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INFLUENCE OF SOCIAL MEDIA ON UNIVERSITY STUDENT PARTICIPATION IN BLOOD DONATION: A CASE OF MOUNT KENYA UNIVERSITY, KENYA

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A DISSERTATION PRESENTED TO THE DEPARTMENT OF COMMUNICATION STUDIES IN THE SCHOOL OF COMPUTER SCIENCE AND COMMUNICATION STUDIES, ST PAUL'S UNIVERSITY IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR THE DEGREE OF MASTER OF ARTS IN COMMUNICATION STUDIES.

OCTOBER, 2026

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DECLARATION

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ABSTRACT

This study sought to determine the influence of social media on university student participation in blood donation drives, using Mount Kenya University (MKU), Thika Campus as a case study. Although social media has reshaped how health campaigns reach young people, there remained limited empirical evidence on how students' awareness of, and engagement with, blood donation content on social media translated into actual donation behaviour. Guided by the Technology Acceptance Model (TAM) and Social Cognitive Theory (SCT), the study adopted a mixed-methods design combining a cross-sectional survey of 348 students (from a target sample of 378, a 92.1% response rate) selected through stratified random sampling, with semi-structured interviews of 15 purposively selected participants. Quantitative data were analysed using descriptive and inferential statistics (Pearson correlation, multiple regression, and Friedman's test) in SPSS version 28, while interview data were analysed thematically. The findings showed that students had only a moderate level of awareness of blood donation drives through social media (mean = 3.57) despite rating social media highly as an information channel (mean = 4.17), and that social media engagement, rather than awareness alone, was the strongest predictor of participation ($\beta = 0.625$, $p < .001$; $r = 0.797$, $p < .01$), with the regression model accounting for 66.2% of the variance in participation. Facebook and WhatsApp emerged as the most effective platforms for mobilising student donors. The study concluded that converting awareness into actual donation depends on sustained, interactive social media engagement rather than one-off informational posts, and that platform choice matters for reach and impact. It recommended that universities and blood transfusion services adopt consistent, multi-platform, and interactive social media campaigns—anchored on mainstream institutional accounts rather than specialised health-club pages alone—to convert student awareness into sustained donation behaviour.

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LIST OF ABBREVIATIONS AND ACRONYMS

AIDS	Acquired Immunodeficiency Syndrome
GOK	Government of Kenya
HIV	Human Immunodeficiency Virus
ICT	Information and Communication Technology
IMC	Integrated Marketing Communication
KBTTS	Kenya Blood Transfusion and Transplant Services
KEMRI	Kenya Medical Research Institute
MKU	Mount Kenya University
MKUHSA	Mount Kenya University Health Students Association
MKUMLSA	Mount Kenya University Medical Laboratory Science Students Association
NACC	National AIDS Control Council
SMS	Short Message Service
SNS	Social Networking Sites
TAM	The Technology Acceptance Model
UN	United Nations
WHO	World Health Organization
SCT	Social Cognitive Theory

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CHAPTER ONE: INTRODUCTION

1.1 Introduction

This chapter highlights the vital role that social media plays in creating awareness on blood donation among the youth. The background sheds light on social media and its increasing relevance in today's digital age. It then delves into the statement problem, concise objectives that guide the study, discusses the significance of this research and outlines the scope of the study. Additionally, the research process's assumptions and constraints are discussed, offering a clear framework. In this first chapter, we lay the groundwork for a more in-depth examination of the many ways social media might improve blood donation campaigns and the availability of blood components.

1.2 Background of the Study

Social networking has transformed how people interact and access information, with platforms such as WhatsApp, X (Twitter), Instagram, and Facebook connecting individuals and communities at unprecedented speed and scale; over 4.5 billion people worldwide were active social media users as of 2021, a number that continues to rise (Kemp, 2021). Health organisations increasingly rely on these platforms to disseminate information, mobilise communities, and enhance participation in public health initiatives, including blood donation (Alanzi & Alsaeed, 2019; Munir & Ahmed, 2025). Social media engagement strategies in particular have been shown to improve blood donor recruitment and motivation globally, positioning digital platforms as effective tools for behavioural influence in health communication (Sümnig et al., 2018). Even so, the demand for blood remains a persistent global concern, since it is essential for surgeries, cancer treatment, trauma care, and obstetric emergencies, and the World Health Organization has repeatedly

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called on countries to mobilise voluntary donors through all available channels of communication, including the internet (WHO, 2020).

Regionally, the shortage of blood supplies is a long-standing challenge in Africa: The World Health Organization (2018) estimates that only half of the continent's countries can collect enough blood to meet demand, constrained by limited public awareness, weak logistics, and inadequate funding. Social media has been identified as a channel with considerable potential for correcting misconceptions and mobilising younger donors, since health messages shared on Africa's social media platforms already reach large numbers of young, urban internet users (Chavula & Dube, 2019). In East Africa specifically, Kenya, Uganda, and Tanzania have all struggled to maintain adequate blood supplies; the Kenya National Blood Transfusion Service (KNBTS), for instance, continues to record low uptake of its voluntary donation programme (KNBTS, 2020). University students represent a particularly promising, yet underutilised, donor pool in this context: research shows gaps in their knowledge, attitudes, and practices around blood donation that limit their participation despite their accessibility and generally good health status (Sharma et al., 2020).

In Kenya, the widespread use of social media platforms such as Instagram, WhatsApp, and Facebook among young people, coupled with the country's more than 11 million social media users (Communications Authority of Kenya, 2021), positions social media as a critical channel for public health advocacy, including blood donation campaigns targeting university students. Universities are also increasingly expected to demonstrate Corporate Social Responsibility (CSR) alongside their core academic mandate, and blood donation drives have become a vital part of these CSR portfolios, fostering community well-being and enhancing institutional image (Mikuš, 2017; Ko et al., 2014). This shift reflects a

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broader understanding of blood donation as both an ethical and an organisational responsibility, rather than a purely altruistic act (Zucconi & Zucconi, 2018).

Mount Kenya University

The university began as the Thika Institute of Technology, initially founded as a computer outreach program during a period of rapid ICT and mobile growth in Kenya. It transitioned into a commercial college for computer and management training, earning full registration from the Ministry of Education in 2000. By 2002, it expanded its curriculum into paramedical, IT, business, and entrepreneurship fields. In 2005, it became Kenya's first private institution authorized by the Pharmacy and Poisons Board to train pharmaceutical technologists. In 2006, the Commission for Higher Education (CHE) approved its collaboration with JKUAT to offer diploma and degree programs. After meeting all official regulatory guidelines, the CHE granted the institution the authority to establish a full-fledged, privately funded university, now known as Mount Kenya University (MKU).

Mount Kenya University (MKU) has exemplified the trend of holding an annual blood donation campaign every February to address the country's persistent blood shortage. In February 2024, MKU's Thika campus took part in a national blood donation drive led by Kenya's Blood Ambassador, Ms. Charlene Ruto, collecting more than 640 units of blood in collaboration with the Kenya Blood Transfusion and Transplant Services and MKU's Management and University Council (Thika Town Today [3T], 2024; Mount Kenya University Medical Laboratory Science Students Association [MKUMLSA], 2024). Student associations, notably the Mount Kenya University Health Students Association (MKUHSA) and MKUMLSA, play a central role in organising and promoting these drives; MKUMLSA alone collected a further 260 pints during its February 2025 drive, publicised through the university's official student platforms (MKUMLSA, 2025).

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A brief comparative review of blood-donation-related social media activity at six other Kenyan universities, namely the University of Nairobi, Kenyatta University, Moi University, KCA University, United States International University-Africa, and Daystar University, in June 2024 showed that , while most institutions use Facebook and X (Twitter) to promote blood drives, the consistency, messaging style, and interactivity of these campaigns varied considerably, from highly organised, influencer-driven strategies at Kenyatta University to sporadic, text-based announcements at Moi University. Across the six institutions, promotion relied mainly on informational posts about dates, venues, and eligibility, with little evidence of systematic evaluation of which content types or platforms actually convert online engagement into physical donation. This gap in the wider Kenyan university sector mirrors the specific gap this study set out to address at MKU: understanding not merely whether social media is used for blood donation promotion, but how awareness of, and engagement with, that content translates into actual student participation.

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1.3 Statement of the Problem

Kenya's voluntary blood donation rate remains below the WHO-recommended threshold of 15 donations per 1,000 people; current rates are about four to six donations per 1,000 population (Muchoka, 2025). This translates into a national deficit of approximately 200,000 units annually with rural and marginalized communities contributing less than 30 percent of all donations (KNBTS Report, 2021). Dependence on institution-based donation drives, which are seasonal and inconsistent, is also a major concern because when educational institutions are closed, the supply drops significantly (Muchoka, 2025). To effectively reduce blood shortages in Kenya, a successful strategy must integrate robust awareness campaigns for community engagement to ensure a sustainable, safe, and

sufficient blood supply, ultimately saving lives and strengthening the nation's healthcare system.

Blood donation is a well-recognised social good, yet students in Kenya rarely donate during campus drives, despite representing a large pool of potential young donors (KNBTS, 2020; Sharma et al., 2020). This gap persists despite the widespread use of social media and its demonstrated ability to enhance communication and participation among young people (Wirtz & Daiser, 2020; Communications Authority of Kenya, 2021).

Despite the well-documented benefits of blood donation, especially among young people, very few students participate in blood donation campaigns. On a similar note, there is a dearth of empirical evidence on how student participation with blood donation has changed as a result of the rise of new technology and online interactions like social networks. Voluntary blood donation by students is a valuable but underutilized resource, according to the Kenya National Blood Transfusion Service (KNBTS), which notes that blood shortages are common, especially in critical medical emergencies (KNBTS, 2020).

While studies indicate varied reasons for donating blood (Misje et al., 2009; Dabula, 2019), there remains a significant gap in empirical data regarding how specific social media strategies influence participation rates or address diverse donor motivations among university students. Existing literature broadly acknowledges social media's potential for blood donor messaging (Shaz & Shaz, 2012; Veldhuizen & Doggen, 2018), but the nuanced impact of different social media campaigns on student engagement in blood donation, especially within the context of Kenyan universities' public relations efforts, is not thoroughly investigated. Specifically, it is unclear which particular social media platform or communication approaches are most effective in raising and converting awareness into actual student attendance at donation drives, and how these strategies might differ across different demographic profiles. This research therefore aimed to bridge this knowledge gap

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by investigating how social media influenced university students' participation in blood donation drives at Mount Kenya University.

1.4 Purpose of the Study

The purpose of the study was to examine the influence of social media on university student participation in blood donation drives at Mount Kenya University, Thika Campus.

1.5 Objectives of the Study

The study was steered by the following specific objectives:

i. To assess the level of student awareness of blood donation drives through social media platforms;
ii. To examine the relationship between social media engagement and student participation in blood donation drives; and
iii. To identify the social media platforms most effective in driving student participation in blood donation drives.

1.6 Research Questions

i. What is the level of student awareness about blood donation drives through social media platforms?
ii. What is the relationship between social media engagement and student participation in blood donation drives?
iii. Which social media platforms are most effective in increasing student participation in blood donation drives?

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1.7 Justification of the Study

This study was necessary because Kenya's blood supply shortfall has persisted despite years of donor-mobilisation efforts, and university students—an accessible, generally healthy, and highly social-media-active population—remain an underused donor base (KNBTS, 2020; Sharma et al., 2020). With social media now central to how young people communicate, it was critical to understand precisely how its use could be directed toward promoting blood donation rather than assuming, as prior awareness-focused interventions often did, that visibility alone would translate into participation. Given the large and highly interactive student population in Kenyan universities, social-media-directed blood donation campaigns had the potential to generate substantial gains if designed around evidence of the factors that influence student participation in blood donation (KNBTS, 2020). The findings were therefore useful to institutions seeking evidence-based ways of improving health communication and donor mobilisation, and contributed to the wider discussion on the role of social media in promoting health-related behaviours in Africa.

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1.8 Significance of the Study

The findings of this study are expected to be of value to several groups of stakeholders. For universities, including Mount Kenya University, the findings offer evidence on how social media can be deployed more deliberately to recruit student donors and design donor-mobilisation strategies informed by the specific engagement patterns identified. For blood transfusion services such as KBTTS and KNBTS, the findings provide guidance on the platforms and content types most likely to convert awareness into actual donations, supporting more efficient planning of donor recruitment and blood-bank replenishment.

For health communicators and policymakers, the study contributes empirical evidence to the ongoing discussion on social-media-based health communication in Africa and can

inform national information and communication technology policies and strategies that support blood donation initiatives. Finally, by identifying awareness, engagement, and platform effectiveness as distinct constructs with different explanatory power, the study offers researchers a clearer basis for future comparative and longitudinal work on social media and health behaviour among university students.

1.9 Scope of Study

This study examined the influence of social media on university student participation in blood donation drives, focusing on three sets of variables: students' awareness of blood donation drives through social media, their engagement with social-media content on blood donation, and the perceived effectiveness of specific social media platforms (Facebook, Instagram, X/Twitter, and WhatsApp) in driving participation. The study targeted undergraduate students at Mount Kenya University, Thika Campus, Kiambu County, and was conducted between the pilot phase in early 2026 and the completion of data collection and analysis in August 2026. Methodologically, the study was bounded by a mixed-methods design combining a stratified random sample of 348 quantitative respondents with 15 purposively selected qualitative interview participants, and did not extend to other Kenyan universities, non-student staff, or donation drives conducted outside the university setting.

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1.10 Limitations and Delimitations of the Study

The study anticipated response bias during the interview phase, which could have affected the reliability and accuracy of the findings. This limitation was mitigated by assuring respondents that their responses would be treated confidentially and used solely for academic purposes. In addition, participants were encouraged to provide honest responses

by emphasizing the non-judgmental nature of the study and the importance of accurate information in generating reliable findings (Creswell & Creswell, 2018).

Other universities were not included in the study because the research was conducted exclusively at Mount Kenya University, Thika Campus. Furthermore, the target population comprised only students enrolled at MKU, Thika Campus, representing a relatively small proportion of the overall university student population in Kenya. This limited geographical and institutional coverage restricted the generalizability of the findings to other university settings. Future studies were therefore recommended to include a broader and more representative sample of universities and students to enhance the generalizability and applicability of the findings across the university sector.

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1.11 Definition of Terms

Blood Donation Drives: Organised health campaigns or activities conducted to mobilise and recruit eligible individuals to voluntarily donate blood for collection, processing, storage, and subsequent use in medical transfusions, emergency care, surgical procedures, and other clinical needs (World Health Organization, 2018).

Social Media: Digital communication platforms used by individuals and organisations, including corporate and institutional departments, to create, share, and interact with information for communication, marketing, public relations, and campaign purposes.

Student Participation: Refers to the active involvement of students in organised activities, programmes, or initiatives through direct action, contribution, or support. In the context of blood donation, participation includes voluntarily donating blood as well as supporting activities that encourage others to donate (World Health Organization, 2018).

University Student: In this study, an undergraduate student enrolled at Mount Kenya University, Thika Campus, at the time of data collection.

1.12 Summary

This chapter introduced the study, situating it within the global, regional, and Kenyan context of social media use and blood donation. It presented the statement of the problem and the empirical gap the study addressed, the purpose and specific objectives, the corresponding research questions, and the justification and significance of the study for universities, blood transfusion services, and health communicators. It also outlined the scope, limitations and delimitations, and the operational definitions of key terms used throughout the dissertation.

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CHAPTER TWO: LITERATURE REVIEW

2.1 Introduction

This chapter provides a literature review on the topic of how student involvement in blood donation campaigns is affected by social media. The first part of this chapter is devoted to a theoretical review of pertinent theories, and the second half is an empirical review of literature pertaining to the particular aims. A conceptual framework to connect the study's variables will be presented in the chapter, and then new gaps in the literature will be discussed.

2.2 General Literature Review

2.2.1 Blood Donations

Blood donation is paramount in global healthcare, with over 100 million units donated annually (Myers & Collins, 2024). Blood transfusion is necessary for patients under surgery, coping with trauma, battling cancer or managing other chronic illnesses. This vital procedure provides patients with a lifeline, sustenance and saves lives.

According to Myers and Collins (2024), Karl Landsteiner identified blood groups ABO in the early 20th century. During that early period, the practice of blood typing was beginning to be adopted as the universal standard practice. According to KU Medical Centre (2024), initially, blood transfusions had major limitations due to challenges in clot prevention once the blood has been extracted from the donors. The center adds that the blood transfusion entailed a direct transfer of blood from the donor to the recipient without any prior transport or storage. Since the donor and receiver needed to be present simultaneously for this method to work, it could only be used on a small scale with a restricted number of patients. People who were willing to give blood at any moment and lived in the area were included on the donor list (Myers & Collins, 2024). At the outset of World War I, there was an urgent

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want for a more reliable system of contribution, transportation, and storage. Soldiers were dying from even non-fatal wounds due to a lack of timely blood transfusions, as Myers and Collins (2024) point out, since the concept of on-demand blood donation was impractical for such a massive operation. This led to a number of concerted efforts to develop a storage system and transfer of blood to meet the huge demands during war. Previously, clotting of the blood was prevented through addition of citrate to the blood. Lewishon (1958) observed that by adding glucose into the solution allowed red blood cells to maintain viability for several weeks when the blood was stored under refrigerated conditions. Several scholars, including Rous and Turner (1916), confirm the US Army Medical Corps' Captain Oswald Hope Robertson as the first person to 'bank' blood in a manner akin to today's practice. In November 1917, Captain Robertson combined group O blood with glucose and stored it, making a major transition from earlier method of direct to indirect blood donation. This development majorly improved the practice and utilisation of blood donation and transfusion (Robertson, 1918).

Myers and Collins (2024) state that the contraindications associated with blood donation revolve around donor ineligibility where one must meet specific criteria in order to donate blood. It states that a potential donor must be at least 16 years of age or older, have a body weight of at least 50kg, and should not have hypertension, anemia or diabetes. Further, the candidate should be of good health and feeling well during the blood donation process. The association also notes that an eligible donor can donate blood only once every 8 weeks. However, should the donors opt to donate concurrently 2 units of blood, they should abstain from donating red blood cells again for a 16 weeks period of time. Repeat blood donors may have low hemoglobin levels because the 56-day gap isn't long enough to replace the iron store lost throughout the donation process.

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While preparing for blood donation, individuals are advised to consume a full meal, ensure they are well-rested, and drink adequate amounts of non-caffeinated and non-alcoholic beverages. After donation, a donor should from not lift heavy load and refrain from drinking alcohol and smoking for several hours. The donor is taken through a medical assessment and screening questionnaire, which includes an evaluation of their vital signs and general well-being, and a finger-stick hemoglobin test (Myers & Collins, 2024). After screening, the donor proceeds to the donation section for blood collection.

In a bid to address the rising medical demands of the population, a boost is needed to supply blood and increase donor numbers. Hence hospitals and related establishments embark on campaigns and motivators to build the donor pool. Marketing strategies that center around themes of humanity, addressing genuine medical needs, and appealing to a sense of community service are adopted (Myers & Collins, 2024). The importance of collaboration between healthcare providers, hospitals, and blood banks in facilitating effective blood donations has been highlighted by many researchers (Bednall & Bove, 2011; Gillespie & Hillyer, 2002).

Ensuring the complete safety of blood donors is of the utmost importance in reducing donor attrition and increasing recruiting and retention efforts (Eder, 2012). Blood donation is one of the social and individual responsibilities for all citizens (Cervik & Guvan, 2015). The authors further indicate that blood donation ensures to raise awareness for the fulfillment of social responsibilities in addition to practicing values such as assisting each other in society by ensuring that members of the society take part in efforts towards blood donation. Jafaar et al. (2023) states that in general, society regards blood donation as a humane act, which shows positive behavior for the health and survival of other people. The positive

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image portrays values such as empathy, selflessness, and the sense of social responsibility to the intended recipient. Such supply is needed for the survival of blood recipients such as sickle-cell (anemic) patients who require regular blood transfusions (Jafaar et al., 2023). In a similar manner, the support of voluntary donor groups is often viewed as a reliable source of much needed blood supply.

There are three categories of blood donors, according to the World Health Organization (2018) and the International Federation of Red Cross and Red Crescent Societies (2019): casual, paid, and replacement. In some countries, individuals donate blood mainly when a close relative or friend needs it, rather than voluntarily. Additionally, only 62 nations have blood systems that depend entirely on unpaid, voluntary donations, as pointed out by the World Health Organization. Because of this critical need, the World Health Organization (WHO) suggests that one percent of the population should give blood, with young people playing a particularly significant role in meeting this goal.

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Donations of blood are disproportionately low among young people (Eltewacy et al., 2024). According to Ibrahim & Abdalla (2021), just 15% of university students in Qatar donated blood regularly, while 19–45% of Saudi Arabian university students reported doing the same. Most contributors, however, only gave once, according to research by Alsalmi et al. (2019), among others.

Blood donors themselves tend to enjoy healthy outcomes from regular donation. Kenya's National Blood Transfusion Service collected only about sixteen percent of the one million units required nationally in 2019 (Kenya National Blood Transfusion Service, 2021). Additionally, Kenya continued to experience significant blood shortages in 2020, collecting only 16% of the one million units of blood required nationally. This shortage was

particularly concerning given that approximately seven people required blood transfusions every ten minutes. The COVID-19 pandemic further exacerbated the situation as fear of contracting the virus discouraged potential donors from visiting donation centres (World Bank, 2022). Similarly, Ghana collected approximately 180,000 blood donations in 2022, falling short of its annual target of 308,000. The pandemic also contributed to a decline in the proportion of voluntary blood donors from over 80% to below 50% in several African countries (World Health Organization Regional Office for Africa, 2023).

Such incidences of blood shortage have serious consequences, considering that blood transfusion is an essential component of modern healthcare. Blood is collected for use in childbirth, laboratories, pediatric, and orthopedic care (Ndongeni-Ntlebi, 2021). In South Africa, there is a persistently high demand for blood donations due to health disparities and diseases such as HIV and AIDS, tuberculosis, and cancer (Rambiritich et al., 2021). It has been acknowledged that the scarcity of blood donors is partially caused by misunderstandings around blood donation (Eksi et al., 2022). According to Zucoloto et al. (2019), common misunderstandings around blood donation include doubts about donor eligibility, fears that donating lowers heart rate or blood pressure, and confusion about the donation procedure itself. People are less likely to donate blood if they have unfavorable thoughts about it, according to Eksi et al. (2022). Blood remains, however, a finite resource with a short shelf life from donation to consumption. There was an increase of 11.6 million blood units given by voluntary non-paid donors between 2008 and 2015, which the World Health Organization emphasizes as evidence of the rising need for blood.

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2.3 Empirical Review of Related Literature

2.3.1 Student Awareness about Blood Donation Drives through Social Media

The rise of social media as a platform for community mobilization and the spread of health information has revolutionized health advocacy. Facebook and Instagram, say Moorhead et al. (2018), are great for health initiatives because they allow for two-way contact, which increases outreach. In ways that more conventional types of advertising can't, these platforms let brands reach certain demographics with personalized messaging.

Specifically concerning blood donation, social media has emerged as a vital channel for communicating appeals, disseminating factual information about donation processes, and raising general awareness among potential donors (Shaz & Shaz, 2012). Blood collection organizations increasingly leverage these digital platforms to reach a wider audience and keep the public informed about urgent needs and upcoming drives (Veldhuizen & Doggen, 2018).

In the African context, studies have shown varying degrees of success in using social media for health advocacy. Ezeh and Mburu (2017) found that platforms like Facebook and WhatsApp are particularly effective in Nigeria and Kenya for promoting health initiatives, including blood donation. They noted that these platforms provide interactive spaces where users can ask questions, share experiences, and encourage participation.

Kaplan and Haenlein (2020) further underscore the role of Twitter in health campaigns, particularly by use of hash-tags to create viral campaigns. These campaigns can generate widespread awareness and facilitate real-time updates, which are critical for mobilizing participants during health drives. This capability is especially pertinent for rapid mobilization during blood donation emergencies, allowing organizations to broadcast

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urgent calls for specific blood types or to highlight critical shortages (Veldhuizen & Doggen, 2018).

2.3.2 Social Media Engagement and Student Participation in Donation Drives

Because of their large number of social media interactions, young people, especially college students, are an important population to reach with health-related messages. Zhang et al. (2020) found that young people in the United States were more likely to participate in health-related activities and blood donation drives if they engaged with health-related social media posts. Engagement behaviors such as like, commenting, and sharing posts were shown to be predictors of genuine interest. Consistent with previous research (Wirtz & Daiser, 2020; Rana & Sharma, 2024), this finding demonstrates that active social media communication promotes real-world behaviors by enhancing user engagement and brand or cause loyalty.

In East Africa, similar trends have been documented. Mugisha and Otieno (2020) studied Ugandan university students and found that social media engagement significantly influenced their participation in blood donation drives. The use of WhatsApp for group discussions and event planning was particularly effective in mobilizing students and addressing misconceptions about blood donation.

Locally, Kimani and Muriithi (2021) investigated social media's role in promoting health campaigns among Kenyan university students. Their findings revealed that platforms like Facebook and Instagram were instrumental in raising awareness and encouraging participation. Students who actively interacted with campaign content were more likely to attend blood donation events, highlighting the importance of engagement-driven advocacy.

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Such findings underscore the potential for universities and blood collection organizations to strategically design social media content that not only informs but actively encourages interaction, leveraging the power of online engagement to translate into increased student participation in vital public health initiatives like blood donation (Veldhuizen & Doggen, 2018).

2.3.3 Barriers to Successful Blood Donation Campaigns

A number of obstacles remain, even if social media has the ability to increase involvement in blood donation programs. Concerns around needles, misunderstandings regarding blood safety, and general ignorance were highlighted by Ngwenya and Dlamini (2019) as key obstacles in South Africa. These barriers often deter potential donors, particularly in regions where health literacy levels are low. Such fears and misconceptions are prevalent among youth and student populations, underscoring the need for targeted educational interventions to foster positive attitudes towards donation (Sharma et al., 2020).

In Kenya, Mwangi et al. (2019) noted that infrastructural limitations, such as inconsistent internet access, often restrict the reach of social media campaigns. Culture and religion also influence people's views on blood donation, therefore it's important to be mindful of different cultures while advocating for blood donation.

Furthermore, psychological and social factors, including a lack of altruistic motivation, fear of knowing one's health status, and inconvenient donation sites, continue to pose significant hurdles to increasing voluntary blood donation rates, particularly among millennials in the African context (Dabula, 2019). Social media campaigns, while powerful, must therefore contend with these deeply rooted barriers, and their effectiveness can be limited if they do

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not directly address these underlying concerns or offer accessible solutions. In order to maintain involvement in blood donation programs, Shaw et al. (2017) highlighted the need of continuous message and follow-up on a global scale. In order to better track involvement and address the concerns of prospective contributors, the research recommends using social media analytics.

2.3.4 Social Media Platforms Most Effective in Driving Student Participation in Blood Donation Drives

The efficacy of health campaign promotion on different social media platforms varies. In high-income nations, Smith et al. (2018) found that Instagram and Facebook were the most effective platforms for advocating blood donation. Facebook groups provide a space for community building and information exchange, while Instagram's visual appeal is particularly effective in engaging younger audiences.

In the East African context, Mungai et al. (2020) found that WhatsApp and Facebook were the most frequently used mediums for health campaigns. Facebook was effective in organizing events and facilitating discussions, while WhatsApp enabled direct communication and logistical planning. In a similar vein, Nabudere et al. (2019) called attention to how WhatsApp brought Ugandan university students together, which in turn enhanced their involvement in blood donation efforts.

Facebook, Instagram, and WhatsApp were the top three platforms used by Karanja and Ngoya (2022) to rally students to donate blood. Their study highlighted the effectiveness of visually engaging content, such as transformation photos and videos of past donors, in attracting and persuading students to participate.

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Ultimately, the effectiveness of a social media platform in driving student participation is contingent on understanding the target audience's preferred platforms and tailoring content to leverage each platform's unique strengths for specific campaign objectives (Veldhuizen & Doggen, 2018; Communications Authority of Kenya, 2021).

2.3.5 Corporate Social Responsibility and Public Relations in University Health Initiatives

Universities, as significant societal institutions, are increasingly expected to demonstrate commitment beyond their core academic functions by engaging in Corporate Social Responsibility (CSR) initiatives. CSR in higher education encompasses various activities aimed at contributing to community well-being, ethical governance, environmental sustainability, and social equity (Ko et al., 2014). Within this framework, public health campaigns, such as blood donation drives, represent a critical dimension of a university's social responsibility, fostering a culture of giving and enhancing institutional reputation (Mikuš, 2017). By actively promoting and facilitating blood donation, universities not only address a vital public health need but also cultivate a positive image, build trust with stakeholders, and instill values of civic engagement among their student body.

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The strategic integration of blood donation into a university's public relations efforts reflects a recognition that such activities contribute to the common good while also serving institutional objectives. This perspective shifts the understanding of blood donation from a purely altruistic act to one that also encompasses ethical and organizational responsibilities (Zucconi & Zucconi, 2018). In the African context, studies have highlighted the evolving role of corporate activities, including those within the education sector, in addressing pressing societal challenges. Universities, therefore, are positioned to leverage their

communication channels and organizational capacity to mobilize their communities for impactful health interventions, reinforcing their role as socially conscious entities.

2.3.6 Factors Influencing Blood Donation Behavior: Demographics and Motivations

In order to create recruiting and retention tactics that work, it is essential to understand what makes people want to donate blood and what makes them want to stay away. There are several factors that might be considered, according to studies. These factors include demographic, social, and psychological aspects. Altruism is a frequently mentioned reason; people act out for wanting to help other people and contribute to saving lives (Misje et al., 2009). But other things like social pressure, personal experience with blood transfusion and civic duty also have a huge impact.

It has been found that the demographic characteristics affect blood donation behavior, especially age has been shown to have a significant influence citation. Researchers have shown that the participation rate varies significantly from gender to gender; for instance, some researchers have found that blood donation drives had a higher participation rate among female students than among male students (Misje et al., 2009). There may be several factors behind such gendered participation rates, such as different eligibility requirements for health, different impressions about the health in society, and different motivations. For example, perceived health benefits, peer influence, and effective marketing strategies are found to be important factors in motivating millennials to donate in Africa, and fear of needles and lack of awareness are cited as barriers to donation (Dabula, 2019). Similarly, in Kenyan university students, there were huge variations in knowledge, attitudes and practices (KAP) about blood donation; gaps in knowledge on some aspects affected the willingness to donate blood (Sharma et al., 2020). The results highlight the importance of

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an appeal that is universal, but at the same time have to be tailored to address different starting points and different types of barriers among different demographics.

2.4 Theoretical Framework

This section presents the two theories underpinning the study—Social Cognitive Theory and the Technology Acceptance Modelsummarising their core constructs, prior applications, and direct relevance to social media's influence on student participation in blood donation.

2.4.1 Social Cognitive Theory

Social Cognitive Theory (SCT) holds that people learn and regulate their behaviour through observation of their environment, direct experience, media exposure, and the influence of others (Bandura, 1986). Because social media is itself an environment in which students routinely observe the behaviours, attitudes, and outcomes of others, SCT offers a strong lens for explaining how exposure to blood-donation content translates into donation behaviour.

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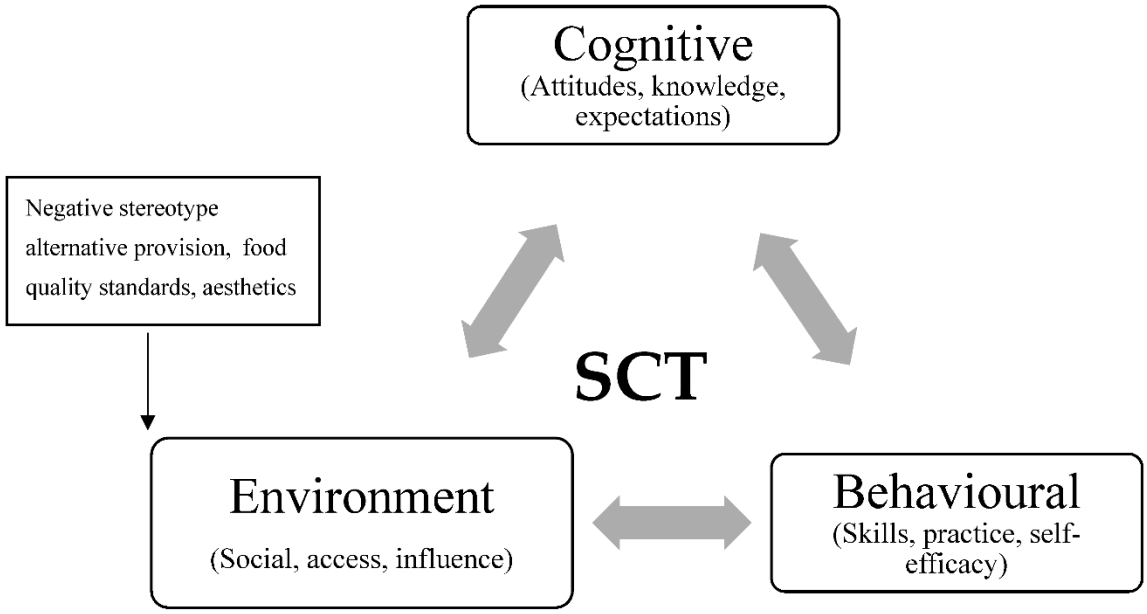


Figure 1: Social Cognitive Theory

Source: Bandura (1986)

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Three SCT constructs are especially relevant here. First, self-efficacy—individuals' belief in their capacity to perform a behaviour - can be strengthened when students encounter successful blood-donation stories on social media, raising their own intention to donate (Bandura, 1986). Second, vicarious (observational) learning occurs when students see peers donate and receive social recognition for it on platforms such as Instagram and Facebook, prompting similar behaviour; campaigns that pair donor photos and videos with testimonial captions are a direct application of this mechanism. Third, outcome expectations mean that students are more likely to donate when social media content convinces them the act will save lives or contribute to a worthy cause (Bandura, 1986).

SCT also highlights environmental and reinforcement influences: social media platforms function as spaces where social norms around donation are formed and reinforced, and campaigns that publicly recognise donors (through certificates, shout-outs, or shared posts) draw on both internal motivations (helping others) and external reinforcement to sustain participation (Bandura, 1986). Applied to this study, SCT suggests that social media can drive student blood donation through observational learning, self-efficacy, and reinforcement, but that its effect depends on students' pre-existing attitudes and personal circumstances, such as fear of needles.

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2.4.2 Technology Acceptance Model (TAM)

The Technology Acceptance Model (TAM) explains technology use through two constructs: perceived usefulness (PU) and perceived ease of use (PEOU) (Davis, 1989). Applied here, TAM helps explain the extent to which students at Mount Kenya University

adopt and engage with social media platforms specifically to access and act on blood-donation information.

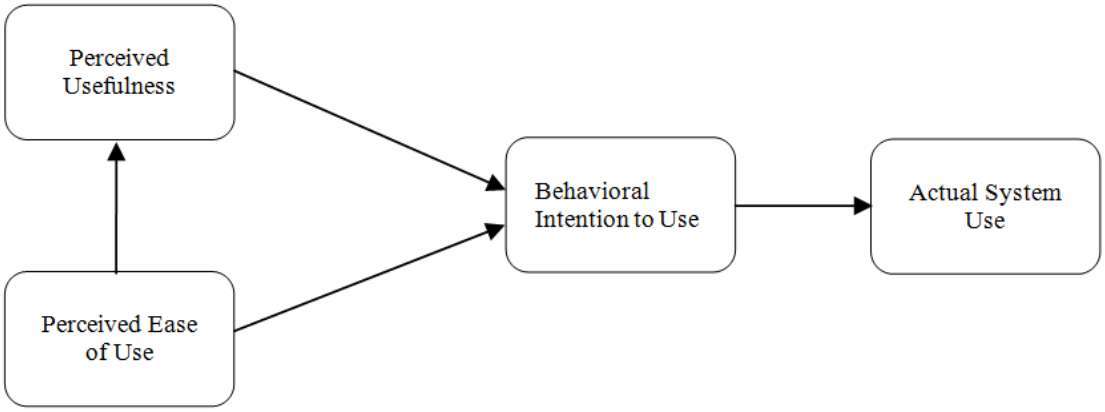


Figure 2: Technology Acceptance Model (TAM)

Source: Davis, (1989),

Perceived usefulness refers to the extent to which a student believes social media provides sufficient, accessible information on blood donation without needing traditional channels; students who find social media content tailored and informative are more likely to engage with it (Davis, 1989). Perceived ease of use refers to how much effort students believe is required to find drive information, register, or otherwise act on a social media post; even useful content will be underused if the accompanying calls to action are cumbersome (Davis, 1989).

TAM theory further holds that PU and PEOU jointly shape an attitude toward using a technology, which in turn shapes behavioural intention: students who see social media blood-donation content as both useful and easy to act on are more likely to intend to participate, and positive emotional responses to that content reinforce this intention for future campaigns (Davis, 1989).

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TAM2, an extension of the original model, adds social influence and facilitating conditions as further predictors of use (Venkatesh & Davis, 2000). Social influence captures the pressure students feel from peers and family to act on a campaign; on social media, this operates visibly through likes, shares, and comments that broadcast peer participation and encourage others to follow. Facilitating conditions such as stable internet access, simple registration systems, and institutional support for social media campaigns, determine whether students who are otherwise willing can actually convert intention into donation. Finally, behavioural intention, defined as a student's willingness to act based on their attitudes and perceptions of usefulness and ease of use, is associated with actual technology use and, by extension, actual blood donation behaviour. Taken together, TAM implies that social media campaigns are more likely to convert intention into participation when content is perceived as both useful and easy to act on, and when facilitating conditions and social influence are actively cultivated.

Overall, TAM provides a complementary lens to SCT: while SCT explains how observation and reinforcement shape donation behaviour, TAM explains why students choose to engage with the social media platforms carrying that content in the first place, together offering a fuller account of how social media translates into student participation in blood donation.

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2.5 Conceptual Framework

According to Kombo and Tromp (2009), a conceptual framework is a combination of varied concepts obtained from related areas of a survey that configure a presentation. It is an instrument intended to aid researchers to communicate about a situation of enquiry. The variables of this study are as shown in Figure 3.

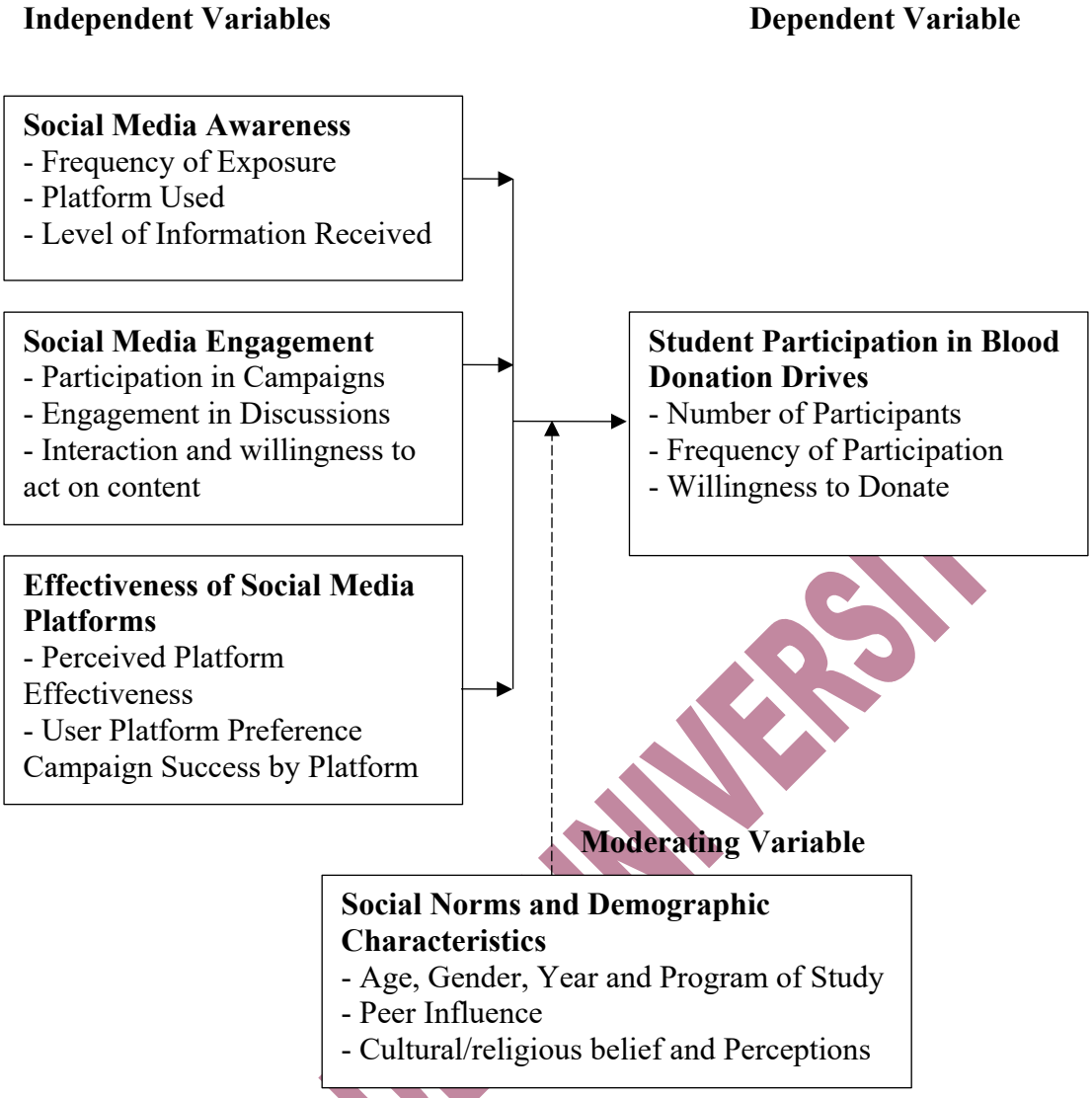


Figure 3: Conceptual Framework

As depicted in Figure 3, the study conceptualised three independent variables—social media awareness, social media engagement, and the effectiveness of social media platforms —as jointly influencing the dependent variable, student participation in blood donation drives. Social media awareness, comprising frequency of exposure, platform used, and level of information received, corresponds most directly to the observational component of Social Cognitive Theory: it is the raw exposure through which students first encounter donation-related content. Social media engagement, covering active participation in campaigns, discussion, and willingness to act, draws on both SCT's constructs of vicarious learning and reinforcement and TAM's construct of perceived usefulness, since students

who find content useful are more likely to engage with it. Effectiveness of social media platforms, capturing perceived platform effectiveness, user preference, and campaign success by platform, reflects TAM's perceived ease-of-use and facilitating-conditions constructs, as students gravitate toward platforms that make it easiest to access and act on donation information. Social norms and demographic characteristics (age, gender, year and programme of study, peer influence, and cultural or religious beliefs) were conceptualised as moderating this relationship, consistent with SCT's emphasis on environmental and personal factors shaping behaviour. This framework guided the study's hypothesis that awareness alone would be insufficient to drive participation, and that engagement and platform effectiveness would matter more—a hypothesis subsequently supported by the study's correlation and regression findings in Chapter Four.

2.6 Research Gap Analysis

Despite the expanding body of literature on social media and health-related behaviour, comprehensive research specifically on blood donation remains limited. Existing studies using social media data for health surveillance, such as Cavazos-Rehg et al. (2020) and Moorhead et al. (2018), have analysed the prevalence of health-related posting (for instance, on substance use) without examining whether the content of such posts, or engagement with it, translates into offline behaviour change—the same gap this study addressed for blood donation. Viwattanakulvanid and Chan (2022) faulted the inefficiency of awareness-raising programmes targeting youth during blood donor campaigns and recommended greater use of platforms like Facebook, while Finda (2022) found that misconceptions about voluntary blood donation in Tanzania could be addressed through mass and social media, but neither study empirically tested which specific social media mechanisms—awareness, engagement, or platform choice—actually predict participation.

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Closer to this study's context, Moore et al. (2020) examined variables influencing voluntary blood donation among university students in Thika, Kenya, and found that although social media was a popular communication channel, only 36.4% of participants had actually donated blood—documenting the awareness-to-action gap without explaining it. Adebayo and Yusuff (2018) and Mwangi and Ochieng (2022) identified inhibitions such as the spread of misinformation, limited access to credible information, and varying digital and health literacy among students, but stopped short of testing these against actual participation outcomes. This study addressed these gaps by empirically distinguishing awareness, engagement, and platform effectiveness as separate predictors of participation among MKU students, thereby clarifying which specific social media mechanisms Kenyan universities and blood transfusion services should prioritise when designing donor-mobilisation campaigns.

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2.7 Chapter Summary

The impact of social media on student involvement in blood donation campaigns has been the subject of previous research, which this chapter summarized. Notable frameworks that emerged from the theoretical examination include TAM and Social Cognitive Theory (SCT). Examining student knowledge of blood donation campaigns, the correlation between social media activity and involvement, and the efficacy of different platforms in encouraging participation are all part of the empirical review. It was in the literature study that the new gaps were also found.

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CHAPTER THREE: METHODOLOGY

3.1 Introduction

In this section, we detail the steps used to learn how students' usage of social media affected their involvement in blood donation campaigns. The methodology is crucial as it provides a systematic approach to collecting, analyzing, and interpreting data, which ultimately aids in answering the research questions. The chapter outlines the research design, the target population, sample size, sampling technique, research instruments, and data analysis methods. Additionally, ethical considerations related to the study was highlighted, ensuring that the research is conducted with integrity and respect for participants.

3.1.1 Study Area

This study was conducted at Mount Kenya University (MKU), a private university located in Thika, Kiambu County, Kenya. MKU was selected as the study site because of its large and diverse student population (it graduated 7,974 students at its December 2024 graduation ceremony), its active engagement in community and health initiatives, and its robust social media presence (Thika Town Today [3T], 2024). MKU's demographic profile and its active participation in public health campaigns, including annual blood donation drives, made it a rich and relevant setting for investigating how social media shapes student participation in such activities (Sharma et al., 2020).

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3.2 Philosophical Paradigm

The study was located within a pragmatist research paradigm. Pragmatism holds that the research problem, rather than allegiance to a single epistemological position, should determine the methods used, and it explicitly supports combining quantitative and qualitative approaches within a single study (Creswell & Plano Clark, 2018). This paradigm was appropriate because the study required both statistically generalisable measures of

awareness, engagement, and platform effectiveness and an in-depth, contextual understanding of why students responded to social media content in particular ways (Tashakkori & Teddlie, 2010).

Consistent with the pragmatist paradigm, the quantitative component used a cross-sectional survey design, allowing data to be collected from a sample of students at a single point in time and relationships among the study variables to be examined (Creswell, 2014). The qualitative component used semi-structured interviews to explore participants' experiences, perceptions, and reasons regarding blood donation and social media use, while allowing the researcher to probe responses for greater depth (Bryman, 2016).

The combined design enabled the researcher to triangulate quantitative and qualitative evidence and develop a more comprehensive understanding of the influence of social media on student participation in blood donation drives (Tashakkori & Teddlie, 2010).

3.3 Research Approach

In line with this pragmatist paradigm, the study adopted a mixed-methods research approach, combining quantitative and qualitative methods to provide a comprehensive understanding of the research problem. This approach was chosen because integrating numerical data (quantitative) with narrative data (qualitative) provided a more complete analysis than either approach alone, allowing for triangulation and deeper exploration of the research questions (Creswell & Plano Clark, 2018). This combination enabled the study not only to identify statistical relationships among the variables but also to understand, from participants' own perspectives, why such relationships existed (Bryman, 2016).

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3.4 Population

The population of this study comprised all undergraduate students enrolled at Mount Kenya University (MKU), Thika Campus, estimated at approximately 50,000 students across the university's nine academic faculties at the time of the study (Office of the Registrar, Mount Kenya University, 2025).

3.5 Target Population

Of the approximately 50,000 students enrolled at MKU Thika Campus, undergraduate students constitute the large majority, and it is this figure of 50,000 that was used, together with standard sample-size determination procedures, to calculate the study's target sample of 377–378 participants (see 3.8).

3.6 Sampling Technique

For the quantitative component, a stratified random sampling technique was used to ensure that the sample adequately represented the diverse academic composition of the MKU student population. Stratification involved dividing the population into relatively homogeneous subgroups (strata) before sampling, which enhanced representativeness and reduced sampling bias (Cohen, Manion, & Morrison, 2018). The university population was stratified according to its nine academic faculties, namely Education, Business, Health Sciences, Social Sciences, Law, Computing and Informatics, Pure and Applied Sciences, Engineering, Energy and the Built Environment, and Hospitality, Travel and Tourism Management (Mount Kenya University, 2025). This stratification was methodologically important because it enabled the study to capture potential variations in social media usage patterns and participation in health-related activities across academic disciplines; within

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each faculty, students were then selected at random using class lists to fill each stratum's proportional share of the sample.

For the qualitative component, a purposive sampling technique was used instead, since the aim was not statistical representativeness but information-rich cases. Fifteen interview participants were purposively selected from among the survey respondents based on their level of social media engagement and participation in blood donation activities, ensuring that both highly engaged and less engaged students were represented (Palinkas et al., 2015). The two techniques were therefore complementary: stratified random sampling supported generalisable quantitative estimates, while purposive sampling supported an in-depth qualitative understanding of the reasons behind those estimates.

3.7 Sample Size

To ensure the reliability and validity of the study, a representative sample was drawn from the target population of students at the selected Kenyan private university. The required sample size was determined using the standard sample size determination procedure for large populations, at a 95% confidence level and a 5% margin of error. The sample size was calculated using the conventional formula for determining an appropriate sample from a finite population (Krejcie & Morgan, 1970; Singh & Masuku, 2014).

$$n = \frac{N \times Z^2 \times p(1-p)}{(N-1) \times e^2 + Z^2 \times p(1-p)}$$

Where:

N = total population (50,000)

Z = Z-value (1.96 for 95% confidence level)

p = estimated proportion of the population (0.5 for a maximum sample size)

e = margin of error (0.05)

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Using this formula, the sample size calculation yielded approximately 377 participants. This sample size provided an adequate basis for making inferences about the extent to which social media influenced students' awareness of and engagement with blood donation campaigns.

Participants from each faculty were randomly selected to meet the predetermined sample size. By ensuring that each subgroup was adequately represented in the sample, this approach enhanced the generalizability of the study findings (Cohen, Manion, & Morrison, 2018). Random selection of participants within each stratum helped to ensure that the diversity of the target population was accurately reflected while minimizing selection bias.

3.8 Data Collection Instruments

The research utilized a combination of qualitative and quantitative instruments to gather data effectively. For the quantitative component, a structured questionnaire (Appendix II) was developed, comprising closed-ended questions that assessed students' awareness of blood donation drives, their engagement with social media platforms, and their actual participation in blood donation events. Questions relating to social media use and blood donation were measured using Likert-scale items in the questionnaire. For the qualitative component, a semi-structured interview guide (Appendix III) was developed and used to conduct in-depth interviews with selected participants. The interviews included open-ended questions that enabled students to express their views, motivations, experiences, and challenges regarding blood donation campaigns.

3.9 Validity of the Instruments

A pilot study was conducted with 30 students—approximately 8% of the target sample of 378, in line with the common recommendation that a pilot sample fall between 5% and

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10% of the main study sample (Cohen, Manion, & Morrison, 2018)—to assess the feasibility and suitability of the research instruments. Pilot participants were selected through simple random sampling from faculties not included in the main stratified sample, to avoid contaminating the main study's respondent pool. The purpose of the pilot study was to identify potential problems related to the clarity, relevance, and comprehensibility of the questionnaire and interview questions (Bryman, 2016). Based on the feedback obtained, ambiguous items were reworded, redundant questions were removed, and the estimated completion time was adjusted before the questionnaire and interview guide were finalised for the main data collection exercise.

3.10 Reliability of the Instruments

Reliability was essential in ensuring that the research instruments consistently measured the variables of interest. The reliability of the structured questionnaire was assessed using Cronbach's alpha, which measured the internal consistency among the questionnaire items (Tavakol & Dennick, 2011). A Cronbach's alpha coefficient of 0.70 or above was considered acceptable for establishing adequate reliability of the questionnaire scales.

For the qualitative interviews, reliability was enhanced by using consistent interviewing procedures, including standardized questions and prompts, to minimize interviewer effects (Bryman, 2016). In addition, the interviews were transcribed verbatim to maintain accuracy in data representation and to provide a complete record for analysis (Creswell & Poth, 2018). Inter-coder reliability was established during data analysis, whereby multiple research assistants independently coded the data using a structured codebook and subsequently compared their findings through consensus discussions to enhance consistency and minimize bias (O'Connor & Joffe, 2020).

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3.11 Data Collection Procedures

With a mixed-methods explanatory design in place, data collection was carried out in two consecutive phases (Creswell & Plano Clark, 2018). Data quality and procedural rigour were enhanced through the incorporation of a pilot study and the use of trained research assistants.

3.11.1 Quantitative Data Collection (Questionnaire)

Data collection proceeded in two stages. First, the questionnaire was piloted with 30 students as described in Section 3.8, and refined accordingly. Second, for the main study, the researcher, assisted by two trained research assistants, administered the structured questionnaire to the 378 sampled students.

The questionnaire was distributed physically in high-traffic areas on campus, including the library and student centres, to ensure broad and efficient reach across faculties. Research assistants remained available on-site to clarify any items respondents found unclear. This phase was completed within a four-week period to maintain a relatively consistent data collection context, yielding 348 valid, fully completed questionnaires out of the 378 targeted (Bryman, 2016).

3.11.2 Qualitative Data Collection (Interviews)

Following completion of the quantitative phase, the researcher conducted semi-structured interviews with the 15 purposively selected participants described in Section 3.5. Each interview followed the guide in Appendix III, covering participants' general knowledge of blood donation drives, the role of social media in promoting them, their own engagement with campaign content, and their views on the effectiveness of, and barriers facing, current campaigns. Interviews were conducted by the principal researcher in a private, pre-arranged

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location on campus and lasted 15–20 minutes each. With participants' consent, interviews were audio-recorded and later transcribed verbatim; brief field notes recorded non-verbal cues and the researcher's initial reflections to support the subsequent thematic analysis (Creswell & Poth, 2018).

3.12 Data Analysis and Presentation

Quantitative data obtained through the structured questionnaires was cleaned and coded before being analyzed using the Statistical Package for the Social Sciences (SPSS) version 28 (IBM Corp., 2021). Initially, descriptive statistics (frequencies, percentages, means, and standard deviations) was computed to summarize students' awareness, engagement, and participation rates (Pallant, 2020). Subsequently, inferential statistics was employed to test the relationships outlined in the objectives. Specifically, correlation analysis (e.g., Pearson's *r*) was used to examine the strength and direction of the relationship between social media engagement and participation, while multiple regression analysis was conducted to determine the predictive power of social media variables on donation behavior, controlling for other factors (Field, 2018).

Thematic analysis was used to examine the qualitative data, which was derived from verbatim transcriptions of interview notes, in accordance with the methodical six-phase technique described by Braun and Clarke (2006, 2022). The steps include getting to know the data, making some preliminary codes, looking for themes, evaluating possible themes, defining and labeling themes, and finally, writing up the findings. Using this method will guaranty that a comprehensive, thorough, and nuanced data analysis is conducted.

In this method, participants' experiences and viewpoints are enriched via the identification and analysis of data themes (Braun & Clarke, 2019). Participant comments

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bolstered the narrative presentation of the results, which served to highlight important themes and ideas.

Quantitative results are presented using tables, while qualitative findings are presented thematically with supporting participant quotations. The two strands were integrated at the interpretation stage through a triangulation protocol: for each objective, the quantitative result (e.g., a correlation or regression coefficient) was read alongside the corresponding interview theme to assess convergence or divergence, and both were then related back to the research gap identified in Chapter Two and interpreted through Social Cognitive Theory and the Technology Acceptance Model. This integration is presented in Chapter Four, Section 4.8.

3.13 Ethical Considerations

Ethical considerations were paramount in research involving human participants. The study adhered to internationally recognized ethical principles and institutional guidelines to ensure the protection of participants' rights, dignity, and welfare (World Medical Association, 2013). Official ethical clearance was obtained from the Institutional Scientific Ethics Review Committee (ISERC) at St. Paul's University (Appendix VI), a research permit was obtained from Kenya's National Commission for Science, Technology and Innovation, NACOSTI (Appendix VIII), and institutional authorisation to collect data was granted by Mount Kenya University (Appendix VII). These approvals confirm that the study complied with applicable institutional and national ethical requirements before data collection began.

All participants provided written informed consent before taking part (Appendix I). The consent form explained the purpose and procedures of the study, potential risks and benefits, participants' right to withdraw at any time without penalty, and the measures taken

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to protect their anonymity (Faden & Beauchamp, 1986). Participation throughout was entirely voluntary. Confidentiality and anonymity were strictly maintained throughout the study. All identifiable information was removed from the collected data, and participants (including the 15 interviewees) were assigned unique anonymised codes rather than their names. Digital data were stored on a password-protected computer, while physical documents were kept in a locked cabinet accessible only to the researcher. In line with applicable data protection requirements, the data will be retained for five years and scheduled for secure disposal thereafter (Saunders et al., 2015), and were used solely for the academic purposes of this study.

3.14 Summary

This chapter set out the study's pragmatist philosophical paradigm and the mixed-methods approach and cross-sectional/interview design that followed from it. It described the study area and population, the target population of MKU undergraduate students, and the stratified random and purposive sampling techniques used to draw the quantitative sample of 378 and the qualitative sample of 15, respectively. It detailed the data collection instruments and their validity and reliability, including the pilot study, and the step-by-step procedures followed for both the questionnaire and the interviews. Finally, it explained how quantitative and qualitative data were analysed and triangulated, and outlined the ethical safeguards—informed consent, confidentiality, anonymity, and institutional and national approvals—that governed the study throughout.

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CHAPTER FOUR: DATA PRESENTATION, ANALYSIS AND INTERPRETATION

4.0 Introduction

This chapter presents the empirical findings of the study examining the influence of social media on university student participation in blood donation drives at Mount Kenya University, Thika. The three main goals of the research are as follows: first, to determine how well students are aware of blood donation drives through social media; second, to determine which social media platforms are most effective at getting students involved; and third, to analyze the correlation between student engagement and participation on these platforms.

The chapter integrates quantitative data from 348 valid questionnaires and qualitative insights from 15 semi-structured interviews. Quantitative analysis employed descriptive statistics, Pearson correlation, multiple regression, and Friedman's test using SPSS version 28. The findings are discussed within the framework of Social Cognitive Theory (Bandura, 1986) and the Technology Acceptance Model (Davis, 1989), while being contextualized against existing literature on health communication and blood donation behavior.

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4.1 Response Rate

The study achieved a strong response rate, with 348 valid questionnaires available for analysis from the targeted sample of 378 students. This represents a 92.1% valid response rate, which is considered excellent for survey-based research (Bryman, 2016). The dedicated research assistants who helped with data collecting and the easy distribution of questionnaires throughout campus contributed to the excellent response rate.

4.2 Demographic information

4.2.1 Gender

Important research population features are revealed by the demographic makeup of respondents. Female students constituted the majority at 56.3% (n=196), while male students represented 43.7% (n=152). This gender distribution is consistent with the broader enrollment patterns at Mount Kenya University and similar private universities in Kenya, where female enrollment has been increasing steadily over recent years. The predominance of female respondents is noteworthy given that previous research has identified gender differences in blood donation behavior, with some studies suggesting higher participation rates among female students (Misje et al., 2009; Dabula, 2019). This demographic context provides a foundation for understanding the subsequent findings on awareness, engagement, and participation.

Table 1: Gender

		Frequency	Percent
Valid	Male	152	43.7
	Female	196	56.3
	Total	348	100.0

Source: Research Data (2026)

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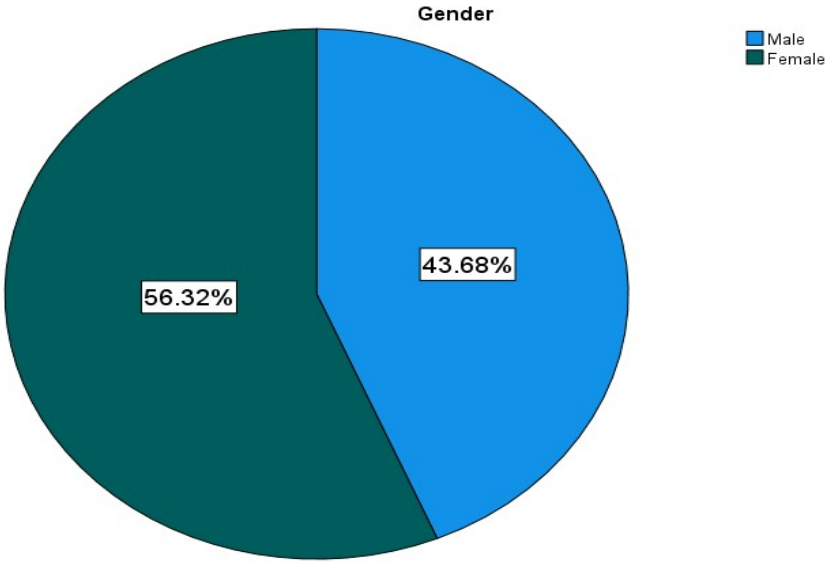


Figure 4: Gender

4.2.2 Age

The age distribution of respondents indicates that the majority of students fell within the 18 –24 years category (42.8%), followed by those aged 25–30 years (27.3%), below 18 years (20.7%), and above 30 years (9.2%). This age profile is typical of undergraduate populations and is significant because young adults represent a critical demographic for blood donation campaigns. As noted by Sharma et al. (2020), university students in this age bracket are often targeted as primary donors due to their health status, accessibility, and potential for establishing lifelong donation habits. The predominance of younger students also aligns with the Technology Acceptance Model's premise that younger individuals are more likely to adopt and engage with digital platforms, suggesting that this population is well-positioned for social media-based health interventions (Venkatesh & Davis, 2000).

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Table 2: Age

		Frequency	Percent
Valid	Below 18 years	72	20.7
	18–24 years	149	42.8
	25–30 year	95	27.3
	Above 30 years	32	9.2
	Total	348	100.0

Source: Research Data (2026)

4.2.3 Year of study

Regarding year of study distribution, first-year students comprised 27.3% (n=95), followed by third-year students at 26.1% (n=91), second-year students at 23.6% (n=82), fifth-year students at 17.5% (n=61), and postgraduate students at 5.5% (n=19). No fourth-year undergraduates appear in the sample; this reflects the academic calendar of MKU's programme structure at the time of data collection, when the cohort that would have constituted fourth-year students in several of the sampled faculties (including Health Sciences and Engineering programmes that run five-year curricula) was away on mandatory industrial attachment or clinical placement and therefore not accessible on campus during the four-week data collection window. Their absence is a limitation of the sampling window rather than of the sampling design, and is addressed further in Section 1.10 (Limitations and Delimitations). The relatively even distribution across the remaining years still provides a reasonably balanced perspective on how social media engagement and blood donation participation vary across stages of academic progression.

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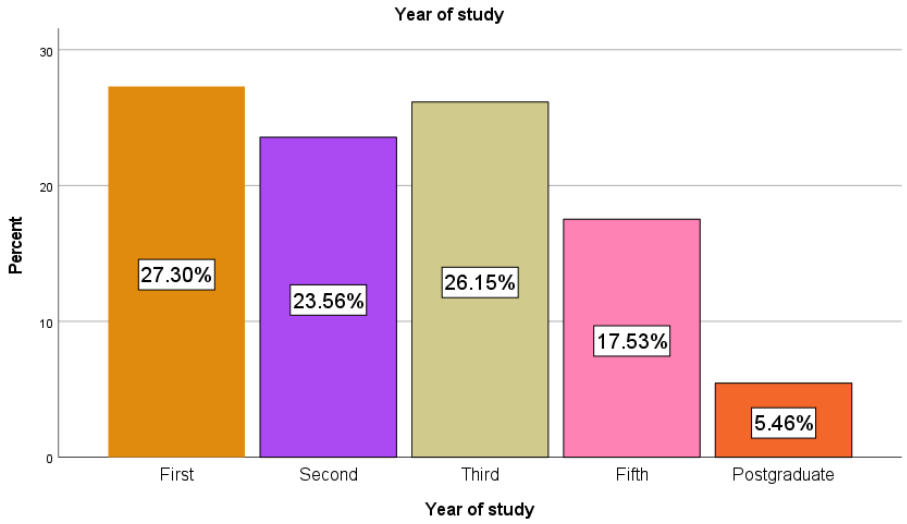


Figure 5: Year of study

4.3 Student Awareness of Blood Donation Drives through Social Media

The findings indicate that students possess a moderate level of awareness regarding blood donation drives organized at their university, with a mean score of 3.57 (SD = 1.39). This score, sitting slightly above the midpoint of the five-point scale, suggests that while most students are aware of the existence of blood donation activities, this awareness is not particularly strong or widespread. The standard deviation of 1.39 indicates considerable variation in responses, meaning that while some students report high awareness, a substantial number report limited or no awareness. These differences are in line with what Sharma et al. (2020) discovered: that there are large disparities in blood donation awareness and understanding among university students in Kenya. Given that the institution's blood donation programs are more often than not seasonal rather than continuous, the modest level of awareness may be a reflection of that (Muchoka, 2025). Rather of maintaining constant awareness, event-driven campaigns see ebbs and flows, leaving many students in the dark outside of designated driving times.

The majority of students (3.57) also said that social media was the primary source from which they learnt about blood donation drives. This is in line with the reasonable level of

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awareness among students. Although not all students use social media as their main source of first knowledge, this research does show that it is the case for a considerable number of students. The similarity in the mean and standard deviation to the prior item indicates a continuous pattern: social media has a significant role in spreading information about blood donation, although it is not always successful. While conventional channels and peer networks still have an impact, studies by Njoroge et al. (2021) and Kimani and Muriithi (2021) have shown that social media is playing an increasingly important role in health communication among university students in Kenya. The variation in responses (SD = 1.39) implies that some students rely heavily on social media for health information, while others may depend more on university notices, posters, or word-of-mouth from friends and classmates.

The frequency with which students encounter blood donation posts on social media yielded the lowest mean score of all awareness items, at 3.20 (SD = 1.40). This score suggests that students encounter such content only occasionally rather than regularly. The relatively high standard deviation (1.40) indicates substantial disagreement among respondents, with some students frequently seeing donation-related content while others rarely do. This pattern of intermittent exposure is concerning from a health communication perspective, as research consistently demonstrates that repeated exposure is necessary for message retention and behavior change (Shaw et al., 2017). In the Kenyan setting, Mwangi et al. (2019) found that social media health campaigns had limited reach due to infrastructure restrictions, such as algorithmic filtering and irregular campaign timing. If students don't hear about blood drives very often, they may not be aware of when they are and be less likely to donate blood. those on students' health may have a harder time competing for attention than those

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about entertainment or personal experiences due to the unpredictable accessibility of material on social media sites, where algorithms favor highly engaging content.

Table 3: Student Awareness of Blood Donation Drives through Social Media

	N	Minimum	Maximum	Mean	Std. Deviation
I am aware of blood donation drives organized at my university.	348	1.00	5.00	3.5718	1.39286
I first learned about the blood donation drives at my university through social media.	348	1.00	5.00	3.5661	1.38693
I frequently come across posts about blood donation drives on social media.	348	1.00	5.00	3.2040	1.40452
Social media is a key platform for me to learn about blood donation campaigns at my university.	348	1.00	5.00	4.1724	1.22375
Valid N (listwise)	348				

Source: Research Data (2026)

A mean score of 4.17 (SD = 1.22) for the assertion that social media plays a crucial role in spreading awareness about blood donation campaigns stands out in this area. This score, which is above the median of 3.0 and close to "Agree," shows that students strongly believe that social media is an important medium for health information. There seems to be more agreement among respondents on this topic, with a smaller standard deviation of 1.22 compared to other items. This strong endorsement of social media's potential as an information channel is consistent with the Technology Acceptance Model's (TAM) concept of perceived usefulness (Davis, 1989).

Students clearly recognize the value of social media platforms for health-related information seeking, even if their actual exposure to blood donation content remains limited. This disconnect between perceived usefulness and actual exposure represents both

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a challenge and an opportunity for health communicators. The challenge lies in the apparent gap between students' favorable attitudes toward social media as a health information source and their actual experience of receiving blood donation content. The opportunity is that because students already view social media as a key platform, they may be receptive to more frequent and strategically designed campaigns that leverage this existing positive perception.

4.4 Social Media Engagement

All student mean scores were higher than 3.80 on the five-point scale, indicating consistently high levels of social media participation. An average score of 4.61 (SD=0.91) was recorded for the assertion that social media aids in raising blood donation awareness, which was the most strongly agreed upon. Students' near-universal agreement that social media may help them better grasp the importance of blood donation is reflected in this extraordinarily high score. There seems to be a lot of agreement on this subject, with few disagreements, based on the low standard deviation of 0.91. This finding aligns with the Technology Acceptance Model's (TAM) concept of perceived usefulness, demonstrating that students firmly believe in the value of social media as a health communication tool (Davis, 1989). Consistent with the findings of Moorhead et al. (2018), who showed that social media improves health awareness and allows two-way contact, there is significant support for the function of social media in raising awareness. It also resonates with findings by Kimani and Muriithi (2021) in the Kenyan context, who observed that social media platforms are instrumental in raising awareness about health campaigns among university students.

Students reported substantial interaction with blood donation content, with a mean score of 4.03 (SD = 1.53) for engaging in behaviors such as liking, sharing, or commenting. This

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relatively high mean indicates that a significant proportion of students actively engage with donation-related content rather than passively consuming it. However, the substantial standard deviation (1.53) reveals considerable variation in engagement levels. While some students frequently interact with content, others rarely or never do. This variability may reflect differences in social media usage patterns, personal interest in health issues, or varying levels of exposure to donation content. The finding that active engagement is common among students is encouraging from a health communication perspective, as engagement behaviors such as sharing and commenting extend the reach of campaigns through social networks. Previous studies have shown that active social media engagement influences user loyalty (Wirtz & Daiser, 2020) and can lead to commitment to a cause (Rana & Sharma, 2024), suggesting that users who interact with blood donation content may become more committed to the cause.

Similarly, the motivational effect of interaction with blood donation posts was high with an average of 4.11 (SD = 1.49). This suggests that students are encouraged and inspired to take part in donation drives when they see interesting content. Well-designed social media contents can have influence on behavioral intention, which is consistent with the constructs of Social Cognitive Theory (Bandura, 1986) indicated in this strong agreement. Students who feel that donation of blood will bring positive results have positive attitudes towards donation. Students with positive expectations of positive outcomes after blood donation have positive attitudes towards blood donation. Rather than that, the positive outcomes that are promoted through social media can be effective in building students' outcome expectations, thus enhancing their motivation to participate. The large standard deviation (1.49) suggests that although most students consider donation content motivating, it is not enough to persuade all of them; some students may need more persuasive or

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different messages to change their intentions. In a similar study, Zhang et al. (2020) have also shown that young people who interacted with health-related social media posts were more likely to engage in offline activities, further emphasizing the relationship between online interactions and offline behaviors.

The assessment of content quality yielded the lowest mean in this section, at 3.81 (SD = 1.67), for the statement that blood donation content is engaging and informative. While this score remains above the scale midpoint, it signals that students perceive room for improvement in the quality of information they encounter. The high standard deviation (1.67) points to polarized opinions among respondents. Some students find the content highly engaging and informative, while others consider it lackluster or unappealing. This divergence may reflect differences in content quality across platforms, inconsistency in messaging, or varying expectations among students. It may also suggest that current social media campaigns do not consistently meet students' expectations for compelling, relevant content. According to Ezeh and Mburu (2017), appealing to specific audiences via social media for health advocacy purposes requires both factual accuracy and interesting presentation. Universities and blood collection organizations can benefit from putting more energy into producing engaging and informative information by using images, personal tales, and interactive aspects. This study's middling evaluation of content quality is a good indicator of this.

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Table 4: Social Media Engagement

	N	Minimum	Maximum	Mean	Std. Deviation
I have interacted with social media content related to blood donation (e.g., liking, sharing, or commenting).	348	1.00	5.00	4.0259	1.53045

Engaging with blood donation posts on social media motivates me to participate in blood donation drives.	348	1.00	5.00	4.1092	1.48756
I believe that social media helps increase my awareness of the importance of blood donation.	348	2.00	5.00	4.6121	.90568
The social media content related to blood donation is engaging and informative.	348	1.00	5.00	3.8103	1.67322
Valid N (listwise)	348				

Source: Research Data (2026)

The strong motivation scores (4.11) suggest that engagement is not merely passive consumption but a catalyst for action. This finding has important implications for campaign design: content that encourages interaction and evokes emotional responses may be more effective in converting awareness into participation than purely informational posts. The motivational impact appears to be driven by both the content itself and the social context in which it is consumed. When students see their peers engaging with blood donation content—through shares, comments, or visible participation in donation events—they experience vicarious reinforcement, another key construct of Social Cognitive Theory (Bandura, 1986). This vicarious experience reinforces the perceived benefits of donation and strengthens students' own intentions to participate.

The standard deviations observed across the engagement items provide valuable insights into the diversity of student experiences. The relatively lower standard deviation for awareness-building (0.91) suggests consensus on social media's informational value, while the higher standard deviations for interaction (1.53) and content quality (1.67) indicate divergent experiences. These variations may be attributed to differences in social media

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usage patterns, platform preferences, and the extent to which students follow university-affiliated accounts or health-related pages. Students who actively follow institutional accounts and health organizations are likely to encounter more frequent and higher-quality content, leading to greater engagement and more positive perceptions. Conversely, students who rely on general news feeds may encounter donation content only sporadically, resulting in lower engagement and less favorable content evaluations.

4.5 Effectiveness of Social Media Platforms

The findings reveal a pattern of moderate awareness levels coupled with strong recognition of social media's potential as an information channel. Students reported moderate awareness of blood donation drives at their university, with a mean score of 3.57 (SD = 1.39). This score, positioned slightly above the scale midpoint of 3.00, suggests that while most students possess some knowledge of donation activities, this awareness is not particularly robust or widespread. The standard deviation of 1.39 indicates substantial variation in responses, meaning that awareness levels differ considerably across the student population.

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Some students report high levels of awareness while others remain largely uninformed. This variability may reflect differences in social media usage patterns, levels of engagement with university communications, or personal interest in health-related activities. Sharma et al. (2020) documented similar gaps in blood donation knowledge and awareness among Kenyan university students, noting that while some students were well-informed, a significant proportion lacked adequate understanding of donation opportunities and procedures. Even if present communication efforts are reaching some students, they are not reaching all of them, according to the modest awareness found in this research.

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Students reported that they first learned about blood donation drives through social media at a moderate level, with a mean of 3.57 (SD = 1.39). The nearly identical score to the previous item suggests that social media serves as a primary information source for a notable portion of students, but it is not the sole or dominant channel. The matching standard deviation (1.39) indicates that students' experiences with social media as an initial information source vary widely. This finding aligns with Njoroge et al. (2021), who observed that while social media has become increasingly important for health communication among Kenyan university students, traditional channels and peer networks continue to play significant roles. Students who are active on social media or who follow accounts associated with their institution are more likely to see contribution material on these platforms. Other students may discover about drives via university emails, posters around campus, or word of mouth from classmates and friends.

The frequency with which students encounter blood donation posts on social media yielded the lowest mean score at 3.20 (SD = 1.40). This score, just above the midpoint, indicates that students encounter such content only occasionally rather than regularly. The relatively high standard deviation (1.40) reveals considerable disagreement among respondents, with some students frequently seeing donation-related content while others rarely encounter it. This pattern of inconsistent exposure is concerning from a health communication perspective, as research demonstrates that repeated exposure is essential for message retention and behavior change (Shaw et al., 2017). In the Kenyan context, Mwangi et al. (2019) identified infrastructural limitations and algorithmic filtering as factors that restrict the reach of social media health campaigns. When blood donation content appears only sporadically in students' feeds, it competes with a vast array of other content, potentially

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being overlooked. The low frequency of exposure may mean that students miss critical information about upcoming drives, reducing their ability to plan for participation. This discovery implies that the present methods of communication could not be making blood donation campaigns as visible as they should be, which would reduce their effectiveness.

Table 5: Effectiveness of Social Media Platforms

	N	Minimum	Maximum	Mean	Std. Deviation
Facebook is the most effective social media platform for promoting blood donation drives at my university.	348	1.00	5.00	4.1897	1.49686
Instagram is the most effective social media platform for promoting blood donation drives at my university.	348	1.00	5.00	4.0172	1.55578
Twitter is the most effective social media platform for promoting blood donation drives at my university.	348	1.00	5.00	3.9454	1.59968
WhatsApp is the most effective social media platform for promoting blood donation drives at my university.	348	1.00	5.00	4.0632	1.53030
Valid N (listwise)	348				

Source: Research Data (2026)

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The assertion that social media plays a crucial role in spreading awareness about blood donation campaigns stands out with an extraordinarily high mean score of 4.17 (SD = 1.22). This score, well above the midpoint and approaching "Agree," indicates strong student agreement that social media serves as a vital channel for health information. There seems to be less disagreement among respondents on this topic, as seen by the smaller standard deviation (1.22), in comparison to the other questions. This resounding support for social

media's information-gathering capabilities is in line with the idea of perceived utility as proposed by Davis (1989) in the Technology Acceptance Model. Even though students don't encounter much blood donation material on social media, they nevertheless understand the importance of these platforms for accessing health-related information. Students see the potential of social media but aren't getting the material they need to fully experience it, as shown by the large disparity between their high perceived usefulness (4.17), moderate awareness (3.57), and low frequency of exposure (3.20). This is in line with the Technology Acceptance Model's broader premise (Davis, 1989): for technology to be valuable, users need access to relevant and easily digestible material in addition to its perceived usefulness.

4.6 Participation in Blood Donation Drives

According to the results, people believe that social media has a significant impact on their giving habits, and they also report rather high levels of engagement. With a mean score of 3.91 (SD = 1.64), students reported having participated in blood donation campaigns at their institution. A large percentage of students have donated blood at least once, according to this score, which is over the scale's middle. However, the substantial standard deviation of 1.64 indicates wide variation in participation experiences: while some students have donated multiple times, others have never participated. This pattern is consistent with findings from other contexts where university students represent a significant but not universally engaged donor pool. Studies by Alsalmi et al. (2019) found that while many university students donate blood, the majority tend to make single rather than repeat donations. The mean of 3.91 in this study may reflect a mix of regular donors and first-time or non-donors, with the high standard deviation capturing this diversity. This finding also aligns with Moore et al. (2020), who investigated factors influencing voluntary blood donation practices among university students in Thika, Kenya, and found that although

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social media was preferred communication channel, only 36.4% of participants had actually donated blood. The relatively higher mean in this study (3.91) could be explained by the fact that it was conducted in the context of Mount Kenya University's active blood donation campaigns, where students collectively participated in major drives like the 2024 national drive, which collected over 640 units of blood (Thika Town Today, 2024).

An average score of 3.75 (SD=1.71) shows that students admitted that social media postings impact their choice to take part in blood donation programs. While this score is above the midpoint, it is the lowest among the participation items, suggesting that while social media does influence decisions, other factors also play significant roles. The high standard deviation of 1.71 indicates considerable variation in the perceived influence of social media: for some students, social media posts are highly influential, while for others, they have minimal impact. This confirms what many have suspected: that social media has a mixed impact on people's propensity to give. Perceived health advantages, peer influence, and marketing methods were among the numerous elements that Dabula (2019) found to persuade millennials in Africa to donate blood, with social media being only one of many. Similarly, Misje et al. (2009) discovered that gender is a major demographic factor influencing donation behavior; students who identify as female are more likely to engage than students who identify as male. The moderate mean for social media influence suggests that universities must consider a holistic approach to encouraging donation that combines social media campaigns with other strategies such as peer education, campus events, and addressing practical barriers like convenience and fear of needles (Ngwenya & Dlamini, 2019).

The strongest agreement in this section was observed for the statement that social media campaigns have encouraged more frequent participation, with a mean of 4.19 (SD = 1.41).

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This high score indicates that students perceive social media as having a positive, reinforcing effect on their donation frequency. Rather than merely raising initial awareness, social media campaigns appear to sustain and increase engagement over time. The relatively lower standard deviation (1.41) compared to other items suggests more consensus on this point, with most students agreeing that campaigns have encouraged repeated participation. This finding is significant because blood collection organizations face challenges not only in recruiting first-time donors but also in retaining them for repeat donations (Eder, 2012). Donor retention and recruitment are both aided by campaigns, according to the perceived efficacy of social media in promoting recurrent involvement. This is in line with the findings of Veldhuizen and Doggen (2018), who observed the influence of social media on the donor retention efforts of blood collection organizations, and Sümnig et al. (2018), who discovered that social media engagement techniques enhanced the recruitment and motivation of blood donors.

Students expressed strong agreement that social media plays a significant role in motivating students to donate blood, with a mean of 4.15 (SD = 1.45). This high score, approaching "Agree," suggests near-consensus among students that social media is a powerful motivational tool for health behaviors. The standard deviation of 1.45 indicates moderate variation, but the overall pattern is clear: students recognize social media's capacity to influence health-related decisions. This perception is consistent with the Technology Acceptance Model's (TAM) emphasis on perceived usefulness (Davis, 1989). Students perceive social media as not only useful for obtaining information but also for motivating action. The motivational aspect of social media may operate through several mechanisms: exposure to peer participation creates social norms favoring donation, personal stories evoke empathy and altruistic responses, and calls to action provide clear behavioral

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prompts. The high motivational ratings in this study suggest that social media campaigns are achieving their persuasive goals, at least in terms of influencing intentions and motivation.

Students also expressed strong willingness to participate in more drives if campaigns were more frequent and engaging, with a mean of 4.19 (SD = 1.39). This statement, tying together frequency and engagement, received one of the highest ratings, indicating that students see room for improvement in current campaigns and would respond positively to enhanced efforts. The relatively low standard deviation (1.39) suggests broad agreement that better campaigns would lead to greater participation. This finding has important practical implications: students are not merely passive recipients of campaigns but are actively expressing their preferences and willingness to engage more if conditions improve. Zhang et al. (2020) discovered that young people who engaged with health-related social media postings were more likely to participate in offline activities. This supports the idea that producing more and better content might lead to higher participation rates. The demand-side view is borne up by the desire to engage more in the event that campaigns are improved; students are prepared to give, but they want more convincing and regular encouragement to do so.

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The values in Table 7 are mean agreement scores on the study's five-point Likert scale (1 = Strongly Disagree to 5 = Strongly Agree), not counts of how many times a student donated. The first item ("I have participated in a blood donation drive organized by my university"), for instance, records how strongly, on average, students agreed that they had donated at least once (mean = 3.91), not the number of donations made; a score above 3.00 indicates that most respondents leaned toward agreement. The remaining items similarly

measure the strength of agreement with statements about social media's influence on the decision to participate, on repeat participation, on motivation, and on willingness to participate more if campaigns improved.

Table 6: Participation in Blood Donation Drives

	N	Minimum	Maximum	Mean	Std. Deviation
I have participated in a blood donation drive organized by my university.	348	1.00	5.00	3.9052	1.63523
My decision to participate in blood donation drives is influenced by social media posts.	348	1.00	5.00	3.7500	1.71386
Social media campaigns have encouraged me to participate in blood donation drives more frequently.	348	1.00	5.00	4.1868	1.41101
I believe that social media plays a significant role in motivating students to donate blood.	348	1.00	5.00	4.1494	1.44668
I would participate in more blood donation drives if social media campaigns were more frequent and engaging.	348	1.00	5.00	4.1897	1.38901
Valid N (listwise)	348				

Source: Research Data (2026)

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4.7 Inferential Analysis

4.7.1 Correlations

The study's variables are shown to be significantly related to one another according to the correlation analysis. One of the most striking and robust findings is the very significant

positive relationship ($r = 0.797$, $p < 0.01$) between involvement in blood donation campaigns and social media activity. Students are far more likely to take part in blood donation drives if they engage with blood donation information in a more active way. The robustness of this correlation implies that engagement is more than just a synonym for involvement; it is an effective predictor of real actions. In line with previous research, this finding supports the findings of Zhang et al. (2020) that youth who engage with health-related social media posts are more inclined to take part in offline activities. Additionally, Wirtz and Daiser (2020) showed that active social media communication greatly influences user engagement and promotes cause loyalty.

A high positive association ($r = 0.698$, $p < 0.01$) is also seen between involvement and the perceived usefulness of social media sites. Donor participation in blood drives is higher among students who think social media is a good way to get others to donate blood. Perceived utility is the primary motivator for the acceptance and use of technology, according to the Technology Acceptance Model (TAM) (Davis, 1989). Students are more likely to take action based on health-related messages they receive on social media when they see these platforms as helpful resources.

A very strong positive correlation also exists between social media engagement and platform effectiveness ($r = 0.743$, $p < 0.01$). This suggests that students who engage more with donation content also perceive platforms as more effective, or conversely, that students who find platforms effective are more likely to engage with content. This reciprocal relationship may reflect a virtuous cycle where engagement enhances perceptions of usefulness, which in turn encourages further engagement.

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The relationship between awareness and participation reveals a weak, non-significant correlation ($r = 0.058$, $p = 0.283$). This finding is particularly noteworthy because it suggests that mere awareness of blood donation drives does not automatically translate into participation. Students may know about donation opportunities but fail to act unless they are actively engaged with the content and motivated through social influence. This finding has important implications for health communication strategies: awareness campaigns alone are insufficient; they must be accompanied by engagement strategies that convert awareness into action. This observation aligns with Moore et al. (2020), who found that while social media was a preferred communication channel, actual donation rates remained low, highlighting the gap between awareness and behavior.

Awareness shows a weak but significant positive correlation with social media engagement ($r = 0.119$, $p < 0.05$), suggesting that students who are more aware of donation drives also tend to engage more with donation content. However, the weakness of this correlation suggests that awareness and engagement are distinct constructs, and that campaigns need to address both separately.

The correlations between age and other variables reveal interesting patterns. Age shows significant negative correlations with all study variables: with awareness ($r = -0.110$, $p < 0.05$), with social media engagement ($r = -0.158$, $p < 0.01$), with platform effectiveness ($r = -0.286$, $p < 0.01$), and with participation ($r = -0.127$, $p < 0.05$). These findings indicate that younger students tend to have higher awareness, engage more with social media, perceive platforms as more effective, and participate more in blood donation drives compared to older students. The strongest negative correlation between age and platform effectiveness suggests that younger students are particularly likely to view social media as effective for health promotion, consistent with research showing that younger

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demographics are more active on and responsive to social media communications (Pew Research Center, 2024; Kemp, 2023). This age pattern has practical implications for campaign targeting: communication strategies should be tailored to younger students, who are more receptive to social media messaging and more likely to participate.

The non-significant correlation between awareness and platform effectiveness ($r = 0.090$, $p = 0.093$) suggests that awareness levels do not strongly predict how effective students perceive platforms to be. Students may recognize social media's potential regardless of their personal awareness levels, or conversely, awareness may be driven by factors other than social media use, such as campus posters or peer conversations.

From a theoretical perspective, these correlations strongly support both the Social Cognitive Theory and the Technology Acceptance Model. The strong engagement-participation relationship reflects SCT's emphasis on observational learning and social influence: students who engage with content and see peers participating are more likely to donate themselves (Bandura, 1986). The strong platform effectiveness-participation relationship supports TAM's proposition that perceived usefulness drives behavioral intentions (Davis, 1989). The non-significant awareness-participation relationship suggests that awareness alone, without the cognitive and social processes facilitated by engagement, is insufficient to drive behavior change. This highlights the importance of campaigns that use social modeling and interactive material to inspire and engage kids while also informing them.

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Table 7: Correlations

		Age	Awareness of Blood Donation	Social Media Engagement	Effectiveness of Social Media	Participation in Blood Donation

			Drives		Platforms	Drives
Age	Pearson Correlation	1	-.110*	-.158**	-.286**	-.127*
	Sig. (2-tailed)		0.041	0.003	0.000	0.018
	N	348	348	348	348	348
Awareness of Blood Donation Drives	Pearson Correlation	-.110*	1	.119*	0.090	0.058
	Sig. (2-tailed)	0.041		0.026	0.093	0.283
	N	348	348	348	348	348
Social Media Engagement	Pearson Correlation	-.158**	.119*	1	.743**	.797**
	Sig. (2-tailed)	0.003	0.026		0.000	0.000
	N	348	348	348	348	348
Effectiveness of Social Media Platforms	Pearson Correlation	-.286**	0.090	.743**	1	.698**
	Sig. (2-tailed)	0.000	0.093	0.000		0.000
	N	348	348	348	348	348
Participation in Blood Donation Drives	Pearson Correlation	-.127*	0.058	.797**	.698**	1
	Sig. (2-tailed)	0.018	0.283	0.000	0.000	
	N	348	348	348	348	348
*. Correlation is significant at the 0.05 level (2-tailed).						
**. Correlation is significant at the 0.01 level (2-tailed).						

Source: Research Data (2026)

4.7.2 Reliability Statistics

The internal consistency of the items was measured using Cronbach's Alpha, which was used to evaluate the reliability of the questionnaire. Table 4.8 shows that the total Cronbach's Alpha coefficient was 0.770, which is higher than the generally acknowledged reliability criterion of 0.70 (Tavakol & Dennick, 2011). With respect to the standardized items, the Cronbach's Alpha came out at 0.741. According to these values, the items assessing the research constructs had strong internal consistency, which means they accurately assessed the variables that were intended. This degree of dependability is in line with norms in social science research and is enough for deriving significant inferences from the data (Field, 2018).

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Table 8: Reliability Statistics

Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	N of Items
.770	.741	4

Source: Research Data (2026)

4.7.3 ANOVA with Friedman's Test

Friedman's test was conducted to determine whether significant differences exist in students' perceptions of effectiveness across the four social media platforms. The analysis yielded a Friedman's Chi-Square value of 328.112 with 3 degrees of freedom, which was statistically significant ($p < 0.001$). This indicates that students perceive the platforms differently in terms of effectiveness for promoting blood donation drives. The Kendall's coefficient of concordance ($W = 0.158$) suggests moderate agreement among respondents regarding the rank order of platform effectiveness, indicating consistent preferences across the student population. The grand mean of 16.8671 represents the average sum of ranks across all platforms.

Table 9: ANOVA with Friedman's Test

		Sum of Squares	Df	Mean Square	Friedman's Chi-Square	Sig
Between People		18770.663	347	54.094		
Within People	Between Items	5929.203[a]	3	1976.401	328.112	.000
	Residual	12936.547	1041	12.427		
	Total	18865.750	1044	18.071		
Total		37636.413	1391	27.057		
Grand Mean = 16.8671 a. Kendall's coefficient of concordance W = .158.						

Source: Research Data (2026

4.7.4 Model Summary

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A multiple regression analysis was conducted to predict student participation in blood donation drives from three predictor variables: awareness of blood donation drives, social media engagement, and perceived platform effectiveness. The model produced an R value of 0.814, indicating a strong positive correlation between the combined predictors and participation. All three variables account for 66.2% of the variation in student engagement, according to the R Squared value of 0.662. After taking into consideration all of the variables, the model's robust explanatory ability is confirmed by the Adjusted R Square value of 0.659. The inclusion of these factors greatly enhances the model's predictive capacity, as seen by the extremely significant F-change of 224.750.

Table 10: Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Change Statistics		
					R Square Change	F Change	df1
1	.814[a]	.662	.659	3.58237	.662	224.750	3
a. Predictors: (Constant), Effectiveness of Social Media Platforms, Awareness of Blood Donation Drives, Social Media Engagement							

Source: Research Data (2026

4.7.5 ANOVA

The ANOVA results testing the overall significance of the regression model confirm that the model is statistically significant ($F = 224.750$, $p < 0.001$). This indicates that the combination of the three predictor variables—awareness of blood donation drives, social media engagement, and perceived platform effectiveness—significantly predicts student participation in blood donation drives. The large F-statistic relative to the degrees of freedom suggests a strong model fit, reinforcing that social media-related factors are important determinants of participation behavior.

Table 11: ANOVA

Model	Sum of	df	Mean	F	Sig.

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		Squares		Square		
1	Regression	8652.916	3	2884.305	224.750	.000[b]
	Residual	4414.678	344	12.833		
	Total	13067.595	347			

Source: Research Data (2026

4.7.6 Coefficients

There are clear trends for every predictor variable shown by the regression coefficients. The most significant factor in determining participation was social media involvement, which was shown to have a standardized beta value of 0.625 ($t = 13.320$, $p < 0.001$). This suggests that the main factor driving participation is active engagement with donation material. Students are more inclined to join if they see social media as successful channels, as shown by the significant predictor of perceived platform efficacy (beta of 0.237, $t = 5.069$, $p < 0.001$). After controlling for involvement and efficacy, however, knowledge of blood donation drives did not serve as a significant predictor (beta = -0.038, $t = -1.209$, $p = 0.228$). With no statistically significant constant term ($B = 1.842$; $p = 0.091$), we may infer that baseline involvement is modest when all variables are set to zero.

Table 12: Coefficients

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	1.842	1.087		1.694	.091
	Awareness of Blood Donation Drives	-.071	.059	-.038	-1.209	.228
	Social Media Engagement	.879	.066	.625	13.320	.000
	Effectiveness of Social Media Platforms	.298	.059	.237	5.069	.000

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a. Dependent Variable: Participation in Blood Donation Drives

Source: Research Data (2026

4.8 Qualitative Findings and Triangulation

This section presents findings from the 15 semi-structured interviews conducted alongside the survey, organised thematically by the study's three objectives, and triangulates them with the quantitative results presented in Sections 4.3 to 4.7. Informant quotations are attributed to anonymised codes (IP1–IP15) in line with the confidentiality safeguards described in Section 3.14.

4.8.1 Awareness of Blood Donation Drives through Social Media

Consistent with the moderate quantitative awareness score (mean = 3.57, SD = 1.39), informants described awareness as real but inconsistent, concentrated around the university's annual February campaign rather than sustained year-round. IP3 explained: "I only really hear about it when the actual week is coming, maybe from a poster or a WhatsApp status. Outside of that time, it just goes quiet." Several informants attributed this gap to reliance on specialised accounts rather than mainstream institutional pages, echoing the recommendation in Section 5.3. As IP9 put it, "Unless you follow the health club page yourself, you won't see much. The main university page doesn't post about it often." Others, such as IP12, described friends as a more consistent information source than social media itself: "Honestly I hear about it more from my roommate than from Facebook—social media just confirms what I already heard." These accounts help explain the weak but significant awareness–engagement correlation ($r = 0.119$, $p < .05$) reported in Section 4.7.1: awareness appears to spread through a mix of social media and interpersonal channels rather than social media alone, consistent with Njoroge et al. (2021), who found that traditional and peer channels continue to complement social media in Kenyan university health communication.

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4.8.2 Social Media Engagement and Student Participation

The interviews offered the clearest explanation for the study's central quantitative finding —that engagement ($\beta = 0.625$, $p < .001$), not mere awareness ($\beta = -0.038$, $p = .228$), predicted participation. Informants repeatedly described a specific mechanism—seeing a peer's post about donating—as the trigger that converted passive awareness into an actual decision to donate. IP1 recalled: "I had seen the posters before and did nothing. But when my classmate posted her photo after donating and tagged the health club, that's what made me sign up the next day." This mirrors Social Cognitive Theory's construct of vicarious learning (Bandura, 1986): observing a peer's donation and the positive social response it attracted appeared to build informants' own self-efficacy and outcome expectations.

Similarly, IP7 linked engagement to social proof: "When you see the comments under a donation post, people cheering someone on, it makes you feel like it's normal, like it's something people your age actually do." Several informants also described a persuasive gap between believing social media is useful (reflected in the high perceived-usefulness mean of 4.17) and encountering it consistently enough to act on it. IP14 said: "I believe in it, social media is a good way to reach us, but I don't see the posts often enough for it to really push me." This distinction between belief in a platform's usefulness and the frequency of actual exposure is consistent with the Technology Acceptance Model's perceived-usefulness construct (Davis, 1989) operating independently of facilitating conditions such as consistent posting. A recurring barrier mentioned by IP5, IP10, and IP13 was fear of needles and uncertainty about eligibility, which engagement-driven content did not always address: as IP10 put it, "Seeing the posts made me curious, but I still had questions about whether I qualify, and the posts don't really explain that part."

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4.8.3 Effectiveness of Social Media Platforms

Informants' platform preferences broadly matched the quantitative ranking (Facebook highest at mean 4.19, followed by WhatsApp, Instagram, then Twitter/X). Facebook and WhatsApp were valued for practical, logistical reasons: IP2 explained, "The health club WhatsApp group is where I actually get the venue and time; Facebook events are good because you can see who else is going." Instagram was more often described as motivational than informational, consistent with its role in vicarious learning: IP6 noted, "Instagram is where I see the actual photos and reels of people donating, it feels more real and it moves me more than a text post." Twitter/X was consistently described as the least relevant platform among peers, which informants linked to low usage among students generally rather than to the platform's suitability for the message: IP11 said, "Barely any of my friends use Twitter, so even if the university posts there, we won't see it." Taken together, these accounts support the Technology Acceptance Model's proposition that perceived ease of use and facilitating conditions (a platform students already use daily) shape engagement as much as the message content itself (Venkatesh & Davis, 2000), and reinforce the study's recommendation that campaigns be run through mainstream, high-traffic institutional accounts rather than specialised pages alone.

Overall, the qualitative findings converge with the quantitative results on two central points that directly address the research gap identified in Chapter Two: engagement, activated largely through peer-driven vicarious learning, is the specific mechanism that converts awareness into actual blood donation participation, and platform choice matters primarily through students' existing platform habits and the practical facilitating conditions each platform offers, rather than through the platform's content quality alone.

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4.9 Discussions of Findings

This section discusses the key findings in relation to the research objectives (ROs), existing literature, and theoretical frameworks.

4.9.1 Student Awareness of Blood Donation Drives through social media (RO1)

Consistent with Moore et al. (2020), who discovered that while social media was favored, only 36.4% of students had actually given, the research indicated modest awareness levels among students (mean 3.57, SD = 1.39). The perceived utility construct (TAM) was reflected in the students' enthusiastic support for social media as a crucial platform (mean 4.17, SD = 1.22). Consistent with the enabling circumstances notion proposed by Venkatesh and Davis (2000), the low frequency of exposure (mean 3.20, SD = 1.40) indicates a disparity between the perceived utility and actual visibility of the item. Bandura (1986) posits that the poor awareness-participation link may be explained, at least in part, by the fact that uneven exposure decreases possibilities for observational learning. Some students are quite knowledgeable while others are completely unaware, as seen by the wide range of replies (SD = 1.22 to 1.40). Students that actively participate in school health websites tend to have higher knowledge about important health topics, according to research by Karanja and Ngoya (2022).

The gap between high perceived usefulness and low frequency of exposure indicates that while students recognize social media's potential, current campaigns are not delivering content consistently. Mwangi et al. (2019) identified algorithmic filtering and infrastructural limitations as factors restricting health campaign reach in Kenya. The episodic nature of communication—concentrated around specific events—limits sustained awareness. Students expressed that if information were more visible through mainstream university channels, awareness levels would likely improve across the entire student body.

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This suggests that universities should increase posting frequency, diversify content formats, and leverage institutional main pages to complement specialized health club accounts, ensuring broader reach and more consistent message exposure.

4.9.2 Social Media Engagement and Student Participation (RO2)

A strong positive correlation existed between engagement and participation ($r = 0.797$, $p < 0.01$), with engagement as the strongest predictor ($\beta = 0.625$, $p < 0.001$). This aligns with Zhang et al. (2020) and Mugisha and Otieno (2020). Students reported high interaction levels (mean 4.03, SD = 1.53) and strong motivational impact (mean 4.11, SD = 1.49). Importantly, awareness was not a significant predictor ($\beta = -0.038$, $p = 0.228$), confirming that awareness alone does not drive participation—engagement is the critical factor (Moore et al., 2020). Students expressed willingness to participate more if campaigns improved (mean 4.19, SD = 1.39), reflecting Sümnig et al. (2018) findings on engagement strategies improving recruitment. From SCT perspective, engagement facilitates observational learning and reciprocal determinism (Bandura, 1986), while TAM explains perceived usefulness driving behavioral intentions (Davis, 1989).

The non-significance of awareness underscores that campaigns must move beyond information dissemination to create interactive experiences that foster social learning and peer influence. The motivational power of social media operates through multiple mechanisms: exposure to peer participation creates social norms favoring donation, personal stories evoke empathy and altruistic responses, and calls to action provide clear behavioral prompts. Students described how seeing peers donate made participation feel achievable, and how consistent, encouraging posts reduced anxiety about the donation process. The willingness to participate more if campaigns improved indicates a demand-

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side readiness—students are prepared to donate but need more compelling, frequent content to convert intention into action. This finding aligns with Veldhuizen and Doggen (2018), who documented social media's impact on donor retention and recruitment.

4.9.3 Effectiveness of Social Media Platforms (RO3)

Significant differences existed in platform effectiveness (Friedman's $\chi^2 = 328.112$, $p < 0.001$). Facebook ranked highest (mean 4.19, SD = 1.50), followed by WhatsApp (mean 4.06, SD = 1.53), Instagram (mean 4.02, SD = 1.56), and Twitter (mean 3.95, SD = 1.60). Facebook's top ranking aligns with Karanja and Ngoya (2022). Its event and group features facilitate community building and social proof. WhatsApp's strong rating reflects its personal, immediate communication, consistent with Mungai et al. (2020) and Nabudere et al. (2019). Instagram's visual appeal enables vicarious learning through peer modeling (Smith et al., 2018), while Twitter's lower rating suggests it is less suited for sustained campaign promotion (Kaplan & Haenlein, 2020). From TAM perspective, platforms are perceived useful for different purposes (Venkatesh & Davis, 2000). SCT explains how different platforms facilitate distinct forms of observational learning and social influence (Bandura, 1986).

The high standard deviations (1.50-1.60) indicate diverse platform preferences, suggesting that a multi-platform approach is necessary to reach the entire student population effectively. Students appreciate platform complementarity—Facebook for announcements and events, WhatsApp for personal reminders, Instagram for visual storytelling, and Twitter for urgent updates. This coordinated approach leverages each platform's unique strengths while creating a comprehensive communication ecosystem. The findings suggest that resource allocation should prioritize Facebook and WhatsApp, maintain Instagram for visual content, and use Twitter for time-sensitive information. Campaign designers must

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understand platform-specific utilities and tailor content accordingly, recognizing that different platforms serve different campaign objectives. Effective campaigns should leverage these distinct mechanisms to create a comprehensive social learning environment that addresses multiple pathways to behavior change.

4.10 Chapter Summary

This chapter presented, analysed and interpreted the findings on the influence of social media on university student participation in blood donation drives at Mount Kenya University, Thika Campus. The findings showed that students had a moderate level of awareness of blood donation drives through social media, although social media was generally regarded as an important source of information on blood donation campaigns. The chapter further established that social media engagement and the perceived effectiveness of social media platforms were closely associated with student participation, while awareness alone was insufficient to translate into actual participation. Qualitative findings supported the quantitative results by showing that awareness was often concentrated around specific campaign periods, whereas sustained and interactive engagement was more influential in motivating students to participate. Facebook and WhatsApp emerged as particularly useful platforms for student mobilisation. Overall, the chapter established that active social media engagement and effective platform use were more influential in encouraging participation in blood donation drives than awareness alone.

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CHAPTER FIVE

DISCUSSIONS AND RECOMMENDATIONS

5.0 Introduction

Based on the research goals, this chapter summarizes the study's important results and develops conclusions while also providing stakeholders with practical advice. Additionally, the chapter provides suggestions for future studies that might help us better understand how social media can encourage college students to donate blood.

5.1 Discussions of Key Findings

This research looked at how students at Mount Kenya University in Thika used social media to become involved in blood donation programs. The results are outlined in light of the three aims of the study.

Research Objective One (RO1): To assess the level of student awareness of blood donation drives through social media platforms.

The majority of students were somewhat aware that their institution was hosting a blood donation campaign (mean 3.57, SD = 1.39). With a mean score of 4.17 and a standard deviation of 1.22, students highly regarded social media as an important tool for researching blood donation drives. There seems to be a disconnect between students' understanding of the power of social media and their actual encounters with blood donation-related postings, since the frequency of exposure was rather low (mean 3.20, SD = 1.40). Different students had different experiences, as seen by the wide range of replies; some were well-informed while others were unaware. Findings from the qualitative research showed that the communication was inconsistent, focused on one-off events rather than ongoing, and that the use of individual health club accounts restricted the reach to a smaller subset of the student body.

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Research Objective Two (RO2): To examine the relationship between social media engagement and student participation in blood donation drives.

Interviews reinforced this picture: informants described awareness as concentrated around the annual campaign period and dependent on whether a student happened to follow a specialised health-club account, rather than sustained throughout the year (Section 4.8.2).

A strong positive correlation existed between social media engagement and participation in blood donation drives ($r = 0.797$, $p < 0.01$). Regression analysis revealed that social media engagement was the strongest predictor of participation ($\beta = 0.625$, $p < 0.001$), explaining 66.2% of the variance in participation. Students reported high interaction levels (mean 4.03, SD = 1.53) and strong motivational impact (mean 4.11, SD = 1.49). Importantly, awareness was not a significant predictor of participation ($\beta = -0.038$, $p = 0.228$), confirming that awareness alone does not drive participation—active engagement is the critical factor. Students expressed willingness to participate more if campaigns were more frequent and engaging (mean 4.19, SD = 1.39), indicating demand-side readiness for enhanced communication efforts.

Research Objective Three (RO3): To identify the social media platforms most effective in driving student participation in blood donation drives.

Interview accounts explained this statistical pattern in human terms: students repeatedly described seeing a peer's donation post as the specific trigger that moved them from awareness to action, an example of the vicarious learning SCT predicts (Section 4.8.3).

Significant differences existed in students' perceptions of platform effectiveness (Friedman's $\chi^2 = 328.112$, $p < 0.001$). Facebook ranked highest (mean 4.19, SD = 1.50), followed by WhatsApp (mean 4.06, SD = 1.53), Instagram (mean 4.02, SD = 1.56), and Twitter (mean 3.95, SD = 1.60). Facebook's event and group features facilitated community

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building and social proof. WhatsApp's personal, immediate communication enabled direct engagement. Instagram's visual appeal supported vicarious learning through peer modeling. Twitter's lower rating suggested it was less suited for sustained campaign promotion. The findings indicated that students appreciate platform complementarity, with each platform serving distinct purposes in the communication ecosystem.

5.2 Conclusions

The study concluded that students' awareness of blood donation campaigns was moderate, and they recognised social media as a valuable source of information. However, the findings indicated that this potential was not fully utilised due to gaps in communication strategies. Campaigns were infrequent and relied heavily on specialised social media accounts, limiting the consistent dissemination of comprehensive information to the wider student population. These findings underscore the need for regular, sustained, and inclusive communication through mainstream institutional social media platforms to improve awareness of blood donation campaigns and encourage student participation.

Student involvement in blood donation programs is mostly driven by social media engagement. contribution material that encourages active engagement (likes, shares, comments, and views) is more effective at driving real contribution behavior than awareness alone. Students are inspired when they see their classmates engaging, when they get positive feedback, and when they find solutions to their problems in the form of helpful articles. Critical for behavior change, the results show that involvement allows for social impact and observational learning. More compelling, regular, and engaging marketing are needed to turn students' readiness to give into action.

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When it comes to communicating about blood donations, platform choice is crucial. Facebook is great for community development and event planning, while WhatsApp is great for intimate, instant communication; together, they make the best platforms. Visual storytelling and peer modeling are Instagram's strong suits, whereas Twitter is more for quick updates than long-term efforts. To successfully address the varied student body, a coordinated, multi-platform strategy that makes use of the specific capabilities of each platform is required.

In the researcher's assessment, the convergence of the quantitative and qualitative findings supports both Social Cognitive Theory and the Technology Acceptance Model as explanations for how social media shapes health behaviour among Kenyan university students. SCT's constructs of observational learning and reciprocal determinism clarify how engagement, and specifically the visible act of peers donating and being socially recognised for it, converts into participation, while TAM's perceived-usefulness construct explains why students already regard social media favourably even where actual exposure to donation content remains inconsistent. Where this study differs from, and extends, prior Kenyan work such as Moore et al. (2020) and Kimani and Muriithi (2021) is in showing empirically that awareness and engagement are statistically distinguishable constructs with very different predictive power—a distinction those earlier studies did not test directly. The lack of relevance of awareness as a predictor, once engagement and platform effectiveness are accounted for, indicates that cognitive knowledge of a campaign is, on its own, an inadequate lever for behaviour change unless it is accompanied by the social and interactive processes that engagement provides.

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5.3 Recommendations

Based on the findings and conclusions, the following recommendations are made.

First, to university administrators and health communicators, instead of communicating around certain events infrequently, universities should have a consistent presence on social media throughout the year. The issue will remain prominent and students' donating habit will be normalized with regular publishing of blood donation material. Upcoming drives, donor testimonials, and instructional content that addresses common concerns should all be part of the content.

Taking into account the merits of each platform, a coordinated strategy across many platforms should be implemented. Groups, events, and community development should all take place on Facebook. Using WhatsApp in health club groups should make direct, personal communication much easier. Visual material highlighting giving experiences should be featured on Instagram. If you need to share anything quickly, you should use Twitter for that. Spending on Facebook and WhatsApp should take precedence over Instagram and Twitter, but both platforms should still be maintained.

In order to reach a wider audience of students, institutions should promote blood donation using their official institutional social media accounts rather than only specialized health club accounts. This makes sure that students who aren't interested in health-related accounts nonetheless get the word about contribution possibilities. Images, films, personal tales, and interactive components that inspire participation should supplement text-based announcements in content. Photos and videos of donation events, testimonies from blood recipients, and testimonials from student donors may all elicit emotional reactions and boost motivation. Common worries, including needle phobia and misunderstandings about the donation procedure, should be addressed in the posts.

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To take use of the persuasive power of word-of-mouth, campaigns could request that students share donation material with their friends and classmates. Hashtags, shareable images, and incentives for sharing may all help with this. An effective medium for boosting peer impact is social media, and peer modeling is a potent motivator. Further, university health clubs and blood collection groups should work together to launch social media campaigns. Health clubs are great allies in campaign planning and implementation because of their familiarity with the student population and their direct connection to student networks.

Health organizations need to instruct college health clubs in the ways of social media interaction, content production, and platform-specific best practices in order to facilitate successful communication strategies. Helpful resources like images, message guidelines, and templates help ensure that material is consistently of high quality. Businesses should put systems in place to keep tabs on how far their social media initiatives have gone and how effective they have been by analyzing KPIs like engagement and participation. Communication methods may be continuously improved with the use of this data.

5.4 Recommendations for Future Studies

This study contributes to scholarship on social media and health behaviour in three ways. It provides empirical evidence, specific to a Kenyan university setting, that awareness, engagement, and perceived platform effectiveness are statistically distinct constructs with unequal power to predict blood donation participation addressing the gap in prior Kenyan and African studies that treated "social media use" as a single, undifferentiated construct (Moore et al., 2020; Karanja & Ngoya, 2022).

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Additionally, by triangulating this quantitative distinction with qualitative accounts of the specific mechanism through which engagement converts into participation, the study offers a more granular, theory-grounded account of the awareness-to-action pathway than previous descriptive studies of social media and blood donation in Kenyan universities. Moreover, the study extends the joint application of Social Cognitive Theory and the Technology Acceptance Model to the specific behaviour of student blood donation, demonstrating how the two theories operate as complementary rather than competing explanations: TAM accounts for platform adoption and usefulness perceptions, while SCT accounts for the observational and reinforcement processes that convert that adoption into offline donation behaviour. Collectively, these contributions provide MKU, other Kenyan universities, and blood transfusion services with an empirically grounded basis for designing social-media-based donor mobilisation strategies that target engagement specifically, rather than awareness alone.

5.5 Recommendations for Further Study

The following areas are suggested for further research that future research should compare the role of social media in blood donation participation across multiple universities, including both public and private institutions. This would identify best practices and contextual factors that influence campaign effectiveness across different institutional settings. Additionally, longitudinal research tracking students' social media engagement and donation behavior over time would provide insights into the long-term effectiveness of campaigns and the sustainability of engagement effects. Such studies could identify critical periods for intervention and factors that sustain or diminish participation.

5.6 Chapter Summary

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This chapter presented the discussion of key findings, conclusions, recommendations, recommendations for further research and the study's contribution to knowledge in relation to the study objectives. The chapter concluded that although social media creates awareness of blood donation campaigns among university students, awareness by itself does not necessarily result in participation. Greater emphasis should therefore be placed on sustained, interactive and platform-specific engagement that can motivate students to act on blood donation messages. The chapter recommended that universities and blood transfusion services strengthen their social media communication strategies, make strategic use of platforms that students frequently engage with, and design content that encourages interaction and participation. It also identified areas for further research, particularly comparative and longitudinal studies on social media and blood donation behaviour. The study contributed to knowledge by demonstrating the importance of distinguishing between awareness, engagement and platform effectiveness when examining the influence of social media on university student participation in blood donation drives.

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APPENDICES

Appendix 1: Informed Consent Form

Project Title:
"THE INFLUENCE OF SOCIAL MEDIA ON UNIVERSITY STUDENT PARTICIPATION IN BLOOD DONATION DRIVES: A CASE OF MOUNT KENYA UNIVERSITY, KENYA"

AIM:
The objective of the study is to examine the influence of social media on student participation in blood donation drives. The study aims to provide insight into how social media can be leveraged to improve blood donation efforts among university students.

Dear Participant,

My dissertation is on "the influence of social media on university student participation in blood donation drives; a case of Mount Kenya University." I am a Master of Arts student in Communication Studies at St. Paul's University. So, I'm writing to ask that you please fill out the survey that I've attached. The information was used only for the research project at hand. Findings from this study will guide educational institutions, healthcare facilities, and blood transfusion centers in their efforts to increase student blood donation using social media.

We truly appreciate and respect your replies.



Thank you for your time and effort.

Name of Researcher: Lynn Wanjiku Nguru

Sign: **Date:** 20th March, 2026

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Appendix 2: Student Questionnaire

Title of the Study:
"The Influence of Social Media on University Student Participation in Blood Donation Drives: A Case of Mount Kenya University, Kenya"

Introduction:
Dear Participant,
The purpose of this survey is to gather data on how college students are using various social media platforms to spread the word about blood donation drives. Your answers will be treated confidentially and used only for scholarly research; participation in this survey is totally optional. To the best of your knowledge, please respond honestly to all questions. Thank you for your valuable time and input.

Section A: Demographic Information
1. What is your gender?
Male ☐
Female ☐
Prefer not to say ☐

2. What is your age?
Below 18 ☐
18–24 ☐
25–30 ☐
Above 30 ☐

3. What year of study are you in?
First ☐
Second ☐
Third ☐
Fourth ☐
Fifth ☐
Postgraduate ☐

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Section B: Awareness of Blood Donation Drives
Please indicate your level of agreement with the following statements by selecting the option that best describes your opinion:

Statement	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
I am aware of blood donation drives organized at my university.					
I first learned about the blood donation drives at my university through social					

Statement	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
media.					
I frequently come across posts about blood donation drives on social media.					
Social media is a key platform for me to learn about blood donation campaigns at my university.					

Section C: Social Media Engagement

Please indicate your level of agreement with the following statements by selecting the option that best describes your opinion:

Statement	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
I have interacted with social media content related to blood donation (e.g., liking, sharing, or commenting).					
Engaging with blood donation posts on social media motivates me to participate in blood donation drives.					
I believe that social media helps increase my awareness of the importance of blood donation.					
The social media content related to blood donation is engaging and informative.					

Section D: Effectiveness of Social Media Platforms

Please indicate your level of agreement with the following statements by selecting the option that best describes your opinion:

Statement	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
Facebook is the most effective social media platform for promoting blood donation drives at my university.					
Instagram is the most effective social media platform for promoting blood donation drives at my university.					
Twitter is the most effective social media platform for promoting blood donation					

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Statement	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
drives at my university.					
WhatsApp is the most effective social media platform for promoting blood donation drives at my university.					

Section E: Participation in Blood Donation Drives

Please indicate your level of agreement with the following statements by selecting the option that best describes your opinion:

Statement	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
I have participated in a blood donation drive organized by my university.					
My decision to participate in blood donation drives is influenced by social media posts.					
Social media campaigns have encouraged me to participate in blood donation drives more frequently.					
I believe that social media plays a significant role in motivating students to donate blood.					
I would participate in more blood donation drives if social media campaigns were more frequent and engaging.					

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Thank You for Your Participation!

Appendix 3: Interview Guide

Title of the Study:

"THE INFLUENCE OF SOCIAL MEDIA ON UNIVERSITY STUDENT PARTICIPATION IN BLOOD DONATION DRIVES: A CASE OF MOUNT KENYA UNIVERSITY, KENYA"

Introduction:

Dear Participant,

Thank you for agreeing to participate in this interview. The purpose of this interview is to understand your perspectives and experiences regarding the use of social media in promoting blood donation campaigns at your university. Your responses were kept confidential and used solely for academic purposes. Please feel free to share your thoughts openly and honestly. The interview should take approximately 15–20 minutes.

General Understanding of Blood Donation Drives

1. Can you tell me about your general knowledge of blood donation drives at your university?
2. What sources of information do you rely on to learn about blood donation campaigns?
3. What do you think about the importance of blood donation drives in your university community?

Role of Social Media in Blood Donation Campaigns

4. How would you describe the role of social media in promoting blood donation campaigns at your university?
5. Which social media platforms are most commonly used to promote blood donation drives at your university?
6. Can you recall any specific campaigns that you have seen on social media regarding blood donation?

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7. Do you think social media campaigns have increased your awareness or participation in blood donation drives?

Student Engagement with Social Media Campaigns

8. Do you actively engage with social media posts related to blood donation campaigns (e.g., liking, sharing, commenting)?
9. How do you feel about the content shared on social media about blood donation?
10. In your opinion, does online engagement with blood donation campaigns increase the likelihood of students participating in the drives?

Effectiveness and Challenges

11. Do you think social media campaigns on blood donation drives are effective in getting students to participate?
12. What challenges, if any, do you think social media campaigns face in promoting blood donation drives among students?
13. What suggestions would you give for improving the effectiveness of social media in promoting blood donation campaigns at your university?

Overall Impact of Social Media on Blood Donation Participation

14. Do you believe social media has changed students' attitudes towards blood donation in your university?
15. How likely are you to participate in a blood donation drive based on social media campaigns?
16. Do you think social media can help overcome any barriers to blood donation participation?
17. Is there anything else you would like to share about your experience with blood donation campaigns and social media?

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18. Do you have any final thoughts or suggestions for the future of blood donation campaigns on your campus?

Thank you for your time and input.

Your responses are valuable to the success of this research.

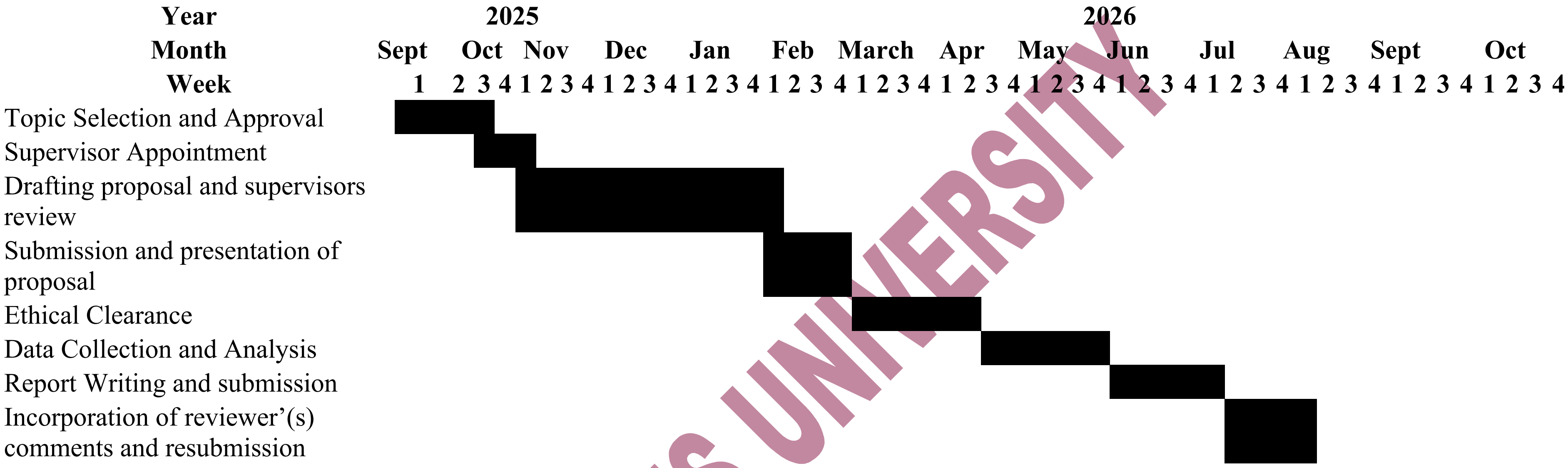
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Appendix 4: Budget

Item	Description	Cost (KSH)
Data Collection	Costs for printing and transportation questionnaires.	40,000
Social Media Advertising	Budget for promoting survey links, recruitment ads, and boosting posts to target audience on social media platforms (Facebook, Instagram, Twitter).	30,000
Research Tools & Software	Software for data analysis (e.g., SPSS, survey tools) and research-related tools.	20,000
Stationery & Supplies	Printing, photocopying, and binding of research materials.	10,000
Communication and Internet	Costs for internet and phone calls for contacting supervisors, interviewees, participants, and communication with research assistants.	15,000
Transportation	Travel costs to visit campuses and locations for interviews and data collection.	10,000
Miscellaneous	Unexpected costs or additional supplies.	5,000
Data Analysis and Report Writing	Costs for analyzing data and preparing the final report (including any external help if needed).	10,000
Contingency Fund	Reserved funds to address unexpected expenses during the course of the project.	10,000
Total		**150,000**

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Appendix 5: Workplan



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Appendix 6: St. Paul's University- Institutional Scientific Ethics Review Committee

ST. PAUL'S UNIVERSITY

Private Bag 00217 Limuru,
Kenya
Email: office@spu.ac.ke
Website: www.spu.ac.ke

Tel Office: +254 (0) 20-2020505/10
Mobile: +254 (0) 728-669000
(0) 736-424440

REF: SPU/702/2026 **Date: 24th March 2026**

TO: Lynn Wanjiku Nguru
St. Paul's University

Dear Lynn,

==========

REF: The Role of Social Media on University Student Participation in Blood Donation: A Case of Mount Kenya University, Kenya

==========

Greetings,

This is to inform you that SPU- Institutional Scientific Ethics Review Committee has reviewed the above-named research proposal. **Your ERB approval number is 712, for the period between 24th March 2026 – 24th March 2027 (1 year).**

This approval is subject to compliance with the following requirements;

i. Only approved documents including (informed consents, study instruments) will be used.
ii. All changes including (amendments, deviations, and violations) are submitted for review and approval by SPU- Institutional Scientific Ethics Review Committee.
iii. Death and life-threatening problems and serious adverse events or unexpected adverse events whether related or unrelated to the study must be reported to SPU- Institutional Scientific Ethics Review Committee within 72 hours of notification
iv. Any changes, anticipated or otherwise that may increase the risks or affected safety or welfare of study participants and others or affect the integrity of the research must be reported to *SPU- Institutional Scientific Ethics Review Committee* within 72 hours
v. Clearance for export of biological specimens must be obtained from relevant institutions.

vi. Submission of a request for renewal of approval at least 60 days prior to expiry of the approval period. Attach a comprehensive progress report to support the renewal.

vii. Submission of an executive summary report within 90 days upon completion of the study to SPU- Institutional Scientific Ethics Review Committee.

viii. Should there be any publications from your research, note that you are supposed to anonymize the particulars of the respondents, the identifiers and the name of institution (s) where you collected data.

ix. Please note that it is within the ISERC's mandate to monitor your research and to do random visits to the site. All research is subject to post approval monitoring. Kindly provide a closure report after the research.

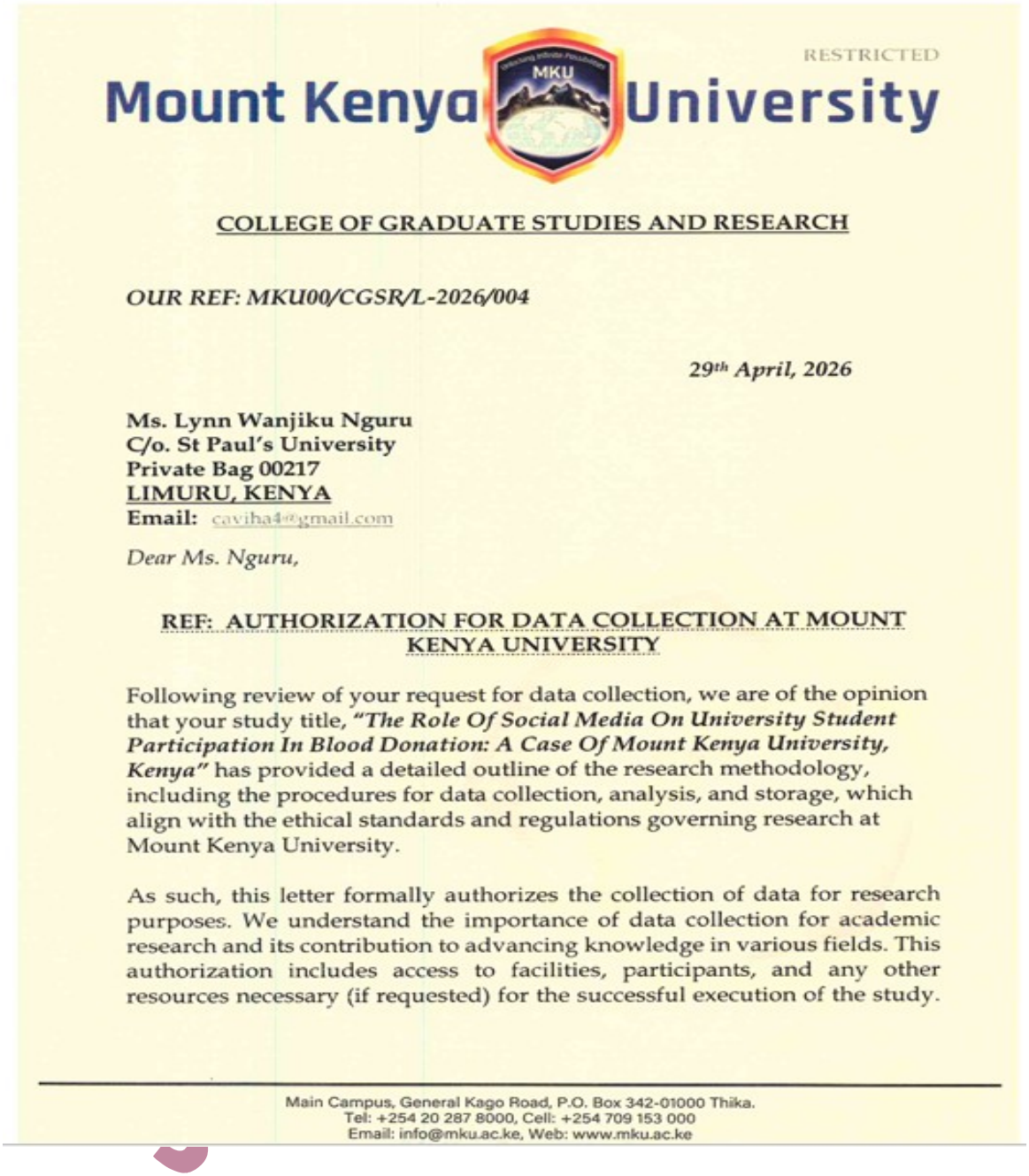
Prior to commencing your study, you will be expected to obtain a research license from National Commission for Science, Technology and Innovation (NACOSTI) if you are collecting data in the country - https://research-portal.nacosti.go.ke **or obtain other clearances needed in the country where you will collect your data from.**

Yours sincerely,

Dr. Daniel Nzengya, PhD
Chairperson
SPU- Institutional Scientific & Ethics Review Committee

ST. PAUL'S UNIVERSITY
(ISERC)
APPROVAL WITH
CONTIGENCIES
RESEARCH
DIRECTORATE
INSTITUTIONAL SCIENTIFIC ETHICS REVIEW COMMITTEE

Appendix 7: Mt. Kenya University- Authorization For Data Collection



RESTRICTED

Mount Kenya University

COLLEGE OF GRADUATE STUDIES AND RESEARCH

OUR REF: MKU00/CGSR/L-2026/004

29th April, 2026

Ms. Lynn Wanjiku Nguru
C/o. St Paul's University
Private Bag 00217
LIMURU, KENYA
Email: caviha4@gmail.com

Dear Ms. Nguru,

REF: AUTHORIZATION FOR DATA COLLECTION AT MOUNT KENYA UNIVERSITY

Following review of your request for data collection, we are of the opinion that your study title, ***"The Role Of Social Media On University Student Participation In Blood Donation: A Case Of Mount Kenya University, Kenya"*** has provided a detailed outline of the research methodology, including the procedures for data collection, analysis, and storage, which align with the ethical standards and regulations governing research at Mount Kenya University.

As such, this letter formally authorizes the collection of data for research purposes. We understand the importance of data collection for academic research and its contribution to advancing knowledge in various fields. This authorization includes access to facilities, participants, and any other resources necessary (if requested) for the successful execution of the study.

Main Campus, General Kago Road, P.O. Box 342-01000 Thika.
Tel: +254 20 287 8000, Cell: +254 709 153 000
Email: info@mku.ac.ke, Web: www.mku.ac.ke

St. Paul's University Repository

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We trust that yourself/team/assistant will conduct the research with utmost professionalism, integrity, and respect for the rights and confidentiality of participants. In addition, you (your team) should strictly adhere to the ethical principles outlined by our institution and to obtain informed consent from all participants involved in the study. Any personal or sensitive information should be handled in accordance with The Data Protection Act, 2019 laws and regulations of Kenya.

While at Mount Kenya University, kindly liaise with the Dean, School of Social Sciences Email: socialsciences@mku.ac.ke /kmutundu@mku.ac.ke for guidance on the specific respondents.

We advise that you or your appointed representative should be there to oversee the data collection and please should you need other support, do not hesitate to liaise with the Secretary ISERC Email: jonyancha@mku.ac.ke;.

Sincerely,

Mount Kenya University
P. O. Box 342 - 01000, THIKA
Office of the Principal
College of Graduate Studies & Research

Dr. Henry Yatich, PhD
PRINCIPAL

Copy to: *Vice-Chancellor*
Deputy Vice-Chancellors
Registrar, Academic Administration
Dean, School of Social Sciences
Secretary- ISERC

... HY/jm

Appendix 8: National Commission for Science, Technology and Innovation (NACOSTI)



REPUBLIC OF KENYA

NATIONAL COMMISSION FOR SCIENCE,TECHNOLOGY & INNOVATION

Ref No: **846095**

Date of Issue: **08/April/2026**

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