

Social Media And Mental Health: A Case Of Nsambya Hospital, Kampala, Uganda

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Abstract

This study investigated the relationship between social media use and mental health, using patients and staff associated with Nsambya Hospital, Kampala, as the case. Social media has become deeply embedded in daily life, and concerns have grown about its psychological effects, especially among young adults. The main objective was to examine the relationship between social media use and mental health outcomes. Three specific objectives guided the study: to establish patterns of social media use; to assess the effect of social media use on anxiety, depression, and self-esteem; and to determine the relationship between intensity of use and mental health outcomes. A cross-sectional correlational design was used with 150 respondents selected through stratified random sampling. Data were collected using standardised scales adapted for the setting and analysed using descriptive statistics, Pearson correlation, and multiple regression. Results showed that heavy and problematic social media use was positively correlated with anxiety ($r = 0.54$) and depressive symptoms ($r = 0.49$) and negatively correlated with self-esteem ($r = -0.42$), all significant at $p < 0.01$. Regression indicated that intensity of use and problematic use jointly explained 46% of the variance in poor mental health outcomes. The study concluded that social media use is a significant, though not sole, contributor to mental health strain, and recommended digital-wellbeing education and screening in health settings. This article discusses a sensitive topic; readers affected by these issues are encouraged to seek professional support.

Keywords: Social media, mental health, anxiety, depression, self-esteem, Nsambya Hospital, Uganda.

1.0 Introduction and Background

The rapid advancement of information and communication technologies has fundamentally transformed the way people communicate, interact, access information, and participate in social and economic activities (Frank, Nelson, Kazaara, et al., 2023). Among the most influential technological innovations of the twenty-first century has been the emergence of social media platforms, which have revolutionized interpersonal communication by enabling users to create, share, and exchange content instantly across the globe (Kazaara, Charles, et al., 2023). Social media refers to internet-based applications and digital platforms that facilitate user-generated content, online networking, and real-time communication through text, images, audio, and video. Popular platforms such as Facebook, Instagram, WhatsApp, TikTok, X (formerly Twitter), Snapchat, and YouTube have become integral parts of everyday life, particularly among adolescents and young adults (Flavia et al., 2023). These platforms support educational activities, professional networking, business promotion, entertainment, civic participation, and social interaction while eliminating geographical barriers to communication (Julius & Kazaara, 2026c). As digital technologies continue to evolve, social media has become one of the most widely used communication tools worldwide, with billions of active users accessing multiple platforms daily through smartphones and other internet-enabled devices (DataReportal, 2025; International Telecommunication Union [ITU], 2024).

Received: 18.06.2026

Accepted: 22.06.2026

Published on: 30.06.2026

Globally, social media usage has experienced unprecedented growth over the past decade, becoming deeply embedded in people's daily routines. According to recent digital reports, more than five billion people worldwide actively use social media, representing over sixty percent of the global population(Kazaara, Kazaara, et al., 2023). Young adults constitute the largest proportion of these users, with many spending between two and four hours each day engaging with various platforms for communication, entertainment, education, news consumption, and relationship building(Avirneni et al., 2023). The widespread availability of affordable smartphones, expanding internet infrastructure, and increasing digital literacy have accelerated social media adoption across both developed and developing countries(Caroline et al., 2026). While these platforms provide numerous opportunities for information sharing, social connectedness, creativity, and access to support networks, their growing influence has also attracted increasing attention from researchers, healthcare professionals, educators, and policymakers due to concerns regarding their potential effects on psychological well-being and mental health (DataReportal, 2025; UNESCO, 2024).

Mental health is recognized as an essential component of overall health and well-being. The World Health Organization defines mental health as a state of well-being in which individuals realize their abilities, cope effectively with normal life stresses, work productively, and contribute meaningfully to their communities(Edgar & Moses, 2023). Good mental health enables people to maintain healthy relationships, regulate emotions, make informed decisions, and adapt successfully to life's challenges(Kazaara & Kazaara, 2025). Conversely, poor mental health encompasses a wide range of psychological conditions, including anxiety disorders, depression, stress-related disorders, low self-esteem, emotional distress, and other psychosocial difficulties that impair daily functioning and quality of life(Nelson, 2024). Mental health disorders represent one of the leading causes of disability globally, with young people disproportionately affected due to developmental transitions, academic pressures, employment challenges, social expectations, and increasing exposure to digital environments. Consequently, understanding the determinants of mental health among young adults has become a major public health priority worldwide (World Health Organization [WHO], 2024; United Nations, 2024).

In recent years, considerable attention has been directed toward understanding the relationship between social media use and mental health outcomes(Muhamad et al., 2023). Although social media offers significant benefits such as maintaining social relationships, accessing educational resources, obtaining health information, expressing personal identity, and receiving emotional support, excessive or problematic use has been associated with several adverse psychological outcomes(Muhamad et al., 2023). Numerous empirical studies suggest that prolonged social media engagement may contribute to increased symptoms of anxiety, depression, loneliness, stress, sleep disturbances, reduced life satisfaction, and diminished self-esteem, particularly among adolescents

and young adults(Aristovnik et al., 2023). Researchers argue that these negative outcomes are often influenced not simply by the amount of time spent online but by the nature and quality of online interactions, individual psychological characteristics, and patterns of social media engagement(Lydia et al., 2023). Consequently, current research increasingly distinguishes between healthy, purposeful social media use and problematic or addictive usage characterized by compulsive checking, loss of control, and interference with daily functioning (American Psychological Association, 2023; WHO, 2024).

Several theoretical mechanisms have been proposed to explain how social media influences mental health. One of the most extensively studied mechanisms is social comparison, whereby individuals evaluate themselves against carefully curated images and achievements presented by others on social networking platforms(Christopher & Nelson, 2024). Continuous exposure to idealized lifestyles, physical appearances, academic accomplishments, and material success may lead users to perceive themselves as less successful or attractive, thereby reducing self-esteem and increasing emotional distress(Frank, Nelson, Ariyo, et al., 2023). Another important mechanism is the Fear of Missing Out (FoMO), defined as the persistent concern that others are experiencing rewarding events without one's participation. FoMO often motivates frequent checking of social media platforms, contributing to compulsive use, sleep disruption, and heightened anxiety. Additionally, exposure to cyberbullying, misinformation, online harassment, unrealistic beauty standards, and negative online interactions has been associated with increased psychological vulnerability(Alex & Moses, 2024). At the same time, social media can positively influence mental health by providing opportunities for peer support, health education, emotional expression, community engagement, and access to professional mental health resources(Aristovnik et al., 2023). Therefore, the relationship between social media and mental health remains complex, multidimensional, and influenced by individual, social, and contextual factors (American Psychological Association, 2023; UNICEF, 2024).

The increasing prevalence of mental health challenges among young adults has become a major global public health concern. The World Health Organization estimates that approximately one in seven young people experiences a mental health condition, with anxiety and depressive disorders ranking among the most common psychological problems affecting this age group. Mental health disorders contribute significantly to poor academic performance, reduced productivity, substance abuse, interpersonal difficulties, self-harm risk, and decreased quality of life(Julius & Kazaara, 2026b). Advances in digital technologies have introduced new psychosocial risk factors that interact with traditional determinants such as family relationships, socioeconomic status, educational pressures, employment insecurity, and exposure to traumatic experiences(Alex & Devis, 2023). As social media becomes increasingly integrated into everyday life, healthcare systems and policymakers are placing greater emphasis on understanding its potential contribution to both positive and negative mental health outcomes in order to develop effective prevention and intervention strategies (WHO, 2024; United Nations, 2024).

Received: 18.06.2026

Accepted: 22.06.2026

Published on: 30.06.2026

In Uganda, rapid improvements in telecommunications infrastructure, mobile broadband coverage, and smartphone accessibility have substantially increased internet usage and social media participation over the past decade. The expansion of affordable smartphones and relatively lower mobile internet costs has enabled a growing proportion of the population, particularly young adults residing in urban and peri-urban areas, to access multiple social media platforms on a daily basis. These platforms are widely used for communication, online learning, business promotion, entertainment, news consumption, political engagement, and maintaining social relationships (Kazaara & Kazaara, 2025). While increased digital connectivity has created numerous educational and economic opportunities, concerns have also emerged regarding excessive screen time, internet addiction, cyberbullying, online misinformation, sleep disruption, and their potential effects on mental health (Kazaara & Kazaara, 2025). Despite the rapid expansion of social media use in Uganda, empirical evidence examining its psychological implications within the local context remains relatively limited compared to studies conducted in high-income countries, highlighting the need for context-specific research (Uganda Communications Commission [UCC], 2024; DataReportal, 2025).

Nsambya Hospital, one of Uganda's leading private not-for-profit referral hospitals located in Kampala, serves a large and diverse patient population drawn from both urban and surrounding communities (Indriasih et al., 2023). The hospital provides comprehensive healthcare services, including mental health assessment, counselling, psychiatric care, and general medical services to individuals across different age groups. Given its location within Uganda's largest metropolitan area, the hospital serves many adolescents and young adults who are active users of social media and increasingly seek healthcare services for stress, anxiety, depression, sleep disturbances, and other psychological concerns (Kazaara & Kazaara, 2025). The growing integration of digital technologies into everyday life among this population presents an important opportunity to examine how social media usage patterns relate to mental health outcomes within a Ugandan clinical environment. Understanding these relationships can support healthcare providers in identifying digital lifestyle factors that may influence patients' psychological well-being while informing health promotion and mental health intervention strategies tailored to young adults.

2.0 Statement of the Problem

Health workers at Nsambya Hospital and similar facilities increasingly encounter young patients presenting with anxiety, low mood, and stress that appear connected to intensive social-media engagement (Christopher & Nelson, 2024). Yet mental-health services rarely screen for or address digital behaviour, and there is limited local evidence quantifying the relationship between social media use and mental health outcomes in this population (Frank, Nelson, Kazaara, et al., 2023). Without such evidence, interventions cannot be properly targeted. This study

addressed the gap by examining how patterns and intensity of social media use relate to anxiety, depression, and self-esteem among respondents associated with Nsambya Hospital.

3.0 Objectives

3.1 Main Objective

To examine the relationship between social media use and mental health outcomes among respondents associated with Nsambya Hospital, Kampala.

3.2 Specific Objectives

1. To establish the patterns and intensity of social media use among the respondents.
2. To assess the effect of social media use on anxiety, depression, and self-esteem.
3. To determine the relationship between intensity of social media use and mental health outcomes.

4.0 Literature Review

Theoretical explanations for the link between social media and mental health draw on social comparison theory, which holds that people evaluate themselves against others; on curated platforms this comparison is frequently upward and unfavourable, lowering self-esteem and mood (Julius & Kazaara, 2026d). The displacement hypothesis argues that time online displaces sleep, exercise, and face-to-face contact that protect mental health, while the concept of fear of missing out captures the anxiety generated by constant awareness of others' activities (Julius & Kazaara, 2026a).

Empirical studies report mixed but generally concerning findings: passive use (scrolling without interacting) is more strongly associated with depressive symptoms than active use, and problematic or addictive patterns correlate with anxiety and poor sleep (Kyobutungi & Nelson, 2025). Some research emphasizes benefits, including social support and access to mental-health information, suggesting that how social media is used matters more than whether it is used (Julius & Audrey, 2026). African studies remain relatively few, and clinical-setting evidence in Uganda is scarce. This study contributes local, health-setting evidence and distinguishes intensity and problematic use from mere presence on platforms (Kazaara & Kazaara, 2025).

5.0 Methodology

A cross-sectional correlational design was adopted. The population comprised young-adult outpatients and staff associated with Nsambya Hospital. A sample of 150 respondents was selected through stratified random sampling to reflect age and gender distribution. Social media use was measured through a use-intensity and problematic-use scale, while mental health outcomes were measured using adapted anxiety, depression, and self-esteem scales scored on standard Likert formats (Jallow et al., 2022).

Data were analysed in SPSS using descriptive statistics(Nelson et al., 2022), Pearson correlation, and multiple regression. Instrument reliability was acceptable (Cronbach's alpha 0.80–0.87 across scales)(Julius & Matovu, 2025). Ethical clearance was obtained, and informed consent, confidentiality, voluntary participation, and the right to withdraw were observed. Given the sensitivity of the topic, respondents were provided with information on where to obtain professional support, and no clinical diagnoses were made; the study measured symptom levels, not disorders.

6.0 Results and Interpretation

6.1 Patterns of Social Media Use

Respondents reported daily time spent and preferred platforms, summarised below.

Table 1: Patterns of social media use (N = 150)

Indicator	Category	Freq.	Percent
Daily time on social media	< 2 hours	34	22.7
	2–4 hours	61	40.7
	> 4 hours	55	36.7
Main mode of use	Mostly passive (scrolling)	89	59.3
	Mostly active (posting)	61	40.7
Checks phone within 15 min of waking	Yes	104	69.3

The findings presented in Table 1 described the patterns of social media use among the 150 respondents included in the study. The results revealed that the largest proportion of respondents, 61 participants (40.7%), spent between two and four hours per day on social media platforms. This finding suggested that moderate daily social media engagement was the most common pattern among the respondents. Spending several hours each day on social networking platforms indicated that social media had become an integral part of respondents' daily routines, providing opportunities for communication, entertainment, information sharing, and social interaction.

The findings further indicated that 55 respondents (36.7%) reported spending more than four hours per day on social media. This relatively large proportion suggested that a substantial number of respondents were heavy users of social media platforms. Extended daily exposure implied that many individuals devoted a significant amount of time to online activities, potentially reducing the time available for academic work, physical activities, face-to-face social interactions, and adequate rest. In contrast, only 34 respondents (22.7%) reported spending less than two hours per day on social media, indicating that lighter social media use was comparatively less common within the study population.

Regarding the primary mode of social media engagement, the findings revealed that 89 respondents (59.3%) mostly engaged in passive social media use, such as scrolling through content, viewing posts, and consuming information without actively creating or sharing content. This finding suggested that the majority of respondents primarily used social media for observation rather than participation. Passive use has often been associated with increased social comparison and reduced interpersonal interaction, making this finding particularly relevant to the study of mental health outcomes. Conversely, 61 respondents (40.7%) reported that they mostly engaged in active social media use, including posting content, commenting, sharing information, and interacting directly with other users. Although active engagement was less common, it represented a substantial proportion of respondents who used social media as a platform for communication and self-expression. The findings also showed that 104 respondents (69.3%) reported checking their phones within fifteen minutes of waking up, while the remaining respondents did not. This finding suggested that for the majority of participants, social media and mobile phone use formed an immediate part of their daily routine. The high proportion of respondents exhibiting this behaviour indicated a strong dependence on mobile devices and social networking platforms shortly after waking, reflecting the growing integration of digital technology into everyday life.

6.2 Descriptive Statistics for Mental Health Indicators

Table 2: Mean scores on mental health indicators

Indicator (higher = more)	Mean	Std. Dev	Interpretation
Anxiety symptoms	3.38	0.82	Moderate
Depressive symptoms	3.12	0.88	Moderate
Self-esteem	3.05	0.79	Moderate/low
Problematic social media use	3.44	0.85	Elevated
Sleep disturbance	3.29	0.90	Moderate

The findings presented in Table 2 indicated that respondents experienced moderate levels of several mental health outcomes, with problematic social media use emerging as the most pronounced concern. Problematic social media use recorded the highest mean score of 3.44 with a standard deviation of 0.85, which was interpreted as elevated. This finding suggested that many respondents demonstrated behaviours associated with excessive or compulsive social media use, including difficulty controlling the amount of time spent online, frequent urges to check social media platforms, and possible interference with daily responsibilities. The relatively moderate standard deviation indicated that respondents' experiences were reasonably consistent, although some variation existed in the severity of problematic use.

The findings further revealed that anxiety symptoms recorded a mean score of 3.38 with a standard deviation of 0.82, representing a moderate level. This suggested that respondents experienced moderate levels of anxiety, including feelings of nervousness, excessive worry, and emotional tension. The relatively low standard deviation indicated that respondents shared fairly similar perceptions regarding the frequency and intensity of anxiety symptoms, suggesting that moderate anxiety was a common experience among the study participants.

Similarly, sleep disturbance registered a mean score of 3.29 with a standard deviation of 0.90, which was also interpreted as moderate. This finding suggested that respondents frequently experienced challenges such as poor sleep quality, difficulty falling asleep, interrupted sleep, or insufficient rest. The moderate variability in responses implied that while sleep problems were common, their severity differed across individuals. These findings highlighted sleep disturbance as another important mental health concern within the study population.

The findings also showed that depressive symptoms recorded a mean score of 3.12 with a standard deviation of 0.88, indicating a moderate level. This suggested that respondents occasionally experienced symptoms associated with depression, including sadness, loss of motivation, reduced interest in daily activities, and emotional distress. Although these symptoms were not reported at extremely high levels, the findings indicated that depressive experiences were relatively common among the participants. Finally, self-esteem recorded the lowest mean score of 3.05 with a standard deviation of 0.79, which was interpreted as moderate to low. This finding suggested that respondents generally possessed relatively modest levels of self-confidence and self-worth. The relatively low standard deviation indicated consistency in respondents' perceptions of their self-esteem levels.

6.3 Correlation Analysis

Table 3: Correlations between social media use and mental health

Variable	Anxiety	Depression	Self-esteem
Use intensity (hours/day)	0.47**	0.41**	-0.34**
Problematic use	0.54**	0.49**	-0.42**
Passive use	0.38**	0.44**	-0.31**

Note: ** significant at 0.01 level (2-tailed).

The correlation analysis presented in Table 3 revealed statistically significant relationships between social media use and mental health outcomes at the 0.01 level of significance. The findings demonstrated that greater social media use was associated with poorer mental health outcomes, while higher levels of social media engagement were associated with lower self-esteem. Specifically, social media use intensity, measured by the number of hours spent on social media each day, exhibited a moderate positive relationship with anxiety symptoms ($r = 0.47$, $p < 0.01$). This finding suggested that respondents who spent more time on social media were more likely to

Received: 18.06.2026

Accepted: 22.06.2026

Published on: 30.06.2026

experience increased anxiety. The statistically significant positive relationship implied that as daily social media use increased, anxiety symptoms also tended to increase. Similarly, use intensity demonstrated a moderate positive relationship with depressive symptoms ($r = 0.41$, $p < 0.01$). This finding suggested that respondents who devoted more hours to social media use were more likely to report symptoms associated with depression. The statistically significant relationship indicated that prolonged social media engagement was associated with poorer emotional well-being.

Conversely, social media use intensity exhibited a moderate negative relationship with self-esteem ($r = -0.34$, $p < 0.01$). This finding suggested that increased time spent on social media was associated with lower levels of self-esteem. The negative correlation implied that respondents who used social media more intensively were less likely to report positive perceptions of themselves, possibly reflecting the influence of social comparison and online interactions. The findings further revealed that problematic social media use demonstrated the strongest relationships with the mental health indicators assessed. Specifically, problematic use exhibited a strong positive relationship with anxiety symptoms ($r = 0.54$, $p < 0.01$), indicating that individuals exhibiting compulsive or excessive social media behaviours were considerably more likely to experience anxiety. Likewise, problematic use showed a moderate positive relationship with depressive symptoms ($r = 0.49$, $p < 0.01$), suggesting that higher levels of problematic social media use were associated with increased depressive symptoms. Furthermore, problematic social media use demonstrated a moderate negative relationship with self-esteem ($r = -0.42$, $p < 0.01$), indicating that individuals with greater dependence on social media were more likely to experience lower levels of self-worth and confidence.

6.4 Regression Analysis

A composite “poor mental health” index (anxiety + depression, reverse-scored self-esteem) was regressed on use intensity and problematic use.

Table 4: Regression predicting poor mental health outcomes

Predictor	Beta (β)	t-value	Sig. (p)
(Constant)	—	2.44	0.016
Use intensity	0.29	3.71	0.000
Problematic use	0.44	5.58	0.000
R = 0.678; R ² = 0.460; Adj. R ² = 0.452			
F(2,147) = 62.6; p = 0.000			

The multiple regression analysis presented in Table 4 examined the extent to which social media use intensity and problematic social media use predicted poor mental health outcomes. The overall regression model was found to be statistically significant ($F(2,147) = 62.6$, $p = 0.000$), indicating that the predictor variables jointly explained a

significant proportion of the variation in mental health outcomes. The multiple correlation coefficient ($R = 0.678$) demonstrated a strong positive relationship between the independent variables and poor mental health. Furthermore, the coefficient of determination ($R^2 = 0.460$) indicated that 46.0% of the variation in poor mental health outcomes was explained by social media use intensity and problematic social media use. The adjusted coefficient of determination (Adjusted $R^2 = 0.452$) further indicated that after adjusting for the number of predictors included in the model, approximately 45.2% of the variation in poor mental health remained explained by the model, while the remaining 54.8% was attributable to other factors not included in the study.

Among the predictor variables, problematic social media use emerged as the strongest predictor of poor mental health, with a standardized beta coefficient of $\beta = 0.44$, a t-value of 5.58, and a highly significant p-value of 0.000. This finding suggested that respondents who exhibited compulsive, excessive, or uncontrolled patterns of social media use were significantly more likely to experience poor mental health outcomes, including increased anxiety, depressive symptoms, reduced self-esteem, and sleep-related difficulties (Nelson et al., 2023). The strength and statistical significance of this predictor underscored the substantial influence of problematic social media behaviours on psychological well-being. Similarly, social media use intensity was found to exert a statistically significant positive influence on poor mental health, with a standardized beta coefficient of $\beta = 0.29$, a t-value of 3.71, and a p-value of 0.000. This finding indicated that increasing the number of hours spent on social media significantly contributed to poorer mental health outcomes, although its influence was comparatively smaller than that of problematic social media use.

7.0 Discussion of Results

The findings align with social-comparison and displacement theories: heavier and especially problematic social media use accompanied higher anxiety and depressive symptoms and lower self-esteem. That problematic use outweighed sheer intensity as a predictor supports the view that patterns of engagement—compulsive checking, passive scrolling, and comparison—drive harm more than duration alone. The strong presence of early-morning phone checking and passive use in this sample suggests habitual patterns that could be targeted by behavioural interventions.

At the same time, the model explained under half the variance, confirming that social media operates alongside, not instead of, other determinants of mental health. This has practical implications for Nsambya Hospital: digital behaviour is a plausible screening dimension, but interventions must sit within broader mental-health care. The results should be read as associational; the cross-sectional design cannot establish that social media causes the symptoms, since distressed individuals may also use social media more.

8.0 Conclusions

The study concludes that social media use—particularly problematic and passive use—is significantly associated with higher anxiety and depressive symptoms and lower self-esteem among respondents associated with Nsambya Hospital. Intensity of use matters, but the compulsive quality of use matters more. Social media is a meaningful contributor to psychological strain in this population, though it acts together with other life and health factors rather than alone.

9.0 Recommendations

Health facilities such as Nsambya Hospital should incorporate brief digital-behaviour screening into mental-health assessments for young adults.

Digital-wellbeing education—covering mindful use, reducing passive scrolling, and healthy sleep-phone boundaries—should be promoted among young people.

Clinicians should address problematic-use patterns within broader mental-health care rather than treating social media in isolation.

Awareness campaigns should highlight both risks and benefits of social media, encouraging supportive and active over passive, comparison-driven use.

Future research should use longitudinal designs to clarify the direction of the relationship.

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Received: 18.06.2026

Accepted: 22.06.2026

Published on: 30.06.2026

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