

Facebook over face-to-face time: Using social media to access hard-to-reach populations of men who have sex with men in Ghana

BACKGROUND

Social stigma toward men who have sex with men (MSM) in Ghana hinders their access to critical information and services for HIV care and prevention. Beginning in 2011, the USAID/Ghana SHARPER Project implemented conventional HIV prevention outreach activities through MSM peer educators in Ghana. The peer education program was branded with a rainbow symbol and the tagline “It’s my turn” to indicate that MSM have the right to be acknowledged and respected and are entitled to the same information and services as others.

GAP IN REACHING MSM

In 2011, the Ghana Men’s Study revealed a 17.5% prevalence of HIV among MSM, with the highest rates in Greater Accra (34.4%) and the Ashanti region (13.6%) (Aberle-Grasse et al., 2013). The prevalence of HIV was higher among older MSM (>35 years) and those with higher levels of income.

The same study found that less than half of the surveyed MSM had accessed HIV prevention services in the previous year and that only 37% in Greater Accra and 23% in Kumasi had been reached by a peer educator. This amounts to less than 50% of the estimated 30,579 MSM in Ghana (Aberle-Grasse et al., 2013). As well, the demographic with the highest HIV prevalence was less likely to be reached: in 2012, peer educators reached

more than 12,000 MSM, but most were between the ages of 15 and 24 years old (FHI 360, 2012). One possible cause of this disparity is that despite attempts by the SHARPER project to recruit peer educators who represented different sub-groups of MSM, the majority were less than 25 years old.

LEVERAGING SOCIAL MEDIA

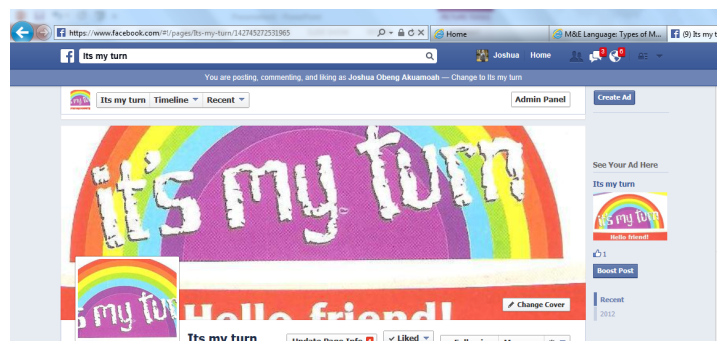
To address this identified gap, SHARPER introduced a social media component to reach other MSM networks, such as MSM who were older or discreet about their sexuality and who were not interested in being directly contacted by a peer educator.

Mobile phones are used by the majority of Ghanaians and are increasingly popular among MSM. Use of social media has expanded rapidly, especially Facebook, which is the most frequently used platform. Based on evidence from other HIV prevention programs targeting MSM, SHARPER piloted a social media campaign with the aim of reaching sub-networks of MSM who were not being reached by peer educators.

INTRODUCING MSM.NET

In early 2012, SHARPER canvassed its partner community-based organizations (CBOs) for recommendations of leaders of MSM networks that included older MSM, those who were more discreet about their sexuality, and others who might

Social media is an important tool for reaching MSM who may not otherwise be reached by HIV prevention outreach activities.



not want to be reached by peer educators. Three men who fit this profile were identified, one each in Accra, Kumasi, and Tamale. These MSM were hired as community liaison officers (CLOs) to initiate social media outreach in their respective communities. The CLOs recommended Facebook as the primary vehicle for reaching new networks of MSM, followed by Badoo, WhatsApp, and Gay Romeo. The CLOs were supplied with a smart phone and a laptop computer and trained on HIV information and services and on how to record the number of MSM they reached.

The CLOs established new social media accounts and began to invite friends and contacts. They conducted daily discussions about sex with messages about HIV prevention, the use of condoms and lubricants, and routine testing for HIV and screening for other sexually transmitted infections. The CLOs also conducted private online and telephone conversations with MSM who requested more information or who were seeking referrals. In some cases, the CLOs physically accompanied their contacts to the recommended services.

Additionally, CLOs conducted outreach in bars, parties, and other venues where their network congregated. In this way, they were able to increase their social media contacts and to reach peers with information and referrals as needed. Peer educators rarely appeared at these venues, which typically attracted wealthier people.

Project staff met with the CLOs every two weeks to review their progress, and once a month to discuss the CLOs' monthly outreach reports. The CLOs tracked the number of unique MSM that were reached. For the SHARPER project, an MSM is defined as "reached" if he received all of the following: a risk assessment, information on HIV prevention, and a referral to HIV testing and counseling (or another HIV service). Each MSM was assigned a unique identifier code to facilitate the counting of reached individuals.

RESULTS

In 2013, 15,440 unique MSM were reached through social media by the three CLOs, whereas 12,804 unique MSM were contacted by 110 peer educators. In total, 28,244 individual

MSM were reached, which represented 92% of the estimated number of MSM in the country (FHI 360, 2013).

CLOs reported a high level of acceptability of their online outreach among MSM in their extended network. MSM found social media to be a convenient and safe way to communicate about their sexual health needs and to locate MSM-friendly services.

Lastly, CLOs reported being sought out by staff from CBOs and others working with MSM in Ghana for advice on their outreach strategies and on the use of social media to tap into networks of MSM who were not being reached.

WAY FORWARD

This pilot intervention underscores the value of using social media to reach new and diverse networks of MSM in Ghana with HIV prevention interventions. Social media is a very important avenue for reaching MSM who, traditionally, do not interact with peer educators in Ghana and should be adopted as an integral outreach approach for HIV prevention interventions moving forward.

ACKNOWLEDGMENTS

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About SHARPER

Strengthening HIV/AIDS Response Partnership with Evidence Based Results (SHARPER), Contract Number GHH-I-00-07-00043-00, is a four-year initiative by USAID/Ghana that is designed to reduce HIV transmission among key populations, people living with HIV, and their sex partners. FHI 360 is implementing the project in collaboration with 25 partner organizations in 166 districts across Ghana.