

Original Research Article

From screens to scores: attitudes towards social media and its impact on medical students' mental health and learning

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ABSTRACT

Background: Medical students frequently use social media for both personal and professional purposes. While it can enhance learning and reduce loneliness, it also poses risks such as anxiety and depression. This study explores usage patterns, attitudes, and impacts on their mental health and learning.

Methods: Preclinical students completed an anonymous questionnaire covering demographics, social media usage, attitudes towards social media in medicine, and mental health assessment via the hospital anxiety and depression scale (HADS).

Results: Out of 175 students, 126 completed the questionnaire. Most spent 1-5 hours daily on 2-5 social media platforms, with older students spending less time online. The most popular platforms were Instagram, WhatsApp, and YouTube. About 30.2% used social media solely for personal purposes, while 69.8% used it for both personal and professional activities. Most participants found social media useful for learning and professional growth but had ethical concerns. Nearly half of the participants reported no academic impact from social media use, 37.3% reported negative effects, and 14.3% valued positive effects. A weak positive correlation was found between social media usage and anxiety, but not depression.

Conclusions: Social media shapes educational paradigms, enhancing medical students' learning, collaboration, and professional growth. Perceptions of social media's impact on academics varied among participants, but neither these perceptions nor the time spent on social media significantly affected GPA. The study found a link between social media use and anxiety, but not depression. Understanding these dynamics is crucial for supporting students' mental health and academic success in the digital age.

Keywords: Social media, Anxiety, Depression, Attitude

INTRODUCTION

In recent times, social media has seamlessly integrated into our daily routines, shaping communication, information exchange, and networking. Across the globe, billions of individuals utilize various social media platforms for both personal and professional purposes, and medical students are no exception. A prior study revealed that a many medical students dedicate more than 10 hours per week to social media engagement with most students being pre-

internship group, followed by first year students and clerkship.¹

Various social media platforms, including Facebook, WhatsApp, Instagram, Twitter, YouTube, and LinkedIn, are popular among students for different purposes.²⁻⁶ Social media use has been linked to reduced loneliness and increased self-esteem and life satisfaction. Medical students use these platforms for personal and professional connections, engaging in dynamic interactions and real-

time information exchange that enhance their education.⁷⁻⁹ Surveys show 80% of students received academic materials via Facebook, with over two-thirds exploring social media's benefits for education. Notably, 67.9% reported improved learning activities, while 65.2% endorsed its educational use. However, 64.1% acknowledged that social media can be distracting and time-consuming.^{1,10}

Social media usage is also linked to mental illness and wellbeing. A study at Ubon Ratchathani university (Thailand) found that 32.6% of medical students were addicted to social media, with 23.9% experiencing depression and 45.4% reporting anxiety, showing a significant association between social media addiction and mental health conditions.¹¹ Facebook users reported adverse effects like burning eyes (21%), trouble sleeping (19%), and headaches (16%). Additionally, 67.5% acknowledged that Facebook negatively impacted their academic performance, leading 71.4% to reduce usage for more study time.¹⁰ Thus, the use of social networking sites can be both beneficial and harmful. Positive interactions, social support, and strong social connections on social media correlate with lower depression and anxiety, while negative interactions and social comparison increase these issues.¹²

Research on social media use and academic outcomes have shown mixed results. Kubey et al found a correlation between social media reliance and academic performance.¹³ George and Delacega noted it expands academic opportunities.¹⁴ Oye et al reported students see social networks as educational.¹⁵ However, other studies have shown negative associations.¹⁶⁻¹⁸

While various reports are available on the positive and negative effects of social media use, we aimed to study the pattern of social media uses by medical students at Trinity medical sciences university and their attitude towards it. The purpose of this study is also to assess the impact of social media usages on mental health (Depression and anxiety) and academic performance of medical students.

We believe the results of this study will help raise student awareness about the appropriate use of social media for academic and mental health benefits.

METHODS

This cross-sectional study was conducted at Trinity Medical Sciences University (TMSU), located in Saint Vincent and the Grenadines, between July 2023 and October 2024. All preclinical students enrolled in Terms 1 to 4 were invited to participate following their midterm examinations. Participation in the study was entirely voluntary, and informed consent was obtained from all willing participants. To ensure anonymity, students were asked to complete a questionnaire without providing any identifying information.

The questionnaire consisted of three sections. The first section collected demographic data, including age, gender, academic term, frequency of social media uses, types of social media platforms used, and the purposes of social media use (personal or professional).

The second section assessed students' attitudes toward social media use in medicine, adapted from a previous study by Avci et al.¹⁹ Participants responded to statements using a five-point Likert scale (ranging from 1="strongly disagree" to 5="strongly agree"). The factor analysis by Avci et al identified five factors: professional usefulness, popularity, ethics, barriers, and innovativeness. These same factors were used to interpret the results of this study.

The third section comprised the HADS, a valid and reliable self-rating scale that measures anxiety and depression in both hospital and community settings.²⁰ It provides clinically meaningful results as a psychological screening tool, assessing the symptom severity of anxiety and depression in individuals with illness and the general population. The HADS includes fourteen questions: seven for anxiety and seven for depression. Responses were scored on a scale of 0 to 3, with a maximum score of 21 for anxiety and 21 for depression. Odd-numbered questions addressed anxiety, while even-numbered questions addressed depression. The two subscales, anxiety and depression, were found to be independent measures. Severity was categorized into four stages: scores of 0-7 (normal); 8-10 (mild); 11-15 (moderate); and 16-21 (severe).

The study proposal was approved by the institutional review board of TMSU, and ethical clearance was granted. The collected data were entered into an Excel sheet and then exported to SPSS for analysis to study: 1. The pattern of social media use by medical students and their attitudes towards it. 2. The impact of social media use on students' mental health (depression and anxiety) and academic performance.

Descriptive statistical analysis was employed to evaluate the demographic data, encompassing the frequency, types, purposes, and attitudes associated with students' use of social media, as well as their anxiety and depression scores measured by HADS. A t-test was conducted to determine the statistical significance of differences among various groups in the study. Additionally, Pearson's correlation coefficient was used to examine the relationship between the participants' anxiety and depression scores and the amount of time they spent on social media. A $p \leq 0.05$ was considered the threshold for statistical significance.

RESULTS

All trinity students from term 1 to 4 participated in the study. Out of a total of 175 students, 126 completely filled and returned the questionnaire (response rate: 72%). There were 55 males (43.7%) and 71 females (56.3%)

participants. The average age of the participants was 26.1±4.2 years.

Social media usage patterns

Most participants (both male and female) spent 1-5 hours on social media daily (above 60%). Further details on frequency of usage are provided in the Table 1.

Table 1: Distribution of participants based on time spent on social media use.

Time spent on social media use	Number of the participants (%)
Never	2 (1.6)
Few times a month	3 (2.4)
Few times a week	7 (5.6)
Daily <1 hr.	25 (19.8)
Daily 1-2 hrs.	44 (34.9)
Daily 2.1-5 hrs.	36 (28.6)
Daily 5.1-8 hrs.	8 (6.3)
Daily >8 hrs.	1 (0.8)

There was a statistically significant difference among the age groups regarding time spent on social media ($p=0.000$). The average time spent on social media by different age groups (below 25 years, 25-30 years and 30+ years) are shown in the Table 2. The result revealed that older age group students spend less time on social media compared to younger age group. No such differences were found between male and female participants.

Table 2: Comparison of average time spent on social media across different age groups.

Age group of participants (in years)	Average time spent on social media (in hours)	Significant significance of difference (p value)
Below 25	2.1-5	Below 25 years vs. 25-30 years: $p=0.000$.
25-30	1-2	25-30 years vs. 30+ years: $p=0.004$
30+	<1	Below 25 years vs. 30+ years: $p=0.000$

Approximately 80% of the students reported using 2-5 social media platforms. On an average three social media platform were used by the participants. The distribution of the number of social media platforms used by participants is summarized in the Table 3.

No significant difference in number of social media use was noted among different age groups and also between male and female participants.

The most popular social media platforms among the participants were as follows: Instagram: used by 79.4% of participants, WhatsApp: used by 73.8%, YouTube: used by 69.8%, Facebook: used by 31.7%, Snap Chat: used by 29.4% and Tik Tok: used by 24.6%

Some students also reported using other platforms like Twitter, Messenger, LinkedIn, and WeChat.

Approximately one-third of participants (30.2%) used social media exclusively for personal purposes, including: Keeping in touch with family and friends (83.3%), filling spare time (63.5%), reading news stories (40.5%), exploring trending topics (34.9%), finding like-minded communities and interest groups (29.4%), posting about personal life (27%), watching live streams (games, events, etc.) (27%), finding products to purchase (25.4%) and following celebrities or influencers (23%).

More than two-thirds of participants (69.8%) reported using social media for both personal and professional activities.

Participants who also used social media for professional purposes engaged in the following activities: Finding course content (videos, articles, journals, etc.): 64.3%, sharing academic resources and opinions: 27.8% and accessing academic experts: 19%.

Nearly half of the participants (48.4%) perceived no impact of social media on their academics. However, 37.3% reported negative effects, while 14.3% believed it positively influenced their academic performance.

However, there was no significant difference in grade point average (GPA) of the participants who perceived the effects of social media differently.

We also did not discover any significant relationship between social media usage time and GPA among the participants [$r(df)=0.12$, $p=0.183$].

We explored the attitudes of participants towards social media in the medical field based on five factors: professional usefulness, popularity, ethics, barriers, and innovativeness which are presented in the Table 4. The internal consistency (Cronbach's alpha) of the attitude scale was found to be 0.75.

We examined anxiety and depression scores among participants based on their use of social media for personal and professional activities. Our analysis aimed to understand whether these psychological measures differed significantly between the two usage contexts.

The results are shown in the Table 5. No significant difference was found in anxiety ($p=0.830$) and depression ($p=0.639$) scores between the two groups.

Table 3: Distribution of social media use among participants.

Number of social media use	Number of participants	Percentage of participants	Cumulative percent
1	9	7.1	7.1
2	21	16.7	23.8
3	36	28.6	52.4
4	28	22.2	74.6
5	15	11.9	86.5
6	12	9.5	96.0
7	3	2.4	98.4
8	1	0.8	99.2
9	1	0.8	100.0
Total	126	100.0	

Table 4: Attitudes of participants towards social media on five different factors.

Attitude factors	Statements	Strongly disagree	Disagree	Neither disagree nor agree	Agree	Strongly agree
Usefulness	Today, the use of social media in medicine is a necessity.	9 (7.1%)	0 (0%)	17 (13.5%)	59 (46.8%)	41 (32.5%)
	Social media is a platform where the recycling of quality information is ensured.	9 (7.1%)	33 (26.2%)	23 (18.3%)	39 (31%)	22 (17.5%)
	Social media is an easy way of knowledge acquisition.	3 (2.4%)	6 (4.8%)	27 (21.4%)	63 (50%)	27 (21.4%)
	The sharing of current information regarding medicine through social media is important for professional development of physicians.	1 (0.8%)	11 (8.7%)	36 (28.6%)	62 (49.2%)	16 (12.7%)
	Social media use helps improve the quality of healthcare.	2 (1.6%)	13 (10.3%)	35 (27.8%)	65 (51.6%)	11 (8.7%)
	Social media contributes to creativity in our profession.	1 (0.8%)	6 (4.8%)	27 (21.4%)	72 (57.1%)	20 (15.9%)
Popularity	Physicians actively using social media are more popular among their colleagues.	2 (1.6%)	15 (11.9%)	40 (31.7%)	50 (39.7%)	19 (15.1%)
	Popularity of a physician in social media enables access to more patient groups.	1 (0.8%)	11 (8.7%)	27 (21.4%)	64 (50.8%)	23 (18.3%)
Ethics	Social media brings along professional/legal risks for physicians.	4 (3.2%)	0 (0%)	13 (10.3%)	58 (46%)	51 (40.5%)
	It is hard for patients to differentiate healthy and reliable medical information from incorrect or groundless information.	5 (4%)	0 (0%)	15 (11.9%)	48 (38.1%)	58 (46%)
Barrier	I am too busy to participate in social media.	16 (12.7%)	41 (32.5%)	35 (27.8%)	28 (22.2%)	6 (4.8%)
	I don't have time to learn social media usage intended for professional purposes.	21 (16.7%)	42 (33.3%)	41 (32.5%)	20 (15.9%)	2 (1.6%)
	If I start using it I'm concerned that social media will take a lot of time	6 (4.8%)	17 (13.5%)	27 (21.4%)	58 (46%)	18 (14.3%)
Personal innovativeness	I actively seek new ways to use social media in my practice.	16 (12.7%)	59 (46.8%)	30 (23.8%)	18 (14.3%)	3 (2.4%)
	I usually find out about new social media applications.	25 (19.8%)	46 (36.5%)	24 (19%)	26 (20.6%)	5 (4%)

In the table, participant numbers are accompanied by percentages in parentheses.

Table 5: Anxiety and depression scores among participants.

Score	Anxiety, N (%)		Depression, N (%)	
	Personal	Both personal and professional	Personal	Both personal and professional
0-7 (Normal)	12 (31.57)	24 (27.27)	25 (65.78)	59 (67.04)
8-10 (Mild)	8 (21.05)	24 (27.27)	6 (15.78)	13 (14.77)
11-15 (Moderate)	12 (31.57)	23 (26.13)	6 (15.78)	16 (18.18)
16-21 (Severe)	6 (15.78)	17 (19.31)	1 (0.02)	0 (0)
Total	38	88	38	88

No. subjects (% in parentheses) who utilized social media for personal activities and for both personal and professional development. Severity stages of anxiety and depression based on HADS score are mentioned as mild, moderate and severe. Normal means there is no features of anxiety/depression.

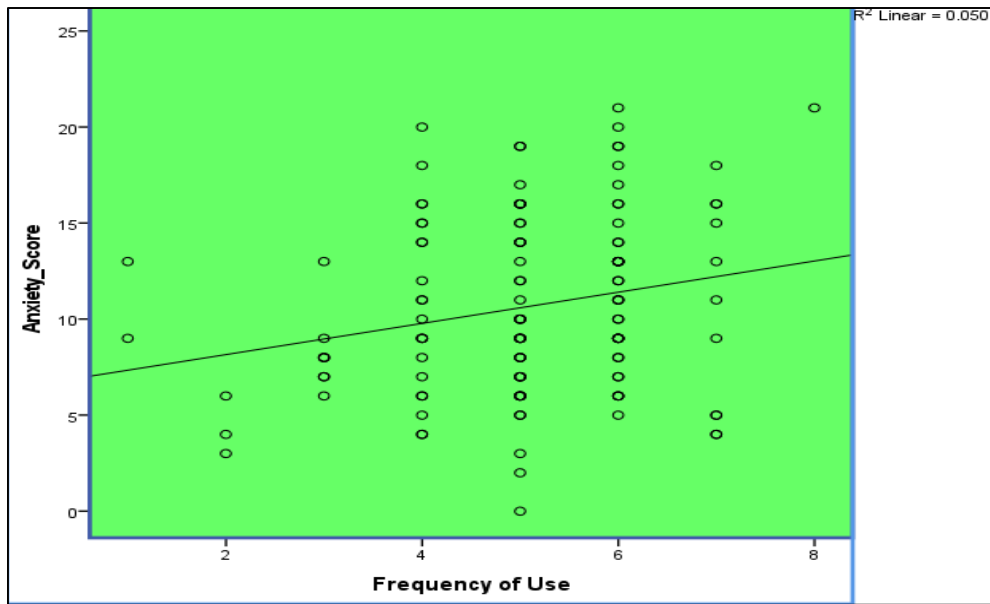


Figure 1: Correlation between frequency of social media use (in hours) and anxiety score.

The coefficient of determination (R^2) was found to be 0.050.

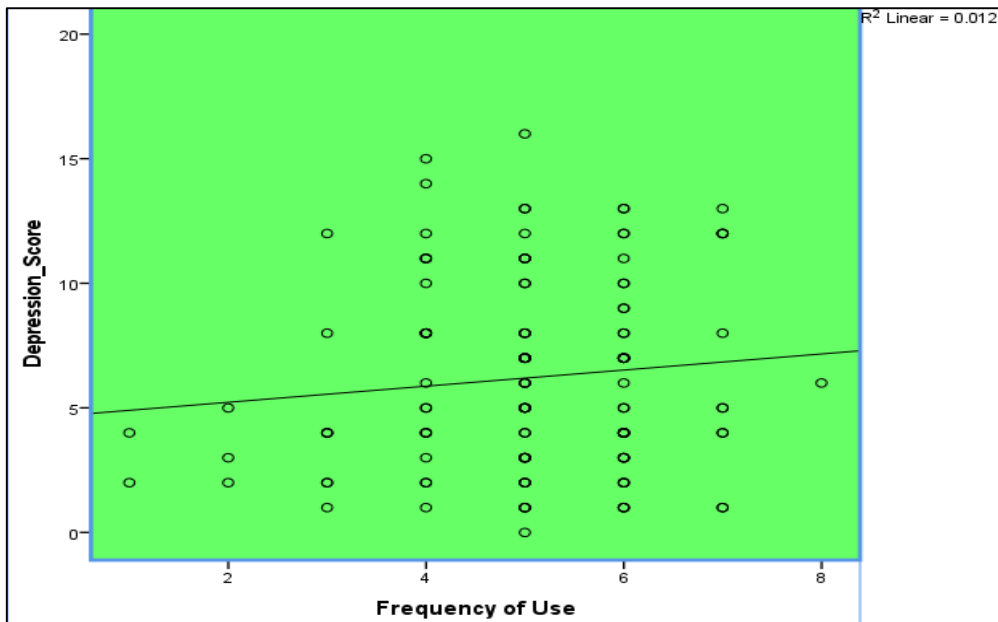


Figure 2: Correlation between frequency of social media use (in hours) and depression score.

The coefficient of determination (R^2) was found to be 0.012.

We examined the relationship between anxiety and depression scores and the time participants spent on social media. These correlations are shown in figures 1 and 2. A weak positive correlation was observed between anxiety scores and social media usage ($p=0.012$; $r=0.224$; $R^2=0.050$). Participants who spent more time on social media tended to have slightly higher anxiety scores. The correlation between depression scores and social media usage was not statistically significant ($p=0.222$; $r=0.110$; $R^2=0.012$). Social media usage did not significantly impact depression scores. The correlation between participants' anxiety and depression scores and number of social media use were not significant.

DISCUSSION

In the contemporary landscape, social media has sparked revolutions across various domains, profoundly influencing both our personal and professional lives. Our research examined preclinical medical students' social media habits, attitudes, and its potential impact on academics and mental health, particularly depression and anxiety.

In our university, over 60% of preclinical medical students spend 1 to 5 hours daily on social media, aligning with Forbes data showing typical internet users spend about 2½ hours daily.²¹ In Saudi Arabia, 90.6% of medical students use social media for learning, spending at least 1 hour per day.²² In India, nearly 37% spend over 4 hours daily, while in Nepal, about 45% use platforms like Facebook for less than 1 hour daily.^{10,23} Socio-economic and demographic factors significantly impact social media usage.²⁴ Older students (30+ years) in our study spent less time (<1 hour daily) compared to younger students (below 25 years) who spend 2.1 to 5 hours daily which was a similar trend as reported by the Digital 2024-Deep Dive.²⁵

In our study, only 14.3% of students believed social media positively influenced their academic performance, while 37.3% reported negative effects. This contrasts with findings from Saudi Arabia, where over 60% of medical students found social media beneficial for understanding difficult concepts and relating basic science knowledge to clinical practice.^{1,22} In our study, 50% of students using social media for personal purposes reported a negative influence on their studies, compared to 31.8% of those using it for both personal and professional reasons. Although the difference wasn't statistically significant ($p=0.06$), the results suggest a trend explaining the variation in findings between studies.

In a previous study, researchers found a significant negative correlation between business students' social media use and their academic performance.^{3,18} However, our study found no significant difference in GPA among participants, regardless of their perceptions of social media effects. We also found no significant relationship between social media usage time and GPA. Individual differences, study habits, and other factors likely contribute to GPA

independently of social media use. Despite concerns that social media might harm educational achievements, our study did not support this. The discrepancy may stem from variations in social media use purposes. Future research should explore other mediating variables like study strategies and sleep patterns.

Most participants in our study actively used 2-5 social media platforms, with Instagram being the most popular, followed by WhatsApp, YouTube, Facebook, and others. Medical students' preferences for social media platforms varied across universities: Facebook was favoured at the university of Ottawa, WhatsApp at Rural medical college in India, Twitter at the university of Bisha college of medicine in Saudi Arabia, and YouTube at Batterjee medical college in Saudi Arabia.^{1,22,23,26} Factors influencing these preferences include platform-based trust, satisfaction, privacy protection, network effects, ease of use, and perceived usefulness. Studies show Facebook facilitates communication, collaborative learning, and idea exchange, while WhatsApp supports secure audiovisual sharing for instant learning.^{3,4,5} Instagram is used for visually engaging teaching points, Twitter for information dissemination and real-time communication, and YouTube for uploading educational content. LinkedIn and Hangouts cater to career-related interactions.^{5,6} Understanding platform preferences and their underlying factors can help shape effective communication, education, and collaboration strategies in the digital age.

Social media platforms have evolved beyond personal communication and leisure to play a significant role in enhancing medical students' academic experiences. Our study explored how students leverage social media for educational purposes. Participants used these platforms to discover course-related content, share academic resources, and engage in discussions about topics and assignments, fostering a sense of community and collective learning. This trend aligns with findings by previous studies, which observed increased use of social media for academic purposes, including communication, exam inquiries, and study resources.^{26,27} Facebook groups dedicated to specific courses facilitated engagement and peer discussions. Social media also helps students connect with medical experts through direct messages, forums, or professional networks, allowing them to seek advice, clarify doubts, and expand their knowledge.¹⁴ These findings suggest encouraging students to use social media for educational purposes by making learning content concise, visually appealing, and aligned with course objectives. Educators can play a pivotal role by actively participating in relevant social media groups, sharing updates, and fostering a positive learning environment. Overall, social media's integration into medical education underscores its potential to enhance learning, collaboration, and professional development.

In our study, most participants agreed that social media is valuable in the medical field, viewing it as an easy way to acquire knowledge, essential for professional

development, and a catalyst for creativity. Social media is seen as a necessity that contributes to improving healthcare quality and enhances the popularity of physicians. However, ethical concerns were raised about its use in medical practice. Over two-thirds believed that physicians using social media are more popular and have broader access to patient groups, but they were aware of the professional and legal risks. Differentiating reliable from incorrect medical information on social media is a challenge for both physicians and patients. Students had mixed reactions about social media as a barrier to professional use—some were concerned about its impact on busy schedules, while others worried it would consume too much time. Less than 25% actively sought new ways to use social media in their practice, and exploring novel applications was uncommon among participants. Salih and colleagues noted that participants acknowledged the usefulness of social media for educational purposes but admitted that inappropriate use could lead to time consumption, highlighting the delicate balance students must strike.¹ Avci and co-researchers found positive sentiments among students regarding digital tools, identifying a strong positive correlation between perceived usefulness and innovativeness.¹⁹ Medical students who saw the practical value of social media were more likely to embrace innovative approaches. Interestingly, ethics in their study demonstrated a low but positive correlation with other factors.

Our finding that 46% of students exhibited moderate to severe anxiety levels is noteworthy. Moreover, the observed correlation between anxiety scores and time spent on social media suggests a potential relationship. Students who spend more time on social media platforms may experience heightened anxiety due to various factors, such as social comparison, fear of missing out, and cyberbullying. Future studies could delve deeper into the specific mechanisms underlying this association. Interestingly, no significant correlation was found between depression scores and time spent on social media. This result contrasts with previous research that has often linked excessive social media use to depressive symptoms. It is possible that other factors, such as offline social support, coping strategies, or individual differences, play a more prominent role in depression among students. Investigating these factors could provide valuable insights. The study by Vongsuphakphan et al aligns with our findings. Their research highlights statistically significant associations between social media addiction and both depression and anxiety.¹¹ The increased risk of depression (2.36 times) and anxiety (3.48 times) in the addicted group underscores the importance of addressing social media use patterns in mental health interventions. Identifying thresholds for healthy usage and promoting digital well-being strategies could mitigate these risks.

Implications

Understanding medical students' views on social media is essential for curriculum design, professional development,

and digital literacy. Educators and institutions can use these insights to promote responsible social media use in medical education. Future research should enhance ethical awareness and maximize the benefits of digital tools.

Results emphasize the need for targeted interventions, involving educators, parents, and mental health professionals to encourage balanced online interactions, supportive communities, and digital literacy. Longitudinal studies should explore the causal relationships between social media use and mental health. Comprehensive training on social media use, focusing on ethics, risk management, and information validation, should be provided to students. This can facilitate the students to explore the effective ways to integrate social media into their learning process.

CONCLUSION

As the digital landscape evolves, social media is increasingly shaping educational paradigms, enhancing medical students' learning experiences, collaboration, and connections with experts. Most participants in the study acknowledged social media's utility in the medical field, viewing it as a means to acquire knowledge, foster professional growth, and spark creativity. However, these positive perceptions did not lead to significant differences in GPA. Additionally, there was no significant relationship between time spent on social media and students' academic performance. Understanding these attitudes is crucial for optimizing social media usage in medical education. Addressing ethical concerns and promoting responsible usage can enhance benefits while mitigating risks.

The study also examines the complex interplay between social media, anxiety, and depression among students. While anxiety was associated with time spent on social media, depression did not show a significant relationship. Anxiety and depression scores remained consistent regardless of the number of social media platforms used and whether participants used social media for personal or combined personal and professional purposes. Understanding these dynamics is essential for identifying students who may require targeted interventions and supporting mental health initiatives. Educators should engage students in discussions about responsible social media use while recognizing that individual experiences vary. This approach can ultimately support students in achieving their academic goals in the digital age.

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