

The relationship between social media usage and mental health: The dual nature of support and harm

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The relationship between social media usage and mental health is complex and difficult to define. This complexity is further compounded by the rapid pace at which social media use continues to grow and evolve. Social media provides immediate access to information, making it easier to network, share ideas, and exchange viewpoints across diverse communities. In context of Nepal, 43.5% of total population that is 13.40 million people use social media as per data on January 2024.¹

Online communities, in particular, create spaces for discussions about various issues, such as health-related conditions, adverse life events, or everyday challenges. These interactions can have a positive impact by reducing stigma and fostering openness even enhance feelings of belonging and perceived emotional support.^{2,3} This was especially evident during the COVID-19 pandemic lockdown, when people were confined to their homes and relied heavily on online platforms for connection and support.

However, over the last decade, concerns have been raised about the quality of information disseminated through social media platforms. This issue reflects a deeper problem regarding how individuals interpret their everyday experiences online. Social media can easily capture users' attention, leading to psychological cravings similar to those seen in addiction disorders. Receiving a "like," "share," or positive reaction to a post triggers dopamine release in the reward pathway mimicking reward seeking behavior while neglecting other responsibilities.

While social media can provide valuable support for those in distress, it can also become a venue for bullying, harassment, and emotional harm, potentially increasing distress or even contributing to suicide risk. This risk has inflated not only by social media access to perpetrators but also to

vulnerable population. These perpetrators are people with dissocial traits and vulnerable population are mainly minors and socially oppressed group. This give rise to the evolving terminology of cyber bullying.

Cyberbullying is defined as a repeated act when someone repeatedly harasses, harms or mistreats others through internet technologies or devices such as smartphones, email and internet sites.⁴ The authorities in Nepal have addressed around 1,600 TikTok-related cybercrime cases, ranging from misinformation to cyberbullying and digital fraud, over past four-year.⁵ The most common forms of online harassment included cyberstalking, revenge porn, online scams, public shaming, and trolling. These behaviors extend beyond name-calling and can include teasing, defamation, intimidation, rumor-spreading, sharing compromising photos without consent, hacking, and spreading viruses.⁶ Due to the unique nature of cyberbullying, coupled with fear and stigma, both perpetrators and victims frequently under-report incidents or conceal their identities.

In one of the cross sectional studies done among higher secondary school adolescents in an urban city of Nepal, it showed that that the 30-day prevalence of cyberbullying and cyber-victimization was 14.4% and 19.8%, respectively, while the lifetime prevalence was 24.2% and 42.2%. Posting mean or hurtful comments online was identified as the most common form of both cyberbullying and victimization. Males were found to be more likely than females to engage in cyberbullying.⁷ These adolescents were more likely to report loneliness, anxiety, suicide attempts, school absenteeism, and involvement in physical fights. These datas highlight the prevalence and urgency of addressing cyberbullying. Although cyberbullying is an increasingly prominent topic in public health research, few studies have

explored its prevalence and contributing factors, particularly among Nepalese population.

Similarly, another study concluded that there is an association between social media use with mental health aspects as disturbance in sleep pattern, change in behaviour, disruption in regular morning activities, distraction in work and study, media portray of image and anxiety levels among secondary level students in Kathmandu. High usage patterns, such as staying up late, checking social media before bed and immediately after waking up, and feeling the urge to use social media during productive hours, are linked mental health issues.⁸

Given these concerns, it is critical to be mindful of the content we post and share on social media. In a time when unregulated information spreads rapidly, how can we responsibly and meaningfully communicate information to the public? Understanding shifting trends and establishing causal relationships can be challenging. We must deepen our understanding of how social media influences the way people interpret and make sense of their experiences. At the same time, we must guard against over-pathologizing everyday struggles or trivializing severe illnesses in efforts to reduce stigma.

There is a clear need to raise awareness about the potential risks associated with excessive social media use. Yet, there is no universal consensus on whether social media's overall impact is positive or negative. By promoting social media literacy, we can equip individuals with the tools to navigate these platforms safely, critically, and meaningfully—maximizing the benefits while minimizing the harms. It would not be exaggeration to say that future school textbooks need to add a chapter in social science books.

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