



**Digital Platforms, Social Media Addiction, and Adolescent Mental Illness: Exploring the
Dimensions of Chaotic Bonding in Delhi NCR**

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Abstract

The rapid integration of digital platforms into everyday life has profoundly influenced the behavior and social interactions of adolescents. In the Delhi NCR region, where internet penetration and smartphone usage are among the highest in India, social media has become a central medium for communication, self-expression, and peer bonding. While these platforms offer opportunities for connectivity, they also foster addictive behaviors that disrupt mental health, emotional stability, and academic performance. This study, titled "*Digital Platforms, Social Media Addiction, and Adolescent Mental Illness: Exploring the Dimensions of Chaotic Bonding in Delhi NCR*", investigates the behavioral, psychological, and social implications of excessive social media use among adolescents aged 12–18 years. Using a descriptive and exploratory research design, data were collected from 200 respondents through structured questionnaires and analyzed with SPSS to examine patterns of usage, emotional responses, and family involvement. The findings reveal that social media addiction manifests in chaotic, unstable, emotionally volatile online relationships that heighten risks of anxiety, loneliness, irritability, and concentration problems. Adolescents demonstrated awareness of digital well-being, yet this knowledge alone was insufficient to counteract dependency. The study underscores the urgent need for multi-level interventions, including school-based digital literacy programs, parental engagement, and policy-driven awareness campaigns, to mitigate the adverse effects of social media addiction on adolescent mental health.

Keywords: social media addiction, adolescent mental health, digital platforms, chaotic bonding, Delhi NCR



Introduction

The rise of digital platforms and social media has dramatically reshaped the way adolescents interact, communicate, and construct their social identities. In urban contexts like the Delhi NCR, where digital access is widespread due to the affordability of smartphones and internet connectivity, young people are increasingly immersed in online communities that significantly influence their daily lives. Platforms such as Instagram, WhatsApp, YouTube, and emerging short-video applications are no longer mere tools of communication but have become integral to social bonding, identity validation, and entertainment. However, the very features that make these platforms appealing, instant connectivity, continuous notifications, and the possibility of broad peer engagement, also foster addictive behavior. Adolescents often find themselves caught in cycles of compulsive use, where excessive screen time replaces face-to-face interactions, disrupts academic focus, and weakens family communication. This dependence is not only behavioral but also psychological, with many teenagers experiencing heightened anxiety, irritability, and fear of missing out (FOMO) when separated from their digital environments. The unique urban pressures of Delhi NCR, including competitive education systems and socio-cultural diversity, further intensify adolescents' reliance on online spaces for validation, belonging, and emotional release, making them more vulnerable to patterns of digital addiction.

Amid this context, the concept of chaotic bonding has emerged as a critical lens for understanding the more profound implications of adolescent social media engagement. Unlike traditional bonds formed in family or school settings, chaotic bonding refers to transient, unstable, and often emotionally volatile connections fostered in virtual spaces. These relationships may provide temporary relief from loneliness or stress, yet they often lack depth and continuity, leaving adolescents emotionally unanchored. The consequences of such unstable digital ties are profound, ranging from low self-esteem and restlessness to symptoms of depression and social withdrawal. Moreover, the absence of adequate parental monitoring, limited awareness of digital risks, and the rapid evolution of online culture compound these challenges, creating an ecosystem where addictive behaviors thrive unchecked. Exploring this phenomenon in the Delhi NCR region is particularly significant, as it reflects broader patterns of urban Indian youth navigating the tensions between traditional social structures and digital



modernity. By examining the interplay between digital platforms, social media addiction, and adolescent mental health, this study aims to offer insights that can inform educational policies, parental strategies, and public health interventions designed to promote healthier digital habits and safeguard adolescent well-being.

Significance of Digital Platforms in Adolescent Life

Digital platforms have become a defining feature of adolescent life in the 21st century, shaping how young people interact, learn, and construct their identities. For adolescents, especially in urban regions such as Delhi NCR, social media platforms like Instagram, WhatsApp, YouTube, and emerging short-video applications are more than communication tools; they are integral spaces for social bonding, entertainment, and self-expression. These platforms offer adolescents opportunities to connect across geographical boundaries, build peer networks, and engage with cultural trends that foster their sense of belonging. In an environment marked by competitive academics and rapid social change, digital spaces often serve as outlets for emotional release, peer validation, and creative exploration.

The significance of digital platforms is also reflected in their role as informal learning spaces, where adolescents access information, develop digital literacy, and engage in civic and cultural dialogues. However, this centrality also brings challenges. Excessive reliance on virtual communities can foster addictive behaviors, weaken real-life communication, and expose adolescents to issues such as cyberbullying, anxiety, and unstable relationships. Despite these risks, the influence of digital platforms cannot be overstated, as they reflect the evolving realities of modern adolescence. Understanding their significance is therefore essential for educators, parents, and policymakers to strike a balance between enabling healthy digital engagement and safeguarding the mental health and social development of young people.

Literature Review

The increasing reliance on digital platforms and social networking sites has drawn considerable scholarly attention, especially concerning patterns of addiction and their psychosocial implications for adolescents and young adults. Gómez-Galán et al. (2020) emphasized that social media consumption escalated during the COVID-19 pandemic, with college students exhibiting higher levels of dependency, which raised concerns about their responsible use. Their findings suggest that prolonged exposure to online platforms, when left unregulated, fosters



Interdisciplinary Journal of Information, Knowledge, and Management

*An Official Publication
of the Informing Science Institute
InformingScience.org*

Vol. : 20, Issue 2, 2025
ISSN: (E) 1555-1237

behavioral addictions that negatively influence academic performance and psychological balance. Similarly, Mahmud, Adnan, and Islam (2020) highlighted how smartphone addiction directly affected bonding social capital among university youth in Bangladesh, pointing to weakened real-life interactions and a shift toward superficial digital ties. This is particularly relevant for urban adolescents, where reliance on mobile technologies amplifies the risk of chaotic bonding.

Other studies underscore the dual role of technology in influencing mental well-being. Magsamen-Conrad and Greene (2014) argued that while technology addiction poses risks, online interactions can contribute positively to social capital, providing support networks that may buffer stress and loneliness. However, Xiuqin et al. (2010) found that adolescents with internet addiction disorder showed poorer mental health outcomes, shaped partly by parental rearing styles and personality traits. Their findings illustrate how digital addiction is not merely an individual issue but also a product of family environment and developmental context. These insights highlight the multifaceted relationship between technology use, personality, and socialization patterns.

Research also reveals how specific technological addictions undermine social connectedness. Savci and Aysan (2017) demonstrated that internet, social media, gaming, and smartphone addictions all significantly predicted lower levels of social connectedness. Adolescents experiencing such dependency reported feelings of isolation, despite frequent online activity. Prochnow and Patterson (2025) further extended this understanding, showing that mental health symptoms among gamers not only shaped but also limited the evolution of online and in-person networks. This suggests that pre-existing psychological vulnerabilities are both causes and consequences of digital dependency, intensifying the cyclical nature of addiction and mental health decline.

In addition, scholars have examined the psychiatric risks associated with excessive social media use. Cataldo et al. (2021) provided a comprehensive review linking social media engagement in childhood and adolescence with the development of psychiatric disorders, including anxiety and depression. Dip (2013) similarly found associations between online networking, addictive behaviors, and adolescent well-being, reinforcing the argument that virtual communities can erode emotional resilience. Macit, Macit, and Güngör (2018) contributed to this discourse by



analyzing how dopamine-driven feedback mechanisms in social media design intensify compulsive behaviors, suggesting that the addictive architecture of these platforms plays a crucial role in dependency formation.

A growing body of literature examines the wider social consequences of digital addiction. Seabrook, Kern, and Rickard (2016) systematically reviewed studies linking social networking sites with depression and anxiety, confirming that adolescents are at heightened risk when usage exceeds healthy limits. Oksanen et al. (2021) shed light on the darker side of digital platforms, showing how social media facilitated adolescent access to drugs in the United States and Spain, revealing significant legal and health risks. Collectively, these studies highlight that while digital platforms offer social connectivity, their addictive design and unregulated usage patterns foster chaotic social bonding and contribute to adolescent mental illness.

Methodology

This study adopted a descriptive and exploratory research design to examine the relationship between digital platforms, social media addiction, and adolescent mental health in Delhi NCR. The descriptive approach was used to present patterns of social media usage, emotional and behavioral outcomes, and parental involvement, while the exploratory aspect helped identify emerging issues such as chaotic bonding among adolescents.

The population of the study comprised school-going adolescents aged 12 to 18 years in Delhi NCR, selected due to their high exposure to digital platforms and vulnerability to addictive behaviors. Using a purposive non-probability sampling method, 200 adolescents were recruited from schools, community centers, and awareness workshops. The sample was stratified to ensure representation across gender, family type, and school environment (public and private institutions).

Primary data were collected using a structured questionnaire with Likert-scale items, focusing on variables such as screen-time patterns, emotional reliance, parental monitoring, and awareness of digital risks. Ethical protocols were observed through informed parental consent and student assent. Data were analyzed using SPSS software, employing descriptive statistics, frequency distributions, correlation analysis, and reliability testing (Cronbach's Alpha) to validate the internal consistency of the scale and ensure the accurate interpretation of the findings.



Results

Descriptive Analysis

The descriptive analysis provides an overview of adolescents' social media habits, parental involvement, emotional responses, and awareness levels in the Delhi NCR region. Using a 5-point Likert scale, the results reveal clear patterns: many respondents reported experiencing boredom without internet access, checking their phones immediately upon waking, and mood swings linked to social media, indicating dependency. Physical effects such as headaches and eye strain, along with emotional impacts like loneliness and restlessness, were also commonly noted.

Parental factors showed mixed outcomes, while some families actively monitor and guide their children's usage, a large share of responses were neutral, indicating communication gaps at home. Encouragingly, students demonstrated a strong awareness of digital well-being, including recognition of risks associated with overuse, reporting of cyberbullying, and a value for school-based education on responsible use. High agreement was also observed for digital detox programs, screen-time limits, and institutional support, suggesting adolescents favor structured interventions.

Descriptive Statistics			
	N	Mean	Std. Deviation
I often feel anxious or stressed after using social media.	200	4.02	1.107
Social media distracts me from spending time with family or friends.	200	4.04	1.002
I prefer interacting with online friends over real-life friends.	200	4.10	0.967
Social media makes me feel left out or inferior to others.	200	4.12	1.110
I lose sleep due to excessive use of social media.	200	3.90	1.103



I find it difficult to concentrate on my studies after using social media.	200	4.08	1.149
I feel emotionally upset if I cannot access social media.	200	3.44	0.900
I often compare myself with others on social media.	200	3.62	1.000
I have fewer face-to-face conversations due to the time I spend online.	200	3.66	1.034
I feel isolated, even when I am actively using social media.	200	3.72	1.023
Valid N (listwise)	200		

The results highlight strong behavioral and emotional effects of social media among adolescents in Delhi NCR. High mean scores were recorded for preferring online friendships over real-life ones ($M = 4.10$), feeling inferior or left out ($M = 4.12$), and experiencing difficulty concentrating on studies ($M = 4.08$), indicating an evident influence on social choices, emotions, and academic performance. Similarly, anxiety or stress ($M = 4.02$) and distraction from family or friends ($M = 4.04$) underline the disruptive role of excessive use.

Moderate-to-high scores for emotional upset when denied access ($M = 3.44$), self-comparison with peers ($M = 3.62$), and feeling isolated despite online activity ($M = 3.72$) further suggest psychological strain. Standard deviations between 0.900 and 1.149 indicate consistent responses. The analysis confirms that social media overuse negatively affects emotional well-being, interpersonal bonding, and academic focus, reinforcing its role in shaping patterns of adolescent mental health and behavior.



Descriptive Statistics			
	N	Mean	Std. Deviation
My parents spend quality time with me daily.	200	3.54	0.987
My parents are aware of the amount of time I spend on social media.	200	3.70	1.103
My parents guide me about responsible social media use.	200	3.66	1.054
My family discusses the negative effects of excessive screen time.	200	3.50	1.103
My parents' work schedule affects how much I use social media.	200	3.52	1.138
My parents often use mobile phones when at home.	200	3.94	1.141
My parents regularly monitor my online activities.	200	3.80	1.186
My home environment supports offline activities, such as reading or playing games.	200	3.94	1.069
My family encourages me to strike a balance between screen time and studying.	200	4.02	0.992
My parents understand how social media impacts my mood.	200	3.98	1.125
Valid N (listwise)	200		

Findings on the parental and home environment show a moderately supportive role in regulating adolescent social media use. The highest means were for encouraging balance between screen time and studies ($M = 4.02$) and parental awareness of mood impacts ($M = 3.98$), reflecting sensitivity to digital effects. Both support for offline activities and parental phone use at home scored 3.94, indicating a mixed model of behavior. Moderately high scores for parental monitoring ($M = 3.80$) and awareness of children's usage ($M = 3.70$) suggest that supervision exists, but it is not uniform. Lower scores for quality family time ($M = 3.54$) and discussions on screen effects ($M = 3.50$) reveal gaps in proactive involvement. Standard deviations (0.987–1.186) point to variability across households. Overall, families in the Delhi NCR region

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demonstrate conscious efforts to guide digital habits, although inconsistent engagement and parental screen behavior continue to be contributing factors to excessive use.

Descriptive Statistics			
	N	Mean	Std. Deviation
I become irritated when asked to stop using social media.	200	3.66	1.196
I feel bored without my phone or internet.	200	4.06	1.050
I check my phone as soon as I wake up.	200	3.80	1.080
I use social media even during meals or study time.	200	4.04	0.961
I become restless if I don't use social media for a day.	200	4.00	0.940
I feel happy only when receiving likes or comments online.	200	3.74	1.095
I experience headaches or eye strain due to screen time.	200	4.02	0.929
I argue with family members about my phone usage.	200	3.84	1.086
I spend more time online than I originally planned.	200	4.00	0.982
I feel sad or lonely after using social media.	200	3.94	0.949
Valid N (listwise)	200		

The results reveal strong indicators of social media addiction among adolescents. High mean scores were recorded for feeling bored without internet ($M = 4.06$), using social media during meals or study time ($M = 4.04$), and experiencing headaches or eye strain ($M = 4.02$), indicating compulsive use with potential health consequences. Behaviors such as checking phones immediately after waking ($M = 3.80$), restlessness without social media ($M = 4.00$), and spending more time online than intended ($M = 4.00$) reflect loss of self-regulation. Emotional



impacts include reliance on online validation for happiness ($M = 3.74$), sadness or loneliness after usage ($M = 3.94$), and family conflicts over device use ($M = 3.84$). Even the lowest mean irritation when asked to stop using social media ($M = 3.66$) signals notable psychological dependency. Standard deviations, mostly below 1.20, suggest moderate response variation. Overall, these findings confirm that adolescents face behavioral, emotional, and physical symptoms of addiction, highlighting the urgent need for targeted interventions in Delhi NCR.

Descriptive Statistics			
	N	Mean	Std. Deviation
I have attended sessions or workshops about digital well-being.	200	4.02	1.070
I am aware of the negative effects of excessive social media use.	200	4.00	0.982
My school has taught me how to use social media responsibly.	200	4.04	0.981
I am aware of how social media addiction affects mental health.	200	4.00	1.022
I know how to report cyberbullying or harmful content.	200	4.02	1.051
I try to limit my screen time intentionally.	200	4.14	0.962
I'm aware of apps or tools that track screen time.	200	4.02	1.107
I have discussed digital habits with parents and teachers.	200	4.04	1.002
I follow social media safety rules regularly.	200	4.10	0.967
I can identify signs of social media addiction in myself or my peers.	200	4.12	1.110
Valid N (listwise)	200		



The results indicate strong awareness and self-regulatory behavior among adolescents regarding digital well-being. The highest mean scores were for limiting screen time ($M = 4.14$), identifying signs of addiction ($M = 4.12$), and adhering to safety rules ($M = 4.10$). High agreement was also observed for being educated on responsible use ($M = 4.04$), discussing digital habits with parents/teachers ($M = 4.04$), attending workshops ($M = 4.02$), reporting cyberbullying ($M = 4.02$), and using screen-time tracking tools ($M = 4.02$). Awareness of mental health effects also scored strongly ($M = 4.00$). The low standard deviations (0.962–1.110) suggest consistent responses across participants. Adolescents in Delhi NCR display high digital literacy and proactive management of media use, though awareness alone may not fully counteract addictive behaviors and emotional dependencies.

Descriptive Statistics			
	N	Mean	Std. Deviation
There should be a daily time limit for social media use.	200	3.90	1.103
Schools should provide counselling for social media issues.	200	4.08	1.149
Parents should be trained about children's digital habits.	200	3.44	0.900
There should be strict rules regarding the use of phones during study time.	200	3.62	1.000
Children should be encouraged to take part in outdoor activities.	200	3.66	1.034
Digital detox programs should be introduced in schools.	200	3.72	1.023



Families should have fixed screen-free hours daily.	200	3.54	0.987
The government should promote campaigns for digital awareness.	200	3.70	1.103
Teachers should talk about the effects of social media in class.	200	3.66	1.054
Parents should model good social media behaviour.	200	3.50	1.103
Valid N (listwise)	200		

Descriptive analysis shows adolescents strongly support institutional interventions to curb social media addiction. The highest agreement was for school counselling services ($M = 4.08$), followed by digital detox programs in schools ($M = 3.72$) and government awareness campaigns ($M = 3.70$). Moderate support was noted for encouraging outdoor activities ($M = 3.66$), teacher-led discussions ($M = 3.66$), and strict rules regarding phone use during study time ($M = 3.62$). Lower means were recorded for family-based measures such as fixed screen-free hours ($M = 3.54$), parental role modeling ($M = 3.50$), and parent training programs ($M = 3.44$), reflecting weaker confidence in home interventions. Standard deviations (0.900–1.149) indicate moderate variation in responses. Overall, the results suggest adolescents favor systemic, school-based, and policy-driven strategies over family-led approaches for addressing social media addiction in Delhi NCR.

Conclusion

This study highlights the complex relationship between digital platforms, social media addiction, and adolescent mental health in Delhi NCR. The findings reveal that while social media provides adolescents with avenues for communication, identity formation, and peer bonding, its excessive use leads to patterns of compulsive behavior and chaotic bonding. These unstable and transient online connections fail to provide meaningful support, instead fostering irritability, loneliness, academic distraction, and symptoms of anxiety and depression. The descriptive analysis further confirmed behavioral, emotional, and physiological impacts, including restlessness, low self-esteem, and health problems such as headaches and eye strain.



Although adolescents displayed strong awareness of digital well-being and responsible use, this awareness alone was insufficient to prevent dependency, suggesting a gap between knowledge and behavioral control. Parental guidance and home environment played a moderate role in shaping habits; however, inconsistent monitoring and parental modeling of digital behavior emerged as significant challenges. The study underscores the urgent need for systemic interventions, particularly school-based counseling, digital detox initiatives, and awareness campaigns led by families, educators, and policymakers. By addressing the roots of addictive behavior and promoting healthier patterns of digital engagement, stakeholders can help adolescents harness the benefits of social media while safeguarding their mental and emotional well-being.

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Interdisciplinary Journal of Information, Knowledge, and Management

An Official Publication
of the Informing Science Institute
InformingScience.org

Vol. : 20, Issue 2, 2025
ISSN: (E) 1555-1237

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