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Pandemic of fear or Disease: Processing and adoption of Social Media Information on COVID-19 among Elites in Nigeria

ADESINA LUKUMAN AZEEZ, ABDULRAHEED SAADUDEEN.
University of Ilorin, Nigeria

ABIODUN ADENIYI
Baze University, Abuja, Nigeria

Abstract. This study focused on the processing and adoption of health messages among social media users in Nigeria. It explored the influence of perceived benefits and perceived risks in the processing and adoption of information on COVID-19 on social media among health information seekers in Nigeria. It adopted survey method, with 115 respondents that were recruited through snowball sampling. The participants were particularly drawn from Ilorin, in the North- central part of Nigeria, and Lagos, South-west part of Nigeria. It established that although there were reservations about the information quality on social media among the respondents, there was significant relationship between perceived usefulness (supportiveness) and perceived benefits of information on COVID-19. Essentially, information qualities significantly influence perceived benefits as the regression analysis showed significant relationships between the variables. The study therefore concluded that social media have become an increasingly important information source for risk and crisis communication, particularly during infectious disease outbreaks. Information acquisition and exchange via social media in the wake of COVID-19 pandemic can complicate communication about the disease, as the nature or quality of information available play a significant role in shaping public risk perception or subsequent behaviours.

Keywords: Pandemic, Disease, Social Media, Adoption, COVID-19, Elites, Nigeria.

1. Introduction

The dreadful coronavirus disease of 2019 (COVID-19), which erupted in Wuhan, China on December 8, 2019 was later recognised as a Public Health Emergency of International Concern (PHIEC) on January 30, 2020 by the World Health Organisation (WHO, 2020). With over thirty million cases globally as of September 19 (2020): United States (over six million cases), India (over five million cases), Brazil (over four million cases) Russia (over one million), and in Africa, South Africa (over 657, 000 cases) and Egypt (Over 101, 000 cases) were the leading two countries from the continent that were mostly hit by the pandemic (Worldometer, 2020). Nigeria as one of the most populous black nation in the world was designated as the 13 high-risk in Africa due to the weak state of the healthcare system as well as inadequate number of health personnel (Amzat, 2011; Marbot, 2020). Given this perilous healthcare facilities, Africa was focused as the potential designation where there will be more COVID-19 casualties (Amzat et al., 2020). Eventually, Nigeria joined the league of international community, recording its COVID-19 index case on February 27 which was imported from Italy despite the claim of strengthened surveillance around the country's airports.

Nigerians' palpable apprehension of the pandemic was confirmed when it later emerged that the index case (an Italian) had indeed visited a number of states before testing positive for COVID-19. In a globalised world where there has been increasing transnational movements among people from different countries, the propensity of making a communicable disease such as COVID-19 became manifested, thus making closure of land and sea borders as well as airports a

priority among the comity of nation (Tausch, 2015). Following the recording of the index case, Nigeria was to later face the challenge of the spread of the virus across all the states of the Federation although at a snail pace. This was attributed to the public interventions and policies including the training of COVID-19 emergency teams by the National Centre for Disease Control (NCDC) across the country (Amzat et al., 2020). As part of the protocols, returning Nigerians who were directed to observe a mandatory 14-day self-isolation floated the law, with some of them being carriers of the virus. Prior to the closure of the airports, Nigerians had gradually recording more number of imported cases, according to the NCDC.

Between February 27 and March 17 (the first 30 days), the recorded cases were imported by returning Nigerians from different parts of the world. A month after the index case was recorded, no fewer than ten states in Nigeria had a combined 81 clinically confirmed cases, with three recoveries and one death. As of September 19, Out of the 56, 735 cases, Lagos State had the highest number of cases (18, 247 cases), FCT (5, 526 cases), and Oyo (3, 226 cases) while 1,094 deaths were recorded 48,305 recovered from the deadly virus (NCDC, 2020). The available record of the first 30 days of COVID-19 in Nigeria showed that 70 per cent male and 30 per cent female tested positive for the virus respectively. With patients ages which ranged between 30 and 60 years, people within the age bracket 31-50 years accounted for the most cases (39 per cent). About 101 cases (44 per cent) were reported while 96 cases (41 per cent) had epidemiological information which are incomplete. That is, the sources of their infections were untraceable. Thirty-five cases (15 per cent) had traceable contacts of positive cases (NCDC, 2020). The possible reason why Lagos and Abuja had the highest number of cases were attributed to common characteristics such as having the major international airports as well as being the commercial and administrative hubs of the country (Amzat et al., 2020).

In spite of the number of deaths arising from COVID-19, the origin, magnitude and cure is still shrouded will all sort of conspiracy theories among Nigerians. For example, many a few preachers had attributed the origin of the virus to 5G, the latest generation of the internet connection; others had described it as a hoax. This is reflected with the number of COVID-19 patients (2,381) who according to Lagos State Commissioner for Health, Professor Akin Abayomi, had decided not to be treated at isolation centres. He attributed their decision to "either due to wrong information or preference for self-care at home. Similarly, the NCDC has disclosed that the agency has to contend with the misinformation alongside politicisation of the virus and declared that "[the NCDC] are transparent in the evidence we provided to the people, but they are now interpreting our transparency as a conspiracy. A lot of conspiracy theories started coming up and this is a big challenge" (NCDC, 2020). In dismissing reports which linked the 5G to COVID-19, the Nigeria Communication Commission (NCC) described them as "misleading and with no proven evidence (NCC, 2020). Giving the avalanche of misinformation, more Americans (49 per cent) had disclosed that "they definitely or probably would not get a COVID-19 vaccine if it were available at this time. Intent to get a COVID-19 vaccine has fallen from 72 % in May to 51% today" (Pew Research Center, 2020).

Although several studies have confirmed the use of social media for different health conditions across several countries (Zhang et al, 2014; Park & Park, 2013), few have focused on how socio-cultural factors influence how people process and adopt health information on disease outbreaks in Nigeria. The claim against social media as being elitist comes to the fore when one compares the use and adoption of web-based technologies for health information, which is influenced by social and health status of individuals. It is, therefore, ironic that despite the level of education as well as social status of social media users, the rate at which misinformation and fake cures of, say, COVID-19, are being circulated on social media, has become worrisome. For example, ethnicity and having higher education and more income influence elite perception towards having trust in health information which will lead to its adoption among the adults in the US (Thai et al., 2018; Huo et al., 2019). While these studies are not generalisable in Nigeria context, hence the justification of this study which takes the cognizance of the peculiarities of the country as a developing nation with the Internet penetration of 46.1 per cent and 92.3 million users (Statista, 2019; Internet World Stat, 2020).

This study focuses on the processing and adoption of health messages among social media users. This is because having a good understanding of this segment of the population will assist the country's health authorities in its health communication policy and campaigns. Furthermore, motivations for sharing and adopting "fake cures" (Ghenai and Mejova, 2018) among Nigerians who are not victims of a condition of the health message they are propagating deserves to be empirically understood. A survey of Nigerians

who are online health information seekers will reflect the health motivational behaviours which will therefore aid the health policy formulators' understanding of how to successfully carry out health interventions and campaigns.

Using Net Valence Model (NVM, Fishbein, 1967; Lewin et al., 1944) as modified by Li et al (2016) to understand the influence of cost-benefit factors in understanding information processing and adoption on Corona virus among the elites in Nigeria, the NVM was developed based on Coby (1967)'s social support theory which was developed to explain motivating factors why people participate in social communities or groups. The use of health messaging on social media based on individuals' beliefs on its benefits influence their decision to process or adopt using the NVM is yet to be fully explored (Li et al., 2016). Several models including elaboration likelihood model (Huo et al., 2018), planned behaviour model (Jin 2018) have been used to explain information adoption among people, but this study poises to contribute to further understanding of the applications and modifications of the model. However, Li et al (2016)'s suggestion that the NVM is effective to explain people's attitude and behaviour towards health information is adopted in this study. Thus, the study explores the influence of perceived benefits and perceived risks in the processing and adoption of information on COVID-19 on social media among health information seekers.

2. Health Information Seeking and Processing on Social Media

The attributes of elites in modern societies as espoused from sociological perspectives all points to the fact that there is an interdependency and interconnectedness of elites from different strata including the acquisition information and communication technology. Elitist perspective of the media adoption lies under the assumption that an unequal access to media technologies vis a vis its contents is pervasive in every society. This implies that there is a concentration of media ownership into the few hands of elites in Nigeria. There are several factors that influence acquisition of media technologies such as smart phones with web-based media (Facebook, WhatsApp, Twitter, Instagram, etc.). According to the Unified Theory of Acceptance and Use of Technology (UTAUT), factors such as social influence, self-efficacy, experience, status, etc. are all resemblance of elitist perspective. While the adoption of social media is not exclusive for the elite, it is certainly used among social entities and public figures to influence public discourse and opinion. For instance, Twitter is one of the elitist medium which has been embraced by political elites across the globe including the US President Donald Trump.

Persuasive information, which is aimed at changing individual's attitude towards an issue or cause such as health issue, are subjected to a dual-route persuasion process of "central route persuasion and peripheral route persuasion" (Petty & Cacciopo, 2012). Based on Elaboration Likelihood Model (ELM), when an individual processes an information through the central route, they tend to experience high level of elaboration, making them to devote much cognitive efforts to the information they have been exposed to while the peripheral route, on the other hand, explains that an individual will experience low level of elaboration and may not process the information "due in part to his prior knowledge or his motivation and ability to expend the effort to absorb the information" (Huo et al., 2018, p. 5). Attitude formation and change is contingent upon information processes, combining the mixture of both the central route and peripheral route (Sussman & Siegal, 2003).

However, there are only other few times that media contents are subjected to scrutiny like during a crisis such as COVID-19 pandemic. Social media, just like mass media, bear strong influence in shaping public perception and attitude toward the spread of the virus. While several studies have established WhatsApp, Facebook and Twitter as some of the platforms through which people receive health information (Awofeso et al., 2019), but the credibility of their contents remain elusive (Kym & Syn, 2016). The dangers posed by social media is pervasive that lot of misinformation and fake cure of Corona virus are shared without any form of scrutiny among some users including elites. As misinformation and fake cures are perceived to be distracting the fight against the spread of Corona virus, Mohammed (2020) said:
If you go by WhatsApp platform, there are so many myths and cure for COVID-19 today. Some people will tell you that it cannot affect Africans; some say the disease does not even exist at all, while some will claim that all one needs to do is to take garlic, take ginger. The tragedy of fake news is that people get confused by it, which may affect their attitude to the efforts to contain the disease (p.12).

Another potential implication of the use of social media to share misinformation on Corona virus is on mental health of people during the COVID-19 pandemic. Zheng et al (2020) have suggested that misleading information about the spread of information may affect the "mental wellbeing of

ethnically Chinese travellers during the global COVID-19 pandemic" (p.1). Decrying the influence of media coverage and dangers of media posts of the virus on Nigerian mental health, Sheikh (2020), a Psychiatrist, said the pandemic has not only provided new and unique challenges, but the situation is worsened by "fake news, alarming reports and stories as well as videos and pervasive media coverage that is causing emotional distress to many people" (p.13).

3. Theoretical Underpinning

Given that human motivated behaviours are often anchored on positive and negative factors, the NVM has suggested that such behaviour can be understood based on those factors. Thus, the assumption of the NVM, which is based on social support theory is that an individual would be motivated to carry out or participate in an activity based on the basis of cost-benefit analysis. That is, an activity is undertaken by people if the benefits accrued therein outnumber the corresponding risks or cost (Li et al., 2016;Lewin et al., 1944; Fishbein, 1967).

Several studies have used the NVM to investigate factors responsible for the adoption technology-based services and activities including the Internet banking (Lee, 2009), bring-your-own-device services (Weeger et al., 2015b) as well as social network sites (Li & Wang, in press). And in the context of health information, Li et al (2016), using cross-culture variables, suggested that the NVM is capable of effectively predicting people's willingness or intention to seek and share health information encountered on social media. In line with the NVM, it is hereby suggested that the adoption of health information is contingent upon individuals' conviction that the benefits of such information outweigh the costs required to undertake the advice or measures being suggested.
In the context of this study, following Li et al (2016), the antecedents of perceived benefits include perceived usefulness, perceived information quality as well as informational and social support from online health social media support groups. Other factor such as credibility as contained in Li et al (2016) is substituted with the perceived information quality because it is considered more suitable in the study.

4. Hypothesis Development: Perceived benefits and Health Information Processing

Perceived benefits have been evolved across socio-psychology studies to describe motivational behaviour among online health information-seekers. Also, there are different dimensions through which perceived benefits of health information have been measured. In the context of this study, perceived usefulness, information support, social support and perceived information quality is adopted to investigate knowledge adoption on social media among health information-seekers.

Perceived Usefulness

Perceived usefulness has received considerable research attention (e.g., Chung et al., 2015; Zha et al., 2016). For example, in the context of workers' attitude towards work-related advice received showed that "information adoption" was predicted by the perceived usefulness (Sussman & Siegal, 2003). Later, perceived usefulness was used to examine travel messaging adoption on social media (Chung et al. 2015). The use of digital library for purposive information-seeking among users was explored with the focus on perceived usefulness, though changed to information usefulness in the study (Zha et al., 2016). As postulated in the value-expectancy based theory vis-a-vis net valence model (NVM), motivated behaviours are predicated on whether an outcome for engaging in an activity outweighs the cost (Lewin et al, 1944). Based on this approach, a positive relationship has been found to exist between the perceived benefits and the adoption of e-banking as well as social networking sites (Lee, 2009).

Social Support

People turn to social media to seek for health advice from their peers (Skeels et al., 2010). They are veritable platforms through which validation of claims about medical cures of a condition is sought among patients and care-givers (Fox, 2011) while questions and concerns about health conditions and treatment are shared (Pew Research Centre, 2012). Through social media, vulnerable individuals to suicide risk are counselled while the underlying factors of coping with depression are shared (Luxton et al., 2012). Over forty-two per cent of survey respondents rely on social media to access health information in the US. This is because they do not only use the platforms to connect with other health information seekers online, but they also interact with others whom they have similar or related health conditions with (Solutions, 2013). This finding corroborates an earlier study (Scanfield et al., 2010) which suggested that over 40 per cent of the study's respondents belonged to different online support groups through which they learn and manage their health conditions.

The significant health concerns of members of different Facebook's Online Health Community has been investigated to identify the benefits of participation . The result of the study showed that respondents consider are pursuing social goals related to their personal health, including emotional support, motivation, accountability, and advice (Newman et al., 2011). One of the online health information studies (Oh et al., 2013) has noted that emotional support was a significant predictor of health self-efficacy. This is somewhat related Mowlabocus et al (2014)'s suggestion that the use of online health information among their respondents include awareness creation, improved access to health information as well as empowerment of people with health information through which they can manage their health conditions. Social media are perceived as empowerment tools among those who are suffering from a health condition as medical treatment of their condition are learned and shared among members of an online community group Mano (2014).

Perceived Information Quality

This refers to the objective attribute of knowledge (Dong, 2014). It is what Huo et al (2018) describe as "a subjective evaluation and perception emphasizing on the substructure dynamics of information quality, which means the perception of information quality will change along with the context and subjects' preferences" (p.7). There are three categorisations of perceived information quality, namely: perceived intrinsic information quality, perceived contextual information quality, and perceived actionable information quality (Kyoon Yoo, 2014; Dong et al., 2011). This implies that the recipient of an information must consider it as truthful and accurate; they should perceive the information as being adaptable and adaptive to other purposes from which it is originally meant for; and they should perceive the information as containing useful benefits (Kyoon Yoo et al., 2011; Kyoon Yoo, 2014; Huo et al., 2018). While Olatokun and Nwafor (2012) observed that there was no significant relations between knowledge quality and sharing behaviour among civil servants in Ebonyi State, Huo et al (2018) however suggested that perceived knowledge (information) quality alongside knowledge consensus all have positively related to knowledge adoption on social media.

Although there is a sufficient health information online, only few of these internet-based health information are credible and trusted (Kravitz & Bell, 2013). Therefore, Huo et al (2018) concluded that people's belief about information is anchored on its "expandability, adaptability, and the easy application". In the context of this study, the three key dimensions including perceived intrinsic information quality, perceived contextual information quality, and perceived actionable information quality are evaluative components of health information (knowledge).

Perceived Benefits and Decisions to Process and Adopt Health Information

In the context of this study, perceived benefits is defined as individuals' assessments of benefits associated with using health-related posts or broadcasts on social media. Prior studies have suggested that an individual perceives benefits in adopting information on social media applications (Li et al., 2016). Perceived benefited which are processed through central route and it is based on cognitive efforts, people tend to overcome barriers associated with health information adoption (Petty & Cacciopo, 2012).

Therefore, when the perceived benefits of online health information received by people are high, chances are that they will elaborate on those benefits through the central route. Furthermore, when an individual have experienced the suggested benefits in the post as well or have prior knowledge of a specific health related issue, they tend to invest more cognitive energy on the contents (Li et al., 2018). From the foregoing, the following hypotheses are inferred:

H1a: *Perceived usefulness (support) positively relates to people's decision to process health information* (on COVID-19)

H1b: *Perceived information positively relates to people's decision to process health information (on COVID-19)*

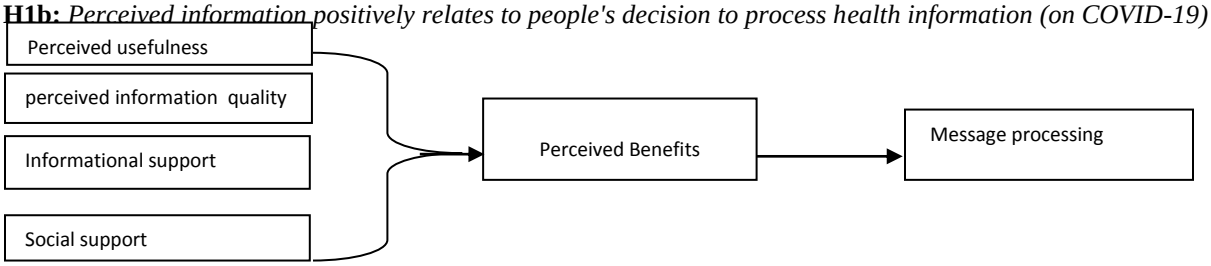

Figure 1: *Information Processing Model*

5. Research Design, Measurement, and Instrumentation

It is an online survey while 115 participants were recruited through snowball sampling. The participants were particularly drawn from Ilorin, in the North- central part of Nigeria, and Lagos, South-west part of Nigeria. Only participants who had shared or adopted online health information were considered for the study. This is because they were familiar with the context of the study. Furthermore, items of the instrument (questionnaire) were adopted from previous studies. The analysis of the instrument showed that items for perceived usefulness of online health information was adapted from Thong et al. (2002); items for social (informational and emotional) supports were adapted from Hajli (2014); and items for perceived information quality (accuracy, relevant and completeness) were taken from Citrin (2001), Wixdom and Todd (2005), and Lee at al. (2008). Each question was measured on a 5-point, Likert-type scale. The remaining items were measured on the scale of 1= "strongly disagree" to 5= "strongly agree"

6. Results and Discussion

This section presents the frequency distribution percentage of each part of the research instrument.

Table 1.1: Demographic Characteristics of Respondents

Demographic Profile	Frequency	Percentage
Gender		
Male	72	62.6%
Female	43	37.4%
Total	**115**	**100%**
Age group		
Less than 25	32	27.8%
25-30	44	38.3%
31-35	12	10.4%
36-40	10	8.7%
41-45	13	11.3%
46-50	2	1.7%
51 and above	2	1.7%
Total	**115**	**100%**
Occupation		
Civil Servant	26	22.6%
Self-employed	42	36.5%
Community/religious Leader	3	3.6%
Other	44	38.3%
Total	**115**	**100%**
Education		
SSCE	12	10.4%
Bachelor	39	33.9%
Post-Degree	30	26.1%
Other	34	29.6%
Total	**115**	**100%**

Source: *Researcher's Field Work, 2020*

The demographic profile in this study includes the respondents' gender, age group, occupation and education. The demographic profile of respondents for this study is presented in frequency and percentage format in 1.1. The male respondents constituted 73, which is 62.6% of the respondents, while female respondents totaled 43 forming 37.4% of the population. This clearly shows that there is distinct wide gap in the gender of the respondents of this study. As evident in the Table, those that fell within the age range 25-30 constituted the largest respondents of this study, they accounted for a quarter of (38.3%) of the total respondents of this study. Those within the age range of 46-50 and 51 and above constituted the least of the respondents with (1.7%) respectively.

However, those within the age range less than 25 constituted (27.8%) of the respondents, while those within the age range of 31-35 constituted (10.4%), those within the age range of 41-45 constituted (11.3%) of the respondents. This indicates that those that answered this questionnaire were mature. Those that have other occupation constituted the largest part of these respondents with (38.3%) of the respondents, followed by those that are self-employed with

(36.5%). While those that are civil servant constituted 22.6%, community/religious leaders constituted the least of the respondents with (2.6%).

Table 1.2: Perceived Benefits of COVID-19 Information

Perceived Benefits	Level of Agreement*0%					Overall		
	1	2	3	4	5	M	SD	%
Social media enables me to acquire More useful information about COVID-19		7.0	1.7	2.6	41.7	47.0	4.2	1.1 84
Engagement on social media improves my Efficiency in obtaining helpful information on COVID-19	7.8	3.5	6.1	47.0	35.7	3.9	1.1	78
The information provided on social media is useful for me to understand	6.1	2.6	4.3	47.8	39.1	4.1	1.0	82
The information provided on social media Enables me to make more informed and Accurate decision on COVID-19	6.1	8.7	7.8	50.4	27.0	3.8	1.1	76
On social media, some people would Offer suggestion on COVID-19 protocol		7.8	3.5	10.4	65.2	13.0	3.7	1.0 74
When I encounter misleading report on COVID-19, some people on social media would give me information to help me overcome the problem		5.2	9.6	17.4	53.0	14.8	3.6	1.0 72
When faced with misleading reports on COVID-19, some people on social media Would help me discover the cause and Provide me with suggestion		7.0	13.0	13.0	51.3	15.7	3.6	1.1 72
When faced with difficulties, some people On social media are on my side	5.2	20.0	30.4	37.4	7.0	3.2	1.0	64
When faced with difficulties, some people On social media comforted and supported me	7.8	15.7	27.0	44.3	5.2	3.2	1.0	64
When faced with difficulties, some people On social media expressed interest and And concern in my well-being	4.3	18.3	21.7	41.7	13.9	3.4	1.0	68
Most of the COVID-19 information on Social media is accurate		8.7	32.2	15.7	34.8	8.7	3.0	1.1 60
Most of the COVID-19 information on Social media is complete		12.2	34.8	20.0	26.1	7.0	2.8	1.1 56
Most of the COVID-19 information on Social media is relevant to me		7.8	21.7	22.6	40.0	7.8	3.1	1.1 62
I think sharing/discussing COVID-19 Related information on social media offers Me a lot of advantages		5.2	9.6	10.4	58.3	16.5	3.7	1.0 74
I consider sharing/discussing COVID-19 Related information on social media to be beneficial	9.6	4.3	10.4	60.0	15.7	3.6	1.1	72
Total								

Source: Researcher's Field Work, 2020 (**Scale: 1= Strongly disagree, 2= Disagreed, 3= Neutral, 4= Agreed, 5= Strongly agreed)*

The data in table 1.2 which is on the perceived benefit of COVID-19 information indicates that 84 per cent of the respondents strongly agreed that social media help in the acquisition of more useful information about COVID-19 (M=4.2, S.D=1.1), while 78 per cent of the respondents also agreed that engagement on social media improves my efficiency in obtaining helpful information on COVID-19 at (M=3.9, S.D= 1.1), 82 per cent of the respondents also agreed that the information provided on social media is useful for me to understand at (M=4.1, S.D=1.0). More so, 76 per cent of the respondents agreed that the information provided on social media enable them to make more informed and accurate decision on COVID-19 at (M=3.8, S.D=1.1), while 74 per cent of the respondents also agreed that on social media, some people would offer suggestion on COVID-19 protocol, 72 per cent of the respondents agreed that when they encounter misleading report on COVID-19, some people on social media would give them information to help them overcome the problem.

When faced with misleading reports on COVID-19, 72 per cent of the respondents agreed that some people on social media would help them to discover the cause and provide them with suggestion at (M=3.6,S.D=1.1), while 64 per cent of the respondents strongly agreed that when faced with difficulties, some people on social media are on their side at (M=3.2, S.D=1.0), while 64 per cent of the respondents strongly agreed that when faced with difficulties, some people on social media comforted and supported them at (M=3.2, S.D=1.0). In addition, 68 per cent of the respondents agreed that when faced with difficulties, some people on social media expressed interest and concern in their well-being at (M=3.4, S.D=1.0), while 60 per cent of the respondents agreed that most of the COVID-19 information on social media is accurate at (M=3.0, S.D=1.1), 62 per cent of the respondents agreed that most of the COVID-19 information on social media is relevant to them at (M=3.1, S.D=1.1).

However, more than half of the respondents at 56 per cent of the respondents disagreed that most of the COVID-19 information on social media is complete at (M=2.8, S.D=1.1), while 74 per cent of the respondents agreed that they think sharing/discussing COVID-19 related information on social media offers the a lot of advantages, and 72 per cent of the respondents agreed that they consider sharing/discussing COVID-19 related information on social media to be beneficial.

Summary of Values

Model Summary[b]

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Durbin-Watson
1	.289[a]	.083	.067	1.041	1.687

a. Predictors: (Constant), Perceived Usefulness, SUPPORTIVE
b. Dependent Variable: Information Processing

The table above shows overall results of our goodness of fit for the models. The coefficient of determination (R^2) is .083, it implies that the perceived usefulness of social media on covid-19 pandemic is explained by 83 per cent of the variation in the information processing. The remaining 27 per cent unexplained variation is largely due to the other variables outside the regression model which are otherwise included in the Stochastic error term. Also with the value of R in the model it shows that there is significant relationship between the dependent variable and independent variable at 0.01 level of significant ($r = .289, P < 0.01$).

Coefficients[a]

Model		Unstandardized Coefficients		Standardized Coefficients	T	Sig.
		B	Std. Error	Beta		
1	(Constant)	3.609	.399		9.035	.000
	SUPPORTIVE QUALITY	-.167	.098	-.168	-1.706	.091
	Perceived Usefulness	.327	.104	.310	3.152	.002

a. Dependent Variable: Information Processing

From table above there is a significant linear relationship between perceived quality of information processing and usefulness and level of relevance (t=9.035, Sig.000). The result of the Linear Regression as presented also shows that social media is supportive and relevant during the Coronavirus Pandemic in Nigeria, $T(-1, 706)$, $\beta 1 = -.168$, $p = 0.091$, significant at 10%. It shows that social media

on the global pandemic is of high quality and supportive to sharing knowledge on the pandemic. Consequently, perceived usefulness of the information has T(3.152), $\beta 1$ 310, p = 0.002, significance at 5%. It implies that the information shared on various social media are perceived useful on the global pandemic in Nigeria. The result, therefore, accept the alternate hypothesis that *Information usefulness positively relates to perceived benefits and Perceived information quality positively relates to perceived benefits*

7. Discussion of Findings

Although there were reservations about the information quality on social media among the respondents, the regression analysis revealed that there was significant relationship between perceived usefulness (supportiveness) and perceived benefits of information on COVID-19. This is inconsistent with Schmidt and Ernst (2004) who held that online media were filled with low-quality health information. It also contradicts studies carried out by Horgan and Sweeney (2012), Sillence et al (2007), and Manafo and Wang (2012) who all agreed that explosion of online health information has led to confusion for information seeking and use among social media users. However, Zhang and Zhao (2017) argued that the adoption of health information is dependent on the perceived usefulness of the information. It can therefore be inferred, based on the study's findings, which perceived usefulness influences the decision of respondents to process COVID-19 information on social media.

This study found that information quality significantly influence perceived benefits as the regression analysis showed significant relationships between the variables. This finding somewhat contradicts previous studies (Cole et al., 2016; Van De Belt et al., 2013) which indicated that social media contain less accurate and credible health information. Yet, it is consistent with the findings of Huo et al (2018) which showed perceived knowledge (information) quality is predictive of users' willingness to process and adopt health information. In other words, information quality (accuracy, relevancy, and completeness) shape respondents' perceptions of information usefulness vis-a-vis benefits. The findings indicate that social media exposure is related to perceived quality and usefulness of information on the pandemic.

On the use of NVM to predict social media users' intention to seek and share health information, the study is consistent with a similar study (Li et al, 2016) on the model which suggested that perceived benefits ("perceived usefulness", "credibility of health information", "emotional support", and "information support") influence social media users' behavioural intention. On the contrary, when the "credibility of health information" construct in the model was substituted with "perceived information quality", the result remains the same. Although the NVM was designed to explain general health behaviour, the study suggests the suitability of the model in predicting audience attitudes or intentions towards social media in a specific health issue as depicted by COVID-19.

8. Conclusion and Recommendations

In recent years, social media have become an increasingly important information source for risk and crisis communication, particularly during infectious disease outbreaks. Information acquisition and exchange via social media in the wake of COVID-19 pandemic can complicate communication about the disease, as the nature or quality of information available play a significant role in shaping public risk perception or subsequent behaviours. This study explicates the emotional and cognitive mechanisms underlying the process through which exposure to information on social media shape people's perceived benefits. However, in the new media age of inter-connectedness where billions of people spread or share (mis-)information related to COVID-19, social media users, as suggested in the study, have come to rely on the platforms for updates on the pandemic.

Specifically, the study suggests the following implications for professional health workers and communication experts initiating information sharing on social media. First, relatable benefits as contained in a health message should be emphasised. This is because it will serve as intrinsic motivation that could secure compliance with the required action being advocated in a health-related message (Olatokun & Nwafor, 2012). Second, the virality and effective information processing requires active engagement among social media users. Hence, efforts to foster reciprocal and interpersonal relationships between communication experts and the targeted recipients become necessary in creating and maintaining positive information processing and sharing. Most importantly, communication experts can enhance perceptions of relatable benefits among social media users which are important understanding health related messages. Third, this study provides evidence that information quality is an important antecedent to effective information processing. This implies that

communication experts should pay adequate attention to providing useful, accurate and complete information.

In view of the findings of the study, the following suggestions are made: First, the study falls short of providing explanation on factors that influence users' decision to adopt a health-related message, future studies should address this eminent gap. Second, in lieu of the sample size of this study, it is suggested that the research model should further be tested using specific social media platforms, medical condition as well as samples drawn across all the states in Nigeria. In other words, a national survey through which the generalisation of the findings of the study can be improved is recommended. Besides, further research might consider applying other relevant theories or models with different constructs particularly those that consider perceived threats and message adoption.

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