MYSTIC VALLEY PUBLIC HEALTH COALITION

Communications Planning Report & Recommendations

May 2025

PREPARED BY:

Susan Feinberg, MPH

Public Health Communications Consultant

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OVERVIEW

The Mystic Valley Public Health Coalition (MVPHC) comprises the health departments of Malden, Medford, Melrose, Stoneham, Wakefield, and Winchester. The coalition is funded by a six-year shared services grant from the Massachusetts Department of Public Health.

The MVPHC is currently focused on hiring regional shared services staff and improving external communications of the six health departments. In 2025, the MVPHC expects to hire a regional health communications specialist (RHCS) to support communication activities of the member health departments and coalition. None of the six health departments currently employ a full-time professional communicator. This new position presents a tremendous opportunity to increase the effectiveness of the health departments' communication strategies, channels, and content, and help define the public role of the MVPHC.

The MVPHC contracted with a public health communications consultant, Susan Feinberg, MPH, to audit the health departments' main communication channels, solicit input from health directors and staff communicators, and deliver recommendations for prioritizing the work of the regional health communications specialist and improving external communication channels.

The goal of the project was to:

- Review and critique the websites and social media accounts of the six health departments and MVPHC.
- Survey health directors and communicators to understand current practices and aspirations. Note: Communicators are staff who have a role in promoting the work and accomplishments of their health department, but it is not their primary job.
- Articulate potential roles for the regional health communications specialist from the health directors' perspective.
- Make recommendations for prioritizing the work of the regional health communications specialist in their first year.
- Provide recommendations for improving the websites and social media accounts of the six health department websites and the MVPHC.

METHODS

The consultant conducted an audit of the main MVPHC and health department communication channels, as well as solicited input from health directors and staff communicators. The consultant also reviewed health department news releases, annual reports, and a hospital community needs assessment. Here is a description of the information-gathering process:

Health department websites. The consultant reviewed top-level content on the six health department websites, which included most content linked from the homepages. It was not possible to get website analytics for the six websites.

Health department social media. The consultant reviewed posts on the health departments' Facebook and Instagram accounts that were published between fall 2024 and early winter 2025. For the Melrose HHS social media case study (see appendix), the consultant analyzed Meta Insights data for department's Facebook and Instagram accounts.

MVPHC website and social media. The consultant reviewed all pages of the MVPHC website and posts on the coalition's Facebook and Instagram accounts that were published between fall 2024 and early winter 2025.

Survey. The consultant and the MVPHC Shared Services Coordinator designed and implemented a communications survey on the Survey Monkey platform for MVPHC health directors and staff communicators. The survey's purpose was to gather information about current communication practices and aspirations, and to identify issues for further exploration. The health directors also answered questions about the future role of the MVPHC and priorities for the regional health communications specialist.

All four health directors and five staff communicators completed the survey. Anthony Chui, health director for Melrose, Stoneham, and Wakefield, answered the health department section of the survey separately for each health department and collectively for the MVPHC section of the survey. Thus, "six" health directors completed the survey's health department section and four health directors completed the survey's MVPHC section. The staff communicators represented the Medford, Melrose, and Wakefield health departments.

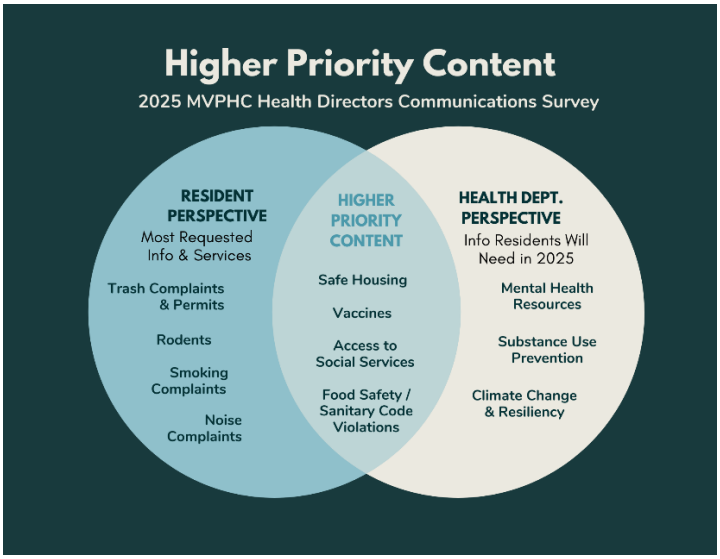
FINDINGS

Health Departments

Prioritizing Topics for Content Development

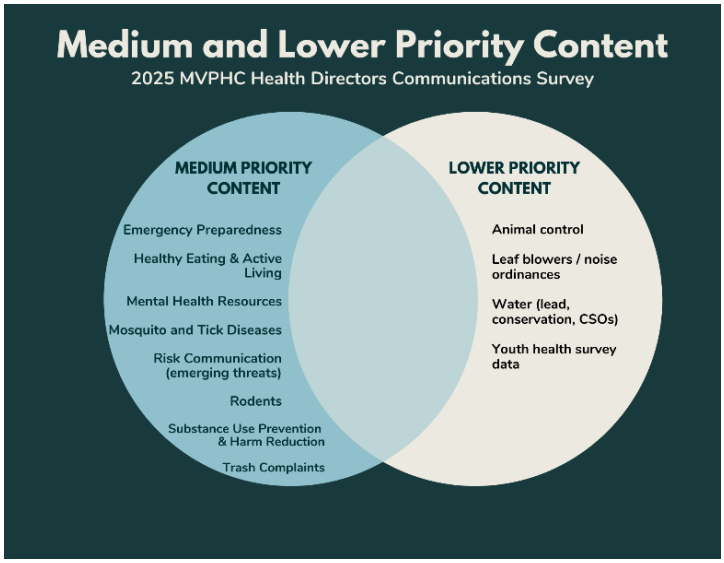
Higher Priority Content

The MVPHC Health Directors Communications Survey asked health directors about information and services most requested by residents and information that will be most needed by the community this year. The middle column in the diagram below shows topics of interest to both residents and health departments: safe housing, vaccines, access to social services, and food safety.



Medium and Lower Priority Content

The medium and lower priority categories were determined by each topic's relevance to all six communities and the proportion of health directors who named the topic as a departmental health priority and reported that residents will need information on the topic this year.



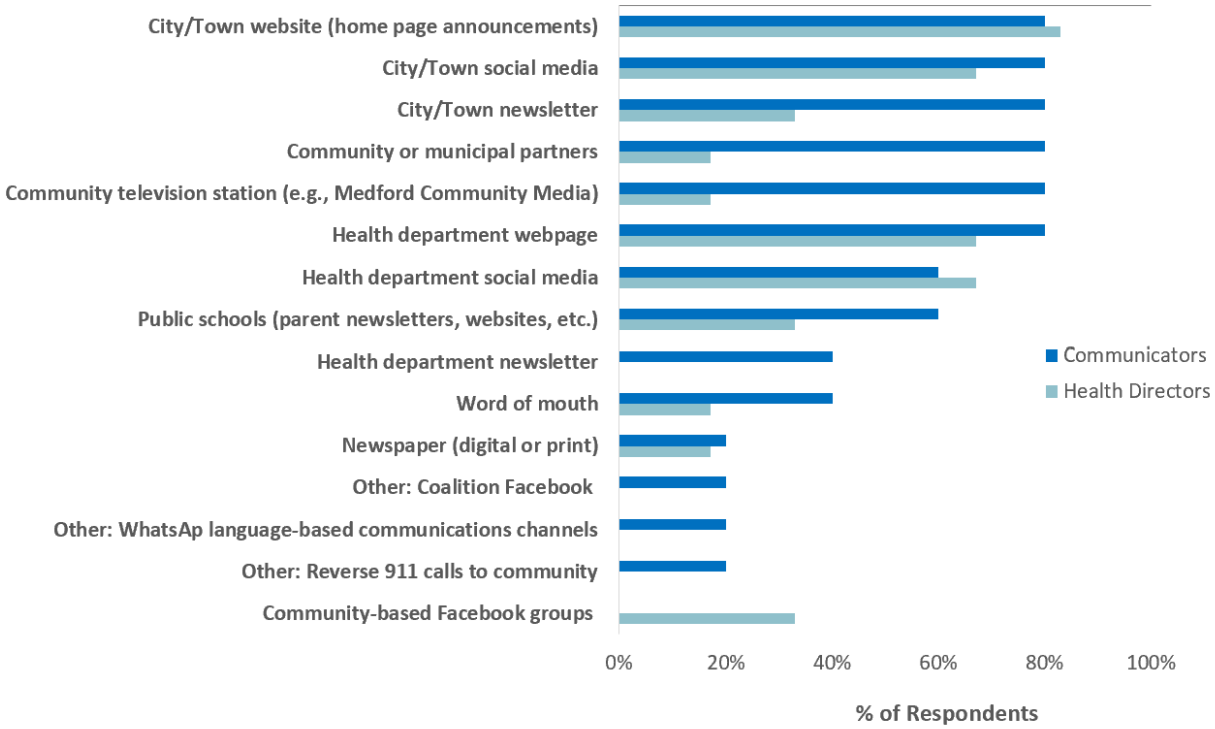
See Recommendation 2

Top Communication Channels for Health Departments

Health directors and staff communicators were asked about their "go to" communication channels for sharing health department news, events, and services with residents and businesses. Municipal websites and social media received the highest proportion of responses from both directors and communicators. Both groups voiced similar reliance on health department websites and social media. Typically, municipal websites, municipal newsletters, and to a lesser extent, municipal social media are effective ways to reach civic-minded residents who are regular consumers of city/town information.

Communicators, who are directly involved in getting information to the public, were more likely than health directors to report using municipal newsletters, partners, community television, school communications, and word-of-mouth. Some of these communication channels, such as word-of-mouth and community partners, are excellent ways to get information to hard-to-reach groups. In addition, the Medford Health Department's community outreach team uses language-based communications channels on WhatsApp to push out important health and human services information in Spanish, Brazilian Portuguese, Haitian Creole, and Arabic.

"Go To" Communication Channels for Sharing Health Department News, Events, and Services with Residents and Businesses



Note: Survey takers were asked: "What are your regular "go to" communication channels for sharing your health department's news announcements, events, and services with residents and businesses? [Check all that apply]" They were given 12 choices, including "other."

See Recommendation 4

Top Communication Priorities for Health Departments

The surveys asked health directors and staff communicators how they would improve communications at their health department if they had some additional resources by rating a list of 10 potential priorities. Developing outreach strategies for communicating more effectively with hard-to-reach groups was the first choice and creating accessible content was the second choice for both directors and communicators. Making it easier to find information on health department websites was also a top 5 choice for both directors and communicators.

Top 5 Communication Priorities

Health Directors	Communicators
1. **Develop outreach strategies** for communicating more effectively with hard-to-reach groups	1. **Develop outreach strategies** for communicating more effectively with hard-to-reach groups
2. **Create accessible content** (digital & print) for people with disabilities and limited English (e.g., translated or easy-to-read materials)	2. **Create accessible content** (digital & print) for people with disabilities and limited English (e.g., translated or easy-to-read materials)
3. **Update/improve content** on our health department webpages	3. **Create public awareness campaigns**
4. **Make it easier to find information** on our health department webpages	4. **Improve social media engagement** (posts reaching more people)
5. **Get more public health news included in city/town communications** (e.g., municipal website, social media, newsletters)	5. **Make it easier to find information** on our health department webpages

Note: The Top 5 Communication Priorities for MVPHC health departments were determined by weighted average. Rating options were "not a priority," "low priority," "medium priority," "high priority," "essential priority," and "unsure / don't know."

See Recommendations 3, 4, 7 & 8

Health Department Websites: SWOT Analysis

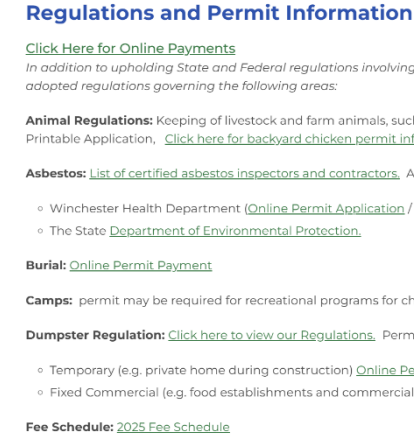
The consultant reviewed top-level content on the six health department websites. Some observations:

- The six health departments are focused on largely the same health issues and provide many of the same services. However, the quality, quantity, and location of information about these issues and services on the health department websites varies greatly.
- Each health department has organized its website information differently, with some organizational structures succeeding more than others.
- The health department websites have little or no information about the departments' shared programs, including the MVPHC and regional tobacco program.

Strengths

Individual health department websites have model content on topics of common interest that could be copied or adapted by other coalition health departments. Examples of "model" content:

- Permit applications: Wakefield, Winchester
- Permit fees (page layout): Stoneham, Wakefield
- Flu Clinics: Winchester
- Regulations: Melrose, Medford
- Board of Health (contacts, minutes, agendas): Wakefield, Malden
- Hazardous Waste: Winchester
- Medication and sharps disposal: Wakefield, Malden
- Backyard chickens: Winchester
- Mosquitoes: Wakefield, Malden
- Rodent control: Melrose, Medford (city page), MVPHC website
- Tobacco and Vaping: Stoneham is a good start
- Housing complaints: Stoneham
- Social services guide: Melrose (HTML list); Wakefield (nicely designed PDF guide)



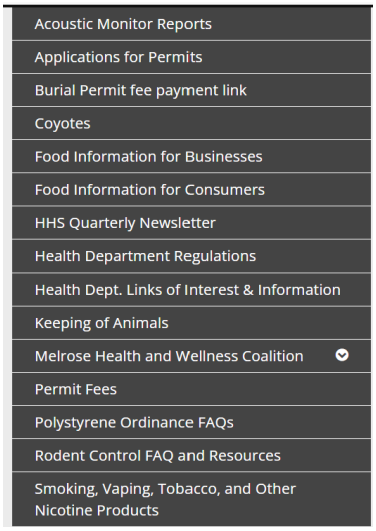
Nicely organized Regulations and Permit Information page (Winchester)

Wakefield's attractive social services guide.

Weaknesses / Challenges

- Some homepages are not as engaging or visually appealing as they could be.
- Some homepages feature out-of-date news articles or have no news articles.
- Some websites are missing information on key services (e.g., flu clinics, TB, tobacco).

- Some websites have outdated materials (e.g., pandemic-era Covid-19 links, old data).
- Some websites have broken links.
- The main navigation system for some websites is a collection of topics without a clear hierarchy, which makes it harder for residents to find what they're looking for. (See right column.)
- Some websites have vague main navigation headers such as "links of interest," "useful links," "public education and information," and "public health concerns."
- Four of the six health department websites do not have information about the MVPHC.
- Most websites lack a short description of community coalitions and instead link directly to coalition websites. This is a missed opportunity to explain the health department's role in the coalition.
- Most websites do not have date marks (e.g., "posted on," "last reviewed," or "last revised" dates) at the bottom of webpages.

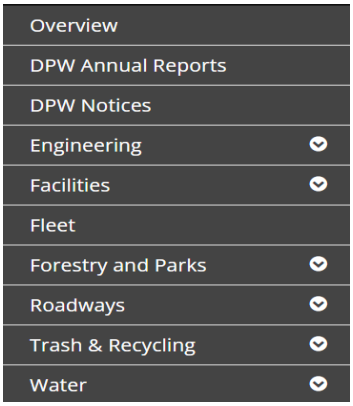


Example of a main navigation system that does not have a clear hierarchy. This alphabetized list of navigation topics combines main categories and subcategories, which can be confusing to users. For instance, "burial permit fee payment link" could be a subcategory of "permit fees" and "polystyrene ordinance FAQs" could be a subcategory of "health department regulations."

Opportunities

See Recommendation 7 for detailed suggestions

- Work with municipal IT staff on accessing CivicPlus health department website analytics.
- Identify local health department websites that could be models for navigation, category labels, and content organization.
- Improve navigation and content organization so users can quickly find what they're looking for.
- Make "high interest" content easy to find.
- Redesign health department homepages so they are less static and more engaging.
- Create a system to ensure that content is current.



The Melrose DPW website's alphabetized list of navigation topics features only main categories. Subcategories only appear when the user clicks on a down arrow.

Threats (external)

- The CivicPlus website platform may have limitations that prevent data analysis.
- Health departments may not have the funding to hire outside contractors to address major issues.

Health Department Social Media: SWOT Analysis

This is a collective review of the following social media accounts:

- Melrose HHS: Facebook, Instagram (no Twitter)
- Medford health department: Instagram (no Facebook or Twitter accounts)
- Malden: Facebook, Instagram
- Stoneham: Facebook

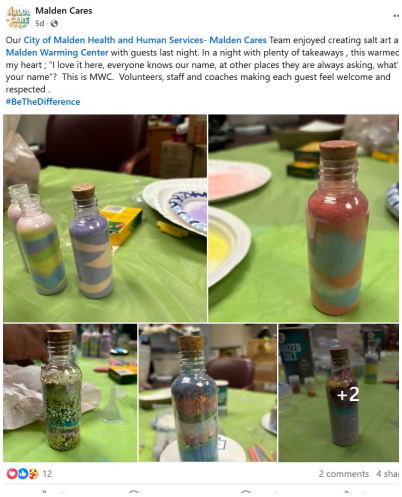
The consultant could not find Facebook, Instagram or X/Twitter social media accounts for:

- Winchester Health Department
- Wakefield Health and Human Services

Strengths

- Posts that have a simple message (see "Change" post in right column).
- Posts that tell a story.
- Posts that tag groups with large or engaged followings (see post about the Malden Warming Center in the right column).
- Posts about local events.

This Malden Cares/Malden Health Dept. post conveys a simple, clear message.



This Malden Cares/Malden Health Dept. post about a warming center activity succeeded because it's a feel-good story about a local organization and that organization has a highly engaged social media following.

Weaknesses / Challenges	• The health department social media accounts are not linked from the health department websites. • Most posts reflect the interests of the health departments and these interests may not always be shared by residents. • Many posts are text-heavy and convey too much information. • Posts with prevention messages may not resonate with intended audiences, especially fear messages. • All MVPHC health department social media accounts have small followings (<500), which makes it harder for the posts to be seen by a wider audience, especially if they are not being shared by users. • Posts about national holidays or public health observances typically have low engagement.	 *Too much information!*  *Nice design but perhaps wrong message. Fear messages don't resonate as well as those that emphasize benefits to the audience.*
Opportunities	**See Recommendation 8 for detailed suggestions** • Link to social media accounts from health department homepages. • Review social media analytics every 2-3 months to track reach and engagement of posts. • Experiment with strategies for reaching a wider audience (see Recommendation 8). • Prioritize content that is of high interest to residents (e.g., events, news). • Create visually engaging posts with less text (see Recommendation 8). • Consider leaving X/Twitter (if this doesn't run afoul of public records laws) and joining BlueSky.	
Threats (external)	• Social media companies' algorithms may reduce reach of health department posts. • High number of sponsored posts in users' feeds may result in followers not seeing health department posts.	

Mystic Valley Public Health Coalition

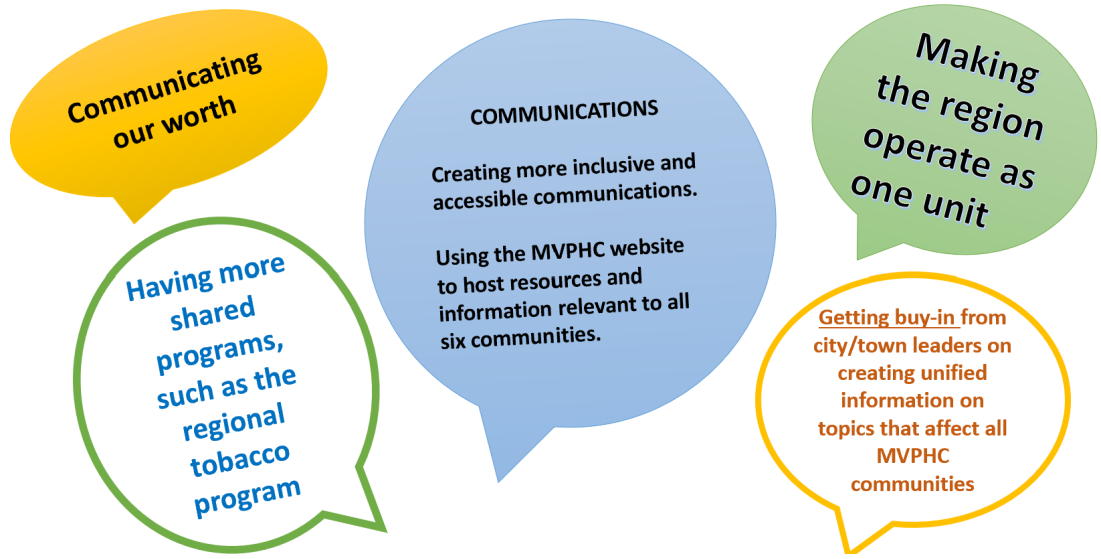
The Health Directors Communications Survey asked the directors three questions about the MVPHC:

1. What do you believe are the biggest challenges facing the MVPHC? (Open-ended)
2. What do you believe are opportunities for the MVPHC? (Open-ended)
3. How would you like to see the MVPHC evolve over the next 3 to 5 years? (Multiple choice)

Here are the responses to the open-ended questions:

Biggest Challenges

Opportunities



See Recommendations 5 and 6

Evolving Role of the MVPHC

Health directors were asked how they would like to see the MVPHC evolve over the next 3 to 5 years. They were given two choices: "no significant change" or "some change."

All health directors chose "some change," which the survey described as:

> *Additional shared positions (if funding available), more shared programs (if funding available), and streamlined content (e.g., identical tobacco program content on all six websites, a single resource guide on behavioral health services for all six communities). The MVPHC will have a bigger public presence (e.g., description of MVPHC on all six websites, MVPHC logo on regional communication materials), but each health department will retain its distinct unique identity.*

From a communications perspective, the health directors' unanimous choice of "some change" is an opportunity to raise the visibility of the coalition among city/town leadership and the community.

See Recommendations 5 and 6

Regional Health Communications Specialist: Work Priorities for Year 1

The survey asked health directors to rate seven potential Year 1 work priorities for the regional health communications specialist (RHCS). The rating choices were "not a priority," "low priority," "medium priority," "high priority," "essential priority," and "unsure / don't know." The priority ranking in the table below was determined by weighted average.

The top three priorities received a "high" or "essential" rating from all four health directors. These priorities focus on planning and building relationships with the health directors, staff communicators, and community outreach workers.

The remaining four priorities are projects or activities:

- **Streamlining communications** through creating shared content and following similar communication policies and practices.
- **Supporting communications activities of individual health departments**, such as providing technical assistance on a marketing campaign or creating flyer templates that could be used by multiple health departments.
- **Maintaining and improving the MVPHC website.**
- **Promoting the MVPHC to coalition communities.**

Regional Health Communications Specialist work priorities for year 1 rated "high priority" or "essential priority" by health directors

		% of Health Directors Who Rated Priority "High" or "Essential"
1	Meet with health department communicators in the six communities to learn about current communications activities, practices, and processes.	100%
2	Build relationships with municipal community engagement staff in the six communities to learn current practices for communicating with hard-to-reach/vulnerable populations.	100%
3	Gather data to determine high priority communication topics and effective ways to reach intended audiences.	100%
4	Streamline communications. Create content that can be used by all six health departments (e.g., identical tobacco control program content for all six websites, a single behavioral health resource guide or template for all six communities).	75%
5	Support communication activities of individual health departments. (Example: "Can you edit this announcement about our department's new grant?")	75%
6	MVPHC website. Collaborate with MVPHC colleagues to make improvements and maintain the MVPHC website (mysticvalleyphc.org).	75%
7	Promote MVPHC to member communities. Examples: Creating boilerplate description of the MVPHC for all six health department websites or co-branding regional materials with the MVPHC logo.	50%

Note: Health directors were asked to rate seven potential work priorities for the RHCS. The rating choices were "not a priority," "low priority," "medium priority," "high priority," "essential priority," and "unsure / don't know." The ranking of the seven potential priorities was determined by weighted average. Source: MVPHC Health Directors Communications Survey (2025)

See Recommendations 1–6

MVPHC Website: SWOT Analysis

Strengths

- Visually attractive website.
- Website text is easy to understand and follows "plain language" principles.
- Page designs use plenty of white space (i.e., not text-heavy), which improves readability.
- "Rodent Management in the Mystic Valley" and "Trash Management" sections could be content models for a revamped MVPHC website. These sections are successful because they cover hot topics, and content is visually appealing and specific to Mystic Valley communities.

Visually appealing pages that are easy to read.

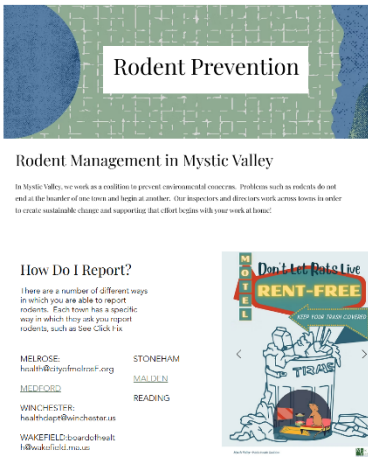
Weaknesses / Challenges

- Who is the primary audience for this website? It's unclear if the content is intended for residents or the MVPHC health departments.
- The main navigation categories—family, community, safety—seem too broad. What do these categories mean and how much of the content is relevant to the MVPHC audience(s)?
- With so many external links to resources, it will be challenging to prevent broken links (unless the website host provides a link checker).
- Most health department websites do not reference MVPHC or provide a link to the MVPHC website.

Opportunities

See Recommendation 6 for detailed suggestions

- Analyze the effectiveness of the current website using website analytics.
- Connect with key stakeholders to find out if the website is useful to them.
- Decide whether to keep the website as is, take it offline (and not have a MVPHC website), or invest in improving and updating the current website.



The "Rodent Prevention" page succeeds as a website topic because rodent prevention is a topic of interest to residents in the six MVPHC communities.

Threats (external)	● Will residents of the six communities come to the MVPHC website for local health information? ● Health directors will need to balance the potential benefit of investing time and resources into the MVPHC website against the potential loss of grant funding.	

MVPHC Social Media: Critique & Opportunities

Critique

- Most posts seem aimed at residents, but the audience viewing the posts seems to be mainly providers and MVPHC staff, based on likes.
- The MVPHC Facebook and Instagram posts rarely focus on MVPHC communities and instead highlight public health or social justice observances or national holidays. While the posts themselves are often attractive, they may be too generic to resonate with residents.
- Many posts are information-heavy and instructional (e.g., short biography of MLK), and as a result, may get low engagement.

Examples of MVPHC Instagram posts on public health observances and holidays.

Opportunities

See Recommendation 6 for detailed suggestions

Before RHCS is hired:

- To make better use of staff resources, consider pausing new social media posts until a new social media strategy is in place.

After the RHCS is hired:

- Look at the Facebook and Instagram Insights data to determine reach and engagement of posts.
- The RHCS should meet with the staff person currently posting on MVPHC social media to understand current goals for the two social media accounts.
- Decide if the goals of social media accounts should stay the same or change.
- A potential strategy would be using the social media accounts to amplify posts from the coalition health departments.
- Considering deleting the MVPHC Twitter account (if allowed under public records laws) since the last post was in 2019.

MVPHC Instagram post promoting a local health event in Medford.

RECOMMENDATIONS

Regional Health Communications Specialist – Year 1 Priorities

Planning and Relationship-Building Phase (1-2 months)

1. **Develop a work plan and build relationships**
   - Read the MVPHC Health Directors and Communicators Survey Summary and this recommendations report.
   - Meet with health department staff communicators to learn about their current communications activities, practices, and processes, including their approach to accessible communications.
   - Build relationships with staff communicators to streamline processes and collaborate on projects.
   - Build relationships with municipal and public health community engagement staff to learn about current practices for communicating with hard-to-reach groups.
   - Gather additional data to determine higher priority communication topics and effective ways to reach intended audiences.
     Potential sources:
     - Higher priority topics identified in this report (see p. 4).
     - Website analytics: If available, look at most visited pages and popular search terms.
     - A tally of calls received by front office staff categorized by topic over a set period of time.
     - Online resident survey on local public health topics of interest and preferred ways to receive health department information.
     - Winchester Health Department's opioid survey question on residents' preferred communication channels.
   - Develop a work plan for Year 1.

Communications Projects – Phase 2 (10 months+)
Here are potential Year 1 projects for the RHCS that would be valuable to the individual health departments and the coalition.

2. **Create shared content that can be used by all six health departments and explore the feasibility of developing common communications protocols.**
   - The RHCS should work with staff to write about identified higher priority communication topics, such as safe housing, vaccines, access to social services, and food safety. Depending on the topic, the content might be identical or similar for all health departments.
   - Shared content could be published on the health department websites and MVPHC website; adapted for social media posts; and used in other materials, such as resource guides.

- The RHCS should work with staff communicators and directors to determine the feasibility of creating common communications protocols and best practices across some or all health departments.

3. **Gather and share guidance and best practices for creating accessible digital content and print materials**

   Accessible communication is the practice of making information easy for everyone to understand and use, including people with disabilities. Accessible digital and print content is especially important for people with low vision (or anyone who uses a screen reader), dyslexia, hearing difficulties, low literacy, or limited English. Key practices that improve accessibility include using plain language; offering information in different formats (text, audio, video, graphics); using consistent formatting; and providing alternative text descriptions for images and videos.

   - Learn about accessible communications best practices. Many colleges and universities have excellent guides on creating accessible digital content. Check out University of Washington's Accessible Technology website and DO-IT Program; and Stanford University's Office of Digital Accessibility.
   - Meet with the Town of Wakefield communicators (town's communications director and health department communicators) and Medford Health Department (staff communicators and Medford Connects staff) to find out how these municipalities are implementing accessible communication practices.
   - Determine which accessibility practices can be adopted in the short-term, medium-term, and long-term.

4. **Develop strategies for communicating with hard-to-reach populations**

   Hard-to-reach groups are less likely to access conventional government communication channels, such as municipal or health department websites, social media, and newsletters. MVPHC hard-to-reach groups can include isolated elderly residents, people with disabilities, residents from other cultures, people with limited English or low literacy, and people who are unhoused.

   - Review the demographics for each MVPHC community. See the MelroseWakefield Hospital and Lawrence Memorial Hospital 2022 Community Health Needs Assessment 1-page community profile summaries on Malden, Medford, Melrose, Stoneham, and Wakefield (pp. 82-89) and/or census data for all six municipalities at the U.S. Census' Explore Census Data and Census Reporter.
   - Meet with Medford Connects and other staff involved in community outreach to learn about current outreach practices and challenges in getting information to hard-to-reach groups.
   - Identify hard-to-reach groups in each MVPHC community.
   - Build connections with community organizations who serve identified hard-to-reach populations and discuss ways to get information to their clients or members.
   - Work with staff communicators to promote and implement evidence-based health communication practices, including creating culturally and linguistically appropriate digital content and print materials.

5. **Promote MVPHC to member communities**
   - Work with health directors to articulate an identity for the MVPHC by creating a mission and vision statement, developing coalition goals, and crafting a short description of the coalition and its role in the six communities.
   - Include the short description of the MVPHC on websites, news releases, and regional communication materials.
   - Use the MVPHC logo on regional communication materials.
   - Create an MVPHC web page on each health department website.

6. **Improve the MVPHC website and social media.**

   Short-Term Actions
   - Review MVPHC website SWOT analysis in this report.
   - Gather data to help determine the website's usefulness to the community.
     - Review website analytics to find out about overall website traffic and traffic to individual web pages of the website. Other useful metrics include most and least popular PDF documents (measured by number of downloads); popular search terms; and how users are finding information (e.g., search engines, site navigation).
     - Connect with key stakeholders (or do a short survey) to find out if the current website is offering useful information to these groups, what type of information they would like to see on the site, and if they think there's a need for an MVPHC website. Stakeholders might include school and community partners, health department staff, and municipal communications staff.
   - Consider taking the current MVPHC website offline until it is redesigned unless staff, partners, or the public are actively using it.

   Long-Term Actions
   - Have conversations with health directors and MVPHC staff about the future of the MVPHC website based on research outlined in the "short-term actions" section.
   - If MVPHC leadership wants to move forward with a website reorganization and/or redesign, the RHCS (or other staff) should:
     - Produce a "creative brief" (strategic plan) for the MVPHC website redesign or reorganization. The creative brief should include website goals, objectives, and primary audiences. Depending on the goals, primary audiences might include the residents, businesses, community organizations, schools, or health departments.
     - Determine if desired website changes could be made by MVPHC staff or if an outside web developer/designer would need to be hired.
     - Determine if/how the project would be funded if outside resources were needed.
   - Elements of the revamped website might include:
     - New navigation system, main category labels (to replace Community, Family and Safety), and content organization.

- Curated shorter lists of state and federal resources.
- Prioritization of content that provides useful information on MVPHC shared services and/or areas of interest to all six MVPHC communities.

- Promotion of the revamped website might include:
  - Linking to the MVPHC website from the six health department websites.
  - Adding the MVPHC website URL to communication materials.

MVPHC Social Media

Short-Term Actions (before RHCS is hired):

- Review the MVPHC social media "critique and opportunities" section in this report.
- Gather Facebook and Instagram analytics data to help determine if social media posts are reaching intended audiences (i.e., residents of the six communities). For ideas on how to analyze the data, see the Melrose HHS Social Media Case Study in this report.
- If MVPHC posts are not having an impact (i.e., reach is low), consider pausing posts to MVPHC Instagram and Facebook.
- Consider deleting the MVPHC Twitter account (unless prohibited by public records laws) since the account hasn't been used since 2019.

Medium-Term Actions (after RHCS is hired):

- MVPHC staff should decide whether to repurpose the MVPHC Facebook and Instagram accounts or delete them (if allowed under public records laws).
- If the MVPHC decides to keep the two accounts active, consider reducing the frequency of original posts and focusing on amplifying Facebook and Instagram posts of individual health departments. This would be accomplished by sharing their Facebook posts and collaborating on important Instagram posts.
- The RHCS could also support individual health department social media efforts by creating stock Facebook and Instagram posts or templates. For instance, the RHCS could create social media templates for certain events (e.g., vaccine clinics), information (e.g., medication drop-off locations) and news (foodborne illness outbreak, WNV risk level) that could be easily adapted by health department communicators.

Individual Health Department Projects

7. Improve Health Department Websites

Short-Term Actions

- Review health department websites: collective SWOT analysis in this report.
- Review the redesigned Medford Health Department website, which should be completed in spring 2025. The new website may offer solutions that resolve some organizational and content issues affecting all MVPHC health departments.
- Make high demand services easy to find, including housing complaints, household

hazardous waste days, medication/syringe disposal, flu clinics, and trash complaints.

- Fix urgent website content problems:
  - Delete outdated material and replace with current versions, as appropriate.
  - Delete content that is no longer needed.
  - Fix or remove broken links.
  - Take down websites for programs that no longer exist.
  - Make sure all permit fees are current and pages with old fees have been removed.
  - Start adding dates at the bottom of all web pages: New content: "Posted on 1/1/24"; updated content: "Updated on 1/1/24"; reviewed content: "Last reviewed on 1/1/24."
- Create a system for reviewing all web pages, and updating or removing old content. Each page should be reviewed at least once a year.

Medium-Term Actions

- Find out if it is possible to access CivicPlus analytics for health department web pages. This information should help guide website reorganization and content development efforts.
- Content development and organization:
  - The RHCS should create content for "higher priority" topics that impact all MVPHC communities.
  - The RHCS should work with appropriate staff to create content for shared programs, such as the Regional Tobacco Prevention Program and the regional emergency preparedness coalition.
  - The RHCS should create a short description of the MVPHC that can be posted on the six health department websites.
  - Health departments could adopt a common web layout for permit applications and fee schedules.
  - Health departments could consider creating a directory or list of department services and programs.
  - Health departments could consider cross-posting news announcements on both the municipal homepage and the health department homepage, if feasible.

Long-Term Actions

- Redesign health department homepages.
- Do a formal content reorganization with staff and public input. See article on website organization using digital card sorting.

8. Improve Health Department Social Media

Review the Data

- Use Facebook and Instagram analytics to determine (1) what type of posts are getting the most reach (how many people see a post) and engagement (level of interaction with a post) and (2) the best times of day to post. Try to review analytics

every 2-3 months. For ideas on how to analyze the data, see the Melrose HHS Social Media Case Study in this report.

Reach a Wider Audience

The RHCS and health department communicators should develop strategies for reaching a wider audience via social media. Since it is likely that only a small number of posts are reaching residents' feeds, the team may want to consider:

- Getting more followers by promoting health department social media accounts on the health department website, in newsletter articles, and at community events (e.g., tabling).
- Asking followers to "like" content to boost reach and engagement.
- Posting on community social media:
    - Joining and posting on community-run Facebook groups for residents (e.g., Melrose MA Community Group, Malden Neighbors Helping Neighbors). These groups are a great way to see what issues matter most to residents and to promote relevant health department events and news. Some community-run Facebook groups are private and staff will need to request to join.
    - Finding community "public health ambassadors" who can post on NextDoor, WeChat (a popular Chinese instant messaging, social media, and mobile payment app), and similar platforms.
    - Asking community and government partners to repost important posts (Facebook) or collaborate on posts (Instagram) to increase engagement.
    - For posts aimed at parents and caregivers, ask the K-12 schools to post on their social media accounts.
    - For important news and events, ask the municipality's communications staff to post on the city/town social media accounts.

Keep Posts Engaging

- Be thoughtful about posting content relevant to residents. Staff may want to experiment with primarily posting high value content (e.g., local public health events and news) and skipping "filler" content that only a small number of people may see. Examples of filler posts are holiday posts and public health observances with no local component.
- Create posts that users will like or share. For instance, a simple quote and image may be more effective and get more shares than a text-heavy, educational post.

APPENDIX:

Melrose Health & Human Services: Social Media Case Study

To better understand why some MVPHC health department posts go viral locally and others are hardly seen, the consultant looked at analytics for the Melrose Health and Human Services Facebook and Instagram accounts. Data was gathered from Meta's free analytics platforms: Facebook Page Insights and Instagram Insights.

For this informal case study, the consultant gathered data on:

- Audience and total reach data for Facebook and Instagram Sept. 7 – Nov. 6, 2024
- All individual Facebook posts published between Aug. 23 – Nov. 18, 2024

Glossary of Terms

- **Audience:** On Facebook and Instagram Insights, the audience tab shows demographics of only followers, not everyone who interacted with a post. (Source: Meta)
- **Facebook Algorithm:** A complex system that determines the content shown to users based on their interests, engagement history, and demographics. It customizes each person's feed to show the most relevant and engaging posts, making their experience unique. (Source: SocialPilot)
- **Instagram Algorithm:** A set of rules that rank content on the platform. It decides what content shows up, and in what order, on all Instagram users' feeds, reels, stories, and so on. (Sources: Hootsuite and Instagram Ranking Explained)

The three main metrics for measuring social media success are:

- **Engagement:** The number of times people interact with your post. This can include comments, shares, reactions, likes, and clicks.
- **Impressions:** The number of times a post is displayed, no matter if it is clicked or not.
- **Reach:** The estimated number of unique people who see your content.
  (Source: Sprout Social's Reach vs Impressions vs Engagement on Social)

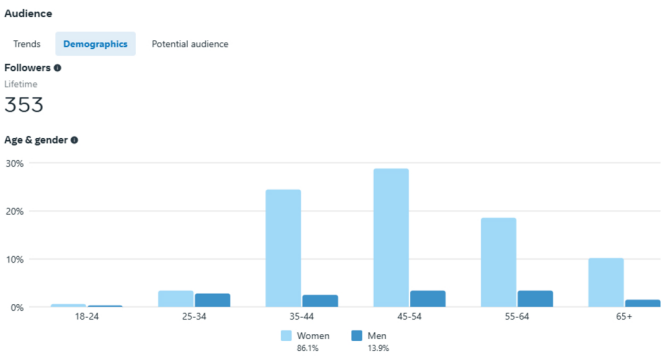
FINDINGS

Facebook and Instagram: Audience and Reach

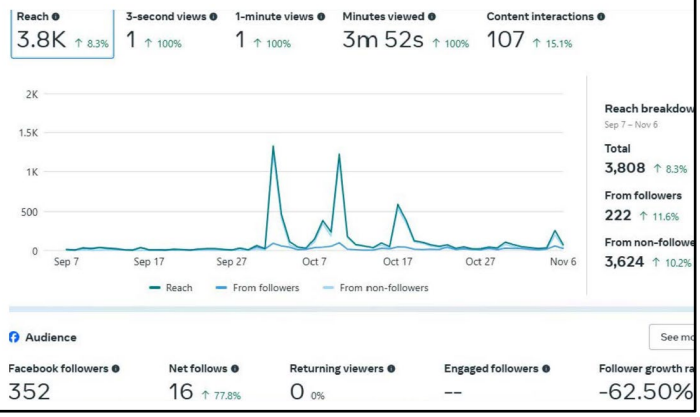
Key Takeaways:

- Among the 300+ followers of the Melrose HHS Facebook and Instagram pages, just over 50% were women ages 35-54. Women comprise 86% of the total Facebook followers and 80% of the total Instagram followers.
- The Facebook posts reached an estimated 3,800 people and the Instagram posts reached an estimated 205 people between Sept. 7–Nov. 6, 2024.
- A small number of high-performing posts were responsible for most of the reach for both the Facebook and Instagram accounts.
- Facebook and Instagram followers are NOT seeing most Melrose HHS posts.

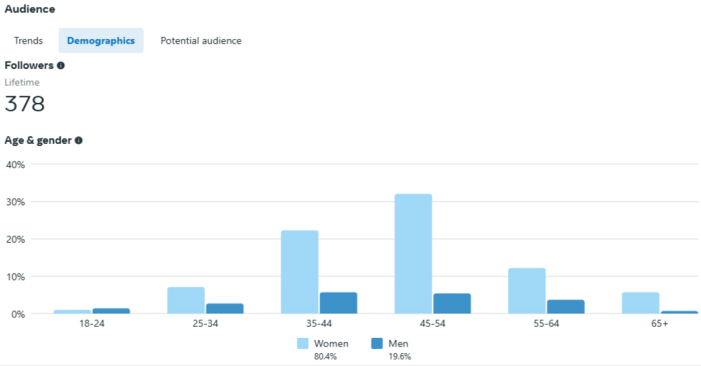
Facebook Audience: All Followers



Facebook Reach: Sept. 7-Nov. 6, 2024



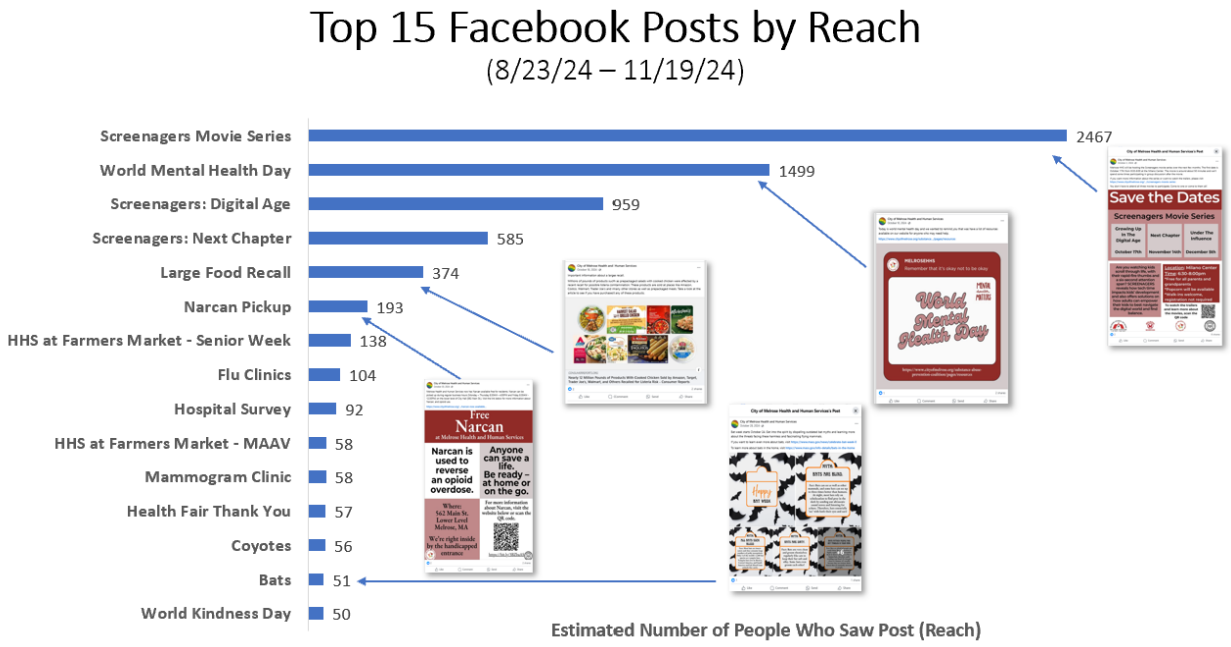
Instagram Audience: All Followers

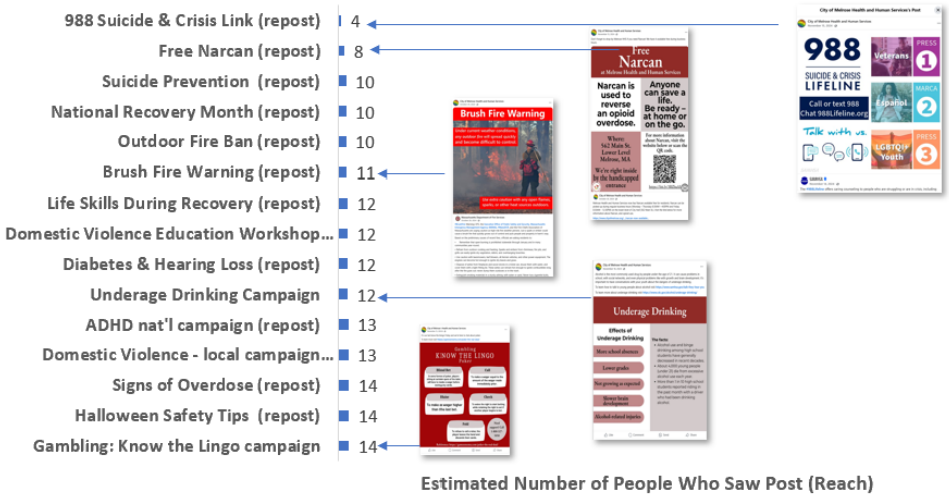


Instagram Reach: Sept. 7-Nov. 6, 2024

Facebook Analytics: Individual Posts

Facebook Insights provides data on individual posts over a period of time. For each post, you can see the post description and link, publication date and time, impressions, reach, reactions, comments, shares, and clicks. Melrose HHS staff exported data on all posts published between Aug. 23–Nov. 19, 2024. The data were sorted by reach—the estimated number of people who saw a post—resulting in a list of 95 posts ranked from highest to lowest reach. The consultant analyzed the top 15 posts with the highest reach and the bottom 15 posts with the lowest reach.





Key Takeaways

Original vs Reposted Content

The top 15 posts were all original posts, while 13 of the bottom 15 posts were reposts or "shares." This trend applies to all 95 posts: The top 25 posts with the greatest reach were all original posts, while the bottom 25 posts with the lowest reach were 84% reposts.

Type of Content

- The majority of the top 15 posts promoted local health events, including the *Screenagers* movie series, HHS tabling events at the farmers market, a breast cancer screening, free Narcan pickup, and a flu clinic. Original posts about local health events were more likely to end up in the top 15 than any other type of post (see table).
- The majority of the bottom 15 posts were educational, including reposts from national health campaigns. Topics included the 988 crisis line, recovery posts, diabetes, underage drinking, ADHD, domestic violence, Halloween safety tips, and gambling. Reposted educational content was more likely to fall into the bottom 15 category than any other type of post (see table).
- Interestingly, three reposts in the bottom 15 would likely have had higher reach if they had been original posts because of their high value content: imminent brush fire danger in Melrose (2 reposts) and free Narcan pickup (the original post was in the top 15).

Type of Facebook Post	Top 15 Posts	Bottom 15 Posts
Educational	2	10
Event	9	2
National Observance	2	1
News	1	2
Survey	1	0
Total	15	15
Reposts	0	13

Discussion

Why did only a few Melrose HHS Facebook posts reach more than 100 people? It may be that the health department's social media content, like that of many government agencies, is at odds with the Facebook algorithm, which controls content visibility. The algorithm prioritizes posts from friends and pages the users follow. Other criteria are the post's popularity (comments, reactions, shares, likes) and its relevance to the user based on the person's past behavior on Facebook. It would also appear that the algorithm prioritizes original content over shared content from other pages.

To expand reach on Facebook posts, Melrose HHS could consider:

- Surveying residents to learn what public health services and topics are of greatest and least interest to them.
- Creating more posts on high interest topics, as well as local health events and public health news.
- Creating posts with "calls to actions," such as taking a survey, visiting the Melrose HHS table at the farmers market, or even clicking on a link.
- Not sharing/reposting content from the Melrose HHS Facebook account. Instead, create a new post with the same information, which should reach more people.
- Sharing fewer posts from federal agencies since these reposts don't reach many people. Instead, focus on sharing posts from local and state partners to boost the reach of their original posts.
- To learn more about social media algorithms, see SocialPilot's Social Media Algorithms: A Complete Guide and Facebook's How Facebook Distributes Content.