



Revista Cuidarte

ISSN: 2216-0973

ISSN: 2346-3414

Programa de Enfermería, Facultad de Ciencias de la Salud, Universidad de Santander UDES

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Revista Cuidarte, vol. 11, núm. 1, e953, 2020, Enero-Abril
Programa de Enfermería, Facultad de Ciencias de la Salud, Universidad de Santander UDES

DOI: <https://doi.org/10.15649/cuidarte.953>

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Social networks and quality of life in relation to university students' health

Redes sociales y calidad de vida relacionada con la salud en estudiantes universitarios

Redes sociais e qualidade de vida relacionada à saúde em estudantes universitários

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Historic

Receipt date:

August 9th, 2019

Approval date:

November 11th, 2019

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Abstract

Introduction: Social networks provide young people with the opportunity to be in touch with society and their environment, for which they spend a great amount of time to seek acceptance from their peers. **Materials and Methods:** A cross-sectional descriptive correlational study was conducted on a sample of 400 students. Two questionnaires were used to collect information. For variable comparison, Spearman's rank correlation coefficient and Chi-squared test were used. **Results:** 354 (88.5%) of university students have a mobile device with internet connection; 184 (46%) use 3 to 4 social networks and 196 (49%) use them for about 1 to 4 hours a day. 157 (39.2%) claimed that their studies were not affected by using social networks. As for general health, Colombians scored 58.5 and Mexicans 38.3 on a scale of 0 to 100. **Discussion:** Young people spend most of their time using social networks, being particularly interested in social relationships with their peers. Some studies suggest an association between internet misuse and physical and psychosocial health problems. **Conclusions:** Social network use behavior and quality of life perception are similar in Colombia and Mexico. In addition, social networks are moderately used as an academic and socialization tool. There is a need for opportunities to share with peers in which social networks are not used as a mediator.

Key words: Adolescent; Quality of Life; Behavior; Students; Social Networking.

Resumen

Introducción: Las redes sociales permite a los jóvenes estar en contacto con la sociedad y su entorno, gran cantidad del tiempo lo emplean en su uso, buscando aceptación por sus pares. **Materiales y Métodos:** Investigación descriptiva, transversal, correlacional. La muestra estuvo conformada por 400 estudiantes. La información se recolectó, mediante la utilización de dos cuestionarios. Para la comparación entre las variables, se empleó el coeficiente de correlación de Spearman y Chi cuadrado. **Resultados:** 354 (88,5%) de los universitarios tienen un dispositivo móvil con conexión a internet; 184 (46%) consultan entre 3 a 4 redes sociales, aproximadamente de 1 a 4 horas diarias 196 (49%). 157 (39,2%) manifestaron no ver afectada la academia por el uso de redes sociales. La salud general, en una escala de 0 a 100, obtuvo una puntuación de 58,5 por los colombianos y de 38,3 en los mexicanos. **Discusión:** Los jóvenes dedican mayor cantidad de su tiempo en el uso de redes sociales, siendo su interés especial, las relaciones entre pares. Algunos estudios coinciden en que existe una asociación entre el mal uso del internet y problemas de salud físicos y psicosociales. **Conclusiones:** El comportamiento de uso de las redes sociales y la percepción de calidad de vida es similar en Colombia y en México; además consideran que son usadas moderadamente como herramienta académica y de socialización. Es necesario espacios para compartir con iguales, en los cuales no se necesite de las redes sociales como mediador.

Palabras clave: Adolescente; Calidad de Vida; Conducta; Estudiantes; Red Social.

Resumo

Introdução: As redes sociais permitem que os jovens entrem em contato com a sociedade e seu ambiente, para o qual passam muito tempo a procurar a aceitação por parte dos seus semelhantes. **Materiais e Métodos:** Um estudo transversal descritivo e correlacional foi realizado em uma amostra de 400 alunos. As informações foram coletadas por meio de dois questionários. Para a comparação de variáveis, foram utilizados o coeficiente de correlação de postos de Spearman e o teste do qui-quadrado. **Resultados:** 354 (88,5%) dos universitários possuem telefone celular com conexão à Internet; 184 (46%) utilizam de 3 a 4 redes sociais e 196 (49%) as utilizam por cerca de 1 a 4 horas por dia. 157 (39,2%) afirmaram que a academia não foi afetada pelo uso de redes sociais. A saúde geral, em uma escala de 0 a 100, obteve 58,5 para os colombianos e 38,3 para os mexicanos. **Discussão:** Os jovens passam mais tempo usando redes sociais, com seu interesse especial nas relações com os seus semelhantes. Alguns estudos sugerem uma associação entre uso indevido da internet e problemas de saúde físicos e psicossociais. **Conclusões:** O comportamento de uso das redes sociais e a percepção de qualidade de vida são semelhantes na Colômbia e no México. Além disso, as redes sociais são usadas moderadamente como uma ferramenta acadêmica e de socialização. Você precisa de espaços para compartilhar com iguais, nos quais não precisa de redes sociais como mediador.

Palavras chave: Adolescente; Qualidade de Vida; Comportamento; Estudantes; Rede Social.

How to cite this article: Hanna MI, Ocampo MM, Janna NM, Mena MC, Torreglosa LD. Redes sociales y calidad de vida relacionada con la salud en estudiantes universitarios. Rev Cuid. 2020; 11(1): e953. <http://dx.doi.org/10.15649/cuidarte.953>



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INTRODUCTION

In recent years, the use of information and communication technology (ICT) has been a fundamental instrument in people's lives¹, which is used not only for academic purposes but as a way of relating to their social environment². This technological boom has been so great that world-renowned companies have carried out studies to identify the practices of different population groups regarding ICT³ such as use frequency, length, the number of social network accounts created and experiences with their environment, among others⁴.

Salguero and Otero⁵ indicate that young people mainly use social networks as they are in a stage in the life cycle where biological, physiological and psychological changes take place, which is crucial in the search for identity⁶. This population group has especially interests around social networks because for them, belonging to a social network is no longer a leisure option but a requirement that enables them to be in contact with society and the environment around them⁷.

Other authors agree that young people spend most of their time in online social interaction, being peer relationships their main interest, as they feel entertained, accepted and identified by their likes and end up being part of a virtual community⁷⁻¹⁰.

According to Castells¹¹, the concept of the network society is based on the multiplicity of people and devices that produce, receive, process, store and transmit information without distance,

time or quantity restrictions. For Ruiz-Corbella and De-Juanas³, a large amount of information and their exchange speed gives room to new spaces for social participation and stimulates the use of social networks.

ICT benefits are manifold. However, there are risks that could threaten the physical and/or mental integrity of adolescents such as addiction, involuntary access to certain content, or becoming victims of ill-intentioned behavior by third parties⁹⁻¹¹.

Studies have documented the risks and consequences that the inadequate use of social networks generate on people's quality of life, especially for adolescents as they become cybernauts at a younger age, often affecting their health, interpersonal relationships, coping with problems, and academic performance, among others¹².

This study aims to determine the influence of social networks on the quality of life of young people studying at two public universities in different countries.

MATERIALS AND METHODS

A cross-sectional descriptive correlational study was carried out in two public universities located in Córdoba, Colombia and in the State of Durango, Mexico. The population was comprised of 903 students enrolled in the nursing undergraduate degree in the first academic period of 2017 in both countries.

The sample size calculation was performed at a 95% confidence level, resulting in a total sample of 400 students with a power of 99.8% and an accuracy of 96.4%.

For the methodological purposes of the study, the sample was divided into two groups with the same number of participants, i.e. 200 for each country.

$$n = \frac{NZ_{\alpha/2}^2 PQ}{e^2(N-1) + Z_{\alpha/2}^2 PQ}$$

The population met the following inclusion criteria: being enrolled in the nursing program during the study period, voluntarily agreeing to participate in the study, and signing the informed consent.

The sample units were randomly selected. The information was collected using two questionnaires: the first one allowed determining aspects related to the use of social networks, in which we inquired about the access to internet, number of social networks used, daily hourly frequency, reason that promoted to access social networks, accessed contents, neglect of important aspects in life due to the use of social networks, and presence of anxiety symptoms when not having temporary access to social networks, for which a previous pilot test and its validation were carried out.

SF-12^{13,14} is the second questionnaire used to evaluate eight health concepts: physical function, social function, physical role, emotional role, mental health, vitality, body pain, and general health.

It evaluates positive and negative states in population with and without pathologies and provides a profile of the perceived health state, including subjective measures of quality of life. Regarding the SF-12 questionnaire's reliability in research carried out in Colombia¹³ and other countries^{14,15}, an internal consistency (Cronbach's alpha) was found for the physical dimension of 0.63 and for the mental dimension of 0.72. For construct and criteria validity, an exploratory factorial analysis was performed using a Kaiser-Meyer-Olkin test to measure sample adequacy, obtaining a result of 0.83, which indicates that the instrument complies with its intended purpose. It should be noted that the Spanish weights were very similar to those of the original North American version with a correlation greater than 0.9 and a variance explanation of 91% for the SF-12 questionnaire items.

The number of response options ranges from 2 to 12 depending on the item assessed. Each question is given a value that is subsequently normalized on a scale of 0 to 100 by performing a raw score calculation to obtain a homogeneous and standardized interpretation of the scores for the comparison of responses according to participants' nationality.

The information was processed and tabulated in a database for its statistical treatment in the SPSS 24 software. The results are shown in tables and maintain information confidentiality of study participants.

In the analysis of the results, the following statistics were used: sociodemographic characteri-

zation, student behavior in relation to the use of social networks, quality of life measures, and descriptive statistics of central tendency. For the relationship between the variables (use of social networks and quality of life), the Spearman's rank correlation coefficient was used to visualize the correlation between variables. For the association of the results, the Chi-squared test was used.

Ethical considerations

The following ethical aspects were considered for the development of this research:

Resolution 008430 dated October 4th, 1993 in which scientific and technical standards in health research are set forth in Section II Chapter 1 Article 6, paragraph a, g, f, that indicates the importance of making research participants aware of the risks through informed consent.

The following ethical principles were considered: respect for people or autonomy ensured through participants' informed consent and benefits through the evaluation of the risk-benefit relationship.

RESULTS

Sociodemographic characterization

77% (308) were women and the remaining number were men, the median age was 23 (IR: 19 -22). Concerning participants' socioeconomic situation, 49% (98) were classified as socioeconomic stratum 2, followed by 27.5% (55) classified as stratum 1 (See [Table 1](#)). As for age and gender per nationality, it was observed that female population prevailed in both countries (Mexico and Colombia) in 75% (150) and 79% (158) respectively, which may be related to the university degree they are pursuing since nursing is mainly considered a female profession.

Table 1. Sociodemographic characterization

Criteria	Frequency	Percentage
Female	308	77
Age-Median (IR)	23 años (19 - 22)	
Socioeconomic classification		
1	109	27.2
2	196	49
3	71	17.8
DK	24	6

Source: Author's contribution

Use behavior of social networks

Mexican students report having more mobile devices with internet connection compared to Colombians, 97% (194) in Mexico and 80% (160) in Colombia, which is significant and generates a p-value of < 0.001 , that when compared to the significance level of 0.05, it suggests a rejection of equality of proportions between both countries. However, the percentage of in-home internet is a little higher than in Mexico with 92.5% (185) than in Colombia with 85% (170). This difference is not marked and the test reports that the difference is not statistically significant with a p-value of 0.376 compared to 0.05, which is higher, leading to the failure to reject the null hypothesis of equality of proportions.

When the number of social networks used comes to 1 to 2, the percentage is significantly higher in Mexico with 48.5% (97) than in Colombia with 24.5% (49); when it comes to 3 to 4 social networks, there is a significant difference in favor of Colombia with 51.5% (103) while this frequency is 43.5% (87) in Mexico; when it comes to 5 social networks or more, Colombia beats Mexico with 24% (48) versus 8% (16) with a p-value of 0.001, considering that there are significant differences between the number of social networks used in each country, given that the p-value is 0.05.

When evaluating the frequency of anxiety symptoms due to the lack of access to social networks, an associated p-value of 0.173 greater than 0.05 was found, implying that there is no significant difference between the two countries.

As for the number of daily hours dedicated to the use of social networks, no significant difference was found since a p-value of 0.003 was obtained, which was less than 0.05. 50% (100) of Mexican students use social networks about 1 to 4 hours a day while 50.5% (101) of Colombian students use them for the same number of hours, which represents a difference of only 0.5%. 33.5% (67) of Mexican students use them about 5 to 9 hours while in Colombia 31% (62) of Colombian students use them for the same number of hours, representing a difference of 2.5%. Finally, 16.5% (33) of Mexican students use them for more than 10 hours a day and 18.5% (37) in Colombia with a 2% difference, which indicates that the percentage of daily hours dedicated to the use of social networks does not differ from one country to another.

To verify if the proportion of daily hours dedicated to the use of social networks between Mexico and Colombia is different, a hypothesis test was performed for the difference of proportions in which the null hypothesis is the equality of proportions and the alternative is that there are differences with a confidence level of 5%, finding that there are no significant differences for those who use them about 1 to 4 daily hours with an associated p-value of 0.8757 and a confidence interval of -0.1073,0.0614; that a p-value of 0.6306 was found with a confidence interval of -0.0701,0.1158 for those who use them about 5 to 9 hours per day; and a p-value of 0.6974 with a confidence interval of -0.0903,0.0602) for those who use at least 10 hours per day.

It should be noted that a very high p-value compared to the significant value of 0.05 does not suggest rejecting the null hypothesis of equality of proportions between the two countries. This means that there is significant evidence that the differences between the proportions are zero, which is verified in the confidence intervals containing this value.

The hypothesis to be contrasted is:
$$\begin{cases} H_0: \pi_1 = \pi_2 \\ H_1: \pi_1 \neq \pi_2 \end{cases}$$

Based on two random independent samples where π is the estimation of the proportions.

There is a significant difference with respect to academic problems. Colombia reports that sometimes these appear in 41.5% (83) and 18% (36) in Mexico, with a p-value of 0.001. In addition, in relation to the use of social networks, the percentages of intense and moderate use are higher in Colombia compared to Mexico, with a p-value of 0.002, which is lower than the significance level of 0.05. Therefore, the proportions between both countries are different.

Table 2. Use behavior of social networks

Criteria	México (200)	Colombia (200)	p-Value
Having a mobile device with internet connection	97,0% (194)	80,0% (160)	0,000
In-home internet service	92,5% (185)	85,0% (170)	0,376
Number of social networks used			
About 1 to 2	48,5% (97)	24,5% (49)	0,000
About 3 to 4	43,5% (87)	51,5% (103)	
≥ 5	8,0% (16)	24,0% (48)	
Anxiety symptoms of anxiety due to the lack of access to social networks	13,5% (27)	17,0% (34)	0,173
Number of daily hours dedicated to the use of social networks			
About 1 to 4 hours	50,0 % (100)	50,5% (101)	0,003
About 5 to 9 hours	33,5% (67)	31,0% (62)	
≥ 10 hours	16,5% (33)	18,5 % (37)	
Academic problems due to the use of social networks			
Never	46,0% (92)	32,5% (65)	0,001
Rarely	36,0% (72)	26,0% (52)	
Sometimes	18,0% (36)	41,5% (83)	
Use of social networks			
Low	40,0% (80)	26,5% (53)	0,002
Moderate	58,5% (117)	69,5% (139)	
Intense	1,5% (3)	4,0% (8)	

Source: Author's contribution

Perception of the quality of life in relation to health

With respect to health status, the variables composing each dimension of the study were normalized on a scale of 0 to 100, and it is considered a good perception if a score is greater than or equal to 70 points. Thus, Colombians have a better perception with an average score of 58.5 and a standard deviation of 21 points while Mexicans have an average score of 38.3 and standard deviation of 20 points, that is, the 70 point barrier is not exceeded in any of these countries, indicating that there is not a good perception of health for respondents. When the p-value of 0.018 associated with test statistics is calculated, it is found to be less than 0.05, which indicates that there are differences between both groups, reflecting better perception in Colombia.

In terms of physical function, Mexicans are 5.3 points ahead of Colombians, with an average score of 90.9 and 85.6 and standard deviations of 16 and 23 respectively, which shows a good rating for this function in both countries as it is close to 100.

As for physical role, average values of 85 and 70.6 were found for Mexico and Colombia, respectively, considered good perceptions. One explanation could be the existence of atypical data that would make the variable deviate a little from the real value that should be close between both countries.

With regard to body pain, there is a significant difference with a $p=0.028$ value less than 0.05 between Colombia (84.1) and Mexico (11) with

standard deviations of 23 and 17 points respectively. It should be noted that people tend to have a greater number of social networks in Colombia, which leads to spending more time on them and in some cases, they have had academic difficulties due to excessive or intense use of their social networks.

Relating the quality of life with the nationality, it was observed that there is a low inverse correlation regarding the use of social networks and the quality of life with a value of -0.068, and a significance level of 0.177, that is, for both nationalities, the longer the use of social networks, the lower the quality of life perceived by the population, although its significance is not high for these two variables. Therefore, it can be said that there is an inverse correlation between the use of social networks and the quality of life of young people. (See [Table 3](#)).

During the development of this study, three hypotheses were suggested to identify the factors that influence the characterization of the social network use and the quality of life of young people, which are shown below:

The younger the age, the greater the influence of peers in the use of social networks. In this respect, it was found that these variables are not related to each other because other aspects were found such as curiosity about social networks, the search for academic content and the trend of using social networks, which leave in second place the influence of friends to use them; the population of 21 years old refers that friends were the greatest influence in their use.

Table 3. Perception of quality of life. Mean \pm SD

Criteria	México (200)	Colombia (200)	Valor P
General health	38,3 \pm 20	58,5 \pm 21	0,018
Physical function	90,9 \pm 16	85,6 \pm 23	0,469
Physical role	85,0 \pm 31	70,6 \pm 40	0,262
Emotional role	81,0 \pm 35	74,9 \pm 40	0,221
Body pain	11,0 \pm 17	84,1 \pm 23	0,028
Mental Health	52,2 \pm 12	52,4 \pm 11	0,758
Vitality	34,3 \pm 21	36,1 \pm 22	0,473
Social function	82,9 \pm 22	75,9 \pm 26	0,742
Health-related quality of life. Total score	99,5 \pm 7	98,4 \pm 13	0,383

Source: Author's contribution

With regard to the second hypothesis, it was found that the younger the age, the more use of social networks, that the variables have a low inverse correlation since most of the study subjects are between 18 and 21 years old, which supports this hypothesis, and although 24 years-old students are known for intensive use of social networks, the proportion of this population with respect to those in the age range mentioned above is lower.

Finally, the hypothesis that the longer the use of social networks, the lower the quality of life perceived by the population is accepted as 50.25% (201) of survey respondents spend about 1 to 4 hours a day using social networks and 32.25%(129) about 5 and 9 hours a day.

As for the items that evaluate general health (48.4), mental health (52.3) and vitality (35.2) compared to the 70-point threshold, these did not have a good perception by students. Although body pain is not so intense (47.5 points), when analyzing for each country, it is found that the in-

tensity was rated with 84.1 points on a scale of 0 to 100 in Colombia, which may be due to the fact that moderate or intense use of social networks is associated with body pain.

DISCUSSION

In the sociodemographic characterization, age, gender, and socioeconomic stratum were considered, finding out that most of the participants are in their final or late adolescence, similar to what was found by the Com Score¹⁶, showing that the population that most accesses social networks is between 18 and 24 years old.

With respect to gender, the largest participation was female as this university degree is mainly preferred by women. However, some studies have been conducted to establish the relationship between gender and the use of social networks in which there was no marked difference in the use of these by men and women^{17,18}.

When analyzing the socioeconomic stratification, Colombian participants belong to stratum 1 and 2, while Mexican participants live rural areas, a situation that is not an impediment to access to social networks. In the same vein, the study conducted by Colás, González, and Pablos² establishes that the socioeconomic level does not represent a barrier to access to technological devices through which they can connect to an internet network and join social networks. In Colombia, the Ministry of Information and Communication Technology has created the so-called Vive Digital points located at educational institutions and in areas where a large number of people converge to enable wi-fi connection, and thus, internet access.

The use behavior of social networks was evaluated through internet access, the number of social networks used, hourly frequency of use, reasons that influenced access to these networks, accessed content, neglect of important daily life aspects due to the use of social networks, and finally, the presence of anxiety symptoms for not having temporary access to social networks. 75% of the population surveyed had a mobile device and 9.3% had a computer at home to access social networks, which is a similar percentage found in other research^{18,19}.

With regard to internet access, surveyed adolescents reported that they can easily access it at their home, university or anywhere else, findings that are consistent with other studies conducted in this same population group²⁰. In terms of the number of social networks used, almost half of the participants reported using 3 to 4 social networks, including Facebook (100%), Twitter (90%), WhatsApp (89%), Instagram

(87%), among others. This information is in line with the results obtained in the ComScore research¹⁶.

In a study carried out by García¹⁹ et al., it was found that most of the population studied uses social networks between 3 and 5 hours a day, which is a similar behavior being observed in this study as half of the participants stated that they spend about 1 to 4 hours a day. However, as the hourly frequency increases, the number of people using them decreases.

On the other hand, the highest percentage of students reported that the reason to access social networks was influenced by friends due to the need to communicate with their peers. These results are similar to the findings found by Ruiz-Palmero, Sanchez-Rodriguez, and Trujillo-Torres²¹, where participants reported that there were two special reasons to access social networks, that is, social and psychological reasons, which demonstrates that communication with peers is one of the constants for the creation of social networks.

With regard to the content accessed, according to a study entrusted by Disney²⁰ to learn about the habits of Generation XD (referring to those born between 1995 and 2001 and Generation X parents), who experienced technological advances and did not know life without digital entertainment, mobile devices or social networks. 53% considered that social networks are important for maintaining contact with friends. Moreover, the study conducted by Sánchez, Ruiz, and Sánchez¹⁷ also showed that the population access internet and social networks to communicate with friends and family, which are similar to the findings in this research.

Analyzing the neglect of household chores due to the use of social networks, almost half of the students reported that this situation sometimes happens to them, which may be due to the frequency of daily use of social networks.

With regard to perceived anxiety symptoms for not having temporary access to social networks, 16% of the study subjects stated they were concerned when this happened. According to the study conducted by Garcia, Lopez, and Garcia¹⁹, 40% of the population participating in their research indicated that it would be difficult for them to stop using social networks and 10% reduced their hours of sleep due to the use of social networks. On the other hand, Echeburúa and De Corral²² state that some of the disadvantages of uncontrolled and unsupervised use of social networks are sleep-related problems, attention deficit, depression and psychological problems.

In relation to the health perception from university students, it was evaluated by using the variables physical function, social function, physical role, emotional role, mental health, vitality, body pain, and general health. In this study, there is no significant association of these variables between the two countries, except for body pain. These results differ from other research conducted in this same population group, which shows a positive and significant association between the domains studied²³⁻²⁵.

A significant association was found with body pain, findings that are in line with those found in other research, which show that as pain increases, the perception of the health state decreases, thus affecting the quality of life^{25,26}.

Relating the quality of life with nationality, it was observed that there is a low inverse correlation regarding the use of social networks and the quality of life with a value of -0.068, and a significance of 0.177, that is, for both nationalities the longer the use of social networks, the lower the quality of life perceived by the population, although its significance is not high for these two variables. Then it can be said that there is an inverse correlation between the use of social networks and the quality of life of young people. Analyzing the results, it can be observed that more than 20% of the participants reported that physical or emotional health interferes with social relationships. Thus, social networks play a mediating role because they permit exceeding space and time limits, facilitating communication and fostering new friends, findings that are consistent with the results of the research conducted by Bohórquez and Rodríguez²⁷.

However, other studies show that there is an association between internet misuse and health and psychosocial problems such as back pain, migraines, overweight, and obesity, among others²⁸.

With respect to vitality, it was perceived by approximately half of the respondents that they have presented signs of almost never having the energy to carry out activities, arguing that this situation is due to lifestyle, academic commitments, schedules of training practices (typical of this degree) and household chores. In this regard, some authors consider that misuse of social networks generates problems to self-regulate emotions and conflicts over the feelings generated, which limits the performance of some activities of daily life²⁹.

The results related to the quality of life perception showed that most of those surveyed claimed to have a good quality of life. However, a study conducted by Higueta and Cardona³⁰ found that the population, despite belonging to a low socioeconomic stratum (50.7%) and to single-parent families (45.5%), perceived to have a good quality of life. As the authors mentioned above, it is also recommended to make an in-depth assessment of different aspects related to the quality of life.

The main users of social networks are adolescents, who dedicate many hours a day in their use because it has become an important aspect of their daily lives as it influences the way they interact and socialize. Social networks can be used by teachers as educational tools to exchange knowledge, information, and ideas. In other words, the use of technology in education contributes to making it a more personal, interactive and dynamic process³¹.

Furthermore, integrating ICT into nursing education benefits from their usefulness for accessing scientific topics of interest³², allowing them to interact in real-time to meet care needs and contribute to the implementation of health promotion and disease prevention actions at the clinical and community levels.

Finally, this study shows the importance of belonging to functional and active social networks that promote conditions of well-being, health, and quality of life of individuals. When there is misuse of social networks, there are implications in different aspects of the person, thus affecting their quality of life.

The limitations that occurred were related to the students' schedule as most of them were doing training practices at health institutions, which made it difficult to get the sample at the scheduled time.

CONCLUSIONS

Based on the information analyzed, it is concluded that the influence of peers, that is, friends or people of the same age, is not the main reason why university students access social networks and that students think they use them moderately as an academic and socialization tool.

The perception that there is a good quality of life in relation to health predominates in almost all the population under study both in Colombia and Mexico, with a score of 98.4 and 99.5 respectively, on a standardized scale of 0 to 100. On the other hand, average age of young people is 23 which is an important characteristic that influences the way in which they use social networks, considering that 59.75% (239) have at least 3 social networks and 49.75% (199) use them approximately 5 hours a day, suggesting an excessive and irresponsible use of these. 60.75% (283) of the students had some type of academic problem; low perception regarding their mental health and vitality had an average score of 52.3 and 35.2 respectively, which could directly or indirectly affect their quality of life.

The findings of this research highlight the need to create spaces of socialization with peers in which social networks are not required as a mediator, taking advantage of the time they stay at the university and establishing a relationship of friendship with the people they interact

with, and finally developing healthy habits and implementing strategies aimed at preventing cyberbullying.

Conflict of interest: The authors declare that there is no conflict of interest.

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