

Social Media Use, Mental Health Literacy, and Academic Performance of Junior High School Students in the Division of Northern Samar: Basis for a Digital Wellness and Mental Health Integration Program

Marivec Bobiles Luna

*Graduate Studies, University of Eastern Philippines, University Town, Catarman,
Northern Samar, Philippines*

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Email of Corresponding Author: lunamarivec01@gmail.com

Abstract

This study determined the relationship among social media use, mental health literacy, and academic performance of junior high school students in the Central Area of the Division of Northern Samar during School Year 2025–2026. It was anchored on Social Cognitive Theory, Uses and Gratifications Theory, Mental Health Literacy, Cognitive Load Theory, Erikson's Psychosocial Development Theory, and Self-Regulation Theory. The study employed a descriptive-correlational research design with supplementary interviews to describe the variables and determine significant relationships among them. It involved selected public secondary schools in Bobon, Catarman, Mondragon, Pambujan, and San Roque. The computed sample size was 385, while the findings presented data from 369 junior high school respondents from Grades 7 to 10. Data were gathered using a structured survey questionnaire, school profile checklist, semi-structured interview guide, and official academic records showing students' General Weighted Average. The data were analyzed using frequency, percentage, weighted mean, ranking, Pearson Product–Moment Correlation Coefficient, and thematic analysis. Findings showed that the selected schools differed in size and in the availability of digital resources and mental health-related support. Digital resources, mental health-related facilities, and mental health services were generally highly available, while mental health-related materials were moderately available. The respondents generally demonstrated frequent social media use, with Messenger, TikTok, Facebook, and YouTube as commonly used platforms and smartphones as the primary device. Social media was used mainly for entertainment, communication, relaxation, information access, and academic-related purposes. The respondents showed mental health literacy in terms of beliefs, knowledge of mental health conditions, first aid skills and help-seeking behavior, and self-help strategies, although misconceptions and gaps in formal help-seeking awareness remained. Their academic performance was generally satisfactory to very satisfactory. Significant relationships were found between selected profile variables and dimensions of social media use and mental health literacy; between selected dimensions of social media use and academic performance; between selected dimensions of mental health literacy and academic performance; and between selected dimensions of social media use and mental health literacy. The study concluded that students' digital behavior, mental health awareness, coping strategies, demographic background, and socioeconomic conditions are related to academic and psychosocial development. The findings served as basis for Project GABAY, a Digital Wellness and Mental Health Integration Program designed to promote responsible social media use, strengthen mental health literacy, support emotional well-being, and improve academic engagement. The study aligns with SDG 3 on Good Health and Well-Being and SDG 4 on Quality Education because it addresses adolescent mental health, learner support, digital wellness, and academic performance. It also supports institutional, educational, digital, and community sustainability by providing localized evidence for school-based programs, learner-centered interventions, mental health support, and responsible digital engagement.

Keywords: Academic Performance, Digital Wellness, Mental Health Literacy, Mental Health Support, Northern Samar, Self-Regulation, Social Media Use, Students, Sustainable Development Goals, Uses and Gratifications Theory

1. Introduction

Social media has become embedded in adolescents' daily lives, shaping communication, information access, learning engagement, and peer interaction. While social media can support communication and access to educational information, excessive and unregulated use may contribute to academic procrastination, poor study habits, reduced engagement, and emotional difficulties (Dimacangun & Guillena, 2023). Prolonged digital exposure has also been associated with anxiety, stress, sleep deprivation, and emotional distress (Fabella & Lagarde, 2022). These concerns suggest that students' academic performance is not influenced only by instruction, but also by behavioral, digital, psychological, and environmental conditions.

Adolescent mental health remains a global educational concern. One in seven adolescents aged ten to 19 is estimated to experience a mental health condition that may affect learning and development (World Health Organization, 2025). In the Philippine context, schools continue to strengthen mental health and psychosocial support initiatives to promote learner well-being alongside academic success. Within the Division of Northern Samar, local data show academic and psychosocial challenges, including low independent reading levels, reported suicide attempts among secondary learners, and concerns linked to social disconnection, excessive screen time, and sleep deprivation. At the same time, improved internet access through Starlink in 345 schools has expanded access to digital resources while also increasing the possibility of prolonged screen exposure.

The related literature shows that school context, digital access, demographic profile, social media behavior, mental health literacy, and academic performance are interrelated. School environment and culture influence students' mental health and academic performance, especially when schools provide adequate resources, positive relationships, and student support systems (Nawaz, 2024). School size may affect classroom interaction, supervision, and learning conditions, although academic success is also shaped by instructional quality, psychosocial support, and school resources (Frontiers in Psychology, 2024). Digital resource availability improves learning participation and online engagement when access is supported by quality resources and teacher guidance (Teofilo-Labitad & Paglinawan, 2025; Wang et al., 2025).

School-based mental health support also plays a major role in adolescent well-being. Access to school-based health centers, counseling services, mental health materials, and psychosocial interventions improves early support, help-seeking, and mental health literacy (Hodges et al., 2021; Bacionia, 2025). Structured mental health literacy materials and programs have been shown to improve mental health knowledge, reduce stigma, strengthen help-seeking attitudes, and improve student-teacher relationships (Wei et al., 2024; Zachik et al., 2025; Mori et al., 2022; Sun et al., 2025). However, even when mental health services are available, utilization may remain low because of stigma, limited staffing, inadequate facilities, and uneven implementation (Panchal et al., 2025; Gragasin, 2024; OECD, 2025; Hinze et al., 2024).

Demographic factors also shape students' digital and mental health experiences. Age affects developmental characteristics, social behavior, digital engagement, and mental health awareness (World Health Organization, 2023; Twenge & Martin, 2020; Battaglini et al., 2021; Archives of Psychiatric Nursing, 2024; Keles et al., 2020). Sex may influence social media engagement, emotional response, help-seeking behavior, and exposure to relationship-centered digital interaction (Hou et al., 2020; Twenge et al., 2020). Grade level is associated with increasing academic pressure, digital exposure, and difficulty balancing social media use with school responsibilities (Rideout & Robb, 2021; Anderson et al., 2023; Lukose & Agbeyangi, 2025). Parents' educational attainment, socioeconomic status, and daily allowance also influence access to learning support, gadgets, internet connectivity, academic guidance, and digital participation (OECD, 2022; Davis-Kean, 2020; Xiong et al., 2021; Benner et al., 2021; World Bank, 2021; UNESCO, 2023; Tan, 2024; Li et al., 2024; Liu & Chen, 2025).

Social media use is multidimensional. It includes frequency, duration, purpose, platform type, number and type of gadgets used, and gadget ownership. Literature indicates that social media may provide educational resources, peer collaboration, emotional expression, and communication, but excessive use may also produce distraction, poor time management, procrastination, and reduced academic focus (Anjum et al., 2024; Dimacangun & Guillena, 2023; Kim et al., 2024). Frequent use is common among adolescents and may be affected by access to smartphones, internet connectivity, age, sex, and socioeconomic resources (Essien, 2025; Hawi & Samaha, 2022; Moreno et al., 2022; Pratama & Scarlatos, 2020). Duration of use may increase exposure to digital interaction but may also disrupt sleep, study time, and academic routines (Tungol & Enad, 2025; Ahmad et al., 2022; Nawaz, 2024; OECD, 2021). Purpose of use commonly includes communication, entertainment, academic work, and information-seeking, with different purposes producing different academic and psychosocial effects (Tungol & Enad, 2025; Bottaro & Faraci, 2022). Platform type and gadget ownership influence the intensity, independence, and nature of students' digital engagement (Montag et al., 2021; Kemp, 2024; Moreno et al., 2022; Martín-Cárdaba et al., 2024; World Bank, 2021; United Nations Educational, Scientific and Cultural Organization, 2021).

Mental health literacy includes beliefs, knowledge of mental health conditions, first aid skills and help-seeking behavior, and self-help strategies. Positive beliefs about mental health encourage empathy and help-seeking, while stigma and misinformation hinder recognition and support (Yani, 2024; Afendy et al., 2024; Munawar et al., 2022; Taba et al., 2022; Goda et al., 2025; Salacut et al., 2025). Knowledge of mental health conditions enables adolescents to recognize symptoms, understand possible causes, and identify appropriate sources of help, but access to information alone is insufficient without structured education (Cordero, 2025; Ahmad et al., 2022; Afendy et al., 2024; Yani et al., 2025). First aid skills and help-seeking behavior are strengthened by mental health literacy, school-based programs, and support from teachers, parents, and peers (Lasquites et al., 2024; Beukema et al., 2022; Yani, 2024). Self-help strategies help students regulate emotions, manage stress, and cope with psychosocial challenges, although online coping may either support or weaken adjustment

depending on the quality of interaction and self-regulation (Afendy et al., 2024; OECD, 2021; Liu & Zhang, 2024; Mittmann et al., 2022).

Academic performance is shaped by study habits, classroom environment, family support, motivation, psychological well-being, and digital distractions (Dalauta et al., 2024; Paano & Fuentes, 2024; Silangan et al., 2023; Tolentino, 2025). In Northern Samar, psychological and environmental factors, including stress, anxiety, home support, and social media distractions, have been linked to academic outcomes (Donoga, 2025; Ditcher, 2021). Smartphone access and continuous online engagement may affect concentration, study habits, and productivity (Moreno et al., 2022; Martín-Cárdaba et al., 2024), while stronger mental health literacy and coping skills may support better academic functioning (Yani et al., 2025; Afendy et al., 2024).

1.3 Global, National and Local Context

Globally, adolescent mental health and digital engagement have become major concerns in education systems because they influence learning, well-being, and development (World Health Organization, 2025; World Health Organization, 2023). International literature shows that digital access, school support, mental health services, and socioeconomic conditions affect students' learning engagement and psychosocial development (OECD, 2025; UNESCO, 2023; World Bank, 2021).

Nationally, the Philippine education system continues to emphasize the importance of school-based mental health and psychosocial support through various school health initiatives and educational programs. Literature from the Philippine context shows that social media use among Filipino students can support communication and learning but may also contribute to distraction, procrastination, and reduced academic engagement (Dimacangun & Guillena, 2023). Studies also indicate that many public schools continue to face limitations in trained guidance personnel, facilities, and sustained mental health services (Gragasin, 2024; Bacelonia, 2025).

Locally, the Division of Northern Samar presents a relevant setting because of reported academic concerns, learner well-being issues, uneven school resources, and expanded internet access. The study focuses on junior high school students from selected public secondary schools in Bobon, Catarman, Mondragon, Pambujan, and San Roque. The local school performance data showing an average Mean Percentage Score of 70.84 percent suggests that many learners remain below the desired mastery level. These conditions justify examining how social media use and mental health literacy relate to academic performance in this specific educational context.

1.4 Theoretical or Conceptual Basis

This study is anchored on Social Cognitive Theory, which explains that human behavior is shaped by the interaction of personal factors, behavior, and environmental influences (Bandura, 1986). In this study, social media use functions as an environmental factor that affects students' thoughts, habits, attention, and academic engagement, while mental health literacy functions as a personal cognitive factor that affects how students recognize emotions, manage stress, and respond to academic demands.

The study is also guided by Uses and Gratifications Theory, which explains that individuals actively select and use media to satisfy needs such as information, communication, and entertainment (Katz et al., 1973). This theory explains why junior high school students use social media for different purposes and why these purposes may influence academic focus and emotional well-being.

The concept of Mental Health Literacy explains the role of knowledge, beliefs, and skills in recognizing, managing, and preventing mental health problems (Jorm, 2000). It supports the study's focus on beliefs, knowledge of mental health conditions, first aid skills and help-seeking behavior, and self-help strategies. Cognitive Load Theory further explains that excessive exposure to information and digital stimuli may increase mental effort, reduce attention, and affect comprehension and academic performance (Sweller, 1988). Erikson's Psychosocial Development Theory situates adolescence as a critical period of identity formation and emotional development, where social media exposure may either support self-development or intensify emotional difficulty (Erikson, 1968). Self-Regulation Theory explains how students manage cognition, behavior, and emotions in pursuit of academic goals, making it relevant to the regulation of social media use, stress, and school responsibilities (Zimmerman, 2000).

Conceptually, the study follows a descriptive-to-relational framework. The school profile includes school size, availability of digital resources, availability of mental health-related facilities, materials, and services. The respondents' profile includes age, sex, grade level, parents' educational attainment, parents' socioeconomic status, and daily allowance. Social media use is examined in terms of frequency, duration, purpose, types and number of platforms used, number and types of gadgets used, and gadget ownership. Mental health literacy is examined in terms of beliefs, knowledge, first aid skills and help-seeking behavior, and self-help strategies. Academic performance is measured through students' General Weighted Average for School Year 2025–2026.

1.5 Research Gaps and Rationale

Although previous studies have examined social media use, mental health, mental health literacy, and academic performance, limited local research has examined how these variables interact among junior high school students in the Division of Northern Samar. Few studies have also contextualized these issues within Araling Panlipunan instruction, where students are expected to analyze contemporary social concerns. Existing literature indicates that digital engagement may either support learning and mental health awareness or contribute to distraction, stress, misinformation, and reduced academic productivity (Anjum et al., 2024; Afendy et al., 2024; Kim et al., 2024; Sharma et al., 2023).

This study addresses that gap by examining the relationship among students' profile variables, social media use, mental health literacy, and academic performance in selected public secondary schools in the Central Area of the Division of Northern Samar. The rationale is grounded in the need for localized evidence that can guide schools, teachers, guidance personnel, parents, and other education stakeholders in designing interventions related to digital wellness, mental health literacy, and academic achievement.

1.6 Alignment with Relevant Sustainable Development Goals (SDGs)

This study aligns with SDG 3 – Good Health and Well-Being because it focuses on adolescent mental health literacy, emotional well-being, help-seeking behavior, and self-help strategies. Its emphasis on school-based mental health support, stigma reduction, early recognition of psychological distress, and psychosocial intervention directly supports learner well-being.

The study aligns with SDG 4 – Quality Education because it examines factors affecting academic performance, learning engagement, digital discipline, and school-based support systems. By linking social media use and mental health literacy to academic performance, the study supports evidence-based strategies for improving learner achievement and educational responsiveness.

The study aligns with SDG 9 – Industry, Innovation and Infrastructure because it considers the role of digital resources, internet connectivity, gadgets, and online platforms in shaping students' learning and social media behavior. The inclusion of digital wellness responds to the need for responsible and productive use of technological infrastructure in education.

The study also aligns with SDG 17 – Partnerships for the Goals because the proposed Digital Wellness and Mental Health Integration Program involves schools, teachers, parents, guidance personnel, community stakeholders, and the Department of Education. This collaborative framework supports sustainable school-based implementation of mental health and digital wellness initiatives.

1.7 Importance of the Study to Multidisciplinary Sustainability

The study contributes to public health sustainability by promoting mental health literacy, emotional regulation, help-seeking behavior, and psychosocial support among adolescents. It recognizes that student well-being is a continuing public health concern that affects school participation and academic success.

The study contributes to educational sustainability by identifying how social media use and mental health literacy relate to academic performance. Its findings can support more responsive instruction, classroom management, learner support, and integration of digital wellness and mental health concepts in Araling Panlipunan and other learning areas.

The study contributes to technological and digital sustainability by promoting responsible social media use, digital citizenship, balanced screen engagement, and purposeful use of online platforms for learning and well-being. This is particularly relevant in schools where improved internet access expands both educational opportunities and digital risks.

The study contributes to socio-economic and community sustainability by considering how parents' educational attainment, socioeconomic status, daily allowance, gadget access, and school resources shape students' digital behavior and mental health awareness. These factors help explain differences in learner experiences and support the need for context-sensitive interventions.

The study contributes to institutional and policy sustainability by providing localized evidence that can inform school programs, guidance services, learner support systems, and DepEd initiatives related to digital wellness, mental health literacy, and academic achievement. Through the proposed Digital Wellness and Mental Health Integration Program, the study supports sustained collaboration among schools, families, guidance personnel, and education leaders.

2. Material and methods

2.1 Research Design

The study employed a descriptive–correlational research design to describe the existing levels of social media use, mental health literacy, and academic performance of junior high school students and to determine the relationships among these variables. The descriptive component identified students’ social media use in terms of frequency, duration, purpose, types of platforms used, types and number of gadgets used, and gadget ownership, as well as their mental health literacy in terms of beliefs, knowledge, first aid skills and help-seeking behavior, and self-help strategies. The correlational component examined the relationships between demographic profile and social media use, demographic profile and mental health literacy, social media use and academic performance, mental health literacy and academic performance, and social media use and mental health literacy. A supplementary interview was also conducted to enrich the quantitative data by capturing students’ experiences, perceptions, and explanations regarding digital engagement and mental health practices. The design was appropriate because the study did not aim to establish cause-and-effect relationships but to determine whether significant associations existed among the variables.

2.2 Locale of the Study

The study was conducted in selected public secondary schools in the Central Area of the Division of Northern Samar. The Schools Division of Northern Samar was established through Republic Act No. 2796, otherwise known as “An Act to Provide for Three School Divisions in the Province of Samar,” enacted on June 19, 1960. The Division Office is located in Catarman and was initially housed in the Gabaldon Building, now recognized as the Bulwagan ng mga Guro. Northern Samar is divided into the Balicutro Area, Central Area, and Pacific Area, including the Catubig Valley, and consists of 24 municipalities and 569 barangays. The Central Area was selected because it offered an accessible setting with variations in school size, digital access, and educational conditions relevant to the study variables. Northern Samar is predominantly rural, with varying levels of internet access and digital resources. Although poverty incidence declined from 51.5 percent in 2015 to 21.8 percent in 2023, socioeconomic conditions continue to affect learners’ access to technology and educational opportunities, which may influence social media use, mental health literacy, and academic performance (Philippine Statistics Authority, 2024). The selection of the locale was further supported by concerns regarding learners’ mental health and academic achievement in the Division of Northern Samar during the State of the Schools Division Address on April 21, 2026. Reports from the Schools Division of Northern Samar revealed that only 37.01 percent of Grades 7–10 learners were independent readers in Filipino and 23.78 percent in English based on the Phil-IRI assessment, indicating learning difficulties that may affect academic performance. Moreover, 14.10 percent (4,262 out of 30,226) of surveyed secondary learners reported suicide attempts, with contributing factors including social disconnection, excessive screen time, and sleep deprivation. Likewise, selected public secondary schools in the Central Area recorded an average Mean Percentage Score (MPS) of 70.84 percent in School Year 2025–2026, suggesting continuing academic performance concerns among learners. The study focused on Bobon, Catarman, Mondragon, Pambujan, and San Roque, which comprise the Central Area of the Division of Northern Samar. The study included ten selected public secondary schools representing very large, large, and small schools based on total enrollment classification under DepEd guidelines. The selected schools met the criteria of being public secondary schools within the Central Area, offering Junior High School education, representing varied school sizes, and being accessible and suitable for data collection. The schools included Bobon School for Philippine Craftsmen and Dancalan Integrated School in Bobon; Catarman National High School in Catarman and Francisco B. Rosales Sr. National High School; Mondragon Agro-Industrial School and Hinabangan National High School in Mondragon; Pambujan National High School and Canjumadal National High School in Pambujan; and Don Juan F. Avalon National High School and Balnasan National High School in San Roque. The inclusion of both relatively largest and smallest schools allowed the study to capture variations in students’ learning environments, school resources, and digital access.

2.3 Respondents of the Study

The respondents were 385 Junior High School students from Grades 7 to 10 enrolled in selected public secondary schools in the Central Area of the Division of Northern Samar during School Year 2025–2026. They came from the districts of Bobon, Catarman, Mondragon, San Roque, and Pambujan. The respondents were drawn from ten schools representing both large and small school categories to ensure diversity in school context, enrollment size, and available learning resources. They were considered appropriate participants because they were officially enrolled, actively engaged in academic activities, and exposed to social media use and mental health-related experiences, which were the main variables examined in the study, however, a total of 369 respondents were ultimately included in the final analysis after data validation and completion of responses. These participants came from the districts of Bobon, Catarman, Mondragon, San Roque, and Pambujan and were drawn from ten public secondary schools representing both large and small school categories. This sampling approach ensured representation across diverse school contexts, varying enrollment sizes, and differing availability of learning resources. The respondents were considered appropriate for the study as they were officially enrolled learners, actively participating in academic activities, and directly exposed to social media use and mental health-related experiences, which constituted the primary variables under investigation.

2.4 Sample and Sampling Procedure

The population consisted of all Junior High School students from Grades 7 to 10 enrolled during School Year 2025–2026 in the selected public secondary schools in the Central Area of the Division of Northern Samar. The study covered Bobon, Catarman, Mondragon, San Roque, and Pambujan. From each municipality, one large school and one small school were purposively selected, resulting in ten participating schools. School classification was based on enrollment data and guided by Department of Education (2016) Order No. 19, s. 2016 and DepEd Memorandum No. 48, s. 2021. The total population across the selected schools was 10,066 students. Using Slovin's formula with a 0.05 margin of error, the computed sample size was 385 respondents. A multi-stage sampling technique was applied. First, purposive sampling was used to select schools based on district and school size. Second, proportionate sampling determined the number of respondents from each school based on population size. Third, simple random sampling was used to select respondents based on availability and accessibility during the data collection period. Respondents were drawn from Grades 7 to 10, although equal distribution per grade level was not strictly imposed because data gathering occurred during the school break and access to some respondents was limited. This sampling procedure allowed the researcher to gather sufficient data while ensuring representation from both large and small schools.

2.5 Research Instrument

The primary instrument was a structured survey questionnaire designed to gather data on students' social media use, mental health literacy, and academic performance. The questionnaire was adapted and modified from existing instruments supported by related literature and previous studies. It contained sections on school profile, respondents' profile, social media use, mental health literacy in relation to social media use, academic performance, and interview guide. The school profile checklist gathered data on school size, availability of digital resources, and availability of mental health-related facilities, materials, and services. It was accomplished by the school head, ICT coordinator, or designated school personnel and was used to describe and compare participating schools. The respondents' profile section gathered data on age, sex, grade level, school, parents' educational attainment, parents' socio-economic status, and daily allowance. The social media use section measured frequency, duration, purpose, types of platforms used, types and number of gadgets used, and gadget ownership. Its items were adapted and modified from studies on social media utilization and academic performance (Ditche, 2021), social media engagement (Tenedero-Garcia, 2024), and social media usage intensity and learning motivation (Sunoko et al., 2025).

The mental health literacy section assessed beliefs, knowledge of mental health conditions, first aid skills and help-seeking behavior, and self-help strategies. The items were adapted and modified from a mental health literacy instrument and contextualized to students' social media experiences and digital environments (Detera, 2025). Academic performance was measured using the respondents' General Weighted Average for School Year 2025–2026, obtained from official school records after securing informed consent. A semi-structured interview guide was also used to gather supplementary qualitative data on students' social media use and mental health literacy. The instrument was subjected to expert validation to ensure content validity and clarity. It was reviewed by the research adviser, language expert, ICT expert, guidance designates, and district-level input. The review focused on content validity, clarity, appropriateness of items, alignment with research objectives, and grammatical accuracy. The instrument was considered valid because its items were aligned with the study variables, particularly social media use, mental health literacy, and academic performance. Its alignment was further supported by Detera (2025), Ditche (2021), Tenedero-Garcia (2024), and Sunoko et al. (2025). In terms of reliability, the instrument was considered acceptable because it was adapted from previously validated studies that had undergone reliability testing using Cronbach's alpha. According to Creswell and Creswell (2022) and Fraenkel et al. (2022), instruments adapted from previously validated sources and subjected to expert review are acceptable when they are contextually appropriate and aligned with the study objectives. Since the instrument was adapted from established studies and underwent expert validation, pilot testing was no longer conducted.

2.6 Data Gathering Procedure

Data gathering began after securing the necessary approvals and permits from the Schools Division Superintendent of the Division of Northern Samar through a formal letter of request. After approval, the endorsement was forwarded to the school heads of the selected public secondary schools in the Central Area. Required information from the Schools Division Office and participating schools was formally requested through written communication to ensure proper documentation, facilitate processing, and avoid delays in accessing data. Coordination meetings were conducted with school heads, class advisers, and designated school personnel before data collection to ensure proper scheduling and smooth administration of the instruments. Informed consent was secured from the student respondents, and the purpose of the study was clearly explained. Participants were assured of confidentiality, anonymity, and voluntary participation. Data collection was conducted through face-to-face and online survey administration depending on respondent accessibility and availability. Printed questionnaires were distributed and retrieved on-site when feasible, while Google Forms was used when online administration was more practical. Clear instructions were provided to ensure completeness and accuracy of responses.

The School Profile Checklist was accomplished by only one designated representative from each participating school, such as the school head, ICT coordinator, guidance personnel, or a teacher-designate. The assigned respondent provided information on the school's size, digital resources, and available mental health-related facilities, materials, and services, ensuring that only one school profile was completed for each school. During data collection, the researcher employed a dual-device data processing approach, using one laptop for encoding responses and another for monitoring online submissions and organizing retrieved paper-based responses. After data collection, entries were cross-checked, cleaned, and validated before being forwarded to the statistician for analysis. The respondents' General Weighted Average for School Year 2025–2026 was obtained from official school records through proper coordination with class advisers and school authorities, with corresponding permissions and informed consent. All collected data were then organized, coded, and prepared for statistical and thematic analysis.

2.7 Data Analysis Techniques

The gathered data were scored, analyzed, and interpreted according to the study variables: school profile and resources, respondents' demographic profile, social media use, mental health literacy, and academic performance. Frequency counts and percentages were used to describe the respondents' demographic profile, including age, gender, grade level, parents' educational attainment, socio-economic status, and daily allowance, as well as the school profile in terms of school size, digital resources, and mental health-related facilities, materials, and services. Weighted mean was used to determine the levels of social media use and mental health awareness because the data were obtained using a five-point Likert scale. Ranking was used to identify dominant purposes of social media use and other ranked indicators. For school size, classification was based on projected enrollment following DepEd Order No. 19, series of 2016 and DepEd Memorandum No. 48, s. 2021. Schools with less than 440 learners were classified as small, those with 441 to 840 as medium, 841 to 1,240 as large, and 1,241 and above as very large. The availability of digital resources and mental health-related facilities, materials, and services was measured using a five-point Likert scale. The assessment of school digital resources was anchored on Ditcher (2021), while the evaluation of mental health-related facilities, materials, and services was guided by Detera's study (Detera, 2025). Mean scores from 4.20 to 5.00 were interpreted as very highly available, 3.40 to 4.19 as highly available, 2.60 to 3.39 as moderately available, 1.80 to 2.59 as slightly available, and 1.00 to 1.79 as not available.

For the respondents' demographic profile, parents' socioeconomic status was classified using income categories derived from the Philippine Statistics Authority (2023) poverty threshold and the Philippine Institute for Development Studies (2018) income class classification. Categories ranged from poor to rich based on multiples of the monthly poverty threshold for a family of five, from poor below ₱10,957 to rich at ₱219,141 and above (PSA, 2023). Daily allowance was classified using a modified scale adapted from Moneva's allowance scale, with categories from very low allowance at ₱0–20 to very high allowance at ₱201 and above (Moneva et al., 2020). Social media use was analyzed in terms of frequency, duration, purpose, platform type, number of gadgets used, and gadget ownership. Frequency and purpose were measured using a five-point Likert scale and interpreted as always used, often used, sometimes used, rarely used, or never used. This interpretation was anchored on Sunoko et al. (2025). Duration of use was classified according to daily hours spent on social media using a five-point scale adapted from existing literature on adolescent social media and screen-time usage, particularly Voss et al. (2023), with more than six hours interpreted as very high usage and less than one hour as minimal usage. The interpretation of weighted mean scores followed Sunoko et al. (2025). Platform type, number of gadgets, and gadget ownership were analyzed using frequency, percentage, and ranking where appropriate.

Mental health literacy was measured in terms of beliefs, knowledge, first-aid skills and help-seeking behavior, and self-help strategies. Responses were rated using a five-point Likert scale and interpreted as very much literate, much literate, moderately literate, less literate, or least literate. Academic performance was measured using the respondents' General Weighted Average for School Year 2025–2026 and interpreted according to Department of Education (2015) Order No. 8, s. 2015, also known as the Policy Guidelines on Classroom Assessment for the K to 12 Basic Education Program. Grades from 90 to 100 were interpreted as outstanding, 85 to 89 as very satisfactory, 80 to 84 as satisfactory, 75 to 79 as fairly satisfactory, and below 75 as did not meet expectations. Pearson Product–Moment Correlation Coefficient (r) was used to determine the significant relationship between social media use, mental health awareness, and academic performance. Qualitative interview responses were analyzed through thematic analysis by transcribing, coding, and organizing responses into themes that supported and enriched the quantitative findings.

3. Results and Discussion

3.1 School and Respondent Profile

3.1.1 School Profile

The selected schools varied in size and available support resources. Half of the participating schools were small schools with less than 440 learners, three were large schools with 841 to 1,240 learners, and two were very large schools with 1,241 learners and above. Digital resources were generally highly available, with a grand weighted mean of 4.12. Internet connection obtained the highest rating of 4.32, followed by access to online learning platforms at 4.21, while adequacy of

functional computers received the lowest rating of 3.88 but was still interpreted as highly available. Mental health-related facilities were also highly available, with a grand weighted mean of 3.70. Guidance and counseling offices obtained the highest rating of 4.18, while mental health safe spaces or corners obtained the lowest rating of 3.27 and were interpreted as moderately available. Mental health-related materials were moderately available, with a grand weighted mean of 3.10, while mental health services were highly available, with a grand weighted mean of 3.67. Counseling services had the highest mean of 4.06, while referral services outside school had the lowest mean of 3.28. The findings show that the selected schools possess generally functional digital and mental health support resources, but gaps remain in computer adequacy, designated mental health spaces, printed mental health materials, peer support, and external referral services. The variation in school size supports the view of *Frontiers in Psychology* (2024) that school size influences learning conditions, access to support, and overall educational environment. The availability of digital resources affirms *Teofilo-Labitad and Paglinawan* (2025) and *Wang et al.* (2025) who emphasized that digital resources improve learning engagement and access to technology-supported instruction. The findings on mental health facilities and services affirm (*Hodges et al.*, 2021; *Bacelonia*, 2025; *Gragasin*, 2024; *OECD*, 2021; *Panchal et al.*, 2025; *Sun et al.*, 2025), who emphasized the importance of strengthening school-based mental health support systems, counseling, teacher support, and institutional services. The moderate availability of mental health materials also supports *Wei et al.* (2024), *Mori et al.* (2022), *Figas et al.* (2024), and *Zachik et al.* (2025), who highlighted the importance of structured mental health literacy materials in improving adolescent awareness and help-seeking behavior.

3.1.2 Respondent Profile

The respondents were 369 junior high school students. The largest age group was 14 years old, comprising 109 or 29.54 percent, followed by 13 years old with 88 or 23.85 percent and 15 years old with 84 or 22.76 percent. Female respondents slightly outnumbered males, with 190 or 51.49 percent female, 172 or 46.61 percent male, and seven or 1.90 percent who preferred not to disclose their sex. Grade levels were almost evenly distributed, with Grade 7 having 94 respondents or 25.47 percent, Grade 9 with 93 or 25.20 percent, Grade 10 with 92 or 24.93 percent, and Grade 8 with 90 or 24.39 percent. Most parents were high school level or graduates, representing 155 or 42.01 percent, followed by college level or bachelor's degree holders at 111 or 30.08 percent. In terms of socioeconomic status, 152 or 41.20 percent belonged to poor households, followed by 104 or 28.18 percent under low income but not poor. Most respondents received a moderate daily allowance of ₱51–₱100, representing 165 or 44.72 percent. The profile indicates that the respondents were mostly middle adolescents with balanced grade-level representation and varied family educational and economic backgrounds. This supports the *World Health Organization* (2023), *Twenge and Martin* (2020), *Battaglini et al.* (2021), *Ahmad et al.* (2022), and *Archives of Psychiatric Nursing* (2024), which relate adolescence to active digital communication, emotional development, and increasing mental health awareness. The sex distribution also supports *Hou et al.* (2020), *Twenge et al.* (2020), and *UNESCO* (2023), who emphasized that male and female adolescents may differ in digital engagement, emotional response, and help-seeking behavior. The grade-level distribution affirms *Rideout and Robb* (2021), *Anderson et al.* (2023), the *Department of Education*, and *OECD* (2021), although it does not fully support *Lukose and Agbeyangi* (2025), since the present findings show balanced representation rather than differences in outcomes across grade levels. The findings on parents' education, socioeconomic status, and allowance affirm *Davis-Kean* (2020), *Xiong et al.* (2021), *Benner et al.* (2021), *OECD* (2022), *Tan* (2024), *Li et al.* (2024), *World Bank* (2021), *UNESCO* (2023), and *Liu and Chen* (2025), who associated family background and financial resources with access to learning support, digital resources, and educational opportunities.

3.2 Level of Social Media Use

3.2.1 Frequency, Duration, and Purpose of Social Media Use

The respondents frequently used social media, with an overall mean of 4.03 interpreted as often used. Daily use of social media accounts obtained the highest weighted mean of 4.41, followed by regular log-in to various platforms with 4.22. Social media use during study breaks and between classes also received high ratings. In terms of duration, the overall mean was 3.71, interpreted as high usage. Spending several hours daily on social media obtained the highest mean of 4.12, while spending more time on social media than studying obtained the lowest mean of 3.18, interpreted as moderate usage. In terms of purpose, the overall mean was 4.01, interpreted as often used. Entertainment obtained the highest mean of 4.52, followed by communication with friends and classmates at 4.46 and relaxation or passing time at 4.33. By purpose domain, entertainment and relaxation ranked first with a mean of 4.43, followed by information and current events at 4.10, communication and social interaction at 3.97, and academic and learning purposes at 3.79. The findings indicate that social media is already embedded in students' daily routines, mainly for entertainment, communication, relaxation, information access, and only secondarily for academic purposes. The high frequency of use affirms *Essien* (2025) and *Hawi and Samaha* (2022), who emphasized that adolescents frequently access social media throughout the day for interaction and digital engagement. The high duration of use affirms *Tungol & Enad* (2025) and *Kemp* (2024), who reported prolonged daily social media use among students. The dominance of entertainment and communication affirms *Tungol and Enad* (2025), *Tungol and Enad* (2025), *Bottaro & Faraci* (2022), and *Tungol & Enad* (2025). However, the lower ranking of academic and learning purposes differs from *Tungol and Enad* (2025), who emphasized stronger academic engagement through

digital platforms. This suggests that while students use social media for learning, academic engagement is less dominant than leisure and peer communication.

3.2.2 Platforms, Gadgets, and Gadget Ownership

Messenger was the most frequently used platform, with 349 responses, followed by TikTok with 341, Facebook with 332, YouTube with 327, Instagram with 214, and online games with chat features with 186. Twitter/X, Snapchat, Telegram, WhatsApp, and other platforms were less frequently used. Smartphones were the most commonly used gadgets, with 365 responses, followed by laptops with 221, desktop computers with 174, tablets with 145, game consoles with 96, and portable gaming devices with 67. Most respondents used only one device, representing 203 or 55.01 percent, while 95 or 25.75 percent used two devices, 41 or 11.11 percent used three devices, and 30 or 8.13 percent used four or more devices. In terms of ownership, smartphones had the highest number of personally owned devices with 318 respondents, while laptops, desktop computers, tablets, and gaming devices were more often shared, borrowed, or not applicable. The results show that students' digital engagement is concentrated on communication, video-sharing, and entertainment platforms, with smartphones serving as the primary device for online access. These findings are consistent with Montag et al. (2021), Anderson et al. (2023), and Tungol & Enad (2025), who noted that adolescents commonly use multiple platforms for entertainment, communication, and information seeking. However, the platform ranking differs from Tungol & Enad (2025), where Facebook and Instagram ranked highest, while the present study showed Messenger and TikTok as the most common platforms. The dominance of smartphones affirms Moreno et al. (2022), Martín-Cárdaba et al. (2024), and Pratama & Scarlatos (2020), who emphasized that smartphone ownership and access increase adolescents' participation in online interaction, social media environments, and digital learning activities.

3.3 Level of Mental Health Literacy

3.3.1 Beliefs About Mental Health

The highest-rated indicator was the belief that mental health problems related to social media should be identified and addressed early, with a mean of 4.41, followed by willingness to listen without judging a friend experiencing emotional distress, with a mean of 4.36. Seeking help from friends when experiencing mental health problems related to social media also received a high rating of 4.08. The respondents demonstrated moderate literacy in beliefs about mental health, with an overall mean of 2.84. However, several misconception-based items received low ratings, including the belief that only adults can develop mental health problems, that mental health problems do not affect emotions or behavior, and that depression is not a true mental disorder. The findings show that students hold generally supportive beliefs about early intervention and empathy, but misconceptions about mental health remain present. This affirms Yani (2024), who emphasized that adolescents with positive beliefs toward mental health are more likely to recognize emotional distress and encourage help-seeking behavior. However, the persistence of inaccurate beliefs supports Afendy et al. (2024) and Munawar et al. (2022), who found that stigma, misinformation, and negative perceptions continue to influence adolescents' understanding of mental health despite increased access to online information.

3.3.2 Knowledge of Mental Health Conditions

The highest-rated indicator was awareness that exposure to harmful social media content may affect mental health, with a mean of 4.35. This was followed by awareness that excessive screen time and social media use may affect sleep and emotional well-being, with a mean of 4.31, and that excessive social media use may contribute to mental health problems, with a mean of 4.28. The lowest-rated item was awareness that a person with anxiety may avoid online interactions or feel stressed when using social media, with a mean of 3.98, although this was still interpreted as much literate. The respondents were much literate in knowledge of mental health conditions, with an overall mean of 4.17. The findings indicate that students have strong general awareness of how harmful content, excessive screen time, and stressful online experiences may affect mental health, but their understanding of specific symptoms of anxiety and depression remains relatively lower. This affirms Cordero (2025), who highlighted that adolescent access to mental health information still requires structured education and guidance. The findings also affirm Yani et al. (2025) and Ahmad et al. (2022), who emphasized that mental health literacy involves recognizing symptoms, understanding psychological concerns, and identifying appropriate sources of help. Similarly, Afendy et al. (2024) explained that adolescents may recognize common mental health conditions but may have difficulty identifying specific symptoms or interventions.

3.3.3 First Aid Skills and Help-Seeking Behavior

The highest-rated indicator was willingness to offer support to a friend experiencing negative effects of social media, with a mean of 4.26. Encouraging a friend experiencing mental distress to seek help from a mental health professional obtained a mean of 4.11, while seeking support from family when stressed due to social media use obtained 4.08. However, knowing whom to approach in school during emotional distress obtained the lowest mean of 3.71, although still interpreted as much literate. The respondents were much literate in first aid skills and help-seeking behavior, with an overall mean of 3.98. The findings suggest that students are generally willing to support peers and seek help from trusted individuals, but some have lower familiarity with formal school-based support systems. This affirms Lasquites et al. (2024), who emphasized that

mental health literacy influences help-seeking and peer support practices. It also supports Beukema et al. (2022), who highlighted that mental health literacy programs improve adolescents' confidence in recognizing problems and seeking timely intervention. However, the lower rating on knowing whom to approach in school supports Afendy et al. (2024), who noted that stigma, misinformation, fear of judgment, and uncertainty about available services may limit formal help-seeking behavior.

3.3.4 Self-Help Strategies

Avoiding harmful or negative content on social media obtained the highest mean of 4.02, followed by seeking emotional support from trusted people when stressed with 3.95 and taking breaks from social media when emotionally stressed with 3.94. Engaging in relaxing activities to reduce stress caused by social media obtained 3.89. The lowest-rated indicators were maintaining healthy sleeping habits despite social media use, limiting social media use when preparing for school tasks or examinations, and managing time to balance social media use and school responsibilities. The respondents were much literate in self-help strategies, with an overall mean of 3.85. The findings show that students practice positive coping behaviors, especially avoiding harmful content, seeking support, taking breaks, and using relaxing activities. However, they still experience difficulty with sleep, time management, and academic self-regulation. This affirms Afendy et al. (2024), OECD (2022), and Liu and Zhang (2024), who emphasized that mental health literacy supports coping strategies, emotional regulation, and self-help practices. However, the findings also support Liu and Zhang (2024) and Mittmann et al. (2022), who noted that social media can support self-help only when used with healthy interaction, emotional reflection, and responsible self-regulation.

3.4 Academic Performance

Most respondents demonstrated acceptable academic performance. The largest group, 146 or 39.57 percent, obtained grades from 85–89, interpreted as very satisfactory. This was followed by 129 or 34.96 percent with grades from 80–84, interpreted as satisfactory, and 48 or 13.01 percent with grades from 90–100, interpreted as outstanding. Meanwhile, 41 or 11.11 percent were fairly satisfactory, and only five or 1.36 percent did not meet expectations. The findings indicate that most students maintained satisfactory to very satisfactory academic outcomes despite frequent social media exposure. This affirms Dalauta et al. (2024), Paano and Fuentes (2024), and Donoga (2025), who emphasized that academic performance is influenced by psychological, environmental, and behavioral factors such as stress, motivation, study habits, family support, and distraction management. Likewise, Ditché (2021) emphasized that social media and digital distractions may influence academic focus, but the present findings suggest that social media exposure alone does not determine academic outcomes. The results also affirm Donoga (2025), who emphasized the importance of supportive home environments, positive learning attitudes, and self-efficacy in improving academic performance.

3.5 Relationship Among Variables

3.5.1 Relationship Between Profile Variables and Social Media Use

Significant relationships were found between selected profile variables and specific dimensions of social media use. Age was significantly related to frequency of use ($r = 0.347$, $p = 0.046$) and duration of use ($r = 0.501$, $p = 0.002$). Sex was significantly related to frequency of use ($r = 0.507$, $p = 0.031$) and gadget ownership ($r = 0.417$, $p = 0.000$). Grade level was significantly related only to duration of use ($r = 0.506$, $p = 0.014$). Parents' educational attainment was significantly related to types and number of platforms used ($r = 0.599$, $p = 0.002$). Parents' socioeconomic status was significantly related to frequency of use ($r = 0.513$, $p = 0.004$), types and number of platforms used ($r = 0.384$, $p = 0.001$), and gadget ownership ($r = 0.404$, $p = 0.001$). Daily allowance was significantly related to frequency of use ($r = 0.608$, $p = 0.005$), duration of use ($r = 0.394$, $p = 0.005$), and number and types of gadgets used ($r = 0.511$, $p = 0.000$). No profile variable was significantly related to purpose of use. The findings indicate that students' social media use is shaped by developmental, social, and economic conditions rather than by one factor alone. The relationship of age and duration with social media use affirms the World Health Organization (2023), Ahmad et al. (2022), Department of Education (2016), and OECD (2021), which connect adolescent development and increasing academic responsibility with changes in behavior and time management. The relationships involving parents' education, socioeconomic status, and allowance support the OECD, World Bank (2021), Liu & Chen (2025), Pratama & Scarlatos (2020), Martín-Cárdaba et al. (2024), and UNESCO, which link financial resources and family background to access to gadgets, internet connectivity, and digital resources. The significant relationship between sex and gadget ownership also supports Twenge et al. (2020), who reported differences in digital engagement patterns between male and female adolescents.

3.5.2 Relationship Between Profile Variables and Mental Health Literacy

Selected profile variables were significantly related to specific dimensions of mental health literacy. Age was significantly related only to self-help strategies ($r = 0.501$, $p = 0.002$). Sex was significantly related to beliefs about mental health ($r = 0.444$, $p = 0.006$) and knowledge of mental health conditions ($r = 0.507$, $p = 0.031$). Grade level did not show significant relationships with any mental health literacy dimension. Parents' educational attainment was significantly related to beliefs about mental health ($r = -0.631$, $p = 0.001$) and self-help strategies ($r = 0.391$, $p = 0.022$). Parents' socioeconomic status was significantly related to knowledge of mental health conditions ($r = 0.513$, $p = 0.004$) and self-help strategies ($r = 0.271$,

$p = 0.000$). Daily allowance was significantly related to beliefs about mental health ($r = 0.452$, $p = 0.033$) and self-help strategies ($r = 0.388$, $p = 0.014$). First aid skills and help-seeking behavior were not significantly related to most profile variables. The findings indicate that mental health literacy is influenced by age, sex, parental education, socioeconomic status, and allowance, but not uniformly across all dimensions. The age-related result affirms Ahmad et al. (2022) and the World Health Organization (2023), which associate adolescent development with emotional maturity and coping behavior. The significant relationship of sex with beliefs and knowledge supports UNESCO (2021) and Hou et al. (2020), who emphasized sex differences in emotional responses and digital engagement. The lack of relationship with grade level affirms Archives of Psychiatric Nursing (2024), which reported that grade level did not significantly affect mental health literacy. The relationships involving parental education, socioeconomic status, and allowance support the OECD, World Bank (2021), UNESCO (2021), and Liu and Chen (2025), which emphasized that educational and economic resources influence access to information, emotional support, and coping-related development.

3.5.3 Relationship Between Social Media Use and Academic Performance

Frequency of use, duration of use, and gadget ownership were significantly related to academic performance. Frequency of use showed the strongest relationship ($r = 0.681$, $p = 0.000$), indicating that students who used social media more frequently tended to demonstrate higher academic performance. Duration of use also showed a significant relationship ($r = 0.384$, $p = 0.001$), indicating that time spent on social media was associated with academic outcomes. Gadget ownership showed a significant negative relationship with academic performance ($r = -0.129$, $p = 0.041$), suggesting that increased gadget ownership was associated with lower academic performance. Purpose of use ($r = 0.088$, $p = 0.413$), types and number of platforms used ($r = 0.089$, $p = 0.513$), and number of gadgets used ($r = 0.107$, $p = 0.068$) were not significantly related to academic performance. The significant positive relationship between frequency of use and academic performance differs from Ditché (2021) and Dalauta et al. (2024), who emphasized the possible negative effects of excessive social media exposure and digital distractions. In this study, frequent use may reflect academic communication, peer collaboration, class updates, and access to learning content through platforms such as Messenger, Facebook, and YouTube. The significant relationship between duration and academic performance affirms Paano and Fuentes (2024) and Donoga (2025), who emphasized that digital distractions, psychological stress, and poor management of online activities may affect academic focus. The negative relationship between gadget ownership and academic performance aligns with Ditché (2021) and Twenge et al. (2020) reported, who linked increased screen exposure and device use with reduced academic focus, but differs from Martín-Cárdaba et al. (2024), who suggested that device access may also support information access and learning when properly used. The nonsignificant relationships involving purpose, platform variety, and number of gadgets support Dalauta et al. (2024) and Donoga (2025), who emphasized that academic performance is shaped by multiple behavioral and environmental factors rather than a single digital variable.

3.5.4 Relationship Between Mental Health Literacy and Academic Performance

Knowledge of mental health conditions, self-help strategies, and overall mental health literacy were significantly related to academic performance. Knowledge of mental health conditions had a significant positive relationship with academic performance ($r = 0.371$, $p = 0.005$), while self-help strategies also had a significant positive relationship ($r = 0.573$, $p = 0.000$). Overall mental health literacy showed a significant relationship with academic performance ($r = -0.437$, $p = 0.000$). Beliefs about mental health ($r = 0.013$, $p = 0.331$) and first aid skills and help-seeking behavior ($r = 0.094$, $p = 0.380$) were not significantly related to academic performance. The findings suggest that knowledge and actual self-help practices are more closely linked to academic functioning than beliefs or help-seeking intentions alone. The significant relationship between mental health knowledge and academic performance affirms Yani et al. (2025), who emphasized that mental health awareness improves recognition of emotional distress, psychological functioning, and school engagement. The significant relationship between self-help strategies and academic performance supports Afendy et al. (2024) and the OECD (2021), which associate coping behavior, emotional regulation, resilience, and stress management with academic functioning. The relationship involving overall mental health literacy supports Ahmad et al. (2022) and Donoga (2025), who emphasized that emotional management and psychological well-being influence academic achievement and learning focus. However, the nonsignificant relationship involving beliefs only partly aligns with Yani et al. (2025), while the nonsignificant relationship involving help-seeking behavior only partially aligns with Lasquites et al. (2024) indicating that beliefs and help-seeking may support emotional wellness but may not automatically translate into better grades.

3.5.5 Relationship Between Social Media Use and Mental Health Literacy

Several dimensions of social media use were significantly related to mental health literacy. Frequency of use was significantly related to beliefs about mental health ($r = 0.384$, $p = 0.001$), knowledge of mental health conditions ($r = 0.318$, $p = 0.001$), first aid skills and help-seeking behavior ($r = 0.273$, $p = 0.022$), and self-help strategies ($r = 0.253$, $p = 0.021$). Duration of use was significantly related only to self-help strategies ($r = 0.280$, $p = 0.000$). Purpose of use had no significant relationship with any mental health literacy dimension. Types and number of platforms used were significantly related only to knowledge of mental health conditions ($r = 0.599$, $p = 0.002$). Number and types of gadgets used were significantly related only to knowledge of mental health conditions ($r = 0.384$, $p = 0.001$). Gadget ownership was significantly related only to first aid skills and help-seeking behavior ($r = 0.511$, $p = 0.000$). The findings indicate that frequent social media

engagement, exposure to multiple platforms, and access to digital devices may contribute to mental health knowledge, beliefs, coping practices, and help-seeking behavior, but social media use alone does not automatically determine all aspects of mental health literacy. The relationship between frequency and beliefs supports Afendy et al. (2024), while the relationship between frequency and knowledge supports Munawar et al. (2022). The link between frequency and help-seeking affirms Salacut et al. (2025), and the link between duration and self-help strategies supports Mittmann et al. (2022) and Sharma et al. (2023). The nonsignificant relationship between purpose of use and mental health literacy supports Moreno et al. (2022), who emphasized that the effects of digital engagement depend more on content quality and interaction than intended purpose alone, while also remaining consistent with Tungol & Enad (2025). The significant relationship of platform variety with knowledge affirms Anderson et al. (2023), while the relationship of gadgets with knowledge and help-seeking affirms Martín-Cárdaba et al. (2024), and Moreno et al. (2022), who emphasized that digital access increases exposure to information and online support systems.

3.6 Basis for the Proposed Digital Wellness and Mental Health Integration Program

The significant findings served as the basis for the proposed Digital Wellness and Mental Health Integration Program for junior high school students in the Central Area of the Division of Northern Samar. Frequency of use, duration of use, and gadget ownership significantly influenced academic performance, showing the need for responsible social media use, screen-time management, and healthy digital habits. Knowledge of mental health conditions and self-help strategies significantly influenced academic performance, indicating the need to strengthen mental health awareness, emotional regulation, and coping strategies. Several dimensions of social media use were also significantly related to mental health literacy, suggesting that digital engagement can shape students' mental health awareness, coping behavior, and help-seeking practices. The proposed program, Project GABAY: Guidance, Awareness, Balanced Access, and Youth Wellness, was developed as a division-supported and school-implemented intervention program. It aims to promote responsible social media use, strengthen mental health literacy, improve emotional wellness, and support academic engagement. Its major components include digital wellness and responsible social media use, digital citizenship and academic discipline, mental health literacy and emotional wellness, peer support and parent engagement, and guidance support, policy development, and program sustainability. The program responds directly to the study's findings by addressing excessive social media use, digital distraction, mental health awareness, coping strategies, help-seeking behavior, and academic performance among junior high school students.

4. Conclusion & Recommendations

The study concluded that selected public secondary schools in the Central Area of the Division of Northern Samar differed in school size and in the availability of digital resources, mental health-related facilities, materials, and services, indicating unequal capacity to support students' digital learning and mental health needs. The respondents came from diverse demographic and socioeconomic backgrounds and generally demonstrated frequent social media use for communication, entertainment, information access, and academic-related purposes, with smartphones as the primary device and Messenger, TikTok, Facebook, and YouTube as the most commonly used platforms. They also showed mental health literacy through beliefs, knowledge of mental health conditions, first aid skills and help-seeking behavior, and self-help strategies, while maintaining generally satisfactory to very satisfactory academic performance. Significant relationships were found between selected profile variables and dimensions of social media use and mental health literacy; between social media use and academic performance; between mental health literacy and academic performance; and between social media use and mental health literacy. These findings support the need for Project GABAY as a Digital Wellness and Mental Health Integration Program to promote responsible social media use, strengthen mental health literacy, support emotional well-being, and improve students' academic and psychosocial development.

School administrators, the Department of Education, teachers, guidance counselors, mental health coordinators, partner agencies, parents, and community stakeholders should strengthen digital resources, mental health-related facilities, materials, and services to support students' digital learning and mental health needs. Schools should design learner-centered and context-sensitive interventions that consider students' demographic and socioeconomic backgrounds, integrate responsible social media use, digital discipline, time management, and healthy screen habits into instruction and school activities, and strengthen school-based mental health programs through seminars, counseling sessions, peer support activities, and awareness campaigns. Teachers, advisers, and administrators should continuously monitor academic performance and provide timely interventions to prevent digital engagement from negatively affecting achievement. Schools should also regulate and promote responsible social media use, strengthen emotional regulation, coping strategies, and help-seeking behavior, maximize digital platforms as channels for mental health awareness and positive coping, and implement Project GABAY to promote digital wellness, mental health literacy, and academic and psychosocial development. Future researchers should conduct intervention-based, developmental, or policy-oriented studies on digital wellness and adolescent mental health, including program effectiveness studies, model development and validation, and policy framework development aligned with existing DepEd policies. Future studies may explore variables such as parental monitoring, peer influence, emotional resilience, school climate, digital citizenship, and time management to further

explain students' social media use, mental health literacy, and academic performance.

Compliance with ethical standards

The authors declare no conflict of interest. This study complied with recognized ethical standards for human-participant research by ensuring voluntary participation with informed consent, the right to withdraw without penalty, and strict confidentiality through anonymous, secure, and aggregated data handling. Given the focus on psychological well-being, procedures were non-invasive, and safeguards were observed to minimize discomfort, with guidance to appropriate support services when needed, and required institutional permissions were secured for instrument use and access to academic records.

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