remember the last time they sat down to watch TV or made time to listen to the radio. As a working professional, the amount of time one has to listen to the radio, for example, is very limited. Candidate 12 added that he uses Twitter as a news source. While scrolling through, he finds interesting news articles, and then he will follow the link to gain more information. As noted before, two respondents had called social media the new form of communication due to its high pace and exchange of information regularly.

Candidate 9 said he thought social media was an effective way of bringing information across, however he still thought other forms of media are very important as well. He described a radio advertisement that he heard from Brothers For Life, which described a man getting tested for HIV and how he was the same person before and after. It is that kind of auditory memory that stuck with him.

The rest of the sample was in agreement that there is no one medium that should be considered more important than any other. They all play a role in bringing the same message across and are interlinked. One respondent noted that one cannot have a fully functional campaign in these modern days that does not utilise all forms of media to get an important message across. Whether it is radio, Television, Twitter, Facebook or even a blog, one has to be cognisant of the fact that there are people to receive that information on the other end.

'Question: Have you suggested anyone else follow the Brothers For Life page?'

When posed with this question, a small number answered with a yes. About three respondents had gone out to actively make an effort in person or over the Internet to give people recommendations that they must follow Brothers For Life. Candidate 3 had actively tweeted and tagged the account so that others could see and recommended that they follow. Another candidate said that he made the discussion about Brothers For Life part of his conversations with friends, in that way encouraging people around him to follow the campaign. Candidate 7 shared the information about the page to people he believed shared the same sentiments as he did.

The rest of sample answered no when posed with the above question. Candidate 10 cited that, he believes by retweeting, liking and sharing a post, that was his way of encouraging other to follow the account, though not an active measure, however it was deliberately done to influence those around him to have a look.

Most of the sample believed others will follow the same way they decided to follow from seeing their friends retweet and follow. If their friends saw it as interesting then they would make their own decisions to follow the page.

4.5 Summary of results

The interview process allowed the researcher to better understand the thought processes of 12 different candidates, who have one common denominator of following the Brothers For Life campaign on Twitter and their views and reasoning behind decisions taken to follow or change certain behaviour.

Through this process, the nuances behind the decisions made to follow a certain health intervention and what effect the campaign has on their general wellbeing and behaviour were discovered. From the results, we can see that social networks have influence on individuals' decisions and further, social media networks have influence over behaviour.

CHAPTER 5. DISCUSSION OF THE RESULTS

5.1 Introduction

The purpose of this chapter is to discuss the results obtained during the interview process in relation to and in comparison with the literature review completed in chapter two.

In the first section, we look closer at the data collected in relation to the first proposition. This takes a closer look at the concept of social networks and the social influence they have on an individual's behaviour.

The second section explores the concept of behavioural change in relation to a health awareness intervention in an open social networking platform in South Africa, on Twitter. This is all done with the hope to deduce a change in behaviour secondary to this intervention.

5.2 Discussion Pertaining to Proposition 1

5.2.1 *'I follow because they follow'*

In the literature review we noted that individuals with the same network ties tend to display the same behaviour or change in behaviour due to exposure to the same external signals, geographically constrained to the same region and even choice homophily (Centola, 2013). This notion is consistent with the evidence gathered from the different participants in the data.

As noted from the respondents, asked the reason for following the Brothers For Life account on Twitter, an overwhelming pattern response was that the information from the account had shown up on their timelines on a regular basis because of the people they follow and secondly, their friends and/or people they follow (their social network on the social networking site) on Twitter had been following the account. One of the respondents further explained that common

friends had been following the account and that is how the Twitter account came to their attention in the first place.

This is consistent with the information in the literature review which states that individuals with the same network ties tend to display the same behaviour due to the same external media signals (Centola, 2013). The participants in the research are linked through social ties on the social networking sites hence the decision noted to follow the Brothers For Life account. Furthermore, individuals in these networks did not want to feel left out as the influence was coming from people that they follow or knew.

However, the decision to follow the account was not based solely on the influence from others. Many of the candidates agreed that the information they found on the page seemed interesting, cool, relevant and a great combination of platform along with knowledge. One candidate further explained that the account seemed like it was doing a great job of tackling social issues in the country in a way that was new and different.

In the case of the decision to follow Brothers For Life, the data collected is consistent with the findings of Rosenquit, Murabito, Fowler, and Christakis (2010) on the positive consequences of social network effects. The Brothers For Life account aims to reduce the spread of HIV/AIDS through education and awareness, in a sense spreading a positive message and even reducing stigma. Like the example of Alcoholics Anonymous in their paper, the participants encouraged each other to abstain from alcohol, thus creating a positive behaviour change in their lives.

It is clear from the above that individuals in social networks are linked through social ties. The social network effects can either be positive or negative, a term known as bidirectional influence. In the case of the decision to follow the Brothers For Life account, it was a positive social network effect. As evidenced, one must not forget that the decision to follow was not based on the social influence from others alone, but other factors relating to the account that the participants found interesting enough to click the follow icon.

5.2.2 *The Trending Topic*

In the paper's findings from the interviews, a number of the respondents made the decision to follow the Brothers For Life account because it was trending on the Social Networking Site. Further, other candidates had found out about the account on other Social Networking Sites and other mediums of communication, such as radio.

In the paper by Centola (2013), the writer notes that individuals that are not linked in pairs (dyads) will still have influence on other individuals' behaviour. This is noted as a Supradyadic effect.

The findings of the research are in agreement with the literature that individuals do have to be pairs to influence certain behaviours. The network ties they share in the social network has influence over them. A trending topic trends in a community or region e.g. South Africa, and thus because of this reason, some participants came across the Brothers For Life Twitter account and made the decision to follow.

Again this is another example of the bidirectional behaviour of social networking effects on individuals, in this case being a positive effect. Social media has made the world very small, breaking down borders and even further eliminating boundaries, creating interlinks and paving a better way for communication (McNab, 2009). This is what we have seen with the effects of Brothers For Life and the people that follow it, linked with the decisions to follow.

5.3 Discussion Pertaining to Proposition 2

5.3.1 *'Practice What You Learn & TestaBoi'*

In the literature review, we touched on a meta-analysis that discussed the influence of social networking sites on health behavioural change. It found that there was a significant statistical positive effect on behaviour by social networking interventions (Laranjo, et al., 2014), however the study did not explain the

reasoning behind the decisions taken. In this paper, we aimed to gain knowledge and a better understanding with regard to behavioural change in candidates that followed the Brothers For Life account, and secondly, if this was the result of Brothers For Life or other signals from the environment.

Respondents in the sample displayed knowledge and understanding of the principles of the campaign, with many of them explaining key messages of the Brothers For Life, such as getting tested for HIV/AIDS, the importance of male medical circumcision, knowing one's HIV status and prevention methods and principles. The participants demonstrated that they could remember the principles of the awareness campaign and assimilate the information.

Furthermore, they were probed about key interventions the Brothers For Life account stood for and part of the information they had shared with their followers. The responses were varied, a large proportion of the sample explained that they had used the interventions noted and part of the motivating factor was due to Brothers For Life. This is in agreement with the information in the literature regarding behavioural change secondary to social networking sites.

Two of the candidates shared that their motivating factor to get tested was as a result of gaining extra points from their medical aid's reward programmes. This interesting information adds another layer to causes of health behavioural change, and should possibly be looked at for further research.

Some of the respondents further explained that the information they had seen on the Twitter account of Brothers For Life was not new, however of importance was that they felt it was a re-enforcement and because of that, they acted upon their previous knowledge. As candidate 7 noted, the information re-enforced by Brothers for Life messaging was now placed at the forefront of his agenda, which it had not been before. Candidate 3 agreed with that notion, citing that had he not come across the Brothers For Life account and all their information, there is certain behaviour he would not have changed. Congruent to the literature, which cited that social re-enforcement is needed for change if certain behaviour is harder, costly or even deemed difficult (Laranjo, et al., 2014). What the above

displays is the critical role that Brothers For Life played in the implementation of behaviour, which otherwise ordinarily, would not have been acted upon had there been no external signal or exposure.

From the interviews conducted, it is clear that the candidates had gained knowledge from the account. Whether this knowledge was new or re-enforced, they displayed that the information was assimilated. Gaining understanding as to the reasons behind the behaviour displayed has been pivotal.

5.3.2 *'Social Media Power'*

In the literature it is noted that academics have hypothesised the power of social media is continually growing and possibly could be more effective than traditional forms of media because of its active nature (Maher, et al., 2014). The participants in interviews were posed with questions relating to their experience of social networking sites, the Brothers For Life social media campaign and their experience on these.

Both literature and candidates agreed on the new use of social media. Two candidates stated that social media and specifically Twitter should be considered a new form of communication owing to the high pace and exchange of information. In the literature, McNab (2009) agrees on how social media is changing the way the world and how individuals communicate around the world, crossing borders and an almost near face-to-face communication. The author further noted that health professionals should not be passing information as a tool to engage people.

From the interviews, a majority of the candidates agreed that the Brothers For Life messaging was effective, highlighting how the medium and platform are culturally relevant for the demographic of South Africa. Candidate 1 further elaborated that the Brothers For Life campaign tapped into the youth culture and is relating to the target audience in a way and form they understand. These findings are in keeping

with the literature, which highlights that open social media platforms are increasingly being used as tools of communication reaching a bigger and wider audience, much bigger than before, as it is a different avenue on top of those that already exist to relay messages and information (Boyd & Ellison, 2008).

Another candidate noted the effectiveness as being the package the Brothers For Life account presented; how it brought across interesting, cool and informative information, which was delivered in a way that captured the audience early.

Another candidate indicated that the Brothers For Life campaign would be effective if it was done in a closed network and not on an open social media platform, building a sense of trust and confidence for people to share. However the literature disagrees with this notion, in that, specifically designed social network sites have the bias that individuals who join them are already motivated to change their behaviour (Laranjo, et al., 2014). Candidate 10 agrees with the findings in the literature, he explained that a platform like twitter allowed for sharing of information, instead of having it in a hidden forum, which further aggravates stigma. He added that using Twitter allows for the discussion to be in the open and people can engage more freely without feeling alienated or stigmatised. Closed social networking sites do not reach as wide an audience as open social media platforms; as stated before, the audience on open platforms is wider and bigger in terms of variety (Boyd & Ellison, 2008).

On further interviewing the candidates, they were posed with the question whether they believe they had a behavioural change as a result of Brothers For Life social media efforts on Twitter. The responses were varied, however the point of conversion for the group was that the account had assisted them in making decisions about their futures. Some candidates in the sample believe the information was re-enforced and not necessarily new, as they already knew it. As noted above, social re-enforcement is needed for behavioural change to stay and stick (Laranjo, et al., 2014). Candidates 3 and 7 agreed that the account helped in making HIV/AIDS less of a taboo topic and that they were now able to talk and discuss more openly with other people in person or on the social media networking site. Candidate 6 agreed that there was change in behaviour as there

was information that he had not known about before that he now puts into practice as a result of the new knowledge he has gained.

The respondents further explained how there were other media signals that played part of the decisions and information they had contained and acquired. All these are linked in the decisions made for the future, whether to change or not.

The literature makes note of the passive nature of traditional forms of media such as TV, Radio and print and how they are less engaging than that of social media (Maher, et al., 2014). A majority of the candidates interviewed agree with the literature, noting that social and digital media is where the world is moving to currently. Three other candidates firmly discarded the use of other forms of traditional media and emphasised that social media is where they engage with news, current affairs and even light hearted conversation and social banter.

Social media presents a different way of communicating and the effectiveness with which information is brought across makes it highly attractive for the younger generation to engage. Engagement means information that is being received is understood, tackled and thought about thoroughly. The respondents agree that social media is a great means to communicate, reach a wide audience and engage a demographic. Social media, according to Boyd & Ellison (2008), has brought about new means to connect people, whether these relationships existed or they are new.

Candidate 10 advocated for the inclusion of different forms of media when discussing which one is better, in a sense disagreeing with the literature. He advocates that different forms of media speak to different demographics. The fast pace of a social networking site still leaves room for looking at a billboard which will be in the same place for longer periods of time. Many of the candidates highlighted a number of times that the information they saw on the account was information that they had come across, however, in a different space such as TV or radio. The Brothers For Life twitter account helped re-enforce this learnt information, even though it was not necessarily new.

The room for different mediums of communication still exists, the wider the audience, the greater the reach for any health intervention. One cannot completely ignore one form of medium over another.

5.4 Conclusion

There were two propositions set out in this paper, and the aim was to understand and respond to these. The first proposition attempted to understand that an individual's social network has influence over their behaviour and thus will lead to behavioural change. The second proposition was that open social media platforms that use health awareness as a health intervention tool can be used to influence change in behaviour.

The information gained through the literature review and the interview process was in agreement.

Social media has changed how the world communicates, it has broken down borders that previously existed and linked different people with one another and with access to information. These social media sites have created groups of social networks. These individuals are linked through social ties which allow for influence on one another. In the case of Brothers For Life, the network effect was positive.

The other finding in the literature and data was that social networking sites play a crucial role in change of behaviour. The data displayed that candidates not only gained knowledge as a result of the Brothers For Life, however the information was acted upon.

The interesting aspects about the data were that most candidates agreed that information was not completely new, however it was learnt previously. The Brothers For Life account re-enforced this information, and had it not been for the signal, it would not have been acted upon.

The power of social media cannot be ignored in the changing world. It is pivotal and an essential tool in the new era. The communication that occurs from it and information displayed from it cannot be discarded. Another crucial finding is that,

in order to see real change from cohorts, we must use all the tools at our disposal, new and old.

CHAPTER 6. CONCLUSIONS AND RECOMMENDATIONS

6.1 Introduction

The last chapter of the research is a summary and conclusion of the research findings in relation to the literature. This qualitative paper included interviews from 12 candidates that follow the Brothers For Life Twitter account in South Africa.

Recommendations are later made in order to more effectively utilise social media for health behavioural change in South Africa. This is succeeded by suggestions for future research in the same field to better improve our understanding of the different dynamics that are at play.

6.2 Conclusions of the study

The main aim of the study was to understand the impact of social media on health related behaviour in South Africa. This study was conducted on participants who follow a health awareness campaign on a social media networking site, Twitter.

The literature agrees that social media has grown the world over and has been growing significantly in South Africa (Goldstuck, 2016). Understanding health related behaviour, its influences and further the role social networks play in this regard was an integral part of the study (Smith & Christakis, 2008). Further re-iterated that individuals are connected and therefore their health is also interconnected. Centola (2013) identified social influences as being key factors in the adoption of certain health behaviours. From the understating of the literature, the study sought to understand the role social media health interventions played in the adoption of new behaviour in the context of Brothers For Life.

Initially, in the literature, it was crucial to explore the concept of behavioural change. This topic was explored by seeking to understand the role of social

networks, diffusion and social influence. It was established that the social networks people hold have direct influence over them and their behaviour (Smith & Christakis, 2008). Furthermore, (Centola, 2013) noted that individuals with the same network ties tend to display the same behaviour or change in behaviour for a number of reasons.

The findings were found to be congruent with the literature of the study. The behaviour displayed by the participants indicated that the reason for following Bothers For Life was as a result of the people they followed. These individuals are noted to be in the same social network as the participants and they were linked with network ties. The influence that was exerted on the participants can be noted as a positive social network effect.

It must be noted that the decision to follow was not based purely on the social network influence, however various other factors were involved. These factors, as noted before, included other external media signals, the messaging from the account and choice of platform. The responses however, established that the driving factor behind the decision and change was that of influence from others.

With regards to Brothers For Life being a health related campaign, one cannot ignore the notion that the individuals who decided to follow the account were people who were already conscious about their health and willing to take a step to educate and inform themselves. Unlike a person who already has no interest, how far will with the role of influence play in that regard?

The findings of the paper included the idea that social media continually links people, things and wider audiences. Candidates were noted to have found out about the account through avenues that were connecting to the same social platform or social network. The decision to follow the Brothers For Life account because of its trending status or even because it was popular on another platform are two such examples. This is in keeping with the literature, which stated that social media has changed the way the world communicates (McNab, 2009) and that social media interventions have an effect on health behaviour and the change thereof.

Both the literature and the findings of the paper are in agreement that social ties link individuals in the same social network; through these social networks they will duly have influence on one another's decisions and choices and thus behaviour.

The understanding of the above, led the researcher to the second proposition of the paper, which is around understanding the use of health related interventions on social media networking sites that have their role in influencing change in behaviour.

Centola (2013), in the literature, highlighted that the linkages between social influence and behaviours can be studied in much more detail on an even greater scale with the advent of the Internet and social media sites. Open social media platforms are seen as a great tool to communicate to a wider and larger audience than ever before (Boyd & Ellison, 2008). The candidates agreed with these statements, specifically highlighting that it would be irresponsible not to use social media as a form to communicate to the youth in the advent of HIV/AIDS.

The research established that, many participants agreed to having knowledge about the messages provided by Brothers For Life; it was further found that this messaging was acted upon and implemented. This finding of the research illustrates information noted in the literature, which links change in behaviour as a result of a social networking site health intervention (Laranjo, et al., 2014).

Though a portion of the participants agreed to having had knowledge beforehand, this knowledge was re-enforced and afterwards acted upon. The idea of re-enforcement of information is important to behavioural change and a way of learning and retaining information (Laranjo, et al., 2014) which otherwise would have been forgotten or not even enforced. In this regard, there is congruency between the literature and findings of the research.

A special point of interest developed in the paper is the reasoning behind the different motivating factors around the change in behaviour. There were candidates who stated behaviour motivation was secondary to enhancement and reward. This is possibly a topic for further research and one that could yield great understanding.

Both literature and participants agreed that the power of social media is one that cannot be ignored. The active use of social networking sites and ready engagement by the users makes it a force to be explored further (Maher et al., 2014). The participants all agreed that using social media would make a real difference in the changing communication and displaying messages that are needed. It is because of this reason that many noted the success of Brothers For Life came from the stance they took, cool messaging mixed with a great platform.

As we can note from the findings of the paper and that of the literature, social media is growing in leaps and bounds. It has been found to be effective in delivering messages in a health intervention campaign with users agreeing that they were affected and changed their outcome which otherwise would have stayed the same. The power that can be harnessed from these platforms is unlimited, the understanding of social networks and ties on these platforms has been established and thus should be used to affect positively good health outcomes in different individuals the world over.

6.3 Recommendations

Healthcare organisations have a crucial role to play in the health outcomes of any society. South Africa is plagued with an epidemic of great proportions, which is HIV/AIDS. Many tools have been used and instituted to try and tackle this epidemic and thus far have barely moved the needle.

This research has highlighted a number of important findings that are crucial to tackling health outcomes. Firstly it was established that, individuals function in social networks, such as those demonstrated by the participants on Twitter. In these social networks, social ties link individuals. It is these networks and ties that allow for influence over decisions and behaviour that people in networks display. Health is interconnected and people's health is interconnected. It is important to note that social networks can be targeted with a health intervention and through the process of influence and diffusion; the whole network will be affected.

The study also found that health interventions on social networks could be used to affect behaviour. Through the process of social re-enforcement, this behaviour can be engaged and made to stick. The Brothers For Life messaging on a social network was found to be effective and cause a change in behaviour with the participants.

This information gathered can be used by health organisations, non-profit health institutions and the private sector targeting both open and closed social networking platforms, all in an effort to change the course of public health.

6.4 Suggestions for future research

The space of the Internet and social networking sites are relatively new to the world. There is not enough research that exists around social media and health; therefore there is ample space to look at more research in the future.

As noted before, a great area of interest that came out of the research is looking at the motivational factors that change behaviour or influence the decision to change behaviour, outside of the social network theory that was explored in this paper. An interesting finding was that of candidates whose motivation to change was linked to an incentive outcome based on their medical aid's reward programmes.

Further areas for future researchers could look at are the influence different social networking platforms have on each other and the people that follow them. If one message is found on one popular platform, will that be motivation enough for an individual to explore it on another platform and how far reaching are those effects in decision making.

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APPENDIX A

Interview Questions

1. Do you follow the Brothers For Life account on Twitter?

2. How long have you been following the Brothers For Life account on Twitter?

3. How did you come across the account and why did you follow it?

4. In your opinion, what are the key messages of Brothers For Life?

5. What is the one message that stands out for you?

6. Brothers for Life promotes testing regularly every three months, and knowing your HIV status. Have you followed these messages? And why?

7. The account further promotes prevention methods. Have you adopted any of the interventions? Could you elaborate?

8. Referring to the above questions, were these actions as a result of the campaign?

9. In your opinion, has the Brothers for Life account helped changed your behaviour? And in what way?

10. Do you think the Brothers for Life messaging on twitter is effective? How could it be improved upon?

11. Not a lot of young people watch TV or even radio; digital media has taken over, which medium do you think is more effective?

12. Have you suggested anyone else follow the Brothers for Life twitter page?

13. How do you make the campaign better?

14. Do you follow any other health accounts on social media?

APPENDIX B

Parktown Village Residence

2 St David's Place

Parktown

Johannesburg

2193

Dear Sir

Request for an interview

I am a student at the University of the Witwatersrand at Wits Business School currently a fulltime candidate for Masters in Business Administration for the year 2016. I am conducting research around HIV/AIDS health interventions in open social media, more specifically Twitter and the behavioural change impact these have on the user follower in South Africa.

I would like to request an interview with you in the month of October 2016 and would be delighted if you could assist. The interview will be confidential and anonymity is guaranteed due to the nature of the topic under discussion.

You can contact me on 0825758415 or possibly email sivuyilemadikana@gmail.com for further clarification and arrangements.

Yours Sincerely

Dr Sivuyile Madikana

APPENDIX C

Participant Verbal Consent:

- Participant will be fully informed about the project verbally and as provided in the interview request form provided
- Participant will be given an opportunity to ask questions about the project and their role and request further clarification needed
- Voluntarily agreement to participate in the research is essential
- Participant will understand they can withdraw at any time without giving reasons and that they will not be penalised for withdrawing nor will I be questioned on why I have withdrawn.
- The procedure of confidentiality will be fully explained
- The use of the data in the research, publication and archiving will be explained.