

Social Media Addiction As an Emerging Public Health Concern Among Youth in South Africa: A Focused Review Mapping Synthesis

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Abstract

Social media has become embedded in the daily lives of South African youth, shaping communication, identity formation, learning, leisure, political participation, and access to social support. At the same time, excessive and poorly regulated use has raised public health concerns because problematic social media use is associated with depression, anxiety, stress, loneliness, sleep disturbance, social comparison, cyberbullying, and relational strain. This article reframes social media addiction, more cautiously conceptualised as problematic social media use, as an emerging public health concern among youth in South Africa. Drawing on a qualitative desktop design and a focused review-mapping synthesis, the article integrates evidence from public health, psychology, social work, communication studies, and South African youth research. The synthesis shows that problematic social media use cannot be sufficiently explained as an individual failure of discipline. Rather, it is produced through the interaction of youth developmental vulnerability, persuasive platform design, attention-based digital business models, family and peer dynamics, psychosocial stressors, unequal access to offline recreational spaces, and broader social determinants such as poverty, unemployment, and digital inequality. The article argues for a multi-level prevention approach that combines digital literacy, family and school-based support, youth mental health services, community alternatives, platform accountability, and policy attention to commercial digital environments. The South African context requires interventions that are developmentally appropriate, culturally responsive, equity-oriented, and grounded in youth participation.

Keywords: social media addiction; problematic social media use; youth; South Africa; public health; mental health; social determinants; digital well-being.

1. Introduction

Social media has transformed the social ecology of youth life. Platforms such as WhatsApp, Facebook, TikTok, Instagram, YouTube and X are no longer peripheral communication tools; they are now embedded in friendship formation, family contact, learning, entertainment, consumer culture, political expression, peer recognition and the construction of identity (Valkenburg, Meier, & Beyens, 2022). For many young people, social media is also a site of belonging and visibility, especially where offline spaces are constrained by poverty, unsafe neighborhoods, transport costs, unemployment, or limited recreational infrastructure. This means that any discussion of social media among youth must avoid a one-sided moral panic. Social media may facilitate connection, creativity, information-seeking, and civic participation. However, the same platforms may also expose youth to compulsive use, social comparison, cyberbullying, misinformation, body image pressures, sexualised content, online harassment, and sleep disruption (Kuss & Griffiths, 2017; Odgers & Jensen, 2020; Valkenburg et al., 2022).

In South Africa, the public health importance of social media is intensified by demographic and digital realities. DataReportal (2025) estimates that South Africa had 50.8 million internet users at the start of 2025, representing 78.9% internet penetration, and 26.7 million social media user identities, equivalent to 41.5% of the population. The same report indicates that the country had 124 million cellular mobile connections, while TikTok advertising tools reported a potential adult reach of 23.4 million users aged 18 and above. These figures should be interpreted cautiously because advertising reach does not represent verified unique users; nevertheless, they demonstrate the scale and normalisation of digital connectivity in South African society. In a country where the median age was estimated at 28.7 years in early 2025, digital media is particularly relevant to youth development, psychosocial well-being, and public health planning (DataReportal, 2025).

The title of this article uses the term social media addiction because it is widely used in public discourse and in a significant body of behavioural addiction literature. However, the term requires conceptual caution. Problematic social media use (PSMU) is not uniformly recognised as a formal psychiatric disorder, and excessive time online does not automatically mean addiction. A more rigorous understanding focuses on patterns of use that are compulsive, difficult to control, psychologically distressing, and associated with functional impairment in sleep, study, work, relationships, emotional regulation, or everyday responsibilities (Andreassen, 2015; Griffiths, 2005; Shannon, Bush, Villeneuve, Hellemans, 2022). This distinction is important because youth may spend long hours online for education, work-seeking, social support or activism without necessarily experiencing addiction-like impairment.

The South African context also requires a shift from individualised explanations to ecological and public health analysis. When problematic social media use is explained only as poor self-control, the broader determinants of digital harm remain under-examined. Platform architecture, algorithmic recommendation systems, persuasive design, targeted advertising, social inequality, psychosocial stress, family communication patterns, and youth unemployment all shape the likelihood of harmful digital engagement (Montag, Wegmann, Sariyska, Demetrovics, & Brand, 2019; Zuboff, 2019). Youth in low-resource settings may be particularly vulnerable where social media becomes the most accessible form of entertainment, social recognition and escape, while access to mental health services, safe recreation and supportive adult supervision remains uneven.

This article therefore examines social media addiction as an emerging public health concern among youth in South Africa. Its contribution is threefold. First, it refines the conceptual language by distinguishing social media addiction from problematic social media use. Second, it situates problematic social media use within the South African youth context rather than presenting it as a universal, context-free phenomenon. Third, it applies an ecological public health framework to show how individual, relational, institutional, community, commercial and policy-level factors interact to shape youth vulnerability and resilience.

The central research question guiding the review is: How can social media addiction, understood as problematic social media use, be conceptualised as an emerging public health concern among youth in South Africa? The specific objectives are to: (1) examine how digital platforms function as social environments that shape youth psychosocial well-being; (2) identify key pathways through which problematic social media use affects mental health, relationships and youth development; (3) analyse how South African social determinants influence digital vulnerability; and (4) propose implications for public health practice, social work, youth services and policy.

2. Conceptual and Theoretical Framework

Problematic social media use refers to a pattern of excessive, compulsive, or poorly regulated engagement with social networking platforms that produces distress or impairment. It is not reducible to screen time alone. The literature suggests that risk is influenced by how, why, when, and under what psychosocial conditions platforms are used. Night-time use, passive scrolling, social comparison, feedback-seeking, fear of missing out, cyberbullying, low self-esteem, and psychological distress may be more relevant than duration of use alone (Lopes et al., 2022; Scott & Woods, 2019; Valkenburg et al., 2022). This is especially important for youth because adolescence and young adulthood are periods of identity development, peer sensitivity, social belonging, and emotional regulation.

The concept also needs to account for social media's dual role. On the one hand, social media can strengthen peer support, identity exploration, help-seeking, and access to information. On the other hand, it can intensify comparison, expose youth to harmful content, disrupt sleep, amplify body image pressure, enable online harassment, and produce compulsive checking behaviors. Senekal, Groenewald, Wolfaardt, Jansen, and Williams (2023) argue that social media has a complex relationship with adolescent psychosocial development, combining risks such as comparison, cyberbullying, and problematic use with potential benefits such as identity development and peer connection. A balanced public health approach should therefore aim to reduce harm and strengthen digital well-being rather than simply demonize technology. In the South African youth context, problematic social media use intersects with wider structural conditions. Youth unemployment, poverty, inequality, violence, educational stress, community insecurity, and uneven mental health service access shape the social conditions in which digital platforms are used. For some youth, social media provides connection, opportunity, and self-expression; for others, it may become a compensatory space for unmet emotional, social, or economic needs. The concern is not that South African youth are online, but that some are exposed to digital environments that may intensify psychosocial vulnerability without adequate support systems.

This article uses ecological systems theory, social determinants of health, and commercial determinants of health as a combined interpretive framework. Bronfenbrenner's ecological systems theory explains how youth development is shaped by interactions between the individual and multiple environmental systems, including family, peers, schools, communities, and broader cultural structures (Bronfenbrenner, 1979). The social determinants of health perspective adds that health and mental health are shaped by social and economic conditions rather than by individual behaviour alone (Marmot, Friel, Bell, Houweling, & Taylor, 2008; WHO, 2014). The commercial determinants perspective further highlights how corporate practices, market incentives, advertising, and platform design can influence population health (Kickbusch, Allen, & Franz, 2016). Together, these perspectives support the argument that problematic social media use among youth is a multi-level public health issue.

3. Materials and Methods

This article is based on a qualitative desktop research design using a focused review mapping synthesis. Focused review mapping synthesis is suitable where a topic is multidisciplinary, conceptually complex and still developing across different fields (Bradbury-Jones et al., 2019; Grant & Booth, 2009). The method was selected because social media addiction is discussed across behavioural addiction research, adolescent psychology, public health, social work, digital sociology, communication studies and youth development literature. The intention was not to calculate pooled effect sizes or claim systematic review comprehensiveness, but to map the main conceptual, empirical and policy-relevant patterns in the literature.

The review focused on literature addressing social media addiction, problematic social media use, youth mental health, digital well-being, platform design, public health, social determinants of health and South African youth. Searches were conducted across Google Scholar, PubMed, Scopus-indexed literature where accessible, Web of Science-indexed literature where accessible, and targeted searches of policy and statistical sources. Search terms included combinations of: social media addiction, problematic social media use, youth, adolescents, young adults, South Africa, mental health, depression, anxiety, sleep, fear of missing out, social comparison, cyberbullying, ecological systems theory, public health, digital well-being and social determinants of health.

Sources were included where they addressed at least one of the following: (1) conceptualisation of problematic social media use or behavioural addiction; (2) empirical associations between social media use and youth mental health; (3) South African or sub-Saharan African evidence on youth, digital media and mental health; (4) public health or ecological frameworks for understanding digital harm; and (5) policy or practice implications. Priority was given to peer-reviewed journal articles, systematic reviews, meta-analyses, South African empirical studies and credible statistical or policy sources. Sources were excluded where they were purely opinion-based, lacked relevance to youth or mental health, or did not contribute to the public health framing of the article.

The synthesis was conducted in three stages. First, relevant sources were read and organised according to conceptual focus, population, context and key findings. Second, recurring themes were identified across the literature, including platform design, psychosocial vulnerability, relational and family effects, social determinants, and policy responses. Third, these themes were interpreted through the ecological public health framework. This approach allowed the review to examine social media addiction not as an isolated individual problem but as a pattern shaped by interaction between youth development, digital environments and broader South African social conditions. As a desktop review, the study did not involve human participants, primary data collection or direct interviews. Ethical clearance was therefore not required. Nevertheless, the review was guided by ethical principles of scholarly integrity, balanced interpretation and avoidance of deterministic claims. A limitation of the review is that South African empirical research on problematic social media use remains relatively limited compared with Global North literature. For this reason, the article uses international evidence cautiously and interprets it in relation to the South African context rather than assuming direct transferability.

Table 1. Summary of the focused review mapping synthesis procedure.

Component	Application in this article
Review purpose	To map and synthesise literature on problematic social media use as a public health issue among youth in South Africa.
Sources	Peer-reviewed articles, systematic reviews, meta-analyses, South African empirical studies, public health literature, and credible statistical sources.
Search focus	Problematic social media use, social media addiction, youth mental health, South Africa, digital well-being, ecological theory and public health.
Analytical lens	Ecological systems theory, social determinants of health and commercial determinants of health.
Synthesis output	Six thematic findings and public health implications for South African youth services, social work and policy.

4. Results

The focused review mapping synthesis generated six interconnected themes. These themes show that problematic social media use among South African youth is best understood as a multi-level phenomenon shaped by platform design, psychosocial needs, family and peer systems, unequal social conditions and emerging policy gaps.

Table 3. Themes generated from the focused review mapping synthesis.

Theme	Central issue	Indicative public health response
Normalised social media use	Social media is embedded in youth communication, learning, identity, and belonging.	Promote digital well-being without demonising technology.
Persuasive platform design	Engagement features encourage repeated checking and extended use.	Address platform accountability and design-level prevention.
Psychosocial pathways	Social comparison, sleep disruption, and cyberbullying affect well-being.	Integrate digital issues into youth mental health support.
Family and relational effects	Technoference and online conflict shape peer and family relationships.	Support caregivers, families, and peer-based interventions.
Unequal digital vulnerability	Social determinants shape who is most exposed to harm and least supported.	Use equity-oriented and community-based public health strategies.
Policy response gaps	Responses remain too individualized and insufficiently systemic.	Build research, surveillance, school policy, and multi-sector responses.

4.1. Social Media as a Normalised Youth Environment

A central finding is that social media has become normalised as an everyday youth environment. For many South African youth, being offline may mean exclusion from peer communication, entertainment, study groups, social identity, job-seeking information, activism and popular culture. This normalisation makes harmful use difficult to identify because constant availability, rapid response, visibility and emotional investment are treated as ordinary features of social life.

The normalisation of social media is reinforced by the mobile-first character of digital access in South Africa. The scale of mobile connections and the growth of internet penetration show that digital engagement is no longer limited to privileged groups, even though quality of access remains unequal (DataReportal, 2025). In public health terms, this means that social media should be treated as an environmental exposure: youth are not merely choosing isolated behaviours, but are participating in digital spaces that structure attention, social comparison and peer recognition.

The public health concern arises when ordinary engagement becomes difficult to regulate and begins to interfere with functioning. Excessive checking, inability to disengage, night-time scrolling, emotional dependence on likes or comments, and distress when disconnected may indicate problematic use. The South African study by De Doncker and McLean (2022) on youth in Cape Town linked social media use with sleep difficulties and depressive symptoms, illustrating that the issue is not only global but locally relevant. Similarly, Lukose et al. (2023) found that young people in Buffalo City reported extensive daily social media use, with fear of missing out emerging as a key reason for prolonged engagement.

4.2. Persuasive Platform Design and the Attention Economy

The second theme concerns platform design. Social media platforms are not neutral containers of communication; they are engineered environments. Features such as infinite scrolling, push notifications, algorithmic recommendation, personalised feeds, autoplay, streaks, likes, shares and intermittent rewards are designed to extend engagement and increase return visits. These design features can make disengagement difficult, especially for youth whose developmental stage is marked by heightened sensitivity to peer approval and social reward (Montag et al., 2019; Zuboff, 2019).

This does not mean that all youth are passive victims of technology. Rather, it means that individual self-regulation occurs within a commercially designed environment that competes for attention. Shannon et al. (2025) argue that problematic social media use should be considered within public health and policy frameworks because platform-level mechanisms are relevant to prevention, surveillance and health promotion. The attention economy therefore shifts responsibility from the individual alone to a shared field involving users, families, schools, youth services, regulators and technology companies. In South Africa, this perspective is important because youth may rely heavily on relatively low-cost mobile social media for entertainment, social support and information. Where safe recreational facilities, youth centres, sport opportunities and accessible mental health services are limited, digital platforms may become default spaces for coping with boredom, stress

and social isolation. The risk is that coping through online engagement may gradually become compulsive when platforms continuously reward attention and intensify emotional investment.

4.3. Psychosocial Pathways: Mental Health, Sleep, Social Comparison and Fear of Missing Out

The third theme relates to psychosocial pathways through which problematic social media use may affect youth well-being. The evidence base does not support simplistic claims that all social media use causes mental illness. Rather, the relationship is complex, bidirectional and moderated by existing vulnerability, type of use, social context and developmental stage (Odgers & Jensen, 2020; Orben, 2020; Valkenburg et al., 2022). However, meta-analytic evidence indicates that problematic social media use is consistently associated with higher levels of depression, anxiety and stress among adolescents and young adults (Huang, 2022; Shannon et al., 2022).

Several mechanisms appear relevant. Social comparison may intensify feelings of inadequacy where youth compare their lives with curated images of beauty, wealth, success, romance or lifestyle. Fear of missing out may produce compulsive checking and difficulty disengaging. Cyberbullying and online humiliation may damage self-esteem and increase distress. Night-time use may reduce sleep duration and quality, which in turn affects emotional regulation, concentration and academic functioning (Scott & Woods, 2019). These pathways are especially significant in adolescence and young adulthood because peer acceptance and identity formation are central developmental tasks. For South African youth, these psychosocial pathways intersect with contextual stressors. Youth who already face unemployment, financial insecurity, family conflict, academic pressure or community violence may use social media as a source of relief and belonging. Yet the same environment can intensify distress by exposing them to comparison, unrealistic success narratives, online scams, harassment or social exclusion. This creates a paradox: the platform may function as both a coping space and a risk environment.

4.4. Family, Peer and Relational Consequences

The fourth theme concerns relational and family consequences. Problematic social media use can reduce face-to-face interaction, interrupt family routines, produce conflict over device use, and weaken emotional presence. The literature on technofence shows that digital devices may intrude into interpersonal relationships and reduce perceived responsiveness (McDaniel & Coyne, 2016; Roberts & David, 2016). In family systems, parental or youth overuse can disrupt communication, supervision and emotional availability (Kildare & Middlemiss, 2017; Radesky et al., 2014). Among youth, peer relationships are particularly important. Social media can strengthen friendship maintenance, but it can also extend peer pressure beyond physical spaces. Conflict, exclusion, gossip, body shaming and romantic jealousy may continue after school or university hours through messaging platforms and public posts. This continuity can make it difficult for youth to find psychological distance from peer tensions. Where young people depend on social media for belonging, they may remain engaged even when platforms produce distress.

From a social work and public health perspective, these relational effects matter because youth mental health is closely linked to social support. Thoits (2011) argues that social ties are protective for mental health. When social media weakens supportive relationships or replaces meaningful interaction with performative engagement, the quality of support may decline. Conversely, when families, peers and communities promote balanced digital routines, constructive supervision and open conversations, they may buffer the risks of problematic use.

4.5. Social Determinants and Unequal Digital Vulnerability

The fifth theme is unequal digital vulnerability. Social media addiction should not be understood as affecting all youth in the same way. The public health risk is shaped by socio-economic status, gender, age, education, disability, rural-urban location, family stability, mental health history and access to offline alternatives. Youth who have supportive families, safe recreational spaces, affordable transport, quality schooling and accessible counselling may have more resources for balanced digital participation. Youth who lack these supports may be more likely to use social media as a primary site of escape, validation or belonging.

The social determinants of health perspective is useful here because it directs attention to the conditions in which people are born, grow, learn, work and socialise (Marmot et al., 2008; WHO, 2014). In South Africa, inequalities in income, education, space, safety and mental health services shape how youth engage with digital environments. Data costs and device quality also matter. Some youth may have access to social media through mobile data while lacking stable access to educational resources, private study space or professional psychosocial support. The problem is therefore not merely being online, but being online in unequal and under-supported conditions. Gendered vulnerability also deserves attention. Young women may face body surveillance, sexual harassment, image-based abuse and comparison pressures, while young men may encounter online cultures that normalise aggression, risk-taking or emotional suppression. LGBTQ+ youth may find online communities that provide belonging, but may also face harassment, outing or targeted abuse. A public health response must therefore be intersectional and attentive to different forms of digital harm.

4.6 Public Health and Policy Response Gaps

The sixth theme concerns gaps in the public health and policy response to problematic social media use among youth. Much of the current response remains individualised, often focusing on self-control, screen-time reduction, parental monitoring and personal responsibility. Although these strategies are useful, they are insufficient when applied in isolation because problematic social media use is shaped by developmental, relational, institutional, commercial and policy environments (Bronfenbrenner, 1979; Odgers & Jensen, 2020; Valkenburg, Meier, & Beyens, 2022). A public health approach therefore requires a broader prevention-oriented framework that includes early identification, harm reduction, surveillance, youth participation, platform accountability and accessible psychosocial support services (WHO, 2022; Shannon et al., 2025). This is particularly important because recent policy literature argues that youth digital safety cannot be addressed only by teaching young people to manage their own behaviour; it also requires attention to platform design, transparency, accountability and safety-by-design principles (Chhabra et al., 2025).

Schools, universities, social workers, health practitioners, youth organisations and families require guidance that moves beyond fear-based messaging. Young people need practical digital well-being education that addresses sleep, privacy, social comparison, misinformation, online harassment, consent, body image, cyberbullying, help-seeking and emotional regulation. This is consistent with research showing that problematic social media use among adolescents and young adults is associated with depression, anxiety, stress, sleep difficulties, loneliness and reduced psychosocial well-being (Huang, 2020; Shannon et al., 2021; De Doncker & McLean, 2022). South African scholarship also emphasises that social media plays a complex role in adolescent psychosocial development: it can support identity formation and peer connection, but it may also expose youth to excessive comparison, cyberbullying and problematic use, especially where protective family and peer support are weak (Senekal et al., 2022). Consequently, digital well-being education should not simply warn youth against social media use; it should equip them with skills to recognise harmful patterns, manage online pressures, seek help and use digital platforms in ways that support rather than undermine mental health.

Parents and caregivers also need support, particularly in households where adults may feel less digitally literate than young people. Parental involvement remains important, but it should not be reduced to surveillance or punishment. Rather, family-based digital guidance should promote communication, co-learning, emotional support and negotiated boundaries around device use (Kildare & Middlemiss, 2017; Coyne et al., 2020; Senekal et al., 2022). This is important because young people's online behaviour is often embedded in family routines, household stress, school demands, peer cultures and broader community conditions. Public health communication should therefore be relational and community-based rather than punitive. Such an approach is more consistent with ecological and social determinants of health perspectives, which recognise that behaviour is shaped by social environments, available resources and structural conditions, not only by individual choice (Marmot et al., 2008; Sallis, Owen, & Fisher, 2015).

At the policy level, the South African response could include age-appropriate digital mental health promotion, the integration of digital well-being into school Life Orientation curricula, and the strengthening of university student support services to include screening and psychoeducation on problematic social media use. Policy responses could also include routine research surveillance on youth digital behaviour, stronger referral pathways for youth experiencing cyberbullying or online exploitation, and closer engagement with platform companies regarding design features that affect youth well-being. International policy reviews increasingly recommend multi-pronged strategies that combine government regulation, industry accountability, platform transparency, safety-by-design principles, collaboration with youth mental health experts, and ongoing evaluation of policy interventions (Chhabra et al., 2025; Shannon et al., 2025). These recommendations are relevant for South Africa, provided they are adapted to local realities such as inequality, high data costs, uneven access to mental health services, rural–urban differences, and youth unemployment.

Such interventions should avoid excluding young people from beneficial digital spaces. Social media can support learning, peer connection, creativity, activism, entrepreneurship, job-seeking, and access to health information. The aim should therefore not be to remove youth from digital environments, but to create healthier digital ecosystems and strengthen offline protective systems. In this regard, an effective public health response should balance digital literacy, family support, school-based prevention, youth participation, mental health services, community recreation, and platform-level responsibility. This balanced approach recognizes that youth digital well-being depends not only on what young people do online, but also on the quality of the social, economic, educational, and technological environments in which they live.

5. Discussion

The findings support the argument that social media addiction among South African youth should be analysed more carefully as problematic social media use situated within a broader public health ecology. Although the term “addiction” communicates the seriousness of compulsive and harmful digital engagement, current scholarship cautions that problematic social media use is not yet uniformly recognized as a formal diagnostic category and should therefore be discussed with conceptual precision (Kuss & Griffiths, 2017; Shannon et al., 2025). The phenomenon cannot be adequately

explained through individual pathology alone. Rather, youth digital behavior is shaped by developmental needs, family systems, peer cultures, school and university environments, community conditions, commercial platform design, and broader policy contexts (Bronfenbrenner, 1979; Odgers & Jensen, 2020; Valkenburg, Meier, & Beyens, 2022). This ecological framing is particularly useful because it explains why the same social media platform may produce different outcomes among different youth, depending on their psychological resilience, social support, family relationships, economic conditions, and access to meaningful offline opportunities.

At the microsystem level, problematic social media use is linked to young people's mental health, self-esteem, sleep patterns, emotional regulation, and peer relationships. Evidence from systematic reviews and meta-analyses shows consistent associations between problematic social media use and symptoms of depression, anxiety, stress, loneliness, and reduced well-being among adolescents and young adults (Huang, 2020; Shannon et al., 2021). South African studies similarly suggest that excessive social media engagement among youth is associated with sleep difficulties, depressive symptoms, fear of missing out, and psychological distress (De Doncker & McLean, 2022; Lukose et al., 2023). At the mesosystem level, the interaction between home, school, peers and online communities influences how young people interpret and manage digital experiences. For example, family communication, parental monitoring, peer validation, and school-based digital literacy may either buffer or intensify the risks associated with social media use (Senekal et al., 2022; Valkenburg et al., 2022). At the exosystem level, parental work stress, school resources, community safety, youth services, media systems and access to recreational alternatives indirectly shape digital vulnerability. Where youth lack safe public spaces, supportive services, or affordable recreational opportunities, social media may become the dominant space for identity expression, a sense of belonging, and emotional escape (Marmot et al., 2008; Odgers & Jensen, 2020).

At the macrosystem level, problematic social media use must be interpreted in relation to inequality, consumer culture, gender norms, youth unemployment, digital capitalism and platform commercialisation. Social media platforms are not neutral spaces; they are shaped by attention-based business models that reward prolonged engagement, visibility, comparison and constant interaction (Montag et al., 2019; Zuboff, 2019). These commercial determinants of digital behaviour raise public health concerns because they shift the issue from personal discipline to the design of environments that actively encourage repeated and prolonged use (Hastings, 2019; Shannon et al., 2025). At the chronosystem level, technological acceleration, the COVID-19 legacy of increased online dependence, and rapidly changing youth cultures have intensified the centrality of digital life in education, socialisation, entertainment and identity formation (Bozzola et al., 2022; Valkenburg et al., 2022). In the South African context, this temporal dimension is important because youth are navigating digital transformation alongside persistent unemployment, inequality, educational disruption and uneven access to mental health care.

This theoretical interpretation is useful for South African public health because it prevents a blame-based analysis. Young people are not simply undisciplined users who fail to exercise self-control. Instead, they are navigating digital environments that are commercially designed to capture attention while also managing social and economic pressures that may limit offline opportunities for recreation, belonging, study support and psychosocial development (Montag et al., 2019; Odgers & Jensen, 2020). For this reason, public health interventions should not focus only on individual digital self-regulation. They should also address the social conditions that enable young people to develop meaningful lives beyond screens, including safe community spaces, youth development programmes, school-based psychosocial support, family education and accessible mental health services (Marmot et al., 2008; WHO, 2022).

The findings also show the need for careful language. While the term social media addiction is useful in drawing attention to compulsive use, loss of control and functional impairment, it may over-pathologise ordinary youth behaviour if used loosely (Kuss & Griffiths, 2017; Shannon et al., 2025). The more precise term problematic social media use allows the analysis to focus on impairment, distress, preoccupation, withdrawal-like experiences, and loss of control, rather than moral judgment. This distinction is particularly important in South Africa because young people use social media for legitimate and constructive purposes, including learning, job-seeking, entrepreneurship, family communication, activism, peer support, and access to health information. Therefore, the public health objective should not be digital withdrawal but digital well-being, in which young people are supported to use digital platforms in ways that enhance rather than undermine psychosocial functioning (Senekal et al., 2022; Valkenburg et al., 2022).

The article further suggests that social work plays an important role in addressing problematic social media use among youth. Social workers engage with youth, families, schools, communities, and policy systems, placing the profession in a strategic position to address both the psychosocial and structural dimensions of digital harm. From an ecological perspective, social work interventions should operate across multiple systems rather than focusing only on the individual young person (Bronfenbrenner, 1979; Healy, 2014). These responses may include psychoeducation, family counseling, school-based prevention, peer support groups, youth empowerment programs, advocacy for safer digital environments, and referral pathways for youth experiencing anxiety, depression, cyberbullying, online exploitation, or suicidal ideation.

Such interventions are consistent with public health approaches that emphasize prevention, early intervention, social support, and attention to structural determinants of health (Marmot et al., 2008; WHO, 2022). Finally, the South African evidence base requires further strengthening. International studies provide useful insights into the relationship between problematic social media use and youth mental health, but local research is needed to understand how this phenomenon interacts with data costs, language, culture, inequality, rural and urban differences, gender-based violence, youth unemployment, schooling conditions, and access to mental health services (De Doncker & McLean, 2022; Lukose et al., 2023; Senekal et al., 2022). Future research should include qualitative youth voices, longitudinal designs, school-based studies, university samples, out-of-school youth, rural youth, and intersectional groups such as youth with disabilities, LGBTQ+ youth, and young people affected by poverty or family disruption. Such research would provide a stronger empirical foundation for contextually relevant public health, social work, and youth development interventions in South Africa.

6. Implications for Public Health Practice, Social Work, and Policy

The synthesis suggests that South Africa requires a multi-level response that protects youth from digital harm while preserving the benefits of online participation. Rather than framing social media use only as an individual behavioral problem, public health practice, social work, and policy should recognize that young people's digital engagement is shaped by family relationships, schools, peer cultures, community conditions, mental health resources, and platform design. A youth-centered response should therefore promote digital well-being education that goes beyond technical digital literacy. Such education should include emotional regulation, social comparison, sleep hygiene, misinformation, cyberbullying, online consent, privacy, help-seeking, and responsible participation in digital spaces. Schools, universities, clinics, and community-based youth services should also integrate screening and support for problematic social media use into routine psychosocial assessment. Practitioners working with young people should ask about digital stress, sleep disruption, online harassment, compulsive social media use, cyberbullying, body image concerns, and exposure to harmful online content. This would allow early identification of youth who may be experiencing digital-related distress and enable timely referral to counseling, social work support, mental health services, or peer-support programs where necessary.

Family and caregiver support is equally important. Parents and caregivers require practical guidance on how to supervise social media use constructively without relying only on punishment, surveillance or fear-based restrictions. Family-based responses should encourage co-created digital boundaries, open conversations about online experiences, balanced device use, and adult modeling of healthy digital behavior. This is particularly important in households where adults may feel less digitally literate than young people and may therefore struggle to guide them effectively. Public health prevention should further strengthen offline protective environments for young people. Safe recreation, sport, arts, youth centers, peer groups, and community programs can provide opportunities for belonging, identity formation, creativity, and emotional support beyond social media. These offline alternatives are especially important in communities where poverty, unemployment, unsafe neighborhoods, or limited recreational infrastructure may make social media one of the few accessible spaces for connection and escape.

At the policy level, the study highlights the need to promote platform accountability. Policy discussions should address persuasive design features, algorithmic amplification of harmful content, weak reporting systems, age-appropriate protections, online advertising directed at young people, and transparency in how platforms shape youth engagement. A stronger policy response should not exclude young people from digital spaces, but should promote safer, healthier, and more accountable digital environments. Finally, South Africa needs stronger surveillance and research on youth digital behavior. Regular local data are required on young people's social media practices, problematic use, mental health outcomes, cyberbullying, online gendered harm, digital inequality, and protective factors. Such evidence would assist policymakers, social workers, educators, health practitioners, and youth organizations in designing interventions that are responsive to South African realities rather than relying solely on international evidence.

7. Conclusions

Social media addiction, more carefully framed as problematic social media use, is an emerging public health concern among youth in South Africa. The concern is not that young people use social media, but that some patterns of use are compulsive, distressing, and associated with psychosocial impairment. The review shows that problematic social media use is produced through the interaction of platform design, youth developmental needs, peer and family dynamics, social comparison, sleep disruption, cyberbullying, unequal access to offline opportunities, and broader social determinants. A public health response must therefore move beyond individual blame. It should combine youth digital literacy, family support, school and university-based interventions, accessible mental health services, community alternatives, policy attention to digital

environments, and platform accountability. For South Africa, the response must be equity-oriented and culturally responsive, recognizing that youth do not experience digital life in the same way. The article concludes that digital well-being should be treated as a legitimate component of youth development, mental health promotion, and public health policy.

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