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AUDIENCE PERCEPTION OF COVID-19 VACCINE HESITANCY AND SOCIAL MEDIA MISINFORMATION ON THE VACCINE AMONG ANAMBRA YOUTHS

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ABSTRACT
Since the beginning of the COVID-19 vaccine rollout globally, COVID-19 vaccine misinformation has been widely disseminated on different social media platforms. This study, therefore, sought to find out the level of exposure to COVID-19 vaccine misinformation on Facebook and WhatsApp among youths in Anambra State, the perception of COVID-19 vaccine misinformation on the selected social media platforms among youths in Anambra State, the extent to which youths in Anambra State believe COVID-19 vaccine misinformation on the selected social media platforms, the extent to which the COVID-19 misinformation promote vaccine hesitancy among youths in Anambra State, the social media platform that conveys COVID-19 vaccine misinformation and the effects of COVID-19 vaccine misinformation on youths in Anambra State. For these objectives to be achieved, the researcher adopted the descriptive survey design, determined the samples (397) she studied using Taro Yamane formula and selected the samples using multi-stage sampling procedure and random sampling technique in the course of using the procedure. She used frequency tables, simple percentages and the arithmetic mean to analyze the data she collected from this study. From the study, the researcher found, among others, that Nnamdi Azikiwe University (UNIZIK), Chukwuemeka Odumegwu Ojukwu University (COOU) and Paul University students' perception of COVID-19 vaccine misinformation on the selected social media platforms is that it leads to vaccine hesitancy. Based on her findings, she recommended, among others, that Anambra youths should always discourage people from posting any form of misinformation on social media.

Keywords: Audience, COVID-19 vaccine, Hesitancy, Misinformation, Perception, Social Media

INTRODUCTION
COVID-19, from the family of Coronavirus, is a contagious respiratory illness transmitted through the eyes, nose, mouth, and via droplets from coughs, sneezes, and close contact with an infected person and contaminated surfaces (Olapegba, Ayandele, Kolawole, Oguntayo, Gandi, Dangiwa, Ottu & Iorfa, 2020). The above authors further observed that COVID-19 has a gestation period of 1-14 days with symptoms that include cough, fever and shortness of breath, and is diagnosed through a laboratory test. The contagion could lead to severe respiratory problems or death, particularly among the elderly and persons with underlying chronic illnesses. Some infected persons however, are carriers for the virus with no symptoms while others may experience only a mild illness and recover easily (Sauer, 2020).

Vaccination has, however, been recommended by the World Health Organization (WHO) as one of the prominent solutions towards curtailing the spread of the virus. Even the Nigerian Government threw its weight behind the recommended vaccination campaign to ensure that Nigerians are protected against the virus. Despite these, certain factors militate against the COVID- vaccination, and one of which is the misinformation on the vaccines. Some Nigerians, perhaps, due to superstitions and ignorance of the science behind the infection, prefer only to pray (even violating the social distancing rule by attending churches or mosques during the lockdown) and use anointing oils, talisman, herbs or rituals (Abati, 2020) to protect

themselves from contracting and spreading the virus. These superstitions and ignorance could be connected with the diverse cultures that are handed down to them by their ancestors as well as the teachings of their religious leaders who they tend to believe are always right in most cases. Some also used social media platforms (e.g. Whatsapp, X, Facebook and Instagram) to spread fear, project fake news concerning the source of the virus, promote prejudice against China, incite panic buying, proffer fake cures and undermine medical advice, deliberately or ignorantly (Hassan, 2020). These set of people, according to Hassan (2020), opined that lockdown, self-isolation and social distancing are un-African solutions to the pandemic while some social media posts queried the urgency of the production of vaccines to mitigate the pandemic as well as the side effects of the vaccines on people who have taken them. Thus, this study seeks to find out the perception of COVID-19 vaccine hesitancy and the social media misinformation on COVID-19 vaccines among youths in Anambra State (Facebook and WhatsApp).

It is to succeed in ascertaining the above perception that the researcher aimed to find out the level of exposure to COVID-19 vaccine misinformation on the selected social media platforms among youths in Anambra State, the perception of COVID-19 vaccine misinformation on the selected social media platforms among them, the extent to which they believe COVID-19 vaccine misinformation on the selected social media platforms, the extent to which the COVID-19 vaccine misinformation promote vaccine hesitancy among them, the social media platform that conveys COVID-19 vaccine misinformation and the effects of COVID-19 vaccine misinformation on the youths.

LITERATURE REVIEW

Empirical Review

Exploring the perceived views of older adults in the urban and rural areas of Anambra State on COVID-19 vaccine in Nigeria, Iwuagwu, Rayner, Ngwu and Kalu (2023) adopted a qualitative descriptive study design (a single, in-depth semi- structured telephone interview) and purposively selected and interviewed 16 older adults who are retirees. They analyzed the data they collected, using conventional content analysis while they found, among others, that older adults' willingness to receive the vaccine was dissuaded by their past experiences with the government, religion and Western media, including affordability and accessibility problems related to vaccination campaigns. They, therefore, recommended that government should incentivize healthcare workers to serve as a nudge to increase COVID-19 uptake among older adults in Nigeria, among others. In this study, Iwuagwu *et al.,* (2023), however, did not study the perceived views of Anambra youths on COVID-19 vaccine hesitancy and social media misinformation on the vaccine which the current study intends to focus on. They studied only retirees and did not study those that are not retirees in Anambra state and did not use descriptive survey to carry out their study.

In their study to assess the factors causing vaccine hesitancy in Anambra State and ways to mitigate it, Ohamaeme, Igboekwu, Chibuzor, Muoghalu, Ani, Oji, Adamu and Obidike (2022) carried out a cross-sectional analytic study and administered questionnaires to 840 respondents from the 21 Local Government Areas in the state through 81 validators across the 21 Local Government Areas. While they only retrieved 839 questionnaires, they found that more than half of the respondents (55.3%) have not taken the COVID-19 vaccine due to fear (13.1%), side effects (15.1%), lack of belief in the disease (12.2%), misinformation and conspiracies (14.2%), vaccine seen as biological weapon to reduce population (27.2%), inadequate information (25.4%), no COVID in Nigeria (24.7%) and other issues. They, therefore, recommended that the Government, partners, FBOs, CSOs, NGOs and other stakeholders, should create more awareness on COVID-19 vaccination in the state, among others. While Ohamaeme *et al.,* (2022) found that misinformation and conspiracies is one of the factors and used questionnaire to gather data, they did not go further to find out the perception of COVID-19 vaccine hesitancy and social media misinformation on the vaccine among youths in Anambra State which the current study focused on.

Exploring COVID-19 vaccine hesitancy among second year undergraduate students of University of Nigeria, Nsukka (UNN), Nnamdi Azikiwe University, Awka (UNIZIK), Alex Ekwueme Federal University, Ndufu-Alike, Ikwo (AEFUNAI), Federal University of Technology, Owerri (FUTO) and Michael Okpara University of Agriculture, Umudike (MOUAU), Ogbu, Agugoesi, Ugwu, Nwankwo, Ngwainmbi and Aikoye (2022) employed a descriptive survey research design and selected 5,600 males and 6,132 females

from all the faculties in the five universities, for the study. They used a researcher-developed questionnaire and estimated its internal consistency using Cronbach alpha. They analyzed the data they collected from this study, using mean and standard deviation, t-test and analysis of variance (ANOVA). Their findings from this study, revealed among others, that there is high extent of COVID-19 vaccine hesitancy among the undergraduate students and therefore, recommended, among others, that enlightenment campaign in the form of workshops, seminars and conferences, should be organized by government for undergraduate students and the general public on the need for acceptance of COVID-19 vaccine. In this study, the researchers only focused on the level of vaccine hesitancy among the undergraduates in Anambra State and beyond and did not focus on only Anambra youths even as it concerns their perception of COVID-19 vaccine hesitancy and social media misinformation on the vaccine which the current study focused on.

In order to ascertain Onitsha Market women's level of access to COVID-19 vaccination information, their major channel of receiving the information and determine whether their level of access was significant in their intention to uptake vaccination, Nwafor, Nwokoro and Omoevah (2022) adopted the survey research design and selected 400 respondents using Taro Yamane formula. Findings from their study, revealed that Onitsha Market women have access to COVID-19 vaccine information and receive them through inter-personal communication/word of mouth. They also found that the Market women's access to the information, does not influence them to take the vaccine. They, therefore, recommended that the government should launch door-to-door campaigns to encourage people to uptake COVID-19 vaccination in their localities, among others. In this study, Nwafor *et al.,* (2022) only focused on Onitsha market women and did not study the perception of COVID-19 vaccine hesitancy and social media misinformation on the vaccine among any set of people in Anambra state which the current study focused on.
In a study on COVID-19 controversies' probable influences on WhatsApp users' dispositions to take the jab in Anambra State, Nigeria, Ono, Odionye and Okoli (2022) sought to use online descriptive survey employing Google form questionnaire instrument to find out whether the controversies surrounding COVID-19 and its jab, had influence on WhatsApp users' disposition to take the jab. From this study, they found, among others, that 85% of the participants (literate adults who are WhatsApp users), were negatively disposed to take the jab as a result of the controversies surrounding it. They observed that the most prominent controversies were that the jab was developed in a hurry and therefore, a weapon of human destruction by Nigerian government to depopulate the masses. They, therefore, recommended that further vaccination should cease and massive media education/enlightenment campaign on the jab intensified to get favourable disposition towards the jab. In this study, Onoh *et al.,* (2022) only focused on WhatsApp users in the state and did not study those that are not WhatsApp users. They focused on the COVID-19 controversies and did not study the perception that Anambra youths have of COVID-19 vaccine hesitancy and social media misinformation on the vaccine which the current study focused on.
In a cross-sectional regional study looking at the factors responsible for the low COVID-19 vaccination rate in the 5 capitals of the 5 South-East States in Nigeria, Ekowo, Manafa, Isielu, Okoli, Ibe, Onwuasoanya, Echendu, Ihedoro, Nwabueze and Nwoke (2022) adopted a descriptive cross-sectional design and administered structured questionnaires to the members of the public in the region to answer themselves or through the help of an interviewer. They analyzed the data they collected using SPSS and compared associations between variables using Chi-square. From this study, they found, among others, that it is only 105 (8.2%) out of the 1, 283 respondents they studied, that have had at least one of the vaccine doses and that the stated reasons for not having been vaccinated are side effects (n = 370, 31.5%), access to a vaccination centre (n = 239, 20.4%) and belief in one's own immunity (n = 186, 15.5%). They, therefore, recommended education and awareness campaign to boost the vaccination rate. In this study, Ekowo *et al.,* (2022) studied only Awka residents while attention was not given to vaccine hesitancy and the perception of COVID-19 vaccine hesitancy and social media misinformation of the vaccine among youths in Anambra State.

For a cross-sectional study to assess the risk perception, attitudes and knowledge of healthcare workers towards COVID-19 vaccination, Nnaemeka, Onwe, Ekwedike, Oyedele, Tsiterimam, Ochepo, Nwokoye and Ike (2022) selected 710 healthcare workers from the Northern, Western and Eastern regions of Nigeria and

performed cross tabulations to determine statistical relations between sociodemographic variables, knowledge, attitudes and risk perceptions concerning COVID-19 vaccines acceptance among the healthcare workers. They also performed multi-nomial logistic regression analysis to determine the predictive variables for COVID-19 vaccine acceptance among the healthcare workers. In this study, they performed statistical analyses of the responses of the healthcare workers and considered P-values less than 0.05 statistically significant at a C1 of 95%. From this study, they found that 59.3% of the healthcare workers, were amenable to COVID-19 vaccines. They also found, among others, that male healthcare workers, were 2.8 times more likely to accept the vaccines than their female counterparts. They, therefore, recommended that interventions should be addressed sensitively while subgroups who are reluctant to receive vaccines, should be taken into account when establishing policies, among others. While the Eastern region is one of the places this study was carried out, the researchers did not carry out any study on the perception of COVID-19 vaccine hesitancy and social media misinformation on the vaccine and did not also study people that are not healthcare workers.

With the aim of assessing the willingness to accept COVID-19 vaccine among undergraduate students in Edo State, Nigeria, Obi, Nwankaegho, Ehinze, Obadia, Tobin, Okoli, Enato, Osa and Obi (2022), conducted a descriptive cross-sectional study among 540 undergraduate students who they selected using multi-stage sampling technique and collected data using self-administered structured questionnaires. They analyzed the data using IBM SPSS version 25.0. From this study, they found that more than half (276, 51.1%) of the respondents were not willing to take the COVID-19 vaccine. They, therefore, recommended that health education interventions targeting undergraduate students, should be intensified to help improve their knowledge and positive behavioural change towards acceptance of the COVID-19 vaccine. While this study focused on the willingness to accept COVID-19 vaccine among undergraduates and was carried out in Edo State, the current study focused on Anambra youths' perception of COVID-19 vaccine hesitancy and social media misinformation on the vaccine and was carried out in Anambra state.
In a study to assess the knowledge, perception and willingness to receive the current COVID-19 vaccine among residents of Awka Metropolis, Anambra state, Nigeria, Obi-Ezeani, Ilechukwu, Onuora, Umeaba, Onuike, Onyegbule, Muoneke, Nwagbara, Nnoruka and Odo (2021), administered pre-tested questionnaires to 393 respondents (aged 18 years and above). They used Statistical Package for Social Sciences (SPSS) software version 23.0 for this study and reported what the respondents filled out (descriptive statistics) in frequencies and percentages. They also used Chi-square test to assess the association between socio-demographic characteristics and willingness to receive the vaccine and set the level of significance at $p < 0.05$. The findings they made from this study, show that all the respondents (100%) they studied, have good knowledge of the vaccine availability while 25.7% were willing to receive the vaccine. They also found that 57.3% were willing to receive any other vaccine apart from the COVID-19 vaccine and that occupation is the only characteristic that was significantly associated with willingness to receive the vaccine ($p = 0.010$, $x^2 = 20.214$), among others. They, therefore, recommended that Government, policy makers and stakeholders should make more concerted efforts to effectively educate the masses through appropriate proactive public health literacy programs, enlightenment campaigns and interventions targeted at demystifying the controversies and addressing the misconceptions about the COVID-19 vaccine as well as highlighting the role of the vaccine in curbing COVID-19 pandemic, among others. In this study, Obi-Ezeani *et al.,* (2021) only focused on what Awka residents know and believe about COVID-19 vaccine and on their willingness to take it and did not seek to find out the perception of COVID-19 vaccine hesitancy and social media misinformation on the vaccine among youths in Anambra State.

In order to estimate the proportion of the Nnamdi Azikiwe University community that is willing to be vaccinated against COVID-19, their level of hesitancy and its associated factors, Uzochukwu, Eleje, Nwankwo, Chukwuma, Uzuke, Uzochukwu, Mathias, Okunna, Asomugha and Esimone (2021) conducted a cross-sectional survey using online Google form and distributed it to the staff and students of the university through different WhatsApp groups and used the proportion of persons willing to be vaccinated, vaccine hesitancy rates and reasons for the hesitancy as their outcome measures. They analyzed the data they collected from this study, using SPSS version 23 and Minitab version 19 and performed a Bivariate analysis in their Chi-square test and accepted Odds Ratios (ORs) and statistical significance when p value is < 0.05.

Their findings from this study, show that out of the 349 respondents they studied, 34.70 ± 5.00% of the university community were willing to receive the COVID-19 vaccine when it is offered to them. They also found that the COVID-19 vaccine hesitancy rate among the staff and students they studied, was 65.04 ± 5.00%, among others. They, therefore, recommended that appropriately designed advocacy and behaviour-change communication messages that target the respective segments of the university community members, should be deployed to minimize vaccine hesitancy in the community while the alarming high hesitancy rate in the community, should stir further studies on the root causes of COVID-19 vaccine hesitancy in Nigeria. In this study, however, Uzochukwu *et al.,* (2021) only focused on the staff and students of UNIZIK in terms of their willingness to take COVID-19 vaccine, the level of COVID-19 vaccine hesitancy among them and the factors that make them hesitant to take the vaccine and did not study Anambra youths' perception of COVID-19 vaccine hesitancy and social media misinformation on the vaccine.

In their study to assess the knowledge and awareness of COVID-19, COVID-19 vaccine and the willingness to accept same among residents of Lafia, Nasarawa State, Nigeria, along with their general perception of the vaccine, Adaranijo, Umar and Haruna (2021) adopted the survey design and employed a well-constructed questionnaire to generate quantitative data from the 385 respondents they studied. They used descriptive statistics such as frequency, mean, standard deviation, variance, simple percentages, tables and charts to analyze the data they collected and used Chi-square to test their hypothesis. From this study, they found that residents of the state are aware and knowledgeable of COVID-19 but are not willing to accept a COVID-19 vaccine. They, therefore, recommended that the Federal Government, state government and local government, should be more intentional about committing resources to facilitating public health awareness in the state on the effectiveness and safety of COVID-19 vaccine and the need to accept it when made available, among others. In this study, Adaranijo *et al.,* (2021) only focused on the general perception of the vaccine among Lafia residents and carried out their study in Nasarawa State while the current study focused on the perception of COVID-19 vaccine hesitancy and social media misinformation on the vaccine among Anambra youths and was carried out in Anambra state.

In order to determine the level and predictors of hesitancy against COVID-19 vaccine that is yet to be made available to the general public in Plateau State among selected residents, Okoh, Gwomson, Makput, Dasat and Chirdan (2021) conducted a cross-sectional study among 300 selected adults using e-questionnaires in which scenarios for COVID-19 vaccination were created. They used IBM SPSS version 23 for data analysis and logistic regression for identification of predictors and considered a p – value of ≤ 0.05 statistically significant. They found from this study, that the prevalence of vaccine hesitancy was 46%, with fear of side effects accounting for the highest reason for the hesitancy, among others. They, therefore, recommended that the government and the health system should educate the entire population and build up their confidence in the efficacy and safety of these vaccines that have proven to be highly efficacious and necessary in combating the menace of COVID-19. In this study, Okoh *et al.,* (2021) only focused on the level of COVID-19 vaccine hesitancy among residents of Plateau State and the things that lead to hesitancy while the current study focused on Anambra youths' perception of COVID-19 vaccine hesitancy and social media misinformation on the vaccine and was carried out in Anambra state.

Literature Gap

The reviews above show that past researchers have only focused on the perception, attitudes and knowledge of COVID-19 vaccines, factors causing COVID-19 vaccine hesitancy and low COVID-19 vaccination, willingness to take the vaccines, vaccine hesitancy and the significance of the level of access to COVID-19 vaccination information on intention to take COVID-19 vaccines. Nonetheless, there appears to be a dearth of studies focusing specifically on the perception of COVID-19 vaccine hesitancy and social media misinformation on the vaccine among youths in Anambra State. This represents, in the opinion of the researcher, a knowledge gap which the current study filled.

THEORETICAL FRAMEWORK

Perception Theory

The perception theory was propounded by Bernard Berelson and Gary .A. Steiner in 1964. The theory states that the concepts of selective attention, selective exposure, selective perception and selective retention are the selective processes that determine how media contents and messages are interpreted by media audience. It posits that every individual would likely go through the processes whenever there is information in the media. This theory is ideal for the explanation of this study especially since Anambra youths who the researcher studied, would likely go through the selective processes to have their perception of vaccine hesitancy and social media misinformation on COVID-19 vaccines in this period when there is still misinformation on COVID-19 vaccines in the social media.

Health Belief Model

The health belief model was propounded in the 1950s by Irwin Rosenstock, Godfrey Hochbaum, Stephen Kegales and Howard Leventhal. The theory states that people's beliefs (perceptions) about health problems which could be as a result of their perceived severity, susceptibility, benefits of action, barriers to action, self-efficacy, and cue to action are what explains their engagement or lack of engagement in any health-promoting behaviour. This theory is also ideal for the explanation of this study in the sense that Anambra youths' perception of COVID-19 vaccine hesitancy and social media misinformation on COVID-19 vaccines, may or may not help in the fight against COVID-19 which could be as a result of their perceived severity, susceptibility, benefits of action, barriers to action, self-efficacy and cue to action, is capable of explaining their engagement or lack of engagement in health-promoting behaviour like taking the COVID-19 vaccines and ignoring COVID-19 vaccine misinformation on social media.

METHODOLOGY

In this study, the researcher adopted descriptive survey and studied students of Nnamdi Azikiwe University, Awka, Chukwuemeka Odumegwu Ojukwu University, Igbariam, and Paul University, Awka who their combined population is 57, 707. From this population and with the use of the Taro Yamane formula, the researcher determined the sample size of 397 which she studied. She selected the samples using multi-stage sampling procedure and administered copies of a valid, reliable and close-ended/structured questionnaire to them. The data which the researcher generated from the study was analyzed using frequency tables, simple percentages and the arithmetic mean of the responses of the respondents. The researcher rejected their mean responses that are below 2.5 and accepted those that are 2.5 and above.

FINDINGS

Research Question 1: What is the level of exposure to COVID-19 vaccine misinformation on the selected social media platforms among youths in Anambra State?

Table 1: UNIZIK students' level of exposure to COVID-19 vaccine misinformation on the selected social media platforms

S/N	ITEMS	SA 5	A 4	N 3	D 2	SD 1	TOTAL	$\bar{X}$	DECISION RULE
1	Very high	41.2 98 490	13.4 32 128	7.1 17 51	20.6 49 98	17.6 42 42	100 238 809	3.4	Accepted
2	High	17.2 41 205	22.3 53 212	13.4 32 96	36.9 88 176	10.1 24 24	100 238 713	2.10	Accepted
3	Low	6.3 15 75	28.2 67 268	34 81 243	10.5 25 50	21 50 50	100 238 686	2.9	Accepted
4	Very low	5 12 60	3.4 8 32	15.1 36 108	40.7 97 194	35.7 85 85	100 238 479	2.0	Rejected

Source: Researcher's Field Survey, 2023

From the responses above, UNIZIK students' level of exposure to COVID-19 vaccine misinformation on the selected social media platforms is very high. This is because 41% of the students strongly agree that their level of exposure to the COVID-19 vaccine misinformation on the selected social media platforms is very high. This is more than the percentage of students that indicated that they agree that their level of exposure to the COVID-19 vaccine misinformation on the selected social media platforms is very high (13.4%) and the percentages of those that indicated that they strongly agree and agree that theirs are high (17.2% and 22.3%), low (6.3% and 28.2%) and very low (5% and 3.4%), respectively. The percentage of students that strongly agree that their level of exposure to the COVID-19 vaccine misinformation on the selected social media platforms, is very high, is also more than the percentages of students that disagree and strongly disagree that theirs are very high (20.6% and 17.6%), high (36.9% and 10.1%), low (10.5% and 21%) and very low (40.7% and 35.7%), respectively and equally more than the percentages of students that are neutral as to whether their levels of exposure to COVID-19 vaccine misinformation on the selected social media platforms are very high (7.1%), high (13.4%), low (34%) and very low (15.1%) or not, respectively. While the researcher accepted the responses of the students who strongly agreed, agreed, disagreed and strongly disagreed that their levels of exposure to COVID-19 vaccine misinformation on the selected social media platforms are very high, high and low as well as the responses of those that are neutral as to whether their levels of exposure to COVID-19 vaccine misinformation on the selected social media platforms are very high, high and low or not because the Weighted Mean Scores (WMS) of their responses are more than 2.5, respectively, she rejected the responses of the students who strongly agreed, agreed, disagreed and strongly disagreed that their levels of exposure to COVID-19 vaccine misinformation on the selected social media platforms are very low as well as the responses of the students that were neutral as to whether their levels of exposure to COVID-19 vaccine misinformation on the selected social media platforms is very low or not because the Weighted Mean Score (WMS) of their responses is less than 2.5.

Table 2: COOU students' level of exposure to COVID-19 vaccine misinformation on the selected social media platforms

S/N	ITEMS	SA 5	A 4	N 3	D 2	SD 1	TOTAL	$\bar{X}$	DECISION RULE
5	Very high	40.3 62 310	13.6 21 84	7.1 11 33	14.3 22 44	24.7 38 38	100 154 509	3.3	Accepted
6	High	37 57 285	5.8 9 36	3.2 5 15	17.5 27 54	36.4 56 56	100 154 446	2.9	Accepted
7	Low	8.4 13 65	16.2 25 100	1.9 3 9	38.3 59 118	35 54 54	100 154 346	2.2	Rejected
8	Very low	9 14 70	21.4 33 132	1.3 2 6	29.9 46 92	38.3 59 59	100 154 359	2.3	Rejected

Source: Researcher's Field Survey, 2023

From the responses above, COOU students' level of exposure to COVID-19 vaccine misinformation on the selected social media platforms is very high. This is because 40.3% of the students strongly agree that their level of exposure to the COVID-19 vaccine misinformation on the selected social media platforms is very high. This is more than the percentage of students that indicated that they agree that their level of exposure to the COVID-19 vaccine misinformation on the selected social media platforms is very high (13.6%) and the percentages of those that indicated that they strongly agree and agree that theirs are high (37% and 5.8%), low (8.4% and 16.2%) and very low (9% and 21.4%), respectively. The percentage of students that strongly agree that their level of exposure to the COVID-19 vaccine misinformation on the selected social media platforms, is very high, is also more than the percentages of students that disagree and strongly disagree that theirs are very high (14.3% and 24.7%), high (17.5% and 36.4%), low (38.3% and 35%) and very low (29.9% and 38.3%), respectively and equally more than the percentages of students that are neutral as to whether their levels of exposure to COVID-19 vaccine misinformation on the selected social media platforms are very high (7.1%), high (3.2%), low (1.9%) and very low (1.3%) or not, respectively. While the researcher accepted the responses of the students who strongly agreed, agreed, disagreed and strongly disagreed that their levels of exposure to COVID-19 vaccine misinformation on the selected social media platforms are very high and high as well as the responses of those that are neutral as to whether their levels of exposure to COVID-19 vaccine misinformation on the selected social media platforms are very high and high or not because the Weighted Mean Scores (WMS) of their responses are more than 2.5, respectively, she rejected responses of the students who strongly agreed, agreed, disagreed and strongly disagreed that their levels of exposure to COVID-19 vaccine misinformation on the selected social media platforms are low and very low as well as the responses of the students that were neutral as to whether their levels of exposure to COVID-19 vaccine misinformation on the selected social media platforms are low and very low or not because the Weighted Mean Scores (WMS) of their responses are less than 2.5, respectively.

Table 3: Paul University students' level of exposure to COVID-19 vaccine misinformation on the selected social media platforms

S/N	ITEMS	SA 5	A 4	N 3	D 2	SD 1	TOTAL	$\bar{X}$	DECISION RULE
9	Very high	100 5 25	0 0 0	0 0 0	0 0 0	0 0 0	100 5 25	5	Accepted
10	High	20 1 5	80 4 16	0 0 0	0 0 0	0 0 0	100 5 21	4.2	Accepted
11	Low	0 0 0	0 0 0	0 0 0	40 2 4	60 3 3	100 5 7	1.4	Rejected
12	Very low	0 0 0	0 0 0	0 0 0	20 1 2	80 4 4	100 5 6	1.2	Rejected

Source: Researcher's Field Survey, 2023

From the responses above, Paul University students' level of exposure to COVID-19 vaccine misinformation on the selected social media platforms is very high. This is because 100% of the students (all the students) strongly agree that their level of exposure to the COVID-19 vaccine misinformation on the selected social media platforms is very high. This is more than the percentage of students that indicated that they agree that their level of exposure to the COVID-19 vaccine misinformation on the selected social media platforms is very high (0%) and the percentages of those that indicated that they strongly agree and agree that theirs are high (20% and 80%), low (0% and 0%) and very low (0% and 0%), respectively. The percentage of students that strongly agree that their level of exposure to the COVID-19 vaccine misinformation on the selected social media platforms, is very high, is also more than the percentages of students that disagree and strongly disagree that theirs are very high (0% and 0%), high (0% and 0%), low (40% and 60%) and very low (20% and 80%), respectively. None of the students indicated that they are neutral as to whether their levels of exposure to COVID-19 vaccine misinformation on the selected social media platforms are very high, high, low and very low or not, respectively. While the researcher accepted the responses of the students who strongly agreed, agreed, disagreed and strongly disagreed that their levels of exposure to COVID-19 vaccine misinformation on the selected social media platforms are very high and high because the Weighted Mean Scores (WMS) of their responses are more than 2.5, respectively, she rejected the responses of the students who strongly agreed, agreed, disagreed and strongly disagreed that their levels of exposure to COVID-19 vaccine misinformation on the selected social media platforms are low and very low because the Weighted Mean Scores (WMS) of their responses are less than 2.5 respectively.

Research Question 2: What is the perception of COVID-19 vaccine misinformation on the selected social media platforms among youths in Anambra State?

Table 4: UNIZIK students' perception of COVID-19 vaccine misinformation on the selected social media platforms

S/N	ITEMS	SA 5	A 4	N 3	D 2	SD 1	TOTAL	$\bar{X}$	DECISION RULE
13	COVID-19 vaccine misinformation on the selected social media platforms is misleading	21.4 51 255	20.2 48 192	6.7 16 48	33.2 79 158	18.5 44 44	100 238 697	2.9	Accepted
14	It discourages people from taking the vaccines	10.9 26 130	27.7 66 264	9.2 22 66	15.5 37 74	36.6 87 87	100 238 621	2.6	Accepted
15	It increases the spread of COVID-19	32.8 78 390	7.1 17 68	5.5 13 39	23.1 55 110	31.5 75 75	100 238 682	2.9	Accepted
16	It prevents the achievement of herd immunity	4.2 10 50	17.2 41 164	11.8 28 84	44.5 106 212	22.3 53 53	100 238 472	1.9	Rejected
17	It leads to vaccine hesitancy	59.2 141 705	15.1 36 144	0.8 2 6	21.4 51 102	3.4 8 8	100 238 965	4	Accepted

Source: Researcher's Field Survey, 2023

From the responses above, UNIZIK students' perception of COVID-19 vaccine misinformation on the selected social media platforms is that the misinformation leads to vaccine hesitancy. This is because 59.2% of the students strongly agree that COVID-19 vaccine misinformation on the selected social media platforms leads to vaccine hesitancy. This is more than the percentage of students that indicated that they agree that COVID-19 vaccine misinformation on the selected social media platforms leads to vaccine hesitancy (15.1%) and the percentages of those that indicated that they strongly agree and agree that COVID-19 vaccine misinformation on the selected social media platforms is misleading (21.4% and 20.2%), discourages people from taking the vaccines (10.9% and 27.7%), increases the spread of COVID-19 (32.8% and 7.1%) and prevents the achievement of herd immunity (4.2% and 17.2%), respectively. The percentage of students that strongly agree that COVID-19 vaccine misinformation on the selected social media platforms, leads to vaccine hesitancy, is also more than the percentages of students that disagree and strongly disagree that the misinformation is misleading (33.2% and 18.5%), discourages people from taking the vaccines (15.5% and 36.6%), increases the spread of COVID-19 (23.1% and 31.5%), prevents the achievement of herd immunity (44.5% and 22.3%), and leads to vaccine hesitancy (21.4% and 3.4%) respectively and equally more than the percentages of students that are neutral as to whether COVID-19 vaccine misinformation on the selected social media platforms leads to vaccine hesitancy (0.8%), is misleading (6.7%), discourages people from taking the vaccines (9.2%), increases the spread of COVID-19 (5.5%) and prevents the achievement of herd immunity (11.8%) or not, respectively. While the researcher accepted the responses of the students who strongly agreed, agreed, disagreed and strongly disagreed that COVID-19 vaccine misinformation on the selected social media platforms are misleading, discourages people from taking the vaccines, increases the spread of COVID-19 and leads to vaccine hesitancy as well as the responses of those that are neutral as to whether the COVID-19 vaccine misinformation on the selected social media platforms are misleading, discourages people from taking the vaccines, increases the spread of COVID-19 and leads to vaccine hesitancy or not because the Weighted Mean Scores (WMS) of their responses are more than 2.5, respectively, she rejected the responses of students who strongly agreed, agreed, disagreed and strongly disagreed that COVID-19 vaccine misinformation on the selected social media platforms prevents the achievement of herd immunity as well as the responses of those that are neutral as to

whether the COVID-19 vaccine misinformation on the selected social media platforms prevents the achievement of herd immunity or not because the Weighted Mean Score (WMS) of their responses is less than 2.5.

Table 5: COOU students' perception of COVID-19 vaccine misinformation on the selected social media platforms

S/N	ITEMS	SA 5	A 4	N 3	D 2	SD 1	TOTAL	$\bar{X}$	DECISION RULE
18	COVID-19 vaccine misinformation on the selected social media platforms is misleading	20.8 32 160	25.9 40 160	4.5 7 21	9 14 28	39.6 61 61	100 154 430	2.8	Accepted
19	It discourages people from taking the vaccines	18.2 28 140	35.7 55 220	12.3 19 57	18.8 29 58	14.9 23 23	100 154 498	3.2	Accepted
20	It increases the spread of COVID-19	32.5 50 250	20.1 31 124	5.2 8 24	31.2 48 96	11 17 17	100 154 511	3.3	Accepted
21	It prevents the achievement of herd immunity	27.3 42 210	9.7 15 60	12.9 20 60	40.9 63 126	9 14 14	100 154 470	3.1	Accepted
22	It leads to vaccine hesitancy	50 77 385	7.1 11 44	6.5 10 30	12.9 20 40	23.4 36 36	100 154 535	3.5	Accepted

Source: Researcher's Field Survey, 2023

From the responses above, COOU students' perception of COVID-19 vaccine misinformation on the selected social media platforms is that the misinformation leads to vaccine hesitancy. This is because 50% of the students strongly agree that COVID-19 vaccine misinformation on the selected social media platforms leads to vaccine hesitancy. This is more than the percentage of students that indicated that they agree that COVID-19 vaccine misinformation on the selected social media platforms leads to vaccine hesitancy (7.1%) and the percentages of those that indicated that they strongly agree and agree that COVID-19 vaccine misinformation on the selected social media platforms is misleading (20.8% and 25.9%), discourages people from taking the vaccines (18.2% and 35.7%), increases the spread of COVID-19 (32.5% and 20.1%) and prevents the achievement of herd immunity [70% and above level of vaccination] (27.3% and 9.7%), respectively. The percentage of students that strongly agree that COVID-19 vaccine misinformation on the selected social media platforms, leads to vaccine hesitancy, is also more than the percentages of students that disagree and strongly disagree that the misinformation is misleading (9% and 39.6%), discourages people from taking the vaccines (18.8% and 14.9%), increases the spread of COVID-19 (31.2% and 11%), prevents the achievement of herd immunity (40.9% and 9%) and leads to vaccine hesitancy (12.9% and 23.4%), respectively and equally more than the percentages of students that are neutral as to whether COVID-19 vaccine misinformation on the selected social media platforms leads to vaccine hesitancy (6.5%), is misleading (4.5%), discourages people from taking the vaccines (12.3%), increases the spread of COVID-19 (5.2%) and prevents the achievement of herd immunity (12.9%) or not, respectively. The researcher accepted the responses of the students who strongly agreed, agreed, disagreed and strongly disagreed that COVID-19 vaccine misinformation on the selected social media platforms are misleading, discourages people from taking the vaccines, increases the spread of COVID-19, prevents the achievement of herd immunity and leads to vaccine hesitancy as well as the responses of those that are neutral as to whether the COVID-19 vaccine misinformation on the selected social media platforms are misleading, discourages people from taking the vaccines, increases the spread of COVID-19, prevents the achievement of herd immunity and leads to vaccine hesitancy or not because the Weighted Mean Scores (WMS) of their responses are more than 2.5, respectively.

Table 6: Paul University students' perception of COVID-19 vaccine misinformation on the selected social media platforms

S/N	ITEMS	SA 5	A 4	N 3	D 2	SD 1	TOTAL	$\bar{X}$	DECISION RULE
23	COVID-19 vaccine misinformation on the selected social media platforms is misleading	40 2 10	0 0 0	0 0 0	60 3 6	0 0 0	100 5 16	3.2	Accepted
24	It discourages people from taking the vaccines	20 1 5	20 1 4	0 0 0	40 2 4	20 1 1	100 5 14	2.8	Accepted
25	It increases the spread of COVID-19	80 4 20	0 0 0	0 0 0	0 0 0	20 1 1	100 5 21	4.2	Accepted
26	It prevents the achievement of herd immunity	0 0 0	40 2 8	0 0 0	60 3 6	0 0 0	100 5 14	2.8	Accepted
27	It leads to vaccine hesitancy	100 5 25	0 0 0	0 0 0	0 0 0	0 0 0	100 5 25	5	Accepted

Source: Researcher's Field Survey, 2023

From the responses above, Paul University students' perception of COVID-19 vaccine misinformation on the selected social media platforms is that the misinformation leads to vaccine hesitancy. This is because 100% of the students (all the students) strongly agree that COVID-19 vaccine misinformation on the selected social media platforms leads to vaccine hesitancy. This is more than the percentage of students that indicated that they agree that COVID-19 vaccine misinformation on the selected social media platforms leads to vaccine hesitancy (0%) and the percentages of those that indicated that they strongly agree and agree that COVID-19 vaccine misinformation on the selected social media platforms is misleading (40% and 0%), discourages people from taking the vaccines (20% and 20%), increases the spread of COVID-19 (80% and 0%) and prevents the achievement of herd immunity [70% and above level of vaccination] (0% and 40%), respectively. The percentage of students that strongly agree that COVID-19 vaccine misinformation on the selected social media platforms, leads to vaccine hesitancy, is also more than the percentages of students that disagree and strongly disagree that the misinformation is misleading (60% and 0%), discourages people from taking the vaccines (40% and 20%), increases the spread of COVID-19 (0% and 20%), prevents the achievement of herd immunity (60% and 0%) and leads to vaccine hesitancy (0% and 0%), respectively. None of the students indicated that they are neutral as to whether the misinformation is misleading, discourages people from taking the vaccines, increases the spread of COVID-19, prevents the achievement of herd immunity and leads to vaccine hesitancy. The researcher accepted the responses of the students who strongly agreed, agreed, disagreed and strongly disagreed that COVID-19 vaccine misinformation on the selected social media platforms are misleading, discourages people from taking the vaccines, increases the spread of COVID-19, prevents the achievement of herd immunity and leads to vaccine hesitancy because the Weighted Mean Scores (WMS) of their responses are more than 2.5, respectively.

Research Question 3: To what extent do Anambra youths believe COVID-19 vaccine misinformation on the selected social media platforms?

Table 7: The extent UNIZIK students believe COVID-19 vaccine misinformation on the selected social media platforms

S/N	ITEMS	SA 5	A 4	N 3	D 2	SD 1	TOTAL	$\bar{X}$	DECISION RULE
28	Very often	24.8 59 295	16.8 40 160	5 12 36	15.1 36 72	38.2 91 91	100 238 654	2.7	Accepted
29	Often	10.5 25 125	26.1 62 248	3.8 9 27	36.9 88 176	22.7 54 54	100 238 630	2.6	Accepted
30	Sometimes	48.7 116 580	17.2 41 164	2.5 6 18	13 31 62	18.5 44 44	100 238 859	3.6	Accepted
31	Rarely	17.2 41 205	7.1 17 68	10.1 24 72	44.9 107 214	20.6 49 49	100 238 608	2.6	Accepted

Source: Researcher's Field Survey, 2023

From the responses above, UNIZIK students believe COVID-19 vaccine misinformation on the selected social media platforms sometimes. This is because 48.7% of the students strongly agree that they sometimes believe COVID-19 vaccine misinformation on the selected social media platforms. This is more than the percentage of students that indicated that they agree that they sometimes believe COVID-19 vaccine misinformation on the selected social media platforms (17.2%) and the percentages of those that indicated that they strongly agree and agree that they believe COVID-19 vaccine misinformation on the selected social media platforms very often (24.8% and 16.8%), often (10.5% and 26.1%) and rarely believe the misinformation (17.2% and 7.1%), respectively. The percentage of students that strongly agree that they sometimes believe COVID-19 vaccine misinformation on the selected social media platforms, is also more than the percentages of students that disagree and strongly disagree that they believe the misinformation very often (15.1% and 38.2%), often (36.9% and 22.7%), sometimes (13% and 18.5%) and rarely believe the misinformation (44.9% and 20.6%), respectively and equally more than the percentages of students that are neutral as to whether they believe the misinformation very often (5%), often (3.8%), sometimes (2.5%) and rarely believe the misinformation (10.1%) or not, respectively. The researcher accepted the responses of the students who strongly agreed, agreed, disagreed and strongly disagreed that they believe COVID-19 vaccine misinformation on the selected social media platforms very often, often, sometimes and rarely believe the misinformation as well as the responses of those that are neutral as to whether they believe COVID-19 vaccine misinformation on the selected social media platforms very often, often, sometimes and rarely believe the misinformation or not because the Weighted Mean Scores (WMS) of their responses are more than 2.5, respectively.

Table 8: The extent COOU students believe COVID-19 vaccine misinformation on the selected social media platforms

S/N	ITEMS	SA 5	A 4	N 3	D 2	SD 1	TOTAL	$\bar{X}$	DECISION RULE
32	Very often	21.4 33 165	17.5 27 108	4.5 7 21	40.9 63 126	15.6 24 24	100 154 444	2.9	Accepted
33	Often	36.4 56 280	13.6 21 84	10.4 16 48	31.8 49 98	7.8 12 12	100 154 522	3.4	Accepted
34	Sometimes	42.9 66 330	18.2 28 112	0 0 0	35.7 55 110	3.2 5 5	100 154 557	3.6	Accepted
35	Rarely	23.4 36 180	8.4 13 52	7.8 12 36	39.6 61 122	20.8 32 32	100 154 422	2.7	Accepted

Source: Researcher's Field Survey, 2023

From the responses above, COOU students believe COVID-19 vaccine misinformation on the selected social media platforms sometimes. This is because 42.9% of the students strongly agree that they sometimes believe COVID-19 vaccine misinformation on the selected social media platforms. This is more than the percentage of students that indicated that they agree that they sometimes believe COVID-19 vaccine misinformation on the selected social media platforms (18.2%) and the percentages of those that indicated that they strongly agree and agree that they believe COVID-19 vaccine misinformation on the selected social media platforms very often (21.4% and 17.5%), often (36.4% and 13.6%) and rarely believe the misinformation (23.4% and 8.4%), respectively. The percentage of students that strongly agree that they sometimes believe COVID-19 vaccine misinformation on the selected social media platforms, is also more than the percentages of students that disagree and strongly disagree that they believe the misinformation very often (40.9% and 15.6%), often (31.8% and 7.8%), sometimes (35.7% and 3.2%) and rarely believe the misinformation (39.6% and 20.8%), respectively and equally more than the percentages of students that are neutral as to whether they believe the misinformation very often (4.5%), often (10.4%), sometimes (0%) and rarely believe the misinformation (7.8%) or not, respectively. The researcher accepted the responses of the students who strongly agreed, agreed, disagreed and strongly disagreed that they believe COVID-19 vaccine misinformation on the selected social media platforms very often, often, sometimes and rarely believe the misinformation as well as the responses of those that are neutral as to whether they believe COVID-19 vaccine misinformation on the selected social media platforms very often, often, sometimes and rarely believe the misinformation or not because the Weighted Mean Scores (WMS) of their responses are more than 2.5, respectively.

Table 9: The extent Paul University students believe COVID-19 vaccine misinformation on the selected social media platforms

S/N	ITEMS	SA 5	A 4	N 3	D 2	SD 1	TOTAL	$\bar{X}$	DECISION RULE
36	Very often	0 0 0	20 1 4	0 0 0	40 2 4	40 2 2	100 5 10	2	Rejected
37	Often	20 1 5	20 1 4	0 0 0	60 3 6	0 0 0	100 5 15	3	Accepted
38	Sometimes	80 4 20	20 1 4	0 0 0	0 0 0	0 0 0	100 5 24	4.8	Accepted
39	Rarely	20 1 5	0 0 0	0 0 0	20 1 2	60 3 3	100 5 10	2	Rejected

Source: Researcher's Field Survey, 2023

From the responses above, Paul University students believe COVID-19 vaccine misinformation on the selected social media platforms sometimes. This is because 80% of the students strongly agree that they sometimes believe COVID-19 vaccine misinformation on the selected social media platforms. This is more than the percentage of students that indicated that they agree that they sometimes believe COVID-19 vaccine misinformation on the selected social media platforms (20%) and the percentages of those that indicated that they strongly agree and agree that they believe COVID-19 vaccine misinformation on the selected social media platforms very often (0% and 20%), often (20% and 20%) and rarely believe the misinformation (20% and 0%), respectively. The percentage of students that strongly agree that they sometimes believe COVID-19 vaccine misinformation on the selected social media platforms, is also more than the percentages of students that disagree and strongly disagree that they believe the misinformation very often (40% and 40%), often (60% and 0%), sometimes (0% and 0%) and rarely believe the misinformation (20% and 60%), respectively. None of the students indicated that they are neutral as to whether they strongly agree, agree, disagree and strongly disagree that they believe COVID-19 vaccine misinformation on the selected social media platforms very often, often, sometimes and rarely believe the misinformation. While the researcher accepted the responses of the students who strongly agreed, agreed, disagreed and strongly disagreed that they believe COVID-19 vaccine misinformation on the selected social media platforms often and sometimes because the Weighted Mean Scores (WMS) of their responses are more than 2.5, respectively, she rejected the responses of the students who strongly agreed, agreed, disagreed and strongly disagreed that they believe COVID-19 vaccine misinformation on the selected social media platforms very often and the responses of those who rarely believe the misinformation because the Weighted Mean Scores (WMS) of their responses are less than 2.5, respectively.

Research Question 4: To what extent does the COVID-19 vaccine misinformation promote vaccine hesitancy among youths in Anambra State?

Table 10: The extent to which COVID-19 vaccine misinformation promote vaccine hesitancy among UNIZIK students

S/N	ITEMS	SA 5	A 4	N 3	D 2	SD 1	TOTAL	$\bar{X}$	DECISION RULE
40	Very high	37.4 89 445	10.9 26 104	3.8 9 27	38.7 92 184	9.2 22 22	100 238 782	3.3	Accepted
41	High	40.8 97 485	17.2 41 164	7.6 18 54	22.3 53 106	12.1 29 29	100 238 838	3.5	Accepted
42	Low	9.2 22 110	6.7 16 64	8.4 20 60	37.4 89 178	38.2 91 91	100 238 503	2.1	Rejected
43	Very low	13 31 155	3.4 8 32	4.6 11 33	40.3 96 192	38.7 92 92	100 238 504	2.1	Rejected

Source: Researcher's Field Survey, 2023

From the responses above, the extent to which COVID-19 vaccine misinformation on the selected social media platforms promote vaccine hesitancy among UNIZIK students is high. This is because 40.8% of the students strongly agree that COVID-19 vaccine misinformation on the selected social media platforms promote vaccine hesitancy among them. This is more than the percentage of students that indicated that they agree that the extent to which COVID-19 vaccine misinformation on the selected social media platforms promote vaccine hesitancy among them is high (17.2%) and the percentages of those that indicated that they strongly agree and agree that the extent to which COVID-19 vaccine misinformation on the selected social media platforms promote vaccine hesitancy among them are very high (37.4% and 10.9%), low (9.2% and 6.7%) and very low (13% and 3.4%), respectively. The percentage of students that strongly agree that the extent to which COVID-19 vaccine misinformation on the selected social media platforms promote vaccine hesitancy among them, is high, is also more than the percentages of students that disagree and strongly disagree that the extent to which COVID-19 vaccine misinformation on the selected social media platforms promote vaccine hesitancy among them are very high (38.7% and 9.2%), high (22.3% and 12.1%), low (37.4% and 38.2%) and very low (40.3% and 38.7%), respectively and equally more than the percentages of students that are neutral as to whether the extent to which COVID-19 vaccine misinformation on the selected social media platforms promote vaccine hesitancy among them are very high (3.8%), high (7.6%), low (8.4%) and very low (4.6%) or not, respectively. While the researcher accepted the responses of the students who strongly agreed, agreed, disagreed and strongly disagreed that the extent to which COVID-19 vaccine misinformation on the selected social media platforms promote vaccine hesitancy among them are very high and high as well as the responses of those that are neutral as to whether the extent to which COVID-19 vaccine misinformation on the selected social media platforms promote vaccine hesitancy among them are very high and high or not because the Weighted Mean Scores (WMS) of their responses are more than 2.5, respectively, she rejected the responses of the students who strongly agreed, agreed, disagreed and strongly disagreed that the extent to which COVID-19 vaccine misinformation on the selected social media platforms promote vaccine hesitancy among them are low and very low as well as the responses of the students that were neutral as to whether the extent to which COVID-19 vaccine misinformation on the selected social media platforms promote vaccine hesitancy among them are low and very low or not because the Weighted Mean Scores (WMS) of their responses are less than 2.5, respectively.

Table 11: The extent to which COVID-19 vaccine misinformation promote vaccine hesitancy among COOU students

S/N	ITEMS	SA 5	A 4	N 3	D 2	SD 1	TOTAL	$\bar{X}$	DECISION RULE
44	Very high	20.8 32 160	9.7 15 60	3.9 6 18	38.9 60 120	26.6 41 41	100 154 399	2.6	Accepted
45	High	40.9 63 315	18.2 28 112	6.5 10 30	29.9 46 92	4.5 7 7	100 154 556	3.6	Accepted
46	Low	12.9 20 100	13.6 21 84	13.6 21 63	19.5 30 60	40.2 62 62	100 154 369	2.4	Rejected
47	Very low	14.9 23 115	19.5 30 120	5.8 9 27	33.1 51 102	26.6 41 41	100 154 405	2.6	Accepted

Source: Researcher's Field Survey, 2023

From the responses above, the extent to which COVID-19 vaccine misinformation on the selected social media platforms promote vaccine hesitancy among COOU students is high. This is because 40.9% of the students strongly agree that COVID-19 vaccine misinformation on the selected social media platforms promote vaccine hesitancy among them. This is more than the percentage of students that indicated that they agree that the extent to which COVID-19 vaccine misinformation on the selected social media platforms promote vaccine hesitancy among them is high (18.2%) and the percentages of those that indicated that they strongly agree and agree that the extent to which COVID-19 vaccine misinformation on the selected social media platforms promote vaccine hesitancy among them are very high (20.8% and 9.7%), low (9.2% and 13.6%) and very low (14.9% and 19.5%), respectively. The percentage of students that strongly agree that the extent to which COVID-19 vaccine misinformation on the selected social media platforms promote vaccine hesitancy among them, is high, is also more than the percentages of students that disagree and strongly disagree that the extent to which COVID-19 vaccine misinformation on the selected social media platforms promote vaccine hesitancy among them are very high (38.9% and 26.6%), high (29.9% and 4.5%), low (19.5% and 40.2%) and very low (33.1% and 26.6%), respectively and equally more than the percentages of students that are neutral as to whether the extent to which COVID-19 vaccine misinformation on the selected social media platforms promote vaccine hesitancy among them are very high (3.9%), high (6.5%), low (13.6%) and very low (5.8%) or not, respectively. While the researcher accepted the responses of the students who strongly agreed, agreed, disagreed and strongly disagreed that the extent to which COVID-19 vaccine misinformation on the selected social media platforms promote vaccine hesitancy among them are very high, high and very low as well as the responses of those that are neutral as to whether the extent to which COVID-19 vaccine misinformation on the selected social media platforms promote vaccine hesitancy among them are very high, high and very low or not because the Weighted Mean Scores (WMS) of their responses are more than 2.5, respectively, she rejected the responses of the students who strongly agreed, agreed, disagreed and strongly disagreed that the extent to which COVID-19 vaccine misinformation on the selected social media platforms promote vaccine hesitancy among them are low as well as the responses of the students that were neutral as to whether the extent to which COVID-19 vaccine misinformation on the selected social media platforms promote vaccine hesitancy among them is low or not because the Weighted Mean Score (WMS) of their responses is less than 2.5.

Table 12: The extent to which COVID-19 vaccine misinformation promote vaccine hesitancy among Paul University students

S/N	ITEMS	SA 5	A 4	N 3	D 2	SD 1	TOTAL	$\bar{X}$	DECISION RULE
48	Very high	40 2 10	40 2 8	0 0 0	20 1 2	0 0 0	100 5 20	4	Accepted
49	High	80 4 20	20 1 4	0 0 0	0 0 0	0 0 0	100 5 24	4.8	Accepted
50	Low	20 1 5	0 0 0	0 0 0	20 1 2	60 3 3	100 5 10	2	Rejected
51	Very low	0 0 0	0 0 0	0 0 0	40 2 4	60 3 3	100 5 7	1.4	Rejected

Source: Researcher's Field Survey, 2023

From the responses above, the extent to which COVID-19 vaccine misinformation on the selected social media platforms promote vaccine hesitancy among Paul University students is high. This is because 80% of the students strongly agree that COVID-19 vaccine misinformation on the selected social media platforms promote vaccine hesitancy among them. This is more than the percentage of students that indicated that they agree that the extent to which COVID-19 vaccine misinformation on the selected social media platforms promote vaccine hesitancy among them is high (20%) and the percentages of those that indicated that they strongly agree and agree that the extent to which COVID-19 vaccine misinformation on the selected social media platforms promote vaccine hesitancy among them are very high (40% and 40%), low (20% and 0%) and very low (0% and 0%), respectively. The percentage of students that strongly agree that the extent to which COVID-19 vaccine misinformation on the selected social media platforms promote vaccine hesitancy among them, is high, is also more than the percentages of students that disagree and strongly disagree that the extent to which COVID-19 vaccine misinformation on the selected social media platforms promote vaccine hesitancy among them are very high (20% and 0%), high (0% and 0%), low (20% and 60%) and very low (40% and 60%), respectively. None of the students indicated that they are neutral as to whether the COVID-19 vaccine misinformation on the selected social media platforms, promote vaccine hesitancy among them or not. While the researcher accepted the responses of the students who strongly agreed, agreed, disagreed and strongly disagreed that the extent to which COVID-19 vaccine misinformation on the selected social media platforms promote vaccine hesitancy among them are very high and high because the Weighted Mean Scores (WMS) of their responses are more than 2.5, respectively, she rejected the responses of the students who strongly agreed, agreed, disagreed and strongly disagreed that the extent to which COVID-19 vaccine misinformation on the selected social media platforms promote vaccine hesitancy among them are low and very low because the Weighted Mean Scores (WMS) of their responses are less than 2.5, respectively.

Research Question 5: Which social media platform conveys COVID-19 vaccine misinformation?
Table 13: UNIZIK students' response on the social media platform that conveys COVID-19 vaccine misinformation

S/N	ITEMS	SA 5	A 4	N 3	D 2	SD 1	TOTAL	$\bar{X}$	DECISION RULE
52	Facebook	37.4 89 445	15.1 36 144	3.4 8 24	23.5 56 112	20.6 49 49	100 238 774	3.3	Accepted
53	WhatsApp	28.9 69 345	17.2 41 164	7.9 19 57	35.7 85 170	10 24 24	100 238 760	3.2	Accepted
54	X	23.9 57 285	8.8 21 84	20.2 48 144	21.8 52 104	25.2 60 60	100 238 677	2.8	Accepted
55	Instagram	21.4 51 225	23.5 56 224	13.4 32 96	19.7 47 94	21.8 52 52	100 238 691	2.9	Accepted
56	YouTube	30.3 72 360	10.5 25 100	6.3 15 45	28.9 69 138	23.9 57 57	100 238 700	2.9	Accepted
57	TikTok	27.7 66 330	7.6 18 72	1.3 3 9	29.4 70 140	34 81 81	100 238 632	2.7	Accepted

Source: Researcher's Field Survey, 2023

From the responses above, UNIZIK students indicated that Facebook is the social media platform that conveys COVID-19 vaccine misinformation. This is because 37.4% of the students strongly agree that Facebook is the social media platform that conveys COVID-19 vaccine misinformation. This is more than the percentage of students that indicated that they agree that Facebook is the social media platform that conveys COVID-19 vaccine misinformation (15.1%) and the percentages of those that indicated that they strongly agree and agree that it is WhatsApp (28.9% and 17.2%), X (23.9% and 8.8%), Instagram (21.4% and 23.5%), YouTube (30.3% and 10.5%) and TikTok (27.7% and 7.6%), respectively. The percentage of students that strongly agree that Facebook is the social media platform that conveys COVID-19 vaccine misinformation, is also more than the percentages of students that disagree and strongly disagree that it is Facebook (23.5% and 20.6%), WhatsApp (35.7% and 10%), X (21.8% and 25.2%), Instagram (19.7% and 21.8%), YouTube (28.9% and 23.9%) and TikTok (29.4% and 34%), respectively and equally more than the percentages of students that are neutral as to whether it is Facebook (3.4%), WhatsApp (7.9%), X (20.2%), Instagram (13.4%), YouTube (6.3%) and TikTok (1.3%) or not, respectively. The researcher accepted the responses of the students who strongly agreed, agreed, disagreed and strongly disagreed that Facebook, WhatsApp, Twitter, Instagram, YouTube and TikTok are the social media platforms that convey COVID-19 vaccine misinformation as well as the responses of those that are neutral as to whether or not Facebook, WhatsApp, Twitter, Instagram, YouTube or TikTok is the social media platform that conveys COVID-19 vaccine misinformation because the Weighted Mean Scores (WMS) of their responses are more than 2.5, respectively.

Table 14: COOU students' response on the social media platform that conveys COVID-19 vaccine misinformation

S/N	ITEMS	SA 5	A 4	N 3	D 2	SD 1	TOTAL	$\bar{X}$	DECISION RULE
58	Facebook	37 57 285	12.3 19 76	3.9 6 18	34.4 53 106	12.3 19 19	100 154 504	3.3	Accepted
59	WhatsApp	31.8 49 245	17.5 27 108	8.4 13 39	13.6 21 42	28.6 44 44	100 154 478	3.1	Accepted
60	X	24.7 38 190	20.1 31 124	18.8 29 87	21.4 33 66	14.9 23 23	100 154 490	3.2	Accepted
61	Instagram	20.8 32 160	15.6 24 96	12.3 19 57	31.2 48 96	20.1 31 31	100 154 440	2.9	Accepted
62	YouTube	25.9 40 200	5.2 8 32	6.5 10 30	35.7 55 110	26.6 41 41	100 154 413	2.7	Accepted
63	TikTok	14.3 22 110	22.7 35 140	15.6 24 72	23.4 36 72	24 37 37	100 154 431	2.8	Accepted

Source: Researcher's Field Survey, 2023

From the responses above, COOU students indicated that Facebook is the social media platform that conveys COVID-19 vaccine misinformation. This is because 37% of the students strongly agree that Facebook is the social media platform that conveys COVID-19 vaccine misinformation. This is more than the percentage of students that indicated that they agree that Facebook is the social media platform that conveys COVID-19 vaccine misinformation (12.3%) and the percentages of those that indicated that they strongly agree and agree that it is WhatsApp (31.8% and 17.5%), X (24.7% and 20.1%), Instagram (20.8% and 15.6%), YouTube (25.9% and 5.2%) and TikTok (14.3% and 22.7%), respectively. The percentage of students that strongly agree that Facebook is the social media platform that conveys COVID-19 vaccine misinformation, is also more than the percentages of students that disagree and strongly disagree that it is Facebook (34.4% and 12.3%), WhatsApp (13.6% and 28.6%), X (21.4% and 14.9%), Instagram (31.2% and 20.1%), YouTube (35.7% and 26.6%) and TikTok (23.4% and 24%), respectively and equally more than the percentages of students that are neutral as to whether it is Facebook (3.9%), WhatsApp (8.4%), X (18.8%), Instagram (12.3%), YouTube (6.5%) and TikTok (15.6%) or not, respectively. The researcher accepted the responses of the students who strongly agreed, agreed, disagreed and strongly disagreed that Facebook, WhatsApp, Twitter, Instagram, YouTube and TikTok are the social media platforms that convey COVID-19 vaccine misinformation as well as the responses of those that are neutral as to whether or not Facebook, WhatsApp, Twitter, Instagram, YouTube or TikTok is the social media platform that conveys COVID-19 vaccine misinformation because the Weighted Mean Scores (WMS) of their responses are more than 2.5, respectively.

Table 15: Paul University students' response on the social media platform that conveys COVID-19 vaccine misinformation

S/N	ITEMS	SA 5	A 4	N 3	D 2	SD 1	TOTAL	$\bar{X}$	DECISION RULE
64	Facebook	80 4 20	0 0 0	0 0 0	20 1 2	0 0 0	100 5 22	4.4	Accepted
65	WhatsApp	60 3 15	20 1 4	0 0 0	0 0 0	20 1 1	100 5 20	4	Accepted
66	X	20 1 5	60 3 12	0 0 0	20 1 1	0 0 0	100 5 18	3.6	Accepted
67	Instagram	60 3 15	0 0 0	20 1 3	0 0 0	20 1 1	100 5 19	3.8	Accepted
68	YouTube	20 1 5	40 2 8	0 0 0	20 1 2	20 1 1	100 5 16	3.2	Accepted
69	TikTok	40 2 10	40 2 8	20 1 3	0 0 0	0 0 0	100 5 21	4.2	Accepted

Source: Researcher's Field Survey, 2023

From the responses above, Paul University students indicated that Facebook is the social media platform that conveys COVID-19 vaccine misinformation. This is because 80% of the students strongly agree that Facebook is the social media platform that conveys COVID-19 vaccine misinformation. This is more than the percentage of students that indicated that they agree that Facebook is the social media platform that conveys COVID-19 vaccine misinformation (0%) and the percentages of those that indicated that they strongly agree and agree that it is WhatsApp (60% and 20%), X (20% and 60%), Instagram (60% and 0%), YouTube (20% and 40%) and TikTok (40% and 40%), respectively. The percentage of students that strongly agree that Facebook is the social media platform that conveys COVID-19 vaccine misinformation, is also more than the percentages of students that disagree and strongly disagree that it is Facebook (20% and 0%), WhatsApp (0% and 20%), X (20% and 0%), Instagram (0% and 20%), YouTube (20% and 20%) and TikTok (0% and 0%), respectively and equally more than the percentages of students that are neutral as to whether it is Instagram (20%) and TikTok (20%) or not, respectively. None of the students, however, indicated that they are neutral as to whether it is Facebook, WhatsApp, Twitter and YouTube or not, respectively. The researcher accepted the responses of the students who strongly agreed, agreed, disagreed and strongly disagreed that Facebook, WhatsApp, Twitter, Instagram, YouTube and TikTok are the social media platforms that convey COVID-19 vaccine misinformation as well as the responses of those that are neutral as to whether or not Facebook, WhatsApp, Twitter, Instagram, YouTube or TikTok is the social media platform that conveys COVID-19 vaccine misinformation because the Weighted Mean Scores (WMS) of their responses are more than 2.5, respectively.

Research Question 6: What are the effects of COVID-19 vaccine misinformation on youths in Anambra State?

Table 16: The effect of COVID-19 vaccine misinformation on UNIZIK students

S/N	ITEMS	SA 5	A 4	N 3	D 2	SD 1	TOTAL	$\bar{X}$	DECISION RULE
70	COVID-19 vaccine misinformation increases my fear of COVID-19 and COVID-19 vaccines	30.3 72 360	10.9 26 104	13 31 93	36.9 88 176	8.8 21 21	100 238 754	3.2	Accepted
71	It makes me vaccine hesitant	38.2 91 455	16.8 40 160	7.6 18 54	11.3 27 54	26 62 62	100 238 785	3.3	Accepted
72	It makes me doubt the good intentions of COVID-19 vaccine manufacturers and COVID-19 vaccination advocates	20.6 49 245	22.7 54 216	8.4 20 60	31.9 76 152	16.4 39 39	100 238 712	2.10	Accepted
73	It increases my desire to take COVID-19 vaccine	11.8 28 140	5.5 13 52	11.8 28 84	35.3 84 168	35.7 85 85	100 238 529	2.2	Rejected
74	It shapes my opinions on the efficacy and otherwise of COVID-19 vaccine	27.3 65 325	8.8 21 84	5 12 36	21 50 100	37.8 90 90	100 238 635	2.7	Accepted

Source: Researcher's Field Survey, 2023

From the responses above, the effect which COVID-19 vaccine misinformation has on UNIZIK students is that it makes them vaccine hesitant. This is because 38.2% of the students strongly agree that COVID-19 vaccine misinformation makes them vaccine hesitant. This is more than the percentage of students that indicated that they agree that COVID-19 vaccine misinformation makes them vaccine hesitant (16.8%) and the percentages of those that indicated that they strongly agree and agree that COVID-19 vaccine misinformation increases their fear of COVID-19 and COVID-19 vaccines (30.3% and 10.9%), makes them doubt the good intentions of COVID-19 vaccine manufacturers and COVID-19 vaccination advocates (20.6% and 22.7%), increases their desire to take COVID-19 vaccine (11.8% and 5.5%) and shape their opinions on the efficacy and otherwise of COVID-19 vaccine (27.3% and 8.8%), respectively. The percentage of students that strongly agree that COVID-19 vaccine misinformation makes them vaccine hesitant, is also more than the percentages of students that disagree and strongly disagree that the misinformation increases their fear of COVID-19 and COVID-19 vaccines (36.9% and 8.8%), makes them

vaccine hesitant (11.3% and 26%), makes them doubt the good intentions of COVID-19 vaccine manufacturers and COVID-19 vaccination advocates (31.9% and 16.4%), increases their desire to take COVID-19 vaccine (35.3% and 35.7%), and shape their opinions on the efficacy and otherwise of COVID-19 vaccine (21% and 37.8%) respectively and equally more than the percentages of students that are neutral as to whether COVID-19 vaccine misinformation on the selected social media platforms increases their fear of COVID-19 and COVID-19 vaccines (13%), makes them vaccine hesitant (7.6%), makes them doubt the good intentions of COVID-19 vaccine manufacturers and COVID-19 vaccination advocates (8.4%), increases their desire to take COVID-19 vaccine (11.8%) and shapes their opinions on the efficacy and otherwise of COVID-19 vaccine (5%) or not, respectively. While the researcher accepted the responses of the students who strongly agreed, agreed, disagreed and strongly disagreed that COVID-19 vaccine misinformation increases their fear of COVID-19 and COVID-19 vaccines, makes them vaccine hesitant, makes them doubt the good intentions of COVID-19 manufacturers and COVID-19 vaccination advocates and shapes their opinions on the efficacy and otherwise of COVID-19 vaccine as well as the responses of those that are neutral as to whether the COVID-19 vaccine misinformation on the selected social media platforms increases their fear of COVID-19 and COVID-19 vaccines, makes them vaccine hesitant, makes them doubt the good intentions of COVID-19 manufacturers and COVID-19 vaccination advocates and shapes their opinions on the efficacy and otherwise of COVID-19 vaccine or not because the Weighted Mean Scores (WMS) of their responses are more than 2.5, respectively, she rejected the responses of students who strongly agreed, agreed, disagreed and strongly disagreed that COVID-19 vaccine misinformation on the selected social media platforms increases their desire to take COVID-19 vaccine as well as the responses of those that are neutral as to whether the COVID-19 vaccine misinformation on the selected social media platforms increases their desire to take COVID-19 vaccine or not because the Weighted Mean Score (WMS) of their responses is less than 2.5.

Table 17: The effect of COVID-19 vaccine misinformation on COOU students

S/N	ITEMS	SA 5	A 4	N 3	D 2	SD 1	TOTAL	$\bar{X}$	DECISION RULE
75	COVID-19 vaccine misinformation increases my fear of COVID-19 and COVID-19 vaccines	33.1 51 255	29.2 45 180	2.6 4 12	21.4 33 66	13.6 21 21	100 154 534	3.5	Accepted
76	It makes me vaccine hesitant	43.5 67 335	18.8 29 116	9 14 42	11 17 34	17.5 27 27	100 154 554	3.6	Accepted
77	It makes me doubt the good intentions of COVID-19 vaccine manufacturers and COVID-19 vaccination advocates	32.5 50 250	10.4 16 64	4.5 7 21	29.9 46 92	22.7 35 35	100 154 462	3	Accepted
78	It increases my desire to take COVID-19 vaccine	12.3 19 95	1.3 2 8	19.5 30 90	39.6 61 122	27.3 42 42	100 154 357	2.3	Rejected
79	It shapes my opinions on the efficacy and otherwise of COVID-19 vaccine	25.3 39 195	12.9 20 80	7.1 11 33	20.1 31 62	34.4 53 53	100 154 423	2.7	Accepted

Source: Researcher's Field Survey, 2023

From the responses above, the effect which COVID-19 vaccine misinformation has on COOU students is that it makes them vaccine hesitant. This is because 43.5% of the students strongly agree that COVID-19 vaccine misinformation makes them vaccine hesitant. This is more than the percentage of students that indicated that they agree that COVID-19 vaccine misinformation makes them vaccine hesitant (18.8%) and the percentages of those that indicated that they strongly agree and agree that COVID-19 vaccine misinformation increases their fear of COVID-19 and COVID-19 vaccines (33.1% and 29.2%), makes them doubt the good intentions of COVID-19 vaccine manufacturers and COVID-19 vaccination advocates (32.5% and 10.4%), increases their desire to take COVID-19 vaccine (12.3% and 1.3%) and shape their opinions on the efficacy and otherwise of COVID-19 vaccine (25.3% and 12.9%), respectively. The percentage of students that strongly agree that COVID-19 vaccine misinformation makes them vaccine hesitant, is also more than the percentages of students that disagree and strongly disagree that the misinformation increases their fear of COVID-19 and COVID-19 vaccines (21.4% and 13.6%), makes them vaccine hesitant (11% and 17.5%), makes them doubt the good intentions of COVID-19 vaccine manufacturers and COVID-19 vaccination advocates (29.9% and 22.7%), increases their desire to take COVID-19 vaccine (39.6% and 27.3%), and shape their opinions on the efficacy and otherwise of COVID-19 vaccine (20.1% and 34.4%) respectively and equally more than the percentages of students that are neutral as to whether COVID-19 vaccine misinformation on the selected social media platforms increases their fear of COVID-19 and COVID-19 vaccines (2.6%), makes them vaccine hesitant (9%), makes them doubt the good intentions of COVID-19 vaccine manufacturers and COVID-19 vaccination advocates (4.5%), increases their desire to take COVID-19 vaccine (19.5%) and shapes their opinions on the efficacy and otherwise of COVID-19 vaccine (7.1%) or not, respectively. While the researcher accepted the responses of the students who strongly agreed, agreed, disagreed and strongly disagreed that COVID-19 vaccine misinformation increases their fear of COVID-19 and COVID-19 vaccines, makes them vaccine hesitant, makes them doubt the good intentions of COVID-19 manufacturers and COVID-19 vaccination advocates and shapes their opinions on the efficacy and otherwise of COVID-19 vaccine as well as the responses of those that are neutral as to whether the COVID-19 vaccine misinformation on the selected social media platforms increases their fear of COVID-19 and COVID-19 vaccines, makes them vaccine hesitant, makes them doubt the good intentions of COVID-19 manufacturers and COVID-19 vaccination advocates and shapes their opinions on the efficacy and otherwise of COVID-19 vaccine or not because the Weighted Mean Scores (WMS) of their responses are more than 2.5, respectively, she rejected the responses of students who strongly agreed, agreed, disagreed and strongly disagreed that COVID-19 vaccine misinformation on the selected social media platforms increases their desire to take COVID-19 vaccine as well as the responses of those that are neutral as to whether the COVID-19 vaccine misinformation on the selected social media platforms increases their desire to take COVID-19 vaccine or not because the Weighted Mean Score (WMS) of their responses is less than 2.5.

Table 18: The effect of COVID-19 vaccine misinformation on Paul University students

S/N	ITEMS	SA 5	A 4	N 3	D 2	SD 1	TOTAL	$\bar{X}$	DECISION RULE
75	COVID-19 vaccine misinformation increases my fear of COVID-19 and COVID-19 vaccines	60 3 15	20 1 4	0 0 0	20 1 2	0 0 0	100 5 21	4.2	Accepted
76	It makes me vaccine hesitant	100 5 25	0 0 0	0 0 0	0 0 0	0 0 0	100 5 25	5	Accepted
77	It makes me doubt the good intentions of COVID-19 vaccine manufacturers and COVID-19 vaccination advocates	40 2 10	40 2 8	0 0 0	20 1 2	0 0 0	100 5 20	4	Accepted
78	It increases my desire to take COVID-19 vaccine	0 0 0	0 0 0	0 0 0	40 2 4	60 3 3	100 5 7	1.4	Rejected
79	It shapes my opinions on the efficacy and otherwise of COVID-19 vaccine	20 1 5	80 4 16	0 0 0	0 0 0	0 0 0	100 5 21	4.2	Accepted

Source: Researcher's Field Survey, 2023

From the responses above, the effect which COVID-19 vaccine misinformation has on Paul University students is that it makes them vaccine hesitant. This is because 100% of the students (all the students) strongly agree that COVID-19 vaccine misinformation makes them vaccine hesitant. This is as none of the students indicated that they agree that COVID-19 vaccine misinformation makes them vaccine hesitant while the percentage of those that strongly agree that it makes them vaccine hesitant, is more than the percentages of those that indicated that they strongly agree and agree that COVID-19 vaccine misinformation increases their fear of COVID-19 and COVID-19 vaccines (60% and 20%), makes them doubt the good intentions of COVID-19 vaccine manufacturers and COVID-19 vaccination advocates (40% and 40%), increases their desire to take COVID-19 vaccine (0% and 0%) and shape their opinions on the efficacy and otherwise of COVID-19 vaccine (20% and 80%), respectively. The percentage of students that strongly agree that COVID-19 vaccine misinformation makes them vaccine hesitant, is also more than the percentages of students that disagree and strongly disagree that the misinformation increases their fear of COVID-19 and COVID-19 vaccines (20% and 0%), makes them vaccine hesitant (0% and 0%), makes them doubt the good intentions of COVID-19 vaccine manufacturers and COVID-19 vaccination advocates (20% and 0%), increases their desire to take COVID-19 vaccine (40% and 60%), and shape their opinions on the efficacy and otherwise of COVID-19 vaccine (0% and 0%) respectively. None of the students indicated that they are neutral as to whether or not COVID-19 vaccine misinformation increases their fear of COVID-19 and COVID-19 vaccines, makes them vaccine hesitant, makes them doubt the good intentions of COVID-19 vaccine manufacturers and COVID-19 vaccination advocates, increases their desire to take COVID-19 vaccine and shapes their opinions on the efficacy and otherwise of COVID-19 vaccine. While the researcher accepted the responses of the students who strongly agreed, agreed, disagreed and strongly disagreed that COVID-19 vaccine misinformation increases their fear of COVID-19 and COVID-19 vaccines, makes them

vaccine hesitant, makes them doubt the good intentions of COVID-19 manufacturers and COVID-19 vaccination advocates and shapes their opinions on the efficacy and otherwise of COVID-19 vaccine because the Weighted Mean Scores (WMS) of their responses are more than 2.5, respectively, she rejected the responses of students who strongly agreed, agreed, disagreed and strongly disagreed that COVID-19 vaccine misinformation on the selected social media platforms increases their desire to take COVID-19 vaccine because the Weighted Mean Score (WMS) of their responses is less than 2.5.

DISCUSSION OF FINDINGS

From this study, the researcher found that Nnamdi Azikiwe University (UNIZIK), Chukwuemeka Odumegwu Ojukwu University (COOU) and Paul University students' level of exposure to COVID-19 vaccine misinformation is very high. This shows that COVID-19 vaccine misinformation exists and is out there in different media platforms while the very high exposure of the students to it may be connected to their desire and search for information on COVID-19 and COVID-19 vaccines in the media especially since the COVID-19 lockdown that was declared during the pandemic in the country left the students with almost nothing to do other than being online for one reason or another. Confirming the role of this desire and the media in this very high exposure, Gupta and Sinha (2010) cited in Agim, Oraekwe, Chivuzo and Emenari (2020) opine that there is a greater demand and need for accurate, relevant, rapid and impartial public health information by people, while a growing reliance on mass media can facilitate this means for a veritable source of information. In other words, the demand increases and becomes greater when people are in desperate need of information that will help them fight any disease that is threatening their health. Since COVID-19 posed as a threat to the extent that it was declared a pandemic by the World Health Organization, the demand for information was in full glare during the pandemic period which increased the chances of people being exposed to COVID-19 vaccine misinformation.

The researcher also found that the perception of COVID-19 vaccine misinformation on the selected social media platforms among the students is that it leads to vaccine hesitancy. This shows that the students are not passive social media users. In agreement, Gelms (2012, p. 266) states that "as the number of social media users has increased, the type of users has also changed. If the students were not smartphone users or users of the selected social media platforms (Facebook and WhatsApp) as at the time this study was carried out or are passive users who consume everything they see on social media without paying attention to their perception of those things to know whether to consume them or not, they would not have been exposed to the misinformation let alone have their perception of the misinformation. Having stated this, it is encouraging that the students see the negative thing that the misinformation can do and is doing. While it is right to see that the misinformation leads to vaccine hesitancy, their decision to take or not to take the COVID-19 vaccines should not be based on the misinformation.

Another of the researcher's finding is that the students only believe COVID-19 vaccine misinformation on the selected social media platforms sometimes. While the students have every right to believe whatever they want, they should always believe facts and accurate information as believing the wrong information can make them take the wrong decisions that will not help them in any way.

From this same study, the researcher found that COVID-19 vaccine misinformation highly promotes vaccine hesitancy among the students. Since the misinformation is coming from the media, it gives credence to the position of MacDonald, Eskola, Liang, Chaudhuri, Dube and Gellin (2015) who stated that one of the drivers of vaccine hesitancy include disinformation from communication and media. It will therefore not be wrong for social media owners and media practitioners to always offer their target audience the best of service by approving and disseminating factual and scientifically-proven health information in order to drastically reduce the chances of people consuming any form of misinformation in the media.

It is from this study that the researcher equally found that the students believe that Facebook is the social media platform that conveys COVID-19 vaccine misinformation. While this could be because of the number of COVID-19 vaccine misinformation which they were exposed to on the platform during the pandemic, it is an indictment of the owner of Facebook who allowed such misinformation to be posted and spread on the platform. It calls the ability of the owner and his team to stop the spread of misinformation on the platform

into question and leaves one wondering whether they prioritize profit over the health of the well-meaning users of the platform. The owner of Facebook must understand that it is only the living and the healthy that can effectively use the platform and should therefore take immediate and necessary measures to protect the unsuspecting users of the platform from being exposed to COVID-19 vaccine misinformation on the platform.

Lastly, the researcher found that while COVID-19 vaccine misinformation increases the students' fear of COVID-19 and COVID-19 vaccines, makes them doubt the good intentions of COVID-19 vaccine manufacturers and vaccination advocates and shapes their opinions on the efficacy and otherwise of COVID-19 vaccines to some extent, they indicated that it makes them vaccine hesitant and ranked it above the aforementioned effects that the misinformation has and is having on them. While the Federal and Anambra State Government deserves commendation for the positive measures they took to curb the spread of the dreaded COVID-19, this finding is a call for them to do more to gain the trust of Anambra youths and make them see the need to work with them to drastically minimize the effects that COVID-19 vaccine misinformation on the selected social media platforms is having on them.

CONCLUSION

Based on the findings of this study, the following conclusions were made.

1. Nnamdi Azikiwe University (UNIZIK), Chukwuemeka Odumegwu Ojukwu University (COOU) and Paul University students' level of exposure to COVID-19 vaccine misinformation is very high.
2. The perception of COVID-19 vaccine misinformation on the selected social media platforms among the students is that it leads to vaccine hesitancy.
3. The students only believe COVID-19 vaccine misinformation on the selected social media platforms sometimes.
4. COVID-19 vaccine misinformation highly promotes vaccine hesitancy among the students.
5. The students believe that Facebook is the social media platform that conveys COVID-19 vaccine misinformation.
6. COVID-19 vaccine misinformation increases the students' fear of COVID-19 and COVID-19 vaccines, makes them doubt the good intentions of COVID-19 vaccine manufacturers and vaccination advocates and shapes their opinions on the efficacy and otherwise of COVID-19 vaccines while the effect that it makes them vaccine hesitant ranks top among the aforementioned effects that the misinformation is having on them.

RECOMMENDATIONS

Based on the findings of this study, the researcher recommended the following.

1. Social media owners should always prevent social media users from posting false information on social media.
2. Anambra youths should always discourage people from posting any form of misinformation on social media.
3. Anambra youths should always report any COVID-19 vaccine misinformation they come across on social media to the appropriate authorities for it to be taken down.
4. Anambra youths should stop taking actions that will negatively affect their health based on any scientifically false information posted on social media.
5. The Federal and Anambra State Governments should go into a partnership with social media owners and always ensure that they take the task of taking down every form of COVID-19 vaccine misinformation posted on social media, seriously.
6. Future studies should be carried out on the perception of vaccine hesitancy and the social media misinformation on COVID-19 vaccines among other residents of Anambra State and residents of other states.

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