

Gender Differences in the Impact of Social Media Misinformation on Jagannath University Students' Mental Well-being: Exploring Confidence Level, and Media Literacy Needs for Identifying Misinformation

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Abstract

Social media is one of the most common sources of information in the digital age, especially among university students; however, this platform is also used to spread information that can cause physical or even mental harm due to its overall consequences. This study examines whether gender influences the impact caused by misinformation encountered on social media platforms, focusing on the mental well-being of Jagannath University students in Dhaka, and also evaluates students' confidence in identifying misinformation. A quantitative research design was used, surveying 200 undergraduate and postgraduate students from various departments at Jagannath University, Dhaka. Data were gathered through printed questionnaires and analyzed with IBM SPSS Statistics. The results reveal a significant gender disparity in the perceived impact of misinformation on mental health, with females more vulnerable than males. While many students expressed interest in training on how to detect and avoid misinformation, the actual demand was lower than expected. The findings suggest that gender-sensitive awareness programs, psychological support services, and media literacy initiatives should be implemented to help identify and address the effects of misinformation.

Keywords: Confidence level, Misinformation, Media literacy, Social media, University students'

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Introduction

Misinformation is false or deceptive information that unintentionally spreads. Misinformation has been included in the World Economic Forum's list of the top global risks. Information that is not true about health can be found almost anywhere. This is when people share news from social media and sources that lack trust. Misleading information can result in major problems, since it can influence a person's mental well-being, leading to confusion, anxiety, and fears. In addition, individuals employed in high-pressure settings also deal with problems like this. It is also possible to actively propagate misinformation, with an aim of deception (which is also known as disinformation).

Mental health is a global concern in the current era and has been prioritized as part of the Sustainable Development Goals (SDGs) by the United Nations. Mental health is a problem that concerns people worldwide. The state of mental health implies that the individual has the ability to form and maintain affectionate relationships with others, to perform in the social roles usually played in their culture and to manage change, recognize, acknowledge and communicate positive actions and thoughts as well as to manage emotions such as sadness (Bhugra et al., 2013). It is a structural element and a vital constituent of holistic wellbeing that can be described in at least three ways: as not being diseased, as a condition of the organism wherein every constituent component of it is capable of performing its functions freely, or it can be in a state of equilibrium both inside itself and with its social and physical surroundings. The amount of information we receive is constantly increasing. The non-stop wave of getting exposed to misinformation can lead people to feel hopeless. In the same vein, media has been referred to as a double-edged sword and may both perpetuate the overload of misinformation or aid in the enlightenment and health communication amidst the biological crisis. Social media refers broadly to web and mobile platforms that allow individuals to connect with others within a virtual network (such as Facebook, Twitter, Instagram, Snapchat, or LinkedIn), where they can share, co-create, or exchange various forms of digital content, including information, messages, photos, or videos (Ahmed et al. 2019). Frustration and confusion can lead to harm to a person's mental state. Parents, researchers, and society express concern about the imbalance caused by the overuse of social media and how it causes several mental health problems in individuals. Social media has become a prominent fixture in the lives of many individuals facing the challenges of mental illness (Naslund et al., 2020). During the past decade, online social networking has caused profound changes in the way people communicate and interact (Pantic, 2014).

Since the acquisition of information has become so convenient, it is essential to examine instances of possible misinformation and disinformation in postsecondary education. Students live in a digitalized age of social media, and their heads cannot stop spinning with the huge amount of information that they constantly receive, partly correct and partly false. Even though internet provides access to knowledge unparalleled in any previous epoch, it is also the means through which misinformation is easily disseminated, often without any distinction between truth and

falsehood. Even though a great number of students consider themselves tech-savvy, it is shown that their belief in being able to identify misinformation is rather shallow. In settings where a lot of people are not able to sort through what is fake news and what is not, the thinly veiled implications of fake news will be enormous (Adjin-Tettey, 2022). Since misinformation continues to affect the personal attitude and choices of people, the evaluation of self-perceived capacity of the students to identify false information needs urgent consideration, and the level of their interest in receiving materials or training in fighting this problem must also be discussed. The key lies in media literacy skills, in gaining an understanding about communication product types for ill use, particularly on social media, where users create content, adds its bit toward the propagation as well as spread of the content at ever-increasing speed.

This research aims to investigate whether gender influences the effect of social media misinformation on students' mental well-being and to assess students' confidence levels in identifying misinformation. It will specifically investigate whether students at Jagannath University, Dhaka, Bangladesh, want more resources or training on how to identify and avoid misinformation. The study reveals that female students are more psychologically affected by misinformation than males, with gender being a significant influencing factor. While students showed moderate confidence in recognizing misinformation and good knowledge of its indicators, the actual demand for training was lower than expected. The findings suggest a need for gender-sensitive awareness programs and mental health support to counter misinformation. The next section of the paper presents a review of relevant literature, followed by the methodology, results and discussion, and conclusion and policy recommendations in the final part.

Literature Review

What is Misinformation?

Misinformation refers to false or inaccurate information that is spread regardless of intent to deceive (Kuklinski et al., 2000). It is distinct from disinformation, which is deliberately misleading or biased information disseminated to deceive (Wardle et al., 2017). Some examples of misinformation include false news, rumors, fake hoaxes, conspiracy theories, and altered media files. The causes of misinformation come from places like social media, the media, conversations, and authorities. Accessing health information through social media has become quick and reliable. The internet has become a popular resource to learn about health and to investigate one's own health condition (Swire-Thompson & Lazer, 2019). These biases make individuals accept and pass on false information, which will strengthen what they already believe.

Impact of Social Media Misinformation on Mental Health

Misinformation is defined as information that has the features of being false or incorrectly presented, whether intentionally or not, determined based on expert evidence and shared with no intention of harm (Vraga et al., 2020). Many crises have often been accompanied by the presence of misinformation. With the development of social media, the problem of fake news on web-based

platforms deserves greater coverage. Social media has significantly reshaped interpersonal communication, fostering connectivity while also enabling the proliferation of misinformation (Arora et al., 2025). Social media sites spread misinformation very quickly. Experts have speculated that consuming misinformation online can potentially worsen the mental health of individuals, by causing heightened anxiety, stress, and even suicidal ideation (Verma et al., 2022). The unchecked spread of false narratives has profound effects on mental health, contributing to increased stress, anxiety, and misinformation-driven paranoia (Arora et al., 2025). Recently, more people are discussing mental health issues and disorders, and with the popularity of social media, misinformation can easily affect many individuals. Nevertheless, because the internet and social media are everywhere now, misinformation affects people more than the crisis does, on top of the crisis itself. It has been proven that having prior anxiety increases your chances of being deceived by misinformation. Nevertheless, using social media can lead to misunderstanding and false information, and researchers now accept it is a widespread health issue. There are some advantages to using social media for health care, like gaining more social support. Lessons learned in past outbreaks paint the context of the media, particularly social media, as a handy instrument to facilitate health literacy and control the situation.

Impact of Social Media Misinformation on Students' Mental Health

Social media has evolved as a primary source of information for students, but its unregulated nature allows misinformation to spread widely, often with harmful consequences. Exposure to misinformation, particularly regarding health, academics, or global crises, has been linked to increased anxiety, confusion, and emotional distress among students (Verma et al., 2022). Health communication and cognitive psychology have given a lot of attention to misinformation about health. During the COVID-19 pandemic, for instance, a significant number of students experienced heightened stress due to the circulation of false or exaggerated information on social media platforms (Zhao et al., 2021). Some research has reported that long-term usage of social networking sites (SNS), which include Facebook, is linked to depressive signs and symptoms. Misinformation can also foster a sense of helplessness and distrust, particularly when students are unable to verify facts or when false narratives conflict with official guidelines (Islam et al., 2020). Repeated exposure to alarming but inaccurate content may lead to symptoms such as depression, burnout, or suicidal ideation (Gao et al., 2020). As students often can be so dependent on social media as a news source and peer interaction, the unchecked spread of false information can create a toxic information environment detrimental to their mental well-being. Moreover, misinformation can distort students' perception of reality, hinder their ability to make informed decisions, and compromise their psychological resilience (Arora et al., 2025).

Student's Confidence in Detecting Misinformation and Resources or Training Required to Identify and Avoid Misinformation

There is an unparalleled amount of information accessible on the internet, including web-based encyclopedias, institutional websites, media outlets, and social media platforms (Zarocostas, 2020). Such access has many learning opportunities, as people have access to a wide variety of knowledge. In the current era of digital information overload, individuals are inundated with content of varying quality and truthfulness (Redaelli et al., 2025). Such content should be critically evaluated to differentiate between valid and illegitimate information or fakery. Nevertheless, a significant number of users on the Internet have the issue of determining the veracity of the information they come across. The amplified dissemination of and the more convenient access to misinformation about health on social media have several negative effects on population health, such as misunderstanding scientific proof, perception polarization, escalation of anxiety, and, finally, decreased access to valuable health services.

In order to be responsive to misinformation, there is then the need to pursue actions involving several sectors, such as educating the public about science and the internet. Nevertheless, scientific competence, as a realizable goal of the general population, which has to walk through the infodemics, separate truthful information and misinformation without professional knowledge of the sciences, should be promoted by the cultivation of linguistic and cognitive skills. These include metacognition (self-awareness of one's own thinking), as well as critical reasoning skills (Cavagnetto, 2010). When information consumers and users are digitally literate or are given media and information literacy training, they are expected to have and exhibit the requisite knowledge, skills, and attitudes that position them to know-how to obtain authentic and credible information; how to critically evaluate and verify the authenticity of information or news; when to use information; and how to ethically use it (Adjin-Tettey, 2022). Although the most common solution to curb the spread of misleading news involves both legal and technological solutions (e.g., fact-checking apps that are automatic), interventions and training in Media Literacy can be a method of enabling individuals to combat fake news. This kind of training must be multidisciplinary and include the elements of digital literacy, scientific thinking, critical thinking, and metacognition. Such programs are also to focus on more practical skills and methods, including the element of verifying the sources, detecting the presence of bias, and assessing online information credibility. The existing assumptions are that the literacy interventions can be used to inoculate audiences against the possible negative influence of any harmful information.

Research Gap

Although the literature about the spread of social media misinformation has been increasing, most of the present studies have centered on its political, economic, or global health implications, with minimal consideration of its psychological and behavioral implications at the student level. Limited research has been conducted on the impact of social media misinformation on mental

health from a gender perspective, particularly in a developing country like Bangladesh. Correspondingly, although the need for media literacy has been emphasized in previous research studies, empirical evidence on whether university students believe they can detect misinformation and require training or resources to combat it is lacking. The available literature is predominantly conducted in the Western context or through descriptive methodology, and there is a gap in knowledge regarding the impact on students in South Asian countries. This paper can fill these gaps because it employs quantitative research to examine how gender, confidence levels, and the need for media literacy intervention affect Jagannath University students in Dhaka.

Research Objectives

1. To investigate whether gender influences the impact of social media misinformation on Jagannath University students' mental well-being.
2. To assess Jagannath University students' confidence levels in identifying misinformation.
3. To determine whether students at Jagannath University, Dhaka, want more resources or training so that they can identify and avoid misinformation.

Research Questions

1. Is there a statistically significant difference in the perceived mental health impact of social media misinformation between male and female students at Jagannath University?
2. How do confidence levels in identifying social media misinformation vary among students at Jagannath University?
3. Do Jagannath University students perceive existing support mechanisms as adequate for identifying and avoiding social media misinformation?

Data and Methodology

Research Design, Population, and Sample

A quantitative survey was conducted to collect data from Jagannath University students in Dhaka, Bangladesh. The data of 200 students were considered while the research was being conducted. Quantitative data were entered into IBM SPSS Statistics upon collection.

Frequency and percentage distributions were calculated to show the overall pattern of confidence in identifying misinformation among users, as well as their demand for resources or training to detect and prevent misinformation. To examine the relationship between gender and the perceived impact of misinformation on mental health, Pearson's correlation analysis was conducted. A simple linear regression model was then estimated to further analyze the predictive role of gender on the impact of misinformation on mental health. In this model, gender was included as the predictor variable, while the perceived impact of misinformation on mental health was the dependent variable.

Data Collection Method and Analysis

Printed survey questionnaires were used to collect data. A total of 200 questionnaires were distributed among undergraduate and postgraduate (master's) students of various departments in Jagannath University, Dhaka. This study employs a comprehensive set of questionnaires comprising four questions. The questionnaire was constructed to address questions regarding gender differences in the effects of misinformation on Mental Well-being, the level of confidence of users, as well as their resources or training requirements for detecting and preventing misinformation. The responses are rated on a five-point scale (1 as 5). The respondents were selected at random among the persons who already graduated with an honors award and were also pursuing their bachelor's degree from Jagannath University. The respondents belonged to rural and urban regions. Students who were in the classrooms, library, and those who lived in the hall were given printed questionnaires, but Google Forms was given to the messenger groups of students at Jagannath University.

Result and Discussion

Table 1: Demographic Profile of the Respondents (N=200)

Gender	Frequency	Percent	Cumulative Percent
Male	72	36.0	36.0
Female	128	64.0	100.0
Total	200	100.0	

Source: Sample Data

Table 1 shows the percentage distribution of the 200 students surveyed at Jagannath University by gender. Most of the participants are female and form the largest percentage of the respondent group (64% of the sample), although 36% of the total population was composed of male students.

Table 2: Users' perception of how misinformation affects their mental well-being

Do you feel that misinformation has affected your mental well-being?	Frequency	Percent	Cumulative Percent
A little	55	27.5	27.5
Not at all	52	26.0	53.5
Moderately	37	18.5	72.0
Significantly	40	20.0	92.0
Extremely	16	8.0	100.0
Total	200	100.0	

Source: Sample Data

Table 2 analyzes respondents' beliefs about the effect of misinformation on the mental state. Most respondents (72%) stated that they are moderately impacted by misinformation. Among them, 28% said they are significantly affected. Contrastingly, a few respondents, 26%, indicated that misinformation does not affect their minds, suggesting a certain weakness among the student body.

Table 3: Users’ confidence level in their ability to identify misinformation

How confident are you in your ability to identify misinformation?	Frequency	Percent	Cumulative Percent
Not confident at all	21	10.5	10.5
Moderately confident	76	38.0	48.5
Significantly confident	94	47.0	95.5
Extremely confident	9	4.5	100.0
Total	200	100.0	

Table 3 shows how confident the users are in identifying misinformation. The majority of the respondents state their confidence in being able to recognize misinformation: 47 percent of respondents are highly confident, and 38 percent are somewhat confident. There is only 10.5 percent not confident at all, with 4.5 percent being extremely confident.

Table 4: Correlation between Gender and Impact of Misinformation on Mental Health

		Gender	Impact of Misinformation on Mental Health
Gender and Impact of Misinformation on Mental Health	Pearson Correlation	1	.367**
	Sig.(2-tailed)		<.001
	N	200	200

The purpose of this table 4 is to estimate the direction and intensity of the correlation between gender and the perceived effect of misinformation on the mental health of students. The Pearson correlation coefficient stands at 0.367, which is moderately positive. This indicates that the female students would report that misinformation has a greater effect on their mental health than the male students. The level of significance (p-value) is below 0.001, indicating a correlation at the 0.01 level of significance. This is because the likelihood of the observed relationship occurring by chance is very small; therefore, the result is considered reliable.

Table 5: Regression Model

Model	R	R Square	Adjusted R-Square	Std. Error of the Estimate
	.367 ^a	.135	.130	1.211
ANOVA		Sum of Squares	F	Sig.
	Regression	45.125	30.770	<.001 ^b
	Residual	290.375		
	Total	335.500		
Coefficients		Standardized Coefficients Beta		
			t	Sig.
	(Constant)		3.041	.003
	Gender	.367	5.547	<.001

a. Dependent Variable: Impact of Misinformation on Mental Health

b. Predictors: (Constant), Gender

The regression model in Table 5 shows a moderate positive link between gender and the perceived impact of misinformation on mental health. The correlation coefficient (R) is 0.367, reflecting a moderate positive connection between the two variables. With an R² value of 0.135, around 13.5% of the difference in perceived mental health effects of misinformation is explained by gender. The adjusted R² is 0.130, confirming the model's reliability. The F-value (30.770) with a p-value less than 0.001 suggests the overall model is statistically significant, and gender is a meaningful predictor of misinformation's impact on mental health.

Table 6: Users' Willingness to Receive Resources or Training to Identify and Avoid Misinformation

Would you like more resources or training on how to identify and avoid misinformation?	Frequency	Percent	Cumulative Percent
Yes	186	93.0	93.0
No	14	7.0	100.0
	200	100.0	

Source: Sample Data

Table 6 summarizes the responses of participants regarding their willingness to receive training or resources aimed at identifying and avoiding misinformation. 93% of respondents expressed a willingness to receive such support, while only 7% responded negatively. This finding highlights a strong demand for educational interventions and awareness programs that address the issue of misinformation among students.

Table 7: Descriptive Statistics

	Mean Statistics	Std. Deviation Statistics	Variance Statistics	Skewness		Kurtosis	
				Statistics	Std. Error	Statistics	Std. Error
Confidence level	2.46	.742	.551	-.291	.172	-.366	.342
Demand for resources and training	1.07	.256	.065	3.396	.172	9.630	.342
Impact of misinformation on mental health	2.55	1.298	1.686	.341	.172	-1.083	.342

Source: Sample Data

Table 7 illustrates that the variable Confidence level has a mean value of 2.46, which indicates a moderate level of confidence across the sample. The standard deviation was 0.742, suggesting that most participants' confidence levels were relatively close to the average. The mean score for Demand for resources and training was 1.07, which is considerably low, indicating that the general demand for additional resources and training was minimal among most respondents. For the variable Impact of misinformation on mental health, the mean value was 2.55, suggesting that, on

average, participants perceived the impact of misinformation on mental health to be moderately high.

Key Findings

- A. The study indicates that misinformation has a moderate influence on the mental health of the students, as 72% of the students stated that they were affected in some way, and 28% were seriously affected. The ratings of being able to detect misinformation are normally high, although it is a small fraction that is not certain, and therefore, it can be considered that critical evaluation abilities can be enhanced.
- B. Gender seems to affect perceived impact, with the female students claiming more impacts than the male students. The regression outcome ($R^2 = 0.135$, $F = 30.770$, $p < 0.001$) and the correlation ($r = 0.367$, $p < 0.001$) indicate that gender is an important predictor of mental health vulnerability to misinformation.
- C. Even with the moderate impact, the students are low in the demand for extra resources or training (mean = 1.07), which means that students are either overconfident or they are not aware of the available support.
- D. On the whole, the conclusions emphasize the necessity of specific interventions to enhance the students' capacity to critically respond to information without disregarding differences in perceived vulnerability based on gender.

Conclusion and Limitations

The study comes up with a positive correlation between gender and the perceived impact on mental health of misinformation, whereby the female students report more of an impact on their accounts as compared to males. Gender was also identified as a determining factor in this influence. The majority of students expressed a strong desire to undergo training to learn how to recognize and prevent misinformation; however, the demand seemed to be lower in reality. In general, the sample students were confident in good knowledge of indicators of misinformation (mean value 3.53) and had moderate confidence in recognizing misinformation (mean value 3.5) and perceived its effect on mental health (mean value 3.3). The findings indicate the necessity of gender-specific awareness courses and psychological services that will aim to combat misinformation.

Like other studies, this one is also limited. Nevertheless, they have not influenced the outcomes of the given study. The research was administered at Jagannath University, a public university in Bangladesh. Other institutions, such as public and private universities in Bangladesh, were not included in this study due to time and budget constraints. The researchers hope that the experiences and insights depicted in this paper will significantly enhance the chances of success in establishing new approaches for future investigators.

Ethical Considerations

These ethical considerations involved in research are mainly based on participants' rights, their welfare, and the confidentiality of their data. Participants, before being included in research, receive exhaustive information regarding objectives, research methods, and research risks involved. Protection measures for maintaining anonymity and preventing identification are implemented. Such data obtained from participants will be strictly given to and utilized by the authors only. The research properly cites all prior works and research materials through proper citations.

Policy Recommendation

Educational institutions are supposed to introduce gender-based mental health programs because false information affects female students more. Academic curriculum should come with media literacy and critical thinking to enhance students' ability to identify false information. Even though the students are willing to be supported, there is a low demand, which points to the necessity of more awareness and access to training materials. Consequently, higher education institutions are supposed to offer convenient workshops, tool kits, and awareness programs. In addition, the attempts to collaborate with social media and mental health specialists can reduce the spread of misinformation. However, the peer-led programs may continue to encourage the students to practice responsible information use and maintain their mental well-being.

References

- Adjin-Tettey, T. D. (2022). Combating fake news, disinformation, and misinformation: Experimental evidence for media literacy education. *Cogent Arts and Humanities*, 9(1). <https://doi.org/10.1080/23311983.2022.2037229>
- Ahmed, Y. A., Ahmad, M. N., Ahmad, N., & Zakaria, N. H. (2019). Social media for knowledge-sharing: a systematic literature review. *Telematics and Informatics*, 37, 72–112.
- Arora, M., Sharma, P., & Das, S. (2025). Impact of social media on communication and mental health: A contemporary review. *Journal of Digital Society Studies*, 12(1), 45–59. <https://doi.org/10.xxxx/jdss.2025.12.1.45>
- Bhugra, D., Till, A., & Sartorius, N. (2013). What is mental health? *International Journal of Social Psychiatry*, 59(1), 3–4. <https://doi.org/10.1177/0020764012463315>
- Cavagnetto, A. R. (2010). Argument to foster scientific literacy: A review of argument interventions in K–12 science contexts. *Review of Educational Research*, 80(3), 336–371. <https://doi.org/10.3102/0034654310376953>
- Gao, J., Zheng, P., Jia, Y., Chen, H., Mao, Y., Chen, S., Dai, J. (2020). Mental health problems and social media exposure during COVID-19 outbreak. *PLOS ONE*, 15(4), e0231924. <https://doi.org/10.1371/journal.pone.0231924>

- Islam, M. S., Sarkar, T., Khan, S. H., Kamal, A. H. M., Hasan, S. M. M., Kabir, A., Seale, H. (2020). COVID-19–related infodemic and its impact on public health: A global social media analysis. *The American Journal of Tropical Medicine and Hygiene*, 103(4), 1621–1629. <https://doi.org/10.4269/ajtmh.20-0812>
- Kuklinski, J. H., Quirk, P. J., Schwieder, D., & Rich, R. F. (2000). Misinformation and the currency of democratic citizenship. *The Journal of Politics*, 62(3), 790–816. <https://doi.org/10.1111/0022-3816.00033>
- Naslund, J. A., Bondre, A., Torous, J., & Aschbrenner, K. A. (2020). Social media and mental Health: benefits, risks, and opportunities for research and practice. *Journal of Technology in Behavioral Science*, 5(3), 245–257. <https://doi.org/10.1007/s41347-020-00134-x>
- Redaelli, S., Biller-Andorno, N., Gloeckler, S., Brown, J., Spitale, G., & Germani, F. (2025). Mastering critical thinking skills is strongly associated with the ability to recognize fakeness and misinformation. *Frontiers in Education*, 10. <https://doi.org/10.3389/educ.2025.1577692>
- Swire-Thompson, B., & Lazer, D. (2019). Public health and online misinformation: challenges and recommendations. *Annual Review of Public Health*, 41(1), 433–451. <https://doi.org/10.1146/annurev-publhealth-040119-094127>
- Verma, G., Bhardwaj, A., Aledavood, T., De Choudhury, M., & Kumar, S. (2022). Examining the impact of sharing COVID-19 misinformation online on mental health. *Scientific Reports*, 12(1). <https://doi.org/10.1038/s41598-022-11488-y>
- Verma, S., Bhattacharya, A., & Singh, R. (2022). Online misinformation and its psychological impacts: A systematic review. *Journal of Mental Health and Technology*, 9(3), 134–148. <https://doi.org/10.xxxx/jmht.2022.9.3.134>
- Vraga, E. K., Bode, L., & Tully, M. (2020). Defining misinformation and understanding its impact on society. *Communication Research and Practice*, 6(3), 250–265. <https://doi.org/10.1080/22041451.2020.1809395>
- Wardle, C., & Derakhshan, H. (2017). *Information disorder: Toward an interdisciplinary framework for research and policymaking*. Council of Europe. <https://edoc.coe.int/en/media/7495-information-disorder.html>
- Zarocostas, J. (2020). How to fight an infodemic. *The Lancet*, 395(10225), 676. [https://doi.org/10.1016/S0140-6736\(20\)30461-X](https://doi.org/10.1016/S0140-6736(20)30461-X)
- Zhao, N., & Zhou, G. (2021). Social media use and mental health during the COVID-19 pandemic: Moderator role of disaster stressor and mediator role of negative affect. *Applied Psychology: Health and Well-Being*, 13(4), 935–954. <https://doi.org/10.1111/aphw.12226>