Research Article

Digital Lifestyle, Screen Time, and Academic Performance: A Multidimensional Study of Adolescent Health and Well-Being

Dr. Umer Farooq[1], Dr. Sunita Tripathi[2], Dr. Swati Sachan [3], Dr. Neetu Sharma[4], Dr. T.T. Shaikh[5], Hayath T M[6]

[1]Associate Professor, Department of Community medicine, Muzaffarnagar Medical College, Muzaffarnagar, UP, Email: umerbanday1983@gmail.com
[2]Assistant Professor, Department Of Home Science, Mahila Vidyalaya PG College Lucknow affiliated to University of Lucknow, Email: Mishrsunita@gmail.com, Orcid:- 0009000673391163
[3]Ex. Faculty, Health Sciences Department, CSJM University, Kanpur UP. Email:Swatisachan24@rediffmail.com
[4]Professor, Graphic Era Deemed to be University, Dehradun, Uttarakhand, India. Email: neetu.cherry@gmail.com
[5]Professor, Department of Zoology, Maulana Azad College of Arts, Science and Commerce, Chhatrapati, Sambhajinagar,Maharashtra
[6]Assistant professor, CSE, Ballari Institute Of Technology And Management Ballari, Karnataka, Email: hayathmail@gmail.com

Abstract

The trend of using digital technology has redefined the learning behavior, social life as well as the activities of teenagers raising serious concerns about screen time, academic performance and the overall well-being and health of teenagers. The current paper focuses on the multidimensional relationship of the digital lifestyles and the academic achievement, sleep quality, physical activity and psychological well-being improvement among adolescents. The research design proposed is also quantitative and cross-sectional design, with adolescents (1319 years) targeted. Primary data is to be collected with the use of a structured questionnaire on the measurement of the daily screen time, frequency of using educational and recreational devices, performance in school, sleep, physical activity, and self-reported measures based on psychology. The data and descriptive statistics, correlation analysis, and graphical representation will be done in Microsoft Excel. The proposed analytical model will be used to identify the trends and the correlations of online activities and the outcomes of teenagers. Early concept sketches indicate that there may be a correlation between the increased amount of screen time, less sleep, decreased physical activity, and improved studies, but such speculative examples are just U-shaped and must be confirmed with real survey information. The research underlines that the impact of digital technology is relative to patterns of use, purpose, and balance and not screen time. It is anticipated that the study will inform the parents, teachers, and policymakers who have interests in promoting responsible digital behavior, healthy lifestyles, and better performance by adolescents.

Keywords: Digital Lifestyle, Screen Time, Academic Performance, Adolescent Health, Psychological Well-Being.

I. Introduction

The high rate of technological advancement (digital technology) has had a tremendous impact on the lifestyle, learning styles, and socialization among adolescents. The use of Smartphones, computers, tablets, and social media networks, online games, and digital learning applications is now part of the modern life of adolescents [1]. Despite the opportunities offered by these technologies in terms of educational progress, communication, and access to information, overuse or misuse of screens can lead to difficulties with academic achievements, physical and psychological health [2]. As a result, the issue of the correlation between digital lifestyles, screen time, and the development of adolescents has emerged as one of the relevant areas in research. Screen time refers to time spent on digital devices on an educational, recreational and social basis. The effects can depend on the nature of activity, patterns of usage, and circumstances of individual subjects [3]. The use of screens in education can facilitate learning due to interactive options and multimedia cooperation; however, long-term recreational use may cause problems with sleep, lack of physical activities, eye discomfort, and inability to stay focused or concentrate. Moreover, the overuse of social media and online entertainment can be inactive compared to education time, which can affect academic performance and health status. However, these relationships are not that direct and the effects of digital technology could not be achieved with references to the screen time alone.

Several factors relate among themselves to influence academic performance by influencing the quality of sleep, mental health, physical activities, learning conditions, as well as individual study habits. Thus, analysis of digital lifestyles using a multidimensional approach may give more insight into adolescent health and educational achievement. The above approach also recognizes the fact that the purposeful and tamed utilization of technologies can endure a lot of positive impact when it is coupled with healthy daily practices. The title of the article is Digital Lifestyle, Screen Time, and Academic Performance: A Multidimensional Study of Adolescent Health and Well-Being and it is concerned with the associations of digital behaviours of teens/adolescents with academic performance and health-related indicators. It will comment on the correlation between different screen activity patterns and the

learning performance, sleep, exercise and mental well-being. The research will not only help in furnishing a balanced literature on the use of digital technology among adolescents but will present evidence-based information to the parents, teachers, and policy makers that may want to offer adolescents healthier digital lives and improved academic outcomes.

II. Related Works

This relationship between young people and the use of digital technology in relation to learning and physical health and psychological well-being is the subject of an increasing number of studies over the past few years. The current literature sheds light on the fact that being a digital citizen affects different aspects of adolescent development related to the quality of sleep, physical exercise, cognitive abilities, emotional well-being, and even social interactions. The use of Smartphones is an important research issue as a person can be overly involved in it, which disturbs ordinary activity and mental functioning. Evangelia et al. [15] explored smartphone addiction among the Greek university students with the Smartphone Addiction Scale- Short Version (SAS-SV). Their study presents the importance of the problematic smartphone use measurement utilizing structured measurement tools. In a similar manner, Fraiwan et al. [16] focused on symptoms of executive cognitive dysfunction in student athletes with a study based at university, emphasizing the significance of cognitive functioning as a factor when examining online habits and educational performance. These studies form a basis of research into whether intensive digital use is related to concentration problems and academic dysfunction among adolescents. Lifestyle behaviours such as nutrition and physical activity also impact academic performance. The study by Francesca et al. [17] compared an integrated breakfast and morning sport programme to attention, executive functions and academic performance in relation. This study shows the significance of attitude to daily activities and academic achievement. Moreover, Francheska and Georgios [18] sampled health behaviours and mental health and peer relationships in adolescence. Their work upholds a multidimensional approach since adolescent health deals with behavioural, psychological and social interactions other than just one indicator of health.

A lack of sleep and physical activity are of specific interest in the context of digital lives. Garcia-Perez et al. [19] examined the mood status, physical activity, and sleep quality in university students. Their analysis reveals inter-relating dimensions of lifestyle that may underlie a study of adolescent well-being. With a sample size of 13-18 years, Kang et al. [25] have discussed the good and bad sleep among Chinese adolescents as related to gender and residential area, proving the significance of focusing on demographical and environmental factors when studying the sleeping habits of adolescents. Another area of research that has been undertaken is screen time vis-a-vis health-related quality of life and physical development. Garrido-Lopez et al. [20] compared gender variations in eating, screen time, health related quality of life and body image in school students. The multidimensional approach they have suits the current study since digital behaviours can be accompanied by physical and psychological health disparities. Hao and Cui [22] examined the relationship between the use of digital technology and the physical health, the fitness, and exercise levels of Chinese youth, having parental monitoring as a mediator. This point of view recommends that family involvement can mediate the relationship between digital technology and health behaviours. Kar et al. [26] also studied how screen time affects child development, which affirms the significance of studying digital exposure on developmental areas.

Additional perspectives are psychological well-being and social functioning. Georgios et al. [21] has researched problematic smartphone use and quality of life in a cohort of Greek nursing students whereas Íñiguez-Berrozpe et al. [23] have studied psychosocial risk and hidden distress in adolescent students. Rodrigues et al. [24], examined any habits and quality of life in terms of longitudinal school-based quantitative study, which demonstrates the importance of studying behavioural patterns over time. Although these contributions are made, the literature used covers various populations, age groups and research designs. The educational needs and online behaviors of university students and younger teens might differ. Thus, this research fills this gap by analysing screen-time, academic-achievement, sleep, physical activity and psychological-well-being in combination in an adolescent-driven context. The descriptive and correlational analysis will be aided with Microsoft Excel as a tool to investigate the association between these dimensions.

III. Methods and Materials

A. Research Design

The research design chosen in this research is a quantitative type of research to examine the relationship between screen time, academic performance and digital lifestyle and adolescent health and well-being. Quantitative methodology would allow organising, analysing, and gathering numerical data systematically to detect the patterns and relationships between the important variables [4]. The research is cross-sectional as the data on digital behaviours, learning attainment and health-related measures of adolescents will be gathered at one point in time. The design suits the use of relationships to understand patterns of screen-use and several aspects of adolescent's well-being over a specific study period.

The study concentrates on educational screen time, recreational screen time, overall daily screen time, academic achievement, sleep, physical activity and mental health. The data entry, data cleaning, descriptive statistical analysis, correlation analysis and graphical representation will be done using Microsoft Excel [5]. The paper will focus on correlations, but will not provide direct causation between digital practices and outcomes among adolescents.

B. Study Population and Sampling

The target population will include adolescents between the ages of 13-19 years who are attending secondary schools or higher secondary schools. The reason behind its age group is that the adolescent stage is a critical period in an individual developmental process marked by various shifts in learning behaviour, socialisation, sleep routine, and emotional control [6].

Convenience sampling will be used to recruit a sample population of 150 adolescents, and this will be subject to institutional approval, availability of the participants and time of data collection. The participants will be accessed via appropriate education institutions and other community groups [7]. Although the sample size is supposed to facilitate exploratory analysis of descriptive and correlational analysis, it may not fully reflect all adolescents.

Target groups will be decided by the age group, age in question must fall within the age range, and proper consent or assent must be given. Complete responses where participants have not answered all question variables will not be included in the analyses involving variables unable to be calculated. The researchers will also seek to involve the participants who are at varying degrees of digital engagement to encompass the variations on the behaviours of screen use and the outcomes of screen use [8].

C. Data Collection and Materials

The primary data will be gathered by using a structured questionnaire where questions regarding such as demographics, use of digital devices, academic performance, sleep duration, physical activity, and psychological well-being will be asked. The questionnaire can be distributed either electronically or in paper form based on the requirements of the institutions as well as the accessibility of the participants [9].

The question will measure average screen time daily, the approximate percentage of time spent on the screen on education and recreation, bedtime device use, self-perceived academic achievement, sleep habits, physical activity and felt focus. The answers will be in numeric categories wherever possible, to ease statistical analysis [10].

Academic performance can be in terms of self-reported recent examination marks or grade categories. To ensure that access to official academic records is not available, self-reported results will be utilized and considered a possible cause of measurement error. The psychological well-being will be measured using self-report clearly defined questions on perceived stress and mood, and concentration. Such indicators will be seen as self, but not as clinical, assessments [11].

Table I. Study Variables and Measurement Methods

Variable	Measurement method	Data type
Age	Age in completed years	Numerical
Daily screen time	Average hours per day	Numerical
Educational screen use	Hours per day spent on learning activities	Numerical

Recreational screen use	Hours per day spent on entertainment and social media	Numerical
Academic performance	Recent examination percentage or grade	Numerical/ordinal
Sleep duration	Average hours slept per night	Numerical
Physical activity	Days per week with physical activity	Numerical
Psychological well-being	Responses to structured self-report questions	Ordinal
Bedtime device use	Frequency of device use before sleeping	Ordinal

D. Data Preparation Using Microsoft Excel

Microsoft Excel will be the tool of choice as its analytical capabilities will be easily used to arrange data, missing values, compute descriptive statistics, and display a result in message tables and charts. Participants will receive a special numeric identification code where no personal identifying information will be contained in the analytical dataset [12].

The information will be arranged in rows (individual participants) and columns (study variables). Data cleaning will incur processes of checking duplicates, missing cases, numerical ranges verification and standardisation of categorical variables. To illustrate, the entry of screen-time will be taken in the form of an hourly per day whereas academic marks will follow an identical percentage scale where necessary [13].

Excel functions such as AVERAGE, MEDIAN, STDEV.Statistical summaries will be performed using S, COUNTIF and CORREL. PivotTables will facilitate comparison of the years of age and the types of screen-time. There will be development of histograms, bar charts, scatter plot and column charts to show distributions and relationships.

Table II. Proposed Excel-Based Analytical Procedures

Research objective	**Excel method**	**Expected output**
Describe digital habits	AVERAGE, MEDIAN, COUNTIF	Mean screen time and usage frequencies
Examine academic performance	Descriptive statistics	Average marks and grade distributions
Assess sleep and physical activity	Summary tables and charts	Sleep-duration and activity patterns
Examine screen time and academic performance	CORREL and scatter plots	Correlation coefficient and visual relationship
Explore screen time and sleep	CORREL and scatter plots	Direction and strength of association
Compare screen-time groups	PivotTables and group averages	Differences in average academic outcomes
Present findings	Bar charts, histograms and column charts	Visual summaries of study results

Source: Proposed analysis plan using Microsoft Excel.

E. Statistical Analysis

The descriptive statistics will be used to initiate the analysis by summarizing the characteristics and digital lifestyle patterns of the participants. Continuous variables, such as daily screen time, sleep duration and academic marks will be computed to get means and standard deviations. Categorical variables (e.g., purpose of device use and category of bedtime screen-use) will be presented in frequencies and percentages [14].

The correlation coefficient between Pearson will be solved in Excel to test the linear relationships between variables of daily screen time, academic marks and the duration of sleep in cases where the concerned variables meet the requirements of this methodology. The rank correlation of Spearman can be used on ordinal measures, or other variables which fail to respect the assumptions of Pearson correlation, with ranked data, and calculated with Excel.

Averages of academic performance will be turned in between screen-time groups, including fewer than two hours, two to four hours, and more than four hours of recreational time on screens per day. These groups will be established prior to analysis and decoded prudently. Since Excel is not available with all the statistical processes under its in-built functions, any complex analysis, whether it is an inferential one, will only be capped on doing analyses whose implementation and verification is reliable [27].

F. Ethical Considerations

Since the study will encompass adolescents, ethical protection shall be given top priority. Recruitment will be done with the consent of institutional approval and permission of the concerned educational authorities. Where the subject is less than the required age of independent consent, parental (or guardian) consent and adolescent assent will be obtained according to the institutional policy and other relevant regulations. Respondents will be involved on a voluntary basis and they have a right to drop out in accord with the approved study protocol.

All data will be anonymised and kept in a secure place and used only in the research. The questions related to psychological well-being will be phrased with sensitivity and the participants will not be compelled to give personal or clinical information that is unnecessary. To ensure confidentiality, results will be reported in aggregate form.

G. Methodological Limitations

There are a number of limitations to the proposed methodology. Selection bias and constrained generalisability There is a risk of selecting convenience samples which presumes that the sample is representative. Screen and sleep time, as well as academic marks, could be influenced by errors in recollection or wrong judgments. Moreover, the cross-sectional design is unable to determine whether the screen use substantially contributes to the changes in academic performance or well-being. The observed relationships might be impacted by other factors such as family circumstances, socioeconomic background, and learning difficulties as well as existing health conditions.

Nevertheless, these setbacks notwithstanding, the evidence-based approach of a structured data collection, systematic analysis on the basis of Excel, and multidimensional examinations of outcomes offers a feasible foundation of research on the subject of the digital lifestyle of adolescents. Results can be used to define trends that inspire future studies and guide unbiased proposals on the use of technologies, sleeping, exercising, and studying.

IV. Results and Analysis

A. Demographic Characteristics of Participants

The demographic analysis characterizes how old the 150 adolescent participants are distributed. The knowledge of the sample structure gives the background of the interpretation of digital habits, academic achievement and health-related factors. The participants are categorized into three age groups to enable them to make comparisons between young and older teens.

Table III. Demographic Distribution of Participants

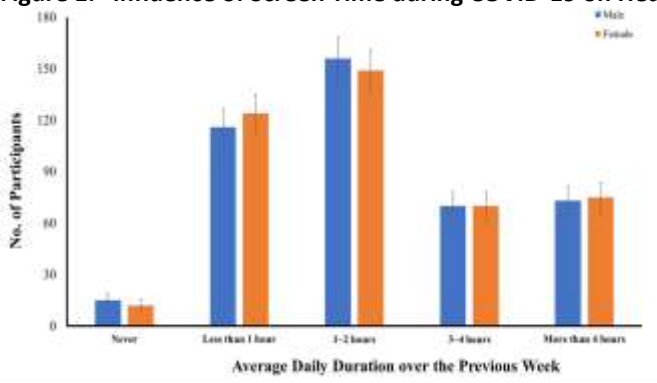
Age group (years)	Participants	Percentage (%)

13–14	40	26.7
15–16	55	36.7
17–19	55	36.7
Total	150	100.0

Source: Illustrative dataset.

Table III shows that the age groups 15–16 and 1719 respectively constitute about 36.7 and 36.7 percent of the sample, with the other age group being 1314 (26.7). The distribution is representative of the various stages of adolescence. The role variations in the duties of education, socialisation, and access to independent devices might affect online behaviour among these age groups. Nonetheless, the occurrence of age development cannot be determined based on the frequencies of the demographics and needs additional, comparative examination.

Figure 1: "Influence of Screen Time during COVID-19 on Health-Related Quality of Life of Early Adolescents"



B. Digital Lifestyle and Screen-Time Patterns

The central variable of this study is screen time because of the use of digital devices, adolescents do educational work, entertain, communicate, and socialize. Screen time distribution may be used to determine if the use of recreational devices is a significant part of the everyday activities of the participants.

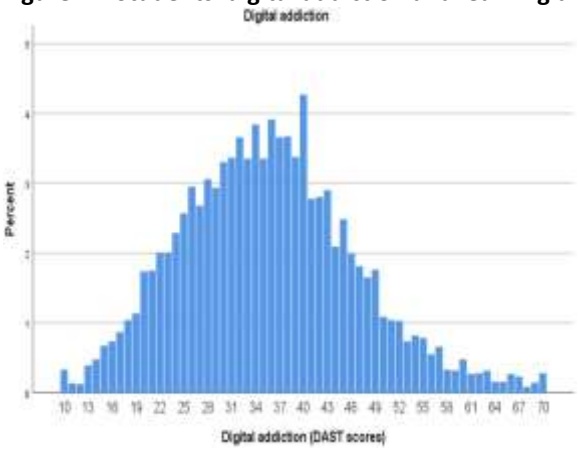
Table IV. Distribution of Daily Screen Time

Daily screen time	**Participants**	**Percentage (%)**
Less than 2 hours	20	13.3
2–4 hours	45	30.0
4–6 hours	50	33.3
More than 6 hours	35	23.3
Total	150	100.0

Source: Illustrative dataset.

As presented in Table IV, the biggest proportion, 33.3 percent of the respondents, use digital devices four to six hours a day. Another 23.3% spend over six hours of time in front of the screen every day. Together, these groups respond to 56.6 percent of the sample, indicating that this hypothetical dataset uses large amounts of digital engagement on a daily basis. On the other hand, 13.3% have less than two hours of screen time [28].

Figure 2: "Students' digital addiction and learning difficulties"



These results demonstrate the need to differentiate between educational and recreational screen time. When total screen time is high, it is not a direct sign of unhealthy behaviour as devices like computers may be needed to carry out school studies. Thus, further discussion should take into account the intent, timing, and duration of screen time, and not the total time.

C. Academic Performance and Health Indicators

Academic performance and health-related behaviours are analysed simultaneously since digital lifestyles could accompany any variation in sleep, physical activities and concentration. To describe how Excel can be applied to compare these variables with given screen-time categories, the illustrative group averages below can be used.

Table V. Screen Time and Selected Adolescent Outcomes

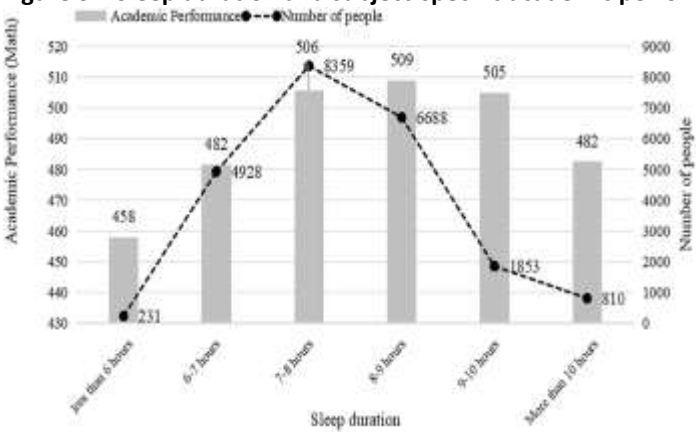
Daily screen time	Average academic marks (%)	Average sleep (hours/night)	Physical activity (days/week)
Less than 2 hours	82	8.2	5.0
2–4 hours	78	7.8	4.2
4–6 hours	73	7.2	3.4
More than 6 hours	68	6.6	2.6

Source: Illustrative dataset; values are hypothetical group averages.

Hypothetical pattern Table V illustrates a hypothetical pattern with higher screen-time categories associated with lower average academic marks, shorter sleep-duration and lower physical-activity days. The participants who responded below two hours of daily screen time provide an illustrative average of 82% academic mark as compared to 68% when more than six hours are reported. This translates to a 14 percentage-point difference between the two groups [29].

In the same way, the average length of sleep is reduced in these categories to 8.2 to 6.6 hours per night. The amount of physical activity decreases by five to 2.6 days a week. These trends imply some possible connections between intensive digital engagement and lifestyle indicators. The table however fails to show that screen time has a direct negative impact on lower marks, less sleep and less physical activity. Variations may also be examination stress, family conditions, normal sleep habits or other unknown factors.

Figure 3: "Sleep duration and subject-specific academic performance among adolescents"



The results point to the issue of treating screen time as a component of an overall way of life and not as a single exposure. Learning could be facilitated by educational screens use but results of extensive recreational use (especially when this use replaces sleep or study) could be unfavourable [30].

D. Correlation Analysis

Correlation analysis has the capacity to aid in evaluation of direction and strength of association amid screen time and the chosen outcomes. Pearson correlation coefficient of the two numerical variables may be obtained in Microsoft Excel with the use of CORREL to compute the correlation coefficient of the given trajectories.

Table VI. Illustrative Correlation Analysis

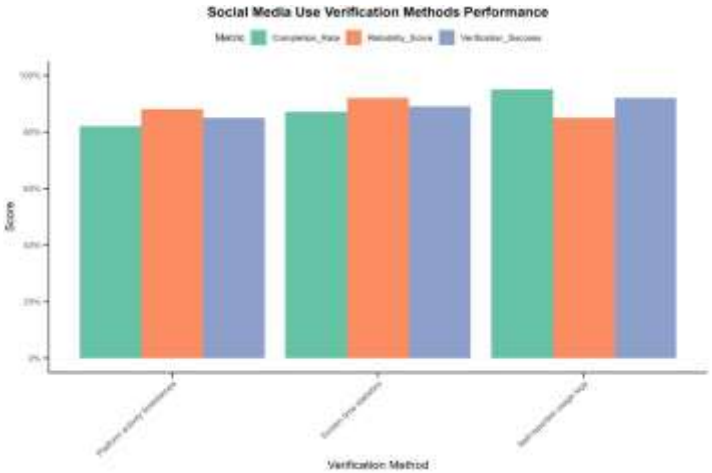
Variable pair	Illustrative correlation coefficient (r)	Interpretation
Screen time and academic marks	-0.42	Moderate negative association
Screen time and sleep duration	-0.48	Moderate negative association
Screen time and physical activity	-0.39	Negative association
Sleep duration and academic marks	+0.45	Moderate positive association

Source: Hypothetical coefficients to illustrate analysis; not based on actual data at the participant level.

It can be seen that correlation coefficients can be interpreted in a manner as shown in Table VI. The association between the screen time and the academic marks is -0.42 which means that the longer the time spent watching screens, the less likely that academic marks will be associated with higher marks. In a similar manner, the -0.48 coefficient indicates a negative correlation between the sleep duration and the screen time.

The negative correlation of physical activity shows that the more hours of screen time, the more active days can be there. On the contrary, the correlation coefficient of the duration of sleep (in hours) and academic scores is positive at +0.45 indicating that it could be possible that the longer the sleep time, the better the academic performance.

Figure 4: "Association between social media use, physical activity level, and depression and anxiety among college students"



These coefficients are not meant to be reported as empirical results but are just examples of potential results of the calculation of the coefficients at the participant-level. Moreover, correlation does not imply causation. Analysis of statistical significance needs to be done individually on a suitable test and a predetermined level of significance of say 0.05. Scatter graphs should also support correlation analysis to determine the potentiality of outliers, as well as determine the relationship to be approximately linear.

E. Psychological Well-Being and Overall Interpretation

Psychological well-being represents another important dimension of adolescent development. The overuse of recreational devices can also be accompanied by the perceived stress, problems in concentration, or emotional discomfort; however, online communities and digital communication may also be a source of social support. The direction and level of these associations have to be determined with the solution of questionnaire responses gathered.

Table VII. Proposed Psychological Well-Being Analysis

Indicator	Excel analysis method	Interpretation focus
Perceived stress	Frequency and percentage	Distribution of reported stress levels
Concentration difficulties	Frequency and percentage	Prevalence of self-reported difficulties
Bedtime device use	Cross-tabulation	Patterns of device use before sleep
Screen time and stress	Correlation, where appropriate	Direction and strength of association
Screen time and concentration	Group comparison	Differences across screen-time categories

Source: Proposed analytical framework.

Table VII summarizes the potential analysis of psychological well-being and the digital practices. The proportion of the participants reporting various stress or concentration levels can be summarised using frequency distributions. Cross-tabulations are able to compare the patterns of using devices at bedtime with sleep categories, while correlation analysis might be suitable when the appropriate measures are suitably coded and are numerical or ordinal. These findings are to be viewed with some reservations since self-reported measures of mental signs are not clinical diagnoses. Academic workload, peer relationships, family support, and socioeconomic circumstances are the aspects that can contribute to the reported results.

On the whole, the suggested analytical framework combines demographic, screen-time trends, school performance, sleep, exercising, and psychological well-being. Examples given by illustrative tables explain that Microsoft Excel can be used to aid descriptive and correlational analysis. As soon as the real answers on surveys have been obtained, the hypothetical values should be substituted with the confirmed calculations. This will allow the study to assess whether digital patterns of living have an association with both academic performance and health of adolescents without making unsubstantiated conclusions around causation.

V. Conclusion

This research contends the connection of digital lifestyle, screen time, academic achievement, and the well-being and health of adolescents in a multidimensional research paradigm. The study demonstrates the need to comprehend digital technology use outside of the total screen time based on its educational and recreational intentions, as well as sleep quality, physical activity, psychological health and learning outcomes. Digital devices are becoming a deeply embedded part of the lives of adolescents, and to facilitate healthy uses of technology and healthy growth, the relationships between these issues should be understood. The suggested analysis system shows how Microsoft Excel can be applied when systematizing survey data and calculating descriptive statistics, performing correlation analysis, and illustrating results. The reported findings indicate potential relations amidst more screen time and lower performance in academics, reduced sleep cycle, and reduced exercise. At this point, these values remain hypothetical until the time the actual data about the participants is collected and analysed and can be considered an empirical evidence. Thus, the strength, direction and statistical significance of these relationships can only be drawn based on established results.

The study of the topic also shows the ways adolescent development is converging, as digital behaviour, cognitive functioning, sleep, physical and psychological health matters are applicable. It is important to note that screen time does not always have to be avoided given that educational technology and appropriate communication with digital interactions may facilitate learning, communications, and access to information. The item, the time, and the balance of digital activities end up being significant factors to be taken into consideration, as well. The research suggests supporting a healthy balance when using screens, having a regular sleep schedule, regular exercise, and responsible attention to the use of technology by collaborating with parents and schools. Future research needs to have larger and more representative samples, well-validated well-being measures, and longitudinal research designs to determine variations across time and to control potential confounding variables. In conclusion, a multidimensional approach digital lifestyles offer an opportunity to inform an evidence-based approach to adolescent health and learning process. This study presents a practical model of behaviour pattern definition and easer healthier technology use through online interaction and academic and style of living metrics.

References

[1] Asif, A.I., Joy, S.D., Billah, M., Khan, U.A., Mansib, I., Munna, S.M.A.H., Bairagi, A.K. & Al Noman, A. 2026, "Investigating the Impact of Fast-Paced Digital Content, Social Media Engagement, and Lifestyle Factors on Attention, Cognitive Load, and Behavioral Impulsivity: A Machine Learning Approach", Brain and Behavior, vol. 16, no. 8, pp. 24.

[2] Bitar, S., Mendes, F.,G., Lopes Ferreira, J., Samuel, R. & Catunda, C. 2026, "Adolescent health lifestyles and suicidality: Emerging risks in a latent class analysis", Cambridge Prisms : Global Mental Health, vol. 13, pp. 11.

[3] Borges, D., Pinto Inês, Santos Octávio, Ivone, M., Ferreira, I.R., Macedo, A.P. & Adriana, T. 2025, "On–Off Childhood? A Rapid Review of the Impact of Technology on Children's Health", Healthcare, vol. 13, no. 14, pp. 1769.

[4] Caamaño-Navarrete Felipe, Arriagada-Hernández, C., Jara-Tomckowiack Lorena, Contreras-Diaz, G., Álvarez Cristian, Hernández-Mosqueira, C., Figueroa-Saavedra, C., Lagos-Hernández, R., Fuentes-Vilugrón Gerardo &

Delgado-Floody, P. 2026, "Personal Time, Parental Fairness, School Adjustment and Physical Activity Levels as Indicators of Executive Functions in Children and Adolescents", Behavioral Sciences, vol. 16, no. 6, pp. 941.
[5] Cascobelo-Águeda Lucía, Garrido-Bueno, M., Rodríguez-García María, Tirado-Hernández Pastora, Andrade-Gómez, E., Fagundo-Rivera, J. & Fernández-León, P. 2026, "The Multidimensional Impact of Gluten-Free Diet Adherence on Quality of Life in Pediatric and Adolescent Celiac Disease: A Systematic Review", Children, vol. 13, no. 6, pp. 722.
[6] Chadayu, U., Chatkaew, P. & Phatcharawadee, S. 2026, "Prevalence and Factors Associated with Poor Sleep Quality Among Undergraduate Students: A Cross-Sectional Study", International Journal of Environmental Research and Public Health, vol. 23, no. 5, pp. 585.
[7] Chatterjee, A., Prinz, A., Gerdes, M. & Martinez, S. 2021, "Digital Interventions on Healthy Lifestyle Management: Systematic Review", Journal of Medical Internet Research, .
[8] Cho, M., Park, D., Choo, M., Han, D.H. & Kim, J. 2025, "Adolescent Self-Reflection Process Through Self-Recording on Multiple Health Metrics: Qualitative Study", Journal of Medical Internet Research, vol. 27.
[9] Daniele, G. 2025, "Smartphone Addiction in Youth: A Narrative Review of Systematic Evidence and Emerging Strategies", Psychiatry International, vol. 6, no. 4, pp. 118.
[10] Delgado-Floody, P., Alvarez, C., Hernández-Mosqueira, C., Contreras-Diaz, G., Del-Cuerpo Indya, Cresp-Barria Mauricio, Hernandez-Martínez, J., Valdés-Badilla, P., Núñez-Espinosa, C., Arriagada-Hernández, C., Fuentes-Vilugrón Gerardo & Caamaño-Navarrete Felipe 2026, "Lifestyle Factors Associated with Perceived Stress Among Adolescents: The Indirect Role of Mediterranean Diet Adherence in the Screen Time–Stress Association", Healthcare, vol. 14, no. 16, pp. 2621.
[11] Deng, Q., Sha, L., Hou, J., Zhao, X., Xiang, R., Zhu, J., Qu, Y., Zhou, J., Yu, T., Song, X., Zheng, S., Han, T., Yang, B., Fan, M. & Jiang, X. 2026, "Leisure Screen Time, Internet Gaming Disorder, and Mental Health Among Chinese Adolescents: Large-Scale Cross-Sectional Study", Journal of Medical Internet Research, vol. 28, pp. 15.
[12] Dorota, J. 2026, "Digital Fatigue, Sustainability Behaviour, and Energy Awareness Among Generation Z: The Role of Cognitive Resources and Education", Social Sciences, vol. 15, no. 1, pp. 12.
[13] Elsa, L., Loizeau, A., Viviane, R., Roxane, D., María-Eugenia, Z., Pennacchio, F., Julien, L., L'Huillier Arnaud, G., Baysson Hélène, Fernandez, C.N., Nicolas, B., Mayssam, N., Pierre, L., Vuilleumier, N., Posfay-Barbe, K., Barbe, R., Idris, G. & Silvia, S. 2026, "Cohort profile: the SEROCoV-KIDS population-based cohort study and biobank on the impact of the COVID-19 pandemic in children and adolescents in Geneva, Switzerland", BMJ Open, vol. 16, no. 9, pp. 20.
[14] Elshaer, I.A., Youssef, K., Chokri, K. & Mansour, A. 2026, "Digital Transformation in the Sports Industry and Football Fans' Mental Health: Evidence from Saudi Arabia", Societies, vol. 16, no. 9, pp. 286.
[15] Evangelia, K., Konstantina, B., Emmanouil-Kalos Alkinoos, Symeon, S., Alexandros, G. & Athanassios, V. 2025, "Smartphone Addiction Among Greek University Students: A Cross-Sectional Study Using the SAS-SV Scale", Psychiatry International, vol. 6, no. 4, pp. 152.
[16] Fraiwan, M., Almomani, F. & Hammouri, H. 2025, "Prevalence and contributing factors of executive cognitive dysfunction symptoms in university students", PLoS One, vol. 20, no. 6.
[17] Francesca, L., Domenico, T., Emma, S. & Tafuri, M.G. 2026, "Integrated Structured Breakfast and Morning Sport Program and Its Associations with Attention, Executive Functions, and Academic Performance in Students", Nutrients, vol. 18, no. 13, pp. 2103.
[18] Francheska, E. & Georgios, G. 2026, "Health Behaviors, Mental Health, and Peer Relationships in Adolescence: A Scoping Review", Psychology International, vol. 8, no. 3, pp. 50.
[19] García-Pérez, L., Izaguirre Paula Martínez, Torres-Luque, G. & Padial-Ruz Rosario 2026, "Mood States, Physical Activity, and Sleep Quality in University Students: A Cross-Sectional Study in Educational Settings", Healthcare, vol. 14, no. 18, pp. 3083.
[20] Garrido-López Beatriz, Fernández-Villarino, M.Á., González-Valeiro, M., Andreu-Caravaca, L., Martins João & Dopico-Calvo Xurxo 2025, "Gender Differences in Eating Habits, Screen Time, Health-Related Quality of Life and Body Image Perception in Primary and Secondary School Students: A Cross-Sectional Study in Spain", Education Sciences, vol. 15, no. 4, pp. 470.
[21] Georgios, M., Vasiliki, G., Vasileiou, E., Savvato, K., Karavasili, N.T., Stefanos, M. & Eman, A. 2026, "Problematic Smartphone Use and Quality of Life Among Greek Nursing Students: A Cross-Sectional Study", International Journal of Environmental Research and Public Health, vol. 23, no. 7, pp. 870.

[22] Hao, Z. & Cui, J. 2025, "Assessing the relationship between digital technology use and physical health, fitness, and exercise levels among Chinese youth: The moderating effect of parental monitoring", PLoS One, vol. 20, no. 6.
[23] Íñiguez-Berrozpe, T., Marcaletti, F., Elboj-Saso, C. & Cebollero-Salinas, A. 2026, "A cluster analysis of psychosocial risk and hidden distress in adolescent students", Scientific Reports (Nature Publisher Group), vol. 16, no. 1, pp. 22988.
[24] Isabela Fernanda Rodrigues, d.O., Suelen Marçal Nogueira, Flávio Manoel Coelho, B.C., Barg, G., Costa, G.D.C.T., Villa-González, E., Priscilla Rayanne, e.S. & Noll, M. 2026, "What is the cost of dedication to teaching? A school-based longitudinal quantitative study on habits and quality of life", PLoS One, vol. 21, no. 9, pp. 26.
[25] Kang, X., Li, J. & Wu, H. 2026, "Gender and residential differences in sleep quality among Chinese adolescents aged 13–18 years", PLoS One, vol. 21, no. 6, pp. 21.
[26] Kar, S.S., Rajani, D., Goud Bellary, K.M., Syadida, G.Q., El-Balbissi, A., Al Salim, T.A. & Fatayerji Rand Nedal Mohammad,Al Khaled 2025, "Impact of Screen Time on Development of Children", Children, vol. 12, no. 10, pp. 1297.
[27] Koura, G.M., Kandakurti, P.K., Elshiwi, A.M., El Melhat, A.M., Mohabozaid, S., Ibrahim, D.N.M., Al Salim, Z., ALMohiza, M.A., Hegab, E.A.A., Hassan, S.H.A. & Reddy, R.S. 2026, "Associations of screen time and physical activity with motor control, mood, and cognitive states in adolescents following acute high-intensity interval training", Scientific Reports (Nature Publisher Group), vol. 16, no. 1, pp. 30915.
[28] Lee, S. & Juseok, Y. 2026, "Gendered Social Construction of Adolescent Health Practices Through Digital Detox and Physical Activity", Healthcare, vol. 14, no. 1, pp. 101.
[29] Mandelkow, L. & Hillesund, O.K. 2025, "Mental health and meaning in modern life among young adults in Norway", Discover Mental Health, vol. 5, no. 1, pp. 182.
[30] Martínez-Redecillas Emilio, Moral-García, J.E., Casado-Montilla Jairo & Solas-Martínez, J.L. 2026, "Impact of Active Tourism on Physical Activity in Children and Adolescents: A Systematic Review (2015–2025)", World, vol. 7, no. 2, pp. 31.