Understanding the benefits and risks of nursing students engaging with online social media

Linda McGrath, Amelia Swift, Maria Clark et al

Abstract
E-professionalism is defined as the competence and values expected of professionals when engaged in online communication, and is a rapidly expanding area of nursing practice. The use of online social media is popular among nursing students, some of whom have created online platforms for peer support and influence. There are significant benefits of using social media for nursing students, such as developing professional networks, engaging in the nursing community, accessing and providing support, and enhancing their knowledge. However, nursing students must be made aware of the potential risks in relation to how they share information and communicate online. These risks include misconduct investigations and could result in exclusion from their studies, resulting in them being unable to join the professional register. Nursing students and educators should be supported to use digital technologies in a way that capitalises on their benefits, while minimising their risks. This article aims to enhance nursing students’ and nurses’ understanding of e-professionalism so that they can use social media effectively for peer support and to enhance patient care.

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Digital technology, social media and the internet have profoundly changed the way people interact and how they present themselves professionally, including the boundaries between personal and professional domains. This offers opportunities for nursing students to use digital technologies to develop their knowledge and skills to enhance patient care. Ferguson (2013) reinforced that social media, while entrenched in everyday life, is now the ‘next technological wave in healthcare’ and is an important learning opportunity for the nursing profession. The term ‘e-professionalism’, also known as digital professionalism, refers to the competence and values expected of professionals when engaged in online communication (Jones et al 2016).

Given the rise in the number of 18 year olds and 19 year olds entering undergraduate nurse education (Universities and Colleges Admissions Service 2017, 2019), teenage online behaviour requires consideration. Teenagers are regular users of social media platforms such as WhatsApp, YouTube, Instagram, Twitter, Facebook, Snapchat and TikTok, and most of them own smartphones (Ofcom 2019). Thus, as nursing students begin their programmes of study, most are already engaged with an online social network (Usher et al 2014, Jones et al 2016, Terzi et al 2019). However, the network, style and responsibility of communication expected of a nursing student differs from that expected of a private individual (Green 2017).

The Nursing and Midwifery Council (NMC) (2016) has published guidelines for acceptable online behaviour, which identify how The Code: Professional Standards of Practice and Behaviour for Nurses, Midwives and Nursing Associates (NMC 2018a) relates to professional
behaviour and standards online. Although nursing students are not yet recorded on the professional register, they are required to abide by The Code (NMC 2018a, 2019), and therefore the NMC’s (2016) social media guidance, but are held to account by their education provider and practice partners rather than the NMC itself. The NMC (2018b) standards framework for nursing and midwifery education states this explicitly.

This article explores the benefits and risks of using social media for nursing students, what e-professionalism means, and the consequences for nursing students who do not meet the required standard of behaviour expected of them online.

**Benefits of social media use**

There are several benefits of social media use for nursing students and nurses. The NMC (2016) guidance advises that social media can enable nursing students and nurses to: develop professional networks; engage in discussions and debate; access and provide support; and enhance their knowledge.

**Engagement in the nursing community**

During their undergraduate degree programme, nursing students gain an understanding of what it means to be a nurse. Social media can support this by providing access to a rich network of professional organisations, peers, students and wider networks online. It is important for nursing students to feel connected to others and to feel a sense of belonging to a group, since having a social group that one feels a valued member of can increase self-efficacy and self-esteem (McKenna and Bargh 1998). Many university departments have their own social media presence, to develop a sense of community that nursing students can engage with before and after their admission to the programme (Sinclair et al 2015). Nursing students as a professional group are becoming increasingly visible through organised accounts such as the Student Nurse Project (@StNurseProject, #StNPproject), and the official @WeStudentNurses (#studentnurse) account, which is part of the WeCommunities for healthcare professionals (www.wecomunities.org). Therefore, it could be construed that engagement with social media to aid learning is a popular option for nursing students.

The authors consider the online community to fall into three main areas that enable nursing students to initiate and join conversations:

- Asking technical questions about something they are about to encounter for the first time, with peers responding by sharing their experiences.
- Making statements about their experiences, usually in the form of sharing something that they are proud of accomplishing or being noted for, for example ‘thrilled to get such positive feedback about my nursing skills on placement today’.
- Seeking support, either overtly by asking for it or passively by making a statement that they hope others will respond to kindly. This form of online peer support has been described as a transformational feature of the internet (Ziebland and Wyke 2012) and has the potential to de-stigmatise, aid recovery, promote self-esteem and support well-being, particularly in relation to mental health (Naslund et al 2016).

**Supporting learning and raising awareness**

Social media is used to raise the visibility of the profession and strengthen learning development for nursing and midwifery communities (Chudleigh and Jones 2016). This provides students with an opportunity to engage in important professional debates, as well as learning about, or raising awareness of, issues that are important to them. One example is #fundourfuture, a Royal College of Nursing (RCN) (2018) campaign that has been widely disseminated via social media to communicate the financial hardship that many nursing students experience, the work that the RCM does, and its suggestions for improving student recruitment.

Organised ‘Twitter chats’ are regularly hosted by nursing student-led organisations to debate issues specifically related to them. One example is a chat hosted in 2013 by @WeNurses about placement challenges experienced by nursing students. In one hour, there were 107 contributors to this chat and around 900 tweets (Sinclair et al 2015). A case study was subsequently developed and published by the hosts, which demonstrated the value of the chat for the participants. It also identified emergent themes from the chat that could be addressed, such as the lack of time that mentors gave to students, and the lack of communication between the university and placement areas (Sinclair et al 2015).

Nursing students also use social media to raise awareness about issues not often addressed in undergraduate nurse curricula and in their clinical placements, such as nursing advocacy for global and social issues that can affect health, for example climate change (Richardson et al 2016). However, the formation of groups on social media platforms can also isolate followers from other perspectives. People tend to seek out and spend more time with people who share their beliefs and values than those who do not. Therefore, social media is known to encourage an ‘echo chamber’ effect, in which increasingly polarised views can develop without the benefit of external challenge (Del Vicario et al 2016).

**An educational tool**

Social media is also used as an educational tool by academic-curators and by students themselves. For example, Teesside University created a Facebook Learning Object (FLO), which presents an interactive insight into what life is like for an older person experiencing chronic pain (Ryan et al 2015).

In 2014, Jones et al (2016) established the Plymouth University nursing cohorts (@PUNC14) Twitter account, which was the first nursing student-led Twitter forum in the UK, Jones et al (2016) also introduced the use of Twitter as an innovative assessed element for first-year nursing students in the context of e-professionalism.
However, they recognised that some nursing students did not want to engage with Twitter and created an alternative assessment strategy to cater for them. This demonstrates an important limitation in the use of social media as an educational tool – that not all nursing students want to, or are able to, engage with it.

During taught online sessions within a class or lecture, conversations can be collated through the use of hashtags, allowing nursing students to follow and join in, and can provide an opportunity for students who prefer not to speak up in class to express their views (Tyma 2011). There is evidence that students’ use of Twitter to engage with course material and in course-related discussions can increase their marks (Junco et al 2011, Buzzelli et al 2016). Nursing students also use social media to source information, with Usher et al’s (2014) study suggesting that this is often used in preference to journals.

**Risks associated with social media use**

Professionals, including nurses, may lack awareness of their vulnerability online and are often not careful in restricting access to their posted information and evidence of their political, social and professional viewpoints (Osman et al 2012, Edge 2017). This is particularly relevant to Facebook, with several recorded instances of privacy breaches and users’ failure to keep their posts private. Thompson et al (2008) found that although 45% (362 out of 813) of medical trainees at the University of Florida had Facebook accounts, only one third (38%) had restricted access to their posts. Garner and O’Sullivan’s (2010) study of the use of Facebook among medical students at the University of Liverpool found similar results, with most respondents admitting they had uploaded potentially embarrassing photos and had seen unprofessional behaviour by colleagues on Facebook.

Educators are increasingly using social media as an educational tool. This can be seen as coercive behaviour because students may feel obliged to participate in the discussions, journal clubs and other activities. Nursing students may have valid reasons to avoid having a social media presence, for example nurses are three times more likely than the general public to have experienced some form of intimate partner violence (Cavell Nurses’ Trust 2016). It is reasonable to expect that some nursing students may fear developing a digital presence that could lead an abuser to connect online and identify their whereabouts.

Nurses may also experience cyberbullying from their peers, which can lead to depression, suboptimal work performance and attrition (D’Souza et al 2018), and there are reports of nursing students sexting and being the unwanted recipient of sexts (Gutiérrez-Puertas et al 2017). Social media is also a root cause of anxiety because it can heighten a need to feel accepted (social appearance anxiety), which one study found was strongly associated with problematic social media use (Ayar et al 2018). Nursing students not only need to know about being e-professional, they may also require guidance about staying safe online.

**E-professional misconduct**

One of the authors (LM) made a Freedom of Information request to review publicly available data from NMC fitness to practise investigations in 2017-18. The data revealed 55 registrant referrals related to social media misuse in July 2018, a significant increase from six registrant referrals in January 2017. The details of these cases are not available to review, but there is published evidence that provides examples of unprofessional social media activity. For example, a group of students in the US posted a photo of a placenta on Facebook, believing they had the permission of their tutor, and were later expelled from nursing school (Kuhns 2012). Green (2017) presented the case of a nurse posting photos taken on her mobile phone of patients having surgery. Barnable et al (2018) cited several studies where health professions students have posted information about patients, made negative comments about their peers or their workplace, and posted information about sexual behaviour and intoxication. In a data-mining exercise exploring tweets by nurses, De Gagne et al (2019) found that 4.6% (413 out of 8,934) of tweets were uncivil, of which 58% related to nursing and 42% related to personal life.

Barnable et al (2018) surveyed 97 students about Facebook and confidentiality. They found that all of the students agreed that posting a patient’s name on Facebook breached confidentiality, 94% agreed that posting a picture without a name breached confidentiality, and 80% agreed that confidentiality was breached by posting information about clinical experiences. Edge (2017) found that some nursing students did not realise that simply avoiding the use of patient names was not enough to guarantee anonymity, resulting in a situation whereby ‘followers’ could identify the patient from other information posted. Studies show that health professions students often see social media content they know to be unprofessional or uncivil (Garner and O’Sullivan 2010, De Gagne et al 2018). In De Gagne et al’s (2018) study, health professions students speculated that these incidents could be triggered by stress, or a failure

**Key points**

- The term ‘e-professionalism’, also known as digital professionalism, refers to the competence and values expected of professionals when engaged in online communication
- Nursing students require boundaries and support to ensure optimal use of social media, while remaining safe and professional
- Educators are increasingly using social media as an educational tool. This can be seen as coercive behaviour because students may feel obliged to participate in the discussions, journal clubs and other activities
- Nursing students must have an understanding of confidentiality on social media and that this relates not only to patients, but also to staff and the healthcare organisation
of the student to read cues in the online environment, or lack of time to consider the consequences of their actions. The natural pause times for reflection on a ‘bad day’ are being eroded by social networking (Ellaway et al 2015) and its immediacy of ‘unloading’, which could escalate into misuse of power and even abuse.

This demonstrates the need to educate students about e-professionalism, as well as the consequences for them and others of unprofessional behaviour online (Barnable et al 2018). NHS Employers (2013) states that a person’s online profile can be used during shortlisting and interviewing, and while there is little evidence of this being routine in nurse recruitment, students should be aware that what they post online can have consequences for their future employment.

**E-professionalism**

Professionalism is well understood as a way to develop effective therapeutic relationships with patients. Professional attributes include technical competence, emotional competence, critical thinking, inquiry, reflection, ability to change and to be compassionate, honest and innovative (NMC 2018b). The NMC states that being professional means adhering to The Code (NMC 2018a).

E-professionalism is often defined in the same way as professionalism, with the addition of the online context, for example ‘attitudes and behaviours reflecting traditional professionalism paradigms but manifested through social media’ (Cain and Romanelli 2009).

The NMC (2016) guidance details several core principles for nurses’ use of social media, while emphasising that it does not cover every social media situation that nurses may experience during their careers. The guidelines can support nursing students to consider social media-related issues and act professionally, ensuring public protection. The NMC (2016) noted that the nature and scope of social media is constantly evolving, and pledged to review this guidance when necessary and reapply the principles of The Code (NMC 2018a) to new situations that emerge. The NMC (2016) guidance does not provide a definition of e-professionalism, but instead refers to one of the standards in The Code (NMC 2018a), which states that nurses must ‘use all forms of spoken, written and digital communication (including social media and networking sites) responsibly’.

The NMC (2016) guidance provides examples of unprofessional or unlawful behaviour on social media that may put a nurse’s registration at risk or jeopardise a nursing student’s ability to join the NMC register, as outlined in Box 1.

Professional behaviour is expected at all times, and this has led the NMC to warn nursing students that they risk being denied entry to the professional register if they engage in unprofessional behaviour in their private time (Ford 2009). Several nursing students have commented on the Ford (2009) article, saying it is unreasonable to expect a person to behave professionally in every aspect of their life. These comments demonstrate that there is a discrepancy between the behaviour expected of nursing students and the behaviour they feel is reasonable in their private life.

**Role of the educator in e-professionalism**

Educators have a duty to ensure that nursing students are aware of potential issues and to inform them of what is acceptable and unacceptable for nurses to do inside and outside of work (Doel et al 2010). Young adults transitioning into university can be unknowingly vulnerable to making social media mistakes (Edge 2017), not realising that some posts are unprofessional or a violation of privacy or confidentiality. Barnable et al (2018) stated that students should receive ‘education on the professional image of nursing, confidentiality and social media policy in their first year’, which should be reinforced as their programmes progress. Therefore, it is important that nursing students are supported to develop safe ways to use social media and to appreciate the associated risks (Henning et al 2017). They must have an understanding of confidentiality and that this relates not only to patients, but also to staff and to the healthcare organisation. There is an increasing number of cases cited where nurses have been sacked as a result of posting a picture of a work environment with no patient or staff included (Li 2014). Nursing students are accountable for their actions and owe patients a duty of care (NMC 2018a, RCN 2019). They appreciate their accountability when it is expressed as a direct question – for example ‘should you discuss a patient with your friend on the bus?’ (Barnable et al 2018) – but require support to develop their understanding so that they can apply knowledge of the concept in various contexts and circumstances.

Nursing students need to know how to use social media platforms safely, with an understanding of how to check new friends or followers, and what privacy settings to use. They need to appreciate the mental and physical health risks of social media use and how to mitigate against these. Nurses are expected to maintain the level of health necessary to carry out their professional role (NMC 2018a), and therefore undergraduate nurse education must include support and guidance about how that can be achieved.

Nursing students also need to be aware of the limitations of relying on social media for information, so require skills in appraising the quality of evidence. They should also be warned that online reading tends to lead to a shallower engagement with the material.
Comparison of social media use among nursing students. All nursing students have the right to be safe and to access and demonstrate e-professionalism at the level at which they are personally comfortable. Educators are giving varying messages about social media, with some promoting its use in a way that might be considered coercive, and others banning it from their classrooms altogether. Some of the issues related to social media use can be avoided if the nursing student understands what is required of them as a professional, so it is important that they familiarise themselves with the NMC’s (2016) guidance on social media use. However, some issues, for example the scope of confidentiality, are less clear and require further discussion.

References


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