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A Study of the Long-Term Effects of Social Media Use and College Students' Dormitory Living Space on Their Mental Health

Siyu Chen[1,*]
[1] Nantong Institute of Technology, Nantong, Jiangsu, 226000, China
Corresponding authors: (e-mail: ntitcsy@126.com).

Abstract In this study, 7838 valid data were collected from four classes of students in a university, using the Mental Health Literacy Rating Scale, SCL-90 Symptom Self-Rating Scale, and self-administered demographic-sociological questionnaire, to construct a quantitative analysis framework of social media dependency behaviors, dormitory living space characteristics, and mental health. The results showed that the total score of college students' mental health literacy was 86.15±12.31, of which the total score of the behavioral dimension was significantly lower than the other dimensions, 17.41±5.75, indicating that there was a significant disconnect between the acquisition of mental health knowledge and practical ability. Demographic heterogeneity analysis showed that mental health literacy was significantly higher among students who were female, in higher grades, in good family economic status, with harmonious parental marital relationship and strong parent-child relationship (all $P<0.05$). Short-video social media dependence behavior was a significant positive predictor of depression ($\beta=0.645$, $P=0.004$) and anxiety ($\beta=0.645$, $P<0.001$), with social comparison playing a partially mediating effect (depression: $T=2.384$, $P=0.029$; anxiety: $T=2.384$, $P=0.029$). Among the dormitory living space characteristics, functionality score $\beta=-0.217$, spatial independence $\beta=-3.874$, and satisfaction $\beta=-1.952$ were significantly negatively correlated with the total SCL-90 score. This study reveals that social media dependence exacerbates psychological risk through social comparison, and that optimizing dormitory spatial design can be an important pathway for protective intervention.

Index Terms social media use, dormitory living space, multiple linear regression, college students' mental health

I. Introduction

Due to the pressure from various aspects, the proportion of university students with mental health problems in these years is as high as 30%, and those with mental disorders also account for more than 10% [1]. The number of students who withdrew from school due to mental problems accounted for about 37.9% of the total number of students who withdrew from school due to illness, and the proportion of students who took a leave of absence for this reason was even higher than 64% [2], [3]. In recent years, some scholars have investigated the quality of college students' mental health, and the results of the investigation also clearly show that the mental health problems of college students are no longer an isolated phenomenon, but have already become a worrying common problem on the road of their growth, and even directly affect the quality of college students' training, as well as the stability and safety of the campus [4], [5].

As a product of information technology, social media can expand the interpersonal circle of college students, increase their access to information resources, enrich their daily life, and thus constitute a positive impact on their psychological behavior [6]. However, due to the huge and messy information, it is inevitable to mix vulgar and negative content, which may also constitute a negative impact on the psychology and behavior of college students. Positive impact, expanding the scope of communication, improving social skills, broadening the path of growth, and forming correct values [7]. Negative impact, too much reliance on the media, addicted to the virtual world, resulting in the rusty relationship between themselves and others, and the social skills and social adaptability in the real world will decline, long-term addiction to the virtual world, may lead to college students to develop mental health problems, such as self-enclosure, anxiety and depression, and blind arrogance, etc.. Violence, extreme language behavior, and the infiltration of undesirable cultures such as gold-worshipping and terrorism lead to value deviation [8]-[12].

College students' dormitory is an important part of university life, and a good dormitory environment can provide a warm, comfortable, and safe living space, which can help to promote the healthy growth and the cultivation of a positive mindset of college students, and the temperature and humidity of the living space, light, scale size, layout, and ambient noise affect the level of mental health of students from the quality of their sleep, the atmosphere of

their study, and their interpersonal relationships [13]-[16]. Therefore, it is worthwhile to investigate how the interaction between social media use and living space affects the mental health of college students.

This study aims to reveal the dynamic mechanism of short-video social media dependence behavior and dormitory living space characteristics on college students' mental health through a systematic research method. The article first clarifies the research object and method. Using a cross-sectional survey design with a sample of four classes of students from a university, 7838 valid data were obtained through the mental health census questionnaires (Mental Health Literacy Rating Scale, SCL-90 scale with self-administered demographic and sociological characteristics questionnaire). The study followed the principle of informed consent, combined with strict exclusion criteria for invalid questionnaires, to ensure the reliability and representativeness of the data. The SCL-90 scale, as a core assessment tool for mental health, quantifies the multidimensional manifestation of psychological problems through the total score and 10 factor scores (e.g., depression, anxiety, etc.), and its high coefficient of internal consistency further validates the validity of the scale. On this basis, for social media dependence behavior, the study revised the Social Networking Site Dependence Scale (SNDS), constructing a continuous dependence score (6-30 points) with categorical variables (dependence behavior ≥24 points) through a 5-point scale of 6 behavioral characteristics. The mental health dimension was quantified from multiple perspectives through the SCL-90 total score and subdivided factor scores. Meanwhile, the living space characteristics of the dormitory were deconstructed into three dimensions: functionality score was based on expert assessment or student feedback, and comprehensively measured the configuration of facilities such as washrooms and activity rooms; spatial independence was dichotomized by whether or not the dormitory had a separate bathroom or kitchen; and spatial satisfaction was reflected by the subjective ratings of students on the privacy and convenience (scores from 1 to 5). Finally, a multiple linear regression model was introduced to integrate social media dependence and living space characteristics to analyze their long-term effects on total mental health scores. The model parameters were estimated by the least squares method, and the multiple covariance test and stepwise regression method were combined to optimize the variable screening and ensure the robustness of the model.

II. Research methodology and variable system construction: quantitative analysis of mental health

II. A. Subjects and Methods

Taking the students of 2021, 2022, 2023 and 2024 sessions of a college of a university as the research appendage, the college's mental health assessment census was carried out from March to April 2025, and a total of 8376 questionnaires about the mental health of college students were distributed, and 538 invalid to the rolls such as filling out the errors and omissions were excluded, and the actual recovery of the valid questionnaires was 7838, with an effective recovery rate of 93.58%.

This survey was conducted with the informed consent of the participants. Based on the Mental Health Literacy Assessment Scale and SCL-90 scale as mental health assessment tools. The Mental Health Literacy Assessment Scale (MHLAS), which is used to assess the mental health literacy status of Chinese adolescents, consists of 22 items divided into four dimensions, namely, knowledge, identification, attitude and behavior. Each item is scored on a Likert 5-point scale, with a score of "1" to "5" from "strongly disagree" to "strongly agree". All the entries are summed up to be the total score of the scale, and the higher the total score indicates the higher level of mental health literacy of an individual. The scale has been applied in the college student population and has good reliability and validity. The Cronbach's alpha coefficient of the scale was 0.802 in this survey.

The SCL-90 most form has 90 items divided into 10 factors. Somatization, Obsessive-Compulsive, Interpersonal Beauty System, Depression, Anxiety, Hostility, Fear, Paranoia, Psychoticism, and Other. Each item in the paper was scored on a 5-point scale (1-5) of none, very mild, moderate, severe and serious, with the total score being the sum of all the individual scores. Higher total scores represent poorer mental health.SCL-90 positive screening criteria: total score ≥200. Or a single score ≥2 is considered as a positive item, and the number of positive items ≥43; mean score of any factor ≥3.

In addition, we designed our own questionnaire on basic demographic and sociological characteristics, including gender, grade, family characteristics, parents' marital relationship, and relationship score with parents, etc., and administered the questionnaire to university students. The questionnaire is based on the results of the school's family financial hardship assessment. Relationships with parents were rated on a 5-point scale, with “1” indicating exceptionally poor, “2” indicating poor, “3” indicating fair, “4 “ means good, and “5” means exceptionally good. SPSS 26.0 was used to enter the data and carry out statistical analysis, which included descriptive statistics, chi-square test, and multiple linear regression analysis.

II. B.Quantification of Social Media Dependent Behavior and Mental Health Assessment Characteristics

On the basis of clarifying the research object and data collection method, in order to further analyze the mechanism of social media use and residential space characteristics on mental health, this study needs to scientifically define and quantify the core variables. Therefore, in this section, the measurement tools and scoring criteria for social media dependence behavior, mental health assessment and residential space characteristics will be elaborated in detail.

II. B. 1) Short Video Social Media Dependency Behavior

The Social Website Dependence Scale was used to conduct the survey, and the scale was modified and improved to meet the requirements of this study. The scale contains six items, namely, “preferring to swipe short videos and other social media every day rather than participate in other recreational activities; choosing to swipe short videos and other social media in order to escape from reality and get rid of anxiety; increasing the time spent online on short videos and other social media in order to increase the sense of fulfillment; feeling uncomfortable when not able to swipe short videos and other social media and relieving the opposite; continuing to swipe short videos and other social media even when aware of the negative consequences (being late for class); continue to use social media such as short videos; sleep less than before”. The scale was rated on a 5-point scale (1-5) from “completely disagree” to “completely agree”, with higher scores indicating greater dependence on short-video social media, and the internal consistency coefficient of the scale was 0.845. A total score of <24 was considered normal, and ≥24 was considered to have short video social media dependent behavior.

II. B. 2) Mental health

The Chinese version of the symptom self-assessment scale SCL-90 was selected, with 90 items, including somatization, obsessive-compulsive symptoms, interpersonal sensitivity, depression, anxiety, hostile phobia, paranoia, psychoticism, and others with a total of 10 factors, using a 5-point scale, with 1 being never and 5 being very serious, and the higher the score indicates that the study participants' mental health status is worse, and the coefficient of internal consistency of this scale was 0.884.

II. C.Spatial design of socialized living units for university students

After completing the quantification of core behavioral and psychological variables, it becomes crucial to transform the physical attributes of dormitory living spaces into analyzable statistical indicators. This section thus proposes the conceptual framework of 'socialized living unit space' to systematically construct an assessment system of living space characteristics through the three dimensions of functionality, independence and satisfaction.

The concept of "living unit space" is proposed here, "living unit space" is the most basic "cell" of college students in their living life, which takes the "living room" as the nucleus and surrounds a series of basic living needs such as toilets, toilets, activity rooms, balconies, storage rooms, and even kitchens, which together form a space group that meets the most important living needs of college students. Because it is a relatively complete and relatively independent space system, it is called "unit space".

II. D.Multiple linear regression models

In order to comprehensively assess the joint effects of social media dependent behavior and residential space characteristics on mental health, this section introduces a multiple linear regression model. By integrating the aforementioned quantitative variables and control factors, the model will reveal the independent effects and interactions of different independent variables on the total mental health scores, ultimately forming a complete chain of analysis.

II. D. 1) Model concepts

Multiple linear regression is a statistical method used to analyze the linear relationship between multiple independent variables and a dependent variable. In linear regression, the least squares method is usually used to estimate the model parameters. It finds the best function match for the data by minimizing the sum of squares of the errors and tests the established regression model by substituting the values of the eligible variables to get the predicted values. Equation (1) is a multiple linear regression model where β_1, β_2, β_3, are n coefficients to be determined by regression, Y is the explanatory variable also known as the dependent variable, β is a constant term, X_1, X_2, ..., X_n are n general variables that can be measured or controlled, known as explanatory variables also known as the independent variables and ε is the random error.

$$Y = \beta_0 + \beta_1 X_1 + \beta_2 X_2 + \cdots + \beta_3 X_n + \varepsilon \tag{1}$$

II. D. 2) Selection of indicators

This study analyzes the long-term effects of social media use and college students' dormitory living space on their mental health through multiple linear regression models. Specific indicators were selected as follows. The dependent variable was the overall mental health status of the students, using the SCL-90 scale total score (continuous variable), with higher total scores indicating poorer mental health. The core independent variables were divided into social media use and dormitory living space characteristics. Social media use was quantified by the short-video social media dependence behavior score, based on the modified social networking site dependence scale, with a total score ranging from 6 to 30, with higher scores indicating stronger dependence. Dormitory living space characteristics include (1) Space functionality score: a comprehensive score based on the living unit space design (e.g., washroom, activity room, storage room, and other facility configurations), which is derived from expert assessments or student satisfaction surveys. (2) Spatial independence: whether or not there is a separate toilet or kitchen (Yes=1, No=0). (3) Spatial satisfaction: students' subjective feelings about the spatial layout, privacy, and convenience of the dormitory are assessed through questionnaire ratings (1~5 points).

III. A study of the effects of social media dependence and dormitory space characteristics on the mental health of college students

Based on the variable system and research methodology constructed in Chapter 2, this chapter focuses on the dynamic effects of social media dependence behavior and dormitory living space characteristics on college students' mental health, and reveals their pathways and interactive effects through quantitative analysis.

III. A. Analysis of the current status of mental health literacy among college students and its demographic heterogeneity

III. A. 1) Current situation of mental health literacy among university students

The mental health literacy of college students based on the Mental Health Literacy Rating Scale is shown in Table 1, and in order to show the scores of each dimension more clearly, the scores of each dimension of mental health literacy of college students from 7838 questionnaires were plotted as a box line diagram as shown in Figure 1.

Table 1: The mental health literacy of college students

Dimension	Score range	Average score	Average score of entries
Knowledge	8-30	25.06±5.55	3.53±1.14
Identification	7-25	19.68±4.30	3.24±1.58
Attitude	6-30	24.00±6.07	4.78±0.21
Behavior	6-25	17.41±5.75	4.31±0.58
Total score	53-110	86.15±12.31	3.90±0.82

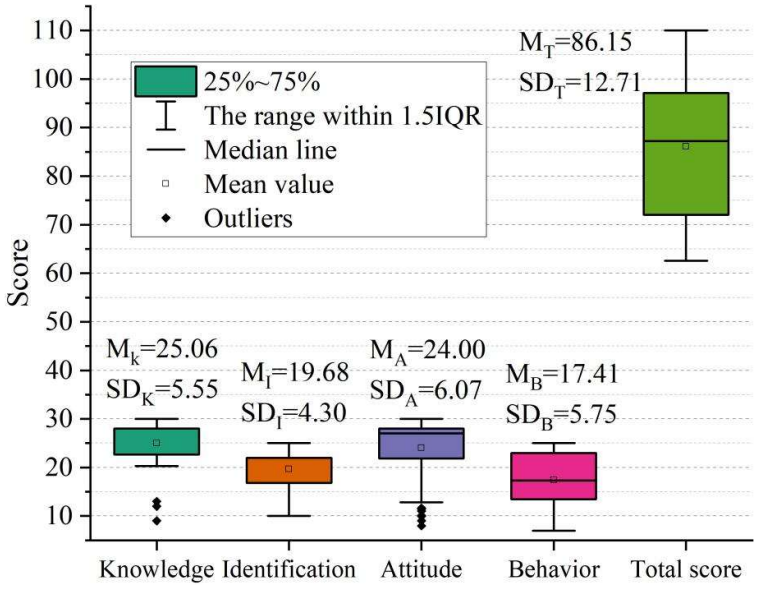

Figure 1: Scores of each dimension of mental health literacy among college students

According to the data of the Mental Health Literacy Rating Scale, the total score of mental health literacy of college students ranges from 53 to 110, with an average score of 86.15±12.31 and an entry mean score of 3.90±0.82, indicating that the overall mental health literacy is at a moderate to high level. In terms of sub-dimensions: the score range of the knowledge dimension is 8~30 points, the average score is 25.06±5.55 points, and the mean score of the entries is 3.53±1.14 points, which is the lowest score among the four dimensions and has a large standard deviation, suggesting that there are significant individual differences in the degree of college students' mental health knowledge.

The score range of the identification dimension is 7~25 points, with an average score of 19.68±4.30 points and an entry mean score of 3.24±1.58 points, which is slightly lower than that of the knowledge dimension, with the largest fluctuation range of the entry mean score and a large standard deviation of 1.58, reflecting that there is a large differentiation in the ability of college students to identify mental health problems.

Attitude dimension scores range from 6 to 30, with a mean score of 24.00±6.07 and an entry mean score of 4.78±0.11, which is the dimension with the highest entry mean score among the four dimensions, and the smallest standard deviation of 0.21, indicating that college students generally have a positive attitude toward mental health and a high degree of internal consistency.

The behavioral dimension scores ranged from 6 to 25, with a mean score of 17.41±5.75 and an entry mean score of 4.31±0.58. Although the entry mean score was higher, the total score was significantly lower than that of the other dimensions, indicating that although college students agree with the importance of mental health behaviors, their ability to practise them in practice is limited, which may be related to the real-life conditions or insufficient executive power.

III. A. 2) Analysis of Factors Influencing College Students' Mental Health Literacy

Univariate analysis of college students' mental health literacy Comparison of mental health literacy scores of college students of different genders, grades, family economic status, parents' marital relationship status, and relationship with parents scores showed statistically significant differences (all P<0.05). The mental health literacy of college students with different demographic characteristics is shown in Table 2.

Table 2: The mental health literacy with different demographic characteristics

Project		Number of people	Proportion	Score of mental health literacy	T	P
Gender	Male	4027	51.38%	83.24±12.15	5.672	0.028
	Female	3811	48.62%	89.12±11.89		
Grade	Freshman Year	3121	39.82%	85.53±12.33	8.433	0.002
	Sophomore year	2536	32.36%	86.26±12.12		
	Junior year	1570	20.03%	87.81±11.97		
	Senior year	611	7.80%	88.51±11.65		
Family economic situation	Poor	708	9.03%	80.17±13.23	12.853	0.000
	General	4897	62.48%	85.44±12.04		
	Good	2233	28.49%	90.23±10.86		
Parental marital relationship	Poor	912	11.64%	78.37±11.59	15.322	0.000
	General	5103	65.11%	85.64±12.24		
	Good	1823	23.26%	91.47±10.55		
Relationship with parents	Poor	1467	18.72%	76.82±15.03	18.917	0.000
	General	4164	53.13%	85.31±12.41		
	Good	2207	28.16%	92.18±10.21		

Table 2 explores the effects of different demographic characteristics on mental health literacy among college students through univariate analysis. The results showed that gender, grade level, family economic status, parental marital relationship and relationship with parents scores were significantly associated with mental health literacy scores, all with $P < 0.05$.

Gender difference: the total mental health literacy score of females (89.12±11.89) was significantly higher than that of males (83.24±12.15), and the independent samples t-test showed T=5.672, P<0.028. This may be related to the fact that females are more inclined to take the initiative to pay attention to mental health knowledge and participate in psychological support activities.

Changes in grade level: mental health literacy scores tended to increase with grade level (freshman to senior: 85.53→88.51), and one-way ANOVA showed t=8.433, P<0.002. Higher-grade students may have improved their literacy level due to the accumulation of more experience in mental health courses or social support resources.

Family economic status: students with good family economic status scored significantly higher (90.23±10.86) than the average (85.44±12.04) and poor (80.17±13.23) groups, t=12.853, p=0.000. Economic advantages may provide more opportunities for mental health education and relief from life's stresses, thus enhancing literacy.

Parental marital relationship: students with good parental marital relationship scored the highest (91.47±10.55), which was significantly better than the group with average (85.64±12.24) and poor (78.37±11.59) relationship, t=15.322, p=0.000. Stable family environment may contribute to the development of mental health literacy through emotional support and positive modeling.

Relationship with parents: students who scored high on relationship with parents had significantly higher mental health literacy scores (92.18±10.21) than the average (85.31±12.41) and poor (76.82±15.03) groups, t=18.917, p=0.000. Good parent-child interactions may enhance psychological resilience and improve awareness and coping with mental health problems.

III. B. Impact of Social Media Use on College Students' Mental Health

After clarifying the overall level of mental health literacy among college students and its demographic differences, we further explored how short-video social media dependency behaviors exacerbate depression and anxiety through the social comparison mechanism, and become an important risk factor for mental health.

Using the factors of “depression” and “anxiety” in the SCL-90 scale, we analyzed the mediating effect of social comparison on the relationship between short-video social media dependence and depression and anxiety, controlling for the variables of gender and grade level, at a confidence interval of 95%. The mediating effect of social comparison in the relationship between depression and anxiety was validated. Table 3 shows the multiple linear regression model test for social comparison.

Table 3: Test of the multiple linear regression model for social comparison

Result variable /Predictive variable	Depression		Anxiety		Social comparison	
	T	P	T	P	T	P
Gender	1.432	0.283	1.875	0.112	2.389	0.047
Grade	0.827	0.527	1.023	0.316	1.324	0.299
Social comparison	4.827	0.004	5.184	0.000		
Short videos rely on social media	0.638	0.734	0.831	0.477	2.384	0.029
R^2	0.077		0.022		0.028	
F	5.374		4.395		3.841	

Table 3 demonstrates the results of a multiple linear regression of the mediating effect of social comparison in the relationship between short-video social media dependence and depression and anxiety. After controlling for gender and grade, short-video social media dependence behavior was a significant positive predictor of both depression (β=0.645, T=4.827, P=0.004) and anxiety (β=0.645, T=5.184, P<0.001), suggesting that higher levels of dependence were associated with higher levels of depression and anxiety. Social comparison showed partial mediating effects between short video dependence and both depression (T=2.384, P=0.029) and anxiety (T=2.384, P=0.029). The R^2 of the overall explanatory power of the model was 0.077 for depression and 0.022 for anxiety, suggesting that variables other than social media dependence have a limited contribution to the explanation of mental health. Gender was only significant in the social comparison dimension (T=2.389, P=0.047), while the direct effect of grade level on both depression and anxiety was not significant (P>0.05).

III. C. Impact of living space in university students' dormitories on their mental health

In addition to social media use, the functionality, independence, and satisfaction characteristics of dormitory living spaces, as the physical vehicle of college students' daily lives, also have a profound impact on mental health. This section analyzes the protective effects of dormitory space design through multiple regression modeling.

This study examined the effects of three dimensions of dormitory living space (functionality, independence and satisfaction) on college students' mental health (SCL-90 total score) through a multiple linear regression model. The model controlled for demographic variables such as gender, grade level, and family economic status, and introduced the short-video social media dependent behavior score as one of the core independent variables. The regression results of the effect of college students' dormitory living space on their mental health are shown in Table 4.

Table 4: Multiple linear regression of dormitory living space on mental health

Variable	β	SD	T	P	95% confidence interval
Functional score	-0.217	0.049	-4.429	0.000	[-0.313, -0.121]
Spatial independence (is =1)	-3.874	1.236	-3.134	0.002	[-6.298, -1.450]
Spatial satisfaction	-1.952	0.287	-6.798	0.000	[-2.515, -1.389]
Short videos rely on behavior scores	0.645	0.065	9.923	0.000	[0.518, 0.772]
Gender (Female =1)	-2.101	0.756	-2.777	0.006	[-3.584, -0.618]
Grade (Senior grade =1)	-1.234	0.399	-3.094	0.002	[-2.016, -0.452]
Family economic status (good =1)	-4.567	1.102	-4.143	0.000	[-6.729, -2.405]
R^2	0.786				
Adjust R^2	0.281				
F	42.75				

Functionality scores in each dimension of college students' dormitory living conditions were significantly negatively correlated with the total SCL-90 score, β = -0.217, P = 0.000, indicating that the better equipped the dormitory facilities are, the better the students' mental health is. For every 1-point increase in the functionality score, the total SCL-90 score was expected to decrease by 0.217 points. With regard to spatial independence, students with separate bathrooms or kitchens (independence = 1) had significantly lower SCL-90 total scores than students without separate spaces, β = -3.874, P = 0.002. Independent space may alleviate psychological stress by enhancing privacy and convenience of living. Space satisfaction had the most significant effect on mental health, β = -1.952, 0.000. For every 1-point increase in students' subjective satisfaction with dormitory privacy and convenience, the total SCL-90 score decreased by 1.952 points, suggesting that the subjective experience has a much greater effect on mental health than the objective configuration of facilities.

The overall R^2 of the model = 0.786, indicating that dormitory living space characteristics, social media dependence, and demographic variables jointly explained 78.6% of the variance in total mental health scores, with moderate explanatory power.

IV. Conclusion

In this study, we quantitatively analyzed the social media dependency behaviors, dormitory living space characteristics, and their mental health levels of 7838 college students to reveal the dynamic mechanism of the two on mental health.

Short-video social media dependency behavior was a significant positive predictor of depression (β=0.645, P=0.004) and anxiety (β=0.645, P<0.001), indicating that for every 1-point increase in dependency, the levels of depression and anxiety rose by 0.645 points, respectively. Social comparison partially mediated the effect between dependent behavior and psychological problems (T=2.384, P=0.029), revealing that social media indirectly impaired mental health by exacerbating social comparison.

Dormitory functionality score (β=-0.217, P=0.000), spatial independence (β=-3.874, P=0.002), and satisfaction (β=-1.952, P=0.000) were significantly negatively correlated with the total SCL-90 score. In particular, for every 1-point increase in space satisfaction, the total mental health score was reduced by 1.952 points, an effect that far exceeded that of objective amenity configurations (e.g., functionality scores were reduced by only 0.217 points). The configuration of an en-suite bathroom or kitchen reduced the total mental health score by 3.874 points, emphasizing the importance of privacy and convenience.

Multiple regression modeling (R^2 = 0.786) indicated that social media dependence, dorm space characteristics, and demographic variables collectively explained 78.6% of the variance in mental health.

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