

Media Literacy and Internet Usage in Baby Care: Generation Y Mothers

ABSTRACT

Objective: This study was conducted to determine media literacy and internet usage related to health and baby care issues.

Methods: This was a cross-sectional descriptive study. It was conducted on 175 Generation Y mothers (born between 1981 and 1995). The data were collected via the Media Literacy Level Determination Scale in five Facebook groups via online questionnaires. Mann–Whitney U and Kruskal–Wallis tests were used for data analysis.

Results: The mean age of the mothers was 30 years. Mothers used social media sites (30.3%) on the internet the most. More than half of the mothers preferred health institutions (33.8%) or scientific websites (32.5%) for obtaining information. Mothers frequently investigated issues related to disease (12.6%) and infant–child nutrition (10.9%). The mean score of the scale was 65.7 ± 11.6 . Media literacy, education level and internet usage year were not statistically significant ($P > .05$).

Conclusion: The media literacy level of the mothers was medium. Media literacy levels are higher among mothers who have graduated from university and have used the internet for more than five years. Nurses should consider that generation Y mothers can easily access information via social media.

Keywords: Generation Y, Media literacy, Health information, New media, Social media

INTRODUCTION

Social communication is changing, especially with new media, the internet, social media networks, and blogs. People closely follow health information in new media.^{1,2} People not only read health information via social media but also participate in the health communication process by writing and sharing health-related ideas and practices. This situation led to an extensive deal of health communication in health for all by the year 2000. The use of media has increased and has become an indispensable part of life.^{1,3-5}

The media usage rate varies according to certain age groups and generations.² The generations were named X, Y and Z because of changes in technology after the second World War. Generation X (1965-1980) meets technology; generation Y (1981-1995) grows with technology; and Generation Z (1996-...) has been named the group living together with technology.^{1,5} Generation Y constitutes an average of 1.8 billion people worldwide.⁶ As of 2017, Generation Y people included the youngest 18 and the oldest 37 years old. Covering the childhood years of the 1980s and the youth years of the 1990s, generation Y grew up with multichannel televisions and was adapted by the internet.⁷ The most distinctive feature of generation Y is its passion for technology and the internet. Generation Y members, also known as the media generation, are actively using social media networks that exceed two billion in the world.^{1,5,7} Generation Y generally uses the media to obtain short-term information to address health concerns. Additionally, the mental health of Generation Y mothers (95%) is positively impacted by social media.^{8,9} Social media usage differs between genders as well as across generations. There were fewer women than men in the three groups of a study.^{10,11} Mothers (80%) reported that their social media usage was almost every day.⁸ According to a cohort study, women use social media within an hour of birth, and they also use a phone while feeding their baby.¹²

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In the literature, new media have gained importance in health promotion and protection among mothers. In a study conducted by Arabacı et al., 8.5% of mothers actively use the media as an information source about their babies' and children's care.¹³ Generation Y mothers can quickly obtain information about their own health and that of their children on the internet. The information obtained from the internet, according to the sites used, can cause undesirable consequences for mothers' health.^{9,14} Research has shown that when mothers obtain information from the right website, baby health is positively affected by the internet about breastfeeding and vaccination issues.^{15,16} However, according to another study, the communication of mothers in forums, blogs, and Facebook groups expresses negative emotions more than positive emotions. Additionally, the research suggests media literacy courses for mothers to use these sites effectively.¹⁷

To reduce the adverse effects of media on health, researchers have proposed many strategies, such as editing the content of media and restricting children's media usage.^{7,4,18,19} Media literacy is a process of individuals' exposure to the media and understanding of economic, political, and technological dimensions in the production and transfer of messages they encounter.²⁰ Media-literate individuals can evaluate media messages from specific criteria and a critical perspective, and they can protect themselves from misinformation.²¹ Because of uncontrolled fake information, people can refuse medical nursing care or treatment practices.¹⁵ People can easily access different speciality knowledge and professional resources so that media can have unpredictable consequences, such as anxiety.²² Additionally, many mothers may prefer media, which they can access more quickly, instead of receiving information from related healthcare professionals. When information pollution on the internet is taken into account, incorrect and incomplete information both affect the health of mothers, infants and children.⁹ According to a systematic review by Tang et al., technological information and communication are effective in improving breastfeeding in nursing interventions.¹⁶ Nurses will be able to use the counseling and education process more effectively by taking into account all these features of the generation Y mother, and they can also raise awareness of mothers' access to correct information. In the literature, there are a limited number of studies on generating differences in mothers' media literacy and obtaining health information from social networks.²³ Additionally, there is limited evidence to guide nursing practices regarding generation after the emergence of the internet.²⁴ This research was carried out to determine media literacy and social media network usage in health issues of generation Y mothers born between 1981 and 1995 (23–36 years old in 2017).

METHODS

Study Design and Location

This study was a cross-sectional descriptive study that took three months. This study was conducted in the years when the use of social media started to intensify (15 Nisan 2017-15 Temmuz 2017). The survey was conducted in five Facebook groups via online questionnaires. The Facebook group names include Baby Care (Bebek Bakımı), Everything for Maternity and Baby Care (Anne Ve Bebeğe dair Ne Varsa), Mother Goose (Anne Kaz), Notes from Mother Midwife (Anne Ebe'den Notlar), and Mother and Baby (Anne ve Bebek Sayfasi). Researchers contacted admins in groups and allowed them to share questionnaires. The reasons for the choice of these groups are as follows: Group members are mothers. They are health-related to mother and child care. Their aims are similar, promoting healthy growth in infancy. Additionally, mothers share their experiences.

Sample Description

In the selection of the mothers who participated in the study, a purposeful convenience sampling method was used for the mothers who met the inclusion criteria. This sampling method can be used in a cross-sectional study design. Researchers sent a message to all groups with the keyword 'mother' in their social network. Researchers included those for whom we could obtain written consent from the group administrators. These groups were those for which written consent was provided in the selection of the groups. The research universe comprises 1332 mothers, who are members of five Facebook groups. Name of those groups: Baby Care (N=124), Everything for Maternity and Baby Care (N=592), Mother Goose (N= 401), I Notes from Mother Midwife (N=114), Mother and Baby (N=101).

Sample selection was performed via a purposive sampling method. This study was conducted with 175 generation Y mothers. The inclusion criterion was as follows: The participation of mothers was voluntary, and the researchers were contacted via email. The researcher provided scale score information for each mother after they responded to the questionnaire by a researcher. Since generation Y mothers were included in this study, the birth interval was determined. Mothers born between 1981 and 1995 were invited to participate in the study. Mothers who did not meet the inclusion criteria were considered among the exclusion criteria.

Ethical Statements

The committee was consulted with the Gazi University Ethics Commission (Date: 11.04.2017 Code: 2017-147) to evaluate the ethical suitability of the study. We obtained written approval from the Admin of each Facebook group. One-to-one contact was made with the mothers participating in the study, and the media

literacy levels of the mothers were notified of the mothers via e-mail. The content of the online Google form included a written consent form and detailed information about the research.

Data Collection

An online/electronic questionnaire was used to collect the data. The data were collected with 'online questionnaire forms' created with Google Form support. The participants who wanted feedback from us provided their e-mail addresses. We informed them about the results at the end of the research. The data collection form includes two parts. The first part comprises 12 questions prepared by researchers and aimed at determining internet usage habits. Additionally, age, social media usage information and child care information are included in the first part. The second part comprises a 17-item media literacy level determination scale.

The Media Literacy Level Determination Scale was developed by Karaman and Karatas. The scale, which consists of 17 items, is a five-point Likert type.²¹ The scale items are graded as 1=Never, 2=Rarely, 3=Sometimes, 4=Often and 5=Always. The first dimension's name is "knowledge" and includes the 2nd, 3rd, 4th, 5th, 6th, 9th and 11th items. The Cronbach's alpha of the knowledge dimension was found to be .721. The second dimension's name is "Analyze and React" and includes the 7th, 8th, 12th, 13th, 14th and 15th items. The Cronbach's alpha of the analyze and react dimension was found to be .705. The third dimension's name is "Judging, Viewing Implicit Messages" and includes the 1st, 10th, 16th and 17th items. The total Cronbach's alpha value of the scale was found to be .840.²⁵ In this study, the coefficient alpha value was identified as .929. The scale does not have a cutoff point, but when interpreting it, we referred to the levels in similar studies.

Statistical Analysis

The data were obtained via SPSS version 20.0 (IBM SPSS Corp., Armonk, NY, USA). Among the descriptive statistics, the number, percentage and median distributions were used to analyze the results. Nonparametric tests were used to compare media literacy scale medians and participant characteristics; the Mann-Whitney U and Kruskal-Wallis tests were used to compare the median scores. The Mann-Whitney U test was used for pairwise comparisons. The Kruskal-Wallis test was used for three comparisons. Additionally, Tamhane was selected for the post hoc tests.

In cases where the significance value is $P < .05$ to determine the direction of the between-group binary comparison of the groups with Tamhane's T2 test, one of the post hoc tests was performed for the comparison groups with unequal variances.

RESULTS

According to the data in Table 1, the mothers' mean age in this study was 30.3 ± 4.6 years. A total of 50.9% of mothers had a university degree or above. A total of 94.3% of the mothers were married; almost half of them had adequate family affluence perceptions. The majority (90.3%) of the participants had a nuclear family. A total of 86.3% of the mothers had been using the internet for more than five years, and 82.3% of them had connected to the internet via telephone. More than half of the mothers (51.4%) used the internet for 1–3 hours daily. Social media sites (59.4%) are used on the internet the most. Facebook was used more than the other options were used (27.7%). A total of 27.9% of mothers use the internet to communicate. A total of 27.0% of the mothers stated that they use the internet to learn new information, and 60% of them believe that this information is reliable. A total of 36.4% of mothers felt sad or restricted when they did not use the internet (Table 1).

Table 1. Demographic characteristics and internet usage habits of the mothers (N=175)

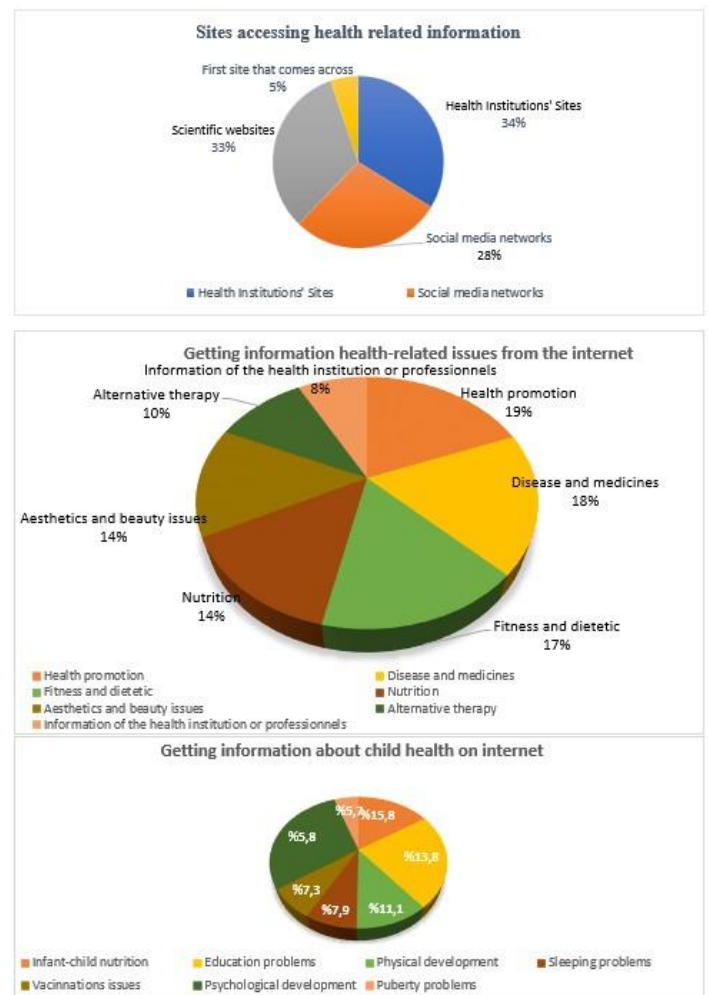
Demographic characteristics, internet usage habits	mean \pm sd	n	%
Mean age	30.3 \pm 4.6		
Status of education			
Primary and secondary school graduate		23	13.1
High school graduate		63	36.0
University and above graduate		89	50.9
Marital status			
Married		165	94.3
Unmarried		10	5.7
Family affluence perception			
Adequate		91	52.0
Partly adequate		52	29.7
Inadequate		32	18.3
Family type			
Nuclear family		158	90.3
Extended family		17	9.7
Internet usage tool			
Telephone		144	82.3
Computer		31	17.7
Internet usage year			
2 years and less		7	4.0
3-4 years		17	9.7
5 years and more		151	86.3
Daily internet usage hour			
Less than 1 hour		18	10.3
1-3 hours		90	51.4
More than 3 hours		67	38.3

Sites used on the internet*		
Web 2.0 (Facebook, WhatsApp, Instagram, blogs, phone applications...)	298	59.4
News sites	96	19.0
Shopping sites	80	15.8
Others	21	5.8
Web 2.0 preference, *		
Facebook	164	21.8
WhatsApp	159	21.1
Instagram	130	17.2
YouTube	94	12.5
Twitter	54	7.1
Google+	53	7.0
Others	98	13.3
The aim of internet use*		
Communication	145	27.9
To be aware of the developments related to daily life	143	27.3
Learning something new information	141	27.0
Spending time	93	17.8
Finding the information they receive online as reliable.		
Yes	105	60.0
No	70	40.0
Emotional state when unable to access the Internet		
Does not feel any change in emotional state	113	64.6
Feeling restrained and unhappy	62	35.4

* Mothers could select more than one answer

For health-related issues, more than half of the mothers preferred reliable sites to obtain information: health institutions (34%) and scientific websites (33%). However, 28% of mothers accessed social media networks, and 5% of mothers accessed the first site that came across them to obtain information on health-related issues. These health-related issues are health promotion (19%), disease and medicines (18%), fitness and diet (17%), nutrition (14%) and aesthetics and beauty issues (14%). With respect to baby care-related issues, mothers generally obtain information about infant-child nutrition (15.8%), education problems (13.8%), physical development (11.1%), sleeping problems (7.9%) and vaccination issues (7.3%) (Figure 1).

Media Literacy and the Internet Usage about Baby Care:



Figures 1. Internet usage features of mothers on health-related issues (N=175)

The median score of the Generation Y mothers' Media Literacy Level Determination Scale is 68.00. The median score of the Generation Y mothers' knowledge subscale is 29.00, the median score of the Analyze and React subscale is 22.00, and the median score of the Judging Viewing Implicit Messages subscale is 16.00 (Figure 2).

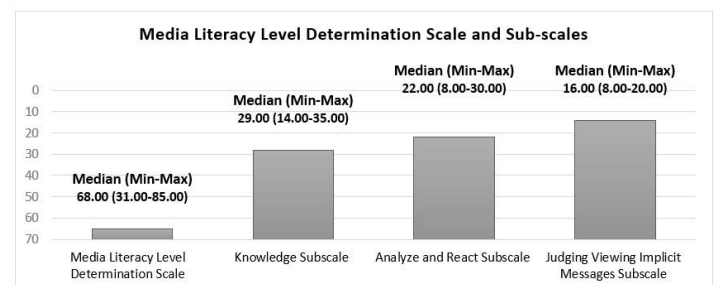


Figure 2. Median Scores' Media Literacy Level Determination Scale and Sub-scales

The levels of media literacy and education are statistically significant ($H=11.655$; $P = .003$). According to Tamhane's T2 test results, primary-secondary school graduates and high school graduates are statistically significant ($P = .016$). Additionally,

primary-secondary school graduates and university graduates ($P = .007$) are statistically significant. The difference is due to primary-school graduates (Table 2).

Table 2. Media literacy level determination scale median scores by socio-demographic characteristics

	n	%	Media Literacy Level Determination Scale Median (Min-Max)	U,H P
Education status**				
Primary and secondary school graduate	23	13.1	56.00 (31-85)	H=11.655 P = .003*
High school graduate	63	36.0	66.00 (34-85)	
University and above graduate	89	50.9	68.00 (35-85)	
Marital status				
Married	165	94.3	67.00 (31-85)	U=815.0 P = .943
Unmarried	10	5.7	69.00 (48-80)	
Family affluence perception				
Adequate	91	52.0	68.00 (34-85)	H=4.163 P = .125
Partly adequate	52	29.7	67.00 (31-85)	
Inadequate	32	18.3	63.00 (36-85)	
Family type				
Nuclear family	158	90.3	67.00 (34-85)	U=901.0 P = .204
Extended family	17	9.7	68.00 (31-85)	
Internet usage tool				
Telephone	144	82.3	66.00 (31-85)	U=1877.0 P = .124
Computer	31	17.7	70.00 (52-84)	
Internet usage year**				
2 years and less	7	4.0	54.00 (50-74)	H=9.402 P = .009*
3-4 years	17	9.7	61.00 (31-85)	
5 years and more	151	86.3	68.00 (34-85)	
Daily internet usage hour				
Less than 1 hour	18	10.3	65.00 (34-85)	H=4.869 P = .648
1-3 hours	90	51.4	67.00 (38-85)	
More than 3 hours	67	38.3	68.00 (31-85)	
Finding the information they receive online as reliable.				
Yes	105	60.0	67.00 (31-85)	U=3610.0 P = .826
No	70	40.0	68.00 (34-85)	
Emotional state when unable to access the Internet				
Does not feel any change in emotional state	113	64.6	67.00 (34-85)	U=3326.5 P = .582
Feeling restrained and unhappy	62	35.4	68.00 (31-85)	

P value ($<.05$) are with * Tamhane's T2 test **

The levels of media literacy and internet usage year are statistically significant ($H=9.402$; $P = .009$). According to the results of Tamhane's T2 test, internetInternet use for five years or longer and internetInternet use for 3-4 years are statistically

significant ($P = .014$). Using the internet for five years or longer and using it for two years or less is statistically significant ($P = .020$). The difference between the groups is caused by the group using the internet for five years or more (Table 3).

Table 3. Groups post-test scores Tamhane's T2 test multiple comparison test results.

Groups	Groups compared	MD	SE	P
Education status				
Primary and secondary school graduate	High school graduate	-9.69	3.24	.016
	University and above graduate	-10.38	3.12	.007
High school graduate	Primary and secondary school graduate	9.69	3.24	.016
	University and above graduate	-.68	1.77	.973
University and above graduate	Primary and secondary school graduate	10.38	3.12	.007
	High school graduate	0.68	1.77	.973
Internet usage year**				
2 years and less	3-4 years	-.52	5.06	.999
	5 years and more	-8.06	3.80	.020
3-4 years	2 years and less	.52	5.06	.999
	5 years and more	-7.54	3.57	.014
5 years and more	2 years and less	8.06	3.80	.020
	3-4 years	7.54	3.57	.014

Additionally, internet usage time varied according to the education level of the mothers. The education level of mothers and their internet usage were statistically significant ($X^2 = 22.339$; $P = .001$).

DISCUSSION

The level of media literacy significantly affects the social life and health decisions of individuals. In particular, the introduction of social media, which is called new media, increases the dissemination of information and increases the importance of media literacy.^{4,18} In this study, the scale scores were between 17 and 85, indicating that the media literacy of the mothers was moderate. According to one study, the media literacy level of the participants was stated to be intermediate.²⁶ Our study results are supported by another study in the literature. It is among the requirements of media literacy that the individual has information about media literacy and media and can analyze this information and realize its reaction as a result of detecting the implicit messages underlying the given message.²⁰ The current study revealed that the knowledge subscale score was at a medium level. A study was conducted by Arslan and Basel among 401 women.²⁷ They reported that the scores of the knowledge subscale, the analyze and react subscale and judgment subscale, which view the implicit messages subscale, supported our study results; scores obtained from the subdimensions could be said to be at a medium level with a similar interpretation. In the current study, among the dimensions, the scores of the knowledge subscale are the highest, and the mean scores of the judgment and implicit message subscales are the lowest. This might make it difficult for mothers to see the implicit information underlying

the messages. Generation Y mothers whose media literacy is at a medium level are in the risk group.

Nurses are important health professionals that support mothers in judging messages in the media and seeing the underlying messages. Providing training and consultancy services with media is effective for generation Y mothers. For example, a systematic review revealed that nurses' interventions via technology are effective for improving breastfeeding.¹⁶ According to another study, a social media-based nursing intervention improved vaccine-hesitant parents' attitudes.¹⁵ Nurses should consider the fact that Generation Y mothers can easily access media information while planning their consultancy. Using media, nurses can turn this situation into an advantage.

A previous study reported that the level of media literacy increases as the education level of an individual increases.²⁶ In this study, the educational status of mothers and media literacy were statistically significant, and the mean media literacy score of those with a high education level was high. Mothers with low education levels have low media literacy. They may be more negatively affected by information pollution in the internet environment. Nurses can prioritize mothers with low educational status in the educational consultancy services they provide on media literacy.

Phone usage rates have increased even over the years. The ability to actively connect to the internet has increased the rate of regular use.¹² In the present study, the level of media literacy and internet usage year were found to be statistically significant ($P < .05$). Similarly, Arslan & Basel reported the relationships between the internet and computer ownership and media

literacy.²⁷ The difference between the groups is due to the group using the internet for five years or more. Using the internet for many years may improve media usage awareness. This finding supports this argument in studies.^{10,12} People who have a high level of media literacy use the internet for many years. It is higher than that in the other groups. The same study revealed that it might affect the development of media usage awareness in individuals over time.

In the literature, generation Y mothers use media to relieve health concerns the most.^{9,27} In a study conducted by Frazer et al., it was determined that mothers prefer the internet for their baby-child nutrition. In this study, it was found that generation Y mothers felt the need to obtain information from the media about baby-child nutrition. In addition to the positive effect of the internet, the information obtained from the internet might negatively affect the health of mothers and babies.^{9,14} Nurses must provide mothers with satisfactory information about their health, especially infant-child care. They could direct mothers who use the internet intensively to appropriate sources of information. Thus, it can be ensured that mothers use the media more accurately on health issues.

The characteristics of generations are changing, and nurses provide health services. Each generation has different needs. In particular, the needs of mothers are important for nursing practices. It is essential to consider generation Y mothers in health education and consultancy services. Nurses need media usage skills, such as e-professionalism. Nurses could use technology in service delivery to support mothers in judging messages in the media and seeing the underlying messages. Nurses could evaluate the social media usage or experiences of mothers with respect to health. Nurses can provide information to mothers on how to find the right information from the internet. They could demonstrate official web sites about health. Nurses should prioritize mothers with low educational status in the educational consultancy services they provide on media literacy.

Study Limitations

The fact that the research was conducted only on Facebook groups and that the inclusion of individuals who agreed to communicate via e-mail increased the reliability of the study and limited the number of participants.

This study does not represent the universe due to the small number of participants and can only be generalized to the sample in which the study was conducted. In addition, the years in which the research was conducted were the years when Facebook groups were widely used. Different groups and social media networks may be preferred in future studies. New research can be conducted on this subject.

CONCLUSION

The media literacy level of Generation Y mothers was moderate, and they were in the risk group for accessing adequate and accurate information. Nurses can question the sources from which mothers obtain health information. Official social media groups and accounts can be opened under the leadership of nurses. They can direct mothers to more accurate and reliable websites and official social media accounts. The media literacy level differs according to educational status and internet usage time. The media literacy levels of university graduates and those who have been using the internet for more than five years are higher. Mothers frequently investigate disease and infant-child nutrition in social networks. Nurses could fall within more media technology via their affiliation official websites or official social media pages.

Ethics Committee Approval: Ethics Committee Approval for this study was obtained from Gazi University Ethics Committee (Date: 2017, Number: 4/147)

Informed Consent: Informed consent was obtained from the participants.

Peer-review: Externally peer-reviewed.

Author Contributions: Concept - FA, NB; Design - FA, NB; Supervision -NB; Resources -FA; Materials -FA, NB; Data Collection and/or Processing -FA; Analysis and/or Interpretation -FA ; Literature Search -FA, NB; Writing Manuscript -FA, NB; Critical Review -FA, NB;

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