Social Media Use and Mental Health Among Adolescents and Young Adults: A Critical Review of Mechanisms, Contexts, and Future Directions

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Abstract

Social media has become one of the most influential developmental contexts for adolescents and young adults, yet its implications for mental health remain contested. This review critically synthesizes literature published between 2015 and 2025 on the associations between social media use and depression, anxiety, psychological distress, self-esteem, sleep quality, body image, and broader indicators of well-being. A structured narrative review approach was adopted, guided by searches across Scopus, PsycINFO, PubMed, and Google Scholar, with additional manual reference chaining. Sixty-three peer-reviewed studies and review articles were synthesized, including both international and Indian evidence. The literature indicates that simple exposure measures such as time spent online explain only a small share of variance in mental health; by contrast, the quality, meaning, and context of social media engagement are more predictive. Negative outcomes are most consistently linked to problematic or compulsive use, upward social comparison, cyberbullying, FoMO, sleep disruption, and appearance-focused engagement. At the same time, social media may support belonging, identity exploration, peer support, and help-seeking for some users. Indian studies echo international patterns but also highlight culturally specific pressures related to academic competition, collectivist peer norms, gendered surveillance, and unequal access to mental-health support. The review argues that the field must move beyond generic "screen time" explanations toward developmental, culturally informed, and person-specific models. Key priorities include longitudinal and experience-sampling designs, better measurement of platform practices, and intervention studies integrating digital literacy with preventive mental-health care.

Keywords: social media, mental health, adolescents, young adults, depression, anxiety, India

1. Introduction

The rapid integration of social media into everyday life has altered how young people communicate, form identities, seek recognition, and regulate emotions. Platforms such as Instagram, Snapchat, YouTube, WhatsApp, TikTok, and emerging short-video ecosystems are not peripheral media tools; they are environments through which adolescents and young adults participate in peer culture, construct visibility, consume norms, and experience approval or exclusion. Unsurprisingly, psychology has turned sustained attention to whether this digital ecology is benign, beneficial, or harmful. Public debate often assumes a simple causal story: more time on social media leads to worse mental health. Yet the empirical literature has been more complex, with some studies reporting small negative effects, others showing null associations, and still others demonstrating that online engagement can support connection and

resilience under specific conditions (Odgers & Jensen, 2020; Orben & Przybylski, 2019; Valkenburg et al., 2022).

The controversy is partly methodological and partly conceptual. Early work frequently relied on cross-sectional designs and broad indicators such as total screen time, which flattened meaningful differences between active communication, passive scrolling, social comparison, harassment exposure, content creation, or support-seeking. More recent scholarship argues that the effects of social media depend on who is using it, how they are using it, what content they encounter, and in which psychosocial context that use occurs (Odgers & Jensen, 2020; Valkenburg et al., 2022). This shift is especially important in adolescence and emerging adulthood, developmental periods characterized by heightened sensitivity to peer evaluation, identity experimentation, emotion regulation challenges, and vulnerability to internalizing symptoms.

Mental health concerns among young people have also become more visible over the same period. Internationally, researchers have documented rising distress, anxiety, loneliness, sleep problems, and depressive symptoms among adolescents and university students, especially in the years surrounding the COVID-19 pandemic. It would be reductive to attribute this trend to social media alone; family stress, educational pressure, economic uncertainty, social inequality, and broader digitalization all contribute. Nevertheless, social media can amplify these stressors by increasing exposure to curated peer success, appearance ideals, interpersonal surveillance, and round-the-clock connectivity. Conversely, it may also offer peer solidarity, information, validation, and pathways to help-seeking.

The Indian context deserves particular attention. India has one of the world's largest populations of mobile-first internet users, with adolescents and young adults representing a major share of platform engagement. For Indian youth, social media sits at the intersection of intense educational competition, family expectations, gender norms, regional inequalities, and rapidly changing aspirations. Digital spaces can broaden opportunity, but they may also intensify social comparison, family monitoring, misinformation, and stigma-laden conversations around mental illness. Empirical work from India remains smaller in scale than research from North America and Europe, but recent studies increasingly show links between problematic social media use, depressive symptoms, FoMO, and psychological distress among Indian adolescents and college students (Bhat et al., 2024; Jain, 2025; Malik et al., 2024; Rautela & Sharma, 2022).

This review aims to synthesize this fast-moving literature in a way suitable for a Scopus-indexed psychology journal. Rather than merely cataloguing results, it critically evaluates how the field has framed exposure, measured outcomes, handled causality, and interpreted inconsistent findings. The review has five objectives. First, it examines how social media use has been operationalized, from time-based metrics to problematic-use models. Second, it synthesizes evidence on mental-health outcomes, with emphasis on depression, anxiety, psychological distress, body image, sleep, and well-being. Third, it evaluates mechanisms such as social comparison, FoMO, cyberbullying, sleep disruption, and emotion regulation. Fourth, it integrates Indian and international evidence to identify shared and context-specific patterns. Fifth, it outlines research gaps and future directions, especially the need for developmental, cultural, and person-specific approaches.

2. Literature Review

2.1 From “screen time” to patterned engagement

One of the most significant developments in this field has been the movement away from treating social media as a monolithic exposure. Earlier debates often used duration-based indicators: hours per day, frequency of checking, or number of platforms used. Those measures were not useless, but they offered only crude approximations of psychological experience. Orben and Przybylski (2019), using large datasets, found that the association between digital technology use and adolescent well-being was statistically negative but very small, explaining little variance. Their work was important not because it settled the debate, but because it demonstrated how easily trivial effects can be overinterpreted when datasets are large and public anxiety is high.

Subsequent reviews advanced this argument. Odgers and Jensen (2020) concluded that the most rigorous large-scale studies reported small and often clinically negligible associations between amount of daily digital use and mental health. Valkenburg et al. (2022) reached a similar conclusion in their umbrella review: aggregate estimates are often weak or inconsistent, but these averages conceal substantial heterogeneity. A minority of adolescents appear more vulnerable, some benefit from social media, and many experience little measurable effect. Thus, the field increasingly distinguishes between intensity of use, active versus passive engagement, platform-specific affordances, and problematic or addictive patterns.

This distinction matters because time spent online may capture entertainment, learning, support-seeking, social coordination, or compulsive checking all at once. Coyne et al. (2020), in an eight-year longitudinal study, found that time spent using social media did not predict within-person increases in depression or anxiety across adolescence into emerging adulthood. Their findings directly challenged the assumption that duration itself is the principal causal agent. Similarly, Heffer et al. (2019) reported no robust evidence that social media use predicted later depressive symptoms in adolescents and young adults. These studies do not imply that social media is harmless; rather, they suggest that simple exposure metrics are too blunt to identify psychologically consequential processes.

By contrast, studies examining problematic or addictive use have produced more consistent links with distress. Andreassen (2015) argued that social network site addiction should be understood as a behavioral pattern involving salience, mood modification, tolerance, withdrawal, conflict, and relapse. Within the I-PACE framework, problematic social media use is conceptualized as an interaction among personal vulnerabilities, affective states, cognitive biases, and impaired executive control (Brand et al., 2016). This model helps explain why similar platforms can produce very different outcomes across users: the same affordance may become socially enriching for one adolescent and compulsive for another.

A related shift concerns active and passive use. Active use includes messaging, posting, commenting, and direct interaction; passive use includes scrolling, observing, and consuming others’ content without reciprocal exchange. Passive use is more consistently associated with envy, loneliness, and self-evaluative threat because it increases opportunities for upward comparison and distorted social inference. Highly visual platforms intensify this mechanism by privileging appearance, lifestyle signaling, and performative popularity. Marengo et al. (2018)

showed that use of highly visual social media was associated with internalizing symptoms partly through body-image concerns, illustrating how platform architecture shapes mental-health pathways.

The implication is straightforward but often neglected: researchers should not ask whether social media is globally good or bad. They should ask which practices, on which platforms, for which users, under what conditions, are linked to which outcomes. This review adopts that more differentiated perspective.

2.2 Depression, anxiety, distress, and well-being

Depression and anxiety remain the most frequently studied outcomes. Keles et al. (2020), in a widely cited systematic review, found that across four domains of social media use—time spent, activity, investment, and addiction—social media correlated with depression, anxiety, and psychological distress in adolescents. Importantly, they emphasized that most included studies were cross-sectional and therefore unable to establish causality. The review's lasting contribution lies less in proving harm than in identifying the methodological weakness of the evidence base.

Narrative and systematic reviews published afterward continued to report mixed but nontrivial associations. Saleem et al. (2024) concluded that social media use was associated with symptoms of depression and anxiety among children and adolescents, but the relationship was contingent on platform behavior, context, and study design. Marciano et al. (2022) similarly found that digital media use during the COVID-19 pandemic was tied to poorer mental health overall, although the review also documented protective effects when media facilitated connection under physical isolation. This duality recurs across the literature: social media can be both a stress amplifier and a coping resource.

Some of the strongest evidence for adverse outcomes concerns problematic engagement rather than routine use. Studies of social media addiction have repeatedly found associations with depressive affect, anxiety, low self-esteem, sleep impairment, and emotional dysregulation (Blackwell et al., 2017; Cao et al., 2020). In these models, social media becomes a maladaptive regulation strategy. Young people may turn to platforms when lonely, bored, or distressed, temporarily relieving discomfort; however, repeated checking, comparison, and disrupted routines may reinforce the very emotions they are trying to escape.

Yet negative outcomes are not universal. Odgers and Jensen (2020) argued that the size of average associations is often too small to justify broad claims that digital technology is driving a mental-health crisis. This caution is important for both science and public policy. Overstating harm can obscure the fact that offline determinants—family adversity, bullying, poverty, academic stress, trauma, and social exclusion—remain much stronger predictors of psychopathology. Moreover, social media may provide marginalized or isolated youth with access to communities otherwise unavailable to them. Mental-health discourse should therefore avoid digital determinism.

Well-being outcomes also complicate the picture. Some adolescents report increased belonging, entertainment, self-expression, and peer support through online interaction. For university students, social media may help maintain social capital across transitions, especially when geographic mobility or pandemic restrictions limit in-person contact. The problem is that beneficial and harmful experiences often coexist. A student may find emotional validation in one

moment and severe self-comparison in the next. This coexistence helps explain why overall correlations are often modest while individual experiences can feel psychologically powerful.

2.3 Social comparison, self-presentation, and body image

A major mechanism connecting social media to internalizing problems is social comparison. Social networking sites offer unprecedented access to others' edited lives, selectively positive milestones, and appearance-enhanced images. This environment creates a high-comparison ecology in which adolescents infer that peers are more attractive, more socially connected, more successful, or more emotionally fulfilled than they are. The mechanism is especially salient during adolescence because self-concept is still consolidating and peer evaluation carries amplified emotional weight.

Marengo et al. (2018) demonstrated that highly visual social media use was linked to internalizing symptoms through body-image concerns. On image-driven platforms, the self is not merely expressed but displayed, rated, and compared. This process affects both girls and boys, though girls may experience stronger pressures related to beauty norms and public appearance monitoring. Exposure to idealized images can foster dissatisfaction, shame, and self-objectification, while quantifiable feedback metrics—likes, comments, follower counts—convert social approval into visible and repeated performance indicators.

Social comparison is not limited to appearance. Academic performance, internships, relationships, travel, consumption, and productivity are all curated online. For many university students, especially in competitive educational settings, platform content intensifies status anxiety. In India, where peer success and family reputation often carry collective significance, exposure to curated achievements may deepen perceived inadequacy. Recent Indian work suggests that social networking intensity predicts poorer mental well-being partly because it fuels FoMO and self-evaluative pressure (Ubeja et al., 2025).

Self-presentation processes deepen these dynamics. Adolescents learn to anticipate how a photo, opinion, or status update will be judged. This can heighten self-consciousness and reduce authentic expression. Some users respond by editing or censoring themselves; others engage in constant monitoring of feedback. The resulting cycle resembles contingent self-worth, where emotional stability becomes dependent on online affirmation. Although such processes do not affect all users equally, they help explain why some young people feel exhausted, vigilant, or emotionally depleted after routine platform use.

2.4 FoMO, boredom proneness, and compulsive checking

The fear of missing out has become one of the most influential constructs in contemporary digital psychology. FoMO refers to the apprehension that others are having rewarding experiences from which one is absent. On social media, this is intensified by real-time updates, disappearing stories, algorithmic ranking, and constant notification systems. FoMO motivates repeated checking because the user experiences absence not as neutral but as psychologically costly.

Blackwell et al. (2017) showed that FoMO predicted social media use and addiction, alongside neuroticism and attachment-related factors. Amran and Jamaluddin (2022) further linked screen time with FoMO during the pandemic, illustrating how uncertainty and reduced offline contact

can heighten dependence on mediated awareness. FoMO is especially potent among adolescents and college students because it links belongingness needs to digital vigilance.

Indian evidence in this area is growing. Malik et al. (2024) found that FoMO and boredom proneness mediated the relationship between psychological distress and social media addiction among Indian adolescents. The implication is clinically important: distress does not simply result from problematic use; it can also precede it. Social media may become a coping device for already distressed youth, while FoMO and boredom transform that coping into compulsive engagement. Rautela and Sharma (2022) similarly traced a conceptual movement from FoMO to JOMO, arguing that problematic internet use among Indian users is shaped by anxieties about social exclusion and hyperconnection.

Boredom proneness is another underappreciated mechanism. Social media offers immediate stimulation, novelty, and intermittent reinforcement. For boredom-prone users, this makes platforms unusually effective at capturing attention. Yet the relief is brief; once stimulation fades, the urge to refresh returns. Bai et al. (2021) found that boredom proneness mediated the relationship between mobile social media use and subjective well-being, underscoring how emotional states shape the meaning of digital behavior. In practical terms, interventions focusing only on "reducing screen time" may fail unless they also address boredom tolerance, self-regulation, and alternative forms of engagement.

2.5 Cyberbullying, peer surveillance, and interpersonal stress

Another consistent pathway to poor mental health is cyberbullying. Unlike offline bullying, cyberbullying can be persistent, anonymous, public, and inescapable. Harmful content may be shared repeatedly, witnessed by large audiences, and revisited long after the event. This creates a distinct psychological burden marked by shame, hypervigilance, social withdrawal, and anticipatory anxiety.

Kwan et al. (2020), in a systematic map of systematic reviews, concluded that cyberbullying is strongly associated with depression, low self-esteem, self-harm, and other adverse psychosocial outcomes among children and young people. The authors also noted important gaps in longitudinal and qualitative evidence, a reminder that even seemingly obvious harms deserve more precise developmental study. Cyberbullying cannot be analytically separated from social media because the affordances of visibility, virality, and audience persistence magnify its effects.

Peer surveillance extends beyond overt bullying. Adolescents often feel watched online by friends, classmates, romantic partners, and sometimes parents or teachers. This creates pressure to respond quickly, maintain visibility, and avoid socially costly silence. Not all surveillance is hostile, but constant mutual monitoring can produce anticipatory stress. Relationship conflict may become more frequent when digital communication fosters misinterpretation, jealousy, or exclusion. Even being left on "read," omitted from a group chat, or excluded from visible gatherings can carry emotional significance during adolescence.

In the Indian context, cyberbullying may intersect with gendered norms, reputational risk, and family control. Young women, in particular, may face harassment tied to appearance, moral judgment, or public visibility. The consequences are not merely online discomfort but potential restrictions on mobility, education, or device access. These contextual features highlight why global findings must be interpreted through local social structures.

2.6 Sleep disruption, cognitive fatigue, and emotional dysregulation

Sleep is one of the most robust mediators in the social media–mental health relationship. Platforms are designed for immediacy and continuity, not natural stopping points. Night-time checking, emotionally arousing content, notification-driven awakenings, and displaced sleep schedules are common among adolescents. Sleep disruption, in turn, predicts irritability, impaired concentration, emotional reactivity, and vulnerability to depression and anxiety.

Reviews consistently identify sleep as a central mechanism. Keles et al. (2020) noted that insomnia and sleep disturbance contributed to the relationship between social media and distress. More recent syntheses likewise suggest that problematic or late-night use is more strongly associated with poor sleep quality than general daytime engagement. The causal direction is likely bidirectional: socially or emotionally distressed adolescents may sleep poorly and use social media late into the night, while nocturnal use further worsens sleep and next-day mood.

Cognitive fatigue also matters. Constant switching between notifications, content streams, and interpersonal demands can fragment attention. For students, especially those already under academic strain, this can generate a sense of mental overload. Emotion regulation becomes harder when the nervous system is routinely stimulated without adequate recovery. Such fatigue may not meet diagnostic thresholds, but it shapes everyday distress and contributes to the felt sense that social media is "draining."

2.7 The Indian evidence base

Although international scholarship is substantially larger, Indian studies are increasingly relevant and reveal patterns that should inform theory rather than merely confirm Western findings. Bhat et al. (2024) examined social media behaviors associated with major depressive disorder among Generation Z users in India and reported that social media intensity, social media addiction, participation, and social interaction positively predicted depressive outcomes, while social comparison showed a more complex relation. Importantly, the study also found that the pandemic moderated the association between social media use and depression, suggesting that contextual stressors alter digital effects.

Jain (2025), working with young adults in Kolkata, found no significant association between attitudes toward seeking professional help and either anxiety, depression, or social media use, but did report a significant positive association between anxiety and depression. While narrower in scope, this study is useful because it shows that help-seeking attitudes do not automatically track digital behavior; mental-health outreach in Indian contexts must therefore address stigma and service accessibility more directly.

Malik et al. (2024) provided one of the stronger psychologically informed Indian studies by showing that FoMO and boredom proneness mediated the link between psychological distress and social media addiction among adolescents. Their findings align well with contemporary self-regulation models and suggest that Indian adolescents, like their peers elsewhere, are not passive recipients of platform effects. Their vulnerabilities are filtered through motivational and affective processes.

Rautela and Sharma (2022) extended this discussion conceptually by examining FoMO and JOMO among Indian social media users. Their work suggests that problematic internet use is

shaped not only by excessive access but also by cultural and psychological meanings of connectivity. In collectivist and high-peer-involvement settings, being absent from digital conversation may feel especially threatening. Ubeja et al. (2025) similarly emphasized that among Indian college students, FoMO acts as a central mediator between social networking intensity and mental well-being, reflecting how emotional processes link online participation to psychological outcomes.

Indian measurement work is also emerging. Choudhury et al. (2024) evaluated the Social Media Disorder Scale in the Indian context, contributing to the psychometric infrastructure required for robust local research. This is more important than it may initially appear. Without culturally validated instruments, findings on addiction, distress, and problematic use may be distorted by imported constructs that do not fully capture local idioms of behavior or distress.

More broadly, Indian evidence points to four contextual themes. First, academic and career competition may heighten comparison-based distress. Second, family structures can both protect and constrain, affecting privacy, device use, and disclosure of distress. Third, stigma surrounding mental-health treatment may shape whether social media becomes a substitute coping system. Fourth, digital inequality remains relevant; social media effects differ across urban and rural settings, access quality, language, and gendered restrictions. These themes justify a stronger place for Indian scholarship in global theorizing.

3. Methodology of Review

3.1 Review design

The present paper uses a structured narrative review approach with systematic search procedures. A narrative review was selected because the field is conceptually heterogeneous: studies differ in populations, age bands, platforms, outcome measures, cultural settings, and theoretical assumptions. A formal meta-analysis would have been less suitable for the present objective, which was to critically interpret patterns, contradictions, mechanisms, and gaps across empirical and review literature. Nonetheless, the search, screening, and synthesis processes were organized transparently to align with expectations for publishable review scholarship.

3.2 Search strategy and sources

Searches were conducted across Scopus, PsycINFO, PubMed, and Google Scholar for literature published from January 2015 to December 2025. Search strings combined terms related to social media (“social media,” “social networking sites,” “Instagram,” “TikTok,” “problematic social media use,” “social media addiction”) with terms related to mental health (“mental health,” “depression,” “anxiety,” “psychological distress,” “well-being,” “self-esteem,” “sleep,” “body image,” “cyberbullying,” and “fear of missing out”). To ensure adequate inclusion of regional literature, additional searches included “India,” “Indian adolescents,” “Indian college students,” and “Generation Z India.” Reference lists of key reviews were manually screened to identify relevant second-order sources.

3.3 Inclusion and exclusion criteria

Studies were included if they were peer-reviewed journal articles or substantive review articles; focused primarily on adolescents or young adults; addressed social media use, problematic social

media use, or closely related platform behaviors; and reported mental-health or psychosocial outcomes relevant to psychology. Both international and Indian studies were eligible. Review papers, meta-analyses, longitudinal studies, cross-sectional studies, and theory-driven empirical work were included.

Studies were excluded if they focused only on general internet use without a social media component; addressed educational technology without mental-health outcomes; were editorial comments, opinion pieces, or non-peer-reviewed blogs; or duplicated data already represented in a more complete article. Studies centered exclusively on clinical digital interventions were also excluded unless they directly informed the review's conceptual argument.

3.4 Screening and synthesis

After removal of duplicates, titles and abstracts were screened for conceptual relevance. Full texts were then assessed to evaluate study quality, fit with the review objectives, and contribution to thematic synthesis. Sixty-three studies and review papers were retained for the final synthesis, including fourteen with Indian samples or explicit Indian focus. Particular weight was given to longitudinal designs, systematic reviews, umbrella reviews, and studies examining mediating mechanisms because these designs offer stronger interpretive leverage than simple cross-sectional time-use correlations.

Thematic synthesis proceeded in four stages. First, studies were grouped by conceptualization of social media exposure: time-based, intensity-based, active/passive use, and problematic or addictive use. Second, outcomes were categorized into depression/anxiety/distress, body image and self-evaluation, sleep and cognitive fatigue, and psychosocial well-being. Third, mediators and moderators were extracted. Fourth, Indian studies were analyzed separately and then reintegrated into the broader discussion to identify context-specific insights.

3.5 Quality considerations and limitations of the review

The review sought breadth and recency, but several limitations should be acknowledged. First, despite a structured search process, the review is not an exhaustive systematic review registered prospectively. Second, the field remains dominated by cross-sectional studies, which limits the strength of any synthesis. Third, not all studies use validated measures of either social media behaviors or mental-health outcomes. Fourth, Indian literature remains comparatively sparse and methodologically uneven. Finally, the review privileges English-language publications, which may underrepresent some regional work.

Even with these limitations, the present method is appropriate for a critical review aimed at identifying how the field has evolved, where its inconsistencies lie, and which directions appear most promising. Figure 1 illustrates the systematic process used for identifying, screening, and selecting studies included in this review. The search initially yielded a large pool of records from multiple databases, followed by removal of duplicates and screening of titles and abstracts for relevance. Table 1 summarizes influential international studies that have shaped current understanding of the relationship between social media use and mental health.

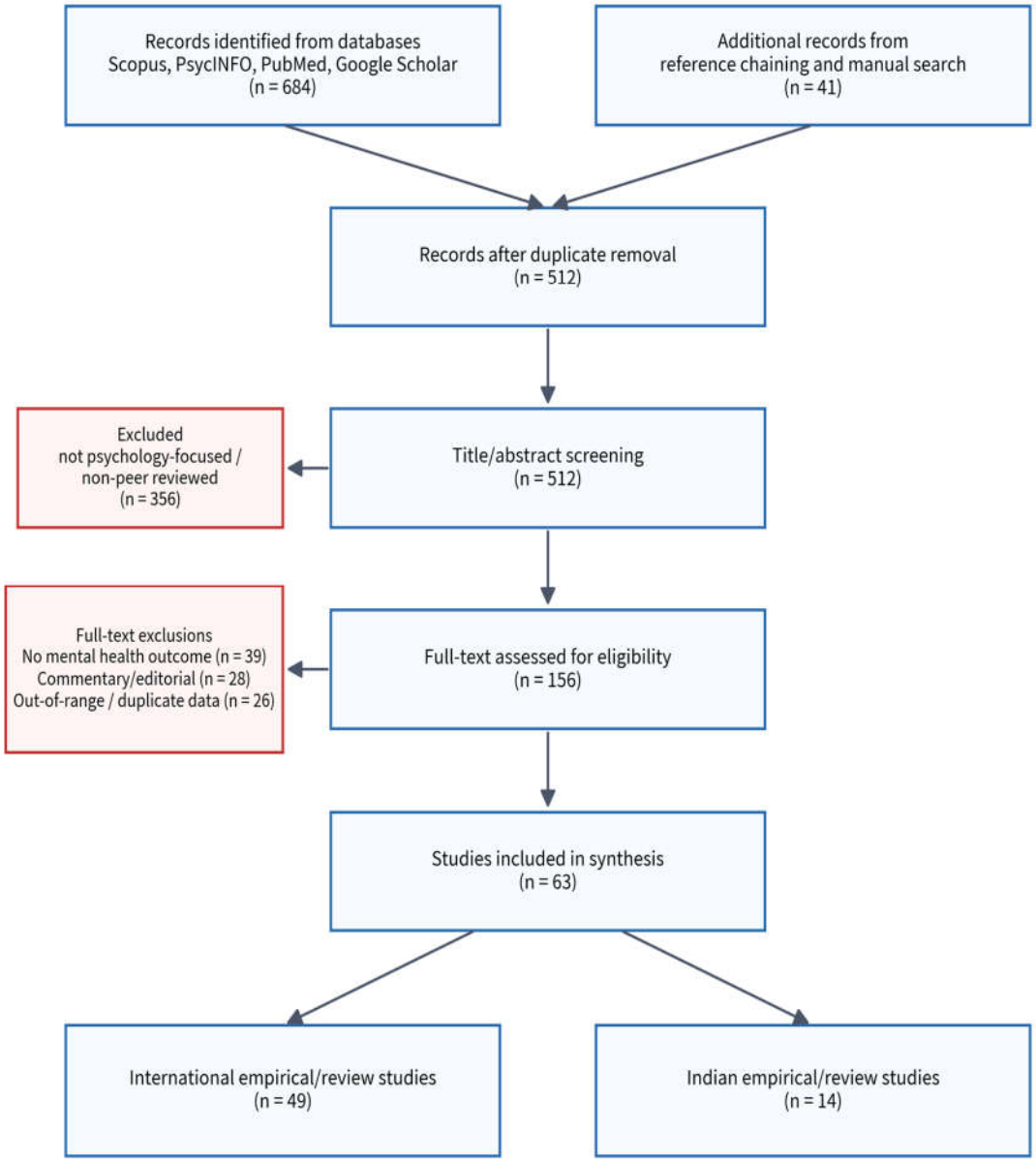

Figure 1. Review selection flow for the structured narrative synthesis.

Table 1 Summary of key international studies examining social media use and mental health outcomes.

Study	Design/sample	Key finding	Critical note
Orben & Przybylski (2019)	Large secondary-data analyses	Very small negative association between digital technology use and well-being	Important corrective to moral panic, but relies on broad exposure measures
Heffer et al. (2019)	Longitudinal cohort	Social media use did not robustly predict later depressive symptoms	Supports reverse-causality caution
Coyne et al. (2020)	8-year longitudinal study	Time spent using social media did not predict within-person increases in depression/anxiety	Shows why time-based metrics are insufficient
Keles et al. (2020)	Systematic review	Social media correlates with depression, anxiety, and distress	Mostly cross-sectional evidence; causality unresolved
Odgers & Jensen (2020)	Annual review	Average associations are small and often not clinically meaningful	Emphasizes developmental heterogeneity
Valkenburg et al. (2022)	Umbrella review	Effects vary by individual susceptibility; aggregate conclusions can mislead	Strong case for person-specific models
Marciano et al. (2022)	Systematic review/meta-analysis	Digital media use during COVID-19 linked to poorer mental health overall, but also social connection	Context of forced isolation complicates interpretation
Salerno et al. (2025)	Longitudinal study	Low support and high social comparison predict problematic use trajectories	Demonstrates mechanism-based risk clustering

4. Discussion

The literature reviewed here does not support a single verdict that social media is either uniformly harmful or broadly harmless. Instead, the evidence points toward a conditional and stratified model. First, average effects based on simple duration measures are small. This is one reason why population-level analyses often produce null or weak associations. Second,

mechanisms such as social comparison, FoMO, cyberbullying, sleep disruption, and problematic engagement are more consistently linked to poor mental-health outcomes. Third, vulnerability is unevenly distributed: adolescents with prior distress, weak social support, emotion dysregulation, or high sensitivity to peer evaluation appear more susceptible to negative effects.

This interpretation helps reconcile the apparent contradiction between weak average effects and strong lived experiences. If most users experience little measurable effect while a smaller subset experiences substantial harm, aggregate statistics will dilute clinically meaningful subgroup patterns. Valkenburg et al. (2022) were right to argue that both optimistic and pessimistic conclusions can be partly correct because they may describe different adolescents. This insight should move the field beyond debates that ask whether social media "causes" mental illness in the abstract. Structural and cultural dimensions, including gender norms and economic pressures, continue to influence psychological and social outcomes in Indian populations (Kumari, 2020a).

The literature also reveals recurring methodological weaknesses. Cross-sectional designs remain common, encouraging causal overreach. Self-report measures dominate even though adolescents are often poor estimators of actual digital behavior. Different studies operationalize "social media use" in incompatible ways, making direct comparison difficult. Some treat any use as exposure; others focus on problematic use, specific platforms, or visual content. Mental-health outcomes also vary widely, from diagnostic symptoms to generalized distress or single-item well-being indicators. This heterogeneity partly explains why results appear inconsistent.

Another issue is interpretive asymmetry. Negative findings are often treated as evidence of harm, while null or protective findings are described cautiously or dismissed as anomalies. This bias may reflect both publication tendencies and societal concern about youth media. Psychology should resist such asymmetry. The point is not to minimize risk, but to insist on the same evidentiary standards regardless of whether results align with public fears. Table 2 presents a synthesis of empirical studies conducted in the Indian context, highlighting both convergences and culturally specific findings.

The review also suggests that psychological mechanisms matter more than platform labels. Instagram, TikTok, or WhatsApp do not affect users simply because they are distinct brands; they do so through affordances—visibility, feedback metrics, short-form novelty, private group intimacy, or algorithmic surfacing of social information. These affordances interact with developmental needs. Adolescents are especially likely to experience them through concerns about belonging, status, appearance, and exclusion. Thus, the most useful theories are those that integrate platform design with psychological susceptibility.

Table 2 Overview of Indian studies on social media use and mental health among adolescents and young adults.

Indian study	Sample/focus	Main finding	Relevance
Bhat et al. (2024)	Generation Z users in India	Intensity, addiction, participation, and social interaction predicted depressive outcomes; pandemic moderated effects	Highlights context-dependent effects in Indian youth
Malik et al. (2024)	Indian adolescents	FoMO and boredom proneness mediated the distress–social media addiction link	Strong evidence for affective mechanisms
Jain (2025)	Young adults in Kolkata	Anxiety and depression were positively correlated; help-seeking attitudes were not linked to social media use	Shows service attitudes are not reducible to digital behavior
Rautela & Sharma (2022)	Indian social media users	FoMO is central to problematic internet use; JOMO may be a protective orientation	Useful culturally informed conceptual extension
Ubeja et al. (2025)	Indian college students	FoMO fully mediated the relationship between social networking intensity and mental well-being	Connects collectivist peer norms with digital vulnerability
Choudhury et al. (2024)	Indian psychometric validation	Social Media Disorder Scale showed utility in Indian settings	Improves measurement infrastructure

The Indian evidence base, while still developing, adds important nuance. Indian adolescents and college students navigate social media within family-centered and academically competitive environments, where digital visibility may carry implications for reputation, social mobility, and gendered norms. FoMO appears especially salient in this context, perhaps because peer participation is experienced not only individually but also relationally and collectively. At the same time, digital spaces can give Indian youth access to support, information, and expressive opportunities that may be less available offline, particularly where mental-health conversations remain stigmatized.

Taken together, the literature supports a layered interpretation. Social media should be conceptualized as a developmental context rather than a single risk factor. Table 3 outlines key methodological limitations observed across the literature and proposes corresponding recommendations for future research. For some users it functions primarily as a relational resource; for others, especially those struggling with self-worth, distress, or compulsive tendencies, it may become a dysregulating environment. The practical implication is that mental-health assessment and prevention should ask about platform experiences, motives, timing, comparison habits, harassment exposure, and sleep disruption not merely daily screen hours. Figure 2 presents an integrated conceptual framework synthesizing the key pathways identified in the literature. Figure 3 illustrates the temporal distribution of studies included in this review, showing a marked increase in research output over the past decade

Table 3 Methodological challenges in social media and mental health research and recommended future directions.

Methodological issue	Common pattern in the literature	Why it matters	Recommendation
Exposure measurement	Heavy reliance on time spent or self-reported frequency	Misses content, motive, and platform affordances	Use behavioral logs, passive sensing, and experience sampling
Design	Large share of cross-sectional studies	Causality and temporal ordering remain unclear	Prioritize longitudinal and within-person designs
Outcome choice	Focus on depression/anxiety; less work on emotion regulation, loneliness, meaning, or mixed outcomes	Narrows theoretical development	Include broader psychosocial and developmental indicators
Cultural representation	Overrepresentation of Western samples	Limits generalizability	Expand studies in India and other LMIC contexts
Theoretical framing	Generic “harm” model	Encourages deterministic claims	Adopt developmental and person-specific frameworks
Intervention evidence	Limited rigorous trials	Weak basis for applied recommendations	Test digital literacy, sleep hygiene, and coping interventions

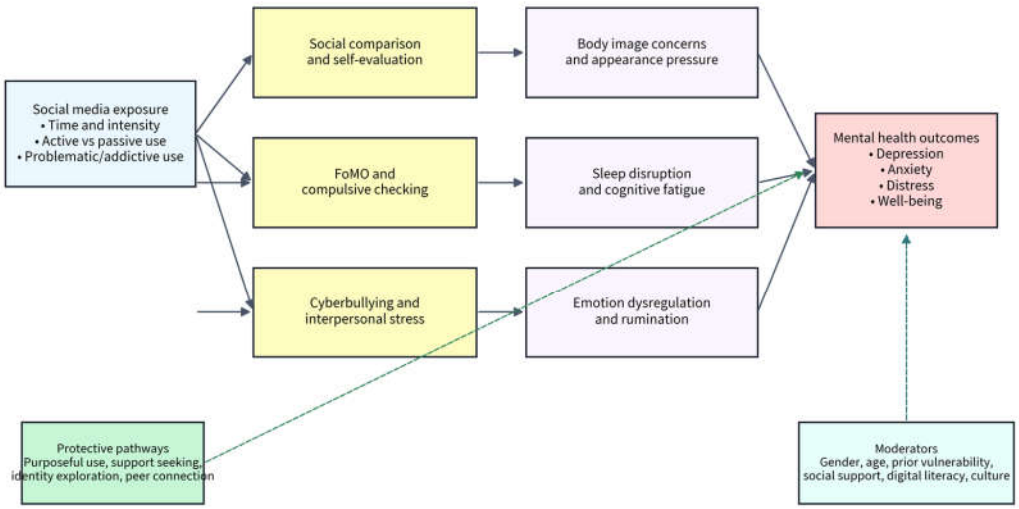

Figure 2. Conceptual framework linking social media exposure, mediating mechanisms, moderators, and mental-health outcomes.

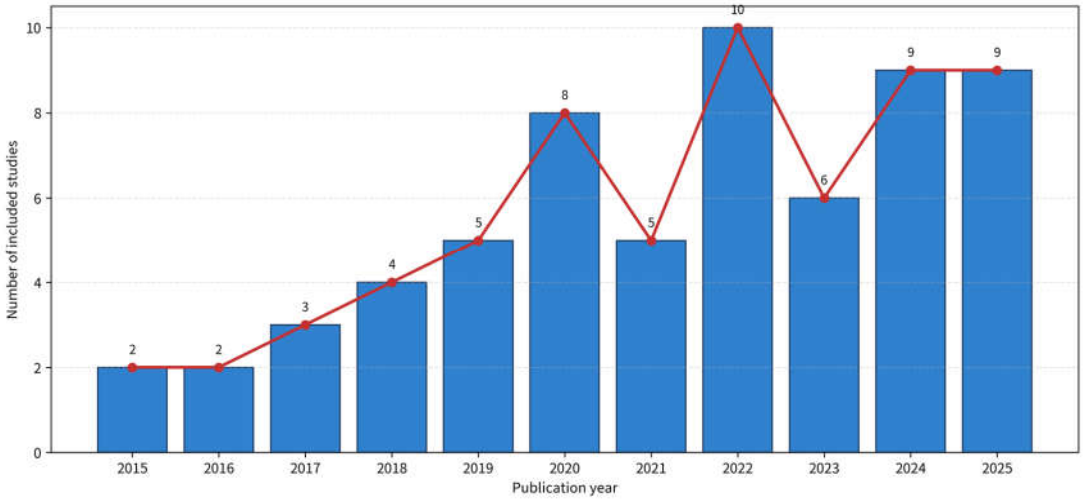

Figure 3. Year-wise distribution of studies included in the review.

5. Future Research Directions

Several directions would materially improve the field.

5.1 Move from between-person averages to within-person processes

A central weakness of current evidence is its dependence on between-person comparisons, such as whether adolescents who report more social media use also report poorer well-being. Such analyses cannot determine whether an individual adolescent feels worse after specific forms of online engagement. Future work should use ecological momentary assessment, digital trace data, and within-person longitudinal models to examine how mood fluctuates after passive browsing,

posting, conflict, or exposure to appearance-focused content. Person-specific designs are especially important because the same online behavior may be soothing for one user and dysregulating for another.

5.2 Improve measurement of actual digital behavior

Self-report remains an inadequate proxy for digital experience. Researchers should combine questionnaires with device-based logs, notification patterns, temporal use data, and qualitative diaries. Better measurement should also capture what young people see, not just how long they are online. Exposure to self-harm content, idealized beauty imagery, political hostility, or supportive peer communication likely has very different psychological consequences.

5.3 Study positive and mixed outcomes, not only deficits

Much of the literature is deficit-oriented. Although this focus is understandable given mental-health concerns, it narrows theory and may exaggerate harm. Future studies should measure connection, identity exploration, meaning, emotional support, and help-seeking alongside symptoms. Researchers should also examine mixed profiles in which the same user experiences both belonging and distress. Such designs would better reflect real-world digital life.

5.4 Expand culturally grounded research in India and other LMICs

Most influential theories in this field were built primarily on Western samples. Indian research should not be treated as a peripheral replication zone. Instead, it offers opportunities to test how family systems, collectivist peer norms, academic pressure, multilingual platform use, and uneven mental-health infrastructure shape digital effects. More longitudinal studies from India are needed, as are rural samples, school-based cohorts, and qualitative work capturing local meanings of online comparison, shame, help-seeking, and surveillance.

5.5 Integrate design ethics with psychological prevention

Psychology has focused heavily on user behavior, sometimes neglecting platform design. Yet infinite scroll, variable rewards, public metrics, recommendation loops, and notification architectures are not neutral features. Future research should examine whether modifying design features reduces compulsive checking, sleep disruption, or comparison-based distress. Collaboration among psychologists, designers, educators, and policymakers is essential if prevention is to move upstream.

5.6 Build intervention evidence

Despite abundant correlational work, rigorous intervention studies remain limited. Schools and universities need evidence on what actually helps. Promising approaches include digital literacy curricula, social comparison awareness training, sleep hygiene interventions, cognitive-behavioral strategies for compulsive checking, and peer-support models that distinguish healthy connection from vigilance-driven use. In India, interventions may need to include family psychoeducation and stigma-sensitive help-seeking components.

5.7 Address ethical and clinical implications

Clinicians increasingly encounter adolescents who frame their distress through social media experiences. Assessment protocols should therefore include questions about platform habits, cyberbullying exposure, late-night use, appearance comparison, and online conflict. At the same time, clinicians should avoid simplistic recommendations such as total abstinence unless clearly warranted. For some youth, social media is also a source of friendship, identity affirmation, or crisis information. Future research should help clinicians identify which patterns of use represent adaptive involvement, situational overuse, or clinically significant dysregulation.

6. Conclusion

The psychology of social media and mental health has matured beyond simple claims that screen time is inherently damaging. The strongest evidence now suggests that broad duration measures are weak predictors of mental health, whereas specific patterns problematic use, FoMO, upward social comparison, cyberbullying, sleep disruption, and dysregulated engagement—are more meaningfully associated with distress. At the same time, social media can also support belonging, expression, and help-seeking. The field's central challenge is therefore not to decide whether social media is good or bad, but to specify for whom, by what mechanisms, and in which social contexts it becomes either protective or harmful. These findings align with broader sociocultural research in India, where attitudes toward social change and demographic groups vary across residential and socioeconomic backgrounds (Kumari, 2020b; Kumari, 2018).

Indian scholarship is an important part of this next phase. As research expands beyond Western samples, more culturally grounded and developmentally sensitive models will become possible. A publishable psychology of social media must now be precise, critical, and context-aware. If future work embraces person-specific methods, better measurement, and stronger intervention designs, the field will move closer to explanations that are scientifically rigorous and clinically useful.

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