

The Influence of Social Media on the Mental Health of Jamaicans: A Review

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ABSTRACT

Social media usage has become a pervasive element of contemporary life in Jamaica, shaping interpersonal communication, identity formation, and cultural expression. While platforms like Facebook, Instagram, WhatsApp, and TikTok offer avenues for community engagement, they also present risks to psychological well-being. This review examines the extant literature on social media's influence on the mental health of Jamaicans, synthesising findings from empirical studies, theoretical perspectives, and especially the contributions of Paul Andrew Bourne and colleagues on digital communication, social dynamics, and psychosocial outcomes. Primary themes include anxiety, depression, self-esteem, cyberbullying, body image concerns, addictive patterns of use, and the role of cultural context in moderating psychological impacts. The review highlights directions for research, public health policy, and culturally sensitive interventions aimed at safeguarding youth and adult mental health in an increasingly digitalised Jamaican society.

Keywords: Social Media, Mental Health, Jamaica, Anxiety, Depression, Cyberbullying, Wellbeing

Introduction

The proliferation of social media has fundamentally reshaped human interaction at the international level, creating digital environments in which individuals construct identities, perform social roles, and negotiate belonging [1]. Across North America and Europe, empirical research demonstrates that frequent engagement with platforms such as Instagram, Facebook, and TikTok is associated with increased risks of anxiety, depressive symptomatology, social comparison, and problematic use behaviours [2,3]. Regionally, Caribbean societies have experienced similar transformations, as mobile broadband expansion and declining data costs have facilitated widespread digital participation among youth [4-6]. In Jamaica, smartphone penetration and youth-driven digital culture have accelerated social media adoption, embedding these platforms into everyday communication, entertainment, commerce, and political discourse. Bourne and Lambert argue that social media has become a central psychosocial environment for Jamaicans, influencing emotional expression, peer validation, and perceptions of self-worth [7,8]. Empirical evidence from

Jamaican samples indicates that patterns of social media use vary by age, gender, and socioeconomic status, thereby shaping differential mental health outcomes (Bourne et al., 2024). While these platforms offer connection and informational exchange, they simultaneously introduce psychosocial stressors that warrant rigorous scholarly examination.

International scholarship consistently links excessive or maladaptive social media use with anxiety, depression, loneliness, sleep disruption, and reduced self-esteem, particularly among adolescents and young adults and university students [9-13]. Andreassen conceptualised problematic social networking as a behavioural addiction characterised by salience, mood modification, tolerance, withdrawal, conflict, and relapse, providing a framework applicable to diverse cultural contexts. Within the Caribbean region, concerns have intensified regarding cyberbullying, online harassment, and exposure to harmful content, which can amplify pre-existing vulnerabilities among youth populations [14-17]. In Jamaica specifically, Bourne et al. found that certain types of social media engagement, particularly passive consumption and validation-seeking behaviours, were significantly associated with poorer mental health indicators, including heightened anxiety and diminished self-esteem [18].

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Moreover, Bourne highlighted that Jamaican social media content creators exposed to online aggression and violent digital cultures reported psychological strain, emotional exhaustion, and symptoms consistent with depressive affect [14]. These findings align with global research demonstrating that curated digital portrayals of success and attractiveness intensify social comparison processes and perceived inadequacy [3]. Collectively, the evidence suggests that social media operates not merely as a communication tool but as a powerful psychosocial determinant of well-being.

Despite these risks, social media also provides opportunities for health promotion, peer support, and civic engagement at national, regional, and international levels. Globally, digital platforms have facilitated mental health advocacy campaigns and peer-support communities that reduce stigma and promote help-seeking behaviours [1]. In the Caribbean, online spaces have been used to disseminate public health information and mobilise youth participation in social causes, illustrating the dual-edged nature of digital engagement. Bourne and Brown demonstrated that in Jamaica, social media has been effectively utilised for health promotion initiatives related to HIV prevention, reproductive health, and vaccination campaigns, indicating potential protective benefits when usage is structured and informative [19]. Nevertheless, Bourne and Lambert cautioned that without digital literacy training and psychosocial safeguards, vulnerable users may experience adverse emotional consequences from sustained exposure to online criticism, unrealistic social comparisons, and misinformation [7]. The Jamaican sociocultural context, characterised by strong community ties yet persistent socioeconomic inequalities, further mediates how digital stressors are internalised and expressed. Therefore, synthesising national evidence with regional and international scholarship underscores the urgent need for culturally grounded research, preventive interventions, and policy frameworks to ensure that social media enhances rather than undermines the mental health of Jamaicans.

Rationale for Examining the Phenomenon

The rapid expansion of digital technologies and social media platforms over the past decade has transformed communication patterns and psychosocial interactions globally, with significant implications for small island developing states such as Jamaica. Increased smartphone penetration, affordable mobile broadband, and algorithm-driven content distribution have embedded social media into everyday life across demographic groups. These platforms now influence identity formation, social comparison processes, political discourse, economic activity, and cultural expression. Empirical research from Jamaica demonstrates that different patterns of social media engagement are associated with measurable variations in mental health outcomes, including anxiety, depressive symptoms, and psychosocial distress [18]. Given the accelerating pace of technological change and platform innovation, continuous scholarly investigation is necessary to assess how evolving digital environments intersect with local structural realities and psychosocial determinants.

From a theoretical perspective, examining this phenomenon today is essential because social media operates as a socio-ecological determinant of health that interacts with poverty, inequality, exposure to violence, stigma, and limited access

to mental health services. Bourne's scholarship on social determinants of health underscores that psychological wellbeing in Jamaica is shaped not only by individual behaviour but also by structural and environmental conditions that amplify vulnerability [18]. Digital environments may intensify these structural pressures by exposing users to social comparison, cyberbullying, misinformation, and algorithmically amplified content that reinforces emotional reactivity. International evidence further suggests that excessive or maladaptive engagement contributes to behavioural addiction patterns and disrupted sleep, which in turn affect emotional regulation and cognitive functioning [9]. Therefore, studying this phenomenon in the present context allows researchers to analyse digital risk factors as part of broader systemic determinants of mental health rather than as isolated behavioural issues.

From a policy and public health standpoint, contemporary investigation is critical because governments, educational institutions, and health systems require locally generated data to design evidence-informed interventions. In Jamaica and across the Caribbean, digital literacy programmes, mental health awareness campaigns, and regulatory discussions regarding platform accountability remain in developmental stages. Without updated empirical data, policymakers risk relying on international evidence that may not fully reflect local sociocultural realities. Moreover, social media also serves as a powerful tool for health promotion, stigma reduction, and community mobilisation, demonstrating its dual potential as both a risk environment and a protective resource. Conducting rigorous research today ensures that interventions are responsive to current usage patterns, technological innovations, and mental health challenges, ultimately supporting strategies that promote digital resilience and psychological well-being within the Jamaican population.

Theoretical Framework

Understanding the influence of social media on mental health necessitates situating digital engagement within established psychological and sociocultural theories that explain behaviour, cognition, and environmental interaction. Social cognitive theory posits that individuals learn attitudes and behaviours through observation, imitation, and reinforcement within social contexts [20]. In digital environments, users are repeatedly exposed to curated and often idealised representations of peers, celebrities, and influencers, which shape perceived norms regarding success, attractiveness, and lifestyle. International research demonstrates that repeated exposure to idealised online portrayals strengthens upward social comparison and internalisation of unrealistic standards, thereby increasing vulnerability to anxiety and depressive symptoms [1]. Within the Caribbean region, similar processes unfold as youth engage with globalised digital content that may conflict with local cultural expectations. In Jamaica, Bourne et al. found that validation-seeking behaviours and passive consumption of social media content were associated with poorer self-reported mental health outcomes [18]. Thus, social cognitive processes help explain how observational learning and reinforcement mechanisms embedded in social media platforms may contribute to psychological distress among Jamaican users.

Identity formation theory further illuminates the relationship between social media engagement and mental health, particularly during adolescence and emerging adulthood. Eriksonian

perspectives emphasise that identity development involves exploration, role experimentation, and feedback from significant others, processes now increasingly mediated by digital platforms [21]. Social media provides Jamaican youth with opportunities to construct and negotiate identities in relation to peers, diasporic communities, and global audiences. However, algorithm-driven feedback systems, such as likes, shares, and comments, create quantifiable metrics of social approval that may intensify self-evaluative processes and emotional dependency on online validation. Empirical research from high-income countries links heavy social media use with diminished self-esteem and increased depressive symptoms among adolescents who rely heavily on online affirmation [3]. Bourne and Lambert similarly observed that Jamaican users reporting compulsive engagement patterns experienced heightened psychological strain and mood instability [7]. Consequently, identity theory underscores how digital feedback loops can either support adaptive self-concept development or exacerbate insecurity and emotional vulnerability.

Ecological models expand the analysis by emphasising the dynamic interaction between individual, interpersonal, community, and societal systems in shaping mental health outcomes [22]. From this perspective, social media cannot be examined in isolation from offline realities such as family dynamics, socioeconomic inequality, exposure to community violence, and educational opportunity. Regionally, Caribbean societies face structural inequalities and high youth unemployment rates that may heighten sensitivity to online comparisons of wealth and mobility. In Jamaica, Bourne's broader scholarship on social determinants of health highlights how poverty, social stratification, and exposure to violence influence psychological well-being, thereby interacting with digital stressors to compound mental health risks [7]. For example, a Jamaican adolescent exposed simultaneously to economic hardship and online portrayals of conspicuous consumption may experience intensified feelings of inadequacy or marginalisation. International evidence also suggests that supportive family and community networks can buffer negative digital effects by fostering resilience and critical media literacy [1]. Therefore, ecological and cultural perspectives provide a comprehensive framework for understanding how global digital influences intersect with Jamaica's sociocultural and structural context to shape mental health outcomes.

Prevalence and Patterns of Social Media Use in Jamaica

Empirical evidence indicates that social media engagement in Jamaica is widespread, particularly among adolescents and young adults who comprise the most digitally active segment of the population. National surveys and regional assessments of Caribbean internet usage consistently show high penetration rates of mobile broadband and smartphone ownership, facilitating continuous online connectivity. Platforms such as WhatsApp and Facebook are widely utilised for interpersonal communication, community mobilisation, business promotion, and political discourse, while visually oriented platforms such as Instagram and TikTok have experienced rapid growth among younger users. International scholarship suggests that the integration of social media into daily life reflects broader global patterns of digital immersion and networked individualism [1]. In Jamaica, Bourne et al. reported that a substantial proportion

of respondents accessed social media multiple times daily, with usage patterns differing by age and gender [7]. These findings mirror global trends in which youth engagement is characterised by both active content creation and passive scrolling behaviours [2]. Collectively, the evidence underscores that social media is not peripheral but central to contemporary social interaction within Jamaican society.

The integration of social media into daily routines has implications for behavioural regulation, time allocation, and psychosocial wellbeing. International experimental research demonstrates that limiting social media use can significantly reduce symptoms of loneliness and depression, suggesting a dose-response relationship between usage intensity and psychological outcomes [3]. Heavy engagement, particularly during late-night hours, has been associated with sleep disruption, reduced academic performance, and impaired concentration among adolescents. Within the Caribbean context, educators and mental health practitioners have expressed concern that constant connectivity may displace face-to-face interaction and restorative activities. Bourne and Lambert found that compulsive checking behaviours and prolonged screen time were positively correlated with reported anxiety and mood fluctuations among Jamaican participants [18]. These behavioural patterns align with addiction frameworks that conceptualise excessive social networking as involving tolerance, withdrawal symptoms, and interference with daily functioning [2]. Therefore, while digital platforms enhance communication efficiency, their pervasive presence in daily routines may undermine psychological stability when usage becomes excessive.

Patterns of use in Jamaica are also shaped by socioeconomic conditions, cultural norms, and transnational influences. The Jamaican diaspora contributes to sustained digital communication flows, reinforcing WhatsApp and Facebook as tools for maintaining familial and economic ties across borders. At the same time, exposure to globalised content portraying affluence, beauty standards, and lifestyle ideals may intensify social comparison processes among local youth. Bourne et al. observed that passive consumption of aspirational content was associated with lower self-esteem and increased emotional distress, particularly among younger respondents [7]. Regionally, similar trends have been documented across Caribbean territories, where digital participation intersects with structural inequalities and youth unemployment. International research further indicates that the psychological effects of social media are moderated by contextual factors such as parental monitoring, digital literacy, and offline social support [1]. Consequently, understanding prevalence and usage patterns in Jamaica requires an integrated analysis that situates digital behaviours within broader social, economic, and cultural realities.

Bourne's Empirical Studies on Social Media and Mental Health in Jamaica

Empirical investigations conducted by Bourne and colleagues provide quantitative evidence demonstrating a statistically significant relationship between social media engagement and mental health outcomes among Jamaican adults. In Bourne et al., a cross-sectional survey design was implemented using a relatively large adult sample recruited through digital distribution methods [7]. The study applied validated psychological well-

being measures and estimated associations using multivariate regression modelling. The primary statistical finding revealed a significant negative regression coefficient between hours spent on social media and psychological well-being scores, suggesting that increased intensity of online engagement was associated with diminished mental health status. Additionally, age demonstrated a positive association with well-being, indicating that younger cohorts exhibited both higher usage intensity and lower psychological resilience within the model. The explanatory power of the regression model indicated that digital engagement variables contributed meaningfully to variance in mental health outcomes, although a substantial proportion of variance remained unexplained, highlighting the multifactorial nature of psychological well-being.

In a subsequent study, Bourne and Lambert extended the analysis by disaggregating social media exposure according to platform type rather than treating digital usage as homogeneous [7]. Using survey-based data and comparative statistical modelling, the authors assessed differences in anxiety, depression, self-esteem, and internet addiction across platforms such as Facebook, Instagram, TikTok, and YouTube. Results demonstrated statistically significant platform-level variation. Facebook users reported relatively lower anxiety levels and higher self-esteem scores compared to users of visually intensive and algorithmically driven platforms. In contrast, TikTok and Instagram engagement were associated with elevated depressive symptoms and stronger indicators of compulsive usage patterns. These findings suggest that algorithmic design features and content structures contribute to differentiated psychological effects rather than uniform digital harm.

Bourne further expanded the empirical scope by examining social media content creators and the psychological implications of digital vulgarity, violence, and monetisation systems [14]. This study also employed survey methodology combined with sociocultural interpretation to assess stress levels and mental health outcomes among creators operating in competitive algorithmic environments. Findings indicated that higher exposure to violent or provocative content production strategies was associated with increased psychological strain, emotional exhaustion, and behavioural addiction tendencies. From a statistical perspective, these associations reinforce the argument that engagement intensity and content orientation significantly predict mental health outcomes within Jamaica's digital ecosystem.

Other Jamaican Studies on Social Media and Mental Health

Nationally representative polls have also provided descriptive evidence regarding perceived mental health impacts of social media among Jamaican youth. For example, a UNICEF U-Report Jamaica poll involving approximately 280 adolescents found that 71 % of respondents believed social media negatively affected their mental health, largely due to unrealistic portrayals of success, body image standards, and peer pressure [23]. An earlier U-Report survey with roughly 892 young respondents reported that nearly half perceived social media to have a significant influence on youth mental health, with many participants reporting daily usage between six and ten hours [24]. Although these polls are not peer-reviewed academic studies, they provide important epidemiological insight into youth

perceptions and highlight widespread concern regarding stress, social comparison, and cyberbullying in digital spaces. From a public health perspective, such data contribute to understanding subjective mental health experiences within Jamaica's digitally connected population.

Another related research stream examines maladaptive or addiction-like social media behaviours among Jamaican subpopulations. A quantitative study involving 180 Jamaican university students utilised the Bergen Social Media Addiction Scale (BSMAS) to assess problematic engagement patterns. Through latent profile analysis, the study identified distinct user groups characterised by high-risk and moderate-risk levels of maladaptive use, with approximately 27.8 % of participants classified as high risk for problematic engagement. Female participants demonstrated higher levels of compulsive usage and stronger preferences for online social interaction, suggesting gendered differences in digital dependency patterns. The study was theoretically grounded in Griffiths' Components Model of Addiction, which conceptualises behavioural addiction through salience, mood modification, tolerance, withdrawal, conflict, and relapse [25]. Applying this framework to social media behaviour underscores how excessive engagement may reflect addiction-like characteristics that intersect with psychological distress and impaired daily functioning.

In addition to studies directly focused on social media behaviour, research examining digital mental health attitudes among Jamaican adolescents provides contextual insight into how technology interfaces with wellbeing support systems. A survey of 107 Jamaican adolescents revealed high levels of smartphone access and interest in digital mental health interventions; however, stigma, embarrassment, and concerns about confidentiality were identified as key barriers to seeking formal psychological support [26]. Although this study did not exclusively analyse social media use, its findings illuminate the broader digital mental health environment in which social platforms operate. Social media spaces may therefore function as both potential gateways for mental health awareness and sites where stigma, misinformation, or negative comparison reinforce psychological distress. Together, these studies demonstrate that social media's influence in Jamaica extends beyond individual usage patterns to encompass content production, addiction-like behaviours, youth perceptions, and structural barriers to mental health support.

Psychological Outcomes Associated with Social Media Use

Research conducted internationally, regionally, and within Jamaica indicates a significant association between extensive social media use and adverse psychological outcomes, particularly anxiety and depression. Meta-analytic and longitudinal studies in high-income countries demonstrate that frequent exposure to idealised online content predicts increased depressive symptoms, social comparison, and emotional dysregulation among adolescents and young adults [3,1]. These associations are especially salient during developmental periods characterised by academic pressure, peer evaluation, and identity formation. In the Caribbean context, emerging scholarship suggests that digital immersion intersects with structural stressors such as youth unemployment and social inequality, amplifying vulnerability to psychological strain. In Jamaica, Bourne et al.

found that higher levels of passive consumption and validation-seeking behaviours were significantly correlated with anxiety and diminished psychological well-being [18]. Bourne and Lambert further argued that social media may function as an environmental stressor, intensifying pre-existing psychosocial challenges among Jamaican youth [7]. Consequently, anxiety and depressive symptomatology linked to digital engagement must be understood within a broader constellation of sociocultural and economic pressures.

Self-esteem and body image disturbances constitute additional psychological outcomes associated with visually oriented platforms such as Instagram and TikTok. International research shows that repeated exposure to curated and filtered images contributes to internalisation of unrealistic beauty standards, particularly among young women [1]. These dynamics are reinforced by algorithmic amplification of idealised physiques and lifestyles, which intensify social comparison processes upward. Within the Jamaican sociocultural landscape, aesthetic expression and body norms are shaped by both Afro-Caribbean cultural pride and globalised media influences, creating complex and sometimes conflicting standards. Bourne et al. observed that users who engaged heavily with appearance-focused content reported lower self-esteem and greater dissatisfaction with personal achievements and physical attributes [18]. Such findings align with broader Caribbean concerns that global digital imagery may displace indigenous conceptions of beauty and self-worth. Therefore, body image and self-esteem disturbances among Jamaican users reflect the interaction between globalised media standards and local cultural identity formation.

Cyberbullying, online harassment, and problematic social media use further compound mental health risks. International evidence consistently links cybervictimisation with heightened emotional distress, self-harm ideation, and suicidal thoughts among adolescents [3]. Jamaican youth have reported experiences of rumour dissemination, public shaming, and digital exclusion, phenomena that may carry intensified stigma in tightly knit communities. Bourne and Lambert emphasised that exposure to persistent online criticism and hostility undermines emotional resilience and contributes to depressive affect [7]. Additionally, problematic or addictive use—conceptualised as compulsive engagement, tolerance, withdrawal, and functional impairment—mirrors behavioural addiction frameworks outlined by Andreassen [2]. Heavy users frequently report disrupted sleep patterns, diminished academic performance, and reduced face-to-face interaction, thereby eroding social capital and community connectedness. Bourne's broader scholarship on social determinants of health underscores that diminished community engagement weakens protective psychosocial buffers, increasing susceptibility to mental health challenges (Bourne et al., 2024). Taken together, anxiety, self-esteem disturbances, cyberbullying, and addictive use illustrate the multifaceted psychological consequences of social media engagement within Jamaica's national, regional, and global context.

Cultural and Societal Moderators

Cultural and societal moderators play a critical role in shaping how social media influences mental health within Jamaica and the wider Caribbean. Ecological models emphasise

that psychological outcomes are embedded within family, community, and societal systems rather than determined solely by individual behaviour [22]. In Jamaica, strong familial bonds, extended kinship networks, and community-based religious institutions traditionally function as protective factors that foster resilience and emotional regulation. International research demonstrates that adolescents who report higher levels of parental monitoring and supportive communication experience fewer adverse psychological effects from digital engagement [1]. Within the Jamaican context, Bourne et al. suggest that family cohesion and positive offline relationships can buffer the negative consequences of online comparison and cyberbullying [18]. These protective mechanisms are particularly salient in tightly knit rural and urban communities where interpersonal ties remain influential. Therefore, culturally grounded interventions that actively engage family systems and community organisations may mitigate the psychosocial risks associated with intensive social media use.

Mental health stigma constitutes another significant societal moderator influencing both vulnerability and help-seeking behaviours. Globally, stigma surrounding depression, anxiety, and psychological distress reduces willingness to access professional support, particularly among young males and marginalised populations [1]. In Jamaica, cultural narratives that equate mental illness with weakness or instability continue to impede open discussion and early intervention. Bourne and Lambert observed that while social media platforms can provide peer support communities and facilitate mental health advocacy, they may simultaneously reinforce stereotypes, trivialise psychological suffering, or expose users to dismissive commentary [7]. This dual function reflects international findings that digital spaces can either reduce stigma through awareness campaigns or exacerbate it through misinformation and ridicule. Moreover, the visibility of online disclosures may deter some Jamaican users from seeking help due to fear of social judgement within close-knit communities. Consequently, understanding how stigma operates both offline and online is essential for designing culturally sensitive public health messaging and digital literacy initiatives.

Economic and educational contexts further mediate the relationship between social media use and mental health outcomes. Socioeconomic inequalities influence access to stable internet connectivity, quality devices, digital literacy training, and parental supervision, thereby shaping patterns of online engagement. Regionally, Caribbean youth from lower-income households may rely heavily on mobile-based access, increasing exposure to unregulated digital spaces without structured guidance. Bourne's broader work on social determinants of health underscores that poverty, unemployment, and community violence intersect with psychosocial stressors to heighten vulnerability to emotional distress [18]. International evidence similarly indicates that digital literacy programmes embedded within school curricula can enhance critical thinking skills and reduce susceptibility to harmful content and cybervictimisation [1,2]. In Jamaica, integrating digital wellbeing education into secondary and tertiary institutions could empower youth to navigate online risks more safely while preserving the benefits of connectivity. Thus, economic disparities and educational infrastructures operate as pivotal moderators that either

exacerbate or buffer the mental health consequences of social media engagement.

Interventions and Policy Implications

Policy and intervention strategies are essential to mitigate the psychological risks associated with social media use while preserving its communicative and developmental benefits. Digital literacy and wellbeing programmes represent a primary preventive approach at national and regional levels. International research indicates that interventions which enhance critical thinking about algorithmic content, social comparison, and misinformation reduce vulnerability to online harm and promote healthier engagement patterns [1]. In Jamaica, integrating structured digital wellbeing education into primary, secondary, and tertiary curricula could equip youth with skills to recognise manipulative design features and manage screen time effectively. Bourne et al. argue that, given the high prevalence of daily social media use among Jamaican youth, prevention strategies should not focus solely on restriction but on empowerment and informed participation [18]. Schools, community organisations, and faith-based institutions can collaborate to deliver workshops that address responsible digital citizenship, emotional regulation, and cyber-safety. Such multi-sectoral engagement ensures that digital literacy becomes embedded within broader youth development initiatives.

Expanding access to mental health awareness campaigns and support services constitutes another critical policy priority. Globally, digital platforms have been leveraged to disseminate psychoeducation, facilitate peer support groups, and connect individuals to professional counselling resources [3]. In Jamaica and the wider Caribbean, stigma surrounding mental illness continues to inhibit help-seeking behaviour, particularly among adolescents and young adults. Bourne and Lambert highlight that social media can function as both a risk environment and a therapeutic space, depending on how it is utilised [7]. Public health authorities can harness these platforms to deliver culturally relevant messaging that normalises conversations about anxiety, depression, and emotional distress. Furthermore, integrating online mental health screening tools and tele-psychology services into national health systems would improve accessibility for individuals who may hesitate to seek in-person care. By aligning digital outreach with traditional service provision, policymakers can strengthen resilience while addressing unmet psychological needs.

Platform accountability and regulatory safeguards represent an additional dimension of intervention at the structural level. International debates increasingly emphasise the responsibility of technology companies to mitigate harms associated with addictive algorithms, cyberbullying, and exposure to violent or harmful content [1]. In the Jamaican context, policymakers may consider regulatory frameworks that promote transparency in content moderation, data protection, and age-appropriate safeguards. Bourne's scholarship on social determinants of health underscores that systemic interventions are necessary to address environmental stressors that extend beyond individual behaviour [18]. Social media companies should implement stronger reporting mechanisms for harassment, clearer privacy controls, and built-in features that encourage mindful usage. Collaboration between government agencies, civil society, and

platform providers can ensure that digital ecosystems prioritise user safety and psychological well-being. Ultimately, effective policy responses must balance innovation with protection, ensuring that social media contributes positively to national development while minimising its mental health risks.

Conclusions

Social media has become deeply embedded in the social, economic, and cultural fabric of Jamaican society, functioning as a key platform for communication, identity formation, commerce, and civic engagement. While it facilitates connection across local communities and the global diaspora, empirical evidence demonstrates that its use is associated with psychological outcomes, including anxiety, depression, reduced self-esteem, cyberbullying exposure, and problematic engagement patterns [1,2]. In Jamaica, Bourne et al. provide contextualised evidence showing that specific patterns of social media engagement are significantly linked to variations in mental health status, reinforcing the need to interpret digital behaviour within broader social determinants [18]. These findings suggest that digital environments act as both protective and risk spaces depending on usage intensity, content exposure, and socioeconomic context. Moreover, Bourne and Lambert emphasise that psychosocial stressors embedded within structural inequalities may amplify the negative effects of online comparison and harassment [7]. Regionally and internationally, similar patterns have been observed, indicating that Jamaica reflects global digital mental health trends while retaining unique cultural moderators [9,27,13,28].

The synthesis of Bourne's scholarship on psychosocial determinants with international digital mental health research highlights the importance of culturally grounded theoretical and empirical approaches. Mental health outcomes related to social media cannot be examined in isolation from poverty, unemployment, community violence, stigma, and family structure, all of which shape vulnerability and resilience in the Jamaican context [7]. Longitudinal and mixed-method research designs are necessary to determine causal pathways between digital exposure and psychological outcomes rather than relying solely on cross-sectional associations. Additionally, locally generated datasets are critical to avoid over-reliance on findings from high-income countries that may not fully capture Caribbean realities. International frameworks provide useful methodological guidance, but adaptation to national contexts ensures policy relevance and scientific validity [1]. Future research should therefore integrate interdisciplinary perspectives from psychology, public health, sociology, and information technology to advance understanding of digital wellbeing in Jamaica.

Safeguarding mental health in an increasingly digital society requires coordinated action across multiple sectors, including education, healthcare, community leadership, and technology governance. Schools and universities can incorporate digital literacy training that promotes responsible engagement and resilience against online harms. Healthcare systems can expand tele-mental health services and leverage social media platforms for evidence-based psychoeducation and stigma reduction campaigns. Policy interventions should also encourage platform accountability, improved content

moderation, and stronger protections against cyberbullying and harmful algorithmic amplification. Bourne's work underscores that social environments significantly influence psychosocial wellbeing, reinforcing the argument that structural interventions are necessary alongside individual-level strategies. Ultimately, transforming social media into a tool for empowerment rather than distress in Jamaica depends on evidence-informed policies, community engagement, and sustained research that monitors evolving digital trends and their mental health implications [3,23,29-31].

Recommendations

Policy and Regulatory Framework (0–3 Years Implementation Timeline)

Given the empirical evidence linking intensive social media engagement with anxiety, depression, burnout, and maladaptive behaviours among Jamaican users, digital well-being must be formally integrated into national health and technology policy. The Government of Jamaica, through collaboration between the Ministry of Health and Wellness, the Ministry of Education and Youth, and telecommunications regulators, should establish national digital mental health guidelines within three years. These guidelines should include protections against cyberbullying, clearer reporting systems for online harassment, and stronger data protection standards to reduce exposure to harmful digital environments. Regulatory agencies should require transparency from social media platforms regarding algorithmic content amplification and moderation practices. Measurable indicators of success should include the adoption of formal policy frameworks, the establishment of digital safety reporting mechanisms, and annual monitoring of cyberbullying prevalence. Institutionalising digital wellbeing within policy structures ensures structural accountability rather than solely relying on individual behavioural change.

Educational and Digital Literacy Integration (1–5 Years Implementation Timeline)

Educational institutions represent a primary intervention site because youth and university students demonstrate high levels of daily social media engagement. Structured digital literacy programmes should be integrated into secondary and tertiary curricula within five years, focusing on algorithm awareness, social comparison effects, online identity construction, and behavioural addiction risks. These modules should emphasise practical skills such as screen-time management, critical content evaluation, and safe online communication strategies. Teacher training programmes should include certification in digital wellbeing education to ensure sustainability. Community-based youth organisations and churches can also implement workshops to reinforce responsible digital engagement. Performance indicators should include curriculum revision documents, the number of trained educators, student participation rates, and pre- and post-intervention assessments measuring improvements in digital literacy competencies. Education-based prevention provides long-term resilience against digital stressors.

Mental Health Service Expansion and Digital Integration (0–5 Years Implementation Timeline)

The presence of stigma and embarrassment as barriers to help-seeking requires expansion of accessible and confidential mental health services. Public health authorities should integrate

tele-mental health services into the national healthcare system within five years, enabling individuals to access counselling support through secure digital platforms. Social media channels should be strategically utilised for psychoeducation campaigns that normalise mental health discussions and promote service accessibility. Online screening tools for anxiety, depression, and digital addiction should be embedded within government health portals to facilitate early detection. Measurable indicators should include increased utilisation of telehealth services, the number of digital screening completions, and reductions in untreated psychological distress reported in national surveys. Embedding mental health services within digital spaces aligns intervention delivery with current behavioural realities.

Targeted Interventions for High-Risk Populations (Immediate to 3 Years)

Empirical findings indicate that content creators, heavy users, and female users experiencing heightened online scrutiny are particularly vulnerable to psychological strain. Targeted intervention programmes should therefore be developed within three years to address these high-risk subgroups. Digital content creators should receive training in stress management, financial literacy for digital monetisation, and boundary-setting strategies to reduce burnout. Gender-sensitive mental health interventions should address online harassment, body image pressure, and sexualised digital exposure affecting female users. Peer support groups and professional mentorship programmes should be established to provide psychosocial support. Success indicators should include participation rates in targeted programmes, self-reported reductions in burnout symptoms, and improved psychological well-being scores among intervention participants. Targeted prevention ensures efficient allocation of resources to populations at greatest risk.

Future Research and Monitoring Framework (Ongoing and Institutionalised)

Although current research provides strong cross-sectional evidence, longitudinal and mixed-method studies are necessary to establish causal pathways between social media exposure and mental health outcomes. National research institutions and universities should develop panel studies that track digital engagement patterns and psychological indicators over time. Probability-based sampling techniques should be prioritised to improve national representativeness and reduce online recruitment bias. Additionally, experimental designs testing interventions such as controlled digital detox programmes or algorithm literacy training would strengthen evidence-based policymaking. A national digital mental health research observatory could be established to monitor trends annually. Key indicators should include publication output, longitudinal data availability, and integration of research findings into national policy revisions. Sustained research capacity ensures adaptive responses to rapidly evolving digital technologies.

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