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Social Media Use as a Maladaptive Coping Mechanism and Predictor of Psychiatric Morbidity among University of Ilorin undergraduates

L'utilisation des médias sociaux comme mécanisme d'adaptation inadapté et facteur prédictif de la morbidité psychiatrique chez les étudiants de premier cycle de l'Université d'Ilorin

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Abstract

Introduction: Pervasive use of social media among university students globally has raised concerns about its impact on mental health. This study assessed patterns of social media use and its relationship with psychiatric distress among undergraduates at the University of Ilorin, Nigeria.

Materials and Methods: A descriptive cross-sectional study was conducted among 378 undergraduates selected via a multi-stage sampling technique. Data was collected using self-administered questionnaire that included socio-demographic details, Social Networking Time Use Scale (SONTUS), Bergen Social Media Addiction Scale (BSMAS), Social Media Engagement Questionnaire (SMEQ), and 12-item General Health Questionnaire (GHQ-12). Data analysis was performed using SPSS version 22.0.

Results: The mean age of respondents was 21 ± 2.76 years, and the majority (59.8%) were female. The study found high rates of social-media addiction (70.9%) and psychological distress (37.3%). A dose-dependent relationship was found between increased numbers of days, hours, and money spent on social media and psychological distress. Participants with probable distress reported significant more extensive use, particularly during times of stress and leisure periods (p -value = < 0.001). In multivariate analysis, significant predictors of distress were problematic social media use (adjusted odds ratio, AOR = 2.203, CI = 1.289-3.766) and use of social media during a stressful period (AOR = 1.044, CI = 1.016-1.073).

Conclusion: The study adds to evidence linking social media addiction with probable psychiatric morbidity among students. The association suggests that frequent use of social media during stressful periods points to its role as both a potential coping mechanism and a maladaptive behaviour that may worsen distress. Therefore, universities should consider incorporating evidence-based digital literacy programmes into their mental health support services.

Keywords: Social Media Addiction, Psychiatric Morbidity, SONTUS, Maladaptive Coping, Undergraduate Students

Résumé

Introduction : L'utilisation généralisée des médias sociaux chez les étudiants universitaires à l'échelle mondiale a suscité des inquiétudes quant à son impact sur la santé mentale. Cette étude a évalué les habitudes d'utilisation des médias sociaux et leur relation avec la détresse psychiatrique chez les étudiants de premier cycle de l'Université d'Ilorin, au Nigéria.

Matériel et Méthodes : Une étude transversale descriptive a été menée auprès de 378 étudiants de premier cycle sélectionnés par une technique d'échantillonnage à plusieurs degrés. Les données ont été recueillies à l'aide d'un questionnaire auto-administré comprenant des informations sociodémographiques, l'échelle d'utilisation du temps passé sur les réseaux sociaux (SONTUS), l'échelle de dépendance aux médias sociaux de Bergen (BSMAS), le questionnaire d'engagement sur les médias sociaux (SMEQ) et le questionnaire de santé générale en 12 points (GHQ-12). L'analyse des données a été réalisée à l'aide du logiciel SPSS version 22.0.

Résultats : L'âge moyen des répondants était de $21 \pm 2,76$ ans, et la majorité (59,8 %) étaient des femmes. L'étude a révélé des taux élevés de dépendance aux médias sociaux (70,9 %) et de détresse psychologique (37,3 %). Une relation dose-dépendante a été observée entre l'augmentation du nombre de jours, d'heures et de l'argent consacrés aux médias sociaux et la détresse psychologique. Les participants présentant une détresse probable ont signalé une utilisation significativement plus importante, notamment pendant les périodes de stress et de loisirs ($p < 0,001$). En analyse multivariée, les prédicteurs significatifs de la détresse étaient l'utilisation problématique des médias sociaux (L'odds ratio ajusté AOR = 2,203, IC = 1,289-3,766) et l'utilisation des médias sociaux pendant les périodes de stress (AOR = 1,044, IC = 1,016-1,073).

Conclusion : L'étude contribue aux preuves associant la dépendance aux médias sociaux à une morbidité psychiatrique probable chez les étudiants. Cette association suggère que l'utilisation fréquente des médias sociaux pendant les périodes de stress met en évidence son rôle à la fois comme mécanisme d'adaptation potentiel et comme comportement inadapté susceptible d'aggraver la détresse. Par conséquent, les universités devraient envisager d'intégrer des programmes d'éducation au numérique fondés sur des données probantes à leurs services de soutien en santé mentale.

Mots-clés : Dépendance aux médias sociaux, Morbidité psychiatrique, SONTUS, Adaptation inadaptée, Étudiants de premier cycle

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Introduction

The widespread integration of social media (SM) into everyday routines of young adults has prompted much research into its impact on mental well-being [1]. Facebook, Twitter, Instagram, Snapchat, and LinkedIn are all examples of platforms that enable users to connect and exchange digital materials. These platforms have become essential for university students globally, including those in Nigerian higher education institutions, where internet access and smartphone usage are rapidly increasing [2]. While social media offers opportunities for social connections, education, and entertainment, excessive use raises concerns due to its association with negative mental health outcomes.

Problematic social media use, frequently identified as behavioural addiction, shares similarities with other addictions, such as salience, mood alteration, and withdrawal symptoms. Studies within Nigerian universities report high rates of social media addiction and psychological distress, underscoring a growing public health concern [3-5]. Excessive time spent on social media, whether through aimless browsing or usage driven by stress, can result in poor time management, addictive behaviours, and emotional distress [6]. This triad can contribute to psychological issues such as anxiety, depression and emotional exhaustion, and poor academic achievement. Idle use, defined as engaging with social media without a clear purpose and using it as a coping mechanism, can become habitual, reinforcing unhealthy strategies and harming students' mental health [7,8].

In Nigerian universities, factors such as socio-economic instability, academic pressure, and limited mental health support systems compound the risk of psychological distress. While existing research highlights the prevalence of social media addiction and psychological distress, few studies have explicitly examined the interconnected triad of time, addiction, and distress [9,10].

A key question that remains is how social media usage patterns exacerbate this distress. Research shows that both the duration of social media engagement and the characteristics and environment of its use are significant factors [10]. Utilising social media mainly to control emotions, such as stress relief, could be a bad way to cope with problems that can exacerbate negative feelings through mechanisms like social comparison and disruption of real-life reinforcement [11-13]. Understanding these processes can inform the development of tailored interventions to promote healthier digital habits and psychological resilience.

This study sought to address this gap by examining the complex interplay between social media usage, patterns, addiction, and psychological morbidity among undergraduates in a Nigerian university. We hypothesise that psychological distress would be significantly associated with addictive social media use and that this relationship would be evident in specific usage context.

Materials and Methods

Study Design and Setting: This descriptive cross-sectional study was conducted at the University of

Ilorin from July and August, 2023. The university comprises 16 faculties, hosting an undergraduate student population of approximately 50,000.

The study population consisted of full-time undergraduate students. Using Fisher's formula, a minimum sample size of 380 was calculated. A multi-stage sampling technique was used to select two departments each from four departments picked, and students were proportionally allocated from the different academic levels.

Data Collection Instrument: A structured, self-administered questionnaire was utilised, comprising sections on socio-demographic characteristics and social media platforms used. Social media usage was assessed using:

The Social Networking Time Use Scale (SONTUS) consisting of 29 items, each scored across 11 time frames (1-11) with total scores ranging from 29 to 319; higher scores mean higher usage, [14].

The Bergen Social Media Addiction Scale (BSMAS) is a 6-item questionnaire scored on a 5-point scale, with a total score ranging from 6-30. Problematic use was defined as scoring >3 on at least 4 of the 6 items. Higher scores indicate greater levels of addiction to social media [15].

The Social Media Engagement Questionnaire (SMEQ) is a 5-item questionnaire measuring frequency of use in specific daily contexts, with total scores ranging from 0 to 35; higher scores indicate greater frequency [16].

The mental health status was assessed using the 12-item General Health Questionnaire (GHQ-12) with a cut-off of ≥ 3 using the bimodal scoring system, indicating probable psychological distress [17,18].

Data Analysis: Data was analysed using IBM SPSS Statistics Version 22.0. Descriptive statistics (frequencies, means, standard deviations) summarised the data. Inferential statistics, including the Chi-square test and logistic regression, were employed to test associations between social media use and probable psychological distress, with a p-value of < 0.05 considered statistically significant.

Ethical Consideration: Ethical approval was obtained from the University of Ilorin Ethical Review Committee (UERC/ASN/2023/2567). Informed consent was secured from all participants, and confidentiality was maintained.

Results

A total of 378 (99.5%) out of the 380 administered questionnaires were returned and analysed. The majority of respondents (240) were aged 20-25 years (63.49%), with a mean age of 21.4 ± 2.76 years. There were more females (228, 60.3%) compared to males (150, 39.7%).

The Yoruba ethnic group predominated, accounting for 280 (74.0%), followed by the Igbo, at 40 (10.6%). There were more Christians, 246 (65.1%), while the remaining 132 (34.9%) were Muslims. Most participants (214, 56.6%) lived with a friend or roommate, and 254 (67.2%) received their monthly income/allowance from their parents, with 216 (57.2%) receiving below 60,000 Naira. Approximately one-third of the population, 135 (35.7%) participants, were in their third year. The respondents primarily used smartphones and mobile applications to access social media for communication (343, 90.7%), education (333, 88.1%), and entertainment (319, 84.4%). Most respondents (370, 97.9%) accessed social media via smartphones, with laptops (29.6%) and tablets (1.1%) being significantly less common. Connecting through mobile apps (372, 98.4%) was the dominant method, far surpassing website (87, 23.0%) or laptop software (64, 16.9%) usage.

Table 1 shows that the sample population was almost evenly split in terms of SM usage frequency: 36.2% (n=137) used social media three days a week, 26.2% (n=99) used it four to five days, and 37.6% (n=142) used it more than five days a week. A notable 70.9% (n=268) of the sample met the criteria for SM problematic use. Over a third of the sample (37.3%, n=141) screened positive for a probable psychiatric disorder. The mean total time spent on social media, as measured by the SONTUS raw score, was 166.3 ± 51.31 .

**Table 1: Frequencies, Percentages, and Means for Measures of Social Media Engagement and Psychiatric distress
N=378**

Variables	Frequency N	Percentage %
SMEQ		
3 days of use	137	36.2
4 – 5 days of use	99	26.2
> 5 days of use	142	37.6
Mean ± SD	20.9 ± 10.3	
Range	0 – 35	
BSMAS		
No problematic use	110	29.1
Problematic use	268	70.9
Mean ± SD	15.7 ± 5.0	
Range	6 – 30	
GHQ-12		
No Probable Psychiatric Distress	237	62.7
Probable Psychiatric Distress	141	37.3
Mean (median)	2.4 (1.0)	
Range	0 – 12	
SONTUS		
Mean ± SD	166.3 ± 51.3	
Range	54 – 313	

SMEQ = Social Media Engagement Questionnaire; BSMAS = Bergen Social Media Addiction Scale; GHQ-12 = General Health Questionnaire-12; SONTUS = Social Networking Time Use Scale. Data are presented as n (%), Mean ± SD as appropriate.

Analysis of socio-demographic factors revealed specific associations with probable psychological distress (Table 2). Probable psychiatric distress was significantly associated with age group ($p = 0.013$): the highest rate was observed in the 20-25 years age group (42.7%, $n = 102/239$), followed by the <20 years age group (31.6%, $n = 30/95$). Rates were lowest in the 26-30 (23.1%, $n = 9/39$) and 31-35 (0.0%, $n=0/5$) groups. Year of study ($p=0.033$) also showed significant associations, with the highest distress rates found among 200-level (44.0%, $n=33/75$) and 300-level (44.4%, $n=59/133$) students. A near-significant trend was observed for income ($p = 0.067$), with the highest income bracket (> ₦60,000) showing a higher rate of probable morbidity (66.7%, $n = 10/15$) than the lower income brackets (~33-43%). No significant associations were found between GHQ-12 scores and gender, ethnicity, or home living situation. A significant relationship was observed between the intensity of social media use and psychological morbidity (Table 2). Usage frequency (SMEQ) showed a significant gradient in distress rates based on the number of days per week participants used

social media ($\chi^2 = 10.117$, $p= 0.006$). The rate of probable morbidity was 27.0% ($n = 37/137$) among those using social media three days a week, increasing to 45.5% ($n=45/99$) for those using it four to five days, and 41.5% ($n=59/142$) for the most frequent users (more than five days a week). Social Media Addiction (BSMAS) was significant ($\chi^2 = 14.091$, $p < 0.001$). Only 22.7% ($n=25/110$) of non-problematic users had probable morbidity, compared to 43.3% ($n=116/268$) of those diagnosed as problematic users.

Financial investment, evident by the amount spent weekly on social media platforms was also significantly associated with probable distress ($\chi^2 = 12.912$, $p = 0.009$), with rates rising from 30.4% (<₦1,000) to 54.0% (₦3,100-₦ 5,000) and 75.0% (>₦10,000).

A significant relationship was evident with time spent on social media and probable psychiatric distress ($\chi^2 = 18.739$, $p < 0.001$), with the more time spent on social media leading to a higher likelihood of probable psychiatric distress.

Table 2: Associations Between the Level of Social Media Usage, Problematic Use, and Probable Psychiatric Morbidity

Variables	No psychiatric morbidity. Morbidity N(%).	GHQ-12 Probable psychiatric N(%)	χ^2	p-value
Age groups			10.281 ^f	0.013
< 20	65 (68.4)	30 (31.6)		
20 – 25	137 (57.3)	102 (42.7)		
26 – 30	30 (76.9)	9 (23.1)		
31 – 35	5 (100.0)	0 (0.0)		
Mean \pm SD	21 \pm 2.76			
Range	16 – 36			
Year study			10.469	0.033
100	59 (67.8)	28 (32.2)		
200	42 (56.0)	33 (44.0)		
300	74 (55.6)	59 (44.4)		
400	44 (75.9)	14 (24.1)		
500	18 (72.0)	7 (28.0)		
SMEQ			10.117	0.006
3 days of use	100 (73.0)	37 (27.0)		
4 – 5 days of use	54 (54.5)	45 (45.5)		
> 5 days of use	83 (58.5)	59 (41.5)		
BSMAS			14.091	< 0.001
Non-problematic	85 (77.3)	25 (22.7)		
Problematic use	12 (56.7)	116 (43.3)		
Allowing social media to send you notifications			0.052	0.875
Yes	207 (62.9)	122 (37.1)		
No	30 (61.2)	19 (38.8)		
Don't know	0 (0.0)	0 (0.0)		
Amount spent weekly using social media platforms (₹)			12.912	0.009
< 1,000	110 (69.6)	48 (30.4)		
1,100 – 3,000	94 (63.5)	54 (36.5)		
3,100 – 5,000	23 (46.0)	27 (54.0)		
5,100 – 10,000	9 (50.0)	9 (50.0)		
> 10,000	1 (25.0)	3 (75.0)		
Range of time spent on social media (Hours)			18.739 ^f	< 0.001
\leq 5	92 (73.6)	33 (26.4)		
6 – 10	92 (64.8)	50 (35.2)		
11 – 15	39 (51.3)	37 (48.7)		
16 – 20	13 (41.9)	18 (58.1)		
\geq 20	1 (25.0)	3 (75.0)		

SMEQ - Social media engagement questionnaire, BSMAS - Bergen social media addiction scale, GHQ-12- General health questionnaire 12

The study found a statistically significant relationship between social media use (SONTUS scores) and psychological well-being (Table 3). The total SONTUS score was significantly higher in the group with probable psychiatric distress (177.51 ± 49.12) compared to those without (159.65 ± 51.52) ($p = 0.001$). The SONTUS score across all five domains of daily living was significantly higher in those

with probable distress (all $p < 0.001$). The most significant differences were observed for stress-related periods (Probably distressed: Mean= 37.61 ± 12.49 ; Not distressed: 30.32 ± 13.85 , $p < 0.001$) and relaxation/free periods (Probably distressed: Mean= 58.12 ± 17.49 ; Not distressed: 50.33 ± 17.87 , $p < 0.001$).

Table 3: Comparison of Social Networking Time Use (SONTUS) And Motives for Use with Probable Psychiatric Distress (GHQ-12) (N=378)

Variables	GHQ-12 (Mean \pm SD)		F/t-test	p-value
	No probable psychiatric distress Mean (SD)	Probable psychiatric distress Mean (SD)		
overall mean SONTUS score	159.65 (51.52)	177.51 (49.12)	10.998	< 0.001
Relaxation and free periods	50.33 \pm 17.87	58.12 \pm 17.49	-3.819	< 0.001
Academic related periods	29.56 \pm 11.70	34.51 \pm 11.83	-3.720	< 0.001
	21.06 \pm 10.07	25.62 \pm 11.04	-3.854	< 0.001
Public places related use				
Stress related periods	30.32 \pm 13.85	37.61 \pm 12.49	-4.889	< 0.001
Motives for use	24.18 \pm 9.73	28.31 \pm 9.74	-3.811	< 0.001

SONTUS - Social Networking Time Use Scale, GHQ-12 - General Health Questionnaire

The multivariate logistic regression analysis showed that only two factors, problematic social media use (BSMAS) and stress-related social media use (SONTUS domain), remained statistically significant independent predictors of probable psychiatric morbidity (Table 4). Participants with problematic social media use on the Bergen Social

Media Addiction Scale (BSMAS) had significantly higher odds of the outcome (AOR = 2.20, 95% CI: 1.289 – 3.766, $p = 0.004$). Furthermore, greater social media use specifically during stressful periods was also associated with increased odds (AOR = 1.044 per unit increase, 95% CI: 1.016 – 1.073, $p = 0.002$).

Table 4: Multivariable Logistic Regression Analysis Identifying Factors Associated with Probable Psychiatric Distress (Predictors of Probable Psychiatric Distress)

Variables	β	p-value	AOR	95 % C I
SMEQ				
3 days of use	RC			
4 – 5 days of use	0.550	0.063	1.733	0.972 – 3.091
> 5 days of use	0.079	0.787	1.083	0.609 – 1.924
BSMAS				
Non-Problematic use	RC			
Problematic use	0.790	0.004	2.203	1.289 – 3.766
Amount spent weekly using social media platforms				
< 1,000	RC			
1,100 – 3,000	0.120	0.638	1.128	0.683 – 1.862
3,100 – 5,000	0.466	0.215	1.593	0.763 – 3.325
5,100 – 10,000	0.352	0.517	1.421	0.490 – 4.124
> 10,000	1.569	0.228	4.803	0.375 – 61.547
Range of time spent on social media (Hours)				
≤ 5	RC			
6 – 10	0.430	0.331	1.538	0.646 – 3.661
11 – 15	-0.277	0.395	0.758	0.401 – 1.435
16 – 20	-0.610	0.083	0.543	0.273 – 1.082
≥ 20	0.920	0.454	2.510	0.226 – 27.839
SONTUS domains				
Relaxation and free periods	-0.019	0.234	0.981	0.951 – 1.012
Academic related periods	0.011	0.519	1.011	0.979 – 1.043
Public places related use	0.027	0.239	1.027	0.982 – 1.075
Stress related periods	0.043	0.002	1.044	1.016 – 1.073
Motives for use	0.003	0.863	1.003	0.966 – 1.042

SMEQ - Social media engagement questionnaire, BMAS - Bergen social media addiction scale, SONTUS - Social Networking Time Use Scale, β + regression coefficient, AOR – Adjusted odds ratio, CI -Confidence interval, RC – Reference category

Discussion

This study provides a nuanced portrait of the interplay between social media use, addiction, and psychological distress among students. The initial analysis reveals a triad of high prevalence, a dose-dependent relationship between use and harm, and a specific behavioural profile that defines the pathway from engagement to addiction and distress.

The high prevalence of addictive social media use (70.9%) and psychological distress (37.3%) among Nigerian university students aligns with previous studies supporting significant mental health burdens linked to social media engagement [2,3]. The notably higher addiction rate than found for many global averages, indicates a possible population-specific vulnerability or a reflection of increasing social media usage [19]. However, the rate in this study is comparable to that observed in another Nigerian student population, which reported a prevalence of 84.95% [20]. The nearly even distribution across social media usage rates implies widespread engagement patterns, consistent with findings from other Nigerian universities, which show pervasive social media activity [4]. The socio-demographic findings in this study point to increased academic and developmental pressures (20-25 years old, 200/300-level study) as potential risk factors for distress, coinciding with a period of intense academic pressure, identity formation, and social transition within the university environment [8].

The alarming rate (66.7%) in the highest income group warrants further investigation into the pressures associated with higher socioeconomic status. This finding challenges the assumption that higher socioeconomic status is protective; instead it suggests that unique pressures, such as heightened academic expectations and greater financial means for excessive data consumption, may enable addictive behaviour.

The dose-dependent relationship between social media use intensity and psychological distress further suggests that increased exposure is associated with elevated anxiety, depression, and stress levels [9,13,21]. The jump in distress rates from 27.0% (3-day users) to 45.5% (4-5 day users) suggests that transitioning from occasional use to a near-daily habit is a critical tipping point.

The strongest predictor was SM addiction status, which showed that students with problematic use were nearly twice as likely to experience distress, mirroring findings from Nigerian students that identified

addiction as a key risk factor for mental health issues [2,22]. The problematic SM use, not merely the time spent, establishes a strong link to poor mental health. Incremental rises in distress rates with increased hours spent and financial investment corroborate the addictive characteristics of social media as a behavioural addiction [7]. This offers a quantitative basis for risk stratification, with higher financial expenditure among distressed users further highlighting the tangible resource investment in this harmful behaviour [23].

The most salient contribution of this study is the identification of specific behavioural contexts underpinning this relationship. The robust triad connecting high frequency of use to addiction and then psychological distress is a core finding. This aligns with a substantial body of research linking problematic social media use to adverse mental health outcomes, including anxiety, depression, and loneliness [11-13].

This association shows that problematic use, characterised by a loss of control, predicts distress more than frequency of use alone. This pathway is quantified by the significantly higher time investment (SONTUS score) in the distressed group. Distressed and addicted people used social media, differently and more compensatorily according to the SONTUS domain analysis. Distressed individuals had higher scores in domains focused on stress-related and relaxation periods, suggesting that these times are crucial for maladaptive social media use as a coping mechanism [24]. Seeking instant relief from negative affect, they passively scroll or tick instead of using adaptive coping strategies [13]. This finding aligns with research highlighting the role of social media as an emotion-regulation tool that may paradoxically increase distress [3]. The passive consumption and social comparison inherent in social media use can exacerbate feelings of anxiety, inadequacy, and loneliness, creating a vicious cycle where an individual feel stressed, turns to social media for relief, only to find that it worsens their feelings [11,12].

Interestingly, no significant associations were found between the device used or its primary purpose, indicating that it is the pattern and intensity of use, rather than the device or its intended use, that primarily drives psychological outcomes. This aligns with previous studies emphasising usage behaviours over sheer access modes in contributing to mental health risks [4].

The multivariate regression analysis provides clearer insight, demonstrating that the main predictor of probable psychiatric morbidity is a pattern aligned with behavioural addiction rather than simply the amount of time spent on social media [25]. Individuals classified as addicted were more than twice as likely to have poorer psychological well-being. This shows a crucial difference: high engagement is common, but the compulsive and addictive use that comes with losing control and withdrawal is what is most closely associated with psychological distress.

Social media use during stressful periods suggests that its use is specifically as a stress-coping tool, which may worsen psychological health. This also suggests that many students might be using social media in maladaptive ways, possibly hindering the development of effective coping strategies and worsening their underlying distress. The lack of significance in monetary spending supports the idea that psychological investment, rather than financial expenditure, primarily impacts mental health.

The limitations of this study include its cross-sectional design, reliance on self-reported measures, which may introduce some biases, focus on a single university, which affects generalizability and important confounders like pre-existing mental distress and personality traits were not controlled for.

There is a need for longitudinal studies to understand temporal relationships and for qualitative research to explore students' experiences with social media for stress relief. Additionally, we found that the type of device and usage purpose are less relevant than the pattern and intensity of use. Future research should investigate markers of psychological and behavioural addiction more comprehensively.

Conclusion

The study found that increased social media use as a maladaptive coping strategy during stress or boredom was associated with problematic use among University of Ilorin undergraduates. This creates a cycle, where using social media to cope leads to or worsens their psychological distress. Addressing this modern public health challenge requires targeted interventions that promote healthier coping mechanisms and digital habits. The university administration and health services need to develop and implement targeted mental health screening and support services, integrate digital literacy and healthy social media usage

campaigns into orientation and wellness programs, and promote awareness about the signs of social media addiction and its impact on mental well-being.

Conflict of Interest

Authors declare no conflict of interest.

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