



AMETHIST

AMETHIST@Penn:
Achieving Maternal
Empowerment
and Transforming
Health through
Implementation
Science and
Training

RESOURCE

Social Media & Maternal Health Empowerment

A Practical Guide for Maternal Health Researchers to Share Evidence-Based Content in Videos Online

Why Social Media Matters for Improving Maternal Health

- Up to 80% of U.S. adults get health information online ([Rutten et al., 2019](#)) and 33% of U.S. adults use social media for health information—social media use rates are higher among Black, Hispanic, and younger populations (Pew Research Center, 2024).
- Getting health information on social media is common and occurs actively (i.e., actively seeking it out) and passively (e.g., coming across a health ad on your feed without seeking it out) ([Lim et al., 2022](#))
- 52% of Americans who have tried a health trend, tool or approach in the past year they found on social media ([Healthline; State of Consumer Health Survey, 2024](#))
- Underrepresented birthing people often turn to platforms like TikTok and Instagram when traditional health systems feel inaccessible.
- Social media democratizes health information but also amplifies misinformation and emotional fear-based messaging. Researchers must intervene.

What the Research Finds About Hormonal Contraception on TikTok (Pfender et al., 2024) and YouTube (Pfender & Devlin, 2023)

57% of sampled TikTok videos contained **fearmongering messages about side effects** (e.g., using birth control will cause cancer) and 74% of influencers on YouTube urged their followers to stop hormonal contraceptives to improve their health.

When audiences perceive influencers to be trustworthy or experts, they are more likely to use less effective contraception recommended by the influencer (Pfender & Caplan, 2024).

Key Metrics of Premenstrual Dysphoric Disorder TikTok Content (Romann & Pfender, 2024)

Videos using disenfranchising talk and emotional storytelling/expression drove much higher engagement (comments & saves). **Disenfranchising talk** refers to messages that undermine, devalue, or marginalize someone's experiences, perspectives, or authority—especially where the speaker is part of a historically excluded group.

Viewers connect deeply with content that reflects lived experiences and validates marginalized voices.

Case Study: Preeclampsia Instagram and TikTok Messaging

Peer-created content earned **3x more likes** than content from physicians or organizations.

Efficacy-based informational posts (e.g., “know the signs”) received much less engagement than emotionally driven posts.

Insight: Evidence alone isn't enough—**emotion + relatability drive engagement.**

BEST PRACTICES FOR MESSAGE DESIGN

Visual hook: Movement is key—use hand gestures, place your recording device down, walk into frame, or move the camera side to side to grab attention in the first 3–5 seconds.

Verbal/text hook: Overlay striking text or questions (“1 in 3 moms experience this...”) so viewers immediately know what the video is about.

Brevity: Keep content short and digestible: under 30 seconds for videos, 1–2 sentence captions.

Tone: Be warm, affirming, and conversational. Avoid “instructing”—speak with your audience, not *at* them. Avoid prescriptive “you should know” or “do this” language.

Language: Use plain language. Avoid medical jargon. Include culturally relevant phrasing.

Visuals: High-contrast text, bold titles (black and white is best), use closed captioning on all videos.

Call to Action: Prompt audience behavior: “Send this to someone pregnant,” “Talk to your OB,” “Follow for more tips.”



CONTENT CREATION TIPS FOR RESEARCHERS

- Use **storytelling** to humanize data—e.g., share a mother’s experience with postpartum preeclampsia.
- Let **peers and patients** be the face of the message when appropriate.
- Use **platform-native formats** (e.g., carousels, Reels, trending TikTok formats).
- Swap “myth-busting” for **prebunking**: deliver truth *before* misinformation appears or don’t mention the misinformation altogether to avoid reinforcing false beliefs.

PLATFORM RECOMMENDATIONS

- **Instagram**: Use for visual storytelling and swipe-through guides. Best for ages 18–44.
- **TikTok**: Best for under-35 audiences. Pair evidence with authenticity and trending sounds. Trending sounds/music are widely shared and reused audio clips that reflect current cultural, social, or entertainment moments, often driving or being driven by user engagement, challenges, memes, or viral content.
- **Facebook**: Ideal for community support and group-based discussions (especially for audiences 35+).
- **YouTube**: Use for long-form content (e.g., 10-minute prenatal ed series, interviews with doulas/providers).

WHY RESEARCHERS SHOULD USE SOCIAL MEDIA

Counter Misinformation with Credible Content

Disinformation and fear-based narratives about maternal and reproductive health are widespread. Research shows that when influencers use emotional or disenfranchising talk, they garner more engagement—even when the information is inaccurate. Researchers have a critical role to play in proactively sharing accurate, affirming, and evidence-based content that resonates.

Reach Underrepresented Populations Where They Are

Many birthing people—particularly Black, Indigenous, and people of color (BIPOC)—turn to platforms like TikTok and Instagram when traditional health systems feel inaccessible, untrustworthy, or discriminatory. Social media allows researchers to reach these communities directly, building trust by sharing culturally relevant, affirming, and community-informed content.

Enhance Empowerment Through Participatory Communication

Social media offers a two-way dialogue where researchers can listen to communities, elevate lived experiences, and co-create solutions. Engaging on these platforms can enhance cultural humility, inform future research, and ensure that dissemination efforts reflect community priorities.

Translate Evidence into Practice Faster

Traditional research dissemination is often slow and siloed. Social media allows researchers to share findings in real-time, in accessible formats, and through trusted messengers like peer creators and patient advocates. This can help bridge the gap between evidence and action.

Shift Narratives and Normalize Health Conversations

Content that is emotional, validating, and visually engaging has the power to destigmatize issues like preeclampsia, PMDD, or contraceptive side effects. Researchers can promote health literacy by using relatable messaging formats that meet audiences where they are.



Full seminars available on YouTube:

Disseminating maternal health messages on social media:

<https://www.youtube.com/watch?v=CLVyrcofLz0>

Practical steps for using social media to improve maternal health outcomes:

<https://www.youtube.com/watch?v=-nKAuv4fLj8>

