



Family Relational Factors and Problematic Social Media Use Among Adolescents: A Systematic Literature Review and Implications for Family Counseling

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ABSTRACT

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Background: Family factors associated with problematic social media use (PSMU) need to be distinguished from evidence regarding counseling effectiveness. Objective: To map relational factors, the roles of psychological variables, and counseling implications. Methods: A focused systematic search of Scopus and ERIC was conducted on September 18, 2026, following PRISMA 2020 reporting. Of 74 records, 17 full texts were sought after title/abstract screening, 15 available reports were assessed, and 13 studies were synthesized. The initial JBI critical appraisal was not independently duplicated. Results: The corpus comprised 10 cross-sectional studies, one mixed-methods study with a single-time-point survey, and two longitudinal studies. Psychological control and parental rejection were each associated with higher PSMU in one cross-sectional study. Parental support was associated with lower subsequent PSMU in one longitudinal study. Positive parenting and proactive rules were associated with lower odds of PSMU in one cross-sectional study; parental digital-distraction reduction was examined in one mixed-methods study with unclear statistical reporting. Active mediation was examined in relation to appearance consciousness, not PSMU reduction. General attachment and family outcomes were distinguished from parent-specific relationships. No included study tested family counseling. Conclusion: Findings represent associations and potential counseling targets proposed by the authors. The two-database search, two unavailable reports, and initial quality appraisal limit confidence in the conclusions.

Keywords: *Family Counseling, Problematic Social Media Use, Adolescents, Mental Health, Parent-Adolescent Relationships*

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INTRODUCTION

Social media provides a space for interaction, seeking support, and expressing one's identity during adolescence. Mental health concerns arise when its use becomes difficult to control and interferes with daily functioning. Data from the 2022 HBSC survey show that 11%

of adolescents aged 11, 13, and 15 in 44 countries and regions across Europe, Central Asia, and Canada reported problematic use, compared to 7% in 2018 (World Health Organization Regional Office for Europe, 2024). These figures are regional in nature; they are not estimates for Indonesia or global prevalence rates. Assessments during counseling must therefore distinguish between the intensity of use and the loss of control and functional impairment.

Problematic social media use (PSMU) is a descriptive term used to characterize patterns of use characterized by symptoms such as preoccupation, an inability to reduce use, conflict, and negative consequences. The Social Media Disorder Scale was developed to measure symptoms of problematic use, rather than simply the duration of use (van den Eijnden et al., 2016). The labels “social media addiction,” “social networking addiction,” and “social media use disorder” overlap conceptually, but the instruments, number of items, time frames, and cutoff scores are not identical. In this review, these umbrella terms aid in conceptual grouping; scores or diagnoses from different instruments are not considered interchangeable.

The association between PSMU and mental health has been examined outside of family studies. A meta-analysis by Shannon et al. (2022) found correlations with symptoms of depression ($r = 0.273$), anxiety ($r = 0.348$), and stress ($r = 0.313$) among adolescents and young adults. These correlational findings do not establish a causal direction, nor are they universally applicable to all adolescents. The practical need is to understand the context surrounding digital difficulties, so that counselors can assess social and emotional functioning alongside symptoms of problematic use.

The family literature indicates that parenting practices need to be distinguished based on their functions and modes of implementation. Vossen et al. (2024), who reviewed 43 studies, associated more positive parent–child relationships and family climates with lower PSMU. Conversely, findings regarding internet-specific parenting are more varied, including differences between pre-established rules and reactive restrictions. The heterogeneity of parenting definitions and the predominance of cross-sectional designs mean that recommendations regarding a single digital strategy cannot be generalized based solely on the direction of associations.

Liu et al. (2024) reviewed family factors, screen media use, and adolescent mental health by distinguishing the roles of these factors as predictors, mediators, or moderators. Therefore, the mapping of analytical roles is not a novelty first claimed by this study. A more specific contribution lies in the mapping of evidence for the 2021–2026 period, which distinguishes PSMU from broader screen use, maintains the type of instruments used, and differentiates specific constructs—such as parents, general relationships, and family—as outcomes. These distinctions determine the extent to which a finding can be considered in family counseling.

Two theoretical frameworks help interpret this relationship. Self-determination theory posits the need for autonomy, competence, and relatedness as integral to healthy development (Ryan & Deci, 2017). Attachment theory explains the importance of responsive relationships as the foundation for a sense of security and the regulation of emotional experiences (Bowlby, 1988). Both provide a theoretical rationale for examining support, rejection, communication, and psychological control in digital media use. These frameworks do not, in and of themselves, prove that changing family patterns will reduce PSMU.

The systemic approach views adolescents’ difficulties in relation to family interaction patterns and the broader context. Carr (2025) outlines evidence of systemic interventions for a number of child and adolescent issues, but effectiveness for one issue does not automatically apply to PSMU. In school settings, brief counseling, collaboration with families, and referrals as needed are part of a counselor’s role (American School Counselor Association, n.d.). In the

Indonesian context, the guidance on the implementation of school counseling emphasizes responsive services and collaboration with relevant parties to support student development (Hidayah et al., 2022).

Evidence regarding interventions for related digital issues also needs to be interpreted carefully. The meta-analysis by Wang et al. (2024) examines family-based therapy for internet addiction among adolescents and young adults. Internet addiction encompasses a broader range of activities than social media; therefore, these findings serve as a comparative context rather than direct evidence of the effectiveness of counseling for PSMU. For similar reasons, intervention protocols without empirical results are useful for identifying research directions but cannot be used to conclude the benefits of an intervention.

This review offers a focused overview based on a limited systematic search, rather than a comprehensive update of the entire literature on digital parenting. Its contribution lies in linking family factors to the positions of psychological variables and outcomes in the included studies, while distinguishing observational associations from the concept of counseling interventions. The search limitations are stated upfront so that the absence of counseling tests in the included studies is not misinterpreted as an absence of interventions across the entire literature.

The purpose of this study is to synthesize family and relational factors associated with adolescent PSMU, identify mediators, moderators, and psychosocial outcomes, and formulate implications for family counseling consistent with the available evidence. The implications for guidance counselors are presented as the author's considerations, which should be adapted to the school context, rather than as the results of an evaluation of school counseling services.

The research questions addressed are:

RQ1. What family and parent–adolescent relationship factors are associated with PSMU?

RQ2. How do psychological and relational variables function as predictors, mediators, moderators, or outcomes in these relationships?

RQ3. To what extent have family-based counseling or interventions for adolescent PSMU been empirically tested in the included studies?

RQ4. What mental health and psychosocial outcomes were examined, and how do they relate to adolescent sexual and reproductive health?

RQ5. What implications can the authors draw for the development of family counseling and considerations for school counseling services?

METHODS

Information sources and search criteria

The Scopus and ERIC searches were conducted on September 18, 2026. The Scopus search was limited to publications from 2021 to 2026 in the fields of Psychology and Social Sciences. The ERIC search used the “last 5 years” option and filters related to parents; the category names and filter values related to parents were not documented. The literature identified in both databases was published between 2022 and 2026, but it could not be confirmed that the start date of the ERIC filter was January 1, 2021. The operational publication period for the eligibility assessment was January 1, 2021–September 18, 2026.

Search Strategy

The query combines three concept groups: family/parenting or family interventions, problematic social media use, and the adolescent population. Terms within a single group are linked with OR, and across groups with AND; the entire family and intervention group is enclosed

in parentheses. Scopus uses TITLE-ABS-KEY, while the ERIC query does not use this wrapper. The complete search strings used, dates, and delimiters are presented in accordance with the PRISMA-S traceability principles (Rethlefsen et al., 2021). The terms “parental mediation,” “parental monitoring,” “family functioning,” “parent training,” and “family psychoeducation” were included. Internet or cell phone addiction without a separate measure of social media use was not equated with PSMU. Formal sensitivity tests, systematic citation searches, PsycINFO, Web of Science, and gray literature were not included in this corpus search.

Table 1. Strategy for Searching and Identifying Studies

Databases	Search Focus	Strategy	Limits	Number
Scopus	Family/relationships; PSMU; adolescents	Three OR groups linked by AND; <i>TITLE-ABS-KEY</i> . Complete query: Appendix A	2021–2026; <i>Psychology</i> and <i>Social Sciences</i> ; September 18, 2026.	28
ERIC	Same conceptual scope	Three concept groups without Scopus wrappers. Complete query: Appendix A.	Last 5 years and parent-related filtering; exact category not documented; September 18, 2026.	46

Eligibility criteria

Feasibility was clarified using the elements of population, exposure, comparators, outcomes, and design (PECO and design), as follows. The primary population consists of adolescents aged 10–19 years. School samples that included participants outside this age range were retained as outliers and flagged, without being claimed as a sample of adolescents exclusively. Exposure/outcome must include measures of PSMU or addictive social media use; screen time, cell phone use, gaming, or general internet use are insufficient if social media use cannot be distinguished. Empirical studies with family or relational constructs and psychosocial variables may be included, but general and family relationships as outcomes are excluded from the synthesis. A comparator is not required because observational designs can report continuous associations.

Two cases involving population boundaries are Geurts et al. (2022), ages 9–19, and Johnson et al. (2026), ages 13–20. Both were retained with mixed age markers and subsequently excluded in the sensitivity analysis. Bondesto et al. (2024), ages 18–24 in a college setting, was excluded because its primary population consisted of young adults and adolescent data were not separated. These boundary case rules were transparently explained without claiming to have been established prior to the search. The operational language criterion for the synthesis was the availability of reports readable in English; there was no documentation of a search for Indonesian-language literature. This has the potential to introduce language bias.

Study selection procedures

The literature was screened based on titles and abstracts; relevant reports were then evaluated in full text using eligibility criteria. Decisions and their rationale were recorded in an Excel worksheet. A recheck of normalized DOIs and titles—after removing punctuation and accounting for case differences—found no identical matches among the 74 references; author

names and years were used to assess potential duplicates. No literature was excluded by the automated system. The number of reviewers at each stage, the implementation of independent assessment, calibration, and the method for resolving disagreements were not documented; therefore, the two-reviewer process was not claimed.

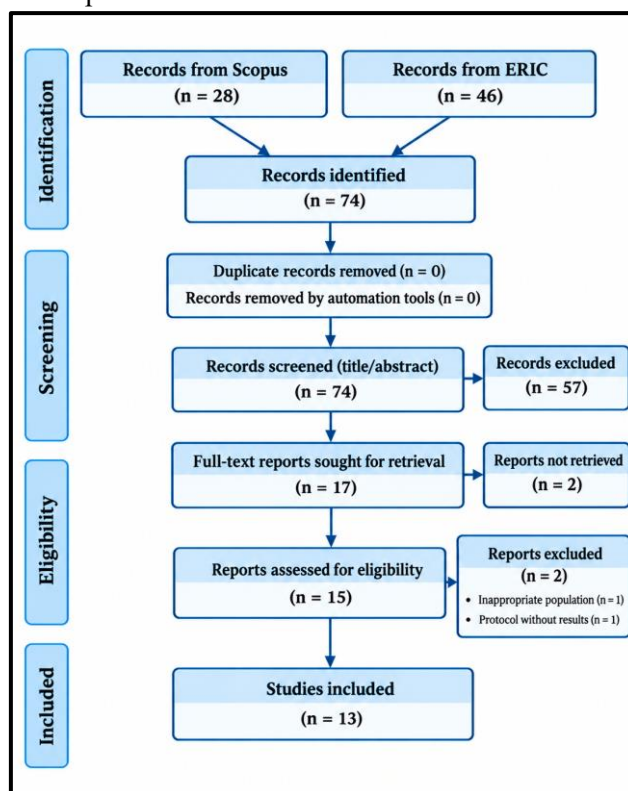


Figure 1. Flowchart of identification, screening, eligibility, and included studies; adapted from PRISMA 2020 (Page et al., 2021).

Data extraction and critical appraisal

Extraction included author(s)/year, sample location, sample size and age, study design, data source/reporter, PSMU constructs and instruments, family constructs, analytical roles, coefficients, confidence intervals (CI), covariates, and limitations. Figures were checked in tables, figures, and the article's narrative; B, β , r, and OR were retained as distinct measures. Unreported CI were not calculated or filled in based on assumptions. Specific parent-child relationships were distinguished from general attachment. The number of original extractors and the independent verification process have not been documented.

An initial critical appraisal was conducted for each report using the 2017 JBI checklist for analytical cross-sectional, cohort, and qualitative studies (Joanna Briggs Institute, 2017a, 2017b, 2017c). In the mixed-methods study by Guan et al. (2025), the survey and interview components were assessed separately; the appropriateness of their integration was considered narratively. Each item was rated as Y (yes), N (no), U (unclear), or NA (not applicable), accompanied by a rationale. The results were not aggregated into a quality score or a hierarchy of evidence strength. This assessment was a single initial assessment and has not yet been replicated by two independent reviewers. The certainty of the evidence was not formally assessed using GRADE; methodological limitations, precision, applicability, and construct consistency were used to limit the interpretation.

Synthesis method

The synthesis was conducted without a meta-analysis because the instruments, cut-off points, study designs, variable functions, and outcomes were not comparable. The SWiM transparency principles were adapted for the grouping and presentation of observational results, rather than being claimed as a synthesis of intervention effects (Campbell et al., 2020). The steps were as follows: categorizing studies according to the specific nature of family relationships; separating the SMDS, Bergen/BSMAS, and other instrument groups; coding constructs, variable roles, and the direction and significance of associations; and then compiling a matrix for each construct in Table 3. These categories were determined analytically during the synthesis phase and were not predetermined prior to the search. The number of studies was counted per construct, so a single study may appear in multiple rows. Both significant and nonsignificant findings were retained; the number of significant results was not used as a measure of the strength of evidence. A sensitivity analysis excluded studies with mixed age groups, followed by general/family relationships as outcomes. The matrix has not yet been verified through independent coding, and inter-rater agreement was not assessed. Counseling concepts are presented separately from the empirical results.

RESULTS AND DISCUSSION

Study Selection Results

A total of 74 studies were identified, including 28 from Scopus and 46 from ERIC; no duplicates were removed. All studies were screened, and 57 were excluded, leaving 17 reports for further review. Two studies could not be obtained, and 15 were evaluated based on their full texts. Bondesto et al. (2024) was excluded because the study population consisted of young adults, while Kapetanovic and Claesdotter-Knutsson (2026) was excluded because the protocol lacked empirical results. Ultimately, 13 studies were included. The two reports that could not be obtained were “Risk and protective factors for substance use and media addictive behaviors in adolescents during the COVID-19 pandemic” (DOI: 10.1002/jad.12295) and “Digital engagement profiles and binge eating symptoms in adolescents: A person-centered, longitudinal analysis” (DOI: 10.1016/j.comppsy.2026.152694). Attempts to obtain these articles through libraries or by requesting them from the authors were not documented; the impact of these two reports on the conclusions cannot yet be assessed.

Characteristics of the included studies

Thirteen studies were published between 2022 and 2026: 10 quantitative cross-sectional studies, one mixed-methods study using a one-time survey, and two longitudinal studies. Ten studies included explicit family/parenting constructs; two measured general relational attachment (Sommerfeld & Dror, 2025; Demircioğlu & Göncü-Köse, 2023), and one positioned violence against parents as an outcome (Johnson et al., 2026). Within the explicit family group, Fasihi and Rostami (2023) modeled behavioral problems as an outcome, while de Armas Cortés et al. (2025) modeled self-presentation. Samples were drawn from mainland China, Sweden, the Netherlands, Israel, Italy, Guam, Iran, Türkiye, Cuba, and the cross-national HBSC study. There were no samples specifically from Indonesia, and none of the included studies evaluated family counseling or school counseling services.

Table 2. Characteristics, roles of variables, and findings of the included studies

Author, year	Sample location	Sample/age	Design and reporter	Family/relational constructs	PSMU size	Role of psychosocial variables	Effects, covariates, and assessment limits
Guo et al. (2026)	China	863 middle school students; mean age 13.45 (SD 0.91)	Cross-sectional; parallel mediation; adolescent self-report	Parental psychological control	Chinese adaptation of the BSMAS, 6 items; social media addiction	Social anxiety and loneliness; mediators; PSMU: outcome	$\beta = 0.59, p < 0.001$; total effect $B = 0.631 [0.576; 0.683]$. Covariates: age/gender/grade, region, parental education, parenting style. Baseline JBI: Y1–8. Limitations: single time point/single reporter.
Guan et al. (2025)	China	503 adolescents aged 13–18; interviews with 15 adolescents and 15 parents	Sequential mixed-methods design; single-time survey and interviews	Reducing parents' digital distractions; communication	CSMAS, 28 items; social media addiction	Communication and emotional regulation; mediator; emotional regulation: moderator	$r = -0.42, p < 0.001$; total $B = -0.42 [-0.53; -0.31]$. Covariates: age/gender, income, parental education. Baseline JBI: U3/U4/U7/U8. Limitations: hypothetical β ; unclear measures/analysis.
Johnson et al. (2026)	Sweden	5,310 students aged 13–20; final model $n = 4,902$	Cross-sectional study; logistic regression; adolescent self-reports	Child-to-parent violence as an outcome	SMDS version 5 items; score 0–5	PSMU: predictor; violence against parents: outcome	Adjusted OR = 1.15 [1.04; 1.28], $p = 0.007$ per additional symptom. Covariates: demographics, internalizing/externalizing symptoms, alcohol, family factors. Baseline JBI: Y1–8. Limitations: mixed ages; cross-sectional design.
Geurts et al. (2022)	Netherlands	403 adolescents aged 9–19; 396 parents; 413 reported in the model	Cross-sectional study, initial wave; reports from adolescents and parents	Positive parenting; proactive rules; reactive restrictions	SMDS, 9 items; ≥ 2 symptoms = at risk/problematic	PSMU: outcomes; parental stress, anxiety, depression: family variables	OR for positive parenting = 0.259 [0.137; 0.492]; rules = 0.588 [0.417; 0.828]; reactive = 1.941 [1.423; 2.648]. Covariates: age/gender/time; simultaneous family factors. Baseline JBI: U8. Limitations: mixed ages; methods/models not comparable.
Zhou et al. (2026)	Mainland China	1,874 adolescents aged 11–19; 22 public schools in 18 cities	Cross-sectional; latent moderation model; adolescent self-reports	Parental rejection; parent–child gender pairing	Chinese version of the BSMAS, 6 items	Interpersonal strength: moderator; PSMU: outcome	B : father's rejection = 0.154 [0.081; 0.227]; mother's rejection = 0.222 [0.141; 0.304]. Covariates: age/gender, socioeconomic status, only child.

Author, year	Sample location	Sample/age	Design and reporter	Family/relational constructs	PSMU size	Role of psychosocial variables	Effects, covariates, and assessment limits
							Baseline JBI: Y1–8. Boundary: school network; gender moderation.
Lu et al. (2025)	39 countries/regions; HBSC	190,707 adolescents; 5,576 schools; age groups 11, 13, 15	Multilevel cross-sectional study; 2017/2018 HBSC survey; adolescent reports	Quality of family relationships/support	SMDS, 9 items	Family relationship: mediator of relative deprivation–PSMU; inequality: moderator	Indirect effect via family = 0.005 [0.002; 0.007]. Covariates: socioeconomic status/class/gender, family, online preferences, macro indicators. Baseline JBI: Y1–8. Limitation: one-time mediation.
Sommerfeld & Dror (2025)	Israel	100 adolescent girls aged 11.4–16.6	Cross-sectional; serial mediation; adolescent self-reports	Attachment to significant others; not limited to parents	Adaptation of <i>the Bergen Facebook Addiction Scale</i> , 6 items	Perfectionistic self-presentation and PSMU; mediators; depression: outcome	Serial effects of attachment anxiety = 0.31 [0.02; 0.77]; avoidance = 0.82 [0.26; 1.54]. Covariates: demographics not specified. Baseline JBI: U5/U6. Limitations: small sample size, female participants; generalizable findings.
Pace et al. (2024)	Italy	423 adolescents aged 12–18; M = 16.88; 32.2% male	Cross-sectional; multi-group SEM; adolescent self-reports	Attachment to mother, father, and peers	SMDS, 9 items; sample $\alpha = 0.66$	Alexithymia: mediator; PSMU and overeating: parallel outcomes	Attachment to mother–SMD: $\beta = -0.26$ (SE 0.10); father: $\beta = -0.15$ (SE 0.09), not significant. Alexithymia mediation not significant; IC not reported. Covariates: age; gender–separate models. Baseline JBI: U7. Threshold: SMDS α 0.66; model modification.
Dalisay et al. (2025)	Guam	Ages 10–15; W1 n = 538, W2 n = 507; analytical panel n = 417	Two-wave panel, one-month interval; adolescent reports	Perceived parental emotional support	SMDS adaptation, 6 items	Support: predictor; PSMU: predictor/outcome; depression: subsequent outcome	Support W1–PSMU W2: $\beta = -0.14$, $p = 0.002$; PSMU W1–depression W2: $\beta = 0.16$, $p < 0.001$; IC not reported. Covariates: age/gender/grade/ethnicity, test conditions, baseline scores. Baseline JBI: NA1/6; U8/U9. Duration: 1 month; panel of 417; incomplete cases were removed.

Author, year	Sample location	Sample/age	Design and reporter	Family/relational constructs	PSMU size	Role of psychosocial variables	Effects, covariates, and assessment limits
Fasihi & Rostami (2023)	Iran	384 high school students in Tehran; mean age = 16 (SD 1.98)	Cross-sectional; SEM; online adolescent reports	Conversational communication and family conformity	<i>Social Network Addiction Questionnaire</i> , 23 items	Emotional regulation; mediator; internalizing/externalizing problems; outcomes	Mediation of PSMU–behavioral problems: $\beta = 0.03$, $p = 0.02$; conformity: $\beta = 0.03$, $p = 0.04$; conversational communication: $p = 0.08$. Covariates: demographics not specified. Baseline JBI: U5/U6/U8. Limitations: convenience sample; unclear intervals.
Xiong et al. (2025)	China	357 adolescents aged 12–15; two junior high schools in Changsha	Three waves of PSMU over one year; adolescent reports	Parent–adolescent attachment	Adapted 10-Item <i>Instagram Addiction Scale</i>	Attachment, teacher relationships, and peer relationships; predictors of the PSMU trajectory	B attachment–slope: -0.113 (SE 0.047; $p = 0.016$) and -0.065 (SE 0.031; $p = 0.036$); IC not presented. Covariates: age/gender; teacher/peer relationships. Baseline JBI: NA1/6; other items Y. Limitations: 2 schools; small sample size.
Demircioglu & Göncü-Köse (2023)	Turkey	547 high school students; M age = 15.8 (SD 1.1)	Cross-sectional; SEM; adolescent self-reports	General attachment in close relationships; not specifically to parents	<i>Social Media Addiction Scale</i> , 41 items	Rejection sensitivity and personality; mediators; PSMU/cyberbullying; parallel outcomes	Attachment anxiety–cyberbullying: $\beta = 0.28$, $p < 0.001$; via rejection sensitivity: effect = 0.06 [0.03; 0.09]. Covariates: demographics not specified. Baseline JBI: U5/U6. Limitations: general population; convenience sample.
de Armas Cortés et al. (2025)	Cuba	636 adolescents aged 12–15; four regions of Havana	Cross-sectional study; latent profiles and mediation; adolescent report	Active, restrictive, and authoritarian parenting styles, and non-intrusive monitoring	SMDS, 9 items; not yet specifically adapted for Cuba	PSMU/emotional intelligence profile; predictor; mediation; mediator; appearance consciousness; outcome	Active indirect effects: profile 3 vs. 1 = -0.0493 [-0.1006 ; -0.0108]; profile 4 vs. 1 = -0.0449 [-0.0940 ; -0.0089]. Covariates: gender as a moderator; socioeconomic status not specified. Baseline JBI: U3/U5/U6. Outcome: performance; confounders not specified.

Results of family and relational relationships with PSMU

Psychological control and rejection are distinct constructs, each of which was examined in a single cross-sectional study. Guo et al. (2026) reported an association between psychological control and social media addiction ($\beta = 0.59$); parental rejection, as examined by Zhou et al. (2026), was also positively associated with social media addiction ($\beta = 0.154$ and 0.222). Guo tested statistical mediation through social anxiety and loneliness, while Zhou tested the moderating effect of interpersonal strength. These two findings were not combined into a single large effect or confirmed evidence of a mechanism.

In a Dutch cross-sectional study, Geurts et al. (2022) found lower odds of risky/problematic use associated with positive parenting and proactive internet rules, and higher odds associated with reactive restrictions. Parental screen use, phubbing, and family functioning were not significant in the simultaneous model. A panel study from Guam showed that parental support at the first measurement was associated with lower PSMU one month later ($\beta = -0.14$; Dalisay et al., 2025). Guan et al. (2025) reported a negative association between reductions in parental digital distractions and social media addiction; these results were subject to additional limitations because the table notes indicated that some standard coefficients were hypothetical values.

Parental attachment was examined in two studies. Xiong et al. (2025) found an association with baseline levels or the slope of PSMU by trajectory group; the association with the slope was not significant in the low-risk-stable group. Pace et al. (2024) found an association between maternal attachment and SMD in the overall sample and among females; among males, peer relationships were more prominent. The mediation of alexithymia toward SMD was not significant in the overall sample or in either gender group. Two studies on general relationships, Sommerfeld and Dror (2025) and Demircioğlu and Göncü-Köse (2023), were summarized separately: their instruments did not prove that the relationships measured were with parents.

Communication and relationship quality emerge with different analytical positions. In Lu et al. (2025), family relationships served as a statistical mediator between relative deprivation and PSMU, with an indirect effect of 0.005 [0.002 ; 0.007]. In Fasihi and Rostami (2023), the path from family conformity through emotional regulation to behavioral problems was significant, but the path via conversational orientation was not significant. In de Armas Cortés et al. (2025), the indirect effect via active mediation was negative for two profile contrasts, but the active mediation path toward appearance consciousness was positive ($b = 0.06$). Therefore, these results should not be interpreted as evidence that increased active mediation reduces PSMU or appearance consciousness.

Johnson et al. (2026) identified PSMU as a predictor and child-to-parent violence as an outcome. The OR decreased from 1.46 in the demographic model to 1.15 after adjusting for individual and family factors, but remained statistically significant (95% CI 1.04 – 1.28). This study demonstrates a small adjusted association within a broader risk context, not that PSMU causes violence. No separate testing regarding the effectiveness of parental supervision or monitoring can be inferred from combining this study with the digital mediation study.

Table 3. Synthesis matrix by family and relational constructs

Construct	Studies and Designs	Direction and Outcomes	Measure/95% CI	Instrument/ Outcome	Assessment Notes
Psychological control	1 cross-sectional study: Guo	Positive toward PSMU;	β 0.59; total B 0.631 [0.576; 0.683]	BSMAS 6 items	One-time; not causal

Construct	Studies and Designs	Direction and Outcomes	Measure/95% CI	Instrument/ Outcome	Assessment Notes
		mediation of anxiety/loneliness			
Rejection by father/mother	1 cross-sectional study: Zhou	Positive; varying moderation	Father 0.154 [0.081; 0.227]; mother 0.222 [0.141; 0.304]	BSMAS 6 items	Single context; moderator does not always support
Parental support	1 longitudinal study: Dalisay	Negative toward subsequent PSMU; depression not directly associated	β -0.14, p = 0.002; CI not presented	6-item SMDS	Panel n = 417; 1-month interval
Parenting/rules	1 cross-sectional study: Geurts	Positive parenting/proactive rules: negative association; reactive restrictions: positive	OR 0.259; 0.588; 1.941; CI in Table 2	9-item SMDS; ≥ 2 symptoms	Mixed ages; n not aligned
Digital distraction/communication	1 mixed method: Guan	Distraction reduction is negatively associated	r -0.42; total B -0.42 [-0.53; -0.31]	28-item CSMAS	The hypothetical β is not used; the results are limited
Parental attachment	2: 1 cross-sectional study (Pace), 1 longitudinal study (Xiong)	Negative in some pathways/classes; not significant in other pathways	Xiong: B slopes -0.113 and -0.065; IC not reported	SMDS 9 vs. Instagram adaptation 10	Gender/class differed by track; SMDS α = 0.66
Quality of family relationships	1-way multilevel cross-sectional: Lu	Negative on PSMU; relative deprivation as mediator	Indirect effect 0.005 [0.002; 0.007]	9-item SMDS	Family as one of the pathways; remaining confounders
Family communication patterns	1 cross-sectional study: Fasihi	Conformity—significant behavioral problems; meaningless conversation	Mediation β 0.03, p = 0.04; conversation p = 0.08	SNAQ 23; behavioral problems	No test of communication effects on PSMU; IK unclear
Active parental mediation	1 cross-sectional study: de Armas Cortés	Negative for 2 contrast profiles; active path—positive appearance	-0.0493 [-0.1006; -0.0108]; -0.0449 [-0.0940; -0.0089]	SMDS 9; appearance awareness	No evidence of PSMU protection; confounders unclear
General relationship strength	2 cross-sectional studies: Sommerfeld; Demircioğlu	Anxiety: positive association with PSMU; other	β 0.28 in Demircioğlu	Bergen Adaptation Scale 6 vs. 41-item scale	Not specific to parents; not combined with family

Construct	Studies and Designs	Direction and Outcomes	Measure/95% CI	Instrument/ Outcome	Assessment Notes
		pathways vary			
Family as an outcome	1 cross-sectional study: Johnson	PSMU—positive violence; weakened after adjustment	Final OR 1.15 [1.04; 1.28]	SMDS 5; violence against parents	Mixed ages; family outcome, not family predictor

Results on the role of psychological variables

No single universal psychological sequence was found. Social anxiety and loneliness served as statistical mediators of the relationship between psychological control and social media addiction in Guo et al. (2026). Emotional regulation and communication served as statistical mediators in Guan et al. (2025), with emotional regulation also acting as a moderator. All of these pathways were analyzed using single-time-point measurements, so the causal sequence remains undetermined. Self-determination theory and attachment theory were used in the discussion to aid interpretation, not as a substitute for temporal testing.

The position of emotional regulation in Fasihi and Rostami (2023) differs: this variable is placed between PSMU and behavioral problems, as well as between family communication orientation and behavioral problems. Online emotional intelligence in de Armas Cortés et al. (2025) forms a cluster with PSMU; this variable is not equated with Guan's or Fasihi's measures of emotional regulation. Differences in instruments and variable positioning prevent these three studies from being counted as replications of the same emotional regulation effect.

The mediating role of alexithymia in the attachment–SMD relationship was not supported in Pace et al. (2024); the mediation results for overeating were not extended to the SMD outcome. Perfectionistic self-presentation and PSMU served as serial mediators in the general attachment–depression relationship in Sommerfeld and Dror (2025). Anxiety-related rejection sensitivity and psychopathy mediate indirect pathways to PSMU in Demircioğlu and Göncü-Köse (2023). The last two studies provide evidence of close relationships in general; their application to parents requires additional theoretical reasoning.

Interpersonal strength, as reported by Zhou et al. (2026), showed a primarily negative association with PSMU but a positive interaction with rejection across several gender pairs. These findings do not support the assumption that individual strength always weakens the relationship between family risk and PSMU. All moderation results were treated as variations in association within the sample, rather than as a basis for automatically prescribing different counseling techniques based on gender.

Mental and psychosocial health outcomes

Depression was an outcome variable in two studies with different designs. Dalisay et al. (2025) reported that initial PSMU was associated with subsequent depressive symptoms ($\beta = 0.16$), whereas the reverse depression–PSMU pathway was not significant at the one-month follow-up. Sommerfeld and Dror (2025) included depression as an outcome variable in a one-time serial model. Both studies demonstrate relationships relevant to case assessment, but do not prove that PSMU is the sole cause of depression or that family interventions will reduce it.

The issues of internalization and externalization are outcomes in Fasihi and Rostami (2023). Overeating and SMD are parallel outcomes in Pace et al. (2024), as are PSMU and cyberbullying in Demircioğlu and Göncü-Köse (2023). Appearance consciousness in de Armas Cortés et al. (2025) is a psychosocial outcome that is not equivalent to a diagnosis or symptoms of depression. Child-to-parent violence is a family-related outcome in Johnson et al. (2026). These categories are not combined as a single consequence of PSMU.

Social anxiety, loneliness, emotional regulation, alexithymia, perfectionistic self-presentation, sensitivity to rejection, and interpersonal competence primarily function as mediators or moderators. Preserving the original roles of these variables prevents confounding between factors related to PSMU and the examined psychosocial outcomes.

Evidence on interventions and potential counseling focuses

Among the 13 included studies, there were zero counseling or family intervention trials with PSMU outcomes, 13 reports of non-interventional associations, and counseling application concepts developed by the authors. These counts are descriptive and do not indicate a ranking of evidence strength. The absence of trials in the limited search corpus does not mean that family interventions for all digital issues have never been studied. The S-FAME protocol was not used as evidence of benefit because it has not yet provided empirical results.

Table 4 links counseling concepts to the number of studies and their designs. Some concepts are supported by only one study: psychological control, rejection, support, digital rule-setting, parental distraction reduction, and active mediation. Parental attachment was examined in two studies. There is no evidence of changes resulting from interventions that would justify the terms “modifiable factors” or “components proven effective” for PSMU.

Dialogue exercises, jointly discussed digital rules, parental involvement, and emotional regulation training are examples of the author’s ideas that can be considered in program development. Techniques such as device-free family time or emotional training were not tested as a package in the source study. These ideas need to be tested with clear outcomes, tailored to individual assessments, and should not be presented as recommendations regarding their effectiveness.

Table 4. Potential counseling focus areas derived by the author from observational findings

Potential Focus Areas	Empirical basis (n) and design	Relationship examined	Author’s Application Ideas	Limits of the evidence
Dialogue supporting autonomy	1 cross-sectional study: Guo	Psychological control–PSMU	Exploring adolescents’ needs and ways to set boundaries without emotional manipulation.	Support for autonomy as a technique was not tested; only psychological control was measured.
Responses to rejection	1 cross-sectional study: Zhou	Parental rejection–PSMU	Assessing experiences of rejection, discussing validation and	Moderation differs across gender pairs; changes in

Potential Focus Areas	Empirical basis (n) and design	Relationship examined	Author's Application Ideas	Limits of the evidence
			communication patterns.	rejection have not been tested.
Emotional support	1 longitudinal study: Dalisay	Initial support—subsequent PSMU	Mapping access to support, listening activities, and family problem-solving.	1-month follow-up; the relationship between support and depression was not significant.
Understood digital rules	1 cross-sectional study: Geurts	Positive parenting/proactive rules vs. reactive restrictions	Discuss the reasons behind rules and agreements before conflicts arise.	Mixed-age group; not a test of rule negotiation.
Reflections on parents' digital habits	1 mixed method: Guan	Distraction reduction—PSMU	Discussing examples of digital behavior and family interaction time.	Statistical reporting is unclear; screen-free time is the author's suggestion.
Conversations about content/appearance	1 cross-sectional study: de Armas Cortés	PSMU profile/emotions—mediation—awareness of digital presence	Exploring the meaning of digital content and appearance experiences with adolescents.	Active path—positive performance; does not prove benefits or a reduction in PSMU.
Parent–adolescent relationship security	2: 1 cross-sectional study by Pace; 1 longitudinal study by Xiong	Parent-Child Attachment—SMD/PSMU Trajectory	Assess responsiveness and trust-related difficulties before designing relational interventions.	Gender/class differences; general attachment studies are not included.
Understanding emotional processes	2: 1 mixed-methods study by Guan; 1 cross-sectional study by Fasihi	The role of emotional regulation in models with different outcomes	Consideration of emotion recognition and coping strategies.	Instruments/roles are not equivalent; emotional training was not tested.
Communication and conflict assessment	3: 2 cross-sectional studies by Fasihi/Johnson; 1 mixed-	Communication and behavioral problems/family outcomes	Exploring patterns of conversation, conflict, and safety or referral needs.	It's not three replications of one effect; Johnson positions the family as the outcome.

Potential Focus Areas	Empirical basis (n) and design	Relationship examined	Author's Application Ideas	Limits of the evidence
	methods study by Guan			
Family Digital Usage Plan	An integrative approach; 0 studies have tested this package	Combination of the above focus groups	Establishing case objectives, agreed-upon boundaries, alternative activities, and joint review.	The entire package is the author's concept; its effectiveness has not been tested in a corpus.

Relationship mapping and sensitivity analysis

Figure 2 shows four groups of evidence based on the position of variables, without causal arrows across studies. Eight studies included family factors in the PSMU model; two used the family constructs alongside other outcomes; two measured general attachment; and one modeled family as an outcome. This number reflects the scope of each group, not the strength or replication of all relationships. The example of emotional regulation following PSMU in Fasihi and Rostami (2023) remains placed according to its original model.

Sensitivity analysis excluding Geurts et al. (2022) and Johnson et al. (2026) left 11 studies. Associations involving psychological control, rejection, support, and parent-specific attachment remained represented by their respective reports; all evidence on proactive rules/reactive restrictions and the PSMU–child-to-parent-violence relationship was lost. Restricting the corpus to explicit family/parent constructs while excluding the two general-attachment studies and Johnson left 10 studies, or nine after removing the mixed-age Geurts study. In this subset of nine, each specific construct still relied on one or two studies, and there were still no counseling trials. Excluding Guan because of reporting uncertainty also removes the specific evidence on parental digital-distraction reduction and communication mediation involving PSMU. This is a check of dependence on individual studies, not an estimate of a pooled effect.

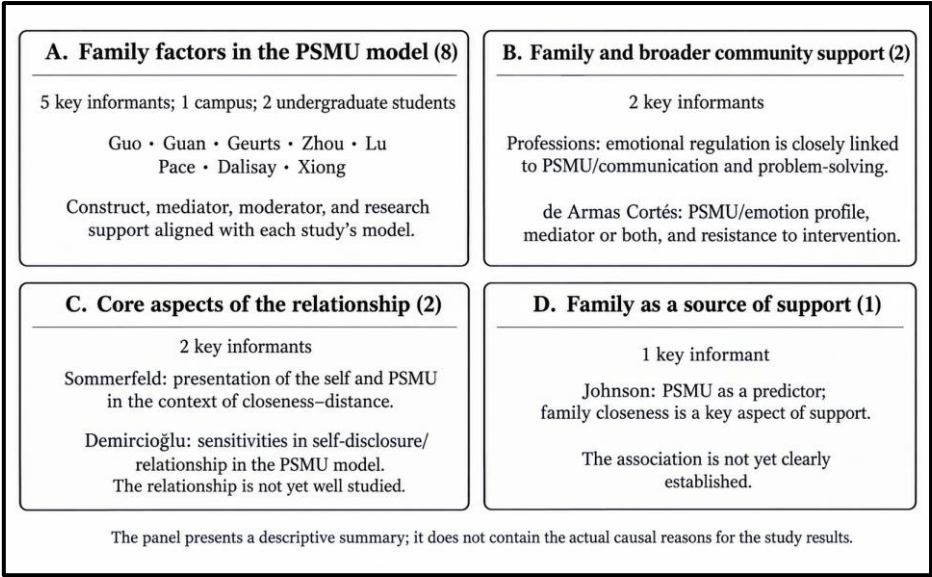


Figure 2. Descriptive mapping of variable positions in the included studies. The separate panels do not imply a causal sequence or a joint model.

Discussion and Implications for Counseling

Findings regarding family relationships should be interpreted as focused associational support. Lower levels of supportive relationships and PSMU are generally consistent with the review by Vossen et al. (2024), but this corpus is much smaller and does not yield pooled estimates. The distinctions between proactive rules, reactive restrictions, and psychological control can help authors formulate counseling hypotheses; these distinctions have not yet been tested as a direct comparison among constructs in this corpus. The results of active mediation using behavioral outcomes also explain why a single parenting practice may appear different depending on the outcome measure.

In self-determination theory, support for autonomy and relatedness provides a framework for understanding adolescents' needs as they negotiate their use of social media (Ryan & Deci, 2017). Attachment theory provides a framework for understanding a sense of security and responses to rejection (Bowlby, 1988). This interpretation is conceptually consistent with some of the mapped associations, but the one-time mediation did not test changes in psychological needs or a sense of security as causes of changes in PSMU. Because the two attachment studies used general relationships, this reasoning cannot always be centered on parents.

Differences in context and gender call for individualized formulations. Zhou's study comes from mainland China, not from a Hong Kong sample, and Pace's study shows different trajectories for women and men. Lu's study involves a cross-national context, while the Cuban study examines body image awareness. Family norms, digital access, sample composition, and instruments may offer alternative explanations for these differences; cultural differences were not directly tested by any of the studies, so these explanations represent the authors' interpretations. The one-month interval in Dalisay's study and the one-year follow-up in Xiong's study provide different temporal information without eliminating confounders or proving the effect of counseling.

As a developmental concept, the author considers the assessment of usage functions, emotional needs, family support, conflicts, and the nature of digital rules before selecting counseling targets. A systemic framework can help structure communication and problem-solving efforts with families (Carr, 2025), but the findings from Wang et al.'s (2024) family therapy for internet addiction should not be extrapolated to the effectiveness of PSMU. This corpus also does not support the conclusion that stricter supervision is always better or worse; supervisory practices are not equivalent to psychological control or active mediation.

Applicability in Indonesia and limitations

In Indonesia's guidance and counseling services, guidance counselors may conduct brief assessments of learning, sleep, social relationships, and emotional functioning, and consult with parents as needed and with the student's consent. Guidelines for school counseling emphasize collaboration and responsive services (Hidayah et al., 2022); ASCA guidelines distinguish brief school counseling from the need for further mental health services (American School Counselor Association, n.d.). This proposal is based on the author's reasoning, as no studies have evaluated school counselors, school services, or a specifically Indonesian sample. Language appropriateness, family dynamics, device access, and counselor competencies need to be assessed before piloting the program locally.

The main limitations of the study were the 11 reports with single-time-point quantitative measurements, reliance on adolescent reports, and a lack of two-party data. Not all associations were consistent or significant across the same model. The initial JBI assessment identified unclear

confounders in a number of studies, low SMDS reliability in Pace, an n discrepancy in Geurts, and hypothetical coefficient labeling in Guan. Individual findings from studies with these ambiguities were not used as a basis for certainty or recommendations regarding effectiveness. The quality assessment has not been replicated, and no formal certainty assessment is currently available.

Instrument heterogeneity includes the 5-, 6-, and 9-item SMDS; the Bergen/BSMAS; the CSMAS; the SNAQ; the adapted Instagram Addiction Scale; and the 41-item scale. Grouping by instrument preserves these differences but does not provide validation of equivalence across scores. The mixed-age sample and the general attachment construct limit the focus on adolescents and families. Sensitivity analyses indicate that excluding specific studies eliminates all evidence for some constructs, meaning that the remaining association directions do not demonstrate consistency across instruments or cultures.

The search covered only two databases, with field restrictors and ERIC filters that were not fully documented. Gray literature, systematic citation searches, and Indonesian literature were not included; selection, publication, and language biases may have occurred. Two reports were not obtained, while the selection/extraction procedures, registration, and criteria establishment prior to the search were not adequately documented. Additional references for background and discussion were not considered an extension of the corpus search. Given these limitations, the conclusions represent a focused overview rather than a comprehensive estimate or a basis for asserting the absence of counseling trials across the entire literature. Future research should expand the search, involve two independent reviewers, and evaluate family programs with separate outcomes for PSMU and mental health.

CONCLUSION

This limited systematic review identified 13 studies: 10 cross-sectional studies, one mixed-methods study with a one-time survey, and two longitudinal studies. One cross-sectional study on psychological control and one on parental rejection showed a positive association with PSMU. Parental support was associated with lower subsequent PSMU in one panel study; positive parenting and proactive rules emerged from one cross-sectional study. Findings on attachment and communication varied by construct, the role of the variables, and participant groups. Active mediation of appearance consciousness was not treated as evidence of a reduction in PSMU.

None of the included studies featured family counseling assessments. The factors identified are observational correlates or predictors and potential areas for future development identified by the authors; they are not proven mechanisms of change or components of interventions. Implications for school counselors and family counselors may be considered when designing contextual research or assessments; their applicability in Indonesia and their effectiveness need to be tested separately.

A search of two databases, the unavailability of two reports, heterogeneity of instruments, incomplete documentation of the process, and the initial quality assessment limit confidence in the conclusions. Future priorities include broader and replicable studies, independent verification, and intervention trials with clear measures of PSMU and mental health. Until such evidence is available, the benefits of changes in family factors cannot be inferred from the identified associations.

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An asterisk (*) indicates the 13 studies included in the synthesis.

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