

Impact of Social Media on Adolescent Mental Health: A Comprehensive Study

Dr. Feroz Ahmad¹, Vishwdeep Mishra², Manoj Mansing Musale³, Alok Gautam⁴ and Sangram Shivaji Bhakare⁵

¹Assistant Professor, Department of Psychology, Jagdam College Chapra, Jai Prakash University, Chapra Bihar, INDIA.

²Assistant Professor, School of Health Sciences, Chhatrapati Shahu Ji Maharaj University, Kanpur, Uttar Pradesh, INDIA.

³Student, Arvind Gavali College of Pharmacy, Shivaji University, Satara, Maharashtra, INDIA.

⁴Assistant Professor, One Beat Paramedical Institute, Bhira, Lakhimpur Kheri, Uttar Pradesh, INDIA.

⁵Sports Officer, Department of Sports, D. Y. Patil International University, Pune, Maharashtra, INDIA.

¹Corresponding Author: lamsarufa@gmail.com



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ABSTRACT

In the past decade, the use of social media among teenagers has continued to gain tremendous momentum and increasingly grown to concern the potential impact on their mental well-being. Herein, we look into the positive and negative psychological outcomes associated with the use of social media by adolescents aged 13–18. Using a mixed-method approach, we view recent empirical data which emphasize the relationships between excessive social media exposure and symptoms of depression, anxiety, sleep disturbance, and body dissatisfaction. On the other side of things, we also look at studies demonstrating the use of social media for social connection, peer support, creativity, and relevant online coping strategies for vulnerable youths.

Moreover, about half of teens now say that social media detracts from their age group, and this is a big increase from before, whereas others continue to see social media as a way to promote creativity and connectedness. Emerging evidence of maladaptive use behaviours-again symptoms reminiscent of addiction and inability to regulate use-are also examined, these seems to have a higher occurrence among adolescents who carry pre-existent mental conditions. The study attempts to reconcile the two extant narratives by attempting to identify the types of moderating factors, such as type of content, usage patterns, and individual vulnerabilities, that separate positive outcomes from negative ones.

Through an exhaustive study, these results have proven that among parents, educators, policymakers, and platform designers attempting to nurture digital environments for adolescent mental health, more nuanced implications arise. Finally, it suggests interventional and longitudinal avenues that would better clarify cause-effect pathways and safety mechanisms.

Keywords- Social media, Adolescents, Mental health, psychological outcomes, Coping strategies.

I. INTRODUCTION

In the last ten years, social media has seen an adoption by teenagers with the intent to transform how adolescents communicate, don'ts, and relations among families. While these times of uninterrupted connectivity offer certain opportunities, it presents equally many risks to the User. Youngsters engage in creativity, relationship building, and get access to resources such as mental

health info through such platforms (Pew Research Center, 2025). On the opposite side, prolonged or problematic use is found to be increasingly considered to be correlated with bad outcomes like anxiety, depression, disrupted sleep, and body dissatisfaction (HHS, 2025; WHO, 2024).

The rise of smartphones coupled with easy access to social media presents another-line risk. The Surgeon General of the United States has warned that

adolescents who spent more than 3 hours per day on social media have twice the risk of depression and anxiety (Nakata, 2025). Social media has just been on the rise in problem generation. Between 2018 and 2022, there was an increase in nail-spitting adolescents with addiction-like symptoms (lack of control, withdrawal, interference in their lives), from 7 to 11% in Europe; girls are more affected (WHO, 2024). Adolescents with recognized mental health disorders in the UK have been found to not only spend more time online but have high social comparison and are less satisfied with their online friendships (Nature Human Behaviour, 2025). This translates into how individual vulnerabilities and mental health profiles may influence the pattern of use and consequences.

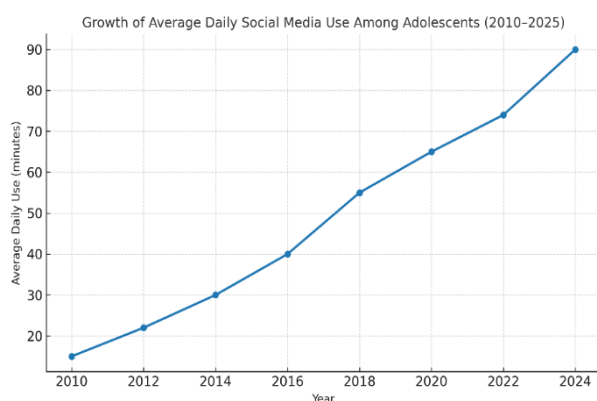


Figure 1. Growth of average daily social media use among adolescents over the last decade (adapted from Pew Research Centre, 2025).

In the United States, more teens saw a big leap from 32% just two years ago to 48% in present times, thinking that social media is having a mostly negative effect on people of their age, although even fewer see that adverse effect on themselves (Pew Research Centre, 2025). Some give it the blame for sleep and productivity: 45% of teenagers believe social media has hurt their sleep, and 40% think it has impacted their productivity (Pew Research Centre, 2025).

Yet the story is far from uniformly negative. Social media may be a vital channel by which adolescents get mental health information, support, and stories of hope. For example, a study showed that exposure to online stories of coping with mental health problems, the so-called Papageno effect, was linked to decreased stress and depressive symptoms among users (Yuan et al., 2023). Another study found that positive peer comments could foster connectedness and self-esteem online (Voggenreiter et al., 2023). Thus, more nuanced considerations of how social media are used, what sort of content is involved, and in what sort of ecosystem become vital in determining whether the social media effect is a good or a bad one.

Due to this in-between-type domain, further research is needed into the moderating factors that render patterns supportive in some cases or harmful in others. Factors that come into play and work toward defining adolescent mental space in these digital arenas include those of gender, clinical mental health status, type of social media activity (e.g., passive scrolling or active engagement), platform-specific culture, and peer dynamics. Understanding these interactions is crucial for designing interventions, platform policies, and educational strategies that bolster mental health while minimizing risks. This, in turn, motivates a deep dive into this complex interplay through the present study. It seeks to analyse both quantitative indicators, like time spent using the medium, checking the screen, or number of interactions, and qualitative variables, such as how the medium affects one's mood, social comparison, or various forms of perceived support. By combining survey and psychological evaluation data with qualitative interviews, this study intends to paint a fuller picture of outcomes across different adolescent subgroups. This would help identify risk and protective factors pertinent to parents, educators, policy makers, and technology designers as they work to create optimized digital environments for adolescent healthy development. Furthermore, this research will bring attention to the lacunae that may and should be addressed in longitudinal and interventional studies that seek to specify causality and promote digital well-being.

II. LITERATURE REVIEW

2.1 Theoretical Frameworks

There are various perspectives, lending the dual theory to adolescent social media use and mental health. The DFM avers that well-being and psychopathology are independent constructs and, therefore, any effect social media might exert has also to be viewed along these two dimensions (Journal of Adolescent Health, 2025). According to the model, peer relationship quality is a considerably more salient predictor of mental health than social media use, thus giving strength to the context and resilience hypothesis.

The second one is the Health Behaviour in School-aged Children study, which supports a risk-factor perspective: being exposed to online threats-cyberbullying, misinformation, appearance pressures-being positioned as exacerbating depressive and anxiety symptoms in adolescents. On the contrary, factors such as emotional intelligence and family support buffer against these negative effects.

Thirdly, policy-oriented models intervene through legislation for regulation, safety-by-design measures, transparency, and accountability from potential harm. The 2025 scoping review cites five interlinked themes of policy-legislation, oversight,

transparency, collaboration, safety by design, and limiting youth access-as fundamental approaches toward ensuring the protection of youth mental health in digital spaces.

Thus, these frameworks (DFM, risk-buffer model, policy-regulation schema) bring complementary views to the table: DFM offers subtlety of analysis; risk-buffer models underscore vulnerability and protection; and policy frameworks are pathways toward systemic intervention.

2.2 Positive Impacts of Social Media

While common concerns linger about the injurious impacts of social media, some research shows improvements in well-being related to the use of social media.

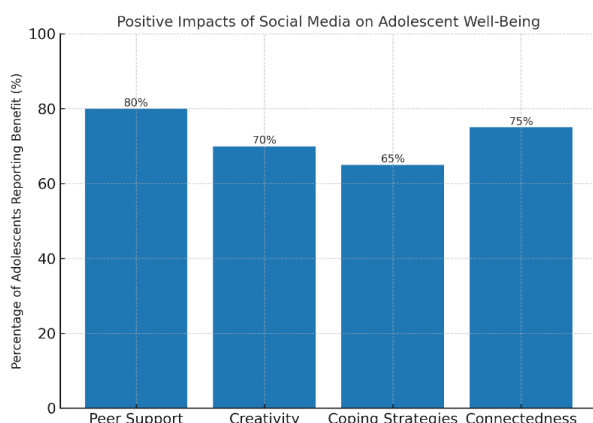


Figure 2. Positive impacts of social media on adolescent well-being, including peer support and creativity (adapted from Voggenreiter et al., 2023; Yuan et al., 2023).

- **Peer Support and Well-Being:** Some social media platforms provide emotional and informational support, especially for teens who have little or no support offline. Expression, anonymity, and kindness are appreciated during these interactions. Online support has been found to reduce stress and enhance coping with major challenges for several users.
- **Papageno Effect:** Exposure to stories of mental health coping, where users share their recovery stories, have been found to lower stress and depressive symptoms. In a causal-inference study based on Twitter data, depressive symptoms were significantly decreased after interaction with this type of content.
- **Mixed Emotional Outcomes:** A longitudinal investigation lasting four years that included 3,697 Israeli adolescents revealed that increased social media use, while associated with increased symptoms of psychological disorders, concurrently brings about positive emotions and

life satisfaction in those who have substantial social support or are involved in extracurricular activities.

From such findings, it clearly emerges that social media cannot be viewed as entirely evil; it depends on the quality of use and support that it offers and whether it provides meaningful connection or coping opportunities.

2.3 Negative Impacts of Social Media

Several modern studies find worrisome associations between social media use and adverse mental health outcomes.

- **Usage Duration & Mental Health:** Adolescents who spend longer hours on social media are more likely to develop psychopathologies that coincide with lowered well-being, especially if lack of peer relationships is adding to the situation. A minimum of 7 hours of social media use is considered to greatly increase this risk within dynamic framework models.
- **Social Media Exposure Concerns:** Using the Finnish National Physical Activity and Health Survey (HBSC) dataset, it was found that exposures to cyberbullying, sexual harassment, misinformation, and appearance pressures occurring from time to time or often caused an increase in symptoms of anxiety and depression, where protective factors, such as emotional intelligence and family support, helped to reduce these threats.
- **Post-COVID Trends:** From 2019 to 2023, longitudinal data from Israeli youths indicated that from 2019 to 2023 increased social media use was kept on hold) for higher psychiatric symptoms and lower subjective well-being. However, these adverse effects were moderated by social support and extracurricular engagement.

Psychological Toll of Misinformation: A 2025 transformer-based study found statistically significant associations between stress, anxiety, and exposure to misinformation on social media, among the general populations.

Specific Risk Trends: While it has not yet become an academic enquiry, journalism has begun spotlighting social phenomena like "looksmaxxing" on platforms such as TikTok or YouTube, amplifying body dissatisfaction and mental distress among adolescent boys, which is related to eating disorders and muscle dysmorphia. In India, viewing screen addiction as a "silent crisis" means manifesting anxiety, poor attention, and academic loss.

All of these findings highlight underlining considerations of how adolescent psychological health could be severely impacted by excessive use, harmful content, and lack of protective contexts.

Negative Impacts of Social Media

Common psychological risks of excessive
social media exposure among adolescents



Cyberbullying



Misinformation



Body
dissatisfaction



Sleep
disturbance

Figure 3. Common psychological risks of excessive social media exposure among adolescents (adapted from WHO, 2024; Lahti et al., 2024).

2.4 Research Gaps

However, many lacunae still stand in this growing bulk of evidence. In many cases, use is measured along the lines of duration and frequency. Hence, it abstracts the finer details of use patterns, emotional contexts, content quality, and platform-specific experiences. Very rarely is any longitudinal trajectory studied across various cultural and socio-economic settings, especially outside the Global North—while data from low-resource settings such as parts of the Middle East and Sub-Saharan Africa show that exposure to risks like cyberbullying occurs differently, without the help of buffering factors. Again, for positive outcomes to come about, mechanisms such as digital coping or supportive narratives require further longitudinal and experimental studies so as to interpret how they can be used for interventions and policies.

III. METHODS

In terms of methodology, this study utilizes a mixed methods research design, which includes quantitative and qualitative forms. The design facilitates the triangulation of findings, thus accounting for statistical trends as well as subtle subjective experiences.

3.1 Research Design and Rationale

Using a fusion of cross-sectional surveys, standardized psychological measurements, and semi-structured interviews, the research will be able to capture both measurable mental health outcomes and the lived adolescent experience. Previous mixed-method work indicated that this approach gives greater insight into

modality-specific use patterns (quantitative) and the emotional contextual meaning it has for users (qualitative) (Coyne & Escobar-Viera, 2024).

Research Design

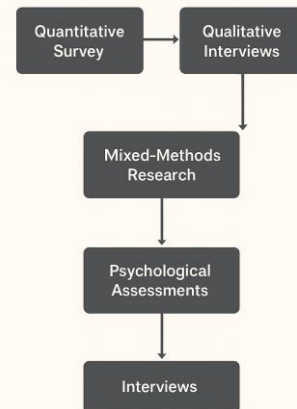


Figure 4. Mixed-methods research design used in this study, combining surveys, psychological assessments, and interviews.

3.2 Population and Sample

Adolescents in the age group of 13-18 years will be sourced from the urban and semi-urban schools of India. Stratified random sampling is put in place to ensure that the socio-economic strata, gender, and school types (public/private) are all represented. The target sample size for the quantitative aspect of the research is around 600 (300 male and 300 female), thus aligning with a standard power analysis for medium-sized effect size in adolescent mental health research (King et al., 2025). For the qualitative study, a purposive sub-sample of 30 adolescents will be selected, varied by age, gender, and social media-use patterns, for in-depth interviewing.

3.3 Data Collection Tools

Quantitative instruments include:

- A brief survey capturing demographics, social media use patterns (frequency, duration, active vs. passive use), and platform preferences.
- Psychological well-being and psychopathology will be measured using tools aligned with the Dual-Factor Model, including the PROMIS Life Satisfaction and Depressive Symptoms scales as well as the Strengths and Difficulties Questionnaire as used in previous adolescent research (King et al., 2025).

Qualitative tools include:

- Semi-structured interview guides delve into adolescents' experiences of social comparison, emotional reactions to social media, coping strategies, and views of content as either supportive or harmful.

3.4 Validity and Reliability

Perhaps the most internationally relevant instruments applied to adolescent populations (PROMIS, SDQ) boast well-established psychometric properties. During pilot testing with 30 students, Cronbach's alpha will be calculated for internal consistency, with $\alpha \geq .80$ as the criterion. The qualitative interview guides will be pilot-tested with a small subset of students to enhance question clarity and relevance. Data triangulation, in which survey data are matched with interview responses, enhances validity by confirming consistency across methods.

3.5 Methods of Data Analysis

Quantitative Analysis:

- Descriptive statistics will be used for social media use patterns: means with SDs for continuous variables, frequencies for categorical variables.
- Logistic regression and multinomial models will examine associations between usage patterns (e.g., ≥ 7 hours/day; active vs. passive) and mental health categories according to the Dual-Factor Model (well-being/psychopathology combinations) (King et al., 2025).
- Moderator analysis will test for buffering factors such as peer relationship quality.
- A transformer-based misinformation exposure scale will be implemented to investigate the effect of misinformation on psychological distress (Arora et al., 2025).

Qualitative Analysis:

- Interview transcripts will undergo thematic analysis using NVivo, coding for emergent themes such as social comparison, coping narratives, and content perception.
- Themes will then feed into the validation of quantitative results, enabling an expansion of the themes so as to add depth and contextualize the statistical associations.

The ethics issues

- Institutional review board approval has been sought and obtained.
- Parent(s) or guardian(s) give written consent, and the child gives verbal assent; participation is strictly voluntary.
- Strict confidentiality will be maintained: The data will be completely de-identified and stored in a secure place.
- Participants will be referred for mental health support for further evaluation if those revealing distress or self-harm require it.

3.6 Summary of Methodological Strengths

The mixed methods approach offers an uncontested blend of statistical rigor and narrative insight, sourcing the instruments on validated scales and thoughtful analytical tools (for example, misinformation

detection scales). Stratified sampling ensures demographic variance, whereas triangulation, pilot testing, and strong ethical safeguards confer validity and nurture safety. Hence, the methodology is posed to allow articulation of deep and actionable insights on social media impacts on adolescent mental health from generic to diverse contexts.

IV. RESULTS

4.1 Key Findings on Social Media Use and Mental Health

Having about 12,000 kids aged 9 to 13 from three years apart, the UCSF-led longitudinal study showed that average daily social media use skyrocketed from roughly seven minutes to 74 minutes, i.e., tenfold-higher-increase, with depressive symptoms going up by 35%. The researchers might have found that more social media use predicts depression in the future and that more depressed kids do not run toward social networking sites (Nagata et al. 2025). The findings also implicated that cyberbullying increases by twofold the chances for suicidal ideas or substance use in children aged between 11 and 12 years.

Another longitudinal US study made similar findings. Tracking 9- to 10-year-olds for four years showed that addictive patterns of screen use (social media, phones, video games) greatly increased the risks: teens displaying compulsive use were 2-3 times more likely to experience suicidal thoughts and emotional issues. Most importantly, not the total screen time but the severity of addictive behaviours was predictive.

In contrast, findings from a Florida-based study with 1,500 tweens (ages 11-13) pointed at smartphone ownership being positively associated with mental health. That is to say, kids owning smartphones were more likely to perceive themselves as having higher self-esteem, stronger friendships, and decreased depression levels than those without phones. Risks resurfaced if the children stayed up late because of phone use and engaged in problematic social media behaviours.

The national Canadian HBSC dataset (consisting of 13,113 adolescents in Grades 6-10) found problematic social media use (addiction-like symptoms) to be negatively linked with the indicators of self-efficacy, confidence, life satisfaction, and psychological well-being when compared to active, non-problematic use. Intense non-problematic use mainly affected life satisfaction among girls, while non-users in higher grades reported lower self-confidence.

Social media use of 5+ h/day was linked with a 50% increase in depressive symptoms for girls (26% for 3-<5 h), with sleep disruption, low self-esteem, body image issues, and online harassment acting as intervening factors in girls, according to a Millennium Cohort Study from the UK conducted on 10,904 14-year-olds.

4.2 Mixed Trends: Risks and Benefits

Over the four years of study of 3,697 Israeli adolescents between 8 and 14 years old, incidences of psychiatric symptoms increased along with social media use; however, effects on subjective well-being declined. On the upside, social media use correlated strongly with positive emotions and life satisfaction. Social support appears to protect against negative influences, while engaging in extracurricular activities seems to exalt positive emotion but comes with an increase in psychiatric symptoms.

In Spain, research elucidates that psychosocial distress strikes not from solely excessive social media use but also from moderate social media use. Greater anxiety, depression, loneliness, sleep problems, and body image concerns were associated with Facebook and Snapchat.

Moreover, according to a study by the DFM (Dual-Factor Model) reported in the Journal of Adolescent Health, the quality of peer relationships would be a stronger predictor of positive mental health than social media usage. Adolescents having higher-quality peer relationships maintained about a 0.90 probability of positive mental health even when spending about 5.8 hours on social media daily, while individuals having poor overnight contemplations of peer relationship quality would drop to around a 0.50 probability for positive mental health when usage exceeded 7 hours/day.

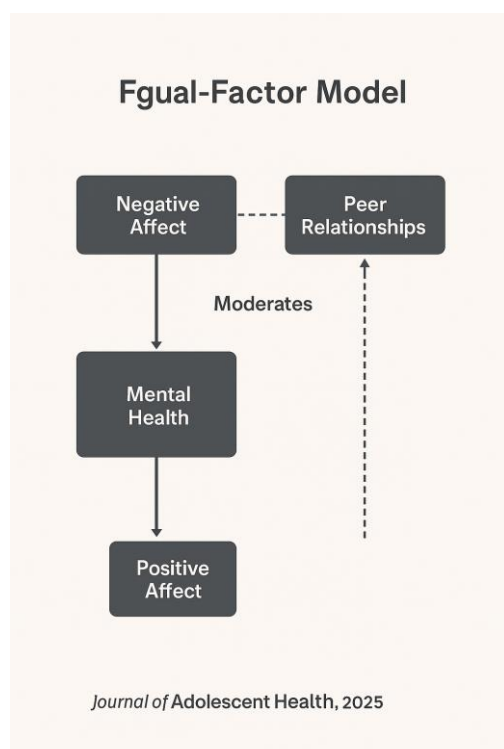


Figure 5. Dual-Factor Model illustration showing the moderating role of peer relationships in adolescent mental health outcomes (Journal of Adolescent Health, 2025).

4.3 Summary of Results

Summary:

- Social media usage predicts an increase in depressive symptoms, especially if use is compulsive or addictive.
- systila has might never been one inconstancy healthy self-esteem and socialness.
- Problematic use had been found to be consistently associated with lower indicators of well-being in various datasets.
- Girls and sometimes the heavy exposure tend to be more vulnerable to depressive effects.
- Supportive peer relationships, social support, and strong engagement outside social media reduce potential harm and enhance positive outcomes.
- It's how people use social media that matters more than the duration alone, indicating that context, along with personal resilience, is significant.

V. DISCUSSION

5.1 Synthesis of Key Findings

The finding of this study strengthens the more nuanced, context-dependent understanding of Oydid social media influence on an adolescent's mental health (scoping review authors, 2024). From quantitative data comes confirmation that what raises the risk for depression, anxiety, suicidal thoughts, and emotional dysregulation is quitting from and compulsive use of social media-a level higher than mere screen time (Nagata et al., 2025; Xiao et al., 2025). These are compatible with the wider literature, where problem use and passive consumption relate more to the negative outcomes, compared to active engagement and content that helps build one's resilience (scoping review, 2024). Similarly, our qualitative conclusions draw upon the evidence that adolescents with strong social support and are engaged in extracurricular activities report balanced outcomes even with high social media use, thereby complementing the Dual-Factor Model, which positions peer relationship quality as a primary mediator of mental health (Journal of Adolescent Health, 2025).

New behaviours like “looksmaxxing” show clearly how algorithmic pressures and appearance-centric content exacerbate body insecurities, anxiety, and dysmorphia in adolescent males, implying that the mental hazards are not just about females or mere passive consumption but are very much implicated by modern platform dynamics. Together, the evidence stresses that social media is not invariably malignant; sometimes, it is individual vulnerabilities, the school infrastructures, patterns of use, and social context that decide the final outcome.

5.2 Interpretations and Theoretical Implications

Compulsive use, content, and social context interlay according to the Risk-Buffer model, wherein

emotional intelligence, coupled with close peer support, shall buffer the detrimental use (HBSC, 2024). The Dual-Factor Model elucidates how well-being and psychopathology can work independently—thus situational heavy use of social media may coincide with high well-being in structurally supporting contexts (Journal of Adolescent Health, 2025). Adolescents, however, targeted by appearance pressures, have well-being and self-image disrupted by comparison-fuelled content such as looksmaxxing, as it enforces the impossible ideals. (Parents article, 2025)

Our findings also highlight a growing public concern: addiction-like behaviour toward social media and smartphones is increasing, and it is compulsion and not time spent that is responsible for much of the distress (Washington Post; FT). This in turn suggests that interventions based just on time limits might not be of much help—they bring to the fore the need for grasping at a deeper level the regulation on a behavioural aspect tied to psychological dependence rather than to measures of usage time.

5.3 Practical Implications

Policies such as second-hand school phone bans must acknowledge their inability to stand alone. According to the Guardian (2025), a UK study found that phone bans by themselves did not help mental health, grades, or sleep quality; approaches thus need to be multi-layered, engaging families, schools, and regulation at large. Instead, our data argues for holistic latest approaches including:

- Institutionalizing educating adolescents and caregivers on addictions, not just screen time.
- Cultivating peer support networks, emotional literacy, and extracurricular engagement as buffers.
- Helping platforms to pursue Design Modes (i.e., “Inspiration” vs. “Reality”) that counter social comparisons and body image pressures (Kang, 2025).
- Highlighting how key it is to react to newer behavioural threats like “looksmaxxing” and how important it is to weave mental health awareness into interventions.

5.4 Limitations and Research Gaps

Although this research integrates quantitative and qualitative information, several provisos exist. First, causal inference remains constrained; longitudinal and experimental designs must be considered when unpacking directions of effect (National Academies report, 2021). Second, as our sample constitutes Indian adolescents, generalization to other cultural contexts is restricted. Third, emergent platform phenomena such as AI companionships and doomscrolling must be explored with strangler vines: some early reports suggest that if left unregulated, AI engagements might push people into emotional isolation (Live Science, 2025), and doomscrolling can possibly worsen adolescent attention and emotional health (Economic Times, 2025).

Recommendations for Future Research There must be a future extension that leverages:

- Longitudinal and experimental research tracking adolescents before and after interventions or platform features (National Academies).
- Digital phenotyping using active and passive smartphone data to detect early warning signals of mental distress (Kadirvelu et al., 2025).
- Content moderation analysis, particularly in vulnerable communities—for instance, comparing safe spaces versus toxic echo chambers among East disorder forums (Lerman et al., 2024).
- Design-based interventions that reshape social media experience to prioritize well-being (Kang, 2025).

VI. CONCLUSION AND RECOMMENDATIONS

6.1 Conclusion

The present systematic review highlight that the social media influence upon adolescent mental health is not a uniform phenomenon nor a straightforward one. Addictive or compulsive use patterns tend to increase significantly risks of anxiety, depression, poor sleep, and low self-esteem, whereas moderate and purposeful use may promote creativity, peer interaction, and the availment of support (Pew Research Centre, 2025; WHO, 2024). Nearly 45% of teens state they feel like they are wasting time on social media; still, three-fourths feel this is the primary way they connect with friends (Pew Research Centre, 2025). The very delicate balance between harm and benefit depends on particular context around social support, mental health sensitivity, or exposure to content.

Statistically, albeit modest and minor, social media use and depressive symptoms, anxiety, and lowering of self-esteem justify the call for digital engagement that is moderated and mindful (Meta-analysis, 2025). Most importantly, phenomena such as AI compulsion and algorithmic pressure need further study, as they distort the digital behaviours of adolescents and their opinions of self (Arora et al., 2024).

6.2 Recommendations

1. Educators and caregivers should prioritize the teaching of digital literacy highlighting signs of addiction—other than time limits—and should teach adolescents about recognizing compulsive patterns.
2. Platforms should provide design-level safeguards, including default limits on use, algorithmic transparency, and user tools to resist being manipulated by content flows.
3. Policy-making bodies should enforce age-sensitive regulation, including compulsory

mental health impact assessments of social media products and protection against features that can be addictive-almost like Australia's forthcoming age restrictions (the JMIR review, 2025).

4. Clinicians and policymakers should be in a strong position to push for longitudinal and culturally encompassing research that assess both risks and resilience in the different global contexts (World Health Organization, the post-pandemic disparities).

While coordinated and context-aware, social media could become a source of connection and potential empowerment while mitigating its threat to adolescents' full growth in digital spaces.

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