



Navigating The Digital Landscape: Understanding Depression In Context Of Social Media

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Abstract: The high rate of social media penetration in the lives of young adults and adolescents has created the need to re-examine the etiology and persistence of the Major Depressive Disorder (MDD) through a digital lens. The report offers a comprehensive overview of the existing literature, which is synthesized through the prism of clinical psychology, regarding the complex association of social media use with depressive symptoms. The analysis can be used to clarify the interaction between digital surroundings and developmental susceptibility through the assessment of Diagnostic and Statistical Manual of Mental Disorders (DSM-5-TR) criteria and existing global and Indian patterns of use. The key themes are psychological differentiation of active and passive use, the mediating effect of the fear of missing out (FoMO) and social comparison, social media-related cyber bullying, and Neuro-cognitive effects of platform-specific designs, as seen in TikTok infinite scroll and Instagram aesthetic duration. Practical focus is made on the Indian setting, discussing the gap in urban and rural areas and mental health treatment gap.

The report also discusses the effectiveness of digital health-based interventions such as internet-based Cognitive Behavioral Therapy (CBT) to Tele-mental health care interventions such as Tele-MANAS in alleviating the effects of depressive symptoms. The synthesis reveals the research gaps of critical importance to longitudinal causality and content-specific effects, and concludes with the advice on a multi-level culturally sensitive approach to digital well-being focusing more on psychological resilience than on simple digital abstinence.

INTRODUCTION –

The modern mental health environment is now facing a crisis of unprecedented scales since the Major Depressive Disorder (MDD) still remains one of the prominent contributors to the burden of disease worldwide. DDD became the third cause of disease burden in the world in 2008 with the world health organization predicting that it will be the first cause of disease burden by the year 2030 (StatPearls Publishing, 2024) .

This rising trend is especially disturbing among the teens and emerging adults, the population that has experienced the most dramatic change in terms of engagement with the world online courtesy of digital technology. Internet penetration rates of 67.9 have seen global internet users at about 5.56 billion shift to social media platforms as central arenas of social development, identity formation, and cognitive activity by the beginning of 2025. Daily internet use between young adults (16 to 29 years) in the European Union is close to being universal, averaging at 97% across the member states,

and in the United States, 95% of teenagers confessed having access to smartphones, and 45% describe their presence online as being almost constant.^{3, 4} To clinicians, the landscape of mental health dealings with depression nowadays involves finding the correct path to acknowledge the possibility of digital behaviors to condense and augment the fundamental symptoms of MDD, which includes depressed mood, anhedonia, and a sense of worthlessness.

Social media and depression have complicated, in most cases non-linear relationships. The initial studies paid much attention to the screen time as the major variable where the current literature focuses on the qualitative character of digital interaction. The difference between active use, including engaging in a broadcast and communication, and passive use, including the habitual scrolling through feeds, has become a crucial factor influencing the psychological outcomes.⁹ What may be more importantly, the architectural design of such websites supported by advanced recommender systems and mechanisms of the so-called infinite scroll has been identified to cause such psychological states as flow states and telepresence at the expense of crucial relationships and self-regulatory behavior in real life. The digital transformation in the context of India is occurring in the framework of an enormous socioeconomic diversity and a poor mental health system. A mind-blowingly huge treatment gap exists between those actually living with mental illness in India and those who receive no formal treatment; with National Mental Health Survey estimating that 70-92 percent fall under this group (p. 11).¹³ Social media usage is currently scuttling in both urban and rural India and presents a paradoxical opportunity and threat. On the one hand, it is true that platforms present a point of entry to mental health literacy and support; on the other hand, it is also true that vulnerable youth are being exposed to heightened social comparison and cyber bullying in a sociocultural context that remains in the early stages of acquiring digital literacy to address these ills.

Research gap

There are also a number of significant gaps existing that prevent the emergence of full-fledged clinical strategies despite the exhaustive body of literature. The biggest gap is the absence of longitudinal studies which can unquestionably prove causality. It is uncertain whether social media use is the cause of depression or the vice versa, whereby, individuals already depressed become more dependent on social media as an effective coping mechanism, which in turn worsens the situation thus, more long-term studies are needed to determine the temporal relationship between the two variables. Content-Specific and Valence Research. Majority of studies are directed at quantifying the use (time spent) or general modalities (active vs. passive). Little information exists on what is being consumed and what emotion valence of the content is (e.g. how the effect of scrolling through educational mental health content differs with scrolling through idealized pro-ana or self-harm content in real-world contexts).²²

The interaction of a particular content and individual vulnerabilities (e.g. neuroticism or high appearance-comparison tendency) is a critical next step to understand. Under-represented Demographics The survey of the research has predominantly been oriented towards urban, and the so-called, WEIRD (Western, Educated, Industrialized, Rich, and Democratic) populations.⁶³ In Indian context, a clear lack of studies in the area of pre-teens (under 13), older adults, and those belonging to lower socioeconomic groups has been identified.²⁸ Also, the available studies on the topic of comparing urban and rural adolescents in India are in their infancy, and initial data indicates that there are considerable differences in the impact of digital use pathways on Technological Specification and Change.

Studies tend to be in a lag behind the dynamism of the digital medium. It is necessary to have more comparative studies that are more head-to-head in nature between platforms such as Tik Tok and Instagram to determine the effect that their various structures (e.g., video based versus image based, algorithmic versus follower based) have on psychological wellbeing.⁶⁰ More comparative studies need to be done to understand how different platform architectures (video based versus image based, algorithmic versus follower based) influence psychological well-being.

Review of literature

3.1 Global and Regional Social Media Usage Patterns

The online world is an atmosphere of discontinuity as the usage habits among people of different ages, gender, and platform design differ. According to Kepios (2025), the most common use of internet by persons aged between 16 and 34 years is because of social interaction. According to Pew Research Center (2025), in the United States, the most popular social media is YouTube (84%), and then comes Facebook (71%), and Instagram (50%). Tik Tok (63) and Snapchat (55) are highly dominant among the adolescents.

The gender difference is also notable: teen girls are more inclined to use Tik Tok and Instagram almost always, and boys use more time on YouTube and play platforms. Digital transformation in India is also marked by a high rate of growth with more than 1 out of 3 young Indians said to be addicted to social media. The most popular application in the country is WhatsApp and the visual content of the 462 million users is through Instagram. In urban areas such as Lucknow, research has shown that women experience more cases of depression, anxiety and stress than men in such samples.

3.2 The Modality of Use: Active vs. Passive Engagement.

The strength of the current literature has been identified to be the fact that the effect of social media is much more dependent on the modality of use.

Scholars differentiate between: Active Social Media Use (ASMU): Behaviors, which can be used to create a direct interaction, e.g., make a post, share content. Such theoretical approaches as the Social Support Theory imply that ASMU can provide social capital development and positively influence it as a protective factor. Nonetheless, research by Frison and Eggermont (2020) states that ASMU, as well, makes people more exposed to negative feedback, which may cause distress. Passive Social Media Use (PSMU): can be defined as scrolling or lurking without interaction.

In a meta-analysis of 141 studies, Hancock et al. (2022) discovered that PSMU is always associated with high levels of depressive symptoms. The process behind this is often referred to as upward social comparison, or seeing edited and idealized versions of other lives, which is why people feel inadequate. This is demonstrated by a meta-analysis of 141 studies, which showed that most of the effect sizes of the global SMU and well-being linkage are not very large but the differentiation between active and passive consumption offers a more discerning viewpoint of the subject under consideration in clinical intervention. An example of this is that active use of SMU has a more positive correlation with online support, whereas passive use has a stronger tendency towards high levels of depressive symptoms.

3.3 Psychological Mechanisms and Mediators.

Social Comparison and Self-Esteem.

One of the foundations of making sense of digital distress is the Social Comparison Theory that was first proposed by Leon Festinger (1954). The social media platforms promote the process of upward comparison in which individuals compare their value to influencers or people who seem to be more successful or more attractive. According to the research conducted by Fardouly and Vartanian (2015), it has been argued that this process is a major mediating variable between problematic usage and body dissatisfaction, as well as between problematic usage and depression. The study of these mechanisms needs to be studied to formulate specific clinical interventions.

Fear of Missing Out (FoMO) FoMO is a widespread feeling that someone may be leading a more rewarding life than one is and is defined as the need to be constantly connected with what other people are doing through the networks and social media.²⁴ It is primarily common among those who use social media, which gives them a window into the lives of peers in real time. FoMO is linked to poor life satisfaction and psychological distress, forming a loop where the anxiety in the user causes

him or her to check the platform, which in turn exposes them to more content, which leads to further FoMO.³¹

Social Comparison Theory

The original premise of the Social Comparison Theory, which was initially proposed by Leon Festinger, is that an individual judges their worth as a result of upward social comparison (comparing themselves with others that seem superior in some way).²³ Social media platforms are built to facilitate the upward social comparison such that individuals compare themselves with others who seem to be living better lives, have more friends or better physical looks. The Serial Mediation Model Recent studies have found a serial mediation model, in which FoMO is associated with Problematic Social Media Use (PSMU) via the mediating role of social comparison and self-esteem.³¹

Stage 1: FoMO creates an elevated state of social surveillance since people are trying to fulfill their desire to belong.³¹

Stage 2: This surveillance results in a further rise in social comparison, because the users compare their real lives with the representation of others that is idealized outlines online.³¹

Stage 3: Repetitive upward comparison feeds the sense of inadequacy, which results in the fact that the self-esteem declines.³¹ **Stage 4:** Low self-esteem persons might resort to social media as a compensatory coping mechanism, trying to achieve a sense of validation and another form of social identity, and this results in the emergence of addictive or problematic forms of usage.³¹ According to this model, the anxiety of FoMO does not directly lead to addiction but the resultant psychological consequences damage to self-perception and self-worth which are the secondary consequences that drive the development of harmful digital behaviors. **Displacement Hypothesis** According to the displacement hypothesis, the quality and quantity of a face-to-face interaction decrease with time spent online. Some researchers such as Jonathan Haidt (2020) call platforms experience blockers because they believe that in place of self-regulation and emotional flexibility, that trading lived experience with curated consumption short-circuits development.

3.4 Mediators of Risk: Cyber bullying and Sleep Disruption.

Cyber bullying and Victimization.

Cyber bullying has become a severe risk factor and it takes place 24/7 and invades the home setting. Research by Kowalski et al. (2014) and Taddi et al. (2024) concludes that victims have a much greater risk of anxiety, depression, and suicidal ideation. Borraccino et al. (2022) conducted a study on 1,822 students in which victimization of cyber bullying completely mediates the relationship between active social media use and emotional problems among both genders and occupies the existing healthy lifestyle behaviors.

The problem of cyber bullying has become one of the most important threats linked to digital activity. Cyber bullying, unlike in traditional bullying, can happen 24/7, and reaching the target even in the perceived protection of their own home.¹⁶ The cyber bullying victimization fully mediates the connection between active social media use and emotional issues of both sexes.³⁵ Interestingly, clinical research found that the victim of cyber bullying is at a higher risk because active user may find it safer to get social support, and at the same time, the increased exposure to digital presence increases the risk of being targeted by the aggressor, which in turn predicts signs of depression.³⁵

Sleep Disruption –

The social media and sleep relation are well-reported and reflect one of the significant routes towards depression. Repeated use of social media particularly at bedtime causes delayed onset of sleep and sleep duration.⁵ This is achieved in three main ways: **Displacement:** Screen time directly replaces screen time that should be spent sleeping.¹⁶ **Psychological Arousal:** It is challenging to settle down to sleep because of emotional stimulation, FoMO, or distressing information generated

through social interactions.¹³ **Physiological Interference:** The presence of the blue light produced by digital tools suppresses melatonin synthesis, which upsets the circadian cycle.¹⁶

In a research review, close to 60 percent of the effect of regular use of social media on psychological distress in females among adolescents has been explained by sleep disturbance and exposure to cyberbullying.¹⁶

Physical Displacement of Exercise.

Social media, in most cases, is linked to a combination with sedentary behavior, which replaces physical activities which have been known to have protective property against depression.⁵ there is little physical exercise which is linked with low levels of endorphins and stress which adds to the negative emotional consequences of excessive use of social media.¹⁶

The Circadian Disruption and Sleep.

Social media and sleep are two significant avenues to depression. According to researchers such as Alimoradi et al. (2019) and Viner et al. (2019), three mechanisms, namely, shaking off sleep time, psychological stimulation (e.g., FoMO), and physiological interference with blue light, which inhibits melatonin, exist. In the case of adolescent girls, sleep disruption and cyber - bullying explain almost two out of every three effects of frequent use on distress.

3.5 Platform-Specific Architectures: Tik Tok and Instagram. Tik Tok and Infinite Scroll.

The distinctive design of Tik Tok, the "For You Page" (FYP) and an infinite scroll are intended to optimize the engagement based on the closed-loop interconnectedness. A study conducted by He et al. (2021) with the help of fMRI demonstrated specific neural activity patterns in a situation when users were exposed to personal content. According to Montak et al. (2024) and Qin et al. (2024), the most notable cause of TikTok addiction is concentration. Such an immersive design can give rise to the phenomenon of the so-called tele - presence, where the digital world replaces meaningful relationships in the real world. On the platform).²² TikTok has become the new digital frontier with its so-called infinite scroll and super personalized For You Page (FYP). The algorithm of the platform is configured to ensure maximum engagement, which is a so-called closed-loop, meaning that the behavior of the user directly influences the presentation of the content, which leads to a state of a high level of concentration, enjoyment, and distortion of time.⁹ Concentration has been found to be the most influential factor contributing to Tik Tok addiction.¹⁰

Table: Platform Features, Psychological Mechanisms, and Clinical Outcomes

Platform Feature	Psychological Mechanism	Clinical Outcome
For You Page (FYP)	Algorithmic refinement; reinforcement	positive Addictive behavior; "telepresence" (immersion in the digital world)
Infinite Scroll	Absence of "stopping rules"; slot machine-like lever	Loss of self-regulation; compulsive engagement
Short-Form Video	Rapid stimuli; dopamine loops	Decreased attention span; fragmented cognitive processing
Social Feedback	Likes, comments, and counts	Reinforcement of social comparison; self-worth tied to metrics

Studies based on fMRI have shown that users also have different neural activation patterns with personalized content which shows that there is physical neurological reaction to the system by which the user is delivered content that the platform provides (Tik Tok).¹⁰

The immersive nature of Tik Tok can lead to a phenomenon known as telepresence wherein the digital experience supplants a more valuable offline awareness on which the psychological well-being of the user relies.⁹

Instagram and the Cult of Perfection.

Instagram, where the emphasis is put on visual images and the presentation of lifestyles, is closely related to the problems of body image and social comparison.²² Passive Instagram scrolling is a robust predictor of depression among adolescents who believe that it promotes unattainable beauty standards and makes them feel inadequate.

Appearance-Based Content and Instagram.

Highlight reels on Instagram, which are mostly visual in nature, are largely connected to the problem of body image. Research by Fardouly et al. (2015) and Sharma (2025) concludes that the long-term exposure to idealized images increases the levels of body dissatisfaction, especially in female adolescents.

3.6 Algorithms, Echo Chambers and Polarization.

Social media architecture is not impartial; it runs on recommender systems that filter and rank content by their preference in the mind of their users. Although this offers a personal experience it also results in filter bubbles and echo chambers.

- **Filter Bubbles:** These are structural outcomes of algorithmic curation where diverse viewpoints are systematically excluded, reinforcing the user's existing beliefs and limiting their exposure to a fragmented information environment.⁴⁰
- **Echo Chambers:** These are spaces where users primarily engage with like-minded voices, amplifying shared perspectives and marginalizing dissenting ones.⁴⁰

These algorithmic environments may be dangerous to people, who may have a problem with depression. A person in a depressed state can be subjected to a loop of negative or emotionally supporting information that will confirm the depressive beliefs, making it more difficult to get out of the vicious circles of thought processes related to the disorder (Pranesh and Gupta, 2024).³⁴ This algorithmic reinforcement of depressive symptoms can result in social isolation and hopelessness.

Online Communities and Protective Factors.

It is important to note that social media is not a risk factor only. To most, it is a kind of shield that brings about good and positive online societies.²⁷

Social Connection: 80% of teenagers say that social media can make them feel more in touch with what is going on in the life of their friends, particularly with other socially marginalized individuals or those who are geographically isolated.⁵

Identity and Support: Onlines can be a place of identity affirmation and support to youth who feel isolated in their offline space, including racial, ethnic, or sexual minorities.³⁸

Information and Literacy: The social media will be important in raising awareness about mental health. The use of hashtags such as #MentalHealthAwareness, #MHAM2025, and #EndTheStigma

has contributed to the global discussions and provides them with the feeling that they are not alone and encourages them to seek help.

Protective Factors, Psychological Benefits, and Evidence Base

Protective Factor	Psychological Benefit	Evidence Base
Online Support	Social Buffers against loneliness	Linked to higher life satisfaction in older adults and marginalized youth
Identity Formation	Space for self-expression and creative exploration	and 71% of teens feel social media allows them to show their creative side
Mental Health Literacy	Increased knowledge of symptoms and treatments	of Internet-based interventions improve knowledge and reduce stigma
Accessibility	Immediate, often anonymous support	Digital interventions overcome barriers like cost and time

Online Social Support:

Eight teenagers out of ten attest that social media keep them connected. The findings of the long-term benefits of mental health were pointed out by Singh and Gupta (2025) as the results of the two-year experience of interaction with online support groups.

- **Identity affirmation:** 71 per cent of teenagers do think that social media provide them with a platform to get to exercise their creative side. The significance of online space in creating identity and peer support to the marginalized youth particularly the racial, ethnic and sexual minorities is paramount.
- **Mental Health Literacy:** Hashtags like #MentalHealthAwareness and #EndTheStigma unify global conversations, helping individuals recognize symptoms and seek help.

Digital Mental Health Interventions (DMHIs)

The integration of technology into clinical practice has led to the development of several effective intervention models. Systematic reviews and meta-analyses consistently show that DMHIs can significantly reduce symptoms of depression and anxiety.⁵⁸ Efficacy of iCBT and Blended Approaches iCBT Efficacy Lu et al. (2022) and Cuijpers et al. (2010) have demonstrated that Internet-based Cognitive Behavioral Therapy (iCBT) is a suitable treatment option, as it has proved equally efficient as face-to-face therapy in treating depression.

Internet-based Cognitive Behavioral Therapy (iCBT) is one of the well-validated digital interventions. Randomized controlled trials (RCT) meta-analyses indicate that iCBT may be equally effective as face-to-face interventions with respect to adults and college students.⁵⁶ Blended interventions, which include face-to-face delivery alongside online elements, have been particularly successful in enhancing the level of depressive symptoms and functional impairment.⁵⁹

The technological revolution has brought about the next-generation interventions that exploit the power of synchronous teletherapy, artificial intelligence, and virtual reality (VR).⁵⁹ VR-based interventions based on multisensory can create an immersive environment capable of stimulating brain plasticity and enhancing the quality of life of people with cognitive impairments and depression.⁵⁸ AI-powered tools can offer personalized support and additionally enhance adherence due to their ability to engage and voice-read.⁶¹ Characteristics of

Clinical Foundations of Depressive Disorders

Clinical diagnosis of the Major Depressive Disorder as stipulated in the DSM-5-TR continues to be the standard of assessing psychological distress in the digital era. To be diagnosed, the symptoms must be present for at least five out of the following ten weeks and should include either depressed mood or a loss of interest or pleasure (anhedonia).¹ The symptoms should be causing clinically significant distress or impairment in social, occupational or other functional areas. Mental status examination is an essential instrument to the clinicians because it can reflect the subjective experience of the patient and show any evidence of psychomotor agitation or retardation.¹

Symptoms and Social Media Impact

Domain	DSM-5-TR	Manifestation / Impact
Affective	Depressed mood, irritability, or pervasive sadness	“Doom scrolling”; emotional contagion from negative content
Cognitive	Diminished concentration, indecisiveness, worthlessness	Cognitive overload; negative social comparison
Somatic	Sleep disturbances, fatigue, psychomotor changes	Blue light disrupts circadian rhythm; sedentary behavior
Behavioral	Loss of interest, appetite/weight changes	Digital anhedonia; neglect of physical self-care
Safety	Recurrent thoughts of death or suicidal ideation	Exposure to self-harm content; cyberbullying risk

Other forms of depressive disorders, including Persistent Depressive Disorder (PDD/dysthymia), a more chronic but not always severe expression of the depressive condition, are also identified by clinical psychologists, and ensure that the process of grief mourning is not anthologized, but the onset of depression when it is clinically impairing.¹⁹ This distinction is especially important in the social media age, whereby the existence of online memorials and the constant presence of the dead person can drastically change the flow of grief and influence the appearance of depressive symptoms.

International and Local Social Media Consumption Trends. The digital landscape is not a unitary entity, it is a fragmented ecosystem in which the use pattern at any age, gender, geography and platform can differ greatly. The number of identities using social media has reached 5.24 billion in early 2025 with an annual growth rate of 4.1%.² The reason behind this usage is also changing with finding information being the main reason why adults are using the media, and social interaction being the number 1 reason why individuals aged 16 to 34 are going online. In the United States, platform dominance is extremely age stratified.

On YouTube, teenagers are the most frequent users (90%), and then Tik Tok (63%), Instagram (60%), and Snapchat (55%).⁴ Among adults, YouTube and Facebook are the most frequently used followed by Instagram and Tik Tok (significant increases with younger age groups).

Social Media Platforms and Mental Health Impact

Platform	Adolescent Popularity (US)	Usage Characteristic	Impact on Mental Well-being
YouTube	90%	Video-based; informative & entertaining	Generally more positive; lower "addiction" reports
TikTok	63%	Short-form; high engagement; algorithmic	High "flow state"; linked to time distortion & anxiety
Instagram	60%	Visual-centric; curated highlights	Linked to body dissatisfaction & social comparison
Snapchat	55%	Ephemeral; peer-to-peer messaging	High FoMO; pressure for constant presence
Facebook	32% (Teens)	Community-focused; declining teen use	Associated with problematic social media use (PSMU) in older users

The digitization of India is marked by a steep rise in the internet penetration rate, as more than 1 out of 3 young Indians are reportedly addicted to the social media platform, with 32% of the social media users in these centers of activity reporting being heavy users (spending more than 3 hours a day on the platform).²⁵ The statistics on internet penetration have shown a consistent increase in the number of users in the country, with over 3 out of 10 individuals addicted to the social media platform in these urban centers (Lucknow

Conclusion

The online world is a multi-faceted, multifaceted landscape, which has completely changed how depression is being presented and the course it takes among modern youth. This literature review confirms that as much as social media provides unprecedented connection and identity development opportunities and access to mental health, it also creates powerful stressors that may cause or aggravate depressive symptoms. It is now well-recognized that the mechanisms of harm, namely social comparison, FoMO, and the replacement of healthy lifestyle behavior are present, as well as the mediating position of cyberbullying and sleep disruption.

ACKNOWLEDGEMENT

I would like to express my sincere gratitude to my research guide Dr. Shivali Sharma, for her valuable guidance, constant encouragement and constructive suggestion through - out the course of this research work. Without her support and motivation this research would have not been possible.

I am also thankful to the Head of the Department, Dr. S. Z. H. Zaidi, Amity Institute of Behavioural and Allied Sciences, Amity University, Lucknow Campus, Uttar Pradesh, for their continuous support and cooperation during my academic journey. I extend my heartfelt thanks to all the participants who willingly took part in the study and provided the necessary data for this research.

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