



## People who use a particular Social Media are Healthier than those who use another Platform

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### Abstract

**Introduction:** Social media networks facilitate the communication, creation, and sharing of content. Social networking is an international phenomenon. What began as a hobby for computer literate individuals has become a way of life and social norm for people globally. The overuse of social media networks has led to various physical and social concerns, including but not limited to lack of sleep, irregular diet, low self-esteem, cyberbullying, and reduction in work and academic performance.

**Objective:** This study explores the use of social media platforms (YouTube and Instagram) and the discrepancies in the health status of its users.

**Methods and material:** A descriptive research design was employed in this study, utilizing a purposive sampling technique to gather relevant data. Data collected was stored, retrieved, and analyzed using the Statistical Packages for the Social Sciences (SPSS) version 25.0 software for windows. The data were analyzed using descriptive statistics, frequency distributions, and percentages.

**Findings:** Almost 12% of the respondents who prefer using Instagram reported an excellent self-reported general health status compared to 21.0% of those who prefer using YouTube. Likewise, 21.4% of Instagram users have self-reported health status as "very good" compared to 38.7% of YouTube users. In addition, those who prefer to use YouTube were 1.534 times more likely to report good health status (i.e., good to excellent self-reported health status) compared to those who prefer using Instagram. Respondents who prefer to use YouTube are more likely to report

having 1) asthma and hypertension (1.2%), 2. Hypertension (22.2%), and 3. Sickle cell (17.9%) compared to those who prefer using Instagram, 1) asthma and hypertension (0.0%), 2. Hypertension (20.0%), 3. Sickle cell (10.0%) respectively. However, those who prefer using Instagram were more likely to report having asthma (40.0%) compared to those who prefer using YouTube (34.0) as well as Diabetes (16.7%) and 13.0% respectively.

**Conclusion:** The widespread use of social media networks has revolutionized how people communicate with each other. This research provides an insight into the self-reported health status of YouTube and Instagram users in Jamaica, and can be the catalyst for further studies on the general health status of those who use various social media platforms.

**Keywords:** Health, health status, social media, social media usage, well-being, platform.

## Introduction

The global use of social media networks has revolutionized how people communicate (Aichner *et al.*, 2021; Froment *et al.*, 2017; University Canada West (UCW), 2022). People get connected with friends, family, and even co-workers globally through social media. The concept of social media was first coined by Tina Sharkey, CEO of Babycenter.com, the former executive at iVillage and AOL (Aichner *et al.*, 2021; Bercovici, 2010). However, Walter & Riviera (2004) defines it as a network of people who have an existing relationship (in Wang *et al.*, 2011, p. 3). The initial purpose of social media networks was to facilitate communication, creation, and sharing of content (Evasiuk, 2016). Six Degrees, the first social media platform, was created in 1997, followed by Myspace, LinkedIn, and YouTube in the early 2000s. Social media today has changed in order to facilitate the promotion of jobs, access to the social life of others, and expression of free speech on various topics. The online world has changed tremendously over the past ten years due to the invention of social media, which has reshaped how its users exchange ideas, feelings, personal information, pictures, and videos at an astonishingly fast rate (Oberst, 2010). Boyd (2010) stated that social networking had become an international phenomenon, a way of life and social norm, from what began as a hobby for computer literate individuals.

Approximately 86% of those over 15 years of age own a mobile device; staying connected with family and friends overseas is one of the main reasons for social networking in Jamaica (Horst, 2006. OUR, 2004). The overuse of social media networks has led to various physical and social concerns, including but not limited to lack of sleep, irregular diet, low self-esteem, cyberbullying, and reduction in work and academic performance (Donde *et al.*, 2012).

According to Ifinedo (2016), young individuals pervasively use social media for various reasons, including entertainment, identity formation, social enhancement (augmenting offline social status through online interactions), and maintaining interpersonal connections. The focus of this study is to examine whether people who use a particular social media platform are healthier than those who use another platform. Social media has undoubtedly become an integral aspect of the lives of millions of people across the world. This research will highlight the health status of users of the social media platforms Instagram and YouTube. The findings of this study will highlight the health status of social media users and the amount of time spent by the users on these social

media platforms daily. The research will be carried out by employing the use of the Health Belief Model using a cross-sectional web-based descriptive research design.

## Theoretical Framework

Godfrey Hochbaum, Stephen Kegels, Howard Leventhal, and Irwin Rosenstock, public health experts in the United States, developed the Health Belief Model (HBM). They aimed to build models to explain why people do not engage in preventative health practices (Hochbaum, 1956, 1958; Rosenstock, 1974; Rosenstock et al., 1988). Hochbaum (1956) also contributed to the HBM by adding the concepts of perceived personal sensitivity and believed rewards of engaging in preventative behavior. The HBM is now one of the most extensively utilized social cognition models in health psychology. The HBM approach has two basic components: (1) perceptions of sickness threat and (2) evaluations of the effectiveness of behaviors aimed at preventing illness threat (Figure 1). Threat perceptions pertain to one's susceptibility to the sickness and the severity of the illness's repercussions.

Perceived susceptibility is an estimated risk of developing a disease (Figure 1). Perceived severity considers medical repercussions and the impact of a disease on a person's career, family life, and social relationships (Figure 1). The combined effect of these two variables determines whether or not an individual engages in health-related behavior. An individual will evaluate the various options available to them before deciding on a specific course of action. The perceived benefits or efficacy of health practices and their perceived costs or barriers will be assessed (Figure 1).

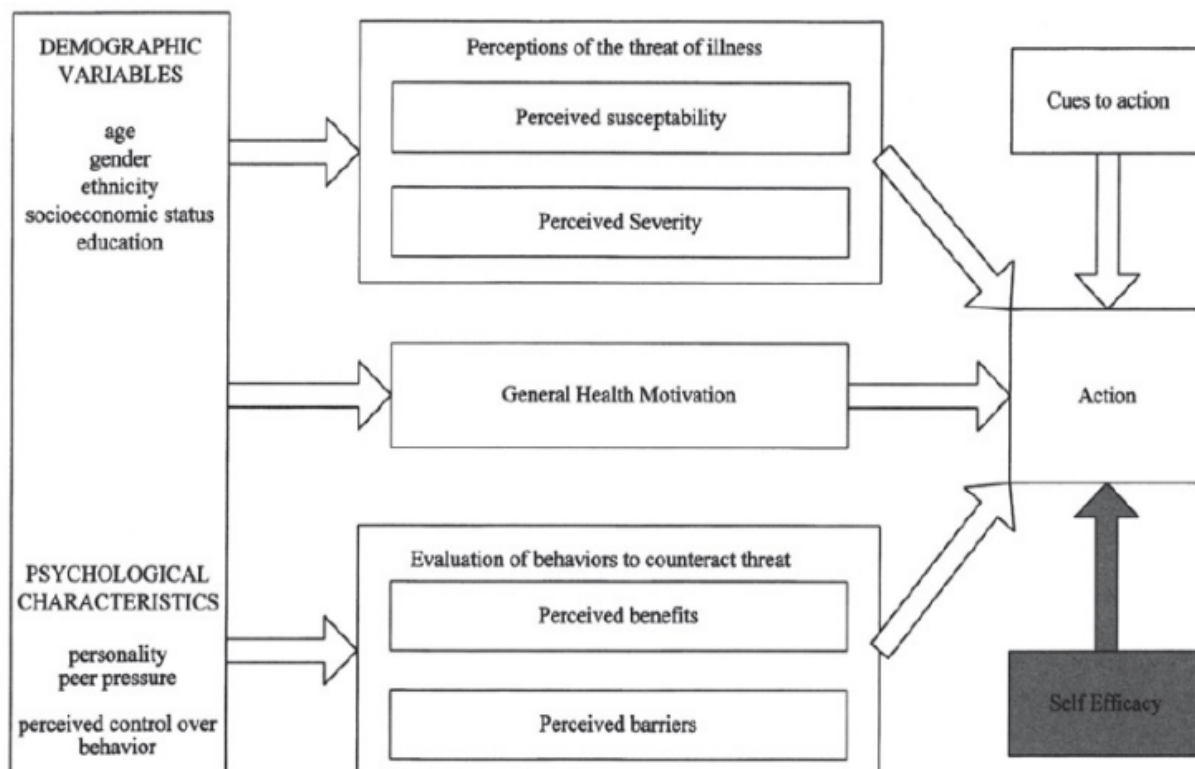


Figure 1. The health belief model [the model with self-efficacy represents the modified HBM suggested by Rosenstock et al. (1998)].

## Literature Review

The focus of this study is to examine whether people who use a particular social media platform are healthier than those who use another platform. It aims to highlight how it affects their health. Chou & Hunt et al. (2009) broadly defined social media as the use of platforms of electronic communication through which users create an online contact. The Internet and social media have drastically changed how we communicate and connect globally (Bosslet, et al., 2011; Chou et al., 2009; Hawn, 2009; Powell et al., 2003).

The majority of research on social media usage as a normal social behavior with beneficial or harmful consequences on health-related outcomes has conceptualized and measured social media use and its effects in terms of a dose-effect relationship. These studies focus directly on measuring the frequency and duration of use of social media platforms but have rarely considered users' emotional connections to social media use and the effects related to such connections. According to Carroll et al. (2015), social media is an integral tool for medical societies, professional groups, and advocacy groups. These groups utilize social media to engage, teach, and connect with each other as well as the wider populace or society; social media also provides accurate, vetted health information. Additionally, many organizations have realized that encouraging live-tweeting or blogging of conferences offers numerous opportunities for disseminating content that far surpasses in-person attendance.

Since the advent of the Internet and its evolution, access to information has never been easier; individuals can gain knowledge and have new experiences through a digital display screen. Anyone who has access to a computer or a smartphone and the Internet has quick access to information and communication. As the Internet became increasingly accessible, people anticipated free and open access to information. The use of social media is a rapidly growing phenomenon in the twenty-first century. Approximately 7 out of 10 people in the United States use social media to interact with others, receive news, share information, and entertain themselves (Smith & Anderson, 2018). Ifinedo (2016) stated that young people utilize social media for several reasons, including amusement, identity construction, social enhancement (improving offline social status through online contacts), and sustaining interpersonal ties. Such applications may compensate for the decline in face-to-face social interaction and the attendant economic, social, and health consequences (Antociet *al.*, 2015). Most studies that have been conducted, utilize the self-reported frequency of usage or the number of social media accounts and platforms used to measure social media use. For example, Barry et al. (2017) discovered a link between social media use and mental health markers such as anxiety, depression, fear of missing out, loneliness, and attention-deficit/hyperactivity disorders in a study of social media involving a sample of teenagers and their parents throughout the United States. According to Lenhart et al. (2010), about 57% of social network users are 18-29 years old and have a personal profile on multiple social media websites. In a study by Pempek et al. (2009), the amount of time spent daily on social network sites varied greatly. However, an analysis of the data indicated that most participants spent approximately thirty minutes socializing, mainly during the evening hours between 9p.m and midnight. Although increasing evidence demonstrates a link between social media use and unfavorable health effects, there may be a bidirectional relationship

between social media and health. Most public health studies focus on the impact of social media use on health-related outcomes (Antoci et al., 2015; Barry et al., 2017; Lenhart et al., 2010).

## Methods and materials

This study employed a cross-sectional web-based descriptive research design to assess 'People who use a particular social media platform are healthier than those who use another platform' (Babbie, 2010; Neuman, 2014). The two variables identified were social media and health, with social media being the independent variable and health being the dependent variable. The comparison was between two social media platforms, YouTube and Instagram. Researchers achieved the sample size using the Jamaican population from 2019 of 2,734,092 residences (Statistical Institute of Jamaica, 2022). They used a 95% confidence level and a 2.955% margin of error to compute the actual sample size of 1,100 respondents.

The data collection method was quantitative methodology utilizing purposive sampling techniques. Researchers used a web-based standardized survey questionnaire consisting of twenty-six (26) closed-ended questions to collect pertinent information related to the research. There were three (3) demographic questions, thirteen (13) general questions that related to respondents' general health and social media usage, five (5) questions for preferred YouTube users, and five (5) questions for preferred Instagram users with specific health related questions. Dissemination of the web-based survey was done through various social media platforms, WhatsApp, Instagram, and Facebook; using a survey link is an effective way to reach the targeted study sample (Rea & Parker, 2005; Neuman, 2006). The dissemination of the survey for this study occurred using a link via social media platforms. The study participants received information on the purpose of the research and the process for the data collection. The researchers ensured the respondents' rights to privacy and confidentiality were maintained.

The data collection period was from September 17 to November 29, 2021. Responses collected were transferred to the IBM Statistical Packages for the Social Sciences (i.e., SPSS version 25.0 software for windows). Researchers used tables with titles and explanations for the data display (Bryman & Cramer, 2011; Polit, 1996). Pearson's correlation coefficients were calculated using SPSS to determine if persons from one particular platform (YouTube) are healthier than persons using the other platform (Instagram).

Self-reported good health status is a dummy variable, with 1=good to excellent self-reported health status and 0 for otherwise (i.e., moderate to poor self-reported health status).

## Findings

Table 1 presents the demographic characteristics of the sample respondents, which included gender, age cohort, and area of residence. There are 463 (42.1%) male and 637 (57.9%) female respondents. The respondents' ages are as follow: 467 (42.5%) for 18-25 years old, 378 (34.4%) for 26-33 years old and for age 34 and over was 255 (23.2%). The respondents area of residence is as follow: Manchester 145 (13.2%), St. Catherine 84 (7.6%), St. Mary 37 (3.4%), St. Ann 70 (6.4%), St. James 186 (16.9%), Clarendon 79 (7.2%), Portland 33 (3.0%), St. Elizabeth 123



(11.2%), Westmoreland 62 (5.6%), St. Thomas 21 (1.9%), Hanover 69 (6.3%), Trelawny 79 (7.2%), and Kingston and St. Andrew 112 (10.2%)

**Table 1. Demographic Characteristics of the Sample Respondents, n=1100**

Details	% (n)
<b>Gender</b>	
Male	42.1 (463)
Female	57.9 (637)
<b>Age Cohort</b>	
18-25	42.5 (467)
26-33	34.4 (378)
34 and over	23.2 (255)
<b>Area of Residence (parish)</b>	
Manchester	13.2 (145)
St. Catherine	7.6 (84)
St. Mary	3.4 (37)
St. Ann	6.4 (70)
St. James	16.9 (186)
Clarendon	7.2 (79)
Portland	3.0 (33)
St. Elizabeth	11.2 (123)
Westmoreland	5.6 (62)
St. Thomas	1.9 (21)
Hanover	6.3 (69)
Trelawny	7.2 (79)
Kingston & St. Andrew	10.2 (112)

Table 2 presents data on social media preference and reasons for using social media. The findings showed that 97.5% of respondents indicated that they have a social media account, while 2.5% attributed to respondents that do not have a social media account. Ninety-nine (99%) of the respondents indicated that they have internet access; on the other hand, 0.9% of the respondents indicated that they have no internet access. The majority (70.7%) of the respondents gain access to the Internet through Wi-Fi and the remaining 28.9% gain internet access by purchasing data services. 79.7% of respondents have an account with both YouTube and Instagram, 11.3% have an account with YouTube only, 9.5% have an account with Instagram only, and 2.5% have none of the above. The majority 55.9% of the respondents indicated their social media preference was YouTube, while 43.5% preferred Instagram. The data revealed the following information; 22.4% of the respondents stated that their purpose for utilizing social media was for entertainment purposes only, 20.5% stated for education and entertainment 14.5% stated they used it for entertainment and to pass the time with and 9.5% indicated they use social media for just passing the time with 9.5%.

**Table 2. Social preference and reasons for using social media, n=1100**

Details	% (n)
Respondents that have social media accounts	
Yes	97.5 (1072)
No	2.5 (28)
Access to the internet.	
Yes	99.0 (1089)
No	0.9 (10)
Methods on how to gain access to the internet.	
Wi-Fi	70.7 (778)
Purchasing data from Flow/ Digicel	28.9 (318)
Social media platforms that respondents currently have an account with.	
YouTube	11.3 (124)
Instagram	9.5 (104)
Both (YouTube and Instagram)	76.7 (844)
None of the above	2.5 (28)
Social media platform of preference.	
YouTube	55.9 (615)
Instagram	43.5 (479)
Purpose for using social media.	
Entertainment	22.4 (246)
Entertainment and Educational Purpose	20.5 (226)
Entertainment, Educational Purpose and Promote personal business.	2.1 (23)
Entertainment, Educational Purpose, Promote personal business and To pass time.	3.8 (42)
Entertainment, Educational Purpose, Promote and to pass the time.	8.8 (97)
Entertainment and Promote personal business.	5.4 (59)
Entertainment, Promote personal business, and to pass the time.	0.8 (9)
Entertainment and To pass the time.	14.5 (159)
Educational Purpose	5.3 (58)
Educational Purpose and Promote personal business	0.2 (2)
Educational Purpose, Promote personal business and To pass time	0.1 (1)
Educational Purpose and To pass time	0.9 (10)
Promote personal business	3.5 (38)
Promote personal business and To pass time	2.4 (26)
To pass time	9.5 (104)

In Table 3, 43.4 % (477) of respondents indicated that they spent 4-6 hours on social media, followed by 29.7 % (327) of respondents who spent 1-3 hours on social media daily. 19.9% (219) spent 7- 9 hours on social media daily, while 7% (77) accounted for respondents who used social media for 10 hours and more every day. The findings also revealed that 67.5% of the respondents were not addicted to social media, while 32.5% admitted to being addicted to social media. 31% of respondents (341) indicated a mild level of addiction (1) to social media, followed by 10.7%

who were moderately (6) addicted. The latter, 10.2% and 10.3%, accounting for 112 and 113 respondents, respectively, were mildly addicted to social media.

**Table 3. Social media usage pattern of the Sample Respondents, n=1100.**

Details	% (n)
On average, how many hours do you spend on social media daily?	
1- 3 hours	29.7 (327)
4- 6 hours	43.4 (477)
7- 9 hours	19.9 (219)
10 hours and more	7.0 (77)
Do you think you're addicted to social media?	
Yes (absolutely)	32.5 (357)
No (absolutely)	67.5 (743)
Maybe	3.4 (17)
On a scale of 1-10, with 10 being the most and 1 being the least. How addicted you are to social media.	
1	31.0 (341)
2	10.2 (112)
3	10.3 (113)
4	8.1 (89)
5	10.7 (118)
6	8.1 (89)
7	6.9 (76)
8	7.6 (84)
9	4.0 (44)
10	3.1 (34)

Table 4 presents data on the health status of respondents; 34.5% indicated a "good" general health status, while 1.1% indicated a poor health status. Of note and significant to the study is that 81.1% of respondents indicated that they or their loved ones have never experienced cyberbullying, while 18.3% have experienced cyberbullying. 72.2% of the respondents stated that social usage does not affect their sleep pattern; on the hand, 27.4% indicated that social media usage does interfere with their sleep. 38% indicated that social media could positively and negatively impact one's mental health, while 9.5% indicated a negative impact.



**Table 4. General Health Status of the Sample Respondents, n=1100.**

Details	% (n)
Have you, your family or any loved ones ever experienced cyber bullying?	
Yes	18.3 (201)
No	81.1 (892)
Does social media usage affect your sleep pattern?	
Yes	27.4 (301)
No	72.2 (794)
The impact of social media on one's mental health.	
Positive	34.0 (374)
Negative	9.5 (104)
Unaware	18.5 (203)
Both (positive and negative)	38.0 (418)
Describe your health in general	
Excellent	13.3 (146)
Very good	31.6 (348)
Good	34.5 (380)
Fair	18.5 (203)
Poor	1.1 (12)

Table 5 represents the psychological issues participants face since using social media. Of the total respondents who participated in the survey, 43.5% accounting for 479 responses, indicated that they faced no psychological problems since using social media. 11.2% (n=123) indicated they suffered from anxiety, followed by 7.2% who reported being troubled with depression. The remainder of the participants accounting for 0.8% (9) and 4.3% (n=47), were troubled with suicidal thoughts and panic attacks respectively. The majority of the participants, 53.7% (n=591), admitted not missing meals due to social media usage, while 8.5% indicated they sometimes miss meals due to social media. The remainder of the participants accounting for 4.6%, missed having meals due to social media usage.

The symptoms experienced by participants following prolonged social media use are as follows: 24.9% of participants were not affected by any of the listed symptoms due to prolonged social media usage. In comparison, 2.4% experienced blurred or double vision, and 9.7% experienced burning of the eyes following prolonged social media usage. 3.8% of respondents experienced back and neck pain, 3.9% experienced headaches, and 0.6% had dry and watery eyes. Of the respondents, 29.9% indicated sitting upright when using social media, while 24.9% assumed a slouching position when using social media. For the underlying health issues faced by YouTube users, most of the participants accounting for 46.9%, were not affected by any of the illnesses listed. However, 6.1% (67) indicated they had Asthma, while 3%, 3.8%, and 2.4% were living with Sickle cell, Hypertension, and Diabetes, respectively.

**Table 5. Health Status of Preferred YouTube users of the Sample Respondents, n=1110.**

Details	% (n)
Experience of psychological issues since using YouTube.	
Depression	7.2 (79)
Anxiety	11.2 (123)
Suicidal Thought	0.8 (9)
Panic attack	4.3 (47)
None	43.5 (479)
Does the use of YouTube interfere with your mealtimes?	
Yes, Always	4.6 (51)
No	53.7 (591)
Yes, Sometimes I miss meals due to being on social media.	8.5 (93)
Do you experience any of the following symptoms after prolonged use of YouTube?	
Blurred vision/ double vision	2.4 (26)
Blurred vision/ double vision, Burning of the eyes	0.6 (7)
Blurred vision/ double vision, Burning of the eyes, Back and neck pain	0.1 (1)
Blurred vision/ double vision, Burning of the eyes, Back and neck pain, Headache	0.3 (3)
Blurred vision/ double vision, Burning of the eyes, Back and neck pain, Dry or watery eyes	0.4 (4)
Blurred vision/ double vision, Burning of the eyes, Back and neck pain, Headache, Dry or watery eyes	0.6 (7)
Blurred vision/ double vision, Burning of the eyes, Headache.	0.3 (3)
Blurred vision/ double vision, Burning of the eyes, Dry or watery eyes	0.5 (5)
Blurred vision/ double vision, Burning of the eyes, Headache, Dry and watery eyes	0.2 (2)
Blurred vision/ double vision, Back and neck pain	0.5 (6)
Blurred vision/ double vision, Back and neck pain, Headache	0.2 (2)
Blurred vision/ double vision, Back and neck pain, Dry and watery eyes	0.1 (1)
Blurred vision/ double vision, Back and neck pain, Headache, Dry and watery eyes	0.1 (1)
Blurred vision/ double vision Headache	0.2 (2)
Blurred vision/ double vision, Dry and watery eyes	0.1 (1)
Burning of the eyes	9.7 (107)
Burning of the eyes, Back and neck pain	4.9 (54)
Burning of the eyes, Back and neck pain, Headache	1.3 (14)
Burning of the eyes, Back and neck pain. Dry or watery eyes	1.0 (11)
Burning of the eyes, Back and neck pain. Dry or watery eyes, Headache	0.4 (4)
Burning of the eyes, Headache	2.2 (24)
Burning of the eyes, dry or watery eyes	2.0 (22)
Burning of the eyes, dry or watery eyes, Headache	0.3 (3)
Back and neck pain	3.8 (42)
Back and neck pain, Headache	0.6 (7)
Back and neck pain, Dry or watery eyes	0.6 (7)

Back and neck pain, Dry or watery eyes, Headache	0.4 (4)
Headache	3.9 (43)
Dry or watery eyes	0.6 (7)
Dry or watery eyes, Headache	0.6 (7)
None of the above	24.9 (274)
Normal sitting position while using YouTube	
Slouching	24.9 (274)
Head bent	11.7 (129)
Sitting upright	29.9 (329)
Underlying illnesses of YouTube users	
Asthma	6.1 (67)
Asthma, Hypertension	0.2 (2)
Asthma, Hypertension, Diabetes	0.3 (3)
Hypertension	3.8 (42)
Hypertension, Diabetes	0.5 (6)
Hypertension, Other	0.2 (2)
Diabetes	2.4 (26)
Diabetes, Sickle cells	0.1 (1)
Sickle cells	3.0 (33)
Not Applicable	46.9 (516)
Other	1.0 (11)

Table 6 presents the Health Status of Preferred Instagram users of the sample respondents; the majority 30.9% stated that they had not experienced any psychological issues other categories reported as follows; anxiety with 9.3%, depression with 8%, panic attacks 3.3%, and the least being suicidal thought with 1.9%. Forty and two tenths per cent (40.2%) of the surveyed sample indicated that Instagram does not interfere with their mealtimes; however, 4.2% indicated that Instagram usage does interfere with their mealtime.

The symptoms experienced by participants following prolonged social media use are as follows 1.2% of participants were not affected by any of the listed symptoms. In comparison, 3% experienced blurred or double vision, 14.2% experienced burning of the eyes following prolonged usage of social media, 6.5 % of respondents experienced back and neck pain, 6.3% experienced headache, and 4.4% experienced dry and watery eyes.

The majority of participants, 20.7% (228), indicated that they used social media in a slouching position, while 17.8% and 13.7% assumed an upright sitting position and head bent when using social media, respectively. 32.4% of Instagram preferred users were not affected by any illnesses listed. Asthma proved to be the predominant illness amongst Instagram preferred users accounting for 7.6 % (84), followed by Sickle cell, Hypertension, and Diabetes with 4.5% (n=50), 2.2% (n=24), and 1.4%, respectively.

**Table 6. Health Status of Preferred Instagram users of the Sample Respondents,**

n=1100.

<b>Details</b>	<b>% (n)</b>
Experience of psychological issues since using Instagram.	
Depression	8.0 (88)
Anxiety	9.3 (102)
Suicidal Thought	1.9 (21)
Panic attack	3.3 (36)
None	30.9 (340)
Does the use of Instagram interfere with your mealtimes?	
Yes, Always	4.2 (46)
No	40.2 (442)
Yes, Sometimes I miss meals due to being on social media.	8.7 (96)
Do you experience any of the following symptoms after prolonged use of Instagram?	
Blurred vision/ double vision	3.0 (33)
Blurred vision/ double vision, Burning of the eyes	0.8 (9)
Blurred vision/ double vision, Burning of the eyes, Back and neck pain	0.4 (4)
Blurred vision/ double vision, Burning of the eyes, Back and neck pain, Headache	0.2 (2)
Blurred vision/ double vision, Burning of the eyes, Back and neck pain, Dry or watery eyes	0.1 (1)
Blurred vision/ double vision, Burning of the eyes, Back and neck pain, Headache, Dry or watery eyes	0.3 (3)
Blurred vision/ double vision, Burning of the eyes, Headache.	0.1 (1)
Blurred vision/ double vision, Burning of the eyes, Dry or watery eyes	0.1 (1)
Blurred vision/ double vision, Burning of the eyes, Headache, Dry and watery eyes	0.5 (5)
Blurred vision/ double vision, Back and neck pain	0.1 (1)
Blurred vision/ double vision, Back and neck pain, Headache	0.2 (2)
Blurred vision/ double vision, Dry and watery eyes	0.3 (3)
Burning of the eyes	14.2 (156)
Burning of the eyes, Back and neck pain	4.3 (47)
Burning of the eyes, Back and neck pain, Headache	0.4 (4)
Burning of the eyes, Back and neck pain, Dry or watery eyes	0.1 (1)
Burning of the eyes, Back and neck pain. Dry or watery eyes, Headache	0.1 (1)
Burning of the eyes, Headache	1.2 (13)
Burning of the eyes, dry or watery eyes	0.8 (9)
Back and neck pain	6.5 (72)
Back and neck pain, Headache	0.9 (10)
Back and neck pain, Dry or watery eyes	0.2 (2)
Headache	6.3 (69)
Dry or watery eyes	4.4 (48)
Dry or watery eyes, Headache	0.7 (8)

None of the above	1.2 (13)
Normal sitting position while using Instagram.	
Slouching	20.7 (228)
Head bent	13.7 (151)
Sitting upright	17.8 (196)
Underlying illnesses of Instagram users.	
Asthma	7.6 (84)
Asthma, Hypertension	0.2 (2)
Asthma, Sickle cell	0.2 (2)
Hypertension	2.2 (24)
Hypertension, Diabetes	0.5 (5)
Diabetes	1.4 (15)
Sickle cells	4.5 (50)
Not Applicable	32.4 (356)
Other	0.6 (7)

H<sub>0</sub>: People who have social media account(s) are healthier than those who do not have an account

H<sub>1</sub>: People who do not have social media account(s) are healthier than those who do have an account

Table 7 presents a cross-tabulation between general health status and social media accounts. A chi-square analysis revealed no significant statistical relationship between the variables above ( $\chi^2(4) = 4.773, p = 0.311$ ). As such, having or not having a social media account does not impact the general health status of the sampled respondents.

**Table 7.A cross-tabulation between general health status and having a social media account**

Detail	Having a social media account		Total
	Yes	No	
	% (n)	% (n)	% (n)
Self-rated general health status			
Poor	1.1 (12)	0.0 (0)	1.1 (12)
Moderate	18.5 (197)	22.2 (6)	18.6 (203)
Good	35.0 (372)	29.6 (8)	34.9 (380)
Very good	32.2 (342)	22.2 (6)	32.0 (348)
Excellent	13.1 (139)	25.9 (7)	13.4 (146)
Total	1062	27	1089

H<sub>0</sub>: Instagram preferred users are healthier than persons who prefer to use YouTube.

H<sub>1</sub>: Instagram preferred users are not healthier than persons who prefer to use YouTube.

Table 7 presents a cross-tabulation between self-reported general health status and current social media platforms. A chi-square analysis established that Instagram users are not healthier than

YouTube preferred users ( $\chi^2(12)=24.908, p=0.015$ ). 11.7% of the respondents who prefer using Instagram reported an excellent self-reported general health status compared to 21.0% of those who prefer using YouTube. Likewise, 21.4% of Instagram preferred using have very good self-reported health status compared to 38.7% of those who preferred using YouTube.

**Table 7. Cross- tabulation between self-reported general health status and social media platform currently have**

Details	Social media platforms currently have				Total
	YouTube	Instagram	Both	None of the above	
Self-reported general health status	% (n)	% (n)	% (n)	% (n)	% (n)
Poor	0.0 (0)	1.0 (1)	1.3 (11)	0.0 (0)	1.1 (12)
Moderate	13.7 (17)	22.3 (23)	18.9 (158)	18.5 (5)	18.6 (203)
Good	26.6 (33)	43.7 (45)	35.2 (294)	29.6 (8)	34.9 (380)
Very good	38.7 (48)	21.4 (22)	32.5 (271)	25.9 (7)	32.0 (348)
Excellent	21.0 (26)	11.7 (12)	12.1 (101)	25.9 (7)	13.4 (146)
<b>Total</b>	<b>124</b>	<b>103</b>	<b>835</b>	<b>27</b>	<b>1089</b>

H<sub>0</sub>: Instagram preferred users are more likely to report selected health conditions than persons who prefer to use YouTube.

H<sub>1</sub>: Instagram preferred users are less likely to report selected health conditions than persons who prefer to use YouTube.

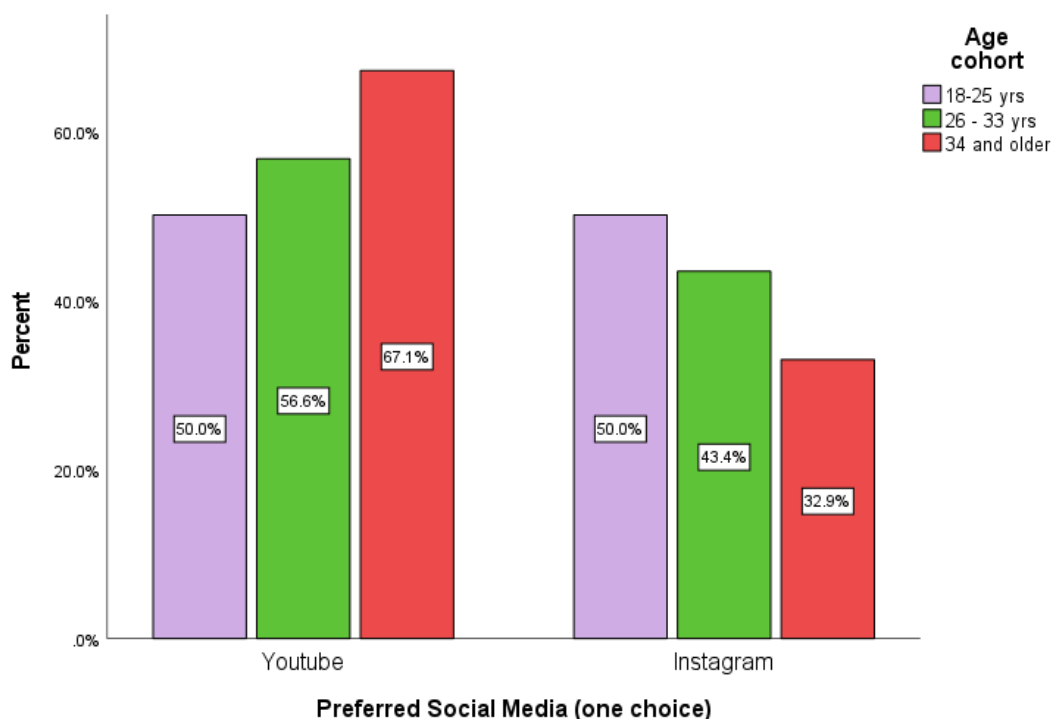
Table 8 presents the cross-tabulation between self-reported health conditions and social media platforms preferred to use, which showed a significant statistical relationship ( $\chi^2(11)=572.253, p < 0.001$ ). Furthermore, those who prefer to use YouTube are more likely to report having 1) asthma and hypertension (1.2%), 2. Hypertension (22.2%), and 3. Sickle cell (17.9%) compared to those who prefer using Instagram, 1) asthma and hypertension (0.0%), 2. Hypertension (20.0%), 3. Sickle cell (10.0%) respectively. However, those who prefer using Instagram were more likely to report having asthma (40.0%) compared to those who prefer using YouTube (34.0) as well as Diabetes (16.7%) and 13.0% respectively.

**Table 8. Cross- tabulation between self-reported health conditions and social media platform preferred to use**

Details	YouTube	Instagram	Total
Asthma	34.0 (55)	40.0 (12)	34.8 (67)
Asthma, hypertension	1.2 (2)	0.0 (0)	1.0 (2)
Asthma, Diabetes, hypertension,	1.9 (3)	0.0 (0)	1.6 (3)
Hypertension	22.2 (36)	20.0 (6)	21.8 (42)
Hypertension, Diabetes	3.1 (5)	3.33 (1)	3.1 (6)
Hypertension, Other	1.2 (2)	0.0 (0)	1.0 (2)
Diabetes	13.0 (21)	16.7 (5)	13.5 (26)
Diabetes, Sickle cell	0.0 (0)	3.33 (1)	1.0 (1)
Sickle cell	17.9 (29)	10.0 (3)	16.6 32 ()



Other	5.5 (9)	6.6 (2)	5.7 (11)
<b>Total</b>	<b>162</b>	<b>30</b>	<b>192</b>



**Figure 2. Age cohort and Preferred Social Media**

Figure 2 shows a bar graph depicting a cross-tabulation between age cohort and the type of social media preferred by the sampled respondents ( $\chi^2(2)=19.391$ ,  $p < 0.001$ ). A little more than two thirds of those ages 34+ years old prefer using YouTube (i.e., 67.1%,  $n=169$ ) compared to 56.6% ( $n=213$ ) those ages 26-33 years old, and 50.0% ( $n=233$ ) of those ages 18-25 years old. Furthermore, 50.0% ( $n=233$ ) of those ages 18-25 years old prefer to use Instagram compared to 43.4% ( $n=163$ ) of those ages 26-33 years old, and 32.9% ( $n=479$ ) of those 34+ years old.

Table 9 presents a binary logistic regression of self-reported good health status of the sampled respondents by selected variables (i.e., age, social media preference, gender, and time spent on using social media on a daily basis). The findings revealed that the model is a good fit for the data ( $-2ll=1064.123$ ; Model- $\chi^2(7)=22.501$ ,  $p=0.002$ ; Hosmer and Lemeshow test- $\chi^2(8)=3.033$ ,  $p=0.932$ ), with 80.2% ( $n=869$ ) of the overall data being correctly classified. Furthermore, social media preference, age, and gender account for 3.3% (Nagelkerke  $r^2$ ) of the variance in self-reported good health status (i.e., good to excellent self-reported health status). In addition, those who prefer to use YouTube were 1.534 times likely to reported good health status compared to those who prefer using Instagram. Females are less likely to report good health status compared to males, and those age 26-33 years old were 1.570 times more likely to report good health status compared to those ages 18-25 years old.

**Table 9. Binary logistic regression of self-reported good health status by selected variables**

Variable	B	S.E.	Wald	p-value	Odds ratio	95% C.I. Odds ratio
						Lower-Upper
YouTube (1=yes)	0.428	0.157	7.390	0.007	1.534	1.127-2.088
Age (26-33 years)	0.451	0.185	5.930	0.015	1.570	1.092-2.258
Age (34+ years)	-0.067	0.196	0.117	0.733	0.935	0.637-1.373
Reference (18-25 years)	1.000					
Female (1=yes)	-0.341	0.163	4.388	0.036	0.711	0.517-0.978
Time (4-6 hours)	0.077	0.186	0.171	0.680	1.080	0.750-1.556
Time (7-9 hours)	-0.100	0.221	0.205	0.651	0.905	0.587-1.395
Time (10 hours)	0.139	0.325	0.183	0.669	1.149	0.607-2.175
Reference (> 4 hours)	1.000					
Constant	1.662	0.211	61.915	<0.001	5.271	

## Discussion

The original intent of social media networks was to facilitate content communication, creation, and sharing (Aichner et al., 2021; Evasiuk, 2010; Kapoor et al., 2018; Maryville University, 2022). This research empirically examined the perception of people who use a particular social media platform (YouTube and Instagram) are healthier than others (i.e., YouTube and Instagram). The two variables identified were social media and health, with social media being the independent variable and health being the dependent variable. The Health Belief Model (HBM) supports this context for this research. This research deduces that people who use a social media platform (YouTube) are healthier than those who use another social media platform (Instagram) but in some instances people in the former category reported more cases of selected health conditions than those in the latter group.

Infinedo (2016), in his work, indicated that young individuals use social media for entertainment, social enhancement, and maintenance of interpersonal connections. The current study revealed that the primary reason for using social media was entertainment accounting for 22.4% of participants, followed by entertainment and education capturing 20.5% of participant responses. The majority of the respondents indicated their social media preference was YouTube, with 55.9%, while 43.5% preferred Instagram.

Pempek et al. (2009) indicated that the amount of time spent daily on social network sites varied greatly; an average of 4-6 hours daily was spent on social media by participants of this research capturing 43.4% of responses, while 29.7% spent an average of 1-3 hours daily. In table 3, the findings indicated that 67.5% of the respondents were not addicted to social media, while the remainder, 32.5%, admitted to being addicted to social media. The current findings revealed that 34.5% indicated that they have a good general health status while 1.1% indicated poor. It is stated that the overuse of social media networks has led to various physical and social concerns, including but not limited to lack of sleep, irregular diet, low self-esteem, cyberbullying, and

reduction in work and academic performance (Donde et al., 2012). The reality is, social media is not all bad as only 9.5% of the current sampled respondents indicated that social media have negatively impacted on their mental health compared to 34.0% who reported otherwise (i.e., positive influence on them).

With respect to the Health Status of Preferred YouTube users, 43.5% (479) indicated that they face no psychological issues, 11.2% indicated they suffered from anxiety, 7.2% from depression. 24.9% were not affected by any of the listed symptoms due to prolonged social media usage. The reality is, COVID-19 is explaining the rise in psychological issues (see Bourne *et al.*, 2021; International Association for Media and Communication Research, nd), which is highlighted by the current study. In addition, the majority of the participants accounting for 46.9%, were not affected by any of the illnesses listed. However, 6.1% (67) indicated they had Asthma, while 3%, 3.8%, and 2.4% were living with Sickle cell, Hypertension, and Diabetes, respectively. Although increasing evidence demonstrates a link between social media use and unfavorable health effects, there may be a bidirectional relationship between social media and health. Most public health studies focus on the impact of social media use on health-related outcomes (Pempeket al., 2009).

Concerning the health status of Instagram users, 30.9% had not experienced any psychological issue, anxiety with 9.3%, depression with 8%, panic attack 3.3%, and suicidal thought 1.9%. The minority of participants accounting for 1.2%, were not affected by any of the listed symptoms due to prolonged social media usage. A percentage of 32.4% of Instagram preferred users were not affected by any illnesses listed. Asthma proved to be the predominant illness amongst Instagram preferred users accounting for 7.6% (84), followed by Sickle cell, Hypertension, and Diabetes with 4.5% (n=50), 2.2% (n=24), and 1.4%, respectively. The current study concurs with the literature that social media have both a positive and negative influence on people's mental health status of people (Bekalu, 2020; Grieve & Watkinson, 2016; International Association for Media and Communication Research, nd; Lennon, 2022; Shensa et al., 2018), and this work goes further to provide the disparity related to those usually use YouTube and Instagram.

## Conclusion

The global use of social media networks has revolutionized how people communicate with each other. People are getting connected with friends, family, and even co-workers globally through social media, which may account for the greater per cent of those who indicated that social media usage have a positive influence on their mental health compared to those who reported otherwise. Social media can be equated to globalization describe the increasing connectedness and interdependence of world cultures and economies. The results obtained from this research demonstrate that people who use YouTube are healthier than those who use Instagram.

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