

Yaz

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3 Yaz

Suggested or recommended social media content

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Chapter overview

This chapter introduces, illustrates, and analyses the finding that health-related information that young people perceive to be relevant to their needs is highly accessible on social media. However, most of the health-related material available to young people could be regarded as inappropriate, as it is designed for and targeted at adult populations. This chapter argues that social media designers have a responsibility to protect young people from inappropriate health-related content that is easily accessible. Schools/teachers and parents/guardians also have a responsibility to empower young people to act critically, safely, and ethically in digital/online environments, while also developing their health literacy.

A digitally animated case study video of the evidence presented in this chapter can be accessed from: <http://epapers.bham.ac.uk/3062/>

Chapter structure and underpinning evidence

This chapter is organised into three main sections. In Section One, a narrative of a young person – Yaz – is presented to tell the story from young people’s perspectives about the potential impact of easily accessible health information. The narrative was constructed from an extensive data set (as detailed in Chapter 1) and illustrates the voices and experiences of over 1,300 young people in the UK. Direct quotes from the data are shown in quotation marks. In Section Two – stakeholder response – an interpretation of the narrative and recommended actions for research, policy, and practice are provided. The profile of the stakeholder group was international, multi-sector, and multi-disciplinary and included teachers, international academics (UK, Ireland, Sweden, Netherlands, Spain, Australia, China), and trusts/organisations in the UK (such as NHS, Youth Sport Trust) that have a focus on youth health and wellbeing. The stakeholder group watched a digital animated video of the case study narrative¹ and collaborated to produce the response during a one-day workshop (as detailed in Chapter 1). In Section Three, the key messages that emerge from the narrative and the stakeholder response are summarised.

Section One: young person's narrative – Yaz

Yaz has always ‘turned to the internet to search for things’. But he says social media is *so* much better. Like on YouTube, you don’t have to search for the information you want because they have videos ‘suggested for you’. These videos are based on similar videos to those you have watched previously and they just ‘come up’ on your home page. The videos play on an ‘infinite loop’ and you can find out ‘loads’ of different pieces of information about the same topic. Yaz says the videos are ‘really helpful’ because they are ‘relatable’ to you. Relevant information just finds you! *Social media provides Yaz with access to information that he perceives to be helpful because it is relatable to him and relevant to his needs.*

The videos Yaz watches on YouTube help him ‘learn how to do stuff’. Compared to websites, social media doesn’t give you ‘information essays’. The videos are ‘easy to understand’ and ‘straight to the point’. You can look in like ‘two minutes’; sometimes in just ‘2 seconds’. Yaz says he doesn’t have time to look through a lot of stuff because of all the ‘homework’ he gets – especially with ‘exams’ coming up, so the videos relate to his needs. *Information accessed from social media helps Yaz to learn because it is easy to understand, straight to the point and relevant to his needs.*

Yaz’s engagement with social media for health

Yaz is interested in physical activity videos on YouTube. Yaz has found the physical activity campaigns on YouTube’s ‘suggested for you’ page ‘intriguing’. These campaigns are run by official health organisations and aim to get more people active. Campaigns like ‘#ThisGirlCan’² or the ‘Dove Campaign’.³ Yaz has watched the campaign videos over and over again on the ‘infinite loop’ of ‘suggested’ videos. He says these campaigns are ‘quite inspiring’ for girls. Some girls at his school have a new found ‘motivation’ for physical activity. The campaigns are effective because girls can *relate* to them. The girls say that you get to see ‘real people’ doing exercise and you can watch ‘the actual reality of people doing exercise’. Yaz’s friend, Amy, said that one of the campaigns showed her that ‘it wasn’t just her who looked like an absolute slob when she runs’ and it made her ‘want to exercise’. Even when the campaigns ended, Amy, who is not very active, was ‘motivated to continue exercising’. But there are hardly any campaigns for boys; they are all targeted at girls. *Physical activity campaigns on social media motivate girls Yaz’s age to be physically active because the girls can relate to the real people in the videos.*

Within the ‘infinite loop’ of ‘suggested’ and ‘recommended’ videos on YouTube, Yaz has been able to *learn* about the transformations that can happen to your body when you engage in physical activity. There are lots of ‘transformation’ videos of people. The exercises say things such as: you ‘get the body you want’, and they show ‘before and after’ transformations. He says that the videos show ‘people taking pictures of their muscles and stuff’ and

they caption the videos with things ‘like gains and that’. Even though the people uploading the transformation videos are in their ‘early 20s’ Yaz can *relate* to them. Like other boys his age, Yaz wants to be more ‘muscle-y’ and ‘buff’. He says the videos ‘kind of inspire him to be better’ and they ‘motivate’ him ‘to work on his body’. He sees the transformations videos and thinks: ‘I want to do that. I want to build’. *Yaz relates to the people in the **body transformation videos** because he wants to be more muscular and he has been **inspired** to engage with the **muscle-gaining exercises** that are ‘suggested’ and ‘recommended’ to him.*

On the ‘suggested for you’ page there are lots of ‘bodybuilding’ and ‘weight training’ videos. You can’t escape them. Yaz has been particularly interested in the ‘no pain, no gain’ videos. These videos clearly relate to ‘loads’ of people as they have more than 100 likes and that shows ‘appeal’. If something has less than 100 likes ‘it doesn’t show appeal’ and that ‘other people aren’t interested, so why should you be’. So Yaz thinks that ‘loads of people’ must be doing the exercises in the videos, even though they are about ‘older’ people. After all, they are also ‘trending’ on YouTube. So Yaz has started to believe in ‘no pain, no gain’. The motto is ‘straight to the point’ and it’s ‘easy to understand’. When he exercises, Yaz says he keeps in the back of his mind the thought that ‘if you don’t push yourself enough, you won’t get past the pain’. *Yaz perceives that the videos he sees on YouTube **relate to a wide audience**, so he has started to **act on the information** he sees on YouTube when he **exercises in the gym**.*

Yaz’s friend Amy is concerned. She thinks that social media has pressured Yaz into being a ‘fitness fanatic’ and that the workouts ‘strain him too much’. Amy is aware that copying ‘adults just going to the gym’ can give you ‘weird muscles’. She says that your ‘bodies aren’t going to be developed enough’. It can ‘stunt your growth’. Amy understands what Yaz is doing because she was motivated to engage in the social media physical activity campaigns. But the videos don’t relate to Yaz, even though he thinks they do. They are for ‘older people’ and Amy thinks that Yaz has now gone too far. *The information on the videos could be **harmful** for Yaz’s **physical development**. In doing the exercises that were ‘suggested’ and ‘recommended’, he was beginning to strain his body too much and he was becoming a **fitness fanatic**.*

Narrative summary

Social media provides Yaz with **access** to **information** that is **helpful** because he perceives it to be **relatable** to him. Information accessed from social media helps Yaz to **learn** because it is **easy to understand**, **straight to the point**, and **is relevant to his needs**. Yaz is aware of physical activity campaigns on social media that are targeted at girls. These physical activity campaigns **motivate** girls Yaz’s age to be physically active because the girls can **relate to** the real people in the videos. Yaz, however, relates to the people in the **body transformation**

videos because these are more tailored to his needs. Yaz wants to be more muscular and he has been **inspired** to engage with the **muscle-gaining exercises** that are ‘suggested and recommended to him’ on YouTube. Yaz also perceives that the videos he sees on YouTube **relate to a wide audience**, so he has started to **act on the information** he sees on YouTube when he **exercises in the gym**. It was apparent that some of the information in the videos could be **harmful** for Yaz’s **physical development**. In doing the exercises that were ‘suggested’ and ‘recommended’, he was beginning to strain his body too much and he was becoming a **fitness fanatic**.

Section Two: stakeholder response

Social media can result in young people developing narrow understandings of health. The algorithmic properties embedded within social media sites limit access to a wider and more diverse range of health-related information, and this constrains the development of a broad understanding of health. Young people are also particularly receptive and vulnerable to health-related material made available on social media, because young people perceive it to be relevant to their needs. As body awareness becomes a growing issue in adolescence, social media content related to health becomes increasingly interesting to young people. To help young people navigate the health-related spaces of social media, social media companies have a responsibility to protect young people from inappropriate content that is made easily accessible on social media. Schools/teachers and parents/guardians should also empower young people to act critically, safely, and ethically in digital/online environments, while also developing health literacy.

Algorithms

It is clear that the algorithms embedded within existing social media sites can contribute to promoting narrow understandings of health. A narrow understanding of health is often represented in the associations made between body shape and health; for example, slender is ‘healthy’ and fat is ‘unhealthy’. The way that information is presented through the ‘suggested for you’ videos on YouTube shows how social media can intensify the acceptance of these narrow understandings of health. In the narrative, it was apparent that health was understood as being related to body shape, and this understanding was largely shaped by the information that was available, accessible, and ‘suggested’. It was also clear that the ‘suggested’ content influenced physical activity behaviours. It can be argued that ‘suggested’ or ‘recommended’ content is influencing young people to develop a narrow understanding of health and also restricts their physical activity behaviours because the content is underpinned by a focus on body image.

The ‘suggested’ videos are based on similar topics to the videos an individual has viewed previously. In the narrative, Yaz was initially interested in different

types of physical activity videos. Yaz viewed videos that focused on motivation and/or cardiorespiratory exercise (ThisGirlCampaign), and weight training and/or body building exercises. As Yaz became more interested in weight training and/or body building exercises, he began to view fewer videos focused on motivation and/or cardiorespiratory exercise. The algorithmic properties embedded within YouTube supported his growing interest in weight training and body building. As a result, Yaz no longer viewed different types of physical activity videos and he couldn't escape the weight training/body building videos. In this sense, Yaz's ability to be critical of the ideals of health promoted by the weight training or body building videos was constrained because YouTube failed to ensure that alternative physical activity videos were easily accessible to Yaz. In turn, Yaz became trapped in the idea that health equates to body shape, and was unable to critique the harmful physical activity behaviours he had adopted. Peer support from Amy, who recognised and understood how Yaz's physical activity behaviours were impacted by social media, appeared to be vital. It would have been interesting to learn if and how Amy confronted Yaz and what the outcomes of this peer support were.

Receptive = vulnerable

The narrative clearly shows that young people are receptive to health-related material available on social media. Adolescence is an age when young people become increasingly aware of their bodies. At the same time, it is widely apparent that social media use grows during the period of adolescence. In combination, an awareness of the body and increased social media use act as powerful incentives for young people to accept new suggestions and ideas from social media about their bodies and health. This level of receptivity to material from social media makes young people vulnerable. The similar ways in which Amy and Yaz accessed and acted on social media material highlights the fact that these young people were receptive and vulnerable at the same time.

Amy and Yaz were both receptive to videos about physical activity that were available on YouTube. Although they acted on different types of physical activity information (cardiorespiratory vs muscle gain), Amy and Yaz both accessed information that could result in harm. Specifically, they acted on information that was primarily targeted at adults,⁴ and was neither age nor developmentally appropriate. Their willingness to use information targeted at adults to inform their physical activity behaviours illustrates how both Yaz and Amy were vulnerable.

As negative impacts on Yaz's physical development were identified, one reading of the narrative would be that Yaz was more vulnerable than Amy. The lack of critique employed by Amy on the adult-focused material she accessed and acted on, however, suggests that she was equally vulnerable. While Amy's health was positively impacted, through an increased level of motivation for physical activity, Amy acted on material that was developed for and targeted at

adults. Amy only considered the inappropriateness of using such material when Yaz's behaviour became addictive and obsessive, and his body shape and size had changed dramatically. In this sense, inappropriate social media material was only critiqued and identified and disregarded as 'healthy' when offline behaviour and appearance displayed negative impacts.

The narrative exemplifies the importance of focusing on the discrete skills practiced by all young people on social media and how social media has the potential to intensify young people's vulnerability. In addition, the narrative shows that young people need to acquire a level of health literacy; that is, to be supported to develop an understanding of information that is relevant to their health-related needs.

Considerations

Technology companies and designers of social media sites have a responsibility to act ethically in order to limit the range of inappropriate health-related material that reaches young people

Minimum standards should be developed and applied to protect young people from inappropriate content that is 'suggested' and/or 'recommended' to them, and this would reduce the amount that reaches them through social media. Minimum standards would include a requirement for social media sites to apply account filters to regulate the ways in which information is advertised, marketed, and distributed to young people. In addition, all social media material about diet/nutrition, exercise/physical activity, and body image material should include clear signposting that explains for whom the material is relevant/appropriate. As an example, a clear indication of the age-appropriateness of specific exercises could be provided. Ultimately, technology companies and designers of social media sites have a responsibility to deliver a service to young people that is safe, even if it is not in their immediate commercial interests.

Schools/teachers and parents/guardians have a responsibility to empower young people to act critically, safely, and ethically in digital/online environments, while also developing their health literacy

Young people have a right to grow up as knowledgeable, practical, and empowered digital citizens who are able to understand digital social norms and manage risk for themselves. They need to be empowered to engage in critical, safe, and ethical behaviours. Young people should be supported to act prudently and carefully, and to become thoughtful users of social media. Equally, their health literacy should be developed in the context of their uses of social media. Young people needed to be supported to understand the types of health-related information that is relevant to their health-related needs. This is an important action/responsibility for schools/teachers and parents/guardians.

Table 3.1 Key messages about suggested and recommended content

Characteristics of Young People's Uses of Social Media for Health	Health-related information is highly accessible to young people on social media. Young people can search for information, and they find health-related information from the algorithms that 'suggest' or 'recommend' content to their accounts. Young people engage with health-related information if they perceive it to be relevant to their needs. Some of the health-related information can be helpful and can motivate young people to engage with physical activity. Some of the content, however, can be harmful, particularly that related to body transformations and the type of content that is targeted at adult populations.
Stakeholder Response Focused on Young People's Uses of Social Media for Health	Algorithms embedded within social media sites can contribute to promoting narrow understandings of health for young people. A narrow understanding of health often equates health to body image. For example, slender is healthy, fat is unhealthy. Young people are highly receptive to health-related information on social media, due to their age and excessive use of social media platforms.
Considerations for Research, Policy, and/or Practice	Technology companies and designers of social media sites have a responsibility to act ethically in order to limit the range of inappropriate health-related material that reaches young people. Schools/teachers and parents/guardians have a responsibility to empower young people to act critically, safely, and ethically in digital/online environments, while also developing their health literacy.

Section Three: key messages from the case

This case has identified that health-related information that young people perceive to be relevant to their needs is highly accessible to them on social media. The case suggests that social media designers have a responsibility to protect young people from inappropriate health-related content that is 'suggested' or 'recommended' to young people on social media. Schools/teachers and parents/guardians also have a responsibility to empower young people to act critically, safely, and ethically in digital/online environments, while also developing their health literacy.

Notes

- 1 The digital animated case study narrative video of Yaz can be accessed here: <http://epapers.bham.ac.uk/3062/>
- 2 www.thisgirlcan.co.uk
- 3 www.dove.com/uk/stories/campaigns.html
- 4 Although the ThisGirlCan campaign is targeted at women age 14–40, the stakeholders did not consider the key promotion videos and images to include or reflect young people. The campaign was positioned as an adult only campaign.