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Mental Health Stigma Among Youth in The Digital Age: Social Aspects

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Abstract

The issue of mental health stigma among young people has become a burning problem in the era of digitalization due to the acceleration of technological progress and changes in social relations. This review article discusses the social dimension of mental health stigma, with the emphasis on smartphone and social media usage, and digital patterns of engagement among young persons. Based on the literature that has been published within the last 2-4 years, the research follows the systematic review method to examine the association between digital behaviors and stigma development. The results indicate that though the digital platforms may raise awareness and peer support, they also maintain stigma by cyberbullying, misinformation, and by social comparison. There are multiple types of stigma: social, self, and structural, which are shown to be interdependent and enhanced by online communication. The paper emphasizes the importance of combined initiatives, such as digital literacy and awareness campaigns, policy interventions, to combat stigma and enhance positive mental health experiences among young populations in a more digital society.

Keywords; Mental Health Stigma; Youth; Digital Age; Social Media; Digital Engagement

INTRODUCTION

Mental health has become one of the pressing health issues in the global population, especially among youth who are experiencing complicated developmental, social, and technological changes. Over the last few years, the digitization of technologies and the internet have led to a tremendous transformation of how young people perceive, discuss, and respond to mental health problems [1]. Although greater awareness and availability of information have led to more candid discussions, the mental health stigma has remained a significant obstacle to help-seeking behavior among young people. Being firmly entrenched in social norms, cultural beliefs and misconceptions, this stigma more often than not results in discrimination, social alienation and inability to access professional assistance [2]. The social media, online social groups and virtual interactions have a dual role in the development of mental health perceptions in the digital age. On the one hand, digital spaces offer the possibility of awareness, peer support, and advocacy that can contribute to normalizing the mental health discussions and minimizing the stigma [3]. The platforms are used by campaigns, influencers, and mental health organizations to share information and break stereotypes. Conversely, the same digital spaces may support stigma by cyber-bullying, misinformation, negative labeling, and the glorification or trivialization of mental health conditions [4]. Both positive and negative narratives are enhanced by anonymity and immediate propagation of information, which makes the online environment a complicated sphere of mental health discourse. The social aspect of mental health stigma among young people are of great importance because young people are highly affected by what their peers think, who they are socially and the necessity to be accepted [5]. These social dynamics are usually influenced by digital interactions and tend to influence self-esteem, identity formation, and mental health attitudes. The digital influences also interact with cultural context, family background, and societal expectations to establish layer of experiences of stigma [6]

A. Mental health Stigma

Mental health stigma entails marking and dismissing people because of their differences, which can lead to feelings of worthlessness or shame. As a result, people with mental health issues may face discrimination, stereotypes, or labels. For instance, a person with a mental illness can be referred to be "dangerous" or "crazy." Due to their diagnosis, another individual may be denied employment opportunities [7]. Different structures for the construct are suggested by various stigma models. According to one perspective, stigma consists of three elements: behavioural (ostracism and oppression), cognitive (ignorant beliefs), and emotional (bad sentiments of dislike or dread) [8]. Another characterises stigma based on how it develops. In order to maintain rejection and discrimination, this entails identifying and labelling differences, associating labels with unfavourable preconceptions, classifying tagged people, lowering their status, and restricting their access to social, economic, and political power [9].

- Social stigma is the cultural belief that mental health problems are an indication of weakness or personal failure. This can lead to social marginalization or isolation for those with mental health problems.
- Self-stigma occurs when a person's mental health issues drive them to form unfavourable opinions of themselves, which are frequently comparable to those associated with social stigma. Shame, low self-esteem, and an unwillingness to ask for assistance can all result from this.
- Institutional policies, behaviours, and systems that uphold discrimination against people with mental health disorders are referred to as structural stigma. Barriers to accessing healthcare and discrimination in the workplace are two instances of structural stigma.

In addition to the direct impact on individuals with mental illness, stigma also affects those who provide support, often family members. The stigma attached to mental illness, which is especially troublesome in some diverse racial and ethnic communities, may make it difficult for people from various cultures to receive mental health care [10]. In certain Asian cultures, for example, seeking professional therapy for mental illness may be incompatible with the values of avoiding shame, emotional control, and a strong family. Additionally, the mental healthcare system may be viewed with suspicion by certain communities, including the African American population, which can impede the process of seeking assistance.

Table 1: Types of Stigma

	Public	Self	Structural
Stereotypes & Prejudices	People who are mentally ill are unpredictable, violent, inept, and to fault for their disease.	I am incompetent, destructive, and blameworthy.	Stereotypes are reflected in institutions such as laws.
Discrimination	Consequently, employers may refuse to hire them, landlords may refuse to rent to them, and the healthcare system may provide a substandard level of treatment.	Self-efficacy and self-esteem may suffer as a result of these ideas: "Why try? Someone like me is not worthy, or unable to work, live independently, or have good health."	causes both planned and unplanned opportunity loss

B. Smartphones, Social Media, and Their Impact on Mental Health

With severe effects on mental health, the emergence of cellphones and social media has significantly altered our culture. The way we communicate, learn, and amuse ourselves has been completely changed by smartphones. However, a sense of dependence and compulsive use might result from their pervasiveness [11]. The constant onslaught of messages and updates may cause anxiety and stress levels to increase, creating a sense of urgency and a dread of missing out. Additionally, excessive smartphone use might disrupt sleep, which is essential for mental well-being [12].

Social networking sites can facilitate communication and promote the sharing of experiences, but they can also exacerbate feelings of inadequacy and low self-esteem. The tendency to compare oneself to others and the desire for approbation from likes and comments can lead to a distorted self-image and feelings of worthlessness [13]. Heavy social media use has also been connected to suicide ideation, loneliness, anxiety, and hopelessness. The platforms are designed to be addictive and maintain users' interest for long stretches of time by using algorithms that present content to users based on their interactions and interest. [1].

These issues are exacerbated by the business strategy of social media companies, which entails the collection and sale of user data for the purpose of targeted advertising. Overconsumption and financial stress can result from the

constant onslaught of personalised advertisements, and sentiments of mistrust and paranoia can be exacerbated by privacy violation [2]. Setting limits on screen time and being aware of the kinds of content one consumes are crucial for reducing these impacts. Adults can control usage and minimise exposure to hazardous content by using the tools and settings that are available on the majority of devices [3]. Setting an example of responsible digital behavior and educating children about the risks of excessive screen time and social media use are also crucial. The consequences of devices and social media are increasingly being recognized and worried about by mental health professionals. Reducing screen time, encouraging healthier digital behaviours, and addressing the negative mental patterns linked to social media use are now common components of therapies [4].

C. Patterns of Digital Engagement Among Youth

- **Hyper connectivity and Multi-Platform Use:** Contemporary youth are hyperconnected to an unprecedented degree, frequently using several apps and platforms in brief periods of time. According to research, teenagers frequently switch between digital tasks dozens of times a day, which leads to increased cognitive load, fragmented attention, and a decreased ability to focus for extended periods of time. Due to the persistent sense of urgency created by notifications and incoming communications, such ongoing digital interaction also raises emotional reactivity. Youth who are hyperconnected check messages or updates frequently to avoid feeling excluded or socially marginalised, a behaviour that is strongly associated with FOMO and elevated anxiety.
- **Social media as a Space of Identity Construction:** Social media sites are important venues for self-presentation and identity exploration. Youth create and hone their social and personal identities through carefully chosen photos, aesthetic decisions, status updates, and digitally transmitted accomplishments. These platforms provide chances for self-expression, creativity, and a sense of community, but they also increase pressure to live up to idealised norms that are supported by algorithm-driven content and influencer culture. Insecurity and mental anguish are frequently exacerbated by the discrepancy between online and offline identities, particularly in teenagers who are still developing their identities.
- **Online Gaming and Virtual Immersion:** Another significant aspect of youth digital participation is online gaming. Research indicates that playing video games can improve cognitive skills like cooperation, strategic thinking, and spatial reasoning. However, there are serious hazards

associated with excessive gaming, such as gaming disorder, aggressive tendencies in certain situations, withdrawal from offline interactions, disturbed sleep, and dependence on virtual worlds as an escape. Youth may be exposed to harmful interactions, cyberbullying, and competitive stress in gaming groups, even while they might offer social support and peer connection.

- **Digital Learning and Academic Stress:** The COVID-19 epidemic has expedited the growth of digital learning, which has revolutionised youth academic experiences. Online learning increases flexibility and accessibility, but it also comes with drawbacks including screen fatigue, decreased physical activity, and greater social isolation. A feeling of excessive surveillance brought on by digital monitoring and assessment technologies may increase stress and lower intrinsic motivation. Additionally, students are under constant pressure to be productive due to the blurring of school and home borders, which makes it challenging to preserve equilibrium and safeguard mental health. Because of this, a lot of young students find it difficult to balance the demands of digital learning with their mental health.

D. Pressures in the Digital Age and Their Impact on Mental Health

- **Social Comparison and Body-Image Dissatisfaction:** The social comparison amongst youth is exacerbated by algorithmically selected content, which frequently promotes idealised looks, lives, and accomplishments. Frequent exposure to these kinds of pictures can lead to eating disorders, body dysmorphic issues, low self-esteem, and body dissatisfaction. Adolescent girls, LGBTQ+ youth, and those with pre-existing concerns are among the vulnerable populations that are most at risk; many of them develop compulsive behaviours related to filters, cosmetic modifications, or online presentation.
- **Cyberbullying and Online Harassment:** The relentless, nameless, and public nature of digital harassment exacerbates psychological injury. Anxiety, despair, social disengagement, academic degradation, and, in extreme situations, suicide thoughts are common among victims. Online humiliation's persistence and prominence worsen trauma and can sabotage peer connections and long-term trust.
- **Digital Addiction and Emotional Dysregulation:** Adolescent brain reward pathways are altered by excessive screen time, resulting in addiction-like behavioural tendencies. Youth may demonstrate irritability, aggression, sleep disturbances, attention deficits, and diminished impulse control when they are disconnected. Notification-driven

feedback loops increase susceptibility to emotional dysregulation by reinforcing obsessive engagement.

- **Fear of Missing Out (FOMO) and Social Anxiety:** FOMO causes obsessive peer monitoring, which can result in long-term worry, diminished confidence in offline encounters, hypervigilance, and trouble relishing solitude. Social anxiety and emotional strain are greatly exacerbated by the effort to stay socially relevant online.
- **Sleep Deprivation and Cognitive Decline:** Exposure to screens at night inhibits the generation of melatonin, which results in weariness, insomnia, memory loss, diminished focus, and emotional instability. Extended late-night gaming or surfing worsens circadian rhythm disruption, which further impairs cognitive function and academic performance.
- **Digital Overload and Burnout:** Cognitive and emotional overload is caused by constant connectedness and information overload. Digital burnout is the collective term for the symptoms that young people experience, including diminished motivation, mental exhaustion, emotional exhaustion, indifference, and poor decision-making. Cognitive and emotional resources are depleted by the continual desire to react, interact, and perform online, which affects general wellbeing.

LITERATURE REVIEW

(Gayathri & Bhuyan, 2024) [14] examines how media representation perpetuates gender stereotypes among youth between the ages of 18 and 25. Data collected using the Multimedia Influence Scale (MMIS) and the Gender Stereotype Scale (GSS) showed that participants perceived little media influence and moderately endorsed gender stereotypes. Gender norms are therefore both strengthened and weakened by social and traditional media, such as television and films, either independently or in combination. Young adults learn normative gender roles from media consumption since traditional portrayals are emphasised within the cultural context, especially in India. In order to dispel preconceptions and advance equity, the study emphasises the need for targeted educational interventions and diverse media replications. Reliance on self-report data and a small, nonrepresentative sample are among its limitations; longitudinal studies are being highlighted.

(Ramparsad & Yadav, 2024) [15] Examine the stigma that young people between the ages of 15 and 29 face related to mental health. This study thoroughly reviewed indexed articles published in the English language on Google

Scholar, PubMed, and Semantic Scholar using "Boolean terms like "and" and Medical Subject Heading (MeSH) terms like stigma, mental health programs, India, mental health prevalence, mental health delivery system, and mental disorders". As part of psycho-education at the secondary and higher education levels, this study recommends educating students about common mental disorders and looking into the stigmatization of mental health. The training and sensitization of social workers, educators, health care providers, and other stakeholders must be initiated and managed by expert institutions. By assisting young people in reconstructing their perspectives on mental health, these initiatives can ultimately lead to improvements in the provision of mental health treatment and the availability of mental health services.

(Sala et al., 2024) [16] investigates the potential and risks associated with teens' mental health and wellbeing related to social media usage (SMU), as well as the main risk mitigation techniques provided in systematic, scoping, and narrative literature reviews and meta-analyses. We emphasise that a number of intervening factors, including "1) individual demographic and psycho-socio characteristics, 2) individual usage of Social Media (SM), and 3) SM's content and design", have an impact on the relationship between SMU and adolescents' mental health. We discuss how the inability to collect SM data complicates the investigation of SMU's effects and how the adoption of responsible design principles by SM platforms would facilitate a change at the population level, which is more challenging to accomplish if the responsibility for responsible use is solely placed on individual choices. Finally, we discuss the opportunities provided by upcoming legal frameworks such as "the EU Digital Services Act".

(Saleem & Jan, 2024) [17] Analyze the effects of excessive screen time and social media use on the mental health of Indian adolescents (13–19 years old) and young adults (20–25 years old). The study provides compelling evidence that negative mental health outcomes, such as feelings of worry, melancholy, tension, and low self-esteem, are linked to excessive screen time and social media usage among Indian adolescents and young adults. Physical activity, social support, and a decrease in cyberbullying were protective variables, while poor sleep quality exacerbated mental health problems. In order to foster a better relationship with technology and safeguard mental health, the study emphasizes promoting healthy digital habits, addressing underlying concerns, and giving adolescents

coping mechanisms—all while embracing the benefits of technology.

(Wani et al., 2024) [18] seeks to shed light on the state of DMHIs for teenagers in LMICs. Although DMHIs for teenagers in LMICs have advanced significantly, there is still a small body of research. Many questions remain unanswered regarding the long-term clinical benefits, the preparedness and maturation of digital infrastructure in low- and middle-income countries (LMICs), cultural suitability, and cost-effectiveness in the numerous LMICs. To bridge these gaps, large-scale, co-designed, and culturally relevant DMHI trials are needed. Future work should address this.

(Khalaf et al., 2023) [19] It is becoming increasingly difficult for teenagers to envision their lives without social media. When assessing risk, social media can be a new consideration for practitioners. Despite mounting evidence of social media's negative effects on adolescent mental health, there is still a lack of empirical research on how children comprehend social media, particularly as a body of wisdom, or how they could employ broader current media discourses to express themselves. Young people's extensive use of cell phones and other media causes chronic sleep deprivation, which is damaging to mental function, academic success, and socioemotional functioning. Numerous cross-sectional, longitudinal, and empirical research have shown that teens who use cellphones and social media are more likely to experience mental distress, engage in self-harming behaviors, and think about suicide. Clinicians can work with young people and their families to reduce the hazards associated with social media and smartphone use by implementing open, nonjudgmental, and developmentally appropriate tactics including education and practical problem resolution.

(Gaiha et al., 2020) [20] examined the scope and manifestations of public stigma and gathered information to support recommendations to reduce stigma related to mental health among Indian youth. Instead of utilizing psychiatric diagnoses, public education may use symptomatic vignettes (using simple language and imagery) to help young people better understand the range of mental health difficulties. Strategies to reduce public stigma include age-appropriate social roles and culturally relevant content, as well as awareness campaigns linked with educational institutions.

(Odgers & Jensen, 2020) [21] compiled information from three sources: (a) narrative reviews and meta-analyses carried out between 2014 and 2019; (b) extensive longitudinal and ecological momentary assessment studies;

and (c) large-scale preregistered cohort studies. The objective was to provide a comprehensive overview of the existing body of knowledge concerning the association between "adolescent mental health and digital technology" use, with a particular focus on anxiety and depression. The study highlights that much of the research to far has been correlational, has focused on adults rather than teenagers, and has yielded a range of often inconsistent small positive, negative, and null associations. Recent rigorous large-scale preregistered studies have demonstrated weak correlations between the daily use of digital technology and the well-being of adolescents. These correlations are unlikely to be clinically or practically significant and do not offer a method of distinguishing cause from effect. The implications for improving future research and advancing teen mental health in the digital age are discussed.

RESEARCH GAP

Although much has been learned about mental health stigma and online interaction among the youth, there are a set of unanswered questions. The majority of the work focuses on how social media affects "mental health or mental health awareness in general", with little to no attention paid to the social component of stigma in the online setting. The interaction between various forms of stigma, including social, self, and structural, and the dynamics of digital engagement, including hyperconnectivity, online identity formation and digital learning are underemphasised. Also, the majority of the studies are cross-sectional and do not have a comprehensive framework that connects digital pressures (e.g., FOMO, cyberbullying) to stigma formation and help-seeking behavior. Studies in the third world such as India are still few especially in terms of capturing culturally based stigma in the fast changing digital worlds.

RESEARCH OBJECTIVE

1. To study the concept of mental health stigma and its type.
2. To study the smartphones, social media, and their impact on mental health.
3. To study the patterns of digital engagement among youth.
4. To study the pressures in the digital age and their impact on mental health.

RESEARCH METHODOLOGY

The present literature on youth mental health stigma in the digital age will be examined using a qualitative systematic review technique. The secondary data has been gathered based on peer-reviewed journal articles and reports

and databases with scholarly materials, namely Google Scholar, PubMed, and Scopus, in the period of 2020-24. Data extraction was carried out by relevant keywords such as mental health stigma, youth, social media, and digital engagement. The chosen articles have been critically evaluated, classified, and summarized depending on the research objectives. The review focuses on the determination of patterns, themes, and relationships between digital behaviors and stigma. This will provide a full understanding of the societal variables influencing the stigma associated with mental health in young people.

DISCUSSION

The review points out that digital platforms have a strong effect on shaping and strengthening mental health stigma among youth. Although social media can be used to create awareness and peer support, it also leads to stigma by promoting cyberbullying, misinformation, and unrealistic social comparisons. The emotional vulnerability and social pressure are enhanced by patterns of digital interaction including hyperconnectivity, identity construction, and immersive gaming. The results show that stigma is multifaceted and can manifest on social, self, and structural levels and is usually aggravated by online communication. Moreover, the cultural setting is also critical in determining the perceptions of stigma, especially in such countries as India where family norms and expectations dictate the behavior of seeking help. It is also found in the literature that over time screen time, sleep disruption, and digital addiction are intimately linked with adverse mental health outcomes. In sum, the interactions between digital exposure and social stigma make the environment rather complex and that multidimensional interventions are necessary.

CONCLUSION

In conclusion, mental health stigma among young people in the digital age is an important social problem because of the interaction between the effects of technologies and the society. Although digital spaces have created new spaces of awareness, education, and peer support, they also play a role in the perpetuation and change of stigma via negative online activities, misinformation, and social comparison. The review helps to emphasize that stigma is not a single phenomenon but a complex phenomenon, a social, self, and structural phenomenon, which is only exacerbated in the digital world. The results highlight how digital engagement patterns, including hyperconnectivity, identity formation, and digital learning are important factors that shape mental health and stigma perceptions among young people. There are also other pressures such as cyber bullying, FOMO and

digital addiction that also increase psychological distress and deter help-seeking behavior. There is further complexity, in cultural and societal factors, especially in developing countries such as India. Mental health stigma needs to be tackled through a holistic strategy of digital literacy, awareness, policy interventions, and culturally sensitive solutions. Stigmatization and mental health can be addressed by encouraging responsible digital use and creating supportive online spaces, which can enhance mental health and reduce stigma in young people.

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