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Student ID: 2505019

Name: chanelle hay

Discuss the impact of social media on mental health in adolescence

Introduction

Adolescence, typically spanning from approximately 10 to 19 years of age, represents a critical transitional stage characterised by profound biological, cognitive, emotional and social change. It is a period where young people begin to form independent identities, seek acceptance from peers, and navigate increasingly complex social relationships. In recent years, social media has become an integral part of adolescent life, offering new opportunities for connection yet also raising widespread concerns regarding psychological wellbeing. Research consistently highlights both positive and negative outcomes associated with social media use, with impacts varying according to usage patterns, individual characteristics, and the quality of interactions experienced. This essay will explore how social media influences mental health during adolescence, drawing upon Erikson's Theory of Psychosocial Development and Social Comparison Theory to explain the mechanisms through which effects occur. It will further evaluate the relevance of these theories, consider biological and environmental influences, and identify practical implications for health and social care practice.

Main Body

Adolescents are now the most active demographic group across social media platforms. Studies indicate that the vast majority maintain a regular online presence, and many spend several hours each day engaging with digital content. This level of exposure has been linked to a wide range of mental health outcomes, and it is important to acknowledge that these are not universally negative. On one hand, social media can strengthen existing friendships, provide access to supportive communities, and allow young people to express their identity and creativity. Such benefits are particularly important for marginalised young people who may feel isolated or excluded in their offline environments. For these individuals, online spaces can offer a sense of belonging that is difficult to find elsewhere. On the other hand, a growing body of evidence associates excessive or problematic usage with increased risk of anxiety, depression, low self-esteem, body image dissatisfaction, poor sleep quality, and persistent feelings of social exclusion. These negative effects are frequently attributed to several key factors: exposure to carefully selected and idealised imagery, the experience of cyberbullying, the pressure to gain approval through visible metrics such as likes and comments, and the common tendency to compare one's own everyday life unfavourably with the polished and positive representations shared by others online.

Erik Erikson's Theory of Psychosocial Development provides a highly relevant framework for understanding these dynamics, because it identifies adolescence as the stage of Identity versus Role Confusion. According to Erikson, the primary developmental task during this period is to establish a coherent sense of self, work out personal values and beliefs, and define one's place within the wider world. Peers are central to this process. They act as a

kind of mirror through which adolescents evaluate their own worth and gradually piece together who they are. Social media fundamentally changes this social landscape. It expands the scope of peer influence far beyond the immediate school or neighbourhood, bringing opinions and standards from across the globe into the daily lives of young people. At the same time, it makes social feedback far more visible, quantifiable, and permanent. From an Eriksonian perspective, social media can support healthy development. It provides space to explore different interests, share opinions, and receive validation that helps build a positive sense of identity. However, difficulties arise when that validation becomes conditional — when acceptance appears to depend on being popular, looking a certain way, or fitting in with current trends. In such situations, young people may find it hard to develop an authentic sense of who they really are. The constant pressure to present an idealised version of one's life can deepen uncertainty and confusion, contributing to diminished self-worth and emotional distress. These outcomes correspond directly to the negative mental health patterns seen in research. While adolescence is naturally a time of exploration and uncertainty, Erikson's work suggests that consistent, supportive feedback builds resilience, whereas inconsistent, superficial or judgemental online interactions can undermine healthy development and leave young people feeling unsure of their place in the world.

A second perspective, Festinger's Social Comparison Theory, helps explain why social media so often leads to poor mental health outcomes. The theory proposes that people have an innate drive to evaluate their own abilities, opinions and circumstances by comparing themselves with others. Comparisons tend to fall into two directions. Upward comparison means measuring oneself against those who appear better off, and this typically leads to feelings of inadequacy, envy and lowered self-esteem. Downward comparison — comparing oneself with those who seem less fortunate — may temporarily improve how one feels, but this is rarely the dominant pattern on social media. The problem is that social media creates an environment heavily weighted towards upward comparison. Users tend to share only their most positive, successful and attractive moments. They rarely post about their struggles, failures, or ordinary days. Adolescents, whose sense of self is still developing, are particularly vulnerable to this imbalance. They often take these curated representations at face value, believing that everyone else is happier, more successful, and better looking than they are. When a young person compares their own messy, real life with the polished highlights of others, it is almost inevitable they will feel they fall short. Research strongly supports this mechanism. Studies consistently show that greater exposure to idealised images, especially relating to physical appearance, is linked to poorer body image and worse mental health, particularly among girls. Unlike face-to-face interaction, where people see a balanced mix of strengths and weaknesses, social media distorts the very standards against which adolescents judge themselves, making unfavourable comparisons difficult to avoid.

Taken together, these two theories illustrate clearly how biological and environmental factors interact to shape adolescent mental health. Biologically, the adolescent brain undergoes significant structural and functional change. This is especially true in the areas responsible for processing emotions, responding to rewards, controlling impulses, and understanding social situations. Because these systems are still developing, young people are naturally

more sensitive to social approval and more deeply affected by rejection or criticism. This biological reality means that the same online experiences can have a much stronger impact on an adolescent than they would on an adult. Environmental factors — including family relationships, peer culture, the design of social media platforms, and how much time is spent online — determine whether this sensitivity becomes a strength or a risk. Where online environments are supportive, inclusive and balanced, social media can strengthen social bonds and support healthy identity growth. Where environments are hostile, competitive, or demanding, those same developmental vulnerabilities increase the risk of anxiety, depression and low self-worth. It is the combination of these internal changes and the external digital environment that explains why some young people thrive online while others struggle significantly.

Both theories offer valuable insight, but they also have clear limitations. Erikson's broad model provides a helpful understanding of what adolescents are trying to achieve socially, yet it does not fully explain individual differences, cultural influences, or the specific design features of apps that can amplify harm. Social Comparison Theory offers a convincing explanation for feelings of inadequacy, but it is less able to account for differences in resilience — why some young people remain largely unaffected even when exposed to the same content. Neither theory was written with the digital age in mind, and both were developed before social media became a daily part of life. Even so, they remain highly useful in health and social care because they identify predictable psychological processes. If professionals understand how identity formation works and how social comparison distorts judgement, they can support young people more effectively. The theories show that mental health impacts are not random; they follow

understandable patterns that can be addressed through education, guidance and support.

Conclusion

In conclusion, social media has a profound and complex influence on adolescent mental health. Its effects are neither entirely good nor entirely bad, but depend heavily on how it is used, the nature of the content encountered, and the developmental stage of the young person. Erikson's theory shows clearly how social media changes the process of identity formation. When used thoughtfully, it can help young people explore who they are and find connection. When it becomes a source of judgement, competition or pressure, it can deepen uncertainty and erode self-worth. Social Comparison Theory explains further why this happens: because online content is selectively positive, it creates unrealistic standards that make almost anyone feel inadequate by comparison. Together, these perspectives show that adolescents are not simply helpless victims of technology. They are navigating a social environment that is uniquely mismatched to their developmental needs — one that rewards exactly the kind of approval-seeking and comparison that naturally unsettles young people. For health and social care practice, the implications are clear. Professionals should help young people recognise the difference between curated online content and real life, encourage critical awareness of how comparisons work, support healthy boundaries around usage, and foster resilience so that self-worth is rooted in personal values rather than digital approval. By applying these psychological understandings, support can be better targeted to help young people enjoy the benefits of connection while protecting their mental health.

Reference List

1. Erikson, E.H. (1968) *Identity: Youth and Crisis*. London: Faber and Faber.
2. Festinger, L. (1954) 'A theory of social comparison processes', *Human Relations*, 7(2), pp. 117–140.
3. Royal Society for Public Health (2017) *Status of Mind: Social Media and Young People's Mental Health and Wellbeing*. London: RSPH.
4. Twenge, J.M. and Campbell, W.K. (2018) 'Associations between screen time and lower psychological well-being among children and adolescents: evidence from a population-based study', *Preventive Medicine*, 114, pp. 47–53.
5. Fardouly, J. and Vartanian, L.R. (2016) 'Social media and body image concerns: current research and future directions', *Current Opinion in Psychology*, 9, pp. 1–5.
6. Odgers, C.L. and Jensen, M.R. (2020) 'Annual research review: adolescent mental health in the digital age: facts, fears, and future directions', *Journal of Child Psychology and Psychiatry*, 61(3), pp. 336–347.
7. Booker, C.L., Kelly, Y. and Sacker, A. (2018) 'Gender differences in the associations between social media use and mental health in early adolescence', *Journal of Adolescent Health*, 63(4), pp. 466–473.