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*Sex Transm Dis.* 2015 November ; 42(11): 625–628. doi:10.1097/OLQ.0000000000000349.**Creative contributory contests (CCC) to spur innovation in sexual health: Two cases and a guide for implementation****Ye Zhang, MPH<sup>\*,†,‡</sup>, Julie A. Kim, BS<sup>†</sup>, Fengying Liu, MS<sup>\*,†</sup>, Lai Sze Tso, PhD<sup>†,‡</sup>, Weiming Tang, PhD<sup>\*,†,‡</sup>, Chongyi Wei, DrPH<sup>§</sup>, Barry L. Bayus, PhD<sup>‡</sup>, and Joseph D. Tucker, MD, PhD<sup>†,¶</sup>**<sup>\*</sup>STD Control Office, Guangdong Provincial Centers for Dermatology and STD Control, Guangzhou, China<sup>†</sup>UNC Project-China, Guangzhou, China<sup>‡</sup>Social Entrepreneurship for Sexual Health (SESH) Program; Guangzhou, China<sup>§</sup>University of California San Francisco, San Francisco, USA<sup>¶</sup>Kenan-Flagler Business School, University of North Carolina at Chapel Hill, Chapel Hill, USA**Abstract**

Sexual health campaigns are often designed “top-down” by public health experts, failing to engage key populations. Using the power of crowdsourcing to shape a “bottom-up” approach, this note describes two creative contributory contests (CCC) to enhance sexual health campaigns. We provide guidance for designing CCCs to improve HIV and other STD testing.

**Keywords**

HIV; STD; community engagement; contest; innovation

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A new method for designing HIV testing campaigns called creative contributory contests (CCCs) can increase community engagement. This note describes two examples of CCCs and provides implementation guidance.

**Supplemental Digital Content**

Supplemental Digital Content 1. Overview of entries and judge scores (on a 1-10 scale, 10 as best and 1 as worst).

Supplemental Digital Content 2. Finalists in the “Testing Saves Lives” Short Video Contest.

Supplementary Digital Content 3. Prize structure for “Sex+Health” image contest.

Supplemental Digital Content 4. Finalists in the “Sex+Health” Image Contest.

Supplement 4a. First place image. English captions from upper left to to upper right, then lower left to lower right: (Upper left panel) What is sex?; (Upper middle panel) In the crowded sea of people, We got to know each other, Then we knew ourselves, And finally I knew myself, Sex is understanding; (Upper right panel) Sex is risky, but condoms can avoid [the risk], Sex is a choice; (Lower left panel) Sex is satisfaction; (Lower right panel) Adam and Eve ate the forbidden fruit and only then came you and me. Sex is instinct.

Supplement 4b. Second place image.

Supplement 4c. Third place image.

## Introduction

Conventional systems of sexual health programming are often organized “top-down”, with experts designing, implementing, and evaluating interventions with minimal input from key affected populations. In promoting HIV and other STD testing in these communities, “top-down” approaches have not been effective.<sup>1</sup> Major global health research funders such as the National Institutes of Health and the National Science Foundation disproportionately support incremental advances rather than transformative, high risk research.<sup>2,3</sup> Incorporating knowledge from key affected populations into HIV/STD testing has been difficult. Social marketing approaches often draw on key population information gathered in focus groups and in-depth interviews, but such engagement is frequently superficial.<sup>4</sup> Key population empowerment and multi-sectoral community engagement have also attempted to strengthen community input towards HIV/STD control programs,<sup>5</sup> but such programs have been challenging to implement in the absence of a strong civil society and community-based organizations (CBOs).<sup>5,6</sup> Responding to the need for greater community engagement to create HIV/STD programs, we introduce creative contributory contests (CCCs) to promote sexual health in China.

## Creative Contributory Contests

Conventional approaches to designing and implementing HIV/STD testing campaigns can be enhanced through contests. CCCs engage many individuals to contribute creative knowledge towards a public good. Contests have been used mostly in the private sector and championed by the Executive Office of the President of the United States as a cost-effective tool for generating creative, new ideas.<sup>7</sup> A CCC approach to designing an HIV test promotion campaign substantially differs from conventional approaches in three ways (Figure 1). First, CCCs are “bottom-up,” based on crowd input, while conventional campaigns are “top-down,” and often rely on public health expert opinions. Second, CCCs increase community engagement from a broad range of non-experts, including key affected populations, experience-rich leaders, and creative individuals. A key advantage of CCCs is the allowance for greater inclusion of perspectives from diverse community members. Third, because of the heterogeneity of knowledge incubating in the crowd compared to a panel of experts, CCCs possess higher potential for innovation compared to conventional approaches.<sup>8</sup>

## Implementing Creative Contributory Contests

Our multisectoral team, SESH (Social Entrepreneurship for Sexual Health), organized two CCCs, soliciting videos through “Testing Saves Lives” and images through the “Sex +Health” contest. Our video contest encouraged CBOs to develop one-minute films promoting HIV testing in China. Eligible organizations included all CBOs delivering HIV testing in China, Taiwan, and Hong Kong. Two open Skype calls clarified the contest mission and goals, yielding seven eligible entries after eight weeks. The video contest was promoted through the website, emails, and the two open Skype calls. Judging criteria included generating excitement about HIV testing, reaching untested individuals, and community engagement. Incentives for participation included video promotion through

local, regional, national, and international media. A multisectoral (public health, medicine, anthropology, advocacy, business) panel of judges selected three finalists during a public event hosted at a Chinese university.

All judges ranked each entry on a scale of 1–10, assigning scores twice, first prior to discussion, then following a group discussion, with minimal change in scores post-discussion (see table, Supplemental Digital Content 1, which shows judge scores). Judges noted that positively-messaged (e.g., focusing on the benefits of testing rather than spreading fear of not testing) short films were generally more effective than ones denoting negative messages (see videos, Supplemental Digital Content 2) in terms of perceived potential for increasing HIV test uptake.

Our video contest had the following advantages: 1) empowering CBOs to develop more effective social marketing of HIV testing programs (shifting the context from key populations as the problem to engagement of key populations as the solution); 2) nurturing multisectoral collaboration between CBOs, public health leaders, and film/marketing experts; and 3) using a short film medium designed to resonate with youth, including young key populations.

Our second event, the “Sex+Health” Image Contest, focused on engaging youth to create images to motivate discussions about sexual health. Individuals living in China, aged 30 and under, were eligible to participate. We incentivized participation at individual and group levels by offering a range of prizes (see Supplemental Digital Content 3) and displaying semi-finalist and finalist images at a final event in Guangzhou. The final event was an open, in-person activity at an entrepreneurship lab in Guangzhou alongside website promotion. Judging criteria included relevance to sexual health promotion and capacity to excite young people in China. SESH promoted the contest by organizing a series of in-person discussion activities at four high schools and universities and the US Consulate in Guangzhou. Additionally, two universities held activities organized by student volunteers and one university group created a student video. We utilized social media to update participants, with SESH’s Weixin (a Chinese hybrid between Facebook and Twitter) account accruing 374 new followers within four weeks. Instagram and Weibo (a Chinese platform similar to Twitter) were also used in contest promotion.

The “Sex+Health” image contest received 96 entries over 39 days. Images were evaluated on a 1–10 scale by a panel of 20 judges. Each entry was scored by 2 judges, and the mean score used to determine rank order. The top five entries were displayed on SESH’s website for six days of voting to determine the crowd favorite (images, Supplemental Digital Content 4).

Hard copies of individual semi-finalist entries, a photograph gallery of in-person engagement activities, and framed prints of the finalist entries were displayed in Guangzhou, China during World AIDS Day. Individuals who created finalist images were invited to contribute in-person on a sexual health panel, alongside a STD control center director, a young physician, a youth organization leader, and a LGBT organization director. Although the three finalists were announced and celebrated, wider participation from individuals and

CBOs was also publically recognized. This acknowledgement of contribution is critical because the majority of individual submissions were not awarded prizes. Sustaining participation among diverse community members is important for accruing medium and long-term effects of community engagement.

## Discussion

Contests are not a panacea for community engagement and have several limitations that must be considered. First, many contests focus on Internet channels, ignoring the large population of individuals who lack regular Internet access, especially marginalized groups. Yet, advances in mobile phone technology and expanding social media networks will slowly and partially mitigate this issue, especially among young gay populations who are often online.<sup>9</sup> Complementing online activities with strong in-person activities is an essential component of organizing effective contests. Second, by design, contests are temporally transient and produce large numbers of “losers.” However, our decision to host a public viewing of winners and to widely acknowledge community contributions increases awareness of pressing issues among key populations with hard-to-reach groups. Finally, there are no pre-established set points for knowing when a sufficient crowd threshold has been reached in order to yield crowd wisdom. Further research is needed in this area.

In conclusion, our experience organizing CCCs may be useful for other groups expanding community engagement in sexual health campaigns. Table 1 shows guidelines we designed to inform the development and implementation of CCCs. Realizing their full potential as effective and innovative mechanisms in health programming requires further action in several areas. First, starting contests is relatively frictionless and will become easier as more individuals get online and CCC engagement expands among key populations. Technical (e.g., online forums) and substantive (e.g., monetary incentives or vouchers) improvements in organizing contests should further reduce barriers to participation. However, ending contests well is far more challenging. Devising a strategy for continued engagement between contests is instrumental in transforming one-off events into sustainable platforms to support social change. Second, while the Internet has been invaluable in harnessing the wisdom in crowds, our “Sex+Health” contest underlines the importance of in-person engagement. Especially for health programs intended to reach marginalized groups with limited Internet access, in-person activities are key for building rapport and trust with local partners and contributors.

Community engagement is a “key social enabler” for HIV testing according to UNAIDS<sup>10</sup> and has been associated with the scaling up of HIV testing services.<sup>11</sup> CCCs could be useful for designing a range of sexual health campaigns beyond HIV testing, including STD testing among key populations, PrEP awareness and uptake, and HPV vaccination. Our HIV test video CCC was evaluated using a randomized controlled trial<sup>12</sup> and the image contest is now undergoing more formal evaluation,<sup>13</sup> but other evaluation research is necessary. CCCs may provide a cost-effective, structured mechanism to more transparently and explicitly involve communities in health campaigns in order to make them more people-centered.

## Supplementary Material

Refer to Web version on PubMed Central for supplementary material.

## Acknowledgements

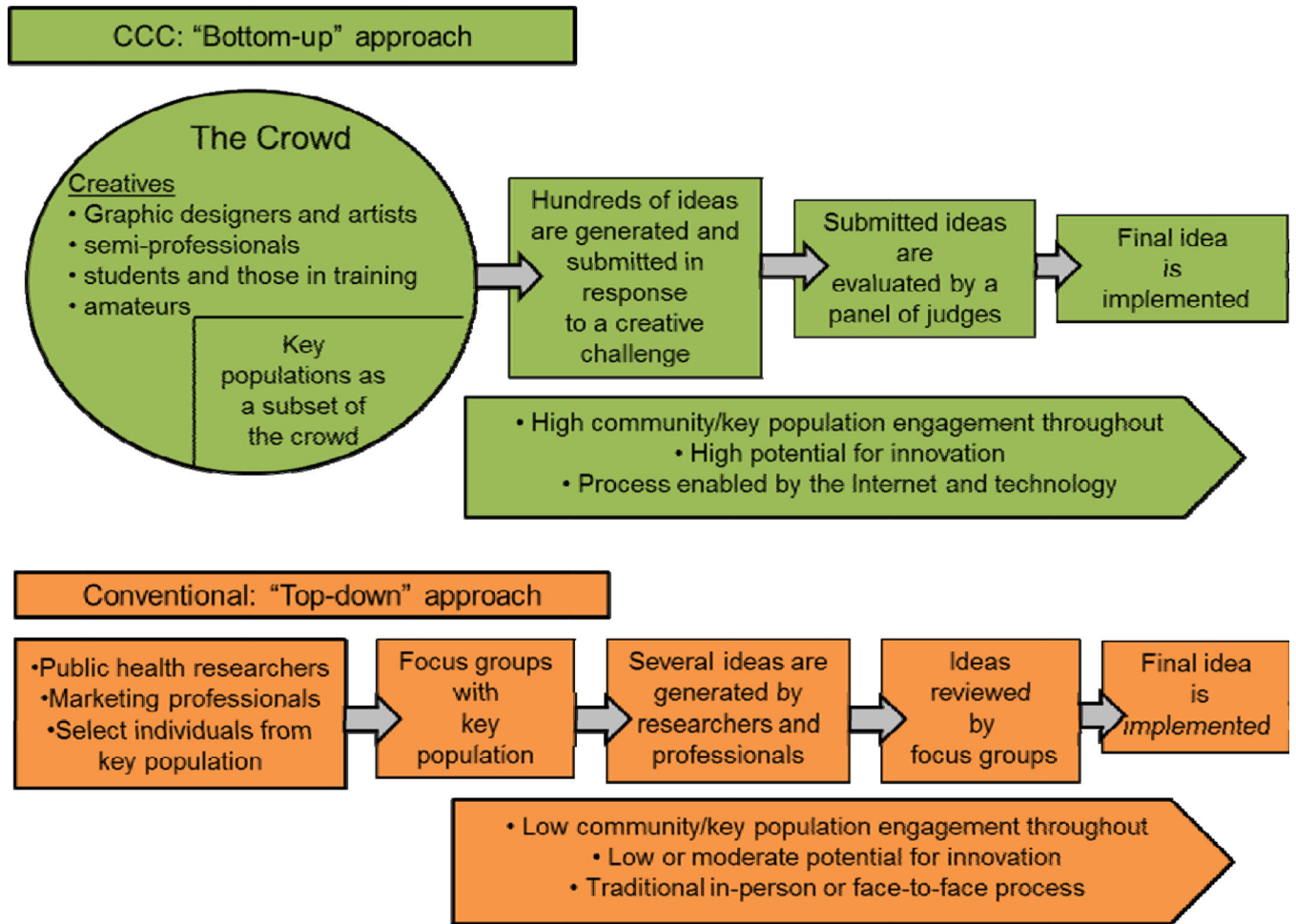
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**Figure 1.** Creative contributory contests compared to conventional approaches to the development and implementation of sexual health promotion campaigns.



**Table 1**

Guidance for organizing CCCs for health.

Stage (with references)	Guidance
<b>Structure open contribution strategy</b> <sup>14,15</sup>	<ul style="list-style-type: none"> <li>- Incorporate both in-person and online mechanisms for contributing</li> <li>- Identify optimal social media and conventional media strategies for promotion</li> </ul>
<b>Establish contest prizes</b> <sup>16</sup>	<ul style="list-style-type: none"> <li>- Seek input from creatives and potential participants about appropriate prizes</li> <li>- Showcasing winners and media promotion may be more attractive to creatives than monetary prizes</li> <li>- Consider prizes that have ancillary benefits to the individual or organization (e.g., making videos may increase capacity at CBOs for media campaigns)</li> </ul>
<b>Issue call for contest entries</b> <sup>14</sup>	<ul style="list-style-type: none"> <li>- Avoid giving examples of what you hope to receive</li> <li>- Explicitly state “Send us your creative ideas”</li> <li>- Include criteria for judging and be transparent</li> </ul>
<b>Judge entries</b> <sup>17</sup>	<ul style="list-style-type: none"> <li>- Evaluate on an overall 1-10 scale instead of using subcategories</li> <li>- De-identify entries being judged and create a mechanism for judges to remove themselves based on conflict of interest <sup>*</sup></li> <li>- May include a special prize for the crowd favorite, but would not have the entire contest evaluated by only the crowd because of unequal access to Internet voting and the tendency for dependent voting (e.g., voting based on social relationships and not entry quality).</li> </ul>
<b>Celebrate contributions</b> <sup>16</sup>	<ul style="list-style-type: none"> <li>- Include a range of prizes and avoid focusing exclusively on the “winners”</li> <li>- Ask participants about continued engagement so that the end of the first contest is the beginning of a new co-created relationship</li> <li>- Acknowledge and thank the partner organizations, judges, and others who made the contest possible</li> </ul>
<b>Sustain contributions</b> <sup>14</sup>	<ul style="list-style-type: none"> <li>- Create a series of contests so that individuals continue to contribute</li> <li>- Leverage social media to co-create a strong relationship between organizers and participators</li> </ul>

\* We define conflict of interest as having any financial, organizational, or other interest that could be perceived as compromising their capacity to independently evaluate the entry.