

Social Media and Vaccine Hesitancy: Perspectives of Social Media Users in Oredo Local Government Area, Edo State, Nigeria

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Abstract: This study focuses on online users' perception of social media influence on Covid-19 vaccine hesitancy in Oredo Local Government Area of Edo State. The study was carried out to determine issues and challenges associated with social media and Covid-19 vaccine hesitancy. The technological determinism theory proposed by Marshall McLuhan, (1982) guided this study. The study adopted the survey research design found that a considerable vaccine hesitancy persists, even with the widespread availability of information on the vaccines. The study agrees that to achieve effective community-based immunity, over 70% of the population will need to be vaccinated. The study notes that it will be important to devise strategies to meet this threshold as part of a society-wide response to the Covid-19 pandemic. The study recommends that experts in media and communication ought to dispel myths about the Covid-19 vaccination using the social media platforms, that the government should act decisively at all levels to create a strategy for a youth-focused vaccination program, and that health promotion professionals need to act quickly to address widespread false information about the coronavirus vaccination. Particularly mistrust of the government, vaccination safety, and encouragement of vaccine uptake rather than resorting to force against the populace. The study advocates that members of the public should be persuaded to accept the vaccinations by this message's clear design, which will increase public confidence in the healthcare system.

Keywords: Vaccine, Vaccine Hesitancy, Audience, social media, Media.

INTRODUCTION

Smallpox, polio, measles, and other infectious diseases have all but disappeared thanks to vaccines during the past century in many places throughout the world (Centres for Disease Control and Prevention, 2019). As of 2019, the Centres for Disease Control and Prevention. Despite recent advances in vaccine research and the well-documented potential of these medicines to save millions of lives each year from infectious illnesses, vaccine hesitancy, or a general lack of confidence in vaccinations, persists in many countries. As social media grows more democratic, for better or worse, vaccine fear poses a communication issue (Castells, 2009). (2009) (Castells). There is no vaccination against resistance or refusals rooted in social, cultural, religious, or political contexts, claim Obrégon, *et al.*, (2009) in their study on the importance of health communication in the elimination of polio. Specific community challenges cannot be solved by medical interventions alone. Good communication is necessary to solve these issues.

The World Health Organization has listed vaccine hesitancy as one of the top ten global health concerns for 2019 due to the problem's widespread nature. (WHO, 2019). Due to sociocultural phenomena like vaccination hesitancy and vaccine rejection (VPDs), several underdeveloped countries that had previously declared the eradication of diseases like the measles are now seeing substantial outbreaks of vaccine-

preventable diseases (VPDs). The WHO reports that recorded cases of the measles are at their highest level since 2006, illustrating a pattern of vaccine reluctance or refusal that strains international health care systems (WHO, 2019). (WHO, 2019). Despite the fact that countries with low vaccination rates, such as Angola and Cameroon, have seen the worst measles outbreaks, the United States and Europe have recorded the most atypical measles cases globally. Over the past century, vaccinations have contributed to the eradication of a number of infectious diseases, including smallpox, polio, and measles, in many parts of the world (Centers for Disease Control and Prevention, 2019). As of 2019, the Centers for Disease Control and Prevention. Despite recent advancements in vaccine development and the well-documented potential of these drugs to save millions of lives each year from infectious diseases, vaccine hesitancy, or a lack of confidence in vaccinations among the general public, persists in many countries. As social media platforms become more democratic, it's no surprise that communication is at the heart of the vaccine aversion issue. (2009) (Castells). (2009) (Castells). According to Obrégon and colleagues, effective health communication is crucial for the elimination of polio. 25, plus this decade (WHO, 2019).

The WHO, (2019) states that a lack of healthcare access, violence and displacement, vaccine misinformation, and a lack of immunization

education are the main contributors to low vaccination rates and measles outbreaks. Additional research has concentrated on the celebrity effect, religious viewpoints, and the anti-vaccination movement, which has been blamed for lowering vaccination rates and escalating VPD outbreaks (Martinez-Berman, *et al.*, 2020). (Kata, 2010). Although there aren't many anti-vaccine organizations, many parents are concerned about the effectiveness and safety of pediatric vaccines (Dubé, Laberge, *et al.*, 2013). Media sources have recently covered measles outbreaks in the U.S., Canada, Australia, and the United Kingdom. Since it can lead to reduced vaccination rates and vaccine aversion, vaccine misinformation has attracted the public's attention. The 21st-century anti-vaccination movement was launched by an article by Andrew Wakefield in the *Lancet* in 1998 that connected the MMR vaccine to autism (Kata, 2010). Anti-vaccination or anti-vax organizations have been around for a while, but in recent years their voices have become more prominent thanks to social media platforms that allow them to express their opinions without restriction, infecting the minds of those who are afraid to get vaccines. (2012) Negative perceptions of the effectiveness and safety of vaccines have been influenced by anti-vaxxers. These organizations use the media and the internet to influence public opinion by exaggerating, promoting, and dramatizing the negative effects of vaccinations, spreading false information and pseudoscience, and publishing firsthand accounts of vaccine harm (Blume, 2006). Despite scientific evidence showing the safety and effectiveness of vaccinations, some individuals continue to be influenced by false information and pseudoscience, as seen by the recent measles epidemics in developed nations. Investigating how individuals and organizations that feed the (social) media with information regarding vaccine aversion serve as authoritative figures is necessary to address this social and public health issue. On March 11, 2020, the WHO proclaimed COVID-19 a pandemic, and all countries went into lockdown (Ducharme, 2020).

The internet was utilized to locate information, communicate, and learn about the virus as apprehension increased and people grew impatient. Many people thought that the outbreak would push anti-vaxxers to the periphery of society. The pandemic fueled arguments against vaccinations. Weeks after the epidemic started, anti-vaxxers rejected a still-in-development vaccine, and the anti-vax video *Pandemic* was published on

YouTube (Shepherd, 2020). After ten days, the anti-vaccine movie was removed from YouTube. Conspiracy theories started to circulate online as a result of COVID19's doubt and fear, and the anti-vaccine movement is far from being ended. Anti-vaxxers propagate false material online and pose as experts in order to capitalize on the pandemic's fear and confusion (Shepherd, 2020). Even more crucial is dissecting rhetoric against vaccinations.

If individuals don't get injections, all vaccine-preventable illness development may be reversed. As worldwide vaccination coverage drops, several vaccine-preventable illnesses are resurfacing. For a variety of reasons, including safety concerns, ignorance, religious or cultural views, and a desire for personal autonomy, people refuse to get immunized. Anti-vaccination movements have grown, particularly on social media where information and experiences can be shared quickly. Information is difficult to find and comprehend, but false information is easy to obtain. This makes it difficult to make wise decisions. This study examines how social media affects Edo State, Nigerians' resistance to the Covid-19 vaccination.

STATEMENT OF THE PROBLEM

Even though the COVID-19 outbreak has increased awareness of the need for vaccinations, many people may still be resistant to them. According to study, people are less likely to accept new vaccines (WHO, 2021b). When COVID-19 immunizations are made available to the general population, 49% of Americans say they will get them, while 31% are unsure and 20% are reluctant (Brunson & Schoch-Spana, 2020). These results imply that COVID-19 vaccine resistance is an international issue, along with the fact that many people are looking for alternate vaccination schedules or delaying vaccinations (AP-NORC poll, 2021). It is difficult to persuade people to accept coronavirus immunizations since vaccine resistance is a widespread public health issue. Increasing numbers of people, according to studies, dislike getting immunized (Blume, 2006). Some people are hesitant to vaccinate their children, loved ones, or themselves because they are uncertain about certain vaccines (Dubé, *et al.*, 2013). Some individuals worry about the negative consequences of vaccination and don't take vaccine-preventable diseases seriously. They distrust the government and "herd immunity" (Benin, *et al.*, 2006; Blume 2006; Corey, *et al.*, 2020; UNICEF, 2021). (Benin, *et al.*, 2006; Blume

2006; Corey *et al.*, 2020; UNICEF, 2021). Government trust affects how people feel about vaccinations, how well they work, and how healthcare is delivered (Centers for Disease Control and Prevention, 2012b).

Vaccines have been demonstrated to prevent disease for a long time, even though most people reject them (WHO, 2020c) (WHO, 2020c). Unvaccinated individuals during the COVID-19 pandemic are a worldwide problem (WHO, 2020c). In 2019, the WHO will rank vaccination reluctance and rejection as one of the top 10 health threats. (WHO, 2020). People reject vaccinations for a variety of reasons, including conspiracy theories, religious views, infodemic, personal opinions, and vaccine safety misconceptions (Al-Qerem & Jarab, 2021; Iorfa, *et al.*, 2020). Vaccines are connected to beliefs, economy, and social values by Al-Qerem, *et al.* in 2021. The COVID-19 vaccine has not received enough research attention in Nigeria. No research has been done to determine whether Nigerians want the COVID-19 vaccine. There hasn't been any research on how well the current immunization is received or whether socio-cognitive barriers keep people from accepting it.

Why do anti-vaccination campaigns discourage being vaccinated? Why is information from healthcare providers more important than information against vaccinations? Social media might be useful. Rarely do non-vaccinating parents administer themselves. Social media platforms offer guidance, advise, and information on immunizations. According to this survey, social media is the best social network (Brunson, 2013) This study assists the government and non-profits in determining how to deal with people who refuse vaccinations (UNICEF, 2021).

OBJECTIVES OF THE STUDY

To find out how anti-vaccination information is spread through social media.

To look at how gender, education, family size, background, etc. can be used to group people who search social media for information about vaccines.

To find out how social media balance the amount of information that is for and against vaccines.

RESEARCH QUESTIONS

1. How are anti-vaccination ideas spread through social media?
2. How can gender, education level, family size, background, etc. be used to figure out who is

looking for information about vaccines on social media?

3. How can social media make sure there is an equal amount of information for and against vaccinations?

LITERATURE REVIEW

Vaccine Hesitancy

To distinguish between proponents and opponents of vaccinations, the term vaccination hesitancy was developed. According to the World Health Organization, vaccine hesitancy is "a behaviour caused by lack of confidence (not trusting a vaccine or provider), complacency (not understanding the need for a vaccination or not appreciating the vaccine), and ease of access" (WHO, 2013). One of the top 10 health risks, according to the WHO in 2019, is not being vaccinated.

The majority of vaccines are given to children; hence vaccine hesitancy largely pertains to worried parents. For various reasons, some communities have scepticism of vaccinations. A person's hesitancy about being vaccinated does not mean they won't. It may also imply that a person is wary about vaccinations, a particular shot, or the recommended schedule. 3 percent of parents opt not to immunize their kids. Unlike other anti-vaccine parents, this small group is steadfast in their beliefs and uninterested in what medical experts have to say. Edwards, (2016) and ECDC, (2015)

Health care workers are less likely to receive vaccinations despite being the most reliable source of information about vaccinations. Although vaccine reluctance among medical professionals with relation to seasonal flu injections has mostly been studied, more focus has to be paid to the various degrees and how they can affect patients (ECDC. 2015.)

Social Media and Vaccine Hesitancy

One of the greatest achievements of modern medicine is vaccination, which may help halt the COVID-19 pandemic. Because they lower illness prevalence and death, vaccinations are regarded as one of the greatest medical advances of the 20th century. An anti-vaccination movement has risen in recent decades despite mounting evidence and scientific agreement on the necessity and safety of vaccinations (Tafuri, *et al.*, 2014).

Following Andrew Wakefield's 1998 vaccine-autism studies, this movement—which use social media as a means of communication—became

more active. Concern is raised by how frequently anti-vaccination movements in the postmodern era contest medical knowledge (Amin, *et al.*, 2017). Social media is used by anti-vaccine activists to communicate their own narratives and points of view. This is a key strategy since organizations and groups who support vaccinations frequently consult authorities and academic research. Due to the popularity of social media, millions of individuals are spreading anti-vaccine propaganda. According to Betsch, *et al.*, exposure to websites and blogs that are critical of vaccinations may directly affect beliefs on vaccination and cause downstream vaccine reluctance (2010). Numerous studies on vaccine resistance center on social media and psychological beliefs about vaccination (Mitra, Counts & Pennebaker, 2016). According to Kata, (2010), factors influencing vaccination decisions include alternative medicine, conspiracy theories, religious ideologies, personal beliefs, emotive appeals, a lack of trust in authorities, and publications that are either pro- or anti-vaccine.

Due to the digital spaces that these platforms provide for people to post almost any types of content, including science-based and medically sensitive content, while reaching billions of audience members, anti-vaccination campaigners find Facebook and Twitter to be useful venues to promote their efforts (Chou & Tucker, 2018). The majority of individuals seldom evaluate the reliability of online sources before depending on them. Since parents who choose not to vaccinate their children draw inspiration from social media posts, several studies have examined how the Internet and social media influence parental vaccination decisions (Allam, Schulz & Nakamoto, 2014).

The effectiveness of the anti-vaccination movement online, particularly on social media, may depend on factors such as language, social media use, content type, and emotional appeal. According to Callender, (2016), users who are cognitively disabled, aged, low-literate, and technologically illiterate are more susceptible to the emotive tale appeals of social media. Before viewing social media content, users' preconceived notions and values, such as their political, religious, or ethnic beliefs, influence how they would react.

A plausible explanation for why people are most likely to believe and spread anti-vaccine messages is provided by the "fuzz-trace theory," which claims that people integrate information in two

ways: verbatim memories, which contain exact details, and gist memories, which contain the overall, fundamental meaning. Gist-based messages are more likely to be shared since social media users tend to judge others based on what they have publicly disclosed in gist form. On social media, pro-vaccine advocates frequently provide statistical data and academic research, which may not be as interesting as personal stories. Compared to control websites, Betsch, *et al.*, (2010) observed that even a brief exposure to vaccine-critical websites increased the perception of vaccination risk overall. According to Bhattacharyya, *et al.*, (2019), social media posts critical of vaccinations cause outbreaks of illnesses that may be prevented by vaccination to last 150 percent longer.

Helge, *et al.*, (2019) created 3-link diffusion chains out of 400 respondents with divergent views on flu vaccination. This study looked at how information is presented, perceived, and altered between connections. Typically, respondents adjusted their statements to match their initial viewpoint. The study found that persuasive messages reveal a person's opinions. It's unknown why social media encourages vaccination rejection rather than uptake. Social media users could represent a biased sample with pre-existing views about vaccination and diseases that can be prevented by vaccines (Buller, et al., 2019). When weighing the benefits and risks of vaccination, it's possible to place greater emphasis on the risks since they seem more urgent and obvious than the less concrete benefits of sickness prevention.

Vaccine Hesitancy and Peoples' Belief Systems

The topic of beliefs is covered in this essay. Nigerians who practice religion would immediately use the epidemic as an excuse for avoiding getting the vaccination. When the epidemic started, many religious followers felt that the government had violated their right to freedom of religion by closing places of worship. Many religious leaders disputed the existence of the virus in Nigeria, and some followers said that the true cause of the state lockdowns—rather than the infection—was the federal government's failure to provide funding to the state legislatures.

Why are churches closed when marketplaces are open was questioned by a respected religious figure in the nation. Although no proof was shown, several religious leaders claimed they had treated patients with the virus. While offering prayers for a patient, a pastor in Rivers State, Nigeria,

contracted Covid-19. Another demanded that the government provide them access to isolation facilities so that they may be prayed for and tested to see whether they were infected.

Some religious leaders have condemned, discouraged, and distanced themselves from taking vaccinations on behalf of their congregations. All of these, according to academics, lead to the NCDC's messaging on vaccination administration being unwelcome.

Religious leaders may positively influence this discussion by shifting public opinion in favor of immunization and vaccines through their numerous venues, including social media, as important persons with millions of followers in the nation. It's hardly unexpected that many religious followers choose to interpret the pandemic through the eyes of their trusted religious authorities.

THEORETICAL FRAMEWORK

The Technological Determinism Theory provides the foundation for this investigation. Technology determinism was proposed by McLuhan, (1982). It seeks to connect the nature of civilization with technology. Technological advancements, particularly productive technology, have the greatest impact on human social ties and organizational structure, according to technological determinists like Karl Marx. This theory contends that technology is what drives human action. The two underlying assumptions of the thesis are that technology in a specific civilisation affects how a community functions and that technical advancements lead to change in that culture.

A changing society can be linked to changing technologies since, in accordance with the aforementioned principle, technology influences a lot of our decisions. New content is disseminated via the internet by radio and television. Technological advancement fosters societal advancement, which is unstoppable. The study found that media technology has an influence on how we think, feel, and act as well as how society functions (Tribal- Literate- Print- Electronic). Technology now has an impact on our ability to learn, feel, and think.

According to Lievrouw and Livingstone, (2006), technological determinism is "the idea that

technology has an overwhelming capacity to influence human behaviour." As was just mentioned, social media has an effect on every business. Governments, businesses, and nations all use social media.

Social media is used by international, domestic, and local health groups to inform the public about the spread of the virus. It enabled the general public to post queries and send messages, the majority of which were responded to, demonstrating how technology has transformed both health communication and other facets of society.

RESEARCH METHODOLOGY

A survey is used in this study. The survey research approach in the social and behavioural sciences is effectively used in this study. According to Ohaja, (2003), surveys are required whenever research depends on individual or collective opinions. All citizens of Oredo, Edo State were surveyed. 295,818 people, from many different ethnic groups, live in Oredo LGA.

Considering the study's population, the sample size is 251. The formula for Taro Yamane's sample size was applied. A fundamental random approach was used to sample the research population. This guaranteed that each resident was qualified for the investigation and selection. The survey used in this investigation gathered information. To encourage speedy coding, the questionnaire primarily contains closed-ended questions.

For questionnaire questions, both content and construct validity were examined. The majority of the questionnaire questions were adjusted so that they more accurately measured the theoretical elements of the study. The reliability of the instrument will be evaluated through a pilot test. With the aid of research assistants, the researcher distributed the questionnaire to the radio station respondents. After administration, the completed surveys were gathered. three research issues are the focus of the data analysis. For visual assistance, frequency tables were used to show the measured data. The finest, simplest, and most straightforward approach to assess complex data is in tables.

DATA PRESENTATION

Table 1: Exposure to any anti-vaccine ideas on social media

| Nature of Response | No. of Response | Percentage |
|--------------------|-----------------|-------------|
| Yes | 200 | 80% |
| No | 0 | 0% |
| Undecided | 51 | 20% |
| Total | 251 | 100% |

Source: Field Survey, 2022

The table shows that majority of the respondents – two hundred (200) agreed that they have you encountered any anti-vaccine ideas on social media. Fifty-one respondents, representing 20% of

the sampled respondents were undecided on whether they have you encountered any anti-vaccine ideas on social media or not.

Table 2: Reservations about Covid-19 vaccines

| Nature of Response | No. of Response | Percentage |
|--------------------|-----------------|-------------|
| Yes | 190 | 76% |
| No | 58 | 23% |
| Undecided | 3 | 1% |
| Total | 251 | 100% |

Source: Field Survey, 2022

The table shows that majority of the respondents – one hundred and ninety (190) of the respondents agreed that they do have reservations about Covid-19 vaccines. Anther fifty-eight respondents or 23%

are of the view that they do not have any reservations concerning Covid-19 vaccines. The remaining 3 respondents or 1% were undecided about reservations on Covid-19 vaccines.

Table 3: Reservations based on the anti-vaccination ideas spread through social media

| Nature of Response | No. of Response | Percentage |
|--------------------|-----------------|-------------|
| Yes | 190 | 76% |
| No | 58 | 23% |
| Undecided | 3 | 1% |
| Total | 251 | 100% |

Source: Field Survey, 2022

Table 3 reveals that the majority of respondents— 190 of the respondents—agreed that their reservations are based on the anti-vaccination notions circulated through social media when asked whether their reservations are based on these concepts. The other 3 respondents, or 1%, were

unsure if worries regarding Covid-19 vaccinations were based on the anti-vaccination notions shared via social media. of the 58 respondents, or 23%, said their reservations are not based on the anti-vaccination concepts distributed through social media.

Table 4: Anti-vaccination ideas spread through social media

| Nature of Response | No. of Response | Percentage |
|---|-----------------|-------------|
| Vaccines are meant to reduce the population | 96 | 38% |
| Vaccines cause deformity | 58 | 23% |
| Vaccines causes impotency | 56 | 22% |
| Vaccines causes death | 41 | 16% |
| Total | 251 | 100% |

Source: Field Survey, 2022

On the anti-vaccine ideas spread through social media, The table above shows that majority of the respondents, 99(38) are of the view that one of the anti-vaccination ideas spread through social media is that vaccines are meant to reduce the population

of Africa. This opinion is followed by those of 58 (23) respondents who said that vaccines cause deformity. Impotency is another anti-vaccine idea shared on social media according to 56 (22)

respondents. The remaining 41 (16) respondents are of the view that vaccines cause death.

Table 5: If gender affects search for information on covid-19 vaccines on social media

| Nature of Response | No. of Response | Percentage |
|--------------------|-----------------|-------------|
| Yes | 119 | 47% |
| No | 99 | 39% |
| Undecided | 33 | 13% |
| Total | 251 | 100% |

Source: Field Survey, 2022

On gender affecting the search for information on covid-19 vaccines on social media, the majority of the sampled respondents (119 or 47) agreed that their gender affects their search of information on Covid-19 in the social media. Ninety-nine respondents or 39% are of the opinion that their

gender does not affect their search for information on covid-19 vaccines on social media. The remaining 33 respondents or 13% were undecided on whether their gender affects their search for information on covid-19 vaccines on social media or not.

Table 6: If education affects search for information on covid-19 vaccines on social media

| Nature of Response | No. of Response | Percentage |
|--------------------|-----------------|-------------|
| Yes | 142 | 57% |
| No | 58 | 23% |
| Undecided | 51 | 20% |
| Total | 251 | 100% |

Source: Field Survey, 2022

On education affecting the search for information on covid-19 vaccines on social media, the majority of the sampled respondents (142 or 57) agreed that their education affects their search of information on Covid-19 in the social media. Fifty-eight respondents or 23% are of the opinion that their

education does not affect their search for information on covid-19 vaccines on social media. The remaining 51 respondents or 20% were undecided on whether their education affects their search for information on covid-19 vaccines on social media or not.

Table 7: If family background affects search for information on covid-19 vaccines on social media

| Nature of Response | No. of Response | Percentage |
|--------------------|-----------------|-------------|
| Yes | 129 | 52% |
| No | 58 | 23% |
| Undecided | 64 | 25% |
| Total | 251 | 100% |

Source: Field Survey, 2022

On family background affecting the search for information on covid-19 vaccines on social media, the majority of the sampled respondents (129 or 52) agreed that their family background affects their search of information on Covid-19 in the social media. Fifty-eight respondents or 23% are of the opinion that their family background does

not affect their search for information on covid-19 vaccines on social media. The remaining 64 respondents or 25% were undecided on whether their family background affects their search for information on covid-19 vaccines on social media or not.

Table 8: Whether social background have any effect on how to view covid-19 vaccines information in the social media

| Nature of Response | No. of Response | Percentage |
|--------------------|-----------------|-------------|
| Yes | 108 | 43% |
| No | 88 | 35% |
| Undecided | 55 | 22% |
| Total | 251 | 100% |

Source: Field Survey, 2022

On social background affecting the search for information on covid-19 vaccines on social media, the majority of the sampled respondents (108 or 43%) agreed that their social background affects their search of information on Covid-19 in the social media. Eighty-eight respondents or 35% are of the opinion that their social background does

not affect their search for information on covid-19 vaccines on social media. The remaining 55 respondents or 22% were undecided on whether their social background affects their search for information on covid-19 vaccines on social media or not.

Table 9: Whether social media gives you adequate information concerning covid-19 vaccines

| Nature of Response | No. of Response | Percentage |
|--------------------|-----------------|-------------|
| Yes | 140 | 56% |
| No | 59 | 23% |
| Undecided | 52 | 21% |
| Total | 251 | 100% |

Source: Field Survey, 2022

The table above shows that majority of the respondents – one hundred and forty (56%) are of the opinion that the social media gives them adequate information concerning covid-19 vaccination. Fifty-nine (23%) believe that the social media does not give them adequate

information concerning covid-19 vaccination while the remaining 52 (21%) were undecided on whether the social media gives them adequate information concerning covid-19 vaccination or not.

Table 10: Whether the information in the social media are enough to discourage people from taking the Covid-19 vaccine

| Nature of Response | No. of Response | Percentage |
|--------------------|-----------------|-------------|
| Yes | 166 | 66% |
| No | 71 | 28% |
| Undecided | 14 | 6% |
| Total | 251 | 100% |

Source: Field Survey, 2022

On whether the information in the social media are enough to discourage people from taking the Covid-19 vaccine, the table above shows that majority of the respondents 166(66%) agreed that the information in the social media are enough to discourage people from taking the Covid-19 vaccination. On the other hand, 71(28%) disagreed

that the information in the social media is enough to discourage people from taking the Covid-19 vaccination. The remaining 14 respondents, representing 6% were undecided on whether the information in the social media is enough to discourage people from taking the Covid-19 vaccination or not.

Table 11: Whether social media provide a balanced information on covid-19 vaccines

| Nature of Response | No. of Response | Percentage |
|--------------------|-----------------|-------------|
| Yes | 103 | 41% |
| No | 97 | 38% |
| Undecided | 51 | 20% |
| Total | 251 | 100% |

Source: Field Survey, 2022

The table above deals with information on whether the social media provide a balanced information on covid-19 vaccines. Data from the table shows that majority of the respondents 103(41) agree that social media can provide a balanced information on covid-19 vaccines. Ninety-seven (38%) of the

respondents believe that social media cannot provide a balanced information on covid-19 vaccines while the remaining 51(20%) were undecided on whether social media provides a balanced information on covid-19 vaccines or not.

Table 12: Whether social media provide users with verifiable information on Covid-19 vaccination

| Nature of Response | No. of Response | Percentage |
|--------------------|-----------------|-------------|
| Yes | 103 | 41% |
| No | 100 | 39% |
| Undecided | 48 | 19% |
| Total | 251 | 100% |

Source: Field Survey, 2022

The table above deals with information on whether the social media provide users with verifiable information on Covid-19 vaccination. Data from the table shows that majority of the respondents 103(41) agree that the social media provide users with verifiable information on Covid-19 vaccination. One hundred respondents (39%) said that the social media provide users with verifiable information on Covid-19 vaccination, while the remaining 48(19%) were undecided on whether the social media provide users with verifiable information on Covid-19 vaccination or not.

DISCUSSION OF FINDINGS

The study's findings show that most respondents agreed they had come across any anti-vaccine ideas on social media, that most respondents did have reservations about the Covid-19 vaccine, that most respondents agreed their reservations were based on the anti-vaccination ideas spread through social media, and that one of the main anti-vaccine ideas spread through social media is that vaccines are designed to reduce the population.

The majority of participants in the research who were surveyed thought that their gender affected how they searched for information about Covid-19 on social media sites. One of the study's conclusions was that. The respondents also concurred that how people search for information about COVID-19 on social media depends in part on their educational background. Additionally, the respondents concurred that how they search for information about COVID-19 on social media is influenced by their family backgrounds. Whether or whether the respondents' social background has an impact

The majority of study participants think that social media provides them with enough information regarding the COVID-19 vaccination. It is yet another study finding. Table 10 makes it obvious that the majority of respondents believed that the information shared on social media was adequate to discourage people from receiving the COVID-19 vaccine. According to Table 11, the majority of respondents believe that social media may present accurate information on COVID-19 vaccines. The

majority of responders, according to data from Table 12, concur that social media gives people access to credible information about the Covid-19 immunization. Similar to the previous section, Table 11 demonstrates that the majority of respondents concur that social media may present accurate information about COVID-19 vaccinations.

Previous investigations (Wang, *et al.*, 2020; Harapan, *et al.*, 2020) revealed a significant degree of COVID-19 vaccination hesitancy in Portugal, higher than that discovered in other studies. Although one study in the USA reported that 31% of the participants were unwilling to take the COVID-19 vaccine, another reported that 20% of the participants were unwilling to take the COVID-19 vaccine due to the collateral effects, and another reported that 14% of the participants were unwilling to take the COVID-19 vaccine because they do not want to. The percentage of people who would refuse to take the vaccine was similar to the prevalence reported by other studies, which has mainly ranged between 4 percent and 14.2 percent. However, the study also discovered that 56% of the individuals would put off getting the COVID-19 vaccination for a while or a very long period. Only two research, as far as we are aware, have looked into vaccine delay. According to Wang, *et al.*, research's from 2020, 43.7% of people would put off getting vaccinated until vaccine effectiveness and safety were established. Other research have looked at the range of uncertainty between 12 and 42 percent about intention to receive the COVID-19 vaccine. These investigations, however, focused on doubt rather than reluctance. Although the threat to herd immunity has not before been documented and it is unclear how long people will wait, the alarmingly high incidence of vaccination delays necessitates action. Numerous variables were linked to vaccination reluctance, according to the study. Before information on the safety and efficacy of the COVID-19 vaccine was made public, there was a higher rate of refusal and postponement of receiving the vaccine. This suggests that people may be responding to the information that has

been made public and illustrates how hesitancy is a complex, time-dependent construct that is influenced by a number of factors. The study's conclusion is that social media platforms are essential for making important decisions about whether or not to utilize Covid-19 vaccinations at the community level.

CONCLUSION AND RECOMMENDATIONS

Despite their drawbacks, online surveys are a cost-effective method of gathering information that enables timely tracking of public attitudes about the vaccination and its acceptance over time. These findings have an impact on the immunization programs that began at the end of 2020. The study identified categories that are more likely to postpone or refuse vaccination, highlighting the need of disseminating information via various methods that the public considers as clear and intelligible. As a result, vaccination intention and hesitation should be continuously monitored and assessed in order to adjust methods as judged appropriate. Vaccination intention may also be higher than actual vaccine uptake. Targeted information should only be disclosed by those whom the subgroup has confidence in.

The study's findings indicate that significant vaccination reluctance still exists as a result of many circumstances, and social media is a potent tool for spreading accurate information about the Covid-19 vaccine.

The study recommends thus:

Experts in media and communication ought to dispel myths about the Covid-19 vaccination using the social media platforms.

The government should act decisively at all levels to create a strategy for a youth-focused vaccination program.

Health promotion professionals need to act quickly to address widespread false information about the coronavirus vaccination. Particularly mistrust of the government, vaccination safety, and encouragement of vaccine uptake rather than resorting to force against the populace. The public should be persuaded to accept the vaccinations by this message's clear design, which will increase public confidence in the legal system and healthcare system.

In order to obtain expert-structured communication channels and guidance on the application of behavioral science methods for communicating with the public in less obtrusive, non-anxiety-

provoking, but motivating manners for citizens to gain insight to a favorable health care accessibility that will yield convincing and favorable feedback on Coronavirus, the government and its health agencies should also work with the Nigerian Association of Psychologists.

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