

Health School Students Use of Social Media for Academic Information Dissemination in Minna Metropolis, Nigeria.

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ABSTRACT: This study investigated the use of social media in sharing health related information amongst students of health schools in Minna. The study used survey questionnaire to collect data from simple random samples of 344 respondents. The response rate was 100%. Findings revealed that Facebook (79.9%), WhatsApp (65.5%) and Twitter (34.3%) were the most used social media site for communication. Also, the research study revealed that (79.8%) of the respondents benefitted greatly from using social media in disseminating health related information and they preferred these health information communicated to them via video, audio, and mobile phone text format. Finally, the research revealed that poor network coverage, high cost of data subscription, high cost of smart phones and epileptic power supply affects the level of access of students in health schools in Minna to social media. The study recommended that lecturers, students, researchers and health care instructors are strongly advised to disseminate health related information to students using social media tools based on its effectiveness.

KEYWORDS: social media, health information, information dissemination, social network, smart phones, data subscription, epileptic power, network coverage, health communication, internet access

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I. INTRODUCTION

Social media is the phrase used in reference to a group of tools utilized online and which are primarily created and tailored towards the social interactions of two or more persons per time. These online tools were primarily created to enable users to socially interact with each other to share online contents, correct already shared contents and generate information (Bertot, Jaeger & Hansen, 2012). The widespread acceptance of social media tools is traceable to the ever-growing advancements in technology. which has engendered a great amount of shift from the normal way of imparting knowledge, communication modes and information generation, as well as sharing (Vyas & Trivedi, 2014). Social networking tools were developed with the primary purpose of developing an online-based community of persons with similar inclinations for easy interaction and sharing of knowledge. According to Khan (2013), sharing of information can be simply described as the social process of deliberately passing on items, products and inklings from a person tagged 'the sender' to another person or persons tagged the receiver'.

Several social networking tools have become quite popular terms and names across the globe due to the fascinating and impressive widespread acceptance and growth of the social media. Names such as Facebook, WhatsApp, Google, Twitter, Instagram, YouTube, and a host of others. Lien and Cao (2014) reported that social media tools such Instant Messaging (IM) tools, social networking sites such as Facebook and Twitter, as well as microblogs have become a great part of the way people of different cultures and inclinations generate and share information both interpersonally and as a group. According to Han and Wang (2015), social media has changed the way people pay attention and get access to health information and thus, there has been drastic and rapid changes in the health care industry. The importance of this dynamic change in information gathering via social media channels has led to several studies into how information generation and sharing has been affected by the rapid growth of social media by several renowned scholars (Zhou & Bai, 2015). Amend and Secko (2012) averred that, social media and mass media have complemented one another to produce unbelievable rate of information gathering and sharing. This view was re-echoed by Kuehne and Olden (2015) who posited the Science Media Ecosystem whereby scientist generate information such as health-related information from researches and surveys and use various channels in the sharing of these information to the public, decision makers (government or relevant agencies) or their fellow scientists.

O'Mara (2013) posited that the need to reach out to users of health products and services have become more pressing especially in the ever-changing modern world where several health-related issues arise on regular

basis. O'Mara also stressed the need to utilize social media tools, which have been discovered to get to much bigger audiences than the mass media per time. Jha, Lin and Savoia(2016) reported a paradigm shift from the use of mass media tools such as television and radio in obtaining and sharing health-related information to the utilization of technologies such as the smart phones with their various social media channels with over 60% of smart phone users utilizing their devices to get information about health conditions thus making social media a veritable tool for the promotion and communication of health literacy issues. The benefits of utilizing social media is breathtaking as several surveys have shown that no other mass medium has the capacity to connect health products directly to their consumers and also create an interactive platform between the products and their consumers (Roberts, Callahan & O'Leary, 2017). With the ever-growing need to share health-related information among people, it becomes paramount to carry out a survey on how people utilize social media tools in the sharing of such kind of information. This study aims to investigate the use of social media in sharing health related information amongst students of health schools in Minna.

Statement of the Problem

With the rapid growth and widespread acceptance of social media across the globe, a major group of people who have easily accepted and mostly utilized these social media tools have been identified to be the younger generation who are mostly students of various lower and higher institutions of learning. However, Martinez-Garcia, Moreno-Conde, Jodar-Sanchez, Leal and Para(2013) posited that despite the enormous benefits of utilizing these social media tools, there exist several issues that arise as a result of the usage of these tools. Likewise, Nyangeni, Rand and Rooyen (2015) reported that several ethical and legal issues have made the use of social media become quite challenging. Most young social media users especially students use these social media tools improperly and irresponsibly and thus carries a great deal of risk for the users themselves, as well as their institutions of learning and health organizations. Despite several information about the dangers of ill-utilization of social media tools, the rate of abuse and irresponsible usage of social media tools is quite alarming. It is against this backdrop that this study delves to investigate the use of social media in sharing health related academic information amongst students of the health schools in Minna, Niger State.

Aim and Objectives of the Study

The aim of the study is to discover how students of the health schools in Minna, Niger State use social media in sharing health related information. The study aims at achieving the following specific objectives:

- i. To find out the level of students' exposure to health related academic information on social media.
- ii. To examine the level of usage of social media tools by the students in the health schools in Minna.
- iii. To examine the benefits of utilizing social media to gather health related academic information among the students.
- iv. To find out the level of access students have to social media, daily/weekly.

Research Questions

- i. What is the level of students' exposure to health related information on social media?
- ii. What is the level of usage of social media tools by the students in the health schools in Minna?
- iii. In what ways is social media beneficial to students in gathering health related information?
What is the level of access students have in using social media, per day/ week?
- iv. What is the level of access students have in using social media, per day/ week?

II. LITERATURE REVIEW

Social Media and Information Sharing

Social media development over the years have been phenomenal with social networks such as Facebook, Twitter, Blogs, LinkedIn and YouTube enjoying astronomical patronage and become global brands (Trivedi & Vyas, 2014). These social networking sites have given room for the development of small groups and communities of individuals with similar inclinations, as well as professionals of similar practices. Dumbrell and Steele (2014) opined that social media tools have capacities for peer-to-peer sharing of information, as well as group and individual evaluation of contents. According to Gaal, Szabo, Obermayer-Kovacs and Csepregi (2015), there are several characteristics of social media which makes it the best platform for sharing of information, especially health information. These characteristics include: authenticity, transparency, intermediacy, participation, connectedness and accountability.

Information Sharing

The history of information sharing can be traceable back to the early days of man where means of communication comprised of face-to-face communication, song writing, storytelling, town-criers; storytelling is still recognized as the most trusted way of sharing information until the advent of computer systems (Mosha, 2014). But for any means of information sharing - traditional or modern - to be effective, there has to be a high level of trust from the source of the information to the recipient of the information. In academic institutions, information sharing process can only be successful if individuals (both students and scholars) within the academia willingly donate information and actively consult with their colleagues to get access to other information (Mosha, 2014).

Information management system comprises of information creation and/or capture, information sharing and/or transfer, as well as information application (Kude, Nalhe & Mankar, 2012). But among these components of the management system, the most important is the information sharing component (Kumaresan, 2010). According to Mosha (2014), the most vital information management components are creation and sharing but information sharing is the most critical component of all which is why it is very tough getting people to share information in their possession. For actual communication and sharing of information, it is vital that it should be transferred from its point of creation or adequately stored where it is needed (Mtega, Dulle, Malekani & Chailla, 2014).

Mosha (2014) defined information sharing within institutions as the general practice of picking up, establishing, saving and transferring experience-based information within such institution, as well as making sure that such information becomes available to others, especially in the same institution. The foundation of sharing of information is on the basis of experiences obtained from within and outside the organisation.

Health Information Sharing

In order to fully grasp health information sharing, there is a need to take a look at the need for health information. The need for information, as postulated by Matingwina (2015) is the gap that exists between what is known per time and what is required or expected to be known at that time. But an information need is considered important especially as it arises due to a lack of such information by the person(s) who need(s) it.

Health information is any information that is related to health science (Mosha, 2014). Health information seekers need the information base on health challenge or as medically-inclined students. The need for health information, irrespective of reason(s), is quite important due to the importance of health information to man generally (Matingwina, 2015). It becomes even vital when it is required by students of medical training institutions; students undertaking various medical courses in institutions of higher learning need to have a catalogue of health information available to them, both subjective and explicit, which health schools often have various periods that students spend in hospitals and clinics as housemen so as to gain subjective and tacit information from their supervisors at such clinics (Sockey, Adjei & Ankrah, 2018). According to Matingwina (2015), the need for information by students is always based on several factors which include – to gain more understanding of an ailment, get better idea of how to make correct prognosis of an ailment, understand the process and likely outcome of possible tests and treatments of an ailment, understand how to care for a patient of such ailment, to gain better understanding so as to assist others to understand the ailment, to learn how to prevent the ailment, and to become a certified care provider for such ailment.

Factors that Enhance Information Sharing

Information becomes a good endeavour if it is an avenue that students, scholars and other members of the academia within an institution can benefit from, whether they contribute to the information or not (Lam & Lambermont-Ford, 2010). The quality of information shared in an academic institution depends greatly on the ability of the members of the institution to develop, transfer and share information per time. But all these depend on several factors for effectiveness; these factors can be classified into institutional, individual and process factors.

THEORETICAL FRAMEWORK

This study was anchored on the 'Uses and Gratification Theory (UGT)'. The theory was initially postulated by Jay Blumier and Denis McQuail in 1969 when they attempted to categorize why audiences watch political programs during the 1964 US Elections. The initial theory sought to comprehend why people seek out the media that they use and what they use it for. The uses and gratification theory is a theory that helps to understand why and how individuals use certain media, in this case social media, to satisfy their needs. The theory postulates that the users of social media are not just passive users but are actually in control of their use of such media and are actively interpreting and integrating social media into their daily lives. The theory postulates that users of social media often use social media tools to achieve special set goals and targets. Also, the theory is of the opinion that users hold the choice of social media tool to utilize to achieve their set targets.

The theory also stipulates that users of social media tools are self-aware of their choices and ensure that they have all the basic knowledge and understanding of the workings of such a tool (Fiester, 2016).

According to Wang, Tchernev and Solloway (2012), the UGT opines that there are four reasons why users utilize social media tools and they are – for habitual, emotional, social and cognitive needs. Habitual need talks about the need of the user of a social media tool to be as a result of embedded habits. The emotional need talks about the need of a user of a social media tool to be as a result of emotional attachment to the tool; probably because the users’ friends and acquaintances are users of the same social media tool. The social need talks about the need of the user of a social media tool to utilize the tool because of its social acceptance. Finally, The cognitive need is due to the user’s ability to comprehend the tool and utilize it to achieve a special task or endeavour. Also, UGT opines that the goals of utilizing social media tools include information gathering, education, identification with specific characters, entertainment, social interaction, as well as to escape from the stresses of daily life (Greliehi & Punyanunt-Carter, 2012).

Research Design

This study employed a survey research was used for this study. The total population from both health schools were 2,460 students. Simple random sampling technique was used based on the Slovin’s sample size formula:

$$n = \frac{N}{1 + N(e)^2}$$

Where n = Sample Size
 N = Total Population; and
 e = Error Margin = 5%

Thus,

$$\begin{aligned} n &= \frac{2460}{1 + 2460 (0.05)^2} \\ n &= \frac{2460}{1 + 2460 (0.0025)} \\ n &= \frac{2460}{1 + 6.15} \\ n &= \frac{2460}{7.15} \end{aligned}$$

Sample size ‘n’= 344.

Hence, the sample size for this study was 344 respondents, which was obtained from the three health schools in Minna. The researchers made use of 7-point Likert scale, ranging from Very Strongly Disagree (VSD) =1 to Very Strongly Agree (VSA) = 7. The questionnaire had two sections; section A comprises the demographic characteristics of the respondents, while Section B comprises of 24 items.

The validity of the instrument was established by sharing the instrument to experts in the field to append their comments, views, opinions and suggestions which were incorporated into the instrument before being administered to the respondents. While split-half reliability method was used to determine the reliability of the research instrument and the correlation coefficient was 0.96, which indicate that the instrument was reliable. The data collected were analyzed using the Statistical Package for Social Sciences (SPSS). T-test used applied to plot the mean score, and frequency and percentile tables were plotted accordingly.

III. FINDINGS

All the 344 copies of questionnaire administered were retrieved and found useful yielding 100% response rate. Findings from the demographics of the respondents show that the majority 243(70.6%) of the respondents are females, while 101(29.4%) are males. Age wise, the majority 160(46.5%) are below the age 20years, while 156(45.3%) are within the age range 20 – 25 years, whereas 21(6.1%) are within the age range of 26 – 30 years. Only 7(2.0%) of the respondents are 31 years above respectively. As for the academic level of the respondents, the majority 200(58.1%) of the respondents are in 100 level, 60(17.4%) of the respondents are in 200 level, while 84(24.4%) are in 300 level. In terms of frequency of social media sites usage, findings reveal that the majority 132(38.4%) use the social media site they are familiar with daily. As for the participation of the respondents on social media sites groups or page that shares academic information, the majority 288(83.7%) of the respondents belongs to a social media group or page that shares academic information. Finally, findings reveal that the majority 302(87.8%) of the respondents acknowledged that academic information which are posted on the group page are relevant to their field of study.

Answering Research Questions

RQ 1: What is the level of students' exposure to health related information on social media?

Table 1: Respondents' responses on Social Media Exposure and Usage

S/N	Question	VSD 1	SD 2	D 3	N 4	A 5	SA 6	VSA 7
1.	I use Facebook as a social media site for communication	37 (10.8%)	23 (6.7%)	34 (9.9%)	24 (7.0%)	65 (18.9%)	78 (22.7%)	83 (24.1%)
2.	I use WhatsApp as social media site for communication	22 (6.4%)	16 (4.7%)	15 (4.4%)	16 (4.7%)	81 (23.5%)	88 (25.6%)	106 (30.8%)
3.	I use Snap chat as a social media site for communication	119 (34.6%)	35 (10.2%)	64 (18.6%)	41 (11.9%)	47 (13.7%)	24 (7.0%)	14 (4.1%)
4.	I use Twitter as social media site for communication	41 (11.9%)	42 (12.2%)	64 (18.6%)	79 (23.0%)	67 (19.5%)	22 (6.4%)	29 (8.4%)
5.	I use Instagram as a social media site for communication	103 (29.9%)	28 (8.1%)	46 (13.4%)	29 (8.4%)	63 (18.3%)	36 (10.5%)	39 (11.3%)
6	I use Skype as a social media site for communication	147 (42.7%)	32 (9.3%)	53 (15.4%)	39 (11.3%)	37 (10.8%)	16 (4.7%)	20 (5.8%)
7	I use Badoo as a social media site for communication	153 (44.5%)	40 (11.6%)	62 (18.0%)	21 (6.1%)	27 (7.8%)	24 (7.0%)	17 (4.9%)
8	I use BBM chat as a social media site for communication	118 (34.3%)	40 (11.6%)	54 (15.7%)	42 (12.2%)	42 (12.2%)	26 (7.6%)	22 (6.4%)
9	I use Pintrest chat as a social media site for communication	120 (39.9%)	37 (10.8%)	42 (12.2%)	33 (9.8%)	49 (14.2%)	32 (9.3%)	31 (9.0%)

n=344

Table 1 (above) shows the respondents' responses on their exposure and usage of social media. The Table reveals that the majority 83(24.1%) were very strongly agreed that they use Facebook as a social media site for communication, while 37(10.8%) of them were very strongly disagreed on the use of Facebook as asocial media site for communication. As for the respondents' usage and exposure to WhatsApp as a social media site for communication, the majority 106(30.8%) of the respondents were very strongly agreed to it, while meagre amount 15(4.4%) of the respondents disagrees. Findings on the Table display that the majority 119(34.6%) of the respondents were very strongly disagreed to the use of Snapchat as a social media site for communication, while only 47(13.7%) of the respondents agreed on their usage and exposure of Snapchat as a social media site for communication. With regards to the respondents' usage and exposure to Twitter as a social media site for communication, the majority 67(18.6%) of the respondents agreed on their usage and exposure of Twitter as a social media site for communication, while 64(18.6%) of them disagreed.

Table 2: Mean scores of respondents' response to social media exposure and usage

S/N	Items	Mean	Remark
1	I use Facebook as a social media site for communication	4.8	Accepted
2	I use WhatsApp as a asocial media site for communication	5.3	Accepted
3	I use Snapchat as a asocial media site for communication	3.0	Rejected
4	I use Twitter as a asocial media site for communication	3.8	Accepted
5	I use Instagram as a asocial media site for communication	3.5	Accepted
6	I use Skype as a asocial media site for communication	2.8	Rejected
7	I use Badoo as a asocial media site for communication	2.6	Rejected
8	I use BBM as a asocial media site for communication	3.1	Rejected
9	I use as a Pinterest asocial media site for communication	3.2	Rejected
Average mean score		3.6	

n=344

As for the respondents' usage of Instagram as a social media site for communication, the majority 103(29.9%) of the respondents were very strongly disagreed to their use of Instagram as a social media site for communication, while 63(18.3%) of them agreed to its usage and exposure to it. The Table 2 (above) reveals that 147(42.7%) of the respondents were very strongly disagreed to their usage and exposure to Skype as a social media site for communication, while 37(10.8%) of them agreed to it. Also, the Table shows that the majority 153(44.5%) of the respondents were very strongly disagreed to using of Badoo as a social media site for communication, while only 27(7.8%) of them agreed to its usage and exposure. Whereas, findings reveals that the majority 118(34.3%) of the respondents were very strongly disagreed to the use of BBM as a social media site for communication, while only 42(12.2%) of them agreed to it. Finally, the Table displays that the majority 120(34.9%) of the respondents were very strongly disagreed to the use of Pinterest as a social media site for communication, whereas only 49(14.2%) of them agreed to it.

Table 2 (above) shows the Mean scores of the respondents' responses to social media exposure on health related information. The calculated Mean on "I use WhatsApp as a social media site for communication" is 5.3, this was followed by "I use Facebook as a social media site for communication" is 4.8. "I use twitter as a social media site for communication" is 3.8, "I use Instagram as a social media site for communication" is 3.5 respectively. Response one, two, four and five were accepted because they exceeded the average Mean score, while response the rest of the items were rejected because they fall below the average Mean score of 3.5. This indicates that the majority of the respondents use Whatsapp, facebook, twitter and Instagram as their social media site for communication.

R.Q. 2: What is the level of usage of social media tools by the students in the health schools in Minna?

Table 3: Respondents response on the level of usage of Social Media tools

S/N	Question	VSD 1	SD 2	D 3	N 4	A 5	SA 6	VSA 7
1.	I believe students have the ability to search for health information via social media on their own	28 (8.1%)	17 (4.9%)	11 (3.2%)	9 (2.6%)	57 (16.6%)	115 (33.4%)	107 (31.1%)
2.	I believe student shares health information to their fellow students via social media	14 (4.1%)	14 (4.1%)	17 (4.9%)	17 (4.9%)	66 (19.2%)	102 (29.7%)	114 (33.1%)
3.	I believe I prefer health information on social media in video format	16 (4.7%)	18 (5.2%)	34 (9.6%)	26 (7.6%)	75 (21.8%)	78 (22.7%)	97 (28.2%)
4.	I believe I prefer health information on social media in audio format	20 (5.8%)	19 (5.5%)	40 (11.6%)	33 (9.6%)	77 (22.4%)	75 (21.8%)	80 (25.6%)
5.	I believe I prefer health information on social media in mobile phone voice and text format	23 (6.7%)	15 (4.4%)	32 (9.3%)	40 (11.6%)	67 (19.5%)	79 (23.0%)	88 (25.6%)

n=344

Table 3 (above) shows the respondents responses to the level of social media tools usage. According to the Table, the majority 115(33.4%) of the respondents strongly agreed that students have the ability to search for health information via social media on their own, while 28(8.1%) of them were very strongly disagreed. The respondents were also asked if they believed students shares health information with their fellow students via social media to determine the level of usage of social media tools. Findings revealed that the majority 114(33.1%) of the respondents were very strongly agreed that students share health information to their fellow students via social media. The respondents were asked if they prefer health information on social media via video format, the majority 97(28.2%) were very strongly agreed that they preferred health information on social media via video format, while only meagre number 18(5.2%) strongly disagreed with the question.

Furthermore, in Table 4 (below), the respondents were asked if they prefer health information on social media in audio formats. Findings shows that the majority 80(25.6%) of them were very strongly agreed, while 20(5.8%) disagreed that they prefer with it. Finally, the students were asked if they preferred health information on social media in mobile phones text format. The majority 88(25.6%) were very strongly agreed, while 32(9.3%) of the respondents disagreed with it respectively. From the Table, the majority of the students in the health school have the ability to search for health information via social media on their own, they can also share

health information to their fellow students via social media and prefer health information on social media in video, audio and text format. This result proves that the respondents' level of usage of social media tools is very high.

Table 4: Mean scores of respondents response to health information exposure

S/N	Items	Mean	Remark
1	I believe students have the ability to search for health information via social media on their own	5.4	Accepted
2	I believe student shares health information to their fellow students via social media	5.5	Accepted
3	I believe I prefer health information on social media in video format	5.2	Accepted
4	I believe I prefer health information on social media in audio format	5.0	Accepted
5	I believe I prefer health information on social media in mobile phone voice and text format	5.0	Accepted
Average mean score		5.2	

n=344

Table 4 (above) highlights the Mean score of the respondents' responses to health information exposure. The calculated Mean on "I believe students have the ability to search for health information via social media on their own" is 5.4, "I believe student shares health information to their fellow students via social media" is 5.5, "I believe I prefer health information on social media in video format" is 5.2, "I believe I prefer health information on social media in audio format" is 5.0, "I believe I prefer health information on social media in mobile phone voice and text format" is 5.0. Therefore, all responses were accepted because they exceeded the average Mean score.

R.Q. 3: In what ways is social media beneficial to students in gathering health related information?

Table 5: Respondents response on the Benefits of utilizing social media

S/N	Question	VSD 1	SD 2	D 3	N 4	A 5	SA 6	VSA 7
1.	I believe I get relevant health related academic information from the social media tools I use	21 (6.1%)	13 (3.8%)	21 (6.1%)	20 (5.8%)	87 (25.3%)	106 (30.8%)	76 (22.1%)
2.	I believe the social media tools I use are trusted and reliable	15 (4.4%)	10 (2.9%)	17 (4.9%)	25 (7.3%)	102 (29.7%)	96 (27.9%)	79 (23.0%)
3.	I believe the social media tools I use has helped me understand some courses better	18 (5.2%)	14 (4.1%)	20 (5.8%)	19 (5.5%)	94 (27.3%)	93 (27.0%)	86 (25.0%)
4.	I believe I have gotten assistance in solving an academic problem or assignment via social media tools	18 (5.2%)	10 (2.9%)	13 (3.8%)	30 (8.7%)	69 (20.1%)	93 (27.0%)	111 (32.3%)
5.	I believe the use of social media has helped me to get relevant health academic information and has impacted positively on my performance academically	14 (4.1%)	15 (4.4%)	15 (4.4%)	27 (7.8%)	81 (23.5%)	98 (28.5%)	94 (27.3%)

n=344

Table 5 (above) displays the respondents' responses to question about the benefit of utilizing social media in their academic pursuit. According to the Table, the majority 106(30.8%) of the respondents were strongly agreed to the question, while 21 (6.1%) of the respondents disagreed with it. The respondents were asked if the social media tools they use are trusted and reliable, the majority 102(29.7%) of the respondents agreed, while meagre amount 17(4.9%) of the respondents disagreed with it respectively. As for the question concerning the social media tools that they use, whether it helped them to understand some courses better, the majority 94(27.3%) of the respondents agreed that the social media tools used has helped them to understand some courses better, while some 18(5.2%) of the respondents disagreed with this. In terms of whether the respondents were getting an assistance in solving any academic problems or assignments via social media tools, the majority 111(32.3%) of the respondents were very strongly agreed that they have gotten assistance in solving an academic problems or assignments via social media tools, while only 18(5.2%) of the respondents disagreed with it respectively. Finally, the respondents were asked if their use of social media has helped them to get relevant health related academic information and has impacted positively on their performances academically. According to the findings, the majority 98 (28.5%) were strongly agreed, while 15(4.4%) of them were very strongly disagreed with it.

Table 6: Mean scores of respondents response to benefit of utilizing social media

S/N	Items	Mean	Remark
1	I believe I get relevant health related academic information from the social media tools I use	5.2	Accepted
2	I believe the social media tools I use are trusted and reliable	5.3	Accepted
3	I believe the social media tools I use has helped me understand some courses better	5.3	Accepted
4	I believe I have gotten assistance in solving an academic problem or assignment via social media tools	5.5	Accepted
5	I believe the use of social media has helped me to get relevant health related academic information and has impacted positively on my performance academically	5.4	Accepted

n=344

Table 6 (above) shows the Mean scores of the respondents response to the benefit of utilizing social media. The calculated Mean on “ I believe I get relevant health related academic information from the social media tools I use” is 5.2, “ I believe the social media tools I use are trusted and reliable” is 5.3, “ I believe the social media tools I use has helped me understand some courses better” is 5.3, “ I believe I have gotten assistance in solving an academic problem or assignment via social media tools” is 5.5, “ I believe the use of social media has helped me to get relevant health related academic information and has impacted positively on my performance academically ” is 5.4. All the responses were accepted because they exceeded the average Mean score. This means that the respondents were in total agreement with the statement that they benefit from utilizing social media in their academic pursuits.

R.Q. 4: What is the level of access students have in using social media, per day / week?

Table 7 (below) shows the respondents' responses concerning the factors that affects their level of access to social media on a daily or weekly basis. According to the Table, the majority 122(35.5%) of the respondents were very strongly agreed to the statement that, epileptic power supply affects their level of access to social media sites, while 31(9.0%) of the respondents were very strongly disagreed to the statement respectively. The respondents were asked if poor network coverage affected their level of access to social media sites, the majority 149(43.3%) of the respondent were very strongly agreed to the statement, while 21(6.1%) of them disagreed with the statement. The respondents were asked if the high cost of data subscription affected their level of access to social media sites on a daily or weekly basis, the majority 138 (40.1%) were very strongly agreed to the statement, while 16(4.7%) of them were strongly disagreed with it.

Table 7: Respondents response on the Factors affecting the level of access to social media on daily/ weekly bases

S/N	QUESTION	VSD 1	SD 2	D 3	N 4	A 5	SA 6	VSA 7
1	I believe the epileptic power supply affect my level access to social media sites	31 (9.0%)	20 (5.8%)	17 (4.9%)	21 (6.1%)	62 (18.0%)	71 (20.6%)	122 (35.5%)
2	I believe poor network coverage affect my level of access to social media	16 (4.7%)	15 (4.4%)	21 (6.1%)	15 (4.4%)	64 (18.6%)	64 (18.6%)	149 (43.3%)
3	I believe the high cost of data subscription affect my level of access to social media sites	11 (3.2%)	16 (4.7%)	14 (4.1%)	22 (6.4%)	68 (19.8%)	75 (21.8%)	138 (40.1%)
4	I believe the high cost of smart phones affect my level of access to social media sites	17 (4.9%)	14 (4.1%)	25 (7.3%)	25 (7.3%)	60 (17.4%)	68 (19.8%)	135 (39.2%)
5	I believe lack of awareness affect the level of access to social media)	64 (18.6%)	67 (19.5%)	140 (40.7%)	25 (7.3%)	16 (4.7%)	15 (4.4%)	17 (4.9%)

n=344

Furthermore, the respondents were asked if the high cost of smart phones affected their level of access to social media sites on a daily or weekly basis. The majority 135(39.2%) of the respondents were very strongly agreed to this reason, while 25(7.3%) of the respondents disagreed to the statement. Finally, respondents were asked if lack of awareness of the social media site is what limit their level of access to the social media sites. The majority 140(40.7%) disagreed with it, while only 17(4.9%) of them were very strongly agreed to the assertion. From this result, it can be inferred that the majority of the respondents are aware of the social media sites and lack of awareness does not affect the level of access to social media.

Table 8: Mean scores of respondents response on factors affecting the level of access to social media

S/N	Items	Mean	Remark
1	I believe the epileptic power supply affect my level access to social media	5.2	Accepted
2	I believe poor network coverage affect my level of access to social media	5.6	Accepted
3	I believe the high cost of data subscription affect my level of access to social media	5.6	Accepted
4	I believe the high cost of smart phones affect my level of access to social media	5.4	Accepted
5	I believe lack of awareness affect the level of access to social media	3.2	Rejected

n=344

Table 8 (above) shows the Mean scores of the respondents response on factors affecting the level of access to social media. The calculated Mean on “ I believe the epileptic power supply affected my level of access to social media” is 5.2, “ I believe poor network coverage affect my level of access to social media ” is 5.6, “ I believe the high cost of data subscription affect my level of access to social media” is 5.6, “ I believe the high cost of mobile phones affect my level of access to social media” is 5.4, “ I believe lack of awareness affect my level of access to social media” is 3.2. The majority of the statement were accepted because their Mean

scores were above 3,5 which is the cut off point only one statement was rejected because its Mean score was below 3.2.

IV. DISCUSSION OF FINDINGS

The study has investigated the use of social media in sharing health information amongst health school students in Minna. The demographic statistics revealed that the majority of the students in the health school are females. The analysis on age distribution of the students in the health schools shows the majority of the students in the health school are youths. The findings shows that the respondents health school students make use of social media groups/ page on a daily base and are familiar with one or more social media site, and they belong to membership of social media groups. This indicates that these students are active on social media groups which are of great relevance to their fields of study.

Also, the findings of the study revealed that the health students in the study area are mostly exposed to the usage of social media sites such as, Facebook, WhatsApp, Twitter and Instagram. This is because these sites are user friendly and easy to understand, and are used by the majority of youth in the world today. This finding was corroborated with the report of Scanfeld, Scanfeld and Larson (2010), “that twitter is a space for the informal sharing of health information” (p.5).

Findings on the dissemination of information on twitter through networks of followers and a culture of retweeting demonstrate that the potential reach for the dissemination of both valid and invalid information is in tandem with Hand, Wolfram and Abram (2016), who concluded that, health information can be transmitted through social media due to the fact that the majority of students in health schools are youths and are exposed to the use of social media sites that they are familiar with such as, twitter, Facebook, WhatsApp and Instagram.

As for the level of usage of social media tools, findings revealed that the majority of the students have a very high level of usage of the social media tools they use. They use the social media tools to search for health information, share health information, acquire health information in audio, video or text format. This finding was corroborated with the report of Gaal, et al. (2015, pg.195) that, “social media tools enables students to create a profile with the aim of sharing health information to their fellow students on the social media page. Specific information should be shared only with the members for a wider audience.” Also, Jalonen (2014) and Kaplan and Haenlein (2010), who opined and described such media as a group tool that supports complete information package, communication, collaboration, connectivity and combination of tools. They described the communication of health related information among youth as comprising of tools such as blogs, microblogs, video sharing, mobile phone text format etc.

The result of the third research question which highlight on the ways in which social media is beneficial in gathering health related information. The majority of the students benefited greatly in the utilization of social media tools in gathering health related information. This health related information ranges from information of some of the courses offered in the health school for proper understanding or comprehension, updates on some of the breakthrough in the field of science of health science which are necessary for their academic pursuit, understanding of some courses better, solving an academic problem or answering assignment questions, and acquiring relevant health information that has impacted positively on their academic performance. This findings is also in congruent with the report of Mosha (2014, p.9) that “most students are using social media tools e.g. (Facebook, WhatsApp, Twitter) to enhance their daily activities. Most activities reported by those utilizing social media tools are: to communication, participation and sharing information within and outside their departments.” These findings opines that students in the medical and health field benefited greatly in utilizing social media in gathering and disseminating health related information amongst themselves, clients and to the general public at large (Mosha, 2014, p.9).

Research question 4, on the factors affecting the level of access of students in using social media on a daily or weekly basis. The majority of the respondents were very strongly agreed that epileptic power supply which leads to students not being able to charge their smart phones or laptops, poor mobile network coverage in some of the locations of where these health schools are found. High cost of data subscription of some networks, also high cost of mobile smart phones and P.C’s greatly affected the students’ access and usage of social media sites in this current study area. The Table also shows that minority of the sampled students believed that lack of awareness affects the level of access to social media site or usage. This might be a category of students that are present in the school who are from poor local government area surrounding the location of the study area. This set of health school students may not be aware of the recent developments in the social media usage for disseminating and acquiring health related information.

The epileptic power supply is a major problem not only affecting the study area but the entire local government of the state and Nigeria as a whole. Poor power supply is an evidence of poor governance in the state and Nigeria, the effect of this inadequate power supply can be observed in all the sectors of the economy of the state and in Nigeria.

V. CONCLUSION

In conclusion, findings of this study have provided conclusive direction that social media tools, such as, WhatsApp, Facebook and Twitter are used and are effective in disseminating health related information. While the level of exposure of students to the usage of social media tools is very high and can be a means to disseminate and acquire health related information. Also, findings have revealed that students benefited from the utilization of social media tools academically and these translates in improving their academic performance positively. More so, epileptic power supply, poor network coverage and high cost of smart phones and P.C's are major factors affecting the access of social media tools by students of health schools. Finally, findings from the study revealed that the main hindrance to the level of access to social media tools are high cost of data subscriptions, high cost of smart phones and poor network coverage.

VI. RECOMMENDATIONS

Based on this research findings, the following recommendations are suggested:

1. Lecturers, students, researchers and health care instructors should be strongly advised to disseminate health related information to their students using social media tools based on its effectiveness as inferred in the findings of this research study.
2. Government should proffer solutions to the problem of epileptic nature of electricity supply in the state and in Nigeria in general, so that students can benefit from the improvement in adequate access to social media through the Internet.
3. Network provider should make certain packages, such as, cheap tariff plans, cheap data plans, good network coverage and other data bonus packages as required by the users.

REFERENCES

- [1]. Amend, E. & Secko, D. M. (2012). In the Face of Critique: A Metasynthesis of the Experiences of Journalists Covering Health and Science. *Science Communication*, 34 (2), 241 – 282.
- [2]. Bertot, J. C., Jaeger, P. T. & Hansen, D. (2012). The Impact of Policies on Government Social Media Usage: Issues, Challenges and Recommendations. *Government Information Quarterly*, 1 – 40.
- [3]. Dumbrell, D. & Steele, R. (2014). Social Media Technologies for Achieving Knowledge Management amongst Older Adult Communities. *Procedia- Social and Behavioral Sciences*, 147, 229 – 236.
- [4]. Fiester, A. (2016). *A Study of Social Media Usage and Interactions*. Graduate School, University of Missouri-Columbia
- [5]. Gaal, Z., Szabo, L., Obermayer-Kovacs, N. & Csepregi, A. (2015). Exploring the Role of Social Media in Knowledge Sharing. *The Electronic Journal of Knowledge Management*, 13 (3), 185 – 197. Retrieved from <https://www.ejkm.com>
- [6]. Han, G. & Wang, W. (2015). Mapping User Relationships for Health Information Diffusion on Microblogging in China: A Social Network Analysis of Sina Weibo. *Asian Journal of Communication*, 25 (1), 65 – 83.
- [7]. Hand, R. K., Wolfram, T. M. & Abram, J. K. (2016). Assessing the Viability of Social Media for Disseminating Evidence-Based Nutrition Practice Guideline through Content Analysis of Twitter Messages and Health Professional Interviews: An Observational Study. *Journal of Medical Internet Research*, 18 (11): 295 – 310. Retrieved from <https://www.ncbi.nlm.nih.gov/pub>
- [8]. Jalonen, H. (2014). *Social Media and Emotions in Organisational Knowledge Creation*. Conference Proceedings, Federated Conference on Computer Science and Information Systems, Warsaw, 1371 – 1379.
- [9]. Jha, A., Lin, L. & Savoia, E. J. (2016). The Use of Social Media by State Health Departments in the US: Analyzing Health Communication through Facebook. *J. Community Health*, 41 (1), 174 – 179.
- [10]. Kaplan, A. M. & Haenlein, M. (2010). Users of the World, Unite. The Challenges and Opportunities of Social Media. *Business Horizons*, 53, 59 – 68.
- [11]. Khan, M. A. (2013). Dissemination of Information through Electronic Media on Libraries: A Review. *International Journal of Next Generation Computer Applications*, 1 (10), 11 – 14.
- [12]. Kude, N., Nalhe, U. O. & Mankar, S. (2012). Knowledge Management Practice in Academic Libraries. *International Journal of Research in Management, Economics and Commerce*, 2 (11), 225 – 234.
- [13]. Kuehne, L. M. & Olden, J. D. (2015). Opinion: Lay Summaries Needed to Enhance Science Communication. *Proceedings of the National Academy of Sciences of the United States of America*, 112 (12), 3585 – 3586.
- [14]. Kumaresan, S. C. (2010). Knowledge Management and Knowledge Sharing for Strategic Library Planning: Value of Knowledge Sharing for Expatriate Library Professionals. *A Qatar Foundation Academic Journal*, 4, 1 – 6.

- [15]. Lam, A. & Lambermout-Ford, J. (2010). Knowledge Sharing in Organizational Contexts: a Prior Experience. *Computers in Human Behaviour*, 28, 331 – 339.
- [16]. Lien, C. H. & Cao, Y. (2014). Examining WeChat Users' Motivations, Trust, Attitudes and Positive Word-of-Mouth: Evidence from China. *Computers in Human Behaviour*, (41), 104 – 111.
- [17]. Martinez-Garcia, A., Moreno-Conde, A., Jodar-Sanchez, F., Leal, S. & Para, C. (2013). Sharing Clinical Decisions for Multimorbidity Case Management Using Social Network and Open-Source Tools. *Journal of Biomedical Informatics*, 46 (2013), 1977 – 1984.
- [18]. Matingwina, T. (2015). *Health Information Dissemination among Undergraduate Students in Zimbabwe with Particular Reference to the National University of Science and Technology: A Study in Developing an Integrated Framework for Health Information Dissemination*. University of Cape Town Theses/Dissertations. Retrieved from <http://hdi.net/11427/15574>
- [19]. Mosha, N. F. (2014). *Utilisation of Social Media Tools to Enhance Knowledge Sharing Practices among Knowledge Workers at the Nelson Mandela African Institution of Science and Technology, Arusha, Tanzania*. Mini-Dissertation; University of Pretoria. Retrieved from <http://www.semanticscholar.org>
- [20]. Mtega, W. P., Dulle, F. W., Malekani, A. W. & Chailla, A. M. (2014). Awareness and Use of Web 2.0 Technologies in Sharing Agricultural Knowledge in Tanzania. *Knowledge Management and E-Learning*, 6 (2), 188 – 202.
- [21]. Nyangeni, T., Du Rand, S. & Van Rooyen, D. (2015). Perceptions of Nursing Students Regarding Responsible Use of Social Media in the Eastern Cape. *Curationis*, 38 (2), 1496.
- [22]. O'Mara (2013). Social Media, Digital Video and Health Promotion in a Culturally and Linguistically Diverse Australia. *Health Promot Int*, 28 (3), 466 – 476.
- [23]. Roberts, M., Callahan, L. & O'Leary, C. (2017). Social Media: A Path to Health Literacy. *Information Services and Use*, 37 (2017), 177 – 187.
- [24]. Scanfeld, D., Scanfeld, V. & Larson, E. L. (2015). Dissemination of Health Information through Social Networks: Twitter and Antibiotics. *Am J Infect Control*, 38 (3): 182 – 188. Retrieved from <https://www.ncbi.nlm.nih.gov/pmc>
- [25]. Sokey, P. P., Adjei, E. & Ankrah, E. (2018). Media Use for Health Information Dissemination to Rural Communities by the Ghana Health Service. *Journal of Information Science, Systems and Technology*, 2 (1), 1 – 18. Retrieved from <https://www.arcis.ul.edu.ng/jisst/upload>
- [26]. Trivedi, M. & Vyas, M. J. (2014). Role of Social Networking Tool in Dissemination of Information at Smt. Hansa Mehta Library. *e-Library Science Research Journal*, 2 (9), 1 – 9.
- [27]. Wang, Z., Tchernev, J. M. & Solloway, T. (2012). A Dynamic longitudinal Examination of Social Media Use, Needs and Gratifications among College Students. *Computers in Human Behavior*, 28 (5), 1829 – 1839.
- [28]. Zhou, Z. P. & Bai, R. (2015). Roles of Social Media in Disseminating Health Information: An Exploratory Study in China. *24th International Conference on Information Systems Development (ISD 2015 HARBIN)*. Retrieved from <https://pdfs.semanticscholar.org>

AGBOOLA, A.K. & MUSA, E.H. "Health School Students Use of Social Media for Academic Information Dissemination in Minna Metropolis, Nigeria." *IOSR Journal of Humanities and Social Science (IOSR-JHSS)*, 25(7), 2020, pp. 21-32.