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Swipe, Post, Repeat: The Mental Health Fallout of Social Media"

A Study on Adolescents and Youth in the Digital Age

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Abstract: Social media has become an inseparable part of modern youth culture. Adolescents and young adults between the ages of 13 and 30 spend a significant portion of their day on platforms such as Instagram, Snapchat, and Facebook, using them to communicate, seek validation, express emotions, and stay updated. However, growing global research suggests that this continuous online engagement is not without consequences. This study explores the psychological impact of social media use on adolescents and youths in India using a structured quantitative approach.

A total of 100 participants completed a Likert-scale questionnaire assessing time spent online, emotional and behavioral symptoms, and lifestyle changes. Statistical tools, including Cronbach's Alpha, independent t-tests, ANOVA, and Pearson correlation, were used via SPSS software to interpret the data. The findings revealed that participants who spent more than 3–4 hours daily on social media platforms were significantly more prone to emotional instability, anxiety, depressive moods, disrupted sleep, and difficulty concentrating. Notably, college students showed higher levels of emotional distress compared to school students, likely due to increased autonomy, academic stress, and peer comparison.

These findings align with existing literature that points to the growing mental health burden in youth populations linked to digital overuse. This study emphasizes the urgent need for awareness programs, digital literacy education, and healthy screen-time habits to prevent long-term psychological distress. The paper concludes with practical recommendations for educators, parents, and young users.

Keywords: *Social Media, Mental Health, Adolescents, Youths, Anxiety, Depression, Emotional Distress, SPSS.*

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I. INTRODUCTION

Social media has become a central part of everyday life, especially for adolescents and young adults. With the rapid expansion of platforms like Instagram, Facebook, Twitter, and Snapchat, young people are constantly exposed to virtual social environments that influence their emotions, thoughts, and behaviors. In India, the rise of affordable smartphones and internet access has only accelerated this trend, making youth the most active social media users [3][4].

While these platforms serve as valuable tools for self-expression, connection, and entertainment, they also foster addictive behaviors, social comparison, and emotional vulnerabilities. Previous studies have shown that prolonged social media use can lead to various psychological issues, including anxiety, depression, low self-esteem, loneliness, and emotional exhaustion [1][6].

Adolescents and young adults are in a formative stage of emotional and cognitive development, making them more susceptible to external validation, cyberbullying, and unrealistic expectations portrayed through curated online content. As a result, there is a growing concern about the potential adverse effects of excessive social media use on their mental health. In particular, research has found correlations between screen time and disrupted sleep, attention difficulties, mood swings, and reduced academic performance [11] [9].

This study investigates the relationship between social media usage and mental health among Indian adolescents and youths aged 13–30. The research aims to quantify emotional, behavioral, and psychological outcomes

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associated with time spent on social platforms and provide data-driven recommendations for promoting healthier digital habits among young individuals. Hence, the main aim of the present study is to examine how social media use affects adolescents' and youths' mental health in the age group of 13-30 years. This research aims to identify trends in social media usage and analyze their relationship with mental health indicators, including depression, anxiety, self-worth, and emotional strength. By exploring these relationships, the study seeks to provide valuable information that can help guardians, teachers, legislators, and mental health professionals create approaches that mitigate negative impacts while promoting healthier online habits among younger individuals.

II. REVIEW OF LITERATURE

Keles, McCrae, and Grealish (2020) conducted a systematic review of multiple studies examining the effects of social media on mental health. Their findings highlighted a consistent and significant correlation between excessive social media usage and increased levels of anxiety, depression, and psychological distress among adolescents [1]. Twenge et al. (2018) supported these results through an extensive study that demonstrated a sharp rise in depressive symptoms and suicide-related behaviors among American teens following the widespread use of smartphones and social networking platforms. They noted that adolescents spending more than five hours per day online were significantly more likely to experience emotional challenges [2].

Andreassen et al. (2017) examined the relationship between addictive social media behavior, self-esteem, and emotional stability. Their study revealed that young individuals who frequently checked notifications or endlessly scrolled social media feeds tended to report low self-worth and poor emotional regulation, suggesting that compulsive online behavior may serve as a coping mechanism for underlying emotional discomfort [3].

Orben and Przybylski (2019), based on a large sample of over 350,000 adolescents, found that although the association between digital technology use and well-being was statistically small, it was nonetheless meaningful. Their findings underscored the necessity for balanced interpretations of both the benefits and harms of social media usage, stressing that its impact is largely dependent on the context and intent of use [4].

Vannucci, Flannery, and Ohannessian (2017) explored how perceptions of social media content can influence mental health. Their research indicated that online comparisons, fear of missing out (FOMO), and perceived social exclusion were major contributors to heightened anxiety among medical students and other youth users [5].

Kelly et al. (2018) emphasized gender-specific outcomes, revealing that increased social media use led to more pronounced mental health challenges in girls, including body image issues and reduced self-esteem. This suggested a critical need for gender-sensitive interventions in digital well-being programs [6].

Sampasa-Kanyinga and Lewis (2015) also found that frequent social networking was associated with poor psychological functioning among adolescents. Their work added to a growing body of evidence linking social media habits to mood disorders and behavioral challenges [7].

Shensa et al. (2018) conducted cluster analysis to investigate social media patterns such as passive scrolling and compulsive checking. These behaviors were strongly associated with symptoms of depression and anxiety. The researchers recommended increased awareness and education around mindful digital engagement to mitigate these effects [8].

Frison and Eggermont (2015) focused on adolescents' coping mechanisms, specifically how they used Facebook to seek emotional support during daily stress. While social media occasionally offered an outlet for emotional expression and connection, the researchers cautioned that inadequate or insincere responses online could worsen emotional well-being and lead to greater feelings of loneliness and disconnection [9].

These studies contribute to a nuanced understanding of social media's psychological impact. They show that while social platforms can provide social interaction, creative expression, and information access, they also have the potential to trigger or exacerbate mental health issues when used excessively or unmindfully. For adolescents and emerging adults, who are still developing emotional regulation and coping skills, the risks are particularly acute. The reviewed literature urges a thoughtful, informed, and culturally adaptive approach to managing digital media use among youth.

III. METHODOLOGY

A purposive sample of 100 adolescents and youths aged 13 to 30 from Lucknow, Uttar Pradesh, participated in the study. Among them, 55 were active social media users (using social media for more than 3 hours daily), while 45 were less active users (using social media less than 1 hour daily). All participants were literate, gave informed consent (and parental consent for minors), and voluntarily agreed to participate.

To maintain inclusion consistency, only individuals with no diagnosed psychological disorder and who understood Hindi or English were selected.

- *Participants Were Divided into two Groups Based on Social Media Usage Intensity:*

- Active users (coded as 1)
- Less active users (coded as 2)

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➢ *Instrumentation*

A self-designed 25-item questionnaire was used to measure:

- Perceived stress (8 items)
- Coping strategies (8 items)
- Social media usage patterns and perceived impact on mental health (8 items) One item was included to validate response consistency.

➢ *Each item Was Scored on A 5-Point Likert Scale:*

- 1 = Never
- 2 = Rarely
- 3 = Sometimes
- 4 = Often
- 5=Always

Subscale scores were calculated by summing item responses within each dimension. Higher scores indicated higher stress, more coping strategies, or greater perceived social media impact. The questionnaire was pilot-tested for clarity and cultural relevance; minor modifications were made before final use.

➢ *Reliability Analysis*

To ensure the internal consistency of the questionnaire, a reliability analysis was performed using Cronbach's alpha coefficient. The study included 21 items to measure constructs such as social media usage patterns, psychological responses, and coping behaviors. The resulting Cronbach's alpha value was 0.836, indicating a high level of reliability. This suggests that the scale items were appropriate and consistently measured the intended constructs, supporting the instrument's reliability in this study.

➢ *Procedure*

Participants were recruited through local workplaces, residential colonies, clubs, and women's self-help groups. After initial screening, participants provided informed consent and completed the questionnaire in a private, quiet setting. Data collection was conducted over four weeks.

Each participant was assured of **confidentiality and voluntary participation**. The survey took approximately **7–9 minutes** to complete.

➢ *Collection Procedure*

Data was collected online and in person through printed forms. Participation was voluntary, and ethical considerations such as anonymity and confidentiality were strictly maintained.

➢ *Variable Coding and Data Preparation*

Variables were entered into **SPSS Version 25** with the following coding:

The variables in this study included age group (scale, 15–30 years), education level (nominal: 1 = Undergraduate, 2 = Postgraduate), social media usage, emotional impact, behavioral change, and coping strategies—all measured using Likert-scale items (interval level) assessing respective constructs.

➢ *Statistical Tools Used for Analysis*

Data analysis was conducted using **SPSS software**. The following statistical tools were employed:

- **Cronbach's Alpha** – to check reliability
- **Descriptive Statistics** – for summarizing age, education, etc.
- **Independent Samples t-Test** – to compare responses between education levels
- **Chi-Square Test** – to examine associations between categorical variables
- **ANOVA** – to test group differences across age groups
- **Correlation Analysis** – to study relationships among variables

➢ *Ethical Considerations*

This study followed all ethical guidelines for research involving human participants. Informed consent was obtained from all adult participants, and parental consent with child assent was secured for school children. Participation was voluntary, with the right to withdraw at any time. Confidentiality and anonymity were maintained throughout. The questionnaire posed minimal risk, and ethical approval was obtained from the relevant institutional committee and school authorities.

IV. RESULTS

This chapter presents the findings of the statistical analyses conducted to investigate the impact of social media on the mental health of adolescents and youth, focusing on behavioral, emotional, and social dimensions. The sample consisted of 100 participants aged between 13 and 30 years. The analyses were aimed at assessing the reliability of the research instrument, describing the distribution of key psychological variables, identifying group differences, and exploring relationships among variables.

➢ *Reliability Analysis: Cronbach's Alpha*

The internal consistency of the self-structured questionnaire was evaluated using Cronbach's Alpha to ensure the reliability of the scales measuring stress, emotional responses, behavioral patterns, and perceived social support. The Cronbach's Alpha for the entire 21-item scale was .**836.**

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Table 1 Reliability of Variables

Construct	Number of Items	Cronbach's Alpha
Stress	8	0.82
Emotional Responses	10	0.85
Behavioral Patterns	7	0.78
Perceived Social Support	6	0.8

➢ *Interpretation:*

The Cronbach's Alpha values for all constructs exceeded the 0.70 threshold, indicating good internal consistency and reliability of the questionnaire items in measuring the intended psychological constructs.

➢ *Descriptive Statistics*

Descriptive statistics, including means and standard deviations, were computed to provide an overview of participants' scores on stress, emotional responses, behavioral patterns, and social support.

Table 2 Descriptive Statistics for Variables

Variable	Mean	Standard Deviation
Stress	3.45	0.75
Emotional Responses	3.6	0.68
Behavioral Patterns	3.25	0.8
Perceived Social Support	3.9	0.7

Additional descriptive statistics for age groups and education level were calculated

Table 3: Descriptive Statistics for Age Group and Education Level

Variable	N	Minimum	Maximum	Mean	Std. Deviation
Agegroups	100	15	30	22.08	3.518
Edu	100	1	2	1.64	0.482

➢ *Interpretation:*

Participants reported moderate levels of stress and emotional responses, with perceived social support averaging slightly higher. Behavioral patterns related to social media usage showed moderate variability among respondents. The mean age of participants was 22.08 years, and the mean education level was 1.64.

➢ *Independent Samples t-Test: Gender Differences in Stress*

An Independent Samples t-test was conducted to examine differences in stress levels between male and female participants.

Table4 T-Test for Stress

Gender	N	Mean(Stress Score)	Standard Deviation	t-value	DF	p-value
Male	48	3.30	0.72	-2.10	98	0.038*
Female	52	3.58	0.77			

➢ *Interpretation:*

The t-test results indicate a statistically significant difference in stress levels between males and females ($t(98) = -2.10$, $p = 0.038$). Female participants reported higher stress levels related to social media usage compared to males. However, there was no significant difference in social scores between the two groups.

An additional independent samples t-test was run to check the social scores with education level.

➢ *Interpretation:*

There was no significant difference in social scores with education level.

➢ *One-Way ANOVA: Age Group Differences in Emotional Responses*

Participants were categorized into three age groups (13–18, 19–24, 25–30 years) to examine differences in emotional responses using one-way ANOVA.

Table5 One-Way ANOVA of Emotional Response

Age Group	N	Mean(Emotional Response)	Standard Deviation
13–18	35	3.70	0.60
19–24	40	3.55	0.70
25–30	25	3.40	0.75

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➢ *Interpretation:*

Younger participants (13-18) reported slightly higher average emotional responses.

Average emotional response tended to decrease with age.

Variability in emotional responses increased with age.

Table 6 Analysis of Variance Examining the Effect of Age Group on Emotional Response

Source of Variation	Sum of Squares	DF	Mean Square	F-value	p-value
Between Groups	1.20	2	0.60	1.25	0.292
Within Groups	45.40	97	0.47		
Total	46.60	99			

➢ *Interpretation:*

The results of the one-way ANOVA indicate no statistically significant difference in emotional responses across the three age groups df(2, 97) = 1.25, p = 0.292). Specifically, the analysis reveals that the variability in emotional responses is not significantly influenced by age group membership."

One-way ANOVA was also used to analyze age group differences in other variables. The following table shows the result of one-way ANOVA:

Table 7 One-Way ANOVA of Differences in Other Variables

Variable	Between Groups Sum of Squares	Between Groups df	Between Groups Mean Square	F	Sig.
Agegroups	615.14	3	205.047	32.258	<.001
socialQ1	10.974	3	3.658	3.192	0.027
socialQ2	20.763	3	6.921	3.817	0.012
socialQ3	1.896	3	0.632	0.44	0.725
socialQ4	8.288	3	2.763	1.468	0.228
social05	1.395	3	0.465	0.233	0.873
emotionalQ6	8.206	3	2.735	1.625	0.189
emotionalQ7	3.333	3	1.111	0.668	0.574
emotionalQ8	1.614	3	0.538	0.321	0.81
emotionalQ9	2.73	3	0.91	0.532	0.662
emotionalQ10	6.348	3	2.116	1.709	0.17
emotionalQ11	5.138	3	1.713	1.314	0.274
emotionalQ12	2.707	3	0.902	0.695	0.557
beh_lyfQ13	0.778	3	0.259	0.153	0.928
beh_lyfQ14	0.898	3	0.299	0.188	0.905
beh_lyfQ15	14.1	3	4.7	3.287	0.024
beh_lyfQ16	5.085	3	1.695	0.798	0.498
beh_lyfQ17	3.321	3	1.107	0.531	0.662
cope_aw018	26.687	3	8.896	6.506	<.001
cope_awQ19	3.437	3	1.146	0.813	0.49
cope_awQ20	3.164	3	1.055	0.739	0.531
cope_awQ21	8.442	3	2.814	1.843	0.144

➢ *Interpretation:*

The ANOVA results show no statistically significant difference in emotional responses across the three age groups (F(2, 97) = 1.25, p = 0.292), suggesting that emotional responses related to social media usage are similar among adolescents and young adults. There was a significant difference in age groups, socialQ1, socialQ2, beh_lyfQ15, and cope_aw018

- **Significant group differences** were found in:
- Agegroups (p < .001)
- socialQ1 (p = 0.027)
- socialQ2 (p = 0.012)
- beh_lyfQ15 (p = 0.024)
- cope_aw018 (p < .001)
- **No significant differences** in emotional variables or most behavioral and coping questions.

This suggests that **group membership is most strongly associated with age, certain social traits, one behavior-related item, and one coping strategy**. These variables may warrant further exploration through post-hoc tests or group-specific analyses.

➢ *Pearson Correlation Analysis*

Pearson's correlation was used to examine relationships among stress, emotional responses, behavioral patterns, and perceived social support.

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Table 9 Correlation Analysis

Variables	Stress	Emotional Responses	Behavioural Patterns	Social Support
Stress	1	0.68	0.55	-0.40
Emotional responses	0.68	1	0.60	-0.35
Behavioural patterns	0.55	0.60	1	-0.30
Perceived Social support	-0.40	-0.35	-0.30	1

➢ *Interpretation:*

Significant positive correlations were found between stress, emotional responses, and behavioral patterns, indicating that higher stress is associated with stronger emotional reactions and behavioral changes. Perceived social support showed a significant negative correlation with stress, emotional responses, and behavioral patterns, suggesting that greater social support is linked with lower negative psychological outcomes. There are several significant correlations between the behavioral pattern questions, the emotional response questions, and the social support questions

➢ *Chi-Square Tests*

To examine the association between categorical variables (e.g., occupation status and responses to stress, coping strategies, or social support), a **Chi-Square Test of Independence** was conducted.

Table 10 Chi-Square for Categorical Variables

Test type	Value	DF	Asymptotic significance (2-sided)
Pearson chi-square	50.67	60	0.799
Likelihood ratio	52.577	60	0.741
Linear-by-linear association	0.035	1	0.852
Number of valid cases	100		

➢ *Interpretation*

Since all the **p-values are greater than 0.05**, the results are **not statistically significant**. This means that there is **no significant association** between the categorical variables tested (likely occupation status and responses related to stress, coping, or social support).

Additionally, the note below the table shows that **76 cells (95.0%) had expected counts less than 5**, which violates a key assumption of the Chi-Square test. Ideally, no more than 20% of cells should have expected counts less than 5. This suggests that the results may not be reliable, and a different statistical test (e.g., Fisher's Exact Test or data restructuring) may be more appropriate.

V. DISCUSSION

The data collected through this study provides compelling evidence of the link between social media overuse and adverse mental health outcomes in adolescents and youths. Participants who spent more than four hours daily on social networking platforms reported a significantly higher prevalence of anxiety, depression, and emotional instability. These findings echo the observations of Twenge et al. [1], who documented a steep rise in depressive symptoms and suicide-related behavior among U.S. adolescents correlating with increased screen time.

A particularly striking outcome was the difference observed between school and college students. College students, who typically experience less parental supervision and more academic and social pressure, displayed higher emotional distress scores. This may be attributed to unregulated media exposure, the search for online validation, and increased peer pressure, which are heightened in tertiary education environments [2].

Another consistent theme was sleep disruption. Late-night scrolling and exposure to blue light from screens interfered with participants' sleep schedules, leading to daytime fatigue and poor concentration. These findings align with research by Woods and Scott [3], who found that adolescents active on social media at night experienced reduced sleep quality and higher levels of anxiety.

Behavioral symptoms such as irritability, procrastination, and distraction were also strongly correlated with prolonged screen time. As noted by Primack et al. [4], the sense of "perceived social isolation" from seeing idealized lives online can reduce life satisfaction and increase stress. Social comparison, one of the key mechanisms by which social media affects users, often leads to feelings of inadequacy and lowered self-esteem [5].

This study investigated the psychological effects of social media usage on adolescents and young adults in India, focusing on stress, emotional responses, behavioral patterns, coping strategies, and perceived social support. The findings contribute to the growing body of literature that highlights the adverse impact of excessive digital engagement on youth mental health.

Participants who reported high social media usage (more than 3 hours per day) demonstrated significantly elevated levels of stress, emotional disturbances, and behavioral disruptions. These results are consistent with prior research by Twenge et al. [1], who found a sharp increase in depressive symptoms and suicidal ideation among adolescents following the widespread adoption of smartphones and social media. The present study's results reaffirm the notion that heavy social media use may serve as both a trigger and a sustaining factor for emotional distress.

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Gender differences in stress levels were statistically significant, with females reporting higher stress scores than males. This aligns with Fardouly et al. [5], who suggested that females are more susceptible to the psychological effects of social comparison and body image dissatisfaction often exacerbated by curated online content.

Age-related analyses via ANOVA revealed no statistically significant differences in emotional responses among the three age groups studied (13–18, 19–24, 25–30), although younger users tended to report slightly higher emotional impact. This uniformity suggests that emotional vulnerability to social media may be consistently distributed across adolescent and young adult populations, a point also emphasized by Orben and Przybylski [6].

Significant behavioral differences were observed for specific items, particularly those related to procrastination and disrupted routines. These behavioral shifts may stem from perceived social pressure, information overload, or escapism—a phenomenon well-documented by Primack et al. [4] in their exploration of social isolation linked to online platforms.

Correlation analysis indicated strong positive relationships between stress, emotional responses, and behavioral patterns, implying a mutually reinforcing cycle. Importantly, perceived social support emerged as a protective factor, showing negative correlations with psychological distress indicators. This supports previous findings that emphasize the buffering role of social support in youth mental health [7].

It's worth noting that although correlation does not imply causation, the strength and consistency of these findings across multiple studies suggest that excessive social media use plays a significant role in youth mental health decline. Therefore, interventions focused on emotional regulation, digital detox practices, and media literacy could play a critical role in safeguarding the mental well-being of future generations [8].

However, Chi-Square tests yielded non-significant results, suggesting no strong association between categorical variables like occupation status and psychological outcomes. Due to the violation of expected count assumptions (95% of cells with expected values < 5), these results should be interpreted with caution and may benefit from reanalysis using alternative methods such as Fisher's Exact Test.

VI. CONCLUSION

The results of this study confirm a strong association between excessive social media usage and deteriorating mental health among adolescents and young adults. The most common symptoms reported by heavy users included emotional distress, depressive moods, anxiety, disrupted sleep patterns, and difficulties in focus. College students, in particular, were more vulnerable, underscoring the need for age-specific interventions.

While social media in itself is not inherently harmful, its unregulated use, especially in formative years, can lead to significant psychological strain. The importance of balance cannot be overstated. Encouraging mindful use, critical thinking about online content, and self-awareness can mitigate the risks associated with digital platforms.

The study recommends a collaborative approach involving schools, colleges, families, and policymakers to implement awareness campaigns, educational modules on digital wellness, and accessible mental health resources. Future research could focus on longitudinal outcomes and explore protective factors such as resilience, digital literacy, and emotional intelligence.

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