

Enhancing Youth Access to HIV Information Through Co-creation on LVCT Health's Facebook Page in Homa Bay Town, Kenya

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ABSTRACT – Research indicates that young people in Homa Bay Town are affected by HIV and AIDS at rates higher than the national average, largely due to limited access to relevant information. While many studies have focused on broad-based interventions, few have examined the potential of social media, particularly Facebook, as a platform for co-creating and disseminating HIV-related information to address this challenge. This study investigates how LVCT Health utilizes its Facebook page to co-create and share HIV-related information with young people in Homa Bay. A qualitative case study approach was employed, involving purposive sampling of twenty-four young people, four digital opinion leaders, and four LVCT Health communication staff members. Data were collected through focus group discussions and in-depth interviews, and were analyzed thematically and presented in narrative form.

Keywords – Dissemination; Co-Creation; Facebook; Opinion Leaders; Young People

I. Introduction

Even though the HIV/AIDS burden remains huge globally, it is possible to recognize from commissioned reports that sub-Saharan Africa remains the hardest hit by the disease. This conclusion is arrived at from the numbers given by the UNAIDS (2023), for instance, which approximated 39 million people as having been diagnosed with HIV globally at the end of 2022, where 1.3 million new infections were recorded in that year. In these statistics, over 70% of the HIV cases were found in Sub-Saharan Africa, which roughly accounted for 12% of the entire global population. These statistics further demonstrated that the region had a myriad of challenges that were not limited to stigma, poor healthcare systems, and limited access to prevention and/or treatment services (UNAIDS 2023).

The reviewed literature suggests that these challenges also resonate with the East African region, even though HIV-related deaths are seen to be on a decline as a result of an increasing antiretroviral therapy (ART) across the region's localized contexts. Inasmuch as this conclusion is regionally backed, it is worth mentioning that compared to her counterparts in the region, Kenya, in particular, continues to record a high prevalence rate of HIV.

II. Synthesis of Related Literature

Facebook has become an influential platform for co-creating information concerning HIV services worldwide. This is the case especially because of the core features it affords health

organizations and their collaborative partners to co-create information, including interactivity, hyper-textuality, multimodality, scannability, and immediacy (Ogunlana et al., 2025). Findings from a number of empirical studies suggest that health organizations and their respective partners that have invested in these core features in their joint social media campaigns have significantly increased HIV testing and treatment uptake. For instance, in the context of the adoption of these features, Hanna et al., (2023), show how Facebook HIV-related joint campaigns in the US saw a substantial boost in HIV testing among young individuals. Similarly, empirical studies conducted in Australia such as the one published by Philpot et al., (2022), demonstrate how co-creation of information that took advantage of these core features increased knowledge and drive uptake in seeking HIV-related health care services in the region.

The same findings can be spoken about in the global south countries. For instance, a number of empirical studies conducted in Africa show that the use of social media in the co-creation of HIV-related information within the region is starting to become effective. Preliminary reports from Nigeria and South Africa for instance suggest that Facebook campaigns in those regions have been successful at getting information out as well as improving service utilization. More specifically, Ibrahim et al. (2024) study on targeted Facebook advertisements in Nigeria is associated with increased accountability for young people seeking HIV testing services. Such insights indicate the need for co-creation of information

to address the information divide and encourage young people to access health services.

The need for this kind of encouragement is particularly important in Kenya's Homa Bay Town where HIV prevalence is still high. As already intimated in the foregoing discussions, Facebook presents a good opportunity for such encouragement and advocacy geared towards increasing HIV-related service uptake. According to the National Syndemic Diseases Control Council (2020), social media and health promotion were recognized as effective digital health strategies. Action-based reports derived from empirical investigations within some urban areas in the country support this view by projecting collaborative Facebook-based campaigns, in more specific terms, as having the potential to drive a significant increase in the use of HIV testing and counseling services by young adults (Nasira, 2024). This is especially the case when the sustainability of these digital campaigns is not jeopardized or derailed. This means that effective sustainability of these campaigns depends on the role played by external actors to ensure that Facebook is no longer subjected to extreme costs around data accessibility tariffs, which poses a massive challenge to users (Wakahia and Owoche, 2024). Also, it is worth mentioning that the efficacy of Facebook's collaborative campaigns is hinged, in part, on circumventing, misinformation, disinformation, and malinformation, all of which have been rife on social media platforms, an occurrence that has led to the questioning of the effectiveness of such campaigns in delivering desired outcomes.

In conclusion, even though results indicate that Facebook is still an important instrument for HIV service provision, it may be more effective when used in conjunction with other community or health facility-based strategies. It is imperative to be cognizant that even though there is still much debate about the long-term effects of Facebook interventions, combining traditional programming and social media approaches can lead to the largest reach and impact. Improvement of internet access, affordability and the quality of information will all constitute an analytical framework for establishing how sustainable a Facebook page can be in providing an alternative viable route towards HIV prevention and treatment among the youth in Homa Bay Town.

III. Synthesis and Interpretation of Empirical Data

In addressing this study's objective, the empirical findings reveal that LVCT Health's digital communication strategy's core focus lies in its intentional and structured co-creation of HIV-related content with youth-led local opinion leaders from the Activate Action and Vuka Forces. This collaborative

approach represents a paradigm shift from traditional, top-down public health messaging to a participatory model of communication, where young opinion leaders are the co-designers and amplifiers of HIV-related information. LVCT Health acknowledges that these youthful opinion leaders are not just passive recipients of information but are active agents who shape, interpret, and disseminate health messages in a way that resonates with their peers. This resonates with an observation from Ogunlana et al. (2025) in Section Two where Facebook is recognized as an influential medium for co-creating information regarding HIV services globally. We saw that this was the case especially in the context of the core features Facebook afforded health organizations and their collaborative partners to co-create information.

This study's empirical findings show that through partnerships with youth-led organizations such as Activate Action, Vuka Forces, and DREAMS ambassadors, LVCT Health facilitates youth involvement in every stage of its content creation process right from identifying priority issues, designing messages, choosing language and visual formats, to piloting and disseminating the final content. As co-creators, these youth-led organizations bring a nuanced understanding of local slang, social behaviors, aesthetic preferences, and digital trends, which make the content relevant, culturally sound and emotionally captivating for their peers in Homa Bay Town.

This youth-centric co-creation process directly aligns with the multistep theory of communication where according to Katz and Lazarsfeld (1955), media messages first reach a group of influential individuals such as opinion leaders who interpret and filter the information before sharing it with others. In this way, the staff members from the youth-led organizations involved in LVCT Health's co-creation activities function as digital opinion leaders or peer influencers. Because they are a part of the target demographic, they naturally occupy influential positions within youth social networks, both online and offline, in their communal settings.

By actively involving these youthful opinion leaders in content creation, LVCT Health's approach resonates with the articulation of the multistep theory of communication process that empowers credible, relatable, and informed intermediaries that can break down complex HIV-related information into simple messages that feel authentic, accessible, and socially relevant. The youthful opinion leaders then play a critical role in the next step, which involves endorsing this content within their digital communities through their personal Facebook handles, group chats, shares, likes, and live interactions.

As one participant explained during an in-depth interview:

"We don't just write posts for LVCT Health, we talk about things we see every day. When I share something on my page, I know my friends will listen more because it's coming from me, not just an organization."

The above verbatim record is an illustration of how peer-led dissemination increases message credibility and uptake, especially among youth who may be skeptical about taking up HIV-related services available in the health facilities. The trust young people place in their peers speaks to the effectiveness of HIV-related messages, especially when they are framed by way of shared values, common experiences they resonate with, and common or familiar language. The LVCT Health team expressed that most young people are more likely to be persuaded not by direct exposure to social media messages but through the mediated influence of peers they consider knowledgeable and trustworthy.

Additionally, the co-creation approach also encourages continuous feedback between LVCT Health and young people. The empirical findings show that young contributors from local organizations including Activate Action and Vuka Forces play an immense role in shaping content, monitoring audience reactions, flagging emerging concerns, suggesting timely adjustments to posts, and recommending topics that resonate with intended target audience. This iterative process ensures that HIV-related messages remain receptive to young people in Homa Bay Town by way of its relevance and responsiveness to shifting attitudes, emerging myths, and digital communication trends.

These messaging strategies also boost engagement and reinforce the peer-to-peer diffusion of HIV information. As youth led partners and young people share, comment, and endorse content, they subtly shape the attitudes, beliefs, and behaviors of those within their networks, which ultimately contributes to the much-needed social change regarding HIV prevention, testing, care, treatment, and disclosure.

A. Participatory structures and youth partnerships

The empirical findings suggest that LVCT Health has invested in establishing participatory structures by working with youth-led organizations including Activate Action, Vuka Forces, Operation Triple Zero (OTZ) Champs, Youth Advisory Champions for Health (YACH) and the DREAMS initiative ambassadors. These groups serve not only as platforms for youth engagement but as an incubator for ideas, enabling young people to contribute meaningfully to every phase of content creation. This includes identifying the pressing HIV,

sexual and reproductive health needs of the young people, co-designing appropriate messaging to address them, conducting pre-tests of the messages by testing the linguistic nuances and tone for cultural and generational relevance, experimenting with appealing visual styles, and finally participating in the dissemination of content across Facebook and other channels.

The LVCT Health's co-creation process is multifaceted and intentionally inclusive. LVCT Health digital health team provides an avenue for youth participants to engage through a blend of formal engagements such as workshops, content design meetings, digital media training sessions, brainstorming sessions, social media pollings, and peer feedback sessions. These ongoing engagements ensure that the final disseminated content is accurate, informative and contextually resonant, reflecting the idioms, humor, visuals, and cultural sensitivities that matter to youth audiences in Homa Bay Town. By incorporating feedback loops and iterative dissemination of relevant content, LVCT Health ensures that messages are by the youth and for the youth, a strategy that enhances ownership, trust, and uptake.

It is possible to situate this youth-centered co-creation approach within the understanding of the multistep theory of communication, which posits that mass media messages rarely influence individuals directly. Instead, influence flows from media to opinion leaders, who then interpret and pass on these messages to others within their social networks. When you look at LVCT Health's digital communication strategy, youth ambassadors, and peer educators from partner organizations act as opinion leaders who are clearly illustrated in the articulation of the multistep flow of information. These young influencers do more than passively share content as they mediate meaning including adapting and contextualizing health messages to align with the values, concerns, and realities of their peers in Homa Bay Town. This contextualization makes the information more relatable, trustworthy, and actionable by the young people consuming disseminated content.

In addition, these youthful opinion leaders serve as social validators to their peers, helping to legitimize HIV-related content within communities where stigma, misinformation, and generational mistrust of institutional messaging persist. Given that opinion leaders are seen as credible, approachable, and share a part of the lived experience of their audiences, their endorsement can significantly increase message reach, relevance, and behavioral impact. In essence, LVCT Health leverages the social capital and embeddedness of these youth leaders from the local organizations to create a ripple effect, enhancing both the credibility and virality of its Facebook-based HIV education efforts.

This partnership strategy in co-creation of content does more than simply improve message dissemination as it creates a participatory communication style. In this approach, young people are not only seen as receivers or consumers of HIV-related information but also as active contributors and trusted conduits who mediate and reshare the information, aligning it with contemporary best practices in digital health communication.

B. Facebook as a platform for co-creation

This study's empirical findings demonstrate that the interviewed participants from the LVCT Health and the opinion leaders from Activate Action and Vuka Forces were aware about how Facebook's unique features support the co-creation model. One of the ways they mentioned was the aspect of Hypertextuality, where Facebook posts often embed hyperlinks to detailed HIV information, video stories, blogs, and helpline services, enabling users to explore content at their own pace and depth. This promotes interactive learning and sustained engagement beyond the initial post.

They also indicated that multimediality was another feature that allowed co-created messages to utilize multiple media forms including, short videos, animated explainers, colorful infographics, live Q&A sessions, memes, and user-submitted testimonials. Given how they use their Facebook page, the LVCT Health communication staff noted, for example, that in co-creation, multimediality could incorporate peer-created skits dramatizing the use of condom or animated reels explaining ART adherence. They claimed that these formats lend themselves to various learning styles and reduce all kinds of intimidation associated with clinical or technical language.

Additionally, with scannability, youth-centric visual design was evident across LVCT Health one2one™ Facebook content. The participants noted that posts were optimized for mobile viewing, featuring bold captions, emojis, bullet points, and local slang that make disseminated content sound familiar and easy to comprehend.

Lastly, the aspect of immediacy was demonstrated by real-time responsiveness, which manifested through comment threads, Facebook Live, and polls. Content is often timed to coincide with national health campaigns such as World AIDS Day or the Kenya HIV Testing Week, adding social momentum and urgency to the information shared.

C. Youth as message co-authors and campaign champions

This study's empirical finding also established that apart from the staff at Vuka Forces and Activate Action, the young people in Homa Bay also acted as opinion leaders by using their Facebook pages to communicate messages from the

LVCT Health's Facebook page. Data from interviews revealed that young people felt empowered by their role in developing and curating messages. Several youth-led campaigns that emerged directly from co-creation initiatives include:

#IChoosePrEP: This campaign was developed in partnership with representatives from the PEPFAR DREAMS ambassadors and Vuka Forces. This campaign was led by young people to humanize PrEP by featuring real-life narratives and comedic skits that demystified its use. Young women who participated in the campaign discussed side effects, common myths, and daily routines, making the topic approachable and personal. This campaign was extended to the LVCT Health's Facebook platform to increase knowledge and ultimately access to this HIV prevention method available at the local health facilities.

Let's Talk Condoms: This online Facebook campaign was conducted in the LVCT Health one2one™ Facebook page and featured a series of memes, videos, and community-generated posts tackling the taboo of condom use. This online campaign was driven by Activate Action youth and representatives of young people who designed relatable scenarios around condom negotiation based on their own experiences and decision-making processes in romantic relationships. This online campaign was equally aimed at promoting correct and consistent use of condoms to prevent HIV infections as well as sexually transmitted infections.

Know Your Status Challenge: In this Facebook challenge, the LVCT Health one2one™ digital health team encouraged young people to get tested for HIV infections and share their experiences, photos or statements of encouragement online to increase awareness and encourage uptake. This challenge was designed and rolled out by youth champions trained by LVCT Health who used Facebook stories integrating them to other social media sites such as TikTok, to maximize reach to young people and normalize testing.

These campaigns were not only shaped by youth voices but also disseminated by them, highlighting the mechanism of the multistep communication. Youth champions and peer educators from Vuka Forces and Activate Action, who were already embedded in social networks, became conduits for distributing HIV-related content through their own channels, lending credibility and increasing peer-to-peer diffusion. By framing health information within peer discourse, LVCT Health increased the likelihood of messages being received with openness and acted upon.

As a youth participant from Activate Action noted:

"It's not just about posting. It's about making sure that the story reflects what our peers would actually listen to, resonate with, and remember."

D. Impact of the co-creation model

This study revealed that LVCT Health one2one™ digital health team co-created messages with representatives from youth-led local organizations in Homa Bay Town that is Vuka Forces and Activate Action along side DREAMS ambassadors. It was evident that the co-creation process contributed to noticeable shifts in knowledge, attitudes, and service uptake among young people in Homa Bay Town. Focus Group Discussion (FGD) participants also credited the LVCT Health one2one™ Facebook campaigns, especially those featuring relatable narratives and locally contextualized scenarios, which helped them understand critical HIV-related topics such as PrEP eligibility, STI prevention, and ART adherence. Through tailored communication via reels, infographics, and conversational posts, LVCT Health demystified complex health concepts in youth-friendly formats to increase awareness. A 20-year-old female participant shared:

"I used to think PrEP is for people in marriages or sex workers. But then I saw a post of a young girl like me using PrEP and, talking about it like it's normal. That changed my mind."

This comment reflects a trend observed in the data indicating that when young people saw themselves represented in messaging either through language, visual imagery, and shared lived experiences, they became more receptive to the HIV information. Youth-driven digital narratives shared on the LVCT Health one2one™ page disrupted misconceptions and normalized conversations about HIV prevention and treatment.

One of the interviewed staff member from the LVCT Health communication team affirmed that youth-led content had real impacts. Vuka Forces, one of the local organizations working closely with health facilities in Homa Bay also reported a marked increase in walk-ins and inquiries related to PrEP, condom use, and HIV testing services following specific Facebook campaigns. In some health facilities, LVCT Health also noted a surge in appointments for HIV testing within days of posting relatable content about status awareness and sexual health.

This pattern embodies the bridging role of how co-created Facebook content or messaging can translate online awareness into increased HIV service uptake. Such outcomes equally

reinforce the value of strengthening participatory communication models in public health, where the target audience not only consumes but contributes to shaping the messaging. LVCT Health digital team has recognised the value of involving youth as message co-authors, which goes along way in cultivating greater sense of authenticity, credibility, and trust. Youth participants in this study reported feeling more confident recommending the Facebook campaigns to their peers because they had in a way felt they contributed to the message design themselves.

In Homa Bay Town, it is important to note that digitally active youth and local youth-led partners continue to serve as an influential change catalyst within their social networks, enabling modelling positive behaviours and reinforcing key health messages through comments, shares, and discussions happening in both online and offline community settings.

In addition, this study's empirical findings also reveal that the co-creation model appeared to reduce stigma and fear surrounding HIV-related topics, all of which impede access to services. Several participants said that the informal and humorous tone used in peer-generated memes, comments, and posts made it easier to talk about sensitive topics such as HIV testing, condom negotiation, and partner communication. This approach also helped in dismantling shame and positioned HIV prevention and treatment as a shared, youth-led responsibility.

LVCT Health's participatory approach to involving opinion leaders in content creation has increased the relevance, accuracy, and reception of HIV-related information on the LVCT Health one2one™ Facebook page and also enhanced its persuasive element among young people.

E. Challenges in the co-creation process

Despite its successes, the co-creation model faces a few structural and cultural challenges. Limited access to affordable internet and smartphones still remains a major barrier for some of the young people in Homa Bay. In this study, some participants admitted that they only accessed Facebook sporadically when free Wi-Fi was available, undermining the consistency of their engagement on the LVCT Health one2one™ Facebook page.

"I save bundles just for chatting, not watching videos. So unless I'm in town with Wi-Fi, I won't see most of the posts shared on the one2one™ page." – Male FGD Participant, 18 years

While LVCT Health one2one™ digital health team carefully moderates its official page, they still remain cautious of comments that may be misleading or carry harmful health

information shared by other users. Also, Facebook users from un-related pages also share some false claims, such as herbal HIV cures or myths about PrEP causing infertility, which could potentially confuse or deter young people from taking up such services. Due to prevailing cultural conservatism in Homa Bay Town, some youth remain reluctant to publicly engage with posts related to sexuality or HIV. This self-censorship equally undermines the reach and potential virality of otherwise impactful content.

“People will think you are sexually active or ‘loose’ if you comment on a post about condoms. So I read and keep quiet.” – Female FGD Participant, 21 years

F. Sustaining co-creation for future impact

In lieu of just focusing on the challenges, the participants noted some of the ways they sought to overcome co-creation challenges. In overcoming these challenges and scaling the co-creation model, the LVCT Health adopted a digital health strategy.

One of them was, advocating for low tech and affordable data plans or zero-rated access to HIV-related Facebook content would allow more access to HIV information. To encourage engagement among young people, it would be prudent to also incorporating anonymous interaction options to mitigate stigma on Facebook posts. Expanding digital literacy training to select youth leaders would also help youth to be receptive and critically evaluate online health content, and lastly, continuing and expanding training for youth in digital content production, storytelling, and basic public health communication would help in generating more person-centred narratives or testimonials that increase knowledge on HIV related subjects and also encourage uptake.

In conclusion, the empirical findings reveal that the co-creation strategy adopted by LVCT Health is an engaging youth empowerment technique that has been grounded in participatory principles and the recognition that health messaging is most impactful when it speaks with, rather than at, its intended audience.

IV. Conclusions and Recommendations

In response to this study’s objective regarding establishing how LVCT Health uses Facebook as a medium for co-creating HIV-related information for dissemination, the findings established that young people in Homa Bay do not only consume information disseminated to them but also take part as co-creators of content to be shared on the LVCT Health one2one™ Facebook page. Through organized youth networks such as Activate Action, Vuka Forces, Operation

Triple Zero (OTZ) Champs and Youth Advisory Champions for Health (YACH), LVCT Health’s digital team engages young people in brainstorming, reviewing, and validating the content or messages before it is posted on its Facebook page. This co-creation process includes focus group discussions, virtual feedback forums, and peer-led digital campaigns, all facilitated by the LVCT Health team. Such youth involvement ensures that the content disseminated reflect the lived realities, language, and interests of the young people who are the target audience. This participatory approach has significantly improved the reception, relevance, credibility, and resonance of the messages, as young people feel seen, heard, and represented in the digital content. This finding aligns with the multistep communication theory, where peer influence plays a critical role in shaping how information is received, internalized, and shared within digital spaces. In view of this, therefore, the study recommends that organizations working to reduce HIV infection among young people should collaborate with like-minded stakeholders to co-create and disseminate relevant information through social media platforms.

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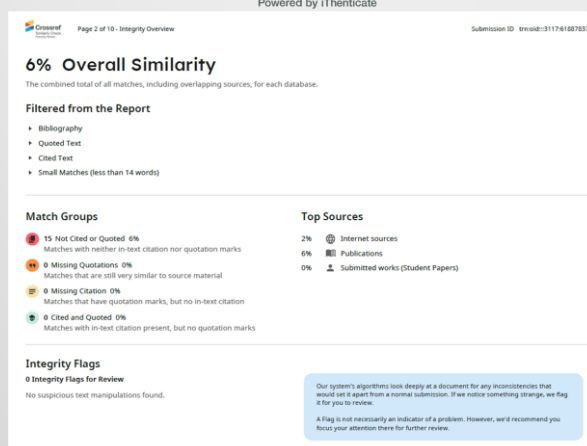
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