Title: Engaging men in conversations about masculinity and suicide – An evaluation of the Man Up social media campaign

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Abstract

Male suicide continues to be a major public health concern both internationally and in Australia. While a number of factors have been found to contribute to high suicide rates, little is known about what drives the much higher rates in men compared to women. Mostly, risk factors for suicide are considered in isolation, with little regard for the mechanisms that may underpin them. In more recent discussions on male health, masculinity has been highlighted as a potential driving force underpinning unhealthy male behaviors. In Australia, the "dominant masculinity" is one that endorses the norms of stoicism, independence, invulnerability and avoidance of negative emotions. Conformity to these masculine norms has been associated with suicidal thinking, poor mental health and reduced and delayed help-seeking. Men also describe experiencing stigma and how the fear of being alienated prevents them from seeking help for mental health issues. For these reasons, men are often described as a "hard-to reach" population group when it comes to mental health messaging. Suicide prevention interventions are needed that adopt a gendered approach and attend to the influence of masculine norms on mental health and suicide.

The Man Up intervention was an innovative media-based male health promotion and suicide prevention intervention that featured a three part television documentary and digital campaign delivered via a website and five social media platforms (Facebook, Twitter, Instagram, YouTube and tumblr). It was funded by the Movember Foundation in Australia and its aim was to address the high suicide rate among men by promoting help-seeking for personal or emotional problems via an exploration of Australian masculinity. The documentary and digital campaign examined how society shapes the way men and boys see themselves and explored how this might affect mental health and, potentially, lead to thoughts of suicide. It was aired by the Australian Broadcasting Corporation (ABC), Australia's national public free-to-air broadcaster, in October 2016.

This thesis explores the potential for social media to be used in health promotion with the view to generate and increase engagement and influence conversations on the issue of male suicide and its link to masculinity. As such,

this thesis focuses on the evaluation of the social media components of the digital campaign. The thesis is based on the idea that masculinity, the rules prescribed by society about how men should live their lives, is a fundamental determinant influencing how men negotiate their health throughout life. Following social constructionist theory, this thesis proposes that by challenging dominant masculinity social learning processes can take place that will support redefining restrictive behavior patterns and opening up alternative behaviors which in turn will help reducing stigma for men facing mental health problems, increasing male help-seeking and ultimately reducing male suicide rates.

The above aim was addressed through two empirical studies that analyzed various data sources collected through two social media platforms: Facebook and Twitter. In Study 1, Twitter Insights data were used to assess reach and engagement with the campaign and to determine highest and lowest performing tweets. We also analyzed the volume of conversations over time by tracking the use of common campaign hashtags and conducted thematic analysis on a sub-set of tweets to determine most engaging campaign content themes. Study 2 was a qualitative study of comments published on the Man Up Facebook page with the aim to provide further insight into the conversations that were instigated by the campaign.

Both studies have been published as peer-reviewed journal articles and together they demonstrated that the Man Up social media campaign was able to generate an impressive reach and exposure to campaign messages in the Australian population and beyond. Overall, the studies showed that the Man Up campaign messages were perceived positively across both Twitter and Facebook. Campaign content was widely shared on social media and positive feedback showed endorsement for the campaign. It highlighted the need to openly talk about male suicide and the stigma introduced by gendered practices. The increased use of the hashtag keywords of the Man Up campaign in line with the campaign phases and the fact that the hashtag MANUP was trending during the campaign signaled a strong uptake and sharing of campaign messages. Despite this, the hashtag analysis could not find a lasting increase of engagement. The analysis of Facebook comments confirmed that the social media campaign triggered conversations about masculinity and suicide that might otherwise not have happened. For some, this may have led to shifting

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attitudes towards expressing emotions and reaching out to others for help, however, this could not be formally investigated based on social media data alone.

This thesis concludes that social media interventions can be used successfully in engaging men in discussions about male mental health, suicide and gender norms and therefore demonstrate potential for suicide protective properties of social media. However, more research is needed to better understand how and where on the internet to best engage men, particularly men at high risk of suicide. While gender-transformative campaigns such as Man Up can help to further destigmatize help-seeking for men, the longevity of changes needs further consideration. Addressing these issues will require high quality interventions and evaluation designs for social media campaigns which follow a systematic framework for measuring effectiveness.

Declaration

This is to certify that

(i) the thesis comprises only my original work towards the MPhil except where indicated in the Preface;

(ii) due acknowledgement has been made in the text to all other material used;

(iii) the thesis is fewer than 40 000 words in length, exclusive of tables, figures, bibliographies and appendices.

Marisa Schlichthorst, PhD (Social & Political Sciences)

Preface

This thesis was completed as part of a multi-faceted evaluation of Man Up (a media-based male health promotion and suicide prevention intervention) that is published in nine peer-reviewed journal articles. I was the lead author on four of these articles, two of which form the empirical studies in this thesis. Several colleagues contributed to these publications as described below.

Study 1, presented in Chapter 5, focusses on the evaluation of data from the Man Up Twitter campaign to examine whether the campaign was successful in creating engagement on social media and, if so, which campaign topics were most engaging for the audience. I lead this study and was responsible for obtaining ethics approval, designing the analysis method protocol, undertaking data collection and data analysis and writing the article. Kylie King assisted with the qualitative data analysis and provided input on drafts of the article. Jackie Turnure commented on drafts of the article. Suku Sukunesan provided input into study design and supported parts of the data collection. Andrea Phelps assisted with study design and provided input into the article. Jane Pirkis secured funding for the creation and evaluation of Man Up, oversaw the data collection and provided input into revisions of the article.

Study 2 in Chapter 6 investigates conversations on suicide and masculinity with data collected from the *manuptvseries* Facebook page. I was the lead author on this article and was responsible for obtaining ethics approvals, data collection, designing the analysis method protocol, analyzing data and writing the paper. Kylie King and Lennart Reifels assisted with data analysis and provided input into drafts of the article. Andrea Phelps provided input into drafts of the article. Jane Pirkis oversaw the design of the analysis method and provided input into drafts of the article.

These two studies are provided as the author-accepted versions of the published manuscript. There are some minor formatting differences between the articles, due to the requirements of different journals, but overall the formatting was modified to sit within the thesis (1, 2).

In addition to the two studies presented in this thesis, I led two other studies which have been published (3, 4) and contributed to five more (5-9) concerning

the broader evaluation of Man Up. These are related, but not central to the thesis.

Acknowledgements

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List of Figures and Tables

Third Party Copyright Material in Thesis

Citation Information for Third party copyright material	Location of item in thesis	Permission granted Y/N
Schlichthorst, M., King, K., Turnure, J., Sukunesan, S., Phelps, A., & Pirkis, J. (2018). Influencing the Conversation About Masculinity and Suicide: Evaluation of the Man Up Multimedia Campaign Using Twitter Data. *JMIR Mental Health, 5*(1), e14.	Pp 44-70	N (open-access publication)
Schlichthorst, M., King, K., Reifels, L., Phelps, A., & Pirkis, J. (2019). Using Social Media Networks to Engage Men in Conversations on Masculinity and Suicide: Content Analysis of Man Up Facebook Campaign Data. Social Media + Society, 5(4), 2056305119880019.	Pp 71-101	N (open-access publication)

Chapter 1   Introduction

1.1 Background of this thesis

Worldwide close to 800 000 people die by suicide each year which accounts for 1.4% of all deaths (10). Suicide rates vary widely across countries and by population group and are likely to be underestimated in many countries due to issues of legality and stigma. In most countries around the world the suicide rate for men is much higher than for women (11). In Australia, 3046 people died by suicide in 2018 and the standardized death rate was 12.1 per 100,000 people (12). Three-quarters of those dying by suicide were men (equating to a standardized death rate of 18.6/100,000 men) (12). Suicide is the leading cause of death for men between 15-44 years of age and male suicide continues to be a major public health concern in Australia as well as internationally (11) (12).

A number of factors have been found to contribute to higher suicide rates in men. Men are known to choose more lethal methods (13), show increased alcohol and substance use (14) and have less well-established coping strategies and social support networks (15-17). In addition, men tend to avoid or delay seeking help, particularly for emotional issues (18-20), have greater difficulties in recognizing negative emotions or distress (21) and are less aware of help services available to them (18-20, 22, 23). While fewer men seek treatment for mental health problems compared to women (24), this gender gap does not show for physical health problems (25-27). It has been suggested that the gender gap in mental health treatment is not a reflection of differences in prevalence for mental health conditions, but rather a problem with diagnosis and men's lack of engagement with mental health services (28). Men are found to resort to alternative and often harmful behaviors such as avoidance, escaping and aggression (29).

Mostly, risk factors to suicide are considered in isolation with little regard to the mechanisms or driving forces that may underpin them (30). In more recent discussions on male health, masculinity has been highlighted as the driving force underpinning unhealthy male behavior particularly relating to help-seeking and mental health issues. Many suicide risk factors can be interpreted as expressions of masculinity and adherence to dominant masculine norms.

This thesis is based on the premise that masculinity, the rules prescribed by society about how men should live their lives, is a fundamental determinant influencing how men negotiate their health throughout life (31). Following social constructionist theory, this thesis proposes that by challenging dominant masculinity, social learning processes take place and these processes will facilitate the redefining of restrictive behavior patterns. In turn, this will open pathways for alternative behaviors such as reducing stigmatizing behavior towards men with mental health problems, increasing male help-seeking and ultimately reducing male suicide rates. However, under the current restrictive masculine ideal, engaging men in mental or emotional health and questioning traditional ways of masculinity is a complex task and requires innovative interventions with a broad reach and a gendered approach (32).

It is often claimed that men are a "hard-to reach" population group when it comes to mental health messaging and the factors that drive men's health engagement are complex. A combination of individual and social level factors makes gender-specific strategies of engagement necessary. Activity based approaches of communication and interaction, up front and direct language and reaching men in spaces where they naturally meet and feel comfortable are some of the strategies proven to be successful (33). For universal health promotion interventions, those delivered to the whole of population, media and specifically social media platforms can function as those male-friendly spaces (34). Previous research found that men who are highly active on social media tend to be more emotionally unstable which suggest mental health concerns for these men (35). In this context, a population-wide media-based male health promotion and suicide prevention intervention that takes advantage of a variety of communication channels including traditional and digital media platforms is expected to be most effective, given the systemic and social nature of male suicide and masculinity (36, 37).

1.2 Focus and structure of this thesis

This thesis explores the potential for social media to be employed in health promotion campaigns with the view to generate and increase engagement and influence conversations on the issue of male suicide and its link to masculinity.

For the purpose of this thesis, social media is defined as digital platforms through which users create online communities to share information, ideas, personal messages and other content (e.g., videos, photos) (38). Social networking sites (SNS), such as Twitter and Facebook, are one type of social media which enable two-way direct communication between users (39).

The Man Up social media campaign was an essential part of an innovative media-based male health promotion and suicide prevention campaign that involved a three-part television documentary, a website and social media. Man Up explored the relationship between masculinity and suicide with a specific focus on creating awareness and increasing help-seeking behavior. The Man Up social media campaign had a significant emphasis on sparking conversations via platforms such as Facebook and Twitter. Together, the documentary, website and social media campaign encouraged men to be emotionally expressive and seek help for emotional and personal problems if they needed to, thereby challenging conformity to dominant masculine norms in society.

The focus of this thesis is on evaluating the Man Up social media campaign on Twitter and Facebook on its ability to create audience engagement with the campaign messages in general and more specifically the main campaign topics: masculinity, suicide and help-seeking. Four research questions were formulated:

1. Did the Man Up campaign create engagement on social media?
2. What campaign content was most engaging?
3. How was the Man Up campaign perceived by the public audience?
4. How did masculinity and suicide feature in public conversation?

Chapter 2 discusses the background literature on the key concepts relevant to this thesis: the context of masculinity, health behavior and suicide, engaging men in mental health promotion, the potential for media and social media to influence behavior and evaluation strategies for social media health promotion campaigns.

Chapter 3 describes the design of the Man Up intervention and its evaluation components. This chapter positions this thesis within the larger evaluation of Man Up.

Chapter 4 covers the conceptual and methodological overview of this thesis. This chapter describes how the aims and the four research questions are addressed by the two studies which are presented in Chapters 5 and 6.

Chapter 5 presents findings from the evaluation of the Man Up Twitter data in relation to engagement with the social media campaign. Chapter 6 provides an in depth analysis of Facebook comments to explore how the campaign was perceived by the audience and whether it was successful in engaging men to talk about masculinity and suicide.

Chapter 7 summarizes the findings of this thesis in line with the four research questions and discusses implications for health promotion and suicide prevention with men more broadly. This final chapter also discusses the strengths and limitations of this thesis and presents recommendations for health promotion and research.

Chapter 2   Background literature

2.1 Masculinity, health behavior and suicide

Gender has been recognized as one of the key social determinants of health and following social constructionist theory has complex interrelations with social and structural systems. Gender is something that individuals do or perform through behaviors and interactions with others and in a social context, rather than something individuals are (40). These performances are curated by the accepted gender norms in society which act differently on the health behaviors of men and women (41). In Western cultures for example, risk-taking behavior is generally more acceptable for men than for women which increases the risk of serious injuries for men. Conversely, women are expected to display more passive and submissive behaviors which may take away their ability to control their health (42). Therefore, gender norms are crucial for the negotiation of health behaviors for men and women.

This chapter begins by positioning this thesis within the context of masculinity theory (Section 2.1.1). It then discusses the literature on the interrelation between masculinity and health behaviors (Section 2.1.2) followed by the link between masculinity and suicide (Section 2.1.3). The last two sections present examples of suicide prevention interventions with men (Section 2.1.4) and media-based suicide prevention interventions directed at men (Section 2.1.5).

2.1.1 Masculinity theory

Adopting a constructionist perspective, gender is a dynamic social construct that is shaped by social structures and norms (43). As such, gender is seen as something we learn and do, not something we are born with (44). Masculine norms are those social norms commonly ascribed to men, dictating common ways in which a man is supposed to act and behave in society. The performance of a particular type of masculinity is situation specific, varies by environment and culture and serves as a means to improve men's status and power within society (45). Therefore, masculinities are social practices that men enact and choose depending on social context and based on how useful a certain behavior seems in order to secure social status (46). Masculinities can change in relation to cultural, social and historical contexts and over time (47)

which means that multiple masculinities can exist in parallel and can sometimes compete with or even contradict each other (48).

Conceptualizing masculinity as relational enables researchers to move beyond the individual and investigate the power dynamics of gender, which play out between men and women and also among men (49). In this context, R. Connell's theory of "hegemonic masculinity" quickly became the most influential masculinity concept in social and gender studies (50). Hegemonic masculinity is defined as the "culturally exalted form of masculinity" which embodies the current accepted norm of being a man (49). They present a set of norms and behaviors that legitimizes men's dominant position in society and, if acted out, reaffirm status and power over less desirable forms of masculinity and femininity.

Tying hegemonic masculinity to power has gained criticism as it implies that the hegemonic form of masculinity legitimizes patriarchy which then leads to a pessimistic and negative view of masculinity (50). Connell argued that the starting point for the concept of hegemonic masculinity was in its link to patriarchy and dominance over women, yet gender hierarchy is subject to change and therefore in the struggle for power an older form of hegemonic masculinity can be replaced by a new masculinity which would be more positive and inclusive (51). Therefore, hegemonic masculinity is not static but responsive to changes in the conditions of patriarchy.

Further, most men do not subscribe to the hegemonic ideals, but they still benefit from the advantages men in general receive through the gender hierarchy. Their masculinity is complicit. Hegemonic masculinity also dominates certain groups of men, such as gay men, racial minorities and men from low socioeconomic backgrounds. A more nuanced understanding of the hierarchy of different masculinities is needed especially how the different masculinities coexist and inform each other as well as how change of hegemonic masculinity can take place (52).

For the remainder of this thesis the term "dominant masculinity" is used in line with Connell's theory of hegemonic masculinity, referring to the aspects of masculinity that are the socially accepted and desirable form of masculinity and enacted in order to gain power and status.

Male gender norms in line with dominant masculinity are still deeply manifested in Western societies and prescribe what is acceptable male behavior (53). The enacting of dominant masculine norms means that men are encouraged to strive for power and dominance (over women and other men) and display courage, independence, rationality, competitiveness, control and decisiveness. At the same time, they are inhibited from expressing emotions, vulnerability or weakness (54). Deviating from these norms can have negative consequences for men and result in isolation and loss of status and power (55). Men who don't live up to the traditional masculine ideal can feel inadequate or worthless and may turn to higher risk-taking in order to improve their masculine standing (29, 44, 56). This leaves men with limited choices, particularly when they are experiencing emotional pain. As such, adopting dominant masculine norms influences the ways in which men choose to negotiate their health (31).

2.1.2 Masculinity and health behavior

A recent review of literature suggests that dominant masculine norms impact men's experiences of depression by influencing their interpretation of symptoms, their attitudes and intentions in relation to seeking help, their actual help-seeking behavior and their symptom management (57). Similarly, a recent meta-analysis found that conformity to masculine norms was modestly and unfavorably associated with mental health outcomes (58).

It has been argued that men often downplay their emotional problems and prefer to solve them on their own as asking for help is interpreted as a sign of weakness and loss of control and is attributed to feminine behaviors (59). Men often feel unable to discuss their emotional problems with a health professional and at the same time maintain their masculine identity (60). This has led to a significant body of literature on men's emotional inexpressiveness a discussion of which can be found in De Boise 2012 sociological review (61, 62).

It has also been claimed that gender-related structural barriers may explain men's lower rates of help-seeking, with a "feminized" mental health system deterring men from engaging with services and increasing their risk of developing more severe mental health problems and potentially becoming suicidal (63, 64). The communication centric "talk-therapy" approach in metal

health practice for example has been criticized as a barrier to men seeking professional help (64).

When men do seek help, however, they are more likely to talk about physical problems and pain and are unable or unwilling to disclose emotional issue (65). Reasons here can be higher levels of stigma for mental health problems form men compared to women (66), lower levels of mental health literacy and greater levels of difficulty in recognizing non-specific distress as emotional problems (67-69). These factors together with a gendered practice in health care are likely to drive the lower statistics in diagnosed mental health problems for men compared to women (70).

Men who refrain from help-seeking to avoid being perceived as weak or vulnerable then often resort to alternative and unhealthy coping strategies such as avoidance or numbing of problems through increased alcohol and substance abuse which independently heightens suicide risk (29). In the context of male help-seeking behaviour, problematic drinking and related violence have been linked to notions of dominant masculinity (71-76). Masculine ideals, such as the restriction of emotional expression and the pressure to conform to expectations of dominance can legitimize aggressive and violent behaviour particularly in situation of distress where it becomes more difficult to keep up with the masculine ideal (77). Further, the pressure to drink and use drugs is high among men and a means to socialize and make and maintain friendships (78) which in turn leads to abstaining from seeking help for drug and alcohol related problems (79, 80).

It is important to acknowledge that conformity to masculine norms can also be positively related to health behaviors. For example, some previous studies highlighted that certain masculine norms (e.g., control and responsibility) can be protective for men when coping with distress (18, 57, 64, 81, 82). For example, calling on responsibility and fatherhood can be effective to engage men in healthy behaviors such as trying to quit smoking (83, 84).

Aiming to broaden the focus of men's studies, the Positive Psychology – Positive Masculinity Paradigm (PPPMP) proposes a strength based masculinity approach suggesting that masculine beliefs and behaviors are protective and

adaptive (74, 85-87). To date, only one study has examined the relationship between conformity to dominant masculine norms and positive psychological strengths in men: courage, grit, personal control, autonomy, hope, endurance and resilience (88). The authors found that risk-taking, dominance, primacy of work and pursuit of status were predictive of positive psychological strength. However, in a different study the same attributes contributed to negative health outcomes under the Gender Role Strain Paradigm (GRSP) which is contradicting the PPPMP (58).

As discussed in the previous section masculinity is complex and enactment of masculinity changes in relation to the social, political and cultural environment and over time. Restrictive emotionality, perceptions about vulnerability and loss of control, the settings of the current health care system and limited mental health literacy are among the barriers that lead to men's reluctance in engaging with mental health services and therefore puts them at risk of developing negative outcomes (19, 47, 58, 89-93). These barriers related directly or indirectly to the notions of dominant masculinity as discussed in Section 2.1.1. and contextualize men's lower rates for help-seeking – particularly for mental health concerns – as a gendered issue (57, 94).

2.1.3 Masculinity and suicide

The higher suicide rates for men compared to women have led to a discussion of suicide being a gendered issue. Coleman and colleagues developed a theoretical framework that proposes male suicide as a function of male gender role extremes (95). They base their theory on Baumeister's Escape Theory and Pollack's (2006) concept of the masculine straitjacket (96, 97). Following dominant masculine norms, men are expected to display strength, independence and avoidance of emotions. For men who experience trauma and stress or suffer from mental health problems the pressure to perform dominant masculinity can create a restrictive environment with limited options for help-seeking and healthy coping strategies. Boys are taught from a young age to hide their emotions and are rewarded for being tough. The conditioning of restrictive emotionality in boys grows into cultural expectations on men and becomes the masculine straitjacket (97). Aiming to compensate for the perceived failure to be masculine, men may resort to alternative strategies of

first avoiding and later escaping the compromising situation (29). The self-perceived failure leads to cognitive rigidity, increasing personal stress and lowering inhibition. Suicidal acts are more likely in this state as it poses an escape from an intolerable self (96).

While much attention has been devoted to investigating differences in suicidal behaviors between men and women and investigating social, economic and individual factors that contribute to these differences, gender has widely been reduced to a descriptive variable (54). Only a few studies have included gender as a construct in their analysis of suicide and suicidal behaviors, but those that did suggest that there is a direct relationship between suicidal behaviors and dominant masculinity. A study of 14,000 Australian adult males showed that after controlling for common risk factors for suicide, self-reliance was associated with suicide ideation (30). A link between high adherence to traditional masculinity and suicidal ideation was also confirmed for young adults (98). High conformity to masculine norms also contributes to the risk of suicide attempts in men with a history of child sexual abuse (99) and traditional gender role attitudes are associated with suicidal thoughts in early middle age (100).

Some qualitative studies provide insights on factors that can help to interrupt suicidal behavior and act as protective factors for men. For example, one study found that men who connected with family through enacting the protector and father role were protected against suicidal thinking; doing so allowed them to reframe help-seeking as a rationale for re-establishing control over their situation (64). Other men who conformed to silent-rock and risk-taker identities were more often engaged in avoidance and escape strategies such as alcohol and drug use to alleviate emotional and physical pain and saw non-fatal suicide attempts as feminine.

A review of the literature on suicide through a gendered lens can help to contextualize risk factors to suicide within a gendered paradigm (54, 101, 102). For example, men are known to choose more lethal methods compared to women which leads to higher mortality rates for men (103, 104). In line with dominant masculinity the reasons for these choices may be linked to a greater social acceptability and therefore willingness for men to be violent. Men choose more active methods because it is seen as decisive, aggressive and masculine

and shows greater intent, directed by the fear of the attempt not to work which would be perceived as a failure (105, 106).

Men also have less well-established social support networks compared to women (15-17). The traditional male role as breadwinner with a focus on work relationships leaves men with fewer close friendships and the risk of losing friendships when the work situation changes. Often marriage and family life offer social and emotional integration for men and fatherhood can be protective (107, 108). Therefore, divorce or becoming unemployed can lead to isolation, feelings of worthlessness and loss of status as breadwinner which increases risk of suicide for men (109).

The above evidence on the link between masculinity and suicide risk suggests that masculinity could be an underlying or moderating force for men to experience higher suicide risk. Many of the identified risk factors could indeed be an expression of dominant masculinity. By changing conformity to dominant masculine norms, health promotion interventions could shift unhealthy patterns of behaviors such as avoidance of help-seeking and therefore influence suicide risk in men.

2.1.4 Suicide prevention with men

Despite the gender gap in suicide risk and the impact of gender norms on male life stressors and coping strategies, evidence for the effectiveness of suicide prevention interventions for men is slim. Two systematic literature reviews summarize the evidence from existing suicide prevention interventions with a focus on effectiveness in reducing suicidal behavior (110, 111). Other reviews focused on specific at-risk population groups such as elderly men or indigenous people (112, 113). None of these reviews reported findings by gender or identified intervention designs following a gendered approach. Struszczyk and colleagues (2019) highlighted this shortcoming with their recent scoping review of male specific suicide prevention approaches (114). They identified 22 studies that reported suicide prevention strategies, programs or interventions with men, including qualitative, mixed methods and quantitative studies. Of the identified 14 interventions most were complex or multimodal designs, including two or more of the following components: awareness campaigns, gate-keeper training (a program that develops individuals' knowledge, attitudes and skills to identify

those at risk and make referrals when necessary), educational initiatives and provision of psychological support. Six of the multi-modal interventions reported to significantly reduce suicide rates or attempts in men, however the effect was a combined effect and could not be attributed to individual components of the interventions. Only one stand-alone awareness campaign intervention showed a reduction in suicide rates (115). The review concludes that clear evidence of targeted suicide prevention interventions for men is vastly absent from the literature (114).

Focusing on mental health more generally, workplace-based interventions show promise. A literature review of gender-sensitive interventions with men in workplace settings identified six interventions that were specifically designed for men as these considered masculine roles in the design and delivery of the programs with the aim to increase participation (116). Limited by small sample sizes and a variety of outcome measures, careful interpretation of findings suggests that gender-sensitive mental health interventions can be effective in reducing symptoms of depression and perception of mastery, increase social support, lead to positive changes in daily life and general well-being (117-119). The success of these programs is explained by them not being perceived as therapy, being activity-based and providing all-male support (116).

Given the early recommendation to include a gender-specific focus into suicide prevention activities (120) and the call for gender-transformative approaches in health programs more generally (121), the lack of male-specific suicide prevention interventions is striking. However, some promising programs have emerged in recent years in Australia. These are programs that seek to directly challenge dominant masculine norms with the ultimate goal of improving men's and boys' mental health.

Silence is Deadly is a school-based suicide-prevention program for Australian secondary school boys that encourages help-seeking and challenges male norms. A cluster-randomized controlled trial has been conducted, but the findings are yet to be published (122). *TomorrowMan* is an Australian organization that facilitates workshops for boys and men in schools, sporting clubs, workplaces and communities. Their workshops center around the exploration of masculine norms and the restrictions that men and boys

experience adhering to these norms. Conversations aim to build men's "emotional muscle" and redefine what it means to be a man by "breaking the man-code" into a healthy form of masculinity (www.tomorrowman.com.au). A cluster randomized trial with Year 10 to Year 12 school boys is currently underway. The *Man Cave* program is focused on preventative mental health and emotional intelligence for boys and young men. It follows three steps: deconstruction of traditionally held views of masculinity, challenging men and boys to find their authentic way of being a man and redefining personal sense and behavioral choices (https://themancave.life/programs).

Beyond those programs that directly follow gender-transformative approaches there are a number of programs targeted at specific groups of men at high risk of experiencing mental health problems or symptoms of suicidality. *Ahead of the Game* targets 12 to 17 year old boys, their parents and coaches and uses sport to teach athletes, parents and coaches how to talk about mental health. The program reviews how to recognize mental health issues, what to do and when to get help. Athletes learn how to build resilience and overcome challenges in sport and life. A cluster randomized controlled trial showed that participants in the "Help Out a Mate" workshop reported a significant increase in knowledge of symptoms of mental illness, had increased intentions to provide help to a friend in need and increased attitudes on promoting problem recognition and help-seeking compared to the waitlist group (123).

Two workforce related programs also warrant mentioning as they are designed to support workers in high risk industries which are male dominated. Both programs are based on the rationale that men in these industries follow the tough guy stereotype and refrain from talking about their problems. *Mates4Mates*, a support program for veterans returning from war and/or recovering from injury, provides physical, psychological and social support services to improve the wellbeing of the military family (https://www.mates4mates.org). This program has not yet been evaluated. *Mates in Construction (MIC)* is an example for a multi-modal community-based program that offers suicide awareness and prevention training to volunteers within the industry to help identify mates at risk and connect them with adequate services for mental health support. Various aspects of this program have been evaluated and findings support the potential for effectiveness and social validity

of the program in preventing suicides in the construction industry (124, 125). There are without doubt other programs throughout Australia and in other countries that focus on increasing help-seeking for mental health problems in men, yet few of these do so with a focus on challenging masculine behaviors and are therefore not discussed in this thesis.

2.1.5 Media-based suicide prevention strategies

Media plays an important role in influencing and shaping people's perspectives and thoughts and is widely used by social marketers to influence human behavior (126). With new communication platforms appearing and increasing internet connectivity media's reach is constantly expanding. A multitude of media platforms from print and television to social media are used by the public to gather information about health issues and personal problems (127). Men rely more strongly on media and in particular the internet for obtaining health information (128). With this strong influence media carries important weight for suicide prevention interventions in men and a number of media-based interventions have surfaced over the past decade.

Three media-based interventions with a focus on raising awareness about male mental health and reticence to seek help are of interest. These interventions use different media (traditional and digital) to reach men and influence attitudes and behavior. The *Real Men. Real Depression* campaign was an American large-scale initiative that sought to raise awareness about depression among men and about men's reduced recognition of symptoms and treatment seeking (129, 130). The campaign explicitly targeted men who rigidly conform to masculine gender roles. Personal stories of men suffering from depression were filmed and made into a video series. In addition, educational material and a public service announcement were developed, distributed and released via a website. The campaign received 5,000 emails and phone calls to the information hotline and 14m hits on their website (131). Despite the campaign being released from 2003 to 2005 only preliminary findings of men's responses to campaign materials have been published (129).

HeadsUpGuys was a Canadian online resource for men with depression that encouraged help-seeking through the provision of information relevant and responsive to men's needs. *HeadsUpGuys* challenged dominant masculine

norms of independence, suppression of emotions, and avoidance of disclosure. Reports show significant reach via its website and social media campaign, but the campaign has not yet been evaluated on its effectiveness to increase help-seeking or reduce depression in men (132).

Finally, two television documentaries were released with the aim to highlight mental health issues and suicide in men. The American documentary *The Mask You Live In* follows boys and young men as they struggle to stay true to themselves while negotiating America's narrow definition of masculinity. It explores how gender stereotypes interconnect with race, class and circumstance, and how they create identity issues that boys and young men must navigate to become a "real" men. Its aim is to raise awareness on this issue and explore tactics on how to combat these pressures and raise a healthier generation of boys and young men (133). In 2015 the British rapper Professor Green (Stephen Manderson) released a documentary about his personal journey with mental health problems and making sense of the suicide of his estranged father. This documentary addresses suicide among men under the age of 45, a population group that has seen increases in suicides over recent years in the UK. The main message, which is directed at other young men who are going through a traumatic time, is that it is OK to seek help (134). Neither of these documentaries have been evaluated on their impact.

These media-based male-specific interventions are exciting and have the potential to positively impact male mental health and avert male suicide. However, the lack of evaluation means a missed opportunity for understanding how gender-transformative universal interventions can help to reduce suicide and for gaining insight into effective ways to engage and communicate with men about mental health and suicide.

2.2 Engaging men in mental health promotion

Men's lower engagement with health services and reluctance to ask for help generally has led to increased interest in how to engage men in mental health issues and self-care. This chapter discusses strategies for engaging effectively with men. It begins by summarizing what is known about successful strategies

to engage men in health promotion campaigns (Section 2.2.1). It then discusses the potential of digital media technology as a new platform to engage with men (Section 2.2.2), and provides an overview of the published literature on the effectiveness of social media health promotion interventions with a focus on suicide prevention (Section 2.2.3).

2.2.1 Strategies to engage men in mental health

Men are often considered to be a "hard to reach" population group based on their reluctance to engage with health services. It has been found that health services and health promotion efforts are not aligned with men's needs and that we need to find better ways to engage men (135). Men communicate and negotiate the experience of personal and emotional problems differently to women and therefore will be unlikely to engage with services that are feminized (32). A systematic review published in 2007 by the World Health Organization (WHO) found that gender-sensitive and gender-transformative programs (those that recognize gender-specific needs and those that seek to reshape gender relations) and programs that mobilize the social context (through using mass media and whole community approaches) were more effective in engaging men and changing male attitudes and behaviors compared to gender-neutral programs (136). While this evidence is mostly founded on studies into sexual health and gendered violence (137, 138) the review makes clear that a gender-sensitive approach is needed when engaging men in help-seeking.

The factors that drive men's health engagement are complex and depend on individual and social factors alike, as well as their interactions. In health promotion, there have been calls for a relational approach, meaning an approach that recognizes the interaction between individual agency (driving action) and the social environment (moderating action) (33, 139). As discussed in Section 2.1, dominant masculine norms influence male health behavior. Men's engagement with health promotion is a conflict between displaying strength, independence and emotional control and acting responsibly for self and others. In particular when it comes to dealing with difficult and stressful life events it has been suggested that men's emotional expression also varies from within. Men have shown to use different communication styles within the same conversation which allow for both revealing of emotional struggle while at the

same time marketing themselves as masculine (140). For example men acknowledge their difficulties but then follow up with the affirmation that they are still in control of themselves and don't need help. In doing so, men display different masculinities within the same situation. Men therefore can be both resistant and complicit to dominant masculinity at the same time (140). The navigation of competing masculine norms may mean that unhealthy behaviors arise or persist in the attempt to protect one's masculine appearance. Health promotion activities need to acknowledge the importance of gender-specific pressures on men and account for these in health promotion designs in order to communicate successfully and create engagement. This complexity of how and when men express emotions needs also careful considerations by health care providers and researcher in order to not misinterpret men's help seeking behavior and leaving them without support.

Much of research is driven by health services providers and health policy makers aiming to gain a better understanding of how to increase men's mental health services use by providing environments that are male-friendly and reduce barriers of entry. In this context, the setting of the intervention program has been considered important as the chances of engaging with men are higher in places where men feel comfortable. Success has been reported for interventions in workplaces (116, 141), sports clubs (142) and barber shops (143). Interventions should be designed for settings where men already gather as the perceived familiarity and safety of these settings is likely to promote trust (34). Interventions should also be embedded in the community allowing for group participation and exchange among peers to reduce stigma and normalize participation. This creates an opportunity for men to connect socially with other men and develop social support networks which is a strong protective factor against suicide (33). However, settings need to be selected carefully as linking drinking venues such as sports clubs or pubs with health messaging has the potential to risk reinforcing harmful coping strategies in line with dominant masculinity (144).

An activity-based approach can help to create a positive outlet for emotions and help to facilitate social engagement and talking among men. The success of Men's Sheds in Australia (a community-based initiative that provides a place, a shed, where men can come together, feel included and safe with the aim to

improve men's health and wellbeing) has largely been attributed to the fact that they allow men to come together with the main purpose of being active and "doing things", enabling conversations to occur naturally (145, 146). In counselling and support situations direct communication styles and a solution focused approach while setting tangible goals tends to also work better with men (147).

In the context of engaging men in help-seeking, it is suggested that using empowering and active language to reframe help-seeking is desirable. This could mean asking men to "take action" or "take control" over their health and "handle the problem", but avoiding language that is generally seen as depicting feminine behaviors such as talking about feelings and emotions (147). These phrases align with accepted manifestations of masculinity, such as being self-reliant and being action focused and refer to behaviors that men can follow without losing male status. The use of humor in health campaigns can also help to diffuse tension and overcome worries and is especially important in the mental health and suicide promotion context (33).

Following a social marketing approach, public health campaigns often use stereotypical notions of masculinity as a "hook" to gain attention and start engagement with men. However, little is known about whether this type of messaging leads to behavior change in the long term. For example, to motivate men to attend regular health checks, one campaign compared these to a car tune-up assuming that the familiarity with this language would break down barriers (148). The activation of male health behavior via calling on dominant masculine norms may work for short term engagement, especially in public health campaigns aiming to create awareness or distribute information, but there are warnings that these strategies risk reinforcing male stereotypes and behaviors that in other settings can be harmful (135, 149, 150).

The male-positive approach introduced in Section 2.1.2 is also seen as an enabler for male engagement. The claimed male-positive attributes (action oriented relationships, carer responsibilities as a father, the protector role, self-reliance in problem solving, pride in work, courage and taking risks, working in groups/teams, serving and supporting others, male humor and learning from heroes) can be translated into communication strategies and design elements

for health interventions or public health campaigns that will speak to men and activate healthy behaviors (151). However, as discussed in Section 2.1.2, evidence for the male-positive approach is yet to come and some of these attributes (risk-taking and self-reliance) have also been linked to negative health outcomes, including suicide.

2.2.2 The potential of digital media to engage men in mental health

Alongside the above-mentioned strategies, new digital technologies such as social media can present opportunities for engaging men in help-seeking and mental health care. These technologies are more flexible than traditional media and can be used remotely and in private settings such as at home. Due to men's lack of engagement with traditional health services, it is often suggested that using digital alternatives means to reach and engage with men of all ages (including those in vulnerable and marginalized populations).

Using traditional media channels such as television, radio and print media has a long history in social marketing and health promotion campaigns. With the rise of the internet, the media environment has become more complex and offers new possibilities as well as challenges (152). Over 4.33 billion people were active internet users as of July 2019 and in Western societies about 80% of people have access to the internet (153). In Australia there were 21.74 million Internet users as of January 2019, constituting 87% of the Australian population and 93% of these used the internet every day (154). People use the internet to search for and download health information, find and contact health services or ask for advice using chatrooms (155, 156). Many health organizations take advantage of this trend by offering well-resourced websites, including self-help programs, access to anonymous counselling services and resources to learn about how to help others in distress. For example, Lifeline (a 24 hour crisis support and suicide prevention telephone hotline in Australia) extends its services through a comprehensive website with links to other suicide prevention services, a live chat option and sharing of lived experience and recovery stories through videos (www.suicidepreventionlifeline.org).

Digital services can be accessed around the clock and in a safe and private environment which can be important in a crisis situation (157). Users of these services are generally anonymous and, consequently, there is reduced risk of

them experiencing stigma. These are important factors for population groups that are reluctant to engage with conventional health services and fear stigmatization, such as men. A challenge for the internet user, however, is to determine the credibility of information and its potential for harm (158).

Over the past decade, social media has become increasingly popular and has shown particular promise for public health promotion campaigns aiming to share information, inform and educate large population groups and change attitudes and behaviors (36). This includes a range of different platforms: forums and message boards, review and opinion sites, social networking sites, blogging, micro blogging and media sharing (159). In particular, social networking sites such as Facebook, Twitter, Instagram and YouTube have seen continued growth over the last decade and concerns about accessibility of new technologies have rapidly decreased. In May 2019, the number of active social media users worldwide was nearing 3.5 billion, representing a 9% increase from the same time in the previous year (160). Facebook is the most popular and most actively used social media channel (161). Increasing user numbers, broadening user demographics, technological advancements in surveillance and tracking of online behavior create the potential for tailored massaging and cost-effective reach of target groups (162). Social media channels may be particularly useful in reaching remote populations or those who do not interact with traditional health services, such as men (163).

Interestingly, social media user behavior varies by gender. When looking at user statistics, Facebook, Twitter and LinkedIn show an almost even split of users by gender, while Instagram, Snapchat and Pinterest show a higher proportion of younger users and women (164). Men tend to use social media to gather information and for research, while women socially engage and keep contact with their friends (165, 166). Men are also more likely to engage on social media networks when they are extraverted and anxious or experiencing emotional instability (35). The latter suggests that social media platforms may present an opportunity to engage with men who are experiencing emotional or mental health problems.

The capacity of social media for two-way communication between users is often mentioned as its main advantage over traditional media. Two-way

communication involves user interaction which is argued to be a more effective way to engage people in health messages as it fosters conversations among individuals (167). This capacity for user interaction in conjunction with possibilities of targeting specific population groups, reaching diverse audiences, collecting feedback, having real time conversations and directly engaging with the audience have led to extensive use of social media platforms in health intervention (168-171). While this poses many advantages and new opportunities for health services organizations and health promotion campaigns, it is not clear how these channels might be used most effectively in health promotion and how they might best be integrated with traditional media channels (152). It is therefore crucial firstly, to develop key performance indicators that allow to measure the effectiveness of interventions that make use of the digital and social media environment and secondly, to develop evaluation designs for complex multi-media interventions (172).

2.2.3 Effectiveness of social media health promotion interventions

Social media has changed how health campaigns can be used to influence attitudes and behavior. A number of literature reviews attempted to improve our understanding of the impact of social media health campaigns on different outcomes (39, 169, 170, 173, 174). Two reviews show positive effects of online social network interventions for changes in physical health outcomes, social support and health attitudes (in areas such as dieting and weight loss) (169, 170). Social support was a strong predictor for behavior change which was measured by the encouragement received though the social media community (173). But the role of social support varies depending on health behavior and user characteristics. In the context of mental health, social media platforms can be a valuable and useful source of peer, social and emotional support to individuals and provide encouragement, motivation and shared experience as important social support features (39). However, some studies argue that there is very little evidence that social media network interventions are effective in improving health and behavioral outcomes (175). In part, this is due to weak evaluation methodologies and the nature of social network settings being "real world" applications with no control over external environmental and social factors (172).

In suicide prevention the evidence for the effective use of social media is slim. A recent review of literature identified 30 studies with a focus on the ways in which social media platforms could be used to prevent suicide (171). While generally showing positive results, these studies were descriptive, cross-sectional, varied in overall design and quality and focused on websites and online forums. No studies focused on social networking sites and there was a general lack of intervention studies.

However, some narrative reviews provide an overview on the state of social media use in suicide prevention. The authors of these studies point out that social media can influence suicide-related behavior in positive and negative ways (157, 167, 176, 177) and these effects need to be managed carefully when using social media for health promotion focused on suicide. Historically, research on the media and suicide prevention has predominantly focused on the negative effects that the media reporting of suicides poses to vulnerable people (178). The center of attention has been on the so-called "Werther effect", whereby media reports of suicide, mostly in traditional media, are implicated in subsequent rises in suicide rates (179, 180). Digital media has predominantly been seen as providing easy access to pro-suicide information and opportunities to connect with individuals and groups who may encourage suicide acts and increase harm to suicidal individuals (181-185). For social media the risk has been seen as even greater. Participation in forums and chat groups can influence decision making, in particular when other users are encouraging of suicidal behavior, provide "how-to" information or enable users to form suicide pacts (167, 177, 186-189). Although some studies have found a positive link between using the internet to search for suicide-related information and suicidal ideation, no such link has been found for social networking sites (187).

With the rise of suicide awareness media campaigns, the potential for positive use of media in suicide prevention has been explored rapidly (179). Online environments can be protective for people experiencing suicidal thoughts by facilitating social connection among peer groups with similar experiences, increasing awareness, reducing stigma and allowing health organizations to provide support (including crisis support) that is accessible without time restrictions (157, 190, 191). They also have the advantage of generating

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informal discussions and being less intimidating than more traditional forms of help (192). Interaction with other users has been shown to result in reduced suicidality, reduced stigma and increased help-seeking (190, 193, 194). Internet programming can also be used by social media organizations to identify people at risk through keyword and search terms alerts which can trigger links or pop up messages to be displayed to provide advice or information on where to seek help. One limitation in their use for effective suicide prevention may lie in the limited online and media access that some marginalized and particularly vulnerable men experience (e.g. homeless men, remote communities).

As with traditional media, social media's potential to cause harm or do good depends on what kind of suicide-related content is shared, how this content is linked to existing suicide prevention support services and whether these platforms are used responsibly (195). With improving technology for tracking and instant intervention, the opportunities for positive use of social media are likely to increase, yet to date there are no studies looking at the effectiveness of these technologies on reducing suicide risk. More research is needed to better understand the effect of social media technologies on health promotion and how best to use these technologies to influence positive behavior change in line with the campaign goals (173).

2.3 Media, social media and influencing behavior

Media provides the opportunity to model new behaviors by introducing new ideas to people as well as provide social prompts for behaviors that may already exist but are not commonly enacted. In this way, media campaigns can encourage new behaviors as well as alter existing ones. While media communications can directly influence individuals, this effect is stronger for behaviors that do not attract risk (196). New behaviors that have uncertain outcome expectations or those that challenge existing behaviors often require validation before being enacted. Early adopters can function as models to inform and enable people to adapt new practices. The experiences of models are observed, processed and evaluated and can directly encourage others to adopt the new behavior (197). For large public health campaigns, communication operates via two pathways: the direct pathway and the socially

mediated pathway. Media communication in the direct pathway promotes changes by informing, enabling, motivating and guiding viewers, while in the socially mediated pathway media influencers are used to link viewers to social networks where sharing and validation of information takes place (198).

With social media networking platforms influencers are ever more present. The snowball effect of friend connections creates the potential for everyone to become an influencer within their own networks (199). This expands the reach and impact of mass communication. Media campaigns can distribute messages on new behaviors or challenge traditional behaviors by taking advantage of these interactive social networks and create spaces where these messages can be shared and discussed. This allows people to self-select into the influencer role and encourage others to engage, learn and adapt behavior. It has long been suggested that new ideas are conveyed through interpersonal two-way communication, where people interreact by sharing information, debating ideas, gaining understanding about each other's views and mutually influencing each other's position (200).

Social Cognitive Theory provides a conceptual framework that can help to unpack the processes triggered by media-based public health campaigns. A key idea of Social Cognitive Theory is that individuals can learn through observation, imitation and modeling the behavior of others (126). Observing behavior corresponds to gathering information on individuals, the environment and learning about the consequences of those behaviors. This then influences decisions about whether to accept and perform the learned behavior or whether to reject it. For example, if the outcome of the behavior is expected to be negative, the motivation for performing the behavior will be low. In the context of male health and masculinity, this framework helps to explain the reluctance of help-seeking in suicidal men. Men who observe that the display of strength, self-reliance and emotional restrictiveness are valued male behaviors are less likely to enact alternative behaviors such as talking about health problems and openly expressing emotions as these are not seen as socially desirable. If men only observe behaviors in line with dominant masculinity in their social environment the process of observational learning reinforces expressing these norms.

By facilitating interactive communication, social media campaigns can tap into on the mechanisms of observational learning. Social network technologies promote collective learning by means of social negotiation among the social media users (201). They also transcend time and space via a rapid social diffusion process that is not limited to geographic boundaries (126). Through embracing digital communities as a source for information gathering and sharing, people can now connect with people outside their immediate social environment which in turn creates a greater potential for observing and learning new behaviors (202, 203). This interactive environment creates the ideal backdrop for health promotion campaigns that aim to influence behavior and start social change. Campaigns can take advantage of the social, interactive and boundless environment to help distribute their messages, especially when seeking to alter behavior.

2.4 Evaluation strategies for social media health promotion campaigns

In the context of health promotion, social media campaigns are mostly designed to achieve one or more of the following goals: to communicate with consumers, to establish a brand or organization, to distribute information to create awareness, to expand reach and grow an audience and/or to foster public engagement (172). These goals are founded on the assumption that knowledge and awareness creation can lead to engagement with the campaign, influence attitudes and lead to behavior change (204). Yet, very little is currently known about how best to evaluate social media health campaigns, despite the increasing use of social media in health promotion.

A recent systematic literature review of evaluation methodologies for social media health promotion interventions stressed the need for developing appropriate evaluation strategies for the social media health promotion field. Ideally, these evaluations would include measurements of reach, engagement and effectiveness (205). The review analyzed 47 studies covering a range of health issues and behaviors including diet, physical activity, smoking, sexual health and mental health. Two main design formats were identified – open and

closed designs – and these designs informed the studies' evaluation strategies. Closed designs resemble classic research designs with some form of control over the intervention, recruitment and target group. Open designs are used in evaluations of live interventions in real world settings such as health promotion campaigns and are therefore limited in their control over who is exposed to the intervention. The review found that closed designs managed to assess effectiveness, yet could not measure reach and engagement beyond the sample recruited and were unable to provide information on how the intervention could be scaled in real world settings. Conversely, open designs usually assessed reach and engagement but fell short in objectively assessing effectiveness, mostly also due to not having defined outcome measures. The authors concluded that balancing the rigor of evaluation methods with the assessment options for real world conditions is needed to advance the field of health promotion research and generate realistic evaluation strategies that can cater for the complex conditions of social media (205).

A coalition of researchers and representatives from organizations and agencies dedicated to bringing unified standards to the measurement of social media activities developed the first Social Media Measurement Standards (#SMMStandards) in 2012 (206). With increasing use of social media in health promotion, the coalition saw the need for defining key performance indicators and metrics for the implementation and evaluation of health promotion interventions with the aim to adding rigor to the evaluation of open designs (172, 207). The #SMMStandards follow a hierarchy of low, medium and high engagement indicators that can be linked to the stages of process, impact and outcome evaluation[i] commonly used in health program evaluation (208). Table 2.1 lists the key performance indicators and measures for the proposed hierarchy of engagement model to help formalize the evaluation of social media health promotion interventions.

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[i] Process evaluation: measures the activities of the program, program quality and who it is reaching; Impact evaluation: measures the immediate effect of the program and is aligned with the programs objectives; Outcome evaluation: measures how well the program goal has been achieved and it's overall effectiveness in relation to the program goal.

Table 2.1: Hierarchy of engagement - Key performance indicators and measures to evaluate social media health promotion interventions

Engagement level	Evaluation type	Key performance indicators	Measures
Low level engagement	Process evaluation	Exposure: the number of times social media content is viewed	View counts, click-through rates, impression counts, ratings and rankings, proportion of post and videos viewed
Low level engagement	Process evaluation	Reach: the number of people who have contact with the social media campaign and its content	Number of followers/friends/ subscribers/fans, number of page likes, growth rate of followers/friends/subscribers/ fans
Medium level engagement	Impact evaluation	The number of people who acknowledge agreement or preference for content	Like/dislikes on posts/tweets, like rates, frequency of favorites, likes/dislikes on videos
Medium level engagement	Impact evaluation	The number of people who participate in creating, sharing and using campaign content and the degree to which they influence others	Posts of tweets by followers, user generated content, comments on posts, comment rate, downloads/uploads, number of retweets, retweet rate, number of mentions
Medium level engagement	Impact evaluation	Interaction between audience members through conversation	Number of interactions between followers, content/ topics that audience engage with, frequency of new discussions
High level engagement	Outcome evaluation	Number of people who engage in offline events/activities	Number of people who: register for services/ appointments, engage in offline advocacy, attended in off-line events

Note: Table was adapted from Neiger et al. 2012 to fit the revised hierarchy of engagement presented in Neiger et al 2013.

The hierarchy of engagement pertains to increasingly more meaningful levels of engagement whereby low and medium engagement are seen as progressive

stages and essential for achieving high engagement (208). Low engagement reflects the early stages of implementing the social media campaign which focusses on establishing social media presence, growing a following and generating exposure and reach. Exposure, defined as the number of times social media content is viewed, can be measured by collecting data on view counts, clickthrough rates[ii], impressions[iii], ratings and rankings. The campaign reach looks at how many people have seen the campaign content. The number of followers, fans or friends can be a measure of reach. Exposure and reach measures are often used to monitor the implementation of a campaign and gauge if the campaign needs adjusting along the way.

Medium engagement then assesses the presence and amount of interaction between the audience and the campaign. Once the campaign has grown an audience it is important to understand how the audience interacts with the campaign messages. In a broader sense this leads from process evaluation to impact evaluation (209). While low engagement is focused on measuring the actions of the campaign, medium engagement reflects the responses by the audience to campaign activities. Thus, the first level is focused on the distribution of information and limited to one-way communication, while the second level requires two-way communication and some reaction by the audience. Medium engagement can be measured by looking at the number of likes or dislikes and more recently the use of emojis, comments and posts by followers, reposts or retweets or any kind of sharing of the original post, mentions and downloads. These measures can be interpreted as a form of endorsement for the campaign and therefore indicate that the audience member is engaged with what they see or hear. Metrics to measure low and medium engagement are relatively easy to obtain. The common social media platforms (Twitter, Facebook, Instagram and the Google suite) offer standardized analytics that can be downloaded from the social media account or additional software can be purchased to make use of more complex analysis.

High engagement with the audience refers to audience involvement with the program or campaign beyond the social media environment. Depending on the

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[ii] Click-through rate: the proportion of visitors to a web page who follow a hypertext link to a particular site.
[iii] Impressions: number of times a person sees a post.

context of the campaign this can be online or offline activities such as surveys, experiments, events. Metrics for high engagement are usually more complex and their measurement depends on the online or offline activity or service that the audience gets involved with. Measuring these requires customized solutions. A few general examples are advocacy activities, promoting the organization or cause, volunteering, survey completions, feedback programs or up-take of offers made by the organization (208).

For health communication campaigns the use of two-way communication is seen as crucial for reaching high engagement with the audience (168). Campaigns that aim to influence individuals' personal perceptions and introduce new ways of thinking should therefore aim to enable interpersonal communication and optimize the use of two-way communication channels (210). Surprisingly, the majority of social media health promotion campaigns do not move beyond the distribution of information and therefore do not make use of the potential that social network platforms have to offer (168, 211). This limits their ability to reach medium engagement, transition into high engagement and move beyond the online environment (172, 208). This shortcoming is possibly due to the novelty of these platforms and therefore lack of knowledge about effective campaign design, and the complexity that arises from implementing interactive campaigns. Often organizations lack not only this knowledge but also capacity (staff time) to manage and respond to social media activities. Allowing for and engaging in two-way communication can also introduce risk, especially in the context of mental health and suicide. Spreading of inaccurate or unhelpful information, discrimination, harassment and bullying of vulnerable internet users are among the risks most often feared (212). While autonomy of sharing information and discussing different viewpoints can lead to increased reach and engagement with the campaign (213), conversations among the audience need to be carefully monitored to avoid undesirable outcomes for individuals (207).

This being said, interpersonal communication between audience members may be a crucial link between campaign activities and measuring endorsement in more detail. The opportunity for and visibility of interpersonal communication on social media is one of its main advantages for health promotion campaigns, and much can be gained from analyzing this source of data. Yet, little research has focused on contextualizing the role of interpersonal communication within

campaign evaluation (210). Following the rationale of the hierarchy of engagement model described above, the level of interpersonal communication and the content of conversations between audience members can be defined as a metric to measure the impact of health promotion campaigns (207). While not originally part of the hierarchy of engagement model by Neiger and colleagues (2013), "interactions between audience members" has been added as an additional indicator for medium engagement for the purposes of this thesis (see Table 2.1). This indicator is measured by the number of interactions between followers, the type of interactions and the frequency of new discussions, as well as by analyzing the content of these conversations. The latter will provide greater depth and insight into the thinking and learning processes compared to simple metrics, but will also require more complex and manual analysis of data such as thematic content analysis.

A few previous evaluation studies involved content analyses of conversations on social media in order to identify the topics that the audience engaged with and whether campaign messages were perceived positively or negatively (214-216). Two studies analyzed tweets from a yearly male mental health campaign by Movember and found that Twitter was limited as a platform for generating in depth conversation (217, 218). This demonstrates the added value that analyzing raw data from social media platforms can provide, even though in this case it demonstrated limitations. This information is still valuable for planning future campaigns and selecting adequate methods aligned with the campaign goals.

To advance our understanding of how and when social media might best be used in health promotion interventions, we need to evaluate these interventions. This requires choosing the appropriate evaluation methodology in relation to the pre-defined objectives of the campaign. It is crucial to decide on the campaign goals first and then match appropriate evaluation strategies and select evaluation metrics to measure these pre-determined goals (172). This requires the use of a systematic and rigorous evaluation model that can give guidance on performance indicators and their measurement and can be adapted for different social media platforms. Future evaluations in the social media health promotion field would greatly benefit from using such frameworks.

2.5 Summary

The discussion of background literature shows that conformity to dominant masculine norms impacts men's health behaviors and underpins men's higher suicide risk compared to women. To avoid censure from peers and social exclusion, men often resort to behaviors which are accepted as the male norm (29). "Doing gender" may require men to engage in risk-taking behavior, violence, heavy drinking and substance abuse to mask conditions of vulnerability and emotional struggle (51).

Challenging conformity to dominant masculine norms may create opportunities for improving men's help-seeking, thereby improving their mental health and reducing their suicide risk. A more open interpretation of masculinity could facilitate alternative pathways of help-seeking for men without them having to fear losing male status and experiencing discrimination. Yet, engaging men in questioning traditional ways of thinking and behaving is a complex task and requires innovative interventions with a broad reach and a gendered approach (32). A population-based health promotion intervention that takes advantage of a variety of communication channels including traditional, digital and social media platforms is expected to be most effective given the systemic and social nature of male suicide and masculinity (36).

Very few interventions exist that aim to address male's reduced help-seeking via the link between male gender norms and suicide, and to date no evaluation data are available for any of these interventions. Since the understanding and enacting of gender norms is a societal issue, population-wide health promotion campaigns are the ideal starting point to raise awareness about this link and provide a ground on which to discuss and challenge harmful behaviors.

Social media networks are emerging as public spaces where men seek information, meet and exchange opinions. This means they present ideal environments to interact with men and engage them in sensitive topics that concern all men. Informed by Social Cognitive Theory, the interactive environment of social media facilitates a process of diffusion and learning by which new ideas can be introduced, shared and discussed. Following these processes social media health promotion campaigns have the potential to influence health attitudes and behaviors. There is some evidence about the

effectiveness of social media health promotion interventions, but it is limited (173, 219). This is partially due to a lack of formal evaluation frameworks to inform the campaign design and evaluation strategy (39, 205). A good starting point for systematic evaluation is the hierarchy of engagement model proposed by Neiger and colleagues (2013). It focusses on measuring engagement in several stages to evaluate processes, impacts and outcomes of campaigns (208). Engagement with campaign content is often highlighted as the key performance indicator and marker of active participation, awareness and contemplation which are important steps on the behavior change pathway (205). This has led to evaluators using engagement as a proxy measure for effectiveness (208, 220-222). In addition, interaction among the audience by means of interpersonal conversation should be part of social media campaign evaluation to help understand the way in which these conversations can help or hinder campaign success as well as to provide insight into attitude and behavior change.

Today's media landscape is increasingly complex and campaigns require a multi-channel multi-media design to ensure high reach and maximize engagement with the audience. New approaches to evaluate complex health promotion campaigns are needed to allow the identification of campaign performance indicators and also the relative effectiveness of different components of multi-media campaigns such as social media (39). This is particularly important for interventions that seek to introduce new ideas or challenge societal views.

Chapter 3   The Man Up intervention

Man Up was an innovative media-based male health promotion and suicide
prevention intervention that comprised a documentary, website and social
media campaign. The focus of this thesis is the evaluation of the Man Up social
media campaign. This chapter describes the design and evaluation components
of the Man Up intervention as a whole and positions the social media evaluation
within this broader context.

3.1 About Man Up

3.1.1 The back story

Man Up was funded by the Movember Foundation in Australia. A collaboration
was established between researchers at the University of Melbourne (including
the candidate), an independent film production company, Heiress Films and the
Movember Foundation. Their work was guided by an expert advisory group,
comprising individuals with expertise in men's health (e.g., representatives from
men's focused community and service organizations and expert consultants).
The result of this collaboration was a documentary that targeted Australian men
and sought to: demystify and normalize men's emotional experiences,
emotional expression and help-seeking, challenge aspects of dominant
masculinity related to self-reliance and provide positive role models for change.
The goal was to create a television documentary that was entertaining and
informative and a social media campaign that generated awareness of and
engagement with the issues discussed in the documentary. The content of the
documentary was developed by Heiress Films, based on their extensive
experience in creative media production and was guided by research regarding
masculinity, male suicide and mental health.

3.1.2 The Man Up intervention design

The Man Up documentary was designed in three episodes and led by a
presenter – Gus Worland, who is a radio personality from Sydney (Australia).
Motivated by the loss of a close friend to suicide, he travels across Australia in

Episode 1 to find out what drives men's suicidal behavior and what can be done to address the problem. He talks to survivors of suicide, those affected by suicide and experts in the field of men's mental health and male culture. In Episode 2, he explores a range of suicide prevention initiatives that aim to tackle the issue of suicide in different ways. He meets with organizations and individuals who implemented programs to encourage men to reach out for help and open up to their mates. He talks to ex-servicemen in the *Mates4Mates* program, visits a rural farmer who, from his own experience with suicide, started the *Mate Helping Mate* program to support men in isolated rural communities and he watches his son participate in a high school workshop which is aimed at challenging the rules of being a man and encouraging boys to open up and show emotions (facilitated by Tomorrow Man). In the final episode, Gus prepares for a call to action by creating a campaign ad video titled "Man up, Speak up". It was designed to create awareness of the damage caused by telling boys and men not to cry and to encourage men to open up and talk about their personal struggles. This 60 second campaign ad video was released on social media and the web after the screening of Episode 3. The documentary was first aired by the Australian Broadcasting Corporation (ABC) on Australian national television on three consecutive weeks starting 11 October 2016. Thereafter, it was released on ABC's catch-up online viewing platform, ABC iview, and was re-screened on television a further two times in 2017 and 2018.

From the beginning, Man Up was conceived as a multi-media intervention that took full advantage of the web environment. Therefore, the documentary was accompanied by a digital campaign using a website and five social media platforms (Facebook, Twitter, Instagram, YouTube and tumblr) to promote Man Up and create awareness and engagement about the problem of male help-seeking and suicide. There was also a help page on the website that showcased the various organizations that help men. The content of the website and social media campaign was curated in preparation for and alignment with the launch of the Man Up documentary on television. The website and the Man Up social media accounts (named @manuptvseries) were also used to release content that was beyond the scope of the documentary. The Man Up website and social media accounts are still live today and the documentary can be

accessed and viewed through the Man Up website and catch up television ABC iview.[iv]

3.1.3 The Man Up social media campaign

Social media was a crucial part of the overall Man Up digital campaign and aimed to kick-start, fuel and continue the conversation beyond the reach and lifespan of the documentary. The social media campaign ran over 14 weeks from 15 August to 20 November 2016 and was designed to roll out in three phases. Table 3.1 shows the timeline of each phase in relation to the airing of the documentary.

Each phase was aligned with distinct campaign goals. Phase 1 introduced the documentary and the key themes. It was aimed at promoting the documentary and its messages and to grow a following on social media and ran from middle of August 2016 to early October 2016 (campaign weeks 1 to 8). Phase 2 coincided with the three weeks of screening of the documentary from early to late October (campaign weeks 9 to 11). A more active approach was taken by which followers of the campaign were encouraged to share campaign content and talk about its messages. Phase 3 sought to extend the impact of the Man Up campaign beyond the screening of the documentary by encouraging followers to take action and challenge themselves and their family and friends regarding the stereotypical views of men in society, especially in relation to expressing emotions. This phase started with Episode 3 of the documentary, in which Gus created his own call to action, and continued through to the end of the official campaign (campaign weeks 11 to 14).

Table 3.1: Man Up campaign phases and goals over time

Campaign month	August			September					October				November		
Campaign weeks		1	2	3	4	5	6	7	8	9	10	11	12	13	14
Documentary aired										TV screening					
Digital campaign Phase 1		Grow audience & encourage to watch the documentary													
Digital campaign Phase 2										Talk and share					
Digital campaign Phase 3												Take action			

[iv] Website: www.manup.com.au; Facebook: /manuptvseries; Twitter: /manuptvseries; ABC iview link: https://iview.abc.net.au/show/man-up

3.2 The evaluation of Man Up

Considering the three pillars of the Man Up intervention – the documentary, website and social media campaign – two overarching goals can be identified. First, Man Up sought to increase men's help-seeking for emotional problems by challenging men's conformity to masculine norms and other behaviors that are an expression of dominant masculinity and can lead to harmful health behaviors and increased suicidality. Secondly, Man Up sought to raise awareness, create engagement and influence the national conversation on the issue of male suicide and its link to masculinity. The focus of this thesis is on the second goal and findings from the evaluation of the social media campaign are presented in Chapters 5 and 6.

The evaluation of Man Up was multi-faceted and included quantitative and qualitative components as well as closed and open designs. It included nine components, including Study 1 and Study 2 as presented in this thesis.

Study 1 included an analysis of various data collected through Twitter. Twitter Insights data were used to assess reach and engagement with the campaign and to determine highest and lowest performing tweets. Tracking of common campaign hashtags over time enabled pre-, during and post comparison of commonly used hashtags as an indicator for increased volume of conversations. Thematic analysis on a sub-set of tweets helped to determine most engaging campaign content themes on Twitter.

Study 2 was a qualitative study. Content analysis of user comments published on the Man Up Facebook page identified common themes and active conversations. This provided further insight on the content of the conversations triggered by the campaign.

A brief overview of the other evaluation components is now provided:

- Before launching the website and social media campaign a concept test of the website and online promotional materials was conducted by interviewing 17 male participants from different ages and backgrounds. The findings from this evaluation component were used to revise promotional materials and key messages and revisit the website

structure and design. This study was led by the candidate and findings are published in the Health Promotion Journal of Australia (4).

- A randomized controlled trial (RCT) of the Man Up documentary was conducted prior to its screening on television to determine the efficacy in changing men's intention to seek help for emotional problems (6). RCT data were analyzed quantitatively and qualitatively and findings are published in two peer reviewed journals: Journal of Epidemiology and Community Health and American Journal of Men's Health (5, 6).

- A repeat cross-sectional online survey was hosted on the Man Up website including a similar set of questions to the RCT. Data were collected for a period before the screening of the documentary and in a slightly modified form after the screening. Before and after group comparisons were analyzed and findings from this study are published in Australasian Psychiatry (3).

- The impact of Man Up on men's views of masculinity was evaluated in a study that pooled qualitative data from the RCT and an online survey for visitors to the Man Up (web survey). Reflections from 423 males were included in the analysis. Findings are published in the Journal of Men's Studies (7).

- Various data were collected through the website including Google Analytics data of click rates and qualitative data from emails received through the website and text responses to the online survey. These data were analyzed to establish the effectiveness of the website in facilitating help-seeking and fostering a conversation on masculinity, suicide and help-seeking. Findings are published in the Health Promotion Journal of Australia (8).

- Data were also combined across multiple sources (RCT, web survey, Facebook, Twitter) to determine the "active ingredients" that contributed to the impact of Man Up. Findings are published in Advances in Mental Health (9).

- Finally, the evaluation design and outcomes are further summarized in the Man Up evaluation report (223).

Chapter 4   Conceptual and methodological overview

This chapter provides a conceptual and methodological overview of the social media evaluation.

4.1 Conceptual overview

As described in Chapter 2, the design of the Man Up intervention was based on social constructionist theory of gender in which gender is seen as performance which is learned through social interaction and practiced through adherence to socially accepted norms and behaviors (43, 51). This thesis proposes that gender-transformative health promotion interventions, those that challenge commonly accepted dominant masculine norms, can help to redefine traditional behaviors and open alternative behaviors for men who experience emotional and mental health struggles. A more open and accepting environment for men to express themselves without fear of alienation or social punishment would lead to increased rates of help-seeking, earlier treatment and therefore reduced risk of suicidality.

As a public health promotion campaign Man Up combined traditional mass media with digital technologies such as social networking platforms in order to foster interpersonal communication and interaction between campaigns and followers/consumers and maximize its effect (224). The interactivity of social media platforms provide an environment that offers space for observation, exchange and validation. In line with Bandura's Social Cognitive Theory this can drive learning which in turn influences attitudes and behaviors. Campaigns that seek to introduce new ideas or challenge conventional ways of thinking might therefore profit greatly from using social media platforms as part of their communications strategy (210).

Today, social media platforms are established worldwide and have changed how individuals communicate with each other and search for information (225). Yet, little is known about how to evaluate social media campaigns. The relatively few evaluations that were conducted have tended not to follow a clear framework for measuring effectiveness. While not commonly done, following a theoretical framework can support the effective design of social media campaigns and their evaluation which positively influences campaign success

(173). This thesis focuses on the evaluation of the Man Up social media campaign and its ability to engage men in conversations on suicide and masculinity. An evaluation framework is presented that is suited to systematically evaluate campaign impact by defining and measuring audience engagement across the platforms: Twitter and Facebook. This could easily be adapted for other digital media.

This thesis showcases how measuring engagement can help interpreting campaign impact in line with its pre-determined goals. The findings from this campaign evaluation are further contextualized to determine its success in effectively engaging men. This thesis adds to the discussion about the potential for social media platforms to be used effectively in public health promotion campaigns and offer a new perspective on how to use qualitative and quantitative campaign data to better understand impact.

4.2 Methodological overview

4.2.1 Aims and research questions

The overall aim of this thesis is to explore the potential for social media to be employed in health promotion campaigns with the view to generate and increase engagement and influence conversations on the issue of male suicide and its link to masculinity. Four research questions were formulated:

1. Did the Man Up campaign create engagement on social media?
2. What campaign content was most engaging?
3. How was the Man Up campaign perceived by the public audience?
4. How did masculinity and suicide feature in public conversation?

These research questions were addressed in two studies, each of which was published as a peer-reviewed journal article. The articles are presented in Chapters 5 and 6. The first study focused on the evaluation of the Twitter campaign and responded to research questions 1, 2 and 3. The second study provided in-depth information about interactions and conversations from the Facebook audience and covered questions 3 and 4.

4.2.2 Methodological framework

Following the hierarchy of engagement model introduced in Section 2.4, a methodological framework was developed which provided a roadmap for the evaluation of the Man Up social media campaign on Facebook and Twitter. Table 4.1 provides an overview of the key performance indicators, the metrics chosen for measuring these indicators, and the correspondence between study and research questions presented in this thesis.

Table 4.1: Key performance indicators and measures in the evaluation of Man Up engagement

Key performance indicators	Evaluation type	This thesis	Metrics	Study	Research question
Low level engagement					
Exposure: the number of times social media content is viewed	Process evaluation	✓	Number of Impressions	Study 1: Twitter Insights data	Q1
Reach: the number of people who have contact with the social media campaign and its content	Process evaluation	✓	Number of Twitter followers, growth of followers/friends, Number of page likes	Study 1: Twitter Insights data	Q1
Medium level engagement					
The number of people who - acknowledge agreement or preference for content - participate in creating, sharing and using campaign content and the degree to which they influence others	Impact evaluation	✓	Number of post likes, number of video views, number of retweets and @mentions, number of shares and tagging others, number of overall reactions [1], number of posts and comments by followers, tracking of keywords	Study 1: Twitter Insights data Study 1: Tweet counts by keyword Study1: Tweet content analysis	Q1, Q2
Engagement with content topics	Impact evaluation	✓	Comments/tweets on a particular topic	Study 1: Tweet content analysis Study 2: Facebook comments content analysis	Q2, Q3
Interaction between audience members through conversation	Impact evaluation	✓	Level of discussions and interaction	Study 2: Facebook comments content analysis	Q4
High level engagement					
Number of people who engage in offline events/ activities	Outcome evaluation		N/A	Beyond the scope of this thesis	N/A

Note: Table adapted from the hierarchy of engagement model presented in Neiger et al 2013.
[1] Reactions: aggregate over engagement measures (retweets, shares, replies, likes, views)

Low and medium level engagement were measured by using a number of measures available through Twitter Insights data along with keyword based tweets and Facebook comments downloaded from the *manuptvseries*

Facebook page. The former data were analyzed quantitatively and the latter qualitatively. Keyword based hashtag data were analyzed both quantitatively and qualitatively.

The integration of two social media platforms and different types of data for the measurement of engagement across low and medium levels allowed for a comprehensive understanding of campaign impact. By combining the analysis of standardized measures with analyzing original comments and tweets, this thesis extends beyond the standard social media evaluation approach. It was beyond the scope of the thesis to consider high level engagement, since that would have required outcome data to be collected. Although these data were part of the larger Man Up evaluation, they were not collected systematically through the avenues of social media. For example, the online survey mentioned above collected data on attitudes and behavior intentions in relation to the messages of the documentary and campaign in general and the survey was advertised not only through social media platforms but also through the Man Up website. Although not explicitly part of this thesis, the findings from these additional studies and the relevant parts of the larger Man Up evaluation are referred to in the Discussion of this thesis (Chapter 7).

4.2.3 The empirical studies

Chapters 5 and 6 present the findings of the two studies that were crucial in determining the success of the Man Up social media campaign in creating engagement. Findings from these studies informed a broader discussion on the potential to use social media campaigns to influence social and behavioral change. As noted above, each of the studies was published as a peer-reviewed journal article.

Study 1 focused on data from the Man Up Twitter campaign to examine whether the campaign was successful in creating engagement on social media and which campaign topics were most engaging to the audience. This was done in four sub-analysis using different data sources. Standardized measures downloaded from Twitter Insights were used to evaluate the campaign's reach and exposure providing information on the first level of engagement as per the measurement framework. Selected measures were also analyzed over time following the three campaign phases (growing an audience, talk and share and

taking action) in order to gauge campaign growth by means of reach and exposure over the three campaign phases. This was considered to be important for monitoring the campaign implementation process.

An aggregated engagement measure was computed called "reactions": the sum over relevant medium engagement measures such as retweets, shares, replies, likes and views. This was deemed a more democratic approach to identify engagement with specific campaign content, as opposed to choosing one measure over another. Reactions were then used to identify campaign content that was most engaging to the audience.

A keyword search of the main campaign hashtags MANUP, ABCMANUP, SPEAKUP and LISTENUP provided a real-world dataset of tweets that contained these keywords. These data were captured on a weekly basis for three distinct periods: a 14 week period before the campaign launched in August 15 2016, the 14 week long campaign and 14 weeks following the official end of the campaign from 21 November 2016. These data made it possible to gauge the volume of tweets related to these hashtag keywords and track their development over the three periods. This was used to gauge whether or not the Man Up campaign had an influence on the volume of conversations on Twitter.

Finally, a subset of tweets was identified that directly related to the Man Up campaign and sentiment and thematic analyses of these tweets were conducted. This provided information on the general level of endorsement and/or rejection of the Man Up campaign, as well as information on the common themes that were tweeted and retweeted by the audience.

These four sub-analyses provided evidence on the impact of the Man Up Twitter campaign, but were limited in furthering understanding of engagement through audience conversations and interactions. This was partially due to the fact that Twitter only allows messages of a limited character count (140 characters in 2016) and therefore encourages short and abbreviated messages. It is not surprising, therefore, that previous studies have shown that Twitter may be limited as a tool for creating conversations (217, 218).

For this reason, the evaluation of the Man Up social media campaign was extended by Study 2 which concerns the analysis of conversations that

occurred on the *manuptvseries* Facebook page. Facebook comments are generally longer and users tend to write complete texts directed at exchanging opinions, asking for advice and enabling discussion. For this study, posts and comments published on the *manuptvseries* Facebook page during the campaign from 15 August 2016 to 20 November 2016 were downloaded. Content analysis of these data provided information on how the Man Up campaign was perceived by the audience and how the themes of masculinity and suicide featured in public conversation. A deeper understanding about campaign engagement can be gained by unpacking the sentiment and meaning of interactions though qualitative analysis. As previously explained, the analysis of interpersonal communication can add crucial information to the evaluation of campaign engagement and has largely been overlooked by previous studies in the field.

Chapter 5   Study 1: Influencing the conversation about masculinity and suicide

This study used Twitter data to evaluate the Man Up multi-media campaign on its capacity to engage and influence conversation on social media. Quantitative and qualitative methods were used to examine whether the campaign was successful in creating engagement on social media and which campaign topics were most engaging. The findings from this study were presented internationally and were published in the JMIR Mental Health.

5.1 Abstract

Background

It has been suggested that some dominant aspect of traditional masculinity are contributing to the high suicide rates among Australian men. We developed a three-episode documentary called Man Up which explores the complex relationship between masculinity and suicide and encourages men to question socially imposed rules about what it means to be a man and asks them to open up, express difficult emotions and seek help if and when needed. We ran a three-phase social media campaign alongside the documentary using five channels (Twitter, Facebook, Instagram, YouTube and tumblr).

Objective

This paper examines the extent to which the Man Up Twitter campaign influenced the social media conversation on masculinity and suicide.

Methods

We used Twitter Insights data to assess the reach of and engagement with the campaign (using metrics on followers, likes, retweets and impressions) and to determine the highest and lowest performing tweets in the campaign (using an aggregated performance measure of 'reactions'). Original content tweets were used to determine whether the campaign increased the volume of relevant Twitter conversations (aggregating the number of tweets for selected campaign hashtags over time) and we used a subset of these data to gain insight into the main content themes with respect to audience engagement.

Results

The campaign was successful in generating a following that was engaged with the content of the campaign; over its whole duration the campaign earned nearly 5,000 likes and 2,500 retweets and gained around 1,022,000 impressions. The highest performing tweets posted by the host included video footage and occurred during the most active time period of the campaign (around the screening of the documentary). The volume of conversations in relation to commonly used hashtags (MANUP, ABCMANUP, LISTENUP and

SPEAKUP) grew in direct relation to the campaign activities, achieving strongest growth during the three weeks when the documentary was aired. Strongest engagement was found with content related to help-seeking, masculinity and expressing emotions. A number of followers tweeted personal stories that revealed overwhelmingly positive perceptions of the content of the documentary and strongly endorsed its messages.

Conclusions

The Man Up Twitter campaign triggered conversations about masculinity and suicide that might otherwise not have happened. For some, this may have been game-changing in terms of shifting attitudes towards expressing emotions and reaching out to others for help. The campaign was particularly effective in disseminating information and promoting conversations in real-time, an advantage that it had over more traditional health promotion campaigns. This sort of approach could well be adapted to other areas of mental (and physical) health promotion campaigns to increase their reach and effectiveness.

5.2 Introduction

In Australia, suicide is the leading cause of death in males aged 15-45 (1). Australian male suicide rates are three times higher than those of females (1) and this gender inequality is reflected internationally (2).

A number of factors have been found to contribute to higher suicide rates in males. Males are known to choose more lethal methods (3), show increased alcohol and substance use,(4) and have less well established coping strategies and social support networks (5-7). Men also tend to avoid or delay help-seeking, especially for emotional issues (8-10), have greater difficulties in recognizing negative emotions or distress (11) and are less aware of help services available to them (12,13). Mostly these factors are considered in isolation, with little regard to the mechanisms or driving forces that may underpin them (14).

It has been suggested that masculinity – or the rules prescribed by society about how men should live their lives (15) – may help to explain gender

disparities in suicide. While gender roles arguably have changed and continue to vary by time and place, dominant masculine norms still exist in many western societies and influence how men navigate life. Independence, self-reliance, invulnerability and the avoidance of negative emotions are some commonly expected behaviors (16) and these have been linked to men's lower likelihood of seeking help or dealing with emotional problems (8,17,18). Men often see help-seeking as a measure of weakness or failure and prefer solving problems on their own (10). This stoic behavior can be lethal; self-reliance has been found to reduce and delay help-seeking as well as increase the likelihood of suicidal thoughts (14,19-22).

Seeking to change the picture on male suicide might benefit from challenges to some of these widely accepted male stereotypes. Discussing dominant masculinity and creating opportunities for re-defining help-seeking strategies for men and opening up options for negotiating difficult life events could potentially have significant impacts. However, changing social norms is no easy feat and requires holistic population based interventions that are able to reach and engage with the wider community of men from all walks of life, backgrounds and geographic locations. Developing and testing such interventions has the potential to take the field of suicide prevention forward; at present, only a relatively small number of population-based interventions have been shown to be effective (e.g., restricting access to means, school-based awareness campaigns) (8).

We developed one such intervention, with funding from the Movember Foundation. We collaborated with Heiress Films to create a three-episode television documentary called Man Up, seeking guidance from an advisory committee comprising representatives from various community organizations and other academic experts in men's health. Man Up follows Sydney Triple M Radio personality Gus Worland across Australia as he explores the complex relationship between masculinity and male suicide. Gus meets a multitude of men who struggled with suicidal thoughts and/or attempted suicide, as well as many individuals and organizations that are addressing the problem of male suicide by encouraging men to reach out to others. Gus is so affected by this that he creates a campaign ad video with the tagline "Man Up. Speak Up" which serves as a call to action.

From the beginning, Man Up was conceived as something far greater than a television show. It was viewed as part of a multi-media intervention that also included components that took full advantage of the online environment to kick-start a national conversation. Our collaborator, Heiress Films, created a website that acted as a hub for content and resources, housed the show's trailer and ran a 14-week social media campaign around the show. The campaign and related assets were released via five online platforms (Twitter, Facebook, Instagram, YouTube and tumblr) over three phases. Phase 1 ran from 15 August until 10 October 2016, stopping just before the documentary was screened by the Australian Broadcasting Corporation (ABC). This phase encouraged men (and women) to watch the show. Phase 2 ran from 11 October to 30 October 2016, coinciding with the three weeks over which the show was aired. This phase encouraged viewers to talk and share. Phase 3 ran from 31 October 2016 (the end of the screening period) to 20 November 2016 and prompted the community to take action. These phases corresponded to the campaign goals of creating a social media audience, promoting a conversation about masculinity and male suicide and generating and maintaining engagement with the documentary and its content throughout the campaign and beyond. The campaign capitalized on our relationships with partner organizations, including Movember, beyondblue, Lifeline, Mindframe, Triple M Radio and the ABC network. It also linked to events and trending topics (e.g., the month of Movember, Mental Health Week, Father's Day, World Kindness Day).

The social media campaign was a crucial component of the overall intervention. There is increasing recognition that social media may have potential in suicide prevention and may be particularly useful for otherwise hard-to-reach groups like men (23,24). Other social media interventions have been deployed in suicide prevention (e.g., apps designed to support individuals at imminent risk, machine learning algorithms that aim to detect suicidal content or sentiment in online conversations) (25,26). To our knowledge, however, there are no precedents for the way in which we used the social media campaign in our intervention.

This paper focuses on the Twitter activity that was generated by the Man Up Twitter account (*manuptvseries*), evaluating the extent to which the campaign influenced the social media conversation on masculinity and suicide.

The paper addresses the following evaluation questions:

1. What was the overall reach of the campaign and how did the audience engage with it?

2. What were the highest and lowest performing tweets and what assets were associated with them?

3. Did the Man Up campaign increase the volume of relevant Twitter conversations and, if so, was the increase sustained after the show?

4. What were the main content themes in regards to audience engagement?

5.3 Methods

Overarching approach

Twitter data was used to answer our evaluation questions. These data are easy to access and represent a real-time response, making them ideal for monitoring responses to events, patterns of communication and general attitudes (28). Twitter data have been used in studies in the mental health and suicide prevention field to understand how users discuss mental health issues and why they use social media to do so, to monitor attitudes towards depression and schizophrenia, to gauge how Twitter is used in the provision of feedback and support by mental health services and to track suicide risk factors (29-33). In the general health arena, Twitter data have also been used to monitor the impact of campaigns and related interventions (e.g., in cervical cancer screening and smoking cessation) (34-36).

Data collection

Twitter data was collected from two sources, one via the social media tool Twitter Insights and the other through harvesting original content tweets. In combination, these different sources provided us with the information we needed to address our four evaluation questions.

Twitter Insights data: During the campaign, weekly data reports were downloaded from Twitter Insights into an Excel file to monitor the growth and

reach of the campaign, audience engagement with its content and selected demographic variables such as age. These reports covered the full period of the campaign (15 August to 20 November 2016) and enabled us to look at the campaign's performance across its three phases. Specifically, I looked at "reactions" (retweets, replies, likes, profile clicks, URL clicks, hashtag clicks, expanded click, follows, views) to tweets posted by *manuptvseries* between 15 August and 20 November 2016.

Original content tweets: Original content tweets were harvested from a broader period to capture activity in the 14 weeks before the campaign (9 May to 14 August 2016), the 14 weeks during the campaign (15 August to 20 November 2016) and the 14 weeks after the campaign (21 November 2016 to 26 February 2017). Tweets were harvested using the free-of-charge Twitter Application Programming Interface (API) and were included in the dataset if they used the hashtag MANUP which was the main hashtag used in promoting the campaign. These data included the full text of each tweet and additional information on when (e.g., time and date) and by whom (e.g., host, organization, private person and public person/forum) it was tweeted. Data were stored in an external holding database by a US company called Rackspace. We had access to the data and could download customized datasets throughout the entire observation period (pre, during and post campaign). A final dataset was imported into Excel and a sub-set of that dataset was then imported into NVIVO Pro V11. Figure 5.1 summarizes the time periods covered by the two data sources and the evaluation questions they each addressed.

Figure 5.1: Evaluation questions linked to time periods and two data sources

Pre campaign 9 May 16 – 14 Aug 16	During campaign 15 Aug – 20 Nov 16			Post campaign 21 Nov 16 – 26 Feb 17
	Phase 1: Pre screening of documentary 15 Aug 16 – 10 Oct 16	**Phase 2: During screening of docu-mentary** 11 Oct 16 – 30 Oct 16	**Phase 3: Post screening of docu-mentary** 31 Oct 16 – 20 Nov 16	

Twitter Insights data
- What was the overall reach of the campaign and how did the audience engage with it?
- What were the highest and lowest performing tweets and what assets were associated with them?

Original content tweets
- Did the Man Up campaign increase the volume of relevant Twitter conversations and, if so, was the increase sustained after the show?
- What were the main content themes in regards to audience engagement?

Data analysis

All quantitative analyses were undertaken in Excel and all qualitative analyses were conducted in NVIVO Pro V11.

Evaluation question 1: The reach of and engagement with the campaign was assessed by using metrics from the Twitter Insights data on followers, new followers, likes, retweets and impressions (the number of people who saw campaign tweets on their timeline). Frequencies, averages and percentages for each were calculated for each of the three phases of the campaign.

Evaluation question 2: The highest and lowest performing tweets in the campaign were determined by ordering all tweets posted by *manuptvseries* based on an overall performance measure calculated as the number of reactions to these tweets, using Twitter Insights data to do so. Since each standard engagement measure assesses a different objective, it was decided that an aggregate measure was a more democratic approach to comparing performance of tweets than using any single measure on its own. The top 20 and bottom 20 tweets were analyzed by their content and compared in terms of their use of different assets.

Evaluation question 3: The original content tweets were used to determine whether the campaign increased the volume of relevant Twitter conversations, aggregating the number of tweets for selected campaign hashtags (MANUP, ABCMANUP, LISTENUP and SPEAKUP) by week and plotting these for the pre campaign period, the period of the campaign and the post campaign period. Specifically, the performance of MANUP (occurring with or without other hashtags) and ABCMANUP, LISTENUP and SPEAKUP (occurring in combination with MANUP) was assessed. The average number of tweets per period were calculated as well as t-tests to test for significant differences in tweet volumes between the campaign period and the pre and post campaign periods.

Evaluation question 4: A subset of data from the original content tweets was created to gain insight into the main content themes with respect to audience engagement with the campaign. Aall tweets that included the hashtag MANUP and at least one other hashtag that had been used at least ten times during the campaign by *manuptvseries* were selected. Then concentrated on those tweets in this group that were campaign-related (i.e., tweets by the host, retweets of tweets by the host, or tweets that featured Man Up campaign content) were analyzed. We performed a thematic analysis of these tweets, meaning the tweets were systematically coded and a list of common themes was constructed (226). Author MS read through 50% of the selected tweets and developed a preliminary coding framework with a list of themes. MS and co-author KK then tested this framework using 10% of the tweets, revised it and then re-tested it on another 10% of the tweets. MS and KK then finalized the framework by consensus (consulting with one another or another member of the team to resolve any disagreement) and each coded 50% of the total set of tweets.

5.4 Results

What was the overall reach of the campaign and how much did the audience engage with it?

Table 5.1 shows the reach of and engagement with the campaign. During the campaign the number of followers of *manuptvseries* rose from zero at 15 August 2016 to 1,453 by 20 November 2016. The strongest growth in followers occurred during the time the documentary was screened (11 October to 30 October 2016). During this time, the campaign was most active with an average of five tweets per day being posted from the Man Up account. The number of likes and retweets were highest during this period. Impressions were strong in the time before the show went to air as well as during the screening period. Over its whole duration, the campaign earned nearly 5,000 likes and 2,500 retweets and gained around 1,022,000 impressions. The beginning of the campaign saw more males being attracted to the campaign, but as time went by there was a shift towards a more even distribution of genders among followers.

Table 5.1: Reach of and engagement with the Man Up campaign

	Pre-screening of documentary	During screening of documentary	Post screening of documentary
	15 Aug 16 – 10 Oct 16	11 Oct 16 – 30 Oct 16	31 Oct 16 – 20 Nov 16
Freq. followers	519	1,355	1,453
Freq. new followers	519	836	98
Freq. likes	1,500	2,500	851
Av. likes	26	118	41
Freq. retweets	656	1.3k	417
Av. retweets	12	64	20
Freq. impressions	423,000	436,000	163,000
Gender			
	Male: 73%	Male: 60%	Male: 59%
	Female: 36%	Female: 40%	Female: 41%

[a] *Data source: Twitter Insights*

What were the highest and lowest performing tweets and what assets were associated with them?

Table 5.2 shows the type of assets associated with the highest and lowest performing tweets, as measured by reactions. Twelve (60%) of the highest performing tweets included a video, whereas only a single tweet (5%) among the lowest performing tweets did so. Eighteen (90%) of the lowest performing tweets included a link to an external source. Overall, the most successful tweet based on reactions was one that heralded the final episode before it went to air and provided a preview of the campaign ad video that Gus created. The next most successful tweet promoted a re-launch of the trailer for the complete series. These videos were some of the main promotional assets for the show and were not only released via tweets, but also across other online platforms. The 20 highest performing tweets were all posted between 11 October and 17 November 2016, while the majority of the 20 lowest performing tweets (60%) were tweeted in August and September 2016, the first phase of the campaign.

Table 5.2: Engagement with tweets by asset type for the 20 highest and lowest performing tweets

Asset type	Frequency (%)	Sum of reactions*	Sum of retweets	Sum of replies	Sum of likes	Sum of media views
Top 20 Tweets						
Video	12 (60%)	14,069	240	28	395	12,856
Graphic	5 (25%)	1,599	148	26	293	542
Link	2 (10%)	2,205	43	3	62	2,014
GIF	1 (5%)	897	2	0	6	872
Total	20 (100%)	18,770	433	57	756	1,6284
Bottom 20 tweets						
Link	18 (90%)	62	2	0	42	0
Graphic	1 (5%)	3	0	0	2	1
Video	1 (5%)	3	0	0	1	0
Total	20 (100%)	68	2	0	45	1

[a] *Data source: Twitter Insights*
[b] *Aggregate of all engagement including video views*

Did the Man Up campaign increase the volume of relevant Twitter conversations and, if so, was the increase sustained after the show?

The original content tweets included 46,130 tweets that used the hashtag MANUP (13,804 posted between 9 May and 14 August 2016, pre campaign; 19,845 posted between 15 August and 20 November 2016, during the campaign; and 12,481 posted between 21 November 2016 and 26 February 2017, post campaign).

Figure 5.2 shows the aggregated number of times MANUP was tweeted (with or without other hashtags) in the three periods pre, during and post campaign. MANUP was used an average of 979 times per week pre campaign. This rose to 1,338 times per week during the campaign and then dropped to 844 times per week post campaign. There was no significant difference in the use of MANUP between pre and post campaign (t=1.683, p=.052), but its use was significantly higher during the campaign period than either the pre (t=2.68, p=.004) or post (t=4.13, p<.001) campaign periods. Most of the increase was observed from week 22 (which corresponded with the airing of the documentary) and the use of MANUP stayed at higher than average levels until week 27 (the end of the campaign).

Because hashtag MANUP was commonly used in contexts that were unrelated to the campaign, we thought it would be useful to consider the performance of three other hashtags that were newly introduced by *manuptvseries* (ABCMANUP, LISTENUP and SPEAKUP), looking at them when they were used in combination with MANUP. Figure 5.2 also shows these results. Hashtag ABCMANUP was used to promote the documentary on the ABC. This hashtag was introduced during the campaign and intensely used and shared in the period in which the documentary was aired (from week 22 to week 26) and then its use was largely discontinued. LISTENUP and SPEAKUP were introduced by *manuptvseries* in the lead-up to the final episode and in the context of the campaign ad video. Again, their use peaked at this time but dropped as the campaign faded out.

Figure 5.2: Hashtag frequencies on Twitter pre, during and post campaign
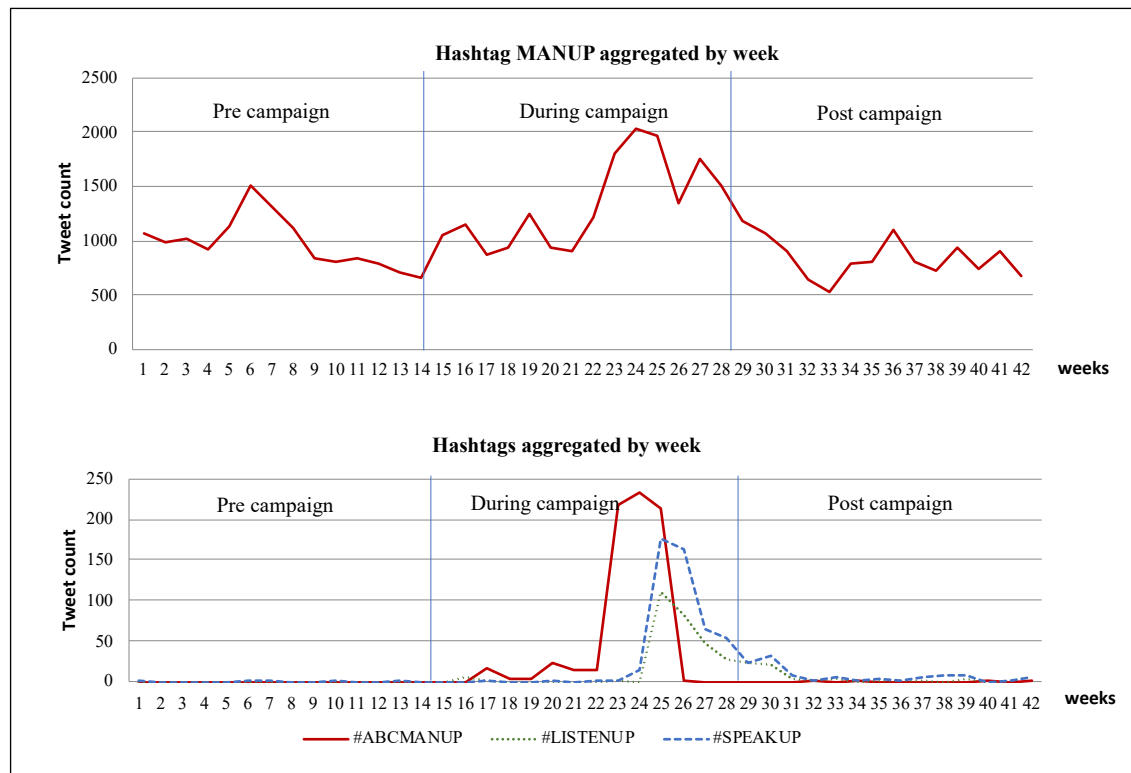
Data source: Original content tweets

What were the main content themes in regards to audience engagement?

We identified a subset of 2,093 tweets that included the hashtag MANU*P* and at least one other hashtag that had been used at least ten times during the campaign by *manuptvseries*. Of these, 1,876 were campaign-related tweets and we focused on these here. Of the campaign-related tweet 229 were from *manuptvseries*. In total, 417 (22%) of the campaign-related tweets were original tweets and 1,459 (78%) were retweets. The majority (1,328 or 71%) were neutral in tone and did not show any specific expression of sentiment. Five hundred and forty-four (29%) provided positive feedback about the campaign or endorsed it and four (<1%) took a negative stance or criticized the content of the campaign. The three tweets listed below provide examples of positive, neutral and negative sentiment, respectively:

> RT @ManUpTVSeries: Great to see the conversation getting started.
> #ManUp #SmashTheStigma #itsokaytotalk

@newlz in @HuffPostAU "Talking. Listening. Sharing. These are the tenets that now drive me." #ManUp #weneedtotalk

@username Except if you're a male victim of #domesticviolence - then you get told to #ManUp and discriminated against #Reality #ABCManUp

Several content themes were identified in the tweets: expressing emotions; mental health issues with the sub-themes of mental health and suicide; men's issues with the sub-themes of being a man and fathering/raising boys; help-seeking with the sub-themes of providing options for help and other help-seeking; personal stories; and supporting others. Table 5.3 summarizes these content themes for the 1,876 campaign-related tweets and indicates whether they were original tweets or retweets.

Table 5.3: Content themes of the 1,876 campaign-related tweets

Theme	Description	Tweet Count	Retweet	Original tweet
Expressing emotions	Tweets that include topics like speaking up, opening up, talking about uncomfortable issues, breaking down stigma and crying	710	550 (77%)	160 (23%)
Mental health issues		484		
Mental health	Tweets that references mental health, depression or PTSD or include materials and links that discuss these topics, or use the hashtag MENTALHEALTH	410	300 (73%)	110 (27%)
Suicide	Tweets that references suicide or suicide prevention, or include materials and links to sites that discuss these topics, or use the hashtag suicide	182	140 (77%)	42 (23%)
Men's issues		211		
Being a man	Tweets that discuss the concept of masculinity and/or challenge the concept of masculinity	165	125 (76%)	40 (24%)
Fathering/raising boys	Tweets that encourage discussion about what it means to be a father and raising boys/children	82	63 (77%)	19 (23%)
Help-seeking		202		
Providing options for help	Tweets that provide information on help services and encourage their use	165	147 (90%)	18 (10%)
Help-seeking other	Tweets mentioning other content on help-seeking (i.e., not about providing options for help)	96	79 (82%)	17 (18%)
Personal stories	Tweets relating personal stories, written in the individual's own voice and/or revealing detail about the person (not commentaries or statements)	101	61 (60%)	40 (40%)
Supporting others	Tweets about providing support to others, support options and/or general advice	78	63 (81%)	15 (19%)

[a] *Data source: Original content tweets*

Expressing emotions was the theme identified most commonly, occurring in 710 tweets (38% of all campaign-related tweets). The strength of this theme is not surprising as the campaign ad video was produced and released in the final episode of the show encouraged men to open up and express difficult emotions. The tweet that promoted the campaign ad video achieved 125 retweets on its

own and was the highest performing tweet of the entire campaign measured by the number of reactions. A number of the tweets related to expressing emotions highlighted the difficulties men experience in opening up and asking for help in difficult times and the stigma around mental health. Some tweeters acknowledged that Man Up made them cry, or that they had opened up to someone after watching the show. Examples are provided here:

> RT @ManUpTVSeries: "The need for men to be emotionally honest is greater than ever." Interesting #blog post from @3DMathW. #ManUp

> RT @username: Not ashamed to admit a few tears have been shed watching #ManUp over the last few weeks #ABCManUp

> RT @ManUpTVSeries: The strong silent type might be sexy in films, but it's unhealthy in real life. #ManUp #itsokaytotalk

The theme of *mental health issues and suicide* occurred in 484 tweets (26% of all campaign-related tweets). Four hundred and ten of these featured references to *mental health issues* and 182 made mention of *suicide* (with 108 covering both). Tweets that exemplified this theme provided information on mental health issues and/or suicide, aimed to raise awareness about them and encouraged people to speak up about them. There was some overlap in the two sub-themes as some tweets referred to mental health more broadly and suicide more specifically within the one tweet. Examples of tweets involving the theme of *mental health issues and suicide* are provided below:

> Massive shout out to @GusWorland . As sufferer of PTSD for 8 years as Ex-Cop #ManUp really hit home hard. Congrats mate. #ManUp #SpeakUp

> RT @username: "Depression is an illness people can help you recover from" #ManUp on ABC at the moment is great. #mentalhealthweek

> Suicide has touched so many lives, I'm tearing up already #ABCManUp #manup #blackdoginstitute #lifeline #beyondblue

RT @ManUpTVSeries: "How suicide can become "contagious" to other at-risk young men." Important piece in @DailyMailAU. #ManUp #SpeakUp

Men's issues was also a relatively common theme, accounting for 211 tweets (11% of all campaign-related tweets). One hundred and sixty five of these tweets related to *being a man* and 82 contained content about *fathering/raising boys* (with 36 making reference to both). Tweets that related to *being a man* encouraged discussions about the concept of masculinity, provoking and challenging stereotypical masculinity and encouraging others to engage in a conversation on masculinity and what it means to be a man. Examples included:

Inspired by the #ManUp TV series, we have a chat about what it means to be a MAN https://t.co/0a6wqtimAP #Movember #mentalhealth #goodcause

RT @ManUpTVSeries: "Our ideals of #masculinity have shifted." @MichaelGLFlood is one of our #RealAussieblokes. #ManUpâ€¦

RT @OliShawyer: This ad made me cry. I'm covered in Tatts. I ride a Harley. And I'm crying. Try tell me that's weak. #manup #speakup thank you @gusworland

Tweets on *fathering/raising boys* provided information on these topics. These were often linked to notions of being a man and raised issues around the expectations placed on boys as they grow up. Some prompted consideration of what could be done differently in raising boys today in order to avoid reinforcing traditional stereotypes. Examples included:

RT @ManUpTVSeries: We need to have a hard look at how we raise our boys. #ManUp #raisingboys #ChildHealthDay @harkin_tom

RT @username: #ABCManUp #ManUp Let's start helping boys from a young age. Dads need to give them cuddles, talk about feelings. #natural

RT @Top_Blokes: Providing boys with positive older male mentors is important to keep them safe and alive #ABCManUp #ManUp

The theme of *help-seeking* was evident in 202 tweets (11% of all campaign-related tweets). One hundred and sixty five of these tweets embodied the sub-theme of *providing options for help* and 96 were classified as falling under the sub-theme of *other help-seeking* (with 59 exemplifying both sub-themes). Tweets that exemplified *providing options for help* promoted help-seeking in general and pointed to particular services more specifically (e.g., Mindframe, Lifeline, headspace, SANE Australia, Kids Helpline and MensLine). A tweet that typified this theme was:

> RT @ManUpTVSeries: #RealTalk for a sec: if you or a mate are doing it tough please call @LifelineAust on 13 11 14 #ItsOkayToTalk #ManUp

The tweets in the theme *other help-seeking* mentioned two different aspects of help-seeking. They provided information on male help-seeking behavior and the issues that arise from it, thereby providing opportunity to create awareness and reflection on the issue. They also gave advice on taking action in help-seeking and motivating behavior change. Examples included:

> RT @ManUpTVSeries: #ManUp survey: over 56% of men would rather manage themselves than seek professional help. #weneedtotalk #questmh

> RT @ManUpTVSeries: "Shame could be a big reason why...some men [don't] ask for help." Beautiful #blog from @drmwroberts #ManUp #NoShame

Another key theme – *personal stories* – was embodied in 101 tweets (5% of all campaign-related tweets) where people opened up to tell their story in their own voices. The stories included reflections on the experience these people had watching the documentary and things that may have happened to them or someone they knew. They also included responses to a collection of self-reflective portraits revealing personal struggles and hope that were released on the Man Up website in a segment called "Aussie Blokes". Examples included:

> Absolutely opened my eyes to the daily struggles of both genders #ManUp I gave my fiancé a big hug after watching that tonight #ABCManUp

I've lost 3 mates to suicide. Wish I noticed what they were going through. Don't #Manup, seek help cuz there're many out there #ABCManUp

When I was younger everything I did was bulletproof #RealAussieBlokes #ManUp #exercise

The final theme was *supporting others.* This was apparent in 78 tweets (4% of all campaign-related tweets). These tweets discussed the importance of supporting others and reaching out to those in need and the skill of listening. Examples included:

Powerful stuff @ManUpTVSeries #ManUp #ABCManUp We have a way to go to support our young men on their journeys. It's a tough world we live in

Sometimes the most important thing is just to listen. @BeardedGenius in @JOE_co_uk. #ManUp #SpeakUp #ListenUp

Across all themes and sub-themes, the majority of tweets were retweets rather than original tweets indicating high levels of engagement. Proportionally, the highest percentage of retweets was for *providing options for help* (90% retweets; 10% original tweets) and the lowest percentage was for *personal stories* (60% retweets; 40% original tweets).

5.5 Discussion

The success of the Man Up Twitter campaign

We evaluated the extent to which the Man Up Twitter campaign influenced the conversation on masculinity and suicide among Australian males. The campaign was very successful in reaching an audience that was engaged with its content, as evidenced by the number of reactions. Not surprisingly, campaign performance was highest during the period in which the show was aired, but social media conversations continued and followers stayed engaged beyond this. In fact, social media channels are still active today.

Certain elements of the campaign were particularly successful. These included tweets relating to the campaign ad video Gus created on-screen that encouraged men and boys to reject the constraints of traditional masculinity and speak up if they were facing tough times as well as tweets featuring the trailer and episode teaser videos. The conversations generated by the campaign aligned with its major themes of expressing emotions, mental health issues and suicide, being a man and fathering/raising boys, help-seeking, personal stories and supporting others. Again, related to the campaign ad video release, the most discussed theme was expressing emotions.

The large number of positive comments indicated great acceptance and endorsement of the documentary. Many tweets welcomed open discussion of masculinity and male suicide and embraced the call for men to open up and express their emotions. There was a sense that for some, questions on male identity and masculine norms had been bubbling beneath the surface and the campaign gave men permission to articulate these thoughts and emotions. For others, ideas around changing the way we look at masculinity and its link to suicide appeared to be new, thought-provoking and even challenging. These differing perspectives added to the richness of the discussion.

The Man Up Twitter campaign as part of a strategic multi-media intervention

The Twitter campaign occurred as part of a strategic multi-media campaign. It was rolled out around the documentary via three phases, each of which aligned with a specific goal and it was one component of the broader campaign. A significant proportion of the content released by *manuptvseries* was directly related to the documentary, as were many of the comments tweeted by the general public. We are confident that the Twitter campaign had an independent effect in terms of influencing the social media conversation on masculinity and suicide, but it is difficult to tease out its independent contribution to the overall success of the Man Up enterprise.

Contributing to the broader field of suicide prevention

As noted earlier, there is still much that is unknown about what works and what doesn't work in suicide prevention. There are relatively few interventions for

which there is indisputable evidence of effectiveness (37), although improvements are being made. The jury is still out on suicide prevention media campaigns (38), although there is emerging evidence that they may work for some audiences. Most of the media campaigns that have been evaluated have tended to be fairly traditional, typically involving brief community service announcements that may be delivered through different channels. Few have targeted men specifically, although some have targeted groups (e.g., police) in which men may be well represented. Our intervention had the luxury of being more extensive, partly because it was underpinned by a three-episode documentary and partly because it capitalized on the digital environment to get its message out. Harnessing the media in suicide prevention in a non-traditional manner certainly seems to show promise.

Limitations

Both datasets we used had certain limitations and these should be considered in interpreting our findings. In the case of the Twitter Insights data, the key limitation relates to our measurement of success. We used the standard metrics of numbers of followers, likes and retweets and we created an aggregate measure which we termed 'reactions' (retweets, replies, likes, profile clicks, URL clicks, hashtag clicks, expanded click, follows, views) to rank tweets in terms of their performance over the duration of the campaign. The way we aggregated reactions is open to challenge, although, as noted above, we felt that it was a democratic approach. In addition, the fact that we monitored tweets' performance over the duration of the campaign disadvantaged tweets from earlier in the promotion cycle as these had less exposure due to lower numbers of followers and generally lower engagement with the campaign. This comparison could be improved by monitoring the performance of each tweet over the same duration (e.g., for the first two weeks after it was posted) and creating some sort of performance per follower weighting, but 'leveling the playing field' in this way was beyond the scope of our current endeavors.

In the case of the original content tweets, the main limitation relates to the way in which we were able to capture tweets relating to the campaign. We monitored use of the hashtag MANUP, assuming that this would provide a window into the effectiveness of the social media campaign. The difficulty with this approach

was that MANUP was already commonly used worldwide in different contexts (e.g., politics, sports and entertainment), often with negative connotations (i.e., promoting messages like "harden up" and "tough it out"). The volume of tweets that were unrelated to our campaign created a challenge for identifying the relevant content that would tell the story of our campaign. For this reason, we also looked at a subset of MANUP paired with other campaign related hashtags for more in depth qualitative analysis.

There are also limitations associated with using Twitter data in general. These data present something of a skewed picture because they can only represent those who are active on Twitter. In Australia, only about 19% of Internet users use Twitter and a majority of these are relatively young (39). This means that our Twitter evaluation data will be likely to have some inherent biases.

5.6 Conclusions

The Man Up Twitter campaign triggered conversations about masculinity and suicide that might otherwise not have happened. For some this may have been game-changing in terms of shifting attitudes towards expressing emotions and reaching out to others for help. The campaign was particularly effective in disseminating information and promoting conversations in real-time, an advantage that it had over more traditional health promotion campaigns. This sort of approach could well be adapted to other areas of mental (and physical) health promotion campaigns to increase their reach and effectiveness.

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Chapter 6   Study 2: Using social media networks to engage men in conversations on masculinity and suicide

This study investigates the level and content of interpersonal communication on the Man Up Facebook page and is therefore focused on impact evaluation. By analyzing comments and interactions this paper is able to provide information on how the Man Up campaign was perceived by the audience and how masculinity and suicide featured in public conversation. A deeper understanding about campaign engagement can be gained by unpacking the meaning of interactions though qualitative analysis.

Overall, the Facebook campaign was successful in creating a following that was engaged with the campaign content and influenced others. Table 6.1 summarizes selected measures of engagement across the phases of the Facebook campaign. This data were downloaded from Facebook Insights.

Table 6.1: Facebook Insights engagement statistics

	Phase 1	Phase 2	Phase 3	Total
Followers	6,083	18,932	21,878	21,878
Total reach	2.94m	6.28m	1.41m	10.63m
User engagements	109k	408k	92k	609k
Video views	999k	1.55m	58k	2.61m

While the Facebook following can be considered relatively small with just under 22,000 followers by the end of the campaign, 10.63 million people were reached by the campaign and therefore have been exposed to the content of the campaign. This reach is significant and enables opportunity for user engagement in form of reactions to the content which is reflected in user engagements in Table 6.1. Overall user engagements (counts over likes, comments and shares) were high at a total of 609,000 engagements and the highest engagement activity reached in Phase 2, during the screening of the campaign. The most engaging content was the campaign ad video released at the end of Episode 3 of the documentary and shared through the social media

channels. This video reached 1.55 million views in Stage 2 of the campaign. Across the duration of the campaign the campaign ad video had over 50million views, about 500,000 reactions, 771,000 reactions and 30,000 comments across social media channels.

Whilst these data are not part of the following study they are important for the understanding of the overall engagement with the campaign and help interpret its impact. These data have been presented at two conferences during the time of my candidature and this study are published in Social Media + Society.

6.1 Abstract

We analyzed comments published on the Man Up Facebook page (*manuptvseries*) during the roll-out of the Man Up digital campaign. The aim was to gain insight on how the public perceived the Man Up campaign and the conversation topics that the campaign instigated. Facebook threads (posts and comments) were downloaded from the *manuptvseries* page using NCapture and conventional content analysis was performed on a random set of comments (n=2,236) to identify how the campaign was perceived and what the popular conversations were. Overall the campaign was perceived extremely positively by the Facebook audience showing many comments endorsing the content of the campaign by sharing among their Facebook community. The strongest themes were expressing emotions, help and support and masculinity/gender roles which related to the higher level theme of expressions of masculinity. Another strong theme was suicide and topics related to suicide. Comments acknowledged the importance of discussing the issues of male suicide and masculinity publicly. However, men were less engaged with topics on masculinity and expressing emotions compared to women and recognized stigma around help-seeking for mental health issues. The Man Up Facebook campaign did foster a public discussion on masculinity and suicide. A gendered approach in mental health promotion is needed with stigma still present for men when seeking help for mental health problems. Social media holds considerable potential for the use of health promotion campaigns aiming to increase interpersonal communication on challenging health topics. Yet, these campaigns need to carefully manage the risk of reinforcing stereotypes.

6.2 Introduction

Every 40 seconds a person dies by suicide somewhere in the world and in almost every country around the world more men than women die from suicide (1). In Australia, three quarters of all suicides are by men (2). The higher rate of male suicide is often linked to men's reluctance to seek help for emotional problems which in turn has been shown to be influenced by certain dominant masculine norms like self-reliance, invulnerability and avoidance of expressing emotions (3-7). In fact, stoicism and a strong manifestation of self-reliance have

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been found to increase the risk for suicidal thinking (8, 9). In an attempt to affirm their masculinity men often downplay health problems, prefer to solve problems on their own and see asking for help as a sign of weakness (10, 11). Men also report higher levels of stigma towards mental health problems compared to women, (12, 13) lower levels of mental health literacy and have more difficulties in recognizing non-specific distress as emotional problems (14-17). It is often claimed that men's lower rates of help-seeking are due to a feminized mental health system which deters men from engaging with services and increases their risk to develop more severe mental health problems and potentially become suicidal (18, 19).

Challenging adherence to dominant masculine norms can help to increase men's help-seeking for emotional problems and ultimately reduce male suicide rates. Yet, engaging men in questioning traditional ways of thinking and behaving is a complex task and requires innovative interventions with a broad reach and a gendered approach (20). A population-based multi-level health promotion intervention that takes advantage of a variety of communication channels including mass, digital and social media platforms is expected to be most effective given the systemic and social nature of male suicide and masculinity (21).

The Man Up digital campaign and documentary
The an innovative mental health promotion campaign called Man Up involved a three-part television documentary and digital campaign that had a significant emphasis on sparking conversations via social media. Man Up explored Australian masculinity and encouraged men to be more emotionally expressive and seek help for emotional and personal problems if needed.

The documentary follows a presenter (radio personality Gus Worland) as he travels around Australia on a quest to find out what drives men's suicidal behavior and what can be done to address the problem. Gus visits various locations including his son's secondary school, a telephone helpline, a remote cattle station and a rural town. He watches his son participate in a workshop with his high school peers redefining what it means to be a man. He talks to suicide survivors, mental health experts, ex-servicemen, men and women on

the street, adolescent boys, families bereaved by suicide and many others. The men he talks to model positive behaviors such as talking about problems, expressing emotions and seeking help. The documentary finishes with Gus creating a 60 second campaign ad video with the tag line "Man Up, Speak Up" which promotes to stop telling boys and men not to cry and encourages expressing emotional struggle. It was released on social media and the web.

The digital campaign centered around a website which acted as a hub for additional information, resources and video content and five social media platforms (Facebook, Twitter, Instagram, YouTube and tumblr). The social media component was a crucial part of the overall campaign and aimed to kick-start, fuel and continue the conversation beyond the reach and lifespan of the documentary. The digital campaign included a mix of short videos, photo portraits and stories of men, links to articles and research and showcases of various organizations that help men. The content was curated in alignment with and in preparation for the launch of the Man Up documentary on television and ran from 15 August to 20 November 2016. The documentary was screened on free-to-air television on three consecutive weeks starting on 11 October 2016.

Research questions

The aim of this paper is to gain understanding on public perceptions of the Man Up campaign and the conversation topics that the campaign brought up. We developed three research questions:

1. How was the Man Up campaign perceived by the public audience?
2. What were its most talked about topics?
3. How did masculinity and suicide feature in public conversations?

To answer these questions, we use data from the Man Up Facebook campaign page. We further seek to add to the discussion on the potential to use social media networks for national health promotion campaigns and offer a new perspective on how to use qualitative campaign data to better understand the impact of social media campaigns on interpersonal communication. This paper forms part of a larger evaluation of Man Up.

6.3 Literature

Health behavior and adherence to masculine norms

Dominant male gender norms are still deeply manifested in Western societies and dictate what is perceived as acceptable male behavior (22). Deviating from these norms can result in negative consequences such as loss of status and power (23). Men who don't live up to the traditional masculine ideal can feel inadequate, worthless and engage in higher risk-taking in order to improve their masculine standing (24, 25). As such, adopting dominant masculine norms also influences the ways in which men choose to negotiate their health (26).

For this study, we adopt a constructionist perspective and define gender as a dynamic social construct that is shaped by social structures and norms (27). We recognize that masculinity is a fundamental determinant influencing men's health throughout their life course (26). Multiple masculinities can exist in parallel and can sometimes compete or even contradict each other (28). The performance of a particular type of masculinity is situation specific and varies by environment and culture and serves as a means to improve one's status and power within society (29). We therefore argue that challenging dominant masculine norms can mean an opportunity for improving men's help-seeking and therefore men's mental health and reduce suicide risk. A more open interpretation of masculinity could facilitate alternative pathways of help-seeking for men without the fear of losing male status and experience discrimination.

The potential of social media for health communication

As social media has seen continued growth over the last decade, concerns about accessibility of new technologies have rapidly decreased. In 2019 the number of social media users worldwide is nearing 3.5 billion, representing a 9% increase from the previous year (30). Facebook is the most popular and most actively used social media channel (31). Increasing user numbers, broadening user demographics, technological advancements in surveillance and tracking of online behavior hold the potential for tailored messaging and extended cost-effective reach of target groups (32). Social media channels may be particularly useful in reaching remote populations or those that do not interact with traditional health services, such as men (33). Beyond this, social

media offers alternative methods of communication that traditional mass communication channels (television and print media) cannot provide. People (users) can connect and interact on social media channels which allows for more effective two-way communication and can foster conversations among individuals (34). Health organizations today make use of this advantage by providing information and services to clients through internet media (35).

It has long been argued that interpersonal communication may be a crucial link between the campaign activities and its desired outcomes and can be defined as an outcome of health promotion campaigns (36). Yet the challenge of traditional mass campaigns was how to measure conversation in response to a campaign. With social media networks these conversations are visible and measurable (to some extent), especially on channels like Facebook and Twitter and provide valuable information on the uptake of the campaign messages. Conversation circles can spread beyond personal network boundaries as social media users exchange information and opinions free of time and location constraints and at their own will (37). Campaigns that aim to affect individuals' personal perception and introduce new ways of thinking about a topic are expected to enable higher levels of interpersonal communication and therefore more likely to benefit from using new media (38). Yet, these advantages introduce some risks especially in the context of (mental) health. Spreading of inaccurate or unhelpful information and discrimination, harassment and bullying of vulnerable users are among the risks most often mentioned (39). While autonomy of sharing information and discussing different viewpoints can lead to increased reach of campaign messages and support campaign goals campaign activities need to be carefully monitored to avoid undesirable outcomes for individuals (36).

Suicide and social media
There is increasing evidence that social media and the internet influence suicide-related behavior both positively and negatively (34, 40-42). Much of the early research has focused on the risks of the copy-cat or so-called Werther effect caused by reporting on suicide in the media and the internet (43, 44). The internet was predominantly seen as providing easy access to pro-suicide information and opportunities to connect with individuals and groups that may

encourage suicide acts and increase harm to suicidal individuals (45-49). In online media, participation in forums and chat groups can influence decision making, in particular when other users are encouraging of suicidal behavior, provide "how-to" information or enable users to form suicide pacts (34, 42, 50-53). With the rise of suicide awareness media campaigns the potential for the positive effects of media in suicide prevention have been explored (43). Studies found that interaction with other users resulted in reduced suicidality, reduced stigma and increased help-seeking (54-56). Online environments can be protective for people with suicidality by offering peer, social and emotional support (56-58) and they have the advantage to generate informal discussions, be less intimidating and accessible without waiting times (59). The potential of media campaigns to have both positive and harmful effects needs to be managed carefully in health promotion.

6.4 Method

Data collection

Data were downloaded from the *manuptvseries* Facebook page on 9 February 2017 using the NCapture plug-in for Windows Explorer and imported into Excel. We downloaded 271 threads (including posts and comments) published during the Man Up campaign (15 August 2016 to 20 November 2016). The data download also included the username and ID of the commenter which we used to identify and code the commenter's gender. Of the 271 threads, 150 were eligible for analysis. Only posts that published content related to the campaign (e.g. news, information, stories) were eligible. On comment level we excluded all comments made by *manuptvseries* in response to other people's comments. The final dataset with 150 posts (by the host *manuptvseries* and by mental or male health organizations) had 4,053 comments.

Data analysis

Conventional content analysis was performed on a random selection of comments to identify the themes that the audience engaged with (60, 61). The unit of sample selection was the thread, the unit of analysis were the comments in each thread. We selected 25% of the original 150 threads into the sample

which led to a sample size of 38 threads representing 990 comments. One more thread was manually added into the sample due to the large number of comments (1,246) it received and therefore potential impact on the overall discussion.

The aim was to qualitatively analyze the Facebook comments to identify common themes that the audience talked about in the context of the Man Up campaign. The researchers avoided using preconceived categories for coding and instead allowed categories and names for categories (codes) to flow from the data (77). Following an inductive category development approach, one researcher (MS) read through the data base of comments and took notes on the categories that were revealed from the data. This was based on the assumption that categories revealed from the comments would align with the content presented in the posts. Then, the list of categories was validated by reading though a sub-set of the sample. In this stage, two researchers (KK and MS) independently screened comments of a randomly selected sub-sample of 5% of the threads against the previously identified categories. After this round of preliminary analysis the researchers came together, discussed their findings and discussed additional categories that emerged in this stage and developed labels for the categories which to use in the coding the data. The list of codes was then validated by a second round of independent coding on a randomly selected sub-sample of 5% of threads. After discussing their coding from this second round the researchers concluded that saturation in categories was reached as no new categories had emerged. Through this process, the two independent researchers gained a good understanding of the data and also developed a good joined understanding of the coding of comments. This process achieved high alignment of coding in the last round of test-coding. Alignment in coding was determined in formal meetings where the two researchers came together and compared their coding. This process is common to ensure high compatibility for the coding of the remaining data. Intercoder reliability was not formally measured, yet comparing the outcomes of this second round of coding the researchers' codes deviated by less than 5% which was seen as a stable coding framework.

The full dataset was then split in half and analyzed by KK and MS on the basis of the complete list of themes. Comments were assigned a maximum of two themes to avoid over-coding. Once all comments were coded, data underneath each category was explored for patterns and hierarchies and common theses and sub-themes were identified. Considering all possible themes together, a final coding framework was collaboratively developed by the same two researchers. Framework analysis, a content analysis method that involves summarizing and classifying data within a thematic framework, was then conducted to order the themes into an overarching framework and to contextualize the constructed themes (62). The interpretation of content within categories was guided by the theory on masculinity and male help seeking. Table 6.2 presents the final thematic framework.

Three first level themes were constructed: general feedback on the campaign, expressions of masculinity and suicide and mental health. General feedback with its three sub level themes provides information on how the campaign was perceived. Expressions of masculinity and suicide and mental health categorize and describe the topics that people talked about.

Table 6.2: Final coding framework

Research question	1st Level themes	2nd Level themes	3rd Level themes
How was the campaign perceived by the public on Facebook?	General feedback	Positive feedback Negative feedback Constructive feedback	
What topics did people talk about on the *manuptvseries* Facebook page?	Expressions of masculinity	Expressing emotions Help & support Masculinity / gender roles	Supporting others Seeking help Fear of expressing oneself Raising boys Value of gender roles
	Suicide & mental health	Suicide statistics Personal stories Men's mental health	

6.5 Results

Description of comments

The dataset for analysis included 2,236 comments by 1,890 unique users. Of these comments 2,217 were published by private persons and 19 were from various organizations (including not-for-profit, mental and male health services). Three quarters of comments (1,545 or 69.1%) were made by women and 653 comments (29.2%) were made by men. For the remaining 38 comments (1.7%), gender could not be identified. Overall, 996 comments (44.5%) endorsed the documentary and content published on Facebook by tagging others in their comments. Thirty-nine comments (2%) shared an external resource by including names or links to a website, Facebook page or YouTube clip. Some of these mentioned not-for-profit organizations such as Movember Foundation, Lifeline (crisis helpline), Headspace (youth mental health support) and Men's Sheds (community organization), all of which promote positive male mental health. Others advertised men's self-help groups such as the Mankind Project or shared their own contact details to advertise their professional services or offer collaboration with Man Up. Twenty-two comments (1%) posed a general query related to the documentary or content published. Table 6.3 lists the theme counts for all comments and by gender.

Table 6.3: Theme counts for all comments and for sub-samples

	Total	Male	Female	Unspecified gender
General feedback				
Positive feedback	457	113	332	12
Negative feedback	50	35	15	0
Constructive/thought provoking	35	19	15	1
Content themes				
Expressions of masculinity				
Expressing emotions	207	70	133	4
Help and support	83	37	46	0
Masculinity / gender role	78	16	61	1
Suicide/Depression/Mental health	52	24	26	2

* Categories with less than 20 comments were not reported.
** Comments were coded to more than one theme if appropriate.

How the Man Up campaign was perceived by the Facebook community

Three sub-themes were identified within the general feedback category: positive feedback, negative feedback and constructive feedback. The majority of feedback (456 comment) was positive; 332 of these comments were from female Facebook users and 113 were from males. Many comments offered general endorsement for the documentary and mentioned plans to watch it or encouraged others to do so. Others showed appreciation after having watched it. Many comments specifically mentioned Gus and his team and offered congratulations on making a documentary on male mental health. There was a sense that a public discussion of male mental health was needed and long overdue. Comments also highlighted the importance of the workshop with high school boys, praised the workshop facilitator's way of interacting with the boys and suggested it should be available to all schools.

> Wonderful series, great people, great advice.

> This series has been very interesting and very emotional. I hope people are taking note and I would love to see more of these workshops at schools. I commend Gus on getting out there to try and make a difference. Great series.

On the contrary, 50 negative comments were identified. These were mainly by males (35). Some rejected the idea that traditional notions of masculinity were linked to high rates in male suicide. Others linked the high male suicide rate to unfair treatment of men in the Family Court and a few argued that feminism is to blame for male suicide and asserted that asking men to open up and share their feelings is to feminize men. These types of negative comments created many responses as they were perceived as provocative due to the harsh language used. Many commenters of both genders challenged the negative viewpoints. In some instances, the exchange of opposing viewpoints turned into heated discussions with at times disrespectful language and personal attacks. The comments by females in this theme were often in response to the strong language used in respect to the feminist movement and towards men who choose not to follow the protocol of the stoic man.

And yet tomorrow the two biggest entities responsible for men's suicides will be open and it will be business as usual. The broken Family Courts will be raking it in and the bullies at the soul and life destroying Child Support Agency will be laughing their heads off hiding behind closed doors. Nothing will change.

If you want to decrease the male suicide rate get feminist to stop demonizing us.

Thought-provoking viewpoints and constructive criticism were given by 35 comments; 15 were posted by females and 19 by males. Some comments mentioned the higher rate of female contributors and questioned whether this could be interpreted as males being less engaged with talking about suicide, expressing emotions and masculinity. Some comments indicated that the documentary missed the opportunity to touch on a couple of important issues. These were related to male mental health and suicide such as the high levels of alcohol consumption and general drinking culture in Australia as well as the pressure of perfectionism in society leading to the inability to cope with one's own mistakes. Further, it was noted that opening up depends on a person having strong social networks and that this may not always be the case for men. Finally, the point was made that while a three-hour documentary series was a good starting point it would not be enough to change deeply entrenched behavior.

I just checked, and the last 40 posts are almost all women commenting about this though - what does that indicate?

My only thought was the constant focus on "opening up to your friends", (Tom facilitated this brilliantly), but what about the many guys who don't have a social network? Finding friends is not easy, creating networks takes a long time. It's too easy to say open up to your mates if you are struggling to find and make mates (and it's not as easy as go to some clubs, go to the pub or get out more). Loneliness is a crippling epidemic for many men.

Looks to be a cool TV show, but it's going to take more than three episodes of a TV show to get to the bottom of the male suicide problem.

What campaign content was talked about most

Three second-level themes were identified under the higher-level theme expressions of masculinity: expressing emotions, help and support and masculinity/gender roles. The most dominant theme under expressions of masculinity was expressing emotions with 207 comments; of these, 133 were from females and 70 were from males and 4 were unidentified. For the most part, comments were made in response to two specific stories (featuring in various posts): the launch of the "Man up, Speak up" campaign ad and the masculinity workshop in the high school. Commenters (mostly women) encouraged men to open up and express their emotions. Women in particular responded to the issue of suppressing emotions in boys. Male commenters in this theme often presented with lived experience of mental health problems. A few commenters rejected the idea of teaching boys and men to cry and suggested that it was natural for men not to express emotions following traditional masculine norms. Others recognized that the usefulness of expressing emotions depends on the context and that sometimes "harden up" can be the right strategy, especially for boys.

> This is encouraging and inspiring...boys/men have received a raw deal from our somewhat harsh cultural conditioning. Emotions are an essential part of our human experience and yet men, and also women, are disapproved of when feeling and expressing what they feel. Our bodies and souls can only suppress it for so long, and as we know, it comes out in a myriad of unhealthy ways. No wonder we've largely disconnected from who we truly are, and that there's such a high degree of mental/emotional illness....and is continuing to rise. Bring on the tears and healthy expression of rage, fear etc.!

> Great now we are teaching boys to be soft men are the pillar of strength for their family and friends and crying gets you nowhere what utter bullshit.

I don't completely agree with this. I mean yes, if you feel down, do speak out. That much is right. Silence can kill. … I think when your son cries, understand WHY he cries. If it's a physical pain and it's not too bad of an injury, yeah say harden up and you'll be right. But if they've been hurt emotional, understand that, help them deal with it.

Help and support was present in 83 comments; 40 of which were from females and 37 from males. About half of these comments discussed help-seeking and men's reluctance to reach out when help is needed. They offered insights into the challenges men face when reaching out. Some commenters raised concerns about the risks that men may face when opening-up, including experiencing stigma, being rejected by other men and women, lacking social support and feeling isolated. Talking to someone outside the immediate social circle (a health professional) was seen as the better option by some.

Unfortunately, when they do talk, reach out for help or make themselves vulnerable, they are mocked for it, so it is often a no-win situation.

Hence the reason why men have higher suicide rates, because they "typically" find it hard to talk, reach out for help and or like to feel vulnerable or "weak".

When it comes to depression, it's often easier to talk to a stranger about it than to people who know us and are more likely to judge.

Sad thing is when people actually know you have a problem they also steer clear. Dealing with someone with these issues is never easy. It's easy to say RU ok but to actually help is another thing?

The other half of the comments touched on the theme of supporting others. These comments tended to occur when people shared their struggles with mental health issues. In these situations, the Facebook community offered advice based on their own experience or encouraged help-seeking which was accepted positively by those feeling in distress and helped to see life more positively in that very moment.

Hey NAME - hang in there mate. I got pretty close few years ago... So glad now I didn't go there. Love, support & medication got me through. And hope. Most of all hope. So, hang in."

Try counselling and anti-depressants, plus meditation to calm your thoughts. They all really help and allow you to see the world differently, brighter too. xxx

Hi NAME. Been there a couple of years ago. I think it could be well worth another try. I think that alcohol is probably playing a big part in my depression. Thank you for your support.

It's amazing how total strangers step up to support someone they don't know. Thanks for that. You made my day much brighter.

Seventy-eight comments related to masculinity and the social norms by which men are expected to live their lives. Sixteen of these were from males and sixty-one were from females. Some comments described and acknowledged the pressures that some men experience in today's society, including the pressure to behave like a "real man". Male identity problems and fear of expressing oneself were mentioned as consequences and linked to feelings of frustration, anger and isolation.

As a mother of two grown sons I feel that we need more of these campaigns to recognize the struggles men face in trying to fit the so-called mold society place on them.

Men need to learn to be more comfortable and able to sit with another man's distress. From what I see, their discomfort when a man shows distress causes them to pull back and shun that person, sometimes even cut the connection. This only adds to the distress and isolation. Society, the way men are socialized from birth and the blokey culture have messed with men's capacity for compassion for each other. It stinks.

The theme of raising boys was particularly strong with many noting the importance of a healthy father and son relationship and acknowledging the

need to allow boys to express emotions and refrain from telling them to "toughen up" when they are hurting.

> From where we sit at the fathering project, the role of a good father or father figure from an early age is profoundly important in this issue of suicide and mental health and an essential part in how we tackle this crisis.

> Finally!!!!! I'm sick to death of hearing parents make light of children's pain and suffering, when they get hurt on the sporting field or have a broken heart! How do we expect to raise empathetic, caring children when we show none ourselves!! Finally, boys have been given permission to feel!

A few commenters voiced their preference for traditional gender roles and rejected the idea of men to change.

> Great now we are teaching boys to be soft men are the pillar of strength for their family and friends and crying gets you nowhere, what utter bullshit.

> The same damage as telling them they should be in touch with their feminine side. Boys are boys, men are men, girls are girls, women are women. It's like yin and yang. I get saddened when we just can't let kids and the young grow up making mistakes but being themselves. We analyze everything today! Why?

We identified 52 comments on the first level theme of suicide and mental health; 24 were posted by men and 26 by women. Many of these comments included personal stories about suicide (e.g., the loss of a friend or family member to suicide). Some expressed surprise about the suicide statistics in Australia and following this, the acknowledgement of the importance of this topic and call for more action.

> My Dad died from suicide when I was 12 in 1990. Death by loneliness really hit home for me. There was minimal support for him and it was

never spoken of. We still have a long way to go in men's mental health, but you just made the biggest impact. Big hugs to you!

I was gutted when I heard that 2000 men a year die of committing suicide in Australia. That is so shocking - imagine the uproar and investigations if that number were killed in a terrorist attack.

It is also worth mentioning that eight comments explicitly mentioned the impact that watching the documentary had on them which ranged from conversations with friends and family at home to seeking out professional help. Examples of these comments are given below:

Since watching the Man Up series my husband and I both refer to it at different times by saying who made that rule??? It often releases pressure to do things how they're supposed to be done or how they've always been done. The series definitely is a life changer.

That workshop on the show this week was amazing. So powerful and got us having an interesting conversation at home.

Fifty-one comments were classified as diverted conversations. These were conversations between members of the Man Up Facebook community that turned into arguments and diverted from the topic of the original comment. Finally, 273 comments could not be categorized into any theme. These included spam comments, comments in a language other than English and private conversations between people.

Conversations on masculinity and suicide

Across the identified themes two topic areas stood out in generating conversations among followers of the campaign. One area related to people sharing personal stories and experiences with suicide and depression. These stories covered both being bereaved by suicide and experiencing suicidality and allowed cross-over in conversations from both sides. These comments were positively received by the broader audience and were widely commended on for their bravery in sharing this personal and sensitive information. Support and

advice were also offered to those who signaled experiencing mental health problems at the time of posting. It was encouraging to see how Man Up followers rose to the occasion and encouraged others to seek professional help and not give up.

The second area that created conversations was related to challenging masculine stereotypes. Conversations started in response to negative or critical messages towards the campaign's call for men to open-up emotionally. Strongly opposing viewpoints, stating that "real men" have to be tough and rejecting change of masculine identity reached considerable amount of feedback by other followers. These opposing comments often used aggressive and provocative language, seeking to attack men who open up as "weak" and women who commented positively to men's emotional expression as emasculating men. As a result, these comments were often met with numerous counter arguments and quickly silenced. Whether this behavior pattern reflects the perceptions of the wider population or whether the Man Up Facebook community was biased towards a more accepting view of masculinity cannot be determined from this data.

6.6 Discussion

Response to research questions

The Man Up campaign was well received and widely shared by the Facebook community. Over the duration of the campaign our 150 posts yielded 4,053 comments of which just short under 1,000 were tagging at least one other person. This was an important indicator of the growing support for the campaign and its messages. Content analysis of Facebook comments identified that the campaign was perceived very positive with a larger number of comments endorsing the messages of the campaign and the associated documentary. The public discussion of male suicide and masculinity was considered an important issue by many. We identified three content themes through framework analysis: expressing emotions, help and support and masculinity/gender roles which show different aspects of expressions of masculinity. Another important theme that emerged was suicide and mental health. Posts including content about the

campaign ad video and the workshop with high school boys let followers question the presence of social norms and the way they restrict men's and boys' emotional expression (63). These comments demonstrated an increased interest and awareness about the link between social norms, masculinity, restrictive emotional expression and mental health in men and boys; a link which is still widely unrecognized in the wider population despite the long history of previous research and public debate (13, 64).

We further found that the Man Up campaign fostered conversations among Facebook users, in particular in relation to suicide and help-seeking. We saw positive and supportive comments for those in the audience who declared their personal struggles with suicide. Support included encouraging words and suggestions for seeking help and was often combined with sharing information about personal journeys of recovery by the supporter. In line with previous studies this suggests the potential for social media channels to offer peer-to-peer support (56, 58) and much like face-to-face peer support programs could have a positive effect on individual's suicide trajectory (54, 65). It is often argued that the immediacy of available social support via the internet can break the cycle of negative thinking and prevent a situation from escalating. But concerns of safety and ethical considerations remain and this effect should be monitored if possible (54, 56, 66).

In the Man Up campaign, we also saw heated discussions in respect to challenging masculine norms and encouraging emotional expression in men in the context of mental health. Those opposing this message were mostly men who interpreted the call for opening-up as feminizing men and diminishing manhood. Conversations of opposing viewpoints hardened and at times turned disrespectful. It is possible that this opposition is driven by the innate fear of losing status when deviating from the accepted norm (67) and is linked to the experience of stigma and discrimination by some men when expressing emotional struggle.

The heated discussions are important information in and by itself and they pose an interesting ethical challenge for the researcher, especially in the context of suicide and mental health. Policing inappropriate behaviors may sometimes be

necessary to keep people safe but may also result in loss of opportunity for debate. The ethical issues in social media research are widely debated, yet there is further need for establishing useful guidelines for researchers in metal health (68).

We identified gender differences in engagement with the campaign themes as measured by the number of comments. Men were less inclined than women to talk about masculinity. Those who did, talked about masculinity in the context of another issue such as struggling with mental illness or experiencing stigma when needing to ask for help. These men acknowledged the pressures they face in society to appear strong but seemed unsure about how to navigate this issue confirming the widely discussed issue of mental health stigma for men (13). Men's engagement with content on suicide, help-seeking and support however, was on par with women. Some men openly shared their experiences with mental health and suicide and others acknowledged the importance of this topic. This suggests that in general men are open to talking about suicide. But it seems this is more likely the case when they had personal experience with either mental health issues or had lost someone to suicide.

Implications and limitations

Campaign success depends on reach of the target audience and the ways in which users choose to participate on social media. Women are generally more active Facebook users and are more likely to comment and share a post, while men prefer to use social media to gather information (69). In the Man Up Facebook campaign we saw women being more engaged with commenting on the *manuptvseries* page. This however does not conclude that men were not exposed or receptive to the campaign messages.

Women played a vital role in distributing the messages to males in their lives and encourage them to watch the associated documentary confirming the influential role of women on men's help-seeking behavior (70). This highlights the ongoing challenge for health promotion campaigns to gain direct engagement with men and make men take responsibility for their own health choices. Women have often been named as being the ones making doctor's

appointments for men and "nagging" men to look after themselves (71). While women play a vital role as partners and mothers to men, true improvement in men's health can only be gained by achieving direct involvement of men through an improvement of attitudes and behaviors. Further, women's involvement as a strategy will fail for isolated men and those who struggle with disclosing health issues which is more likely in the stigmatized context of mental health and suicide. Health promotion campaigns such as Man Up can help to further destigmatize help-seeking for men though taking a gendered approach.

Women also had a strong voice in encouraging men to change and adapt a more open interpretation of masculinity. Most women in our study welcomed an open discussion about restrictive masculinity and supported change, so did men who had or were experiencing mental health problems and were able to see the negative influence of some masculine norms. From this and the fact that the Man Up campaign was generally perceived very positively, our data suggests that there is an acceptance for societal change. On the contrary, the small group opposing any change in masculinity was exclusively male. This group presented as resistant to changing masculinity and was especially vocal against the views of women.

One way to circumvent the female bias and increase male voices could be to capitalize on social media platforms known to have a more balanced user profile. Male-friendly online communities such as the LadBible however may carry the risk of giving a stronger voice to those men who oppose changing masculinity and favor a return to traditional gender roles. This could then cause silencing those vulnerable men who suffer under the pressure to be masculine, yet would benefit from a more accepting performance of masculinity.

The Man Up campaign used multiple channels as part of the digital campaign, including platforms such as Twitter where men are more strongly represented. Our campaign messages were also re-posted via other male-dominated channels (e.g., LadBible). Unfortunately, we were not able to obtain data from these channels due to access restrictions.
The impact of peer-to-peer conversation should be part of social media campaign evaluation to enhance understanding on how these conversations

can help or hinder campaign success and how we can gauge campaign effect from conversations (38). From the Man Up Facebook campaign data it seems that conversations were either affirmative to a person's or group's view, or they were opposing arguments that seem to harden rather than opening viewpoints. It remains unclear how the social media campaign affected those followers that were in between the two extreme viewpoints and those who saw and read the conversations but did not actively participate in the conversation. These are limitations of social media network data and additional data sources may need to be considered to identify change in attitudes or behaviors.

In a similar vein, conversations on social media networks can create unintended talk about the campaign depending on the attitudes and norms underlying the network composition (38). In this paper we identified some of the conversations among commenters as being heated discussions. These discussions emerged from thematic analysis and was defined and labelled by the researchers as part of the synthesis for findings. This was done on the grounds of the volume of opposing comments within a thread and the use of derogative or abusive language used to express these opposing views. We did not set out to examine polarizing discussions from the start of this research and therefore did not include a conceptual definition of what constitutes heated discussions. Given that social media conversations are becoming increasingly more polarized and at times abusive it could be of benefit to future studies to consider approaches that capture these phenomena in the coding framework. This however does also require conceptual and methodological groundwork including semantic analysis which was not in scope of this paper.

In these heated discussions the viewpoints seemed to harden rather than open new thinking (as far as we could determine from the data) and therefore may reinforce negative attitudes and behaviors and those commenters who were opposed to the campaign. This may carry the risk of the campaign working against its own goals and reinforce masculine stereotypes (72). While campaigns require careful monitoring in this context, this risk cannot be entirely avoided in social media environments as information is often shared across channels which makes controlling the original message difficult if not impossible.

Health is a gendered issue and health promotion campaigns seeking to influence male health behavior need to account for the intersectionality between gender and health (26, 73). Future campaigns need to continue breaking down mental health stigma and create safe spaces for men to open up and challenge the stereotypical notions of masculinity. In this context it is important to recognize the concept of multiple masculinities and remain inclusive to all men, meaning to abstain from using stereotyping in conveying health messages (74, 75).

Concluding remarks

Interpersonal conversation and their impact on campaign success should be part of social media campaign evaluation to enhance understanding on how these conversations can help or hinder campaign success (38). Yet, most social media campaign evaluations focus on analytical statistics and a systematic review of conversations are rarely part of evaluations. We sought to respond to this gap by evaluating a real-world campaign that was designed to challenge perceptions on gender norms, generate awareness on complex social and health issues and engage men (and women) to talk openly about the issue of male suicide. We demonstrated that a social media health campaign can create conversations and awareness on social and mental health issues and has potential to change attitudes. Social media networks such as Facebook are useful technologies to provide input into interpersonal conversations.

We, however, recognize that on its own the evaluation of Facebook campaign comments is limited in showing evidence for overall campaign effectiveness. Todays' health promotion campaigns are likely to follow multi-channel designs including digital and traditional media introducing the challenge of multiple data sources and the need for new approaches to evaluate these complex data (76). More research is needed to develop methodologies that work in these complex data environments and help to identify overall campaign effectiveness and the relative effectiveness of different types of social media channels (35).

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Chapter 7   Discussion

This final chapter presents a synthesis of the findings from the two empirical studies in relation to the four research questions presented in Chapter 1. The findings from these two studies are further contextualized within the larger Man Up evaluation, and implications for social media health promotion interventions and their evaluations are discussed. Practical and theoretical advice is provided. The chapter then presents the strengths and limitations of the empirical work of this thesis and concludes with recommendations for health promotion and future research.

7.1 Overview of findings

The overarching goal of the Man Up campaign was to increase men's help-seeking for emotional problems by challenging men's conformity to masculine norms and other behaviors that are an expression of dominant masculinity and have been shown to lead to harmful health behaviors and increased suicide risk in men. The Man Up social media campaign sought to influence the national conversation on the issue of male suicide and its link to dominant masculinity and create awareness of the problems that can arise from limiting one's emotional expressiveness and refraining from seeking help when experiencing emotional or personal problems. This thesis explored whether the Man Up social media campaign achieved this.

Engagement has been highlighted as a key performance indicator to measure social media campaign success (172). On a conceptual level, engagement counts as a marker of awareness, contemplation and active participation, all of which are important steps on the behavior change pathway (205). In this thesis, a hierarchical framework for measuring engagement was applied (208). In this framework, campaign reach and exposure are indicators for the success of a campaign when it is released into the real world, as measured by how many people are exposed to the campaign messages and how often. These measures indicate the extent by which the campaign created a viewership which is an essential precursor for generating impact. Campaign impact is measured through reactions (such as likes, comments, retweets, shares etc.) by

the audience to the campaign content. These measures indicate agreement, endorsement and reflections concerning the content of the campaign.

The following sections are organized around the four research questions that are answered by the two studies presented in Chapters 5 and 6:

1. Did the Man Up campaign create engagement on social media?
2. What campaign content was most engaging?
3. How was the Man Up campaign perceived by the public audience?
4. How did masculinity and suicide feature in public conversation?

Research question 1 was answered by Study 1. Research questions 2 and 3 were covered in both Studies 1 and 2 and research question 4 was responded to in Study 2. Data from other components of the Man Up evaluation are incorporated into the various discussion sections as appropriate and to support the response to research questions.

7.1.1 Did the Man Up campaign create engagement on social media?

Campaign success starts with being able to create a following and increase viewership over the duration of the campaign. The Man Up Twitter campaign showed a steady increase in followers over the three campaign phases and reached 1,453 followers by the end of the campaign. The number of impressions was substantial in the lead up to the screening of the documentary (423,000) and during the three weeks in which it was screened (436,000), indicating a good level of repeated exposure. Over its duration, the Twitter campaign earned nearly 5,000 likes and 2,500 retweets and gained over 1 million impressions. Also during the campaign, 150 posts were published on the *manuptvseries* Facebook page. These had over 4,000 comments which demonstrate general engagement with the campaign. Almost 45% of the analyzed comments endorsed the campaign messages published on Facebook through tagging others and publishing positive messages. The Facebook campaign had a following of just under 22,000 people by the end of the campaign and its reach was astonishingly large with 10.63 million people having been exposed to the content of the Facebook campaign and overall audience engagement being high at a total of 609,000 reactions.

The keyword analysis on Twitter further confirmed that in the global Twitter space the conversations including the hashtag MANUP increased in alignment with the campaign phases which suggests that the campaign was successful in getting its messages out. The hashtag MANUP was trending globally during October 2016 which was when the Man Up documentary was screened on television and the social media campaign was most active.

The findings from the two studies in this thesis are further supported by data from other sources in the broader evaluation of Man Up. These sources suggest that the reach and exposure of the Man Up campaign was maximized through its multiple channels. The average viewership of the documentary at its first screening was 642,000 viewers. Its broader viewership including repeat screenings and views on iview (the Australian Broadcasting Commission's catch-up service) amounted to over 2.6 million viewers by December 2018. Some elements of the digital campaign had even greater reach. For example, the "Man Up, Speak Up" campaign ad video created in Episode 3 of the documentary was shared on various media channels, viewed over 56 million times and had about 500,000 reactions, 771,000 shares and 30,000 comments across social media channels. With the documentary still being available on ABC iview and through the Man Up website (http://manup.org.au) these numbers continue to rise.

In sum, the Man Up campaign was able to generate an impressive reach and exposure. Across Twitter and Facebook, the reach of the campaign was significant and provided a solid foundation for generating higher level engagement with the campaign messages.

7.1.2 What campaign content was most engaging?

The question about what campaign content was most successful in engaging the audience was considered in two different ways. Study 1 reviewed the tweets released during the campaign period by the number of overall reactions they received and determined the highest performing tweets according to this overall performance rating. By far the highest performing tweet on this measure was the release of the "Man Up, Speak Up" campaign ad video which encouraged audiences to question why men are told from a young age to suppress their emotions and asked men to open up and share their emotional struggle.

Another high performing tweet was the release of the trailer to the documentary which talked about the issue of male suicide and raised the question of whether the way men are taught to behave in society is connected to this issue. The positive uptake of these key content materials can be interpreted as a confirmation for the general interest in the topics that the Man Up campaign sought to address which then created engagement online in the lead up to and during the screening of the documentary. In particular, the success of the campaign ad video was striking as it presented the key message of the intervention, addressing restrictive masculinity, challenging masculine stereotypes and calling men to action. When it was released on Facebook, the campaign ad video had 1.55 million views and it was also shared by other social media platforms.

The second method used to determine which content performed best involved a content analysis of tweets and Facebook comments. This analysis identified the common themes that these tweets and comments shared. A count of themes then helped to develop an understanding about the prominence of topics in engagement. On both Twitter and Facebook, the content that achieved the greatest engagement was around expressing emotions. This was driven by two segments in the documentary for which content was widely distributed across social media channels. These were the release of the "Man Up, Speak Up" campaign ad video and features about the "Breaking the Man Code" workshop with secondary school boys which aimed at redefining masculinity. Both segments highlighted strongly how difficult it is for men and boys to freely express emotional problems and the stigma they face when reaching out. Other strong themes were: help-seeking and support for men, masculinity and gender roles, and suicide, depression and mental health.

7.1.3 How was the Man Up campaign perceived by the public audience?

The high proportion of shares, tagging of friends and reposting and retweeting campaign content indicates that Man Up was overall perceived very positively. For both platforms the highest engagement activity was reached in Phase 2, during the screening of the campaign. However, engagement was maintained beyond the screening of the documentary and in fact some content – such as the "Man Up, Speak Up" campaign ad video – gained a life of its own when it

was shared across other media platforms. This is a success unusual for traditional national health promotion campaigns, but becomes possible through the dynamic and user driven nature of social media.

Qualitative analysis of the raw data (Twitter tweets and Facebook comments) also helped to provide a deeper understanding of how the Man Up campaign was perceived overall. On both platforms, the positive responses far outnumbered the negative. Many tweets and comments offered general endorsement of the campaign messages. People committed to watching the documentary and encouraged others to do the same. There was a sense that a public discussion of male suicide was needed and long overdue and the pressures for men to be strong and resilient was recognized. This strongly confirmed the importance of the Man Up campaign message.

While overall the number of negative responses was small (less than 1% on both platforms), these responses should not be overlooked. These negative responses predominantly rejected the notion of redefining masculinity and saw the call to change as an attack on manhood. The qualitative analysis of Facebook comments showed that these types of negative comments created many responses and stirred the exchange of opinions among the audience. Many male and female commenters confronted these negative views on challenging traditional masculinity and aggressive outbursts of those with traditional views were quickly outnumbered. This shows that these negative messages did not have the power to derail the campaign and its messages. In fact, they were the source of increased discussion and opportunities for public confirmation of the campaign messages. However, this also shows that there was an issue with having respectful exchanges of opposing opinions which could become an issue for safety for some of the men who engaged in conversation.

7.1.4 How did masculinity and suicide feature in public conversation?

One of the aims of the Man Up campaign was to raise awareness about the link between high male suicide rates and dominant masculinity, with a view to targeting restrictive masculine norms that may keep men from seeking help for emotional or personal problems. Therefore, it was important to evaluate if and how the Man Up social media campaign was able to engage men in the

discussion of masculinity and suicide. As described above, masculinity and suicide were both identified as strong themes on Twitter and Facebook. The analysis of Facebook comments in Study 2 allowed for a "deeper dive" into the content of shared responses. Interestingly, the most active conversations by means of exchanging stories, experiences and opinions were also found within these two themes.

It is encouraging to see that conversations around suicide were exclusively positive and supportive. Men and women were equally engaged in talking about male suicide. These conversations were driven by people sharing their personal stories of suicide attempts or having lost someone to suicide. The openness and honesty of these personal stories was welcomed and encouraged. Support and advice was offered to those who signaled experiencing mental health problems at the time of posting. This shows how a social media campaign like Man Up can be used positively in mental health and suicide prevention and that lived experience stories can hold the power to change things for the better for those who are struggling.

However, the direct messages about masculinity saw far less engagement from men compared to women. The same gender disparity was observed for the theme of expressing emotions. This theme addressed restrictive emotionality in men and it was mostly women who encouraged men to be more emotionally expressive and also saw the need for young men and boys to be allowed to be vulnerable. In this area the campaign saw a number of "heated discussions" instigated by aggressive outbursts of those who opposed the notion of changing dominant masculinity. This suggests that dominant masculinity was upheld, at least to some extent and that many of the pressures that men experience may be "policed" by other men and will see social punishment in form of public mockery or exclusion in case of acting against the dominant masculine norm. Only a minority group of men spoke openly about their struggles with help-seeking and opening up, linking this to societal pressures placed on men. These were men with lived experience of suicide or mental health problems, some of whom had overcome or were currently managing their problems. This issue of fear of mockery and loss of masculine status can be an inhibitor for men to engage in conversations online on topics that challenge traditional norms.

7.2 Implications

This section considers the implications of findings of the thesis for engaging men in suicide prevention campaigns and using social media as a vehicle for suicide prevention and health promotion more broadly.

7.2.1 Implications for engaging men in suicide prevention through media campaigns

The Man Up intervention was designed as a multi-faceted media-based male health promotion and suicide prevention intervention that sought to raise awareness on the issue of male suicide and increase male help-seeking for emotional and mental health problems. It acknowledges that the way men navigate their health is influenced by the socially constructed environment and the perceived pressures of adhering to social norms (31). Masculine norms such as displaying courage, independence, rationality, competitiveness, control and dominance are still the dominant norm for men in Western societies (53). For men, dealing with mental health issues often stands in conflict with expectations of being self-reliant, strong, independent and in control of oneself (29). Deviating from these norms can have negative consequences for men and result in experiencing stigma, isolation and loss of status or power (55). It is easy to see how adherence to these norms may play out in men refraining from expressing emotions or vulnerability, either in public or to close friends (54). Yet, this leaves men with limited options when experiencing emotional problems and may therefore increases their risk of becoming suicidal. By openly drawing the link between masculine gender norms and suicide and challenging men (and women), the Man Up intervention sought to open new ways of thinking and behaving for men and do away with the barriers of dominant masculine norms that keep men from seeking help.

The extensive reach of Man Up and the extremely positive feedback on the documentary and the digital campaign (including social media) demonstrates that there is a need for this topic to be addressed on a population level and for these discussions to be had across different population groups. One reason for the uptake of Man Up was its direct and open approach and the use of role models who were relatable to the Australian male population. In line with previous research, Study 2 identified that addressing male suicide in an open

manner, using direct language and not "beating around the bush" was welcomed by men. This was confirmed by other components of the Man Up evaluation (4, 5, 8). Further, the Man Up presenter, Gus Worland, was a key factor of the campaign's success. On both Facebook and Twitter he was commended for his personal and open approach to talking about male suicide and masculinity. For many, Gus symbolized the common "Aussie bloke", a father, husband, friend, sports fan and barbecue goer and was therefore seen as relatable and familiar rather than a celebrity (which was identified as a barrier when testing Man Up promotional materials and the website before launching the campaign (4)). The perceived familiarity with his personality was an important factor for the campaign credibility and message uptake.

Comments and tweets on social media also highlighted the presence of two groups in the audience. Firstly, those that welcomed the campaign and its messages in acknowledgement that it was long overdue that male suicide get the public attention that it should, given the high suicide rates in men in Australia. This group included men and women who had lost someone to suicide and men who had been or were experiencing mental health problems or suicidal symptoms (as self-identified through comments and tweets). This group strongly supported the campaign and its messages and through their social media behavior functioned as promotors. Secondly, there were still a significant number of people in the audience that had so far been unaware of the high male suicide rates and were shocked to learn about it. Yet, while learning through the campaign messages, this group also acknowledged the importance of publicly talking about this issue and educating others. This indicates that population based media interventions can raise awareness about suicide and its prevention and that Man Up was able to do so while at the same time giving voice to those with experience of suicide.

The evaluation of the Man Up social media campaign identified significant gender differences in engagement with the campaign messages. During the Man Up Facebook campaign, women were more engaged with commenting on the *manuptvseries* page than men. They expressed overwhelmingly positive feedback on the campaign messages and welcomed the call for men to be more emotionally expressive. Greater articulation levels of women online is not unusual as women are generally more active users of Facebook and other

social media platforms and are more likely to comment on and share a post compared to men who prefer to use social media to gather information leading to more passive or silent engagement (165, 166). This highlights the ongoing challenge for mental health promotion campaigns to get men actively involved and take action for their own health. Another explanation for men's greater silence online could be that men choose different techniques to express their emotions depending on the situation and setting where the conversation takes place. Men may choose to remain silent in line with complicit hegemonic masculinity because online settings are seen as not safe to reveal alternative masculine behaviors (140).

It may be worth exploring how the voice of male lived experience can be used in more targeted ways as a door opener to engage other men that may be struggling with emotional or personal problems. Study 2 provided strong evidence for lived experience of suicide being a driver for engagement on topics such as emotional expression. Men with lived experience and who had overcome their emotional problems or were managing their mental expressed a more open from of masculinity in regards to expressing emotions and talking about suicide and were resistant to the dominant masculinity generally accepted in society. However, when it came to challenging the notions of dominant masculinity through lived experience, especially around encouraging men to open up and express their emotions, the opposing and aggressive comments that emerged were not influenced by those with lived experience (at least not visible form the data). This can be interpreted as a stand-off between two opposing expressions of masculinity, those following the traditional dominant masculinity and those following a softer and more open expression of masculinity (resistant masculinity) (51) and suggests that some men hold on to the dominant norms of masculinity and are difficult to engage with though messages that challenge these notions. For this group, a more diffused communications approach may be needed in order to avoid triggering feelings of being attacked or threatened in these men. In this context the exploration of different communication styles among men when expressing emotions would be helpful. This includes exploring how men express emotions and how do these expressions differ by setting, race, age, gender identity and socioeconomic background (140).

Women also played an influential role in encouraging the men in their lives to engage with Man Up. This confirms findings from previous research on the role of women in male help seeking for health concerns (227, 228). The female social media audience more frequently shared social media content by tagging other men and women and encouraging them to watch the documentary. This means that men were exposed to Man Up and its messages via the involvement of the women in their lives. While this is encouraging in regards to reach and exposure, it leaves a gap in understanding the direct responses and reactions and whether the men were receptive to the messages of Man Up. Further, this confirms that women are important agents in their role as mothers, sisters, partners, daughter and friends to men and can have influence over their health behaviors including help-seeking (228). There may be an opportunity to take advantage of this role in designing health promotion campaigns and using women as conduit to reach men and encourage seeking help, yet this also creates a burden of responsibility for women and therefore needs careful consideration. When it comes to expressing emotions and challenging traditional notions of masculinity women are more likely to play a role behind the scenes as dominant masculine norms are most strongly policed by other men and this starts as early as in boyhood (229). Women can be a supporter, but men have to be the instigator and conduit of social change for men. It is in this discourse of masculinities where social change needs to take its course.

The success of engaging men on social media also depended on the topic of the campaign messages. Men were more actively involved in responding to messages about suicide and less to messages about challenging masculinity. Again, it was mostly men who had or were experiencing mental health problems and saw the negative influence of some masculine norms on male help-seeking. These men welcomed an open discussion about restrictive masculinity and supported change. This influential role of men with lived experience in social media conversations holds potential for an indirect pathway of influencing men who might be following a campaign but not actively engaging with it, the "silent followers". Based on Social Cognitive Theory (see Chapter 2.3), the opportunity to observe discussions about new ways of thinking is said to have an influence on those exposed to these new ideas (126). Acceptance of dominant masculine norms and negativity towards men who spoke up about

emotional struggles were generally met with criticism and messages about men and boys being allowed to express vulnerability were strongly supported by the majority of the audience. In theory, this would have paved the way for observational learning, adapting new behaviors and potentially modelling these new behaviors in real life leading towards a resistant masculinity and away from dominant masculinity. Following masculinity theory, the Man Up campaign highlighted the presence of a number of competing masculinities. From the studies in this thesis it almost suggests that the majority of men and women in the audience were following resistant masculinity as they were supporting the messages of the campaign, however a vocal minority expressed dominant masculinity and did so with force and dominating behaviour (50, 51).

Unfortunately, it was not possible to gauge the level of influence of the Man Up social media campaign on the silent male followers. However, there is evidence from the randomized controlled trial of the Man Up documentary that it changed male help-seeking intentions and reduced men's conformity to masculine norms under controlled conditions (5-7). There is also some evidence for positive changes in the real world, as the data collected through the online survey on the Man Up website found that those who had viewed Man Up were more likely to desire closer relationships with their male friends and had greater awareness of societal pressures on males than those who had not (3). This suggests a strong possibility that the larger male audience on social media was influenced at least to some extent by the Man Up messages. Given that masculine norms are deeply embedded in society, a repeat exposure and ongoing community engagement is needed to show effect across the population (224).

There was a small number of very vocal men in the audience who rejected the campaign's call for men to open up emotionally and saw this as a threat. These men offered strongly opposing viewpoints, referencing "real men don't cry" and "toughen up" slogans and rejected redefining masculinity. Their comments carried an aggressive and disrespectful undertone which led to heated discussions in which opposing viewpoints became firmer rather than becoming open to change. The unwillingness to challenge established stereotypical notions of masculinity and be open to change is not uncommon in gender-transformative research. A recent study on effective health messaging to men involving topics of masculinity identified that there will always be a group of

opponents whose attitudes cannot be shifted. This study, therefore, suggests not to focus all efforts in engaging with the opponents, but rather on the groups they call supporters and persuaders, as these are men for whom attitudes and behaviors can be shifted by effective messaging (230).

This in mind, the heated discussions carry valuable information for the evaluation of the Man Up campaign. Firstly, following Social Cognitive Theory we know that public exchange of opinions, like on social media, can influence the opinion of others. We can assume that there was a large number of men (and women) in the social media audience who followed these heated discussions yet did not actively engage. This "silent audience" had the opportunity to witness how aggressive behaviors towards men's emotional vulnerability were strongly opposed by both men and women. This modelling of positive and adaptive behavior in line with the Man Up campaign messages created the opportunity for other men who followed the campaign to learn about the acceptability of deviating from what could be seen as the masculine stereotype. This in turn can influence these men's attitudes and behaviors on help seeking. However, the opposite is also possible. Potentially, there was another group of men who were complicit to dominant masculinity but because they witnessed how those that supported more traditional views of masculinity were strongly opposed they decided to remain silent. Unfortunately, Social Media data is not able to shed light on this issues. On a final note, for campaigns aiming to challenge gender stereotypes the opposing voice is to be expected if not wanted. Yet, monitoring of the campaign is needed as strongly opposing viewpoints can carry the risk of a campaign working against its own goals and reinforcing attitudes and behaviors that it is seeking to change (231).

7.2.2 Implications for social media health promotion interventions and their evaluation

In an increasingly complex media world with new ways of connection and communication developing at a fast pace, the promotion of health messages can no longer rely on stand-alone campaigns but must capitalize on the opportunities provided by social media (232). The modernization of media-based health promotion evaluation is needed, especially when following a whole of population approach. This thesis addressed the call for a strategic and

systematic approach to measuring social media campaign effectiveness (205). Using a methodological framework for the evaluation of social media interventions is of crucial importance. An effective evaluation strategy for social media has to measure impacts and outcomes across different media platforms using various data sources. It should clearly define the measures used to indicate campaign success in line with its aims (225). This is a challenging task that requires resources and expertise which may not be readily available in health organizations or public health research. Therefore, the development of standard evaluation measurements is an important step in advancing consistency in the evaluation of social media campaign evaluation and will help to advance knowledge in this area (172, 208). The hierarchy of engagement framework as introduced in Section 2.4 provides a methodological backdrop through which to develop and extend the evaluation of social media campaigns across several platforms and media. This systematic and comprehensive approach provides an example for future evaluations of social media interventions that use multiple platforms.

This thesis paid additional attention to the inclusion of interpersonal two-way conversations in its evaluation framework. Due to the complexity in collecting and analyzing these data, this is often overlooked or reported on in isolation rather than featuring within larger evaluation designs and alongside commonly collected analytical measures such as reach, exposure and engagement. Yet the opportunity for and visibility of conversations on social media is one of the main advantages of social media over traditional media and much can be gained from analyzing these data sources (168, 207). Conversations between audience members may be crucial for measuring endorsement in more detail and following Social Cognitive Theory they also open up pathways for observational learning (203, 210). By integrating interpersonal conversations in the overall measurement framework for engagement, this thesis demonstrated their invaluable contribution to understanding which campaign content was most engaging and how audience members engaged with each other on sometimes very confronting topics. For those responsible for developing campaigns that aim for social or behavior change it may be particularly important to pay close attention to these conversations as they are key to understanding how messages translate and intersect among different population groups.

The Man Up social media campaign is also an example for how media campaigns can contribute positively to conversations about suicide. On social media especially, the sharing of lived experience of mental health problems and suicidality had a positive effect on conversations, with many individuals offering supportive comments, words of understanding and encouragement not to give up. As indicated in Study 2, several comments on Facebook indicated that watching Man Up made some men seek professional help or look for closer relationships with their male friends. In one case, a specific comment indicated that watching Man Up had saved one man's life. While somewhat anecdotal, this suggests that media interventions can be used to protect against suicide if campaigns use the right language and choose content that resonates. It also shows that social media data can be used to gain insight into real world population level impact of these media campaigns.

Described as the Papageno effect, stories from survivors of suicide who have overcome a suicidal crisis have been found to be protective against suicide (179). Since these stories were a crucial element of the Man Up documentary and also featured as user generated content on social media, it might be reasonable to assume that this was protective for some men. Today, a large proportion of suicidal communication occurs online, yet little is known about how social media can be used protectively in suicide prevention (233). The positive findings identified through the Man Up social media campaign evaluation can hopefully motivate future research in this area.

Having said this, social media also bears risks and challenges especially for campaigns that aim to engage with vulnerable population groups such as suicidal individuals or people with mental health problems. The interactive nature and user autonomy of this media and its fast pace make it an uncontrollable environment for health messaging. Concerns about negative comments, misdirecting or reshaping of messages, spreading of inaccurate information and rising online incivility are valid (234). For health promotion campaigns, this means that conversations can involve unintended, potentially undesirable discussions. Depending on the attitudes of those in the social media network, these discussions may have the potential to harm others (210). The studies in this thesis did not identify any negative or harmful consequences of the Man Up campaign on others, but they did highlight some negative

postings which led to heated discussions among audience members with opinions that were not aligned with the Man Up messages. Predominantly, this content was on the topic of men's coping with emotional problems and it sometimes led to verbally aggressive behavior. This is a reminder that while autonomy of sharing information and discussing different viewpoints can lead to increased reach and engagement with the campaign (213), conversations among the audience need to be monitored carefully to avoid undesirable outcomes for individuals (207). In the case of the Man Up social media campaign, a decision was made to interfere as little as possible with these conversations. This was acceptable as the amount of negative behavior was low and quickly responded to from within the audience. In addition, these conversations were a source of information in their own right which helped to foster understanding of how the campaign messages were interpreted and how they affected the audience (210). Not embracing these difficult conversations would have been a missed opportunity to truly engage with the audience and measure campaign impact on social media.

7.3 Strengths and limitations

The findings from the studies in this thesis need to be interpreted in the context of the following strengths and limitations.

7.3.1 The strength of this thesis

The positive effect of the use of social media campaigns in suicide prevention is disputed, despite emerging evidence that they may work for some audiences and in some settings (171). While there are many digital suicide prevention interventions, not many use social media and even fewer have been evaluated across several platforms. Since each platform is different in its user profile and in the way users communicate and interact, it is important to combine different sources of evidence to gain a holistic picture of campaign impact. By combining data from different social media platforms for the evaluation of the real world impact of the Man Up social media campaign, this thesis was able to add to the knowledge on how to evaluate social media campaigns and provides a good example for future evaluations.

One of the greatest strengths of the Man Up social media campaign was its reach within the Australian population and beyond. Campaign success depends on good reach, exposure and audience engagement (224). The Man Up intervention successfully demonstrated this by taking full advantage of the digital environment and capitalizing on social media platforms which prepared the stage for the messages of the documentary and reinforced these messages online to a broader audience than a television show would have been able to reach on its own. This was essential to enable the larger Man Up intervention to influence men's help-seeking behavior.

Another strength of this thesis was the inclusion of an engagement measurement framework for the social media campaign evaluation. While engagement is a common indicator for social media campaign success, it is not commonly operationalized within a standardized measurement framework (172). Following the call for establishing social media measurement standards, the measurement framework proposed by Neiger and colleagues was adapted to address the research questions within this thesis. Alongside conventional metrics of reach and engagement, this thesis extended the evaluation of social media campaigns to also include the assessment of interpersonal two-way conversations and moved beyond using simple quantitative measures of engagement. In doing so, it took advantage of the interactive environment that social media offers to health promotion and acknowledged the importance of these conversations in the context of impact evaluation (207).

Embedding the campaign evaluation into a theoretical framework of Social Cognitive Theory further strengthened the foundation of the Man Up social media campaign evaluation. Little is known about how the inclusion of theory can help to improve the design and evaluation of campaigns, but it has been shown that campaign effectiveness can be enhanced by the presence of a solid theoretical foundation (173, 219). While it was beyond the scope of this thesis to test the validity of Social Cognitive Theory or its effect on the social media evaluation, its inclusion played a vital role in contextualizing the findings from the social media evaluation.

It should also be noted that although separate studies were conducted using Facebook and Twitter data, the identified effects are unlikely to be independent

from each other or independent from other components of the Man Up media intervention. Although it is reasonable to conclude that each platform independently engaged and influenced men (and women), mainly because they reach slightly different audiences, it was not possible to tease out the independent contributions of each component to the overall success of Man Up. While this is a common limitation of real world evaluation where there is limited control over the environment, it can also be a strength. Platforms such as Twitter and Facebook are interlinked and cross-posting can greatly contribute to increased reach of and exposure to campaign messages. Those creating social media health campaigns should make use of multiple platforms to leverage the full potential of social media.

7.3.2 The limitations of this thesis

As shown in Table 4.1, it was beyond the capacity of the Man Up social media campaign evaluation to examine its real world outcomes (e.g., attitude or behavior changes). This was partially because from the beginning outcome evaluation was planned to be measured through other components of the larger evaluation of Man Up (see Section 3.1.2). For example, an online survey on the Man Up website collected data before and after the screening of the Man Up television documentary and found that men who watched the documentary were more likely to desire closer relationships with their male friends compared to those who had not, had greater awareness of societal pressures on males and indicated they would be likely to undertake a number of adaptive actions (3). The analysis of Google Analytics data and emails received through the website showed that the Man Up content and messages resonated with viewers and the website provided evidence for help-seeking behavior through outbound clicks from the Man Up website to health services organizations (8). A randomized controlled trial showed that men who viewed the Man Up documentary were more likely to seek help for emotional problems and were also more likely to recommend to a friend to seek help in the same situation. These men also demonstrated decreased conformity to traditional masculine norms (6). Together, these components of the Man Up evaluation are proof of the positive outcomes of the Man Up media intervention on men as a whole.

There is, however, potential to include measuring of outcome evaluation in stand-alone social media campaigns as presented in the hierarchy of engagement framework in Chapter 2.4. Unlike traditional media, social media platforms are able to directly engage with their audience and can therefore invite to engage in offline activities or activities in other digital spaces. This can create opportunities for collecting additional data on attitudes, behaviors and other health outcomes of interest. Capturing audience engagement beyond the social media campaign can facilitate outcome evaluation of social media campaigns in real world conditions (208). The lack of outcome evaluation is a common issue for media interventions and specifically for social media campaigns (172). One reason for this is that social media campaigns happen in the real world and those designs that are commonly used to measure outcomes (e.g., before and after studies or controlled trials) are difficult if not impossible to implement in real world evaluation. While it is not easy to follow up on those who have been exposed to a social media campaign it may have value to consider the above-mentioned approaches for real world outcome evaluation or develop new approaches that address the complexity of open designs.

Challenging tradition and introducing new ways of thinking and acting, as Man Up did by challenging dominant masculinity, bears a risk for those who openly support these new ways. Men often report experiencing stigma and social sanctions when behaving against the norm (235, 236). Therefore, it is likely that men remained in the background and followed these conversations more passively. This is supported by findings from concept testing of the Man Up promotional material with 17 men from different ages and backgrounds prior to the campaign launch. Some male participants were concerned that sharing content about mental health and suicide on social media would risk their personal reputation and relationships with others and therefore would refrain from it (4). This may mean that men remain silent in a public discussion, but based on Social Cognitive Theory they will still be influenced by way of passive participation through observation of behavior. Unfortunately, it was beyond the scope of the Man Up social media evaluation to measure the process of observational learning and therefore its impact on individuals.

The analysis of Facebook comments could present a biased view of the campaign messages. Data were downloaded from the Man Up Facebook page

which showed predominantly positive support for the messages of the campaign and very little negative feedback. While Man Up received overwhelmingly positive feedback across all campaign platforms, it is possible that due to the social media algorithms employed by social media companies, the Man Up campaign may have reached those who were already in favor of its messages. Therefore, the campaign may have failed to tap into pockets of society that are more strongly opposed to challenging dominant masculinity and likely to refrain from discussing male mental health as a serious health issue. While the content of the Man Up campaign was also cross-posted and shared on other more niche platforms such as LadBible, which has a stronger male focus than the common platforms, it was not possible to obtain data from these channels due to access restrictions. It is possible that the conversations on these platforms would have provided a different perspective to that captured through Twitter and Facebook.

Finally, each social media platform differs in its user characteristics and distribution across the Australian population and may not be representative for the whole of population. In Australia, only about 19% of Internet users use Twitter and a majority of these are relatively young (39). Therefore, the findings from the Twitter evaluation may not be representative for the whole of population. About 60% of the Australian population are active Facebook users with gender differences evening out and in principle it might be expected that this would lead to a more even spread between population groups (237). However, there seem to be general differences in how men and women use social media (165). As previously discussed, this may lead to women being more active users of social media platforms with higher rates of commenting and interacting with others. These differences need to be taken into account when interpreting findings on engagement and overall campaign impact.

7.4 Recommendations for health promotion and research

Changing long established social norms is not an easy feat and takes a long time. While Man Up has proven to be a powerful intervention to initiate conversations, its whole of population approach and limited timespan demonstrated to be challenging in maintaining engagement beyond the

campaign period. Continued health promotion is needed to continue this important work and if possible target specific high-risk groups following a selective intervention approach. Future campaigns also need to continue breaking down mental health stigma and create safe spaces for men to open up and challenge the stereotypical notions of masculinity. In this context it is important for those working in health promotion to recognize the concept of multiple masculinities and remain inclusive to all men. Generally, this means refraining from using stereotyping in conveying health messages (135, 150). Health promotion campaigns that seek to influence male health behaviors need to account for the relationship between gender and health (31, 33). More specifically, for interventions that aim to challenge masculine norms care needs to be taken not to exclude those views that are aligning with tradition. It would be beneficial to find ways to engage with all different forms of masculinities to not leave those men behind that may feel threatened by change.

In suicide prevention, multi-level suicide prevention programs that combine various approaches seem to provide promising results (37). Translated into the context of public health promotion campaigns, this suggests that interventions should follow a multi-media multi-channel design that includes digital and traditional media. However, this introduces complexity in the evaluation and little is known on how to best combine data from different media platforms (173). In this context, the use of a standard measurement framework such as in this thesis is of importance for improving consistency and comparability of future evaluation studies. More research is needed to develop measurement frameworks that work in these complex environments and help to identify overall campaign effectiveness and the relative effectiveness of different components of social media campaigns (39).

It can also be helpful for researchers to collaborate with social marketing agencies that have the capacity for and knowledge of how to collect these different media data most effectively and efficiently and control for dose effect (level of exposure and repeat exposure) in relation to the outcome variable and over time. Statistical modelling techniques accounting for different levels of media exposure in relation to changes in attitudes and behaviors can help to better understand the individual effects of different media platforms or specific

media content and therefore inform future health promotion campaigns on where to invest their campaign budget for the greatest grain.

While social media has the power to influence knowledge and attitudes, less is known about its potential to change behavior. To gain a better understanding of the effectiveness of social media public health campaigns, campaign evaluation should aim to include outcome measurements where possible and in line with the overall campaign aim. This requires the development of new approaches for social media campaign evaluation that move beyond measuring reach and engagement. Once these new approaches exist, a comparison between social media campaigns as population-based or targeted interventions and other intervention designs can help clarifying whether and when social media campaigns are more or less effective. Then, with outcome evaluation of social media campaigns in place, cost-effectiveness analysis for these different intervention types can support Government agencies and health organizations in their decision making for future investments.

The data presented in this thesis highlight some issues on engaging potentially vulnerable men, namely those who showed aggression and incivility. Future research should investigate where best to find these vulnerable groups online and how to engage with these groups in health promotion. It may be beneficial to seek out male-specific online communities to overcome the female bias as presented on the more common platforms such as Facebook and to address the current gap in targeted online media interventions in suicide prevention research.

As mentioned above, little is known about how the inclusion of theory can help to improve the design and evaluation of campaigns. Few social media evaluation studies include theory within their design. Future research should pay attention to the inclusion of theory and test its effect on social media evaluation to gain a better understanding about how theory can improve evaluation.

7.5 Summary and conclusions

This thesis examined the ways in which Man Up, a media-based suicide prevention intervention, engaged the Australian population in talking about male suicide and masculinity with a view to challenge harmful masculine norms and encourage male help-seeking via encouraging expressing emotions in men. The focus of this thesis was on the Man Up social media campaign and four key research questions were addressed relating to the effectiveness of the Man Up campaign in creating engagement on social media, the campaign content that was most engaging, the way in which the overall campaign was perceived by the public audience and the way in which masculinity and suicide featured in public conversations on social media.

The two studies presented in this thesis showed that the Man Up social media campaign had an impressive reach with men (and women) in the Australian population and beyond. Overall, the Man Up campaign messages were perceived positively across both Twitter and Facebook. Campaign content was widely shared and strongly endorsed on social media. Comments highlighted the need to openly talk about male suicide and the stigma introduced by gendered practices. The analysis of Facebook data confirmed that the social media campaign triggered conversations about masculinity and suicide that for some may have led to a shift in attitudes towards expressing emotions and reaching out to others for help. The Man Up campaign was also particularly effective in disseminating information and promoting conversations in real-time, an advantage that it had over more traditional health promotion campaigns. This interactive multi-media approach could well be adapted to other areas of mental health promotion campaigns to increase their reach and effectiveness.

This thesis is an example for the successful use of social media in engaging men (and women) in discussions about male mental health, suicide and gender norms. More broadly, campaigns such as Man Up can help to further destigmatize help-seeking for men by taking a gendered approach and therefore, social media campaigns may help to protect against suicide. Further research is needed to determine how to achieve higher levels of engagement with men in digital spaces such as Facebook and Twitter which are more actively used by women. While women undoubtedly play a vital role as partners

and mothers to men and boys, a high female presence in these forums may discourage men to actively participate, especially those who struggle with openly engaging in or disclosing mental health issues due to perceived risk of stigma around male mental health and suicide. Further, the longevity of campaign effects and their ability to change individuals' attitudes and behaviors need further research attention. Addressing these issues will require increased attention to high quality intervention and evaluation designs for social media campaigns which ideally are embedded in theory and follow a systematic framework for measuring effectiveness. Interpersonal two-way conversations should be part of social media campaign evaluation to enhance understanding on how these conversations can help or hinder campaign success.

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