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SOCIAL MEDIA USERS' AWARENESS AND UTILIZATION OF MESSAGES ON SOCIAL COMMUNICATION DISORDER IN SUPPORTING AFFECTED PEOPLE IN SOUTHEAST, NIGERIA

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ABSTRACT

The main objective of this study is to examine the awareness and knowledge level of social media users on social communication disorder in Nigeria. The study was anchored on health belief model and technology determinism theory. The study adopted the survey research method with an estimated population of 4,270,270 social media users in Southeast. Using the Wimmer and Dominick Sample Size Calculator, the researcher arrived at a sample size of 385. Multi-stage and purposive sampling were used to identify the respondents for the study. The instrument for data collection was the questionnaire instrument. Analysis of data indicated that there are more male respondents amounting to 51.7% than female respondents. Further analysis of data also revealed that over 88% of the respondents were of the opinion that their awareness of the prevalence of social communication disorder was low. Findings of this study revealed that at an average mean of 2.02, the knowledge level of respondents on social communication disorder is low. Data analysis revealed that, at an average mean of 2.2 respondent's knowledge about social communication disorder cannot allow them to provide reasonable support or advice for people with disorder or advice those that have people disorder. It is safe to conclude that the poor knowledge of the people about SCD has made it difficult for them to identify or support or aid those with SCD in their environment. The researcher recommends that people should be encouraged to seek more knowledge on SCD that will guide their perception about the disorder. If the people are sufficiently armed with information on SCD, they will form proper perception about the SCD health.

Keywords: Awareness, Social Communication Disorder, Social Media, Southeast, Utilization

Introduction

In recent times, researchers have studied cases of autism in Nigeria, as a form of communication disorder. But seem not to have paid attention to the broader social communication problems that have the propensity to affect the social interaction within the social group. This social communication problem is Social Communication Disorder (SCD) (Zawn, 2022; Elodie, at. al., 2021).

The American Speech- Language Hearing Association (2025) noted that social communication disorder creates wide range of problems, such as, difficulties for the person suffering from such disorder in participating in social setting, difficulty developing with their peers in society and creating romantic relationship, difficulty in achieving academic success, and difficulty in performance on the job.

This shows that social communication disorder can go a long way to hinder people with the disorder from the effective socialization that can encourage team work in a work place, thereby creating success. When a person is down with social communication disorder, even his/her romantic life and peer relationship are jeopardized. This is a very serious situation in the society (Zawn, 2022).

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In Nigeria, there are numerous cases of social communication disorder that go undiagnosed and reported. Most families, government and non-governmental organization pay more attention to autism spectrum disorder than they give to social communication disorder (Timler, & Moss, 2021). Statistics has it that between 8-30% of Nigerians may have suffered from one form of social communication disorder or the other (Nwosu, 2015). The act of discovering cases of social communication disorder from patient who bring their cases to the knowledge of the doctor, is what has made several cases of the disorder undiagnosed, because they were not presented to the doctors. This could be the major reasons why cases of social communication disorder in Nigeria are limited.

Children from the age of 0-9 are within the age of early detection of social communication disorder, according to Ikenga and Oparaodu (2021). There are also cases of diagnoses of social communication disorder among adult of well-developed social standings. This is an indication that SCD can be detected or diagnosed at any stage of a person's life, if the person exhibits the symptoms of social communication disorder (Paul & Murray, n.d.).

Experts, government and non-governmental organizations are making effort to create awareness on social communication disorder. These awareness creations are, in most cases, posted on social media platforms such as Facebook, Youtube, Instagram etc. The awareness creation is aimed at raising the social consciousness on the symptoms of social communication disorder and its difference from autism, with the likely intention of providing remedy and support for the people living with the disorder.

Common among the social media posts/messages on SCD is the OLG Autism Port Harcourt post on Facebook. There are several Facebook groups that focused on Social Communication Disorder or (S(P)CD) which include groups that disseminate information and groups that are support-group oriented like BrainPower Neurodevelopment Centre, JAMA-Autism &SCD, Drmaxmd, and Wendy's Corner. On Twitter, there are several groups that promote the awareness of the symptoms of SCD and they include; Neuroscience News –Corp, Katy Benson-Private, Child Mind Institute-Corp, Five @ Vnovem-Private and JAMA.

This study therefore examined the social media users' awareness and utilization of messages on social communication disorder in supporting affected people in Southeast, Nigeria.

Statement of Problem

There seem to be paucity of awareness and knowledge on SCD in the country. Could it be that social media users do not come across the post on social communication disorder, or that they did not understand the meaning of the post on social communication disorder? Where there is lack of knowledge on the issue of SCD, the people may not be able to understand how to react or behave when they come in contact with people suffering from the disorder. The understanding that is needed to be supportive towards the people affected by the disorder will be lacking. It is against this backdrop, therefore, that the researcher intends to examine the awareness and knowledge of social media users on SCD.

Objectives of the Study

The main objective of this study is to examine the awareness and knowledge level of social media users on social communication disorder in Nigeria. The specific objectives, therefore, are to:

1) Examine the level of awareness on social communication disorder among social media users in Southeast, Nigeria.

- 2) Ascertain the level of knowledge on social communication disorder among social media users in Southeast, Nigeria.
- 3) Determine the perception of southeast social media users on social communication disorder in Nigeria.
- 4) Access the extent to which knowledge of SCD is aiding southeast social media users to provide support for those with the disorder in Nigeria.

Scope of the Study

The focus of this study is on social communication disorder as it manifests in children, adolescence and adults. Other neurological disorder is not directly central to this study. For instance, an autistic child might show cases of SCD, that des not make SCD autism. This is why this study is focused on SCD. This study is also delimited to social media users within the southeast geo-political zone of Nigeria, comprising Abia, Anambra, Enugu, Ebonyi and Imo States.

Literature Review

The Concept of Social Communication Disorder

Social communication disorder according to Ben-Aharon, (2020) is a condition when an individual experience difficulty in interacting with others or social group. Social communication disorder as defined by Charney (2021) are underlined individual challenges with both verbal and nonverbal communication skills used in public environment.

Martin, (2024) also explained that children with social communication disorder have trouble using language to interact with other people. Even though they understand the context of the language, they find it difficult to express themselves in a public space. Not only do they find it difficult to express themselves in public space, they mostly struggle to interpret people's gestures, words, greetings, and also have proper conversation with people.

Also, Belsky (2021) added that "people with SCD have trouble following the "rules" of spoken communication. They may take over conversations and interrupt a lot. Some say things that are off-topic. Others hesitate to talk at all".

Signs/Symptoms of social communication disorder

It is indeed no doubt that certain symptoms are pointers to social communication disorder. However, the presence of any of these signs do not necessarily indicate the presence of SCD within you or your loved one. This means that you or your loved one should seek professional help to identify the root cause and combat it. Ben-Aharon, (2020) identified the following as basic symptoms of SCD;

- 1. Zero Eye Contact: Inability to maintain eye contact is a common sign of SCD. People who find it difficult to have conversations with people while maintain eye contact could as well be diagnose of SCD. Although, this could also be a sign of other peculiar condition but when it becomes chronic you are advised to seek treatment.
- 2. Greeting Others Inappropriately: Patients of social communication disorder are commonly known for their inability to appropriately respond to greeting. For example; they find it difficult to

respond to simple greetings like "hello" and they sometimes completely ignore the people who initially greeted. They could respond to greetings in the weirdest manner and gesture.

- 3. Failing to Alter Communication Styles; One of the symptoms of SCD in patients is their inability to use constructive words for each communication setting. To individuals suffering from this disorder, there are no specific words for specific environment therefore, they tend to use any language of their choice or even speak loudly in a quiet environment
- **4.** Talking Over Others: Another notable symptom of SCD hinges on the fact they rudely interrupt people during conversations. It is important to note that the presence of this disorder does not always influence one's behavior. However, if you notice you ate becoming a chronic interrupter, seek help.
- **5. Utilizing Inappropriate Body Language:** one of the signs of social communication disorder is body language irregularities. This is seen in them in abilities to understand or give body language in a social environment. Most times this makes them appear awkward or rigid.
- **6. Telling Stories in a Disjointed Manner:** It is an obvious fact that people who suffer this disorder always have challenges the pieces of an event in a straightforward way during conversation even though they can accurately remember these events.
- 7. Failing to Stay on Topic: This symptom is synonymous to everyone the moment we introduce a new topic while discussing another. This only become a thing of concern when it becomes an uncontrollable or chronic habit.
- **8.** Communicating Awkwardly During Conversations: This encapsulates a lot of factors during communication and they included; making comments outside the context of discuss, inability to maintain eye contact, disinteresting look during conversations.

Despite the attempt to identify the various signs of social communication disorder it is sad to say that a treatment for this disorder has not been discovered yet. However, many communication experts and studies have shown that individual who experience these signs should seek help from speech therapist. This is because speech therapy helps to identify the root problem and when this is arrived at it can be combated.

Empirical Review

A study conducted by Saul et al. (2022) was aimed at "evaluating the Children's Communication Checklist-2 (CCC-2) for measuring social-pragmatic communication deficits and to ascertain their prevalence and functional impact in a community sample". Findings of this study revealed that very few children had isolated social-communication difficulties (0–1.3%).

However, a larger proportion of children (range: 6.1–10.5%) had social-pragmatic skills outside the expected range alongside structural language difficulties and/or autism spectrum symptoms, and this profile was associated with a range of adverse academic and behavioural outcomes. This study concluded that most kids in the early stage of primary school suffer social-pragmatic challenges that affects their behaviour and academic activity.

Another study carried out by Ravi et al. (2021) was aimed at examining the prevalent communication disorders among school children in Ballari, South India. This study revealed that a total of 99 out of 2304 children were identified with communication disorders indicating a prevalence rate of 4.29%. Among them, a total of 75 children were having hearing and ontological disorders (3.25%) and 24 children were having speech and language disorders (1.04%). Further, the prevalence of communication disorders was found to be higher among males (2.38%) compared to females (1.91%). This study concluded

29

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that planned early detection and treatment programs for school children which will enhance the holistic performance.

Gbenga et al. (2022) carried out a study which examines social media as a veritable tool for mental health support in Nigeria. Findings reveal that mental health issues have been on the rise in Nigeria, and accessing mental health services has always been a significant challenge due to the stigma attached to it.

However, with the rise of social media, individuals now have access to mental health services online. This study also revealed that social media platforms have in no little way increased access to mental health support services for Nigerians who may not have had access to them previously due to distance, financial barriers, or lack of mental health services in their communities. The study recommends that social media can be an excellent platform for sharing resources related to mental health support.

Similarly, Adegbiji et al. (2019), did a study to determine the prevalence, socio-demographic features, aetiology, types of communication disorders among under 18 years children attending our facility. Findings revealed that prevalence of communication disorder was 16.1%. Male was 68.2% with male to female ratio of 2.1:1. Communication disorder is commoner in first child 58.1% and detected by mother in 70.5% cases. Major cause was due to infection in 68.2%. Large percentage of communication disorder were language disorder in 60.8% and speech disorders which constitute 39.2% with associated varying degrees of hearing impairment in 78.8% of them. Sensorineural hearing impairment was noted in 69.6% cases. This study concluded that there was high prevalence of communication disorder which was associated with high prevalence of hearing impairment.

It is important to note also, that Ikenga and Oparaodu (2021) carried out an investigation which sort to examine the pattern of communication disorder in a tertiary hospital in Nigeria. Findings of this study revealed that only eighty – three (83) had complete record. There were 55 (62.3%) males and 28 (33.7%) females. It also show that children from 0-9 (68.7%) are prone to suffer this disorder than the older respondents.

Delayed speech seen in 31 (37.3%) of patients was commonest disorder seen. It was revealed that hoarseness and delayed speech were the least disorder displayed by most male. The commonest communication disorder seen in the elderly was slurred speech. This study concluded that involvement of caregivers, audiologist and speech therapist cannot be over emphasized in the management of patients with communication disorders.

Also, Shelton et al. (2024) carried out an investigation to examine social media use by young people with language disorders. Findings revealed that young people with language disorders use social media less compared to typically developing peers; their communication difficulties also determine the social media platform they engage. This study concluded that young people with this challenge use social media for social purposes. However, further study on how to encourage social communication disorder patients to use social media will be valid.

Theoretical Framework

Theory of Reasoned Action

The main objective of the theory of reasoned action is to study an individual's voluntary behavior by investigating the underlying primary motivation to perform an action (Willa et al., 2011). TRA explains that a person's intention to perform a behavior is the determinant of whether or not they actually perform that behavior. Additionally, the normative component (i.e. social norms surrounding the act) also contributes to whether or not the person will actually perform the behavior. According to the theory, the outcome of performing an action is the major drive for the actual behavior. (Azjen, & Madden, 1986). This

30

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intention is known as behavioral intention and comes as a result of a belief that performing the behavior will lead to a specific outcome. Behavioral intention is important to the theory because these intentions "are determined by attitudes to behaviors and subjective norms" (Colman, 2015). TRA suggests that stronger intentions lead to increased effort to perform the behavior, which also increases the likelihood for the behavior to be performed.

This theory is relevant to this study because, as long as people have the strong intention to improve their health and behavior, they will consistently adopt any measure they perceive helpful to their recovery process and that of their loved ones.

Health Believe Model

The basis of this inquiry was the Health Belief Model (HBM). The HBM was developed by American social scientists at the beginning of the 1950s. According to the HBM, a person's propensity to engage in a behaviour can be anticipated by their perception of their own risk of getting a disease or sickness as well as their belief that the suggested health behaviour or activity is effective (Mbiereagu & Etumnu, 2020; Amannah & Ugwu, 2018).

Through the HBM, the perception and attitude of people towards social communication disorder are examined. Also, the HBM helps to investigate if the young and old are aware and knowledgeable of SCD and how they provide guidance and support to victims in a bid to combat the disorder. Through the HBM, the minds of every individual are organized towards the appreciation of the benefits of seeking help from professionals other than go from prayer house to another (Jumbo, 2019).

The relevance of this theory to the study is based on the fact that people always engage in activities when they are the beneficiaries of a process. Thus, Southeasterners will often engage in several precautionary measures in helping diagnosed patients of SCD when they realize it is for their benefit.

Technology Determinism Theory

According to Mihály, (2021) "the origins of technological determinism is traced to Thorstein Veblen (1857–1929), who was an influential American sociologist and economist. Veblen, known for his work on social and economic issues, introduced ideas that portrayed technology as a powerful, autonomous force capable of shaping societal norms and structures". He argued that the development and use of machinery exerted an independent influence on human thought and behavior, notably asserting that "the machine throws out anthropomorphic habits of thought. Technological determinism seeks to show technical developments, media, or technology as a whole, as the key mover in history and social change.

The relevance of this theory to this study is hinged on the fact that as long as people of Southeast Nigeria evolve with their usage of technological equipment as it advances, access to information on social communication disorder and ways to combat it will be guaranteed.

Methodology

This study adopted the survey research method which is more appropriate because it avails the research the opportunity to elicit information from social media users in southeast, Nigeria (Longe, 2021). The population of the study consist of media users in southeast, Nigeria. According to Sasu (2024), active social media users in Nigeria, as at January 2023, is 31.6 million. When this figure is divided with the number of states in Nigeria plus FCT, it gave an estimated number of 854,054 for each state non-proportionately. This mean that the population of social media users in the southeast is estimated to be 4, 270, 270.

Using the Wimmer and Dominick Sample Size Calculator, the researcher arrived at the sample size of 385. Multistage and purposive sampling was used to identify the respondents for the study. The instrument of data collection was the questionnaire instrument, structured to have both demographic and psychographic data. The instrument was validated by two research experts in communication field and Statistician. The test re-test reliability was used to establish the reliability instruments. The figure derived from the result of the test which is 8.7 showed that the instrument was reliable. Analysis of data was done with the use of SPSS.

Data Presentation and Analysis

Out of 385 copies of the questionnaire distributed, the research was able to retrieved 362 copies. This showed 23 mortality rates for the questionnaire. The 362 copies amounted to 94% return rate.

Table 1: Gender of Respondents

Option	Frequency	Percentage
Male	187	51.7%
Female	175	48.3%
Total	362	100%

Source: Field Research, 2025

Analysis of data in table 1 above indicated that there were more male respondents amounting to 51.7% than female respondents. This means that the respondents are predominantly male

Table 2: Responses of respondents on their level of awareness to social media post on social communication disorder

Option	Frequency	Percentage
Very high	20	5.5%
High	23	6.4%
Low	102	28.2%
Very low	217	59.9%
Total	362	100%

Source: Field Research, 2025

Analysis of data in table 2 above revealed that over 88% of the respondents were of the opinion that their awareness of the prevalence of social communication disorder was low. From this figure, about 60% of the respondents have very low awareness of social communication disorder (SCD). This implies that the awareness level of southeast social media users on SCD is very low.

Table 3: Respondents responses on their Level of Knowledge on Social Communication Disorder

Options	SA	A	D	SD	Total	X	Decision
Children with social communication disorder do speak from early age.	35	30	87	210	362		
	(140)	(90)	(174)	(210)	(614)	1.7	Rejected
Children with social communication disorder have focused attention.	11	30	103	218	362		
	(44)	(90)	(206)	(218)	(558)	1.5	Rejected
Children with social communication disorder have repetitive behaviour.	102	110	74	76	362		
	(408)	(330)	(148)	(76)	(962)	2.6	Accepted
Children with social communication disorder have difficulty keep relationship.	26	14	114	208	362	1.6	Rejected
	(104)	(42)	(228)	(208)	(582)		
Children with social communication disorder have difficulty interacting in a social group.	108	62	174	18	362	2.7	Accepted
	(432)	(186)	(348)	(18)	(984)		
Grand mean						2.02	Rejected

Source: Field Research, 2025

Variables: SA= Strongly Agree 3.3-4.0, A= Agree 2.5-3.2, D=Disagree 1.8-2.4, SD= Strongly Disagree 1-1.7.

Decision Rule: The mean value for decision is 2.5. Therefore, if the calculated mean is between 1-2.4 the researcher will reject the item analysed but if the calculated mean is between 2.5-4.0 the researcher will accept the item.

Analysis of data in table 4.3 indicated that at an average mean of 2.02, the knowledge level of respondents on social communication disorder is low. This means that the knowledge level of social media user in southeast on social communication disorder is low.

Table 4: Responses of Respondents on their Perception on Social Communication Disorder

Options	SA	A	D	SD	Total	X	Decision
I think that social communication disorder is a	108	114	62	78	362	2.7	Accepted
serious social problem.	(432)	(342)	(124)	(78)	(976)		

Social Media Users' Awareness and Utilization of Messages on Social Communication Disorder in Supporting Affected People in Southeast, Nigeria

Grand mean						2.8	Accepted
health situation that can be treated.	(96)	(159)	(224)	(173)	(652)		
I think that social communication disorder is a	24	53	112	173	362	1.8	Rejected
	(784)	(369)	(52)	(17)	(1222)		
I think that social communication disorder	196	123	26	17	362	3.4	Accepted
	(748)	(306)	(104)	(21)	(1179)		
I think that social communication disorder is a	187	102	52	21	362	3.3	Accepted

Source: Field Research, 2025

Variables: SA= Strongly Agree 3.3-4.0, A= Agree 2.5-3.2, D=Disagree 1.8-2.4, SD= Strongly Disagree 1-1.7.

Decision Rule: *The mean value for decision is 2.5.* Therefore, if the calculated mean is between 1-2.4 the researcher will reject the item analysed but if the calculated mean is between 2.5-4.0 the researcher will accept the item.

Analysis of data from table 4 above indicated that, at an average mean of 2.8, respondents' perception about social communication disorder is improper. The respondents were of the view that social communication disorder was a terminal problem that cannot be treated, and this is not so. Their perception about the disorder is wrong.

Table 5: Respondents Responses on whether their knowledge of Social Communication Disorder help them in providing support for people with the disorder

Options	SA	A	D	SD	Total	X	Decision
My knowledge of SCD has made me to	56	70	128	108	362	2.2	Rejected
understand ways of following those with the disorder.	(224)	(210)	(256)	(108)	(798)		
My knowledge of SCD helps me to advice those with the disorder to seek remedy.	40	68	172	82	362	2.2	Rejected
	(160)	(204)	(344)	(82)	(790)		110,0000
	(100)	(204)	(344)	(02)	(790)		
The knowledge I have about SCD help me to provide support for those with the disorder.	62	84	104	112	362	2.3	Rejected
	(248)	(252)	(208)	(112)	(820)		-
	(''')	('-)	("")	('-)	()		

My knowledge of SCD helps me to provide 26 87 106 143 362 2.0 Rejected explanation to other people about the disorder. (104) (261) (212) (143) (720)

Grand mean 2.2 Accepted

Source: Field Research, 2025

Variables: *SA*= *Strongly Agree 3.3-4.0, A*= *Agree 2.5-3.2, D* = *Disagree 1.8-2.4, SD*= *Strongly Disagree 1-1.7.*

Decision Rule: The mean value for decision is 2.5. Therefore, if the calculated mean is between 1-2.4 the researcher will reject the item analysed but if the calculated mean is between 2.5-4.0 the researcher will accept the item.

Data analysis in table 5 above revealed that, at an average mean of 2.2, respondents' knowledge about social communication disorder cannot enable them to provide reasonable support or advice for people with the disorder or advice those that have people with the disorder. This implies that the knowledge of the people is not sufficient for them to se to provide meaningful recommendations or support for people suffering with the disorder.

Discussion of Finding

Analysis of data indicated that there were more male respondents amounting to 51.7% than female respondents. This means that the respondents are predominantly male. This finding tallies with that of Ikenga and Oparaodu (2021) which aimed at examining the pattern of communication disorder in a tertiary hospital in Nigeria. Findings of this study revealed that there were 55 (62.3%) males and 28 (33.7%) females. For age bracket with communication disorders 0-9 years were fifty-seven (68.7%) had the most common of these disorders while the age bracket 30-39 years had no communication disorder.

Delayed speech seen in 31 (37.3%) of patients was commonest disorder seen. The least disorder seen was hoarseness. Most 42 (76.3%/77.4%) of the patients with delayed speech were males. The mean of presentation for patients with delayed speech was 40.3 months. This study concluded that involvement of caregivers, audiologist and speech therapist cannot be over emphasized in the management of patients with communication disorders. This further explains the theory of reasoned action since people with strong intention to improve their health and behavior will eventually adopt any measure, they perceive helpful to their recovery process and that of their loved ones.

Analysis of data also revealed that over 88% of the respondents were of the opinion that their awareness of the prevalence of social communication disorder was low. Also, about 60% of the respondents have very low awareness of social communication disorder (SCD). This implies that the awareness level of southeast social media users on SCD is very low.

Similarly, this finding agrees with study of Shelton, et al (2024) which found that young people with language disorders use social media less compared to typically developing peers; their profile of communication difficulties may impact the types of social media with which they engage. This supports the stance of the technology determinism theory which argued that as long as people are exposed to certain

information-oriented technology equipment, access to the signs and treatment of certain health issues such as SCD is guaranteed.

Findings of this study revealed that at an average mean of 2.02, the knowledge level of respondents on social communication disorder is low. This means that the knowledge level of social media user in southeast on social communication disorder is low. This finding disagrees with that of Gbenga, et al (2022) which argued that with the rise of social media, individuals now have access to mental health services online. This study also argued that social media platforms have increased access to mental health support services for Nigerians who may not have had access to them previously due to distance, financial barriers, or lack of mental health services in their communities. The study recommends that social media can be an excellent platform for sharing resources related to mental health support.

Analysis of data indicated that, at an average mean of 2.8, respondents' perception about social communication disorder is improper. The respondents were of the view that social communication disorder was a terminal problem that cannot be treated, and this is not so. Their perception about the disorder is wrong which has also affected their attitude towards the various signs of SCD.

This finding aligns with that of Ravi et al (2021) which revealed that a total of 99 out of 2304 children were identified with communication disorders indicating a prevalence rate of 4.29%. Among them, a total of 75 children were having hearing and ontological disorders (3.25%) and 24 children were having speech and language disorders (1.04%). Further, the prevalence of communication disorders was found to be higher among males (2.38%) compared to females (1.91%). This also, further justify the health believe model which argued that until people start seeing certain exercises as beneficial to their health, they will pay little or no interest to it.

Data analysis revealed that, at an average mean of 2.2, respondents' knowledge about social communication disorder cannot enable them to provide reasonable support or advice for people with the disorder or advice those that have people with the disorder. This implies that the knowledge of the people is not sufficient for them to se to provide meaningful recommendations or support for people suffering with the disorder.

Ravi et al (2021) in their study also explained that children were identified with communication disorders indicating a prevalence rate of 4.29%. Among them, a total of 75 children were having hearing and ontological disorders (3.25%) and 24 children were having speech and language disorders (1.04%). Further, the prevalence of communication disorders was found to be higher among males (2.38%) compared to females (1.91%). This study concluded that planned early identification and treatment programs for school going children which will enhance the holistic performance.

Conclusion

It is safe to conclude that the post on social media is insufficient to create the needed awareness on social communication disorder among social media users in southeast, Nigeria. This might be the reason why the awareness and knowledge level of respondents were very low on the issue of social communication disorder.

Analysis of data revealed that the perception of social media users on social communication disorder is wrong. Their perception reflects that of knowledge of autism but not SCD. It means that most people tend to see autism as one and the same with SCD. However, this is not so, an autistic child might not speak from childhood but a social communication disorder child can speak and later show signs of SCD as they grow into adolescence. The poor knowledge of the people about SCD has made it difficult for them to identify, and support or aid those with SCD in their environment.

Recommendations

- 1) That the social media platform should be used as a veritable avenue to propagate the knowledge on SCD by individuals, government organizations and non-governmental organizations. This will help to create more awareness about the disorder in human socialization effort.
- 2) That information and post on social media about SCD should be creative and attractive as to capture more attention and provide deeper knowledge about the disorder. This will help create more knowledge about the disorder.
- 3) That people should be encouraged to seek more knowledge on SCD that will guide their perception about the disorder. If the people are sufficiently armed with information on SCD, they will form proper perception about the SCD health.
- 4) That those with more information and knowledge on SCD should look for ways of helping and supporting people with the manifestation of the disorder.

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37

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- Social Media Users' Awareness and Utilization of Messages on Social Communication Disorder in Supporting Affected People in Southeast, Nigeria
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