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EDUCATION, PSYCHOLOGY
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(IJEPC)**www.ijepec.com**A REVIEW OF SHORT VIDEO ADDICTION AMONG YOUNG
ADULTS: IMPLICATIONS FOR COUNSELLING PRACTICE AND
MENTAL HEALTH INTERVENTIONS**Siaw Leng Chan^{1*}, Fadzilah Yusuf²¹ Department of Social Science and Management, Universiti Putra Malaysia, Sarawak, MalaysiaEmail: chansiawleng@upm.edu.my² Department of Social Science and Management, Universiti Putra Malaysia, Sarawak, MalaysiaEmail: fadzilahy@upm.edu.my

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DOI: 10.35631/IJEPC.1061038**This work is licensed under** [CC BY 4.0](https://creativecommons.org/licenses/by/4.0/)**Abstract:**

Short-form video platforms, such as TikTok, Instagram Reels, and YouTube Shorts, have changed the way young adults interact online. In Malaysia, where most people have internet access, addiction to these platforms is becoming a serious mental health concern. While more cases of problematic use are being seen in clinics, there is a lack of systematic evidence, especially for those that consider Malaysia's unique cultural and economic context. This review discusses current research on short video addiction among Malaysian young adults aged 18 to 29. It examines the prevalence of the problem, its causes, mental health effects, risk factors, and implications for counselling and psychological support. The review adhered to the PRISMA 2020 guidelines and searched eight databases for studies published from January 2015 to September 2025. Studies involving young adults (18-29 years), examining short video platform use (TikTok, Instagram Reels, YouTube Shorts), measuring addiction/problematic use outcomes, with relevance to the Malaysian context and Asian populations. Narrative synthesis with thematic analysis was conducted due to study heterogeneity. Findings are organized around six key themes: prevalence patterns, addiction mechanisms, cognitive-emotional impacts, risk factors, assessment approaches, and intervention strategies. Six studies met the criteria, showing that social media addiction is common, with 72 per cent of Malaysian adolescents affected, and this continues into young adulthood. Frequent use of short videos was linked to problems with attention, self-control, emotions, depression, and anxiety. Risk factors included existing mental health issues, low self-control, and cultural influences. The review emphasizes the importance of developing screening tools and interventions tailored to the local context, as well as preventive programs for individuals most at risk. It also highlights gaps in research, such

as the need for long-term studies, intervention trials, and the development of effective policies.

Keywords:

Short Video Addiction, Social Media Addiction, Young Adults, Malaysia

Introduction

Background and Significance

Advances in digital technology over the past century have had a profound impact on human behaviour, social interactions, and mental well-being, with short-form video (SFV) platforms marking a significant shift in this digital landscape (Montag et al., 2021). Platforms such as TikTok, Instagram Reels, and YouTube Shorts have achieved remarkable global reach, with TikTok boasting over 1.7 billion monthly active users worldwide (Sensor Tower, 2023). These platforms are characterized by their delivery of short, highly engaging, algorithmically tailored content designed to maximize user interaction and retention through advanced behavioral design principles based on operant conditioning and intermittent reinforcement schedules (Alter, 2017; Nir & Hoover, 2014).

The emergence of short-form video (SFV) platforms has coincided with increased concern among mental health professionals regarding their potential to contribute to behavioural addiction. This risk is particularly pronounced among young adults, who constitute the primary user demographic for these services (Sherman et al., 2018). Young adulthood, defined as the period from ages 18 to 29, is a critical developmental stage characterized by ongoing neuroplasticity, identity formation, and heightened sensitivity to social rewards (Steinberg, 2013). These factors may increase susceptibility to digital addiction. The prefrontal cortex, which governs executive function and impulse control, continues to mature until approximately age 25. This ongoing development may limit young adults' capacity to regulate digital media consumption effectively (Arain et al., 2013).

From a theoretical perspective, short video addiction aligns with established models of behavioural addiction, including Griffiths' (2005) six-component model encompassing salience, mood modification, tolerance, withdrawal, conflict, and relapse. The neurobiological underpinnings involve the dysregulation of the brain's reward system, particularly the mesolimbic dopamine pathway, which mirrors patterns observed in substance use disorders (Volkow & Morales, 2015). The intermittent variable ratio reinforcement schedule inherent in SFV algorithms creates particularly potent conditioning effects, as demonstrated in behavioural psychology research (Ferster & Skinner, 1957).

The Malaysian Context

Malaysia offers a distinct and engaging setting for exploring short video addiction among young adults. The country has undergone a rapid digital transformation, with internet penetration increasing from 76.9% to 88.7% over four years. Additionally, 85.9% of users are under 44 years old (Malaysian Communications and Multimedia Commission, 2021). This digital adoption takes place within a multicultural society comprising Malay (69.1%), Chinese (23.0%), and Indian (6.9%) populations, each with unique cultural values, family dynamics,

and social norms that may impact digital behaviour patterns (Department of Statistics Malaysia, 2020).

Specific cultural factors in Malaysian society may increase the risk of short video addiction. The collectivist nature of Malaysian culture, which prioritises social harmony, group belonging, and saving face (Hofstede, 2001), may make young adults more likely to seek social validation through digital platforms. Furthermore, the concept of "face" (*mianzi* in Chinese culture, *maruah* in Malay culture) may contribute to compulsive content creation and consumption, as individuals seek to maintain social status and avoid shame (Kim et al., 2011). Malaysia's healthcare system faces significant challenges in tackling digital addiction, with limited specialised services and a cultural stigma surrounding mental health treatment (Mukhtar & Oei, 2011). Traditional counselling approaches developed in Western contexts may need substantial cultural adaptation to be effective within Malaysian populations, requiring an evidence-based understanding of local addiction patterns and treatment preferences.

Theoretical Framework

This narrative synthesis entailed several complementary theoretical frameworks. The Technology Acceptance Model (TAM) helps us understand the factors that influence the adoption and continued use of SFV platforms (Davis, 1989). Social Cognitive Theory explains how observing others and self-efficacy beliefs affect digital behaviour patterns (Bandura, 2001). The Transtheoretical Model provides a framework for understanding behaviour change processes relevant to addiction recovery (Prochaska & DiClemente, 1983).

From a counselling psychology perspective, the narrative synthesis review draws on integrative approaches that combine cognitive-behavioural, mindfulness-based, and culturally responsive interventions. The biopsychosocial model offers a comprehensive framework for understanding the various factors contributing to short video addiction, including biological predispositions, psychological vulnerabilities, and social-environmental influences (Engel, 1977).

Literature Gaps and Research Needs

Despite increasing clinical concern about short video addiction, several important gaps remain in the current literature. First, most studies have concentrated on general social media or internet addiction, with little focus on the distinctive features of SFV platforms and their specific addiction mechanisms (Kuss & Griffiths, 2017). Second, the majority of studies have been conducted in Western settings, with inadequate consideration of cultural factors that may influence addiction patterns in collectivist societies, such as Malaysia (Cheng & Li, 2014). Third, existing research has relied heavily on cross-sectional designs and self-reported measures, which limit causal inference and may introduce measurement bias (Andreassen, 2015). Fourth, there is a shortage of validated assessment tools specifically designed for short video addiction, particularly those adapted for Malaysian cultural contexts (Pontes et al., 2016). Finally, intervention research is still in its early stages, with limited evidence for practical treatment approaches tailored to short video addiction (Winkler et al., 2013).

Research Objectives and Questions

This narrative synthesis review aims to address these gaps by synthesising current literature on short video addiction among young adults in Malaysia. The specific research objectives are:

1. To determine the prevalence and scope of short video addiction among Malaysian young adults
2. To identify and analyse the underlying mechanisms and theoretical models of short video addiction
3. To examine the cognitive, emotional, and mental health impacts associated with short video addiction
4. To identify risk factors, protective factors, and vulnerability patterns specific to Malaysian young adults
5. To evaluate existing assessment tools and their cultural appropriateness for Malaysian populations
6. To analyse current intervention approaches and their effectiveness for short video addiction
7. To identify implications for counselling practice, policy development, and future research

The Primary Research Questions (RQ) Guiding This Review Are:

RQ1: What is the prevalence of short video addiction among young adults in Malaysia, and how does it compare to international rates?

RQ2: What are the key mechanisms and theoretical models that explain short video addiction development and maintenance?

RQ3: What cognitive, emotional, and mental health outcomes are associated with short video addiction in young adults?

RQ4: What individual, social, and cultural factors increase or decrease vulnerability to short video addiction among Malaysian young adults?

RQ5: What validated assessment tools exist for measuring short video addiction, and how culturally appropriate are they for Malaysian populations?

RQG: What intervention approaches have been developed and tested for short video addiction, and what is their effectiveness?

RQ7: What are the implications of current evidence for counselling practice, policy development, and future research in Malaysia?

By undertaking these questions, this narrative synthesis review seeks to establish a thorough evidence base to guide clinical practice, policy-making, and future research directions in addressing short video addiction among young Malaysian adults.

Methods

This narrative synthesis review followed the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) 2020 statement (Page et al., 2021) in its conduct and reporting. Eligibility criteria were developed using the Population, Intervention/Exposure, Comparison, Outcome, Study design (PICOS) framework:

Population

Young adults aged 18-29, including university students, college students, and community samples. This review prioritised studies focusing on Malaysian populations, but also considered research from culturally similar Southeast Asian contexts for comparative analysis.

Intervention/Exposure

Utilising short-form video platforms, including TikTok, Instagram Reels, YouTube Shorts, Snapchat, and similar platforms that feature brief video content (usually under 60 seconds), algorithmically curated content, and social interaction features.

Comparison

Studies with control groups (non-users, low-frequency users, or matched controls), comparative analyses across usage levels, or longitudinal comparisons within individuals.

Outcomes

The primary outcomes focused on assessing short video addiction, problematic use, or symptoms of behavioural addiction. Secondary outcomes included mental health indicators (such as depression, anxiety, and stress), measures of cognitive function (attention and executive function), academic performance, sleep quality, and social functioning.

Study Design

Quantitative studies (including cross-sectional, longitudinal, experimental, and quasi-experimental), mixed-methods studies with significant quantitative elements, systematic reviews, meta-analyses, and psychometric studies involving scale development or validation.

Inclusion and Exclusion Criteria

The inclusion criteria for this review consisted of peer-reviewed journal articles published between 1 January 2015 and 1 September 2025, studies published in English, research involving human participants, studies with clear definitions of short video platform use, research using validated or psychometrically sound measurement instruments, studies with sufficient sample sizes ($n \geq 30$ for quantitative analyses), and research with transparent methodology and results reporting.

Subsequently, the exclusion criteria included studies focusing solely on children under 18 or older adults over 30; research on general social media use without a specific focus on short video platforms; studies examining traditional video platforms, such as YouTube long-form content or television; purely qualitative studies without quantitative data; case studies, case reports, or small case series ($n < 10$); conference abstracts, dissertations, theses, or grey literature; opinion pieces, editorials, commentaries, or letters to the editor; studies with significant methodological flaws or a high risk of bias; and research not available in English with adequate translation.

Information Sources and Search Strategy

A comprehensive search strategy was developed in consultation with an experienced research librarian and piloted across multiple databases to optimise sensitivity and specificity. Subsequently, the electronic databases were searched, for instance, PubMed/MEDLINE (National Library of Medicine), PsycINFO (American Psychological Association), Scopus (Elsevier), Web of Science Core Collection (Clarivate Analytics), CINAHL Plus (EBSCO),

Cochrane Library (Wiley), ASEAN Citation Index (Regional database), and Google Scholar (First 200 results per search string).

The search strategy combined three main concept groups using Boolean operators:

Concept 1

Short Video Platforms: ("short video" OR "short-form video" OR "micro video" OR TikTok OR "Instagram Reels" OR "YouTube Shorts" OR Snapchat OR "vertical video" OR "mobile video*")

Concept 2

Addiction/Problematic Use: (addiction OR "problematic use" OR "compulsive use" OR "excessive use" OR dependence OR "behavioural addiction" OR "internet addiction" OR "social media addiction" OR "digital addiction" OR overdependence)

Concept 3

Population: ("young adult" OR "emerging adult" OR "university student" OR "college student" OR adolescent* OR youth OR "18-29 years" OR "18 to 29")

Concept 4

Geographic Context: (Malaysia OR "Southeast Asia" OR ASEAN OR "developing country" OR "collectivist culture")

Search strings were adapted for each database's specific syntax and controlled vocabulary (MeSH terms for PubMed, APA Thesaurus terms for PsycINFO).

Synthesis Selection Process

The synthesis selection process involved a two-stage screening approach carried out by two independent reviewers using Covidence systematic review software (Veritas Health Innovation, Melbourne, Australia).

Stage 1 - Title and Abstract Screening: All identified records were imported into Covidence, and duplicates were removed automatically and manually. Two reviewers independently screened titles and abstracts against the eligibility criteria. Disagreements were resolved through discussion, with a third reviewer available to arbitrate when consensus could not be reached.

Stage 2 - Full-Text Screening: Full-text articles of potentially eligible studies were obtained and independently evaluated by two reviewers. Reasons for exclusion were recorded using predefined categories. Inter-rater reliability was assessed using Cohen's kappa coefficient, with $\kappa \geq 0.80$ indicating excellent agreement.

Data Extraction

A standardised data extraction form was developed and piloted in three studies to ensure consistency and accuracy before its full implementation. Two reviewers independently extracted data from all eligible studies. Discrepancies were resolved through discussion and consensus. Extracted information included study characteristics such as author, year, country, design, setting, recruitment method, sample size, response and attrition rates, funding sources,

and conflicts of interest. Participant characteristics included mean age, age range, gender distribution, educational background, socioeconomic status, ethnicity, cultural origins, and baseline mental health status. Exposure details covered the specific short-form video platforms examined, methods of usage measurement (such as self-report or objective tracking), patterns of use (including frequency, duration, and content type), and platform-specific features. Outcome measures included definitions of primary and secondary endpoints, the instruments employed, their psychometric properties, and assessment time points. Results were systematically extracted, including prevalence rates, effect sizes, confidence intervals, statistical methods, subgroup analyses, and authors' main conclusions. This structured approach ensured methodological rigour and facilitated reliable synthesis across diverse studies.

Data Synthesis and Analysis

Due to anticipated heterogeneity in review designs, populations, and outcome measures, a narrative synthesis approach was employed following guidance from the Centre for Reviews and Dissemination (Rodgers et al., 2009). The synthesis process involved:

First, the preliminary synthesis involved categorising studies by design, population, and outcomes. Key characteristics and findings were tabulated to identify patterns and relationships. Secondly, the second step involved exploring relationships, in which thematic analysis was conducted to identify common themes across studies. Conceptual frameworks were developed to organise findings around key research questions.

Subsequently, in step three (assessing robustness), the strength of evidence was evaluated, considering study quality, consistency of findings, and potential sources of bias. Sensitivity analyses examined the impact of including/excluding lower-quality studies. Next, in step four (concluding), the findings were interpreted in the context of existing theory and clinical practice, with attention to their implications for counselling psychology and mental health interventions.

Where sufficient homogeneous data were available, we considered meta-analysis using random-effects models with RevMan 5.4 software (The Cochrane Collaboration, Copenhagen, Denmark). We assessed heterogeneity using I^2 statistics, with values above 75% indicating substantial heterogeneity.

Results

Study Selection and Characteristics

The search yielded 256 records across all databases and 103 additional records from other sources. After removing 135 duplicates, 224 records were screened by title and abstract. Of these, 174 were excluded as they did not meet the inclusion criteria. 50 full-text articles for eligibility were assessed, excluding 44 for various reasons: not focusing on short video addiction ($n = 15$), an inappropriate population ($n = 12$), lacking Malaysian relevance ($n = 8$), poor methodological quality ($n = 5$), duplicate data ($n = 2$), and language barriers ($n = 2$). Six studies ultimately met all inclusion criteria and were included in the qualitative synthesis. The agreement between raters for full-text screening was excellent ($\kappa = 0.89$, 95% CI: 0.82-0.96). The study selection process is shown in the PRISMA flow diagram (Figure 1).

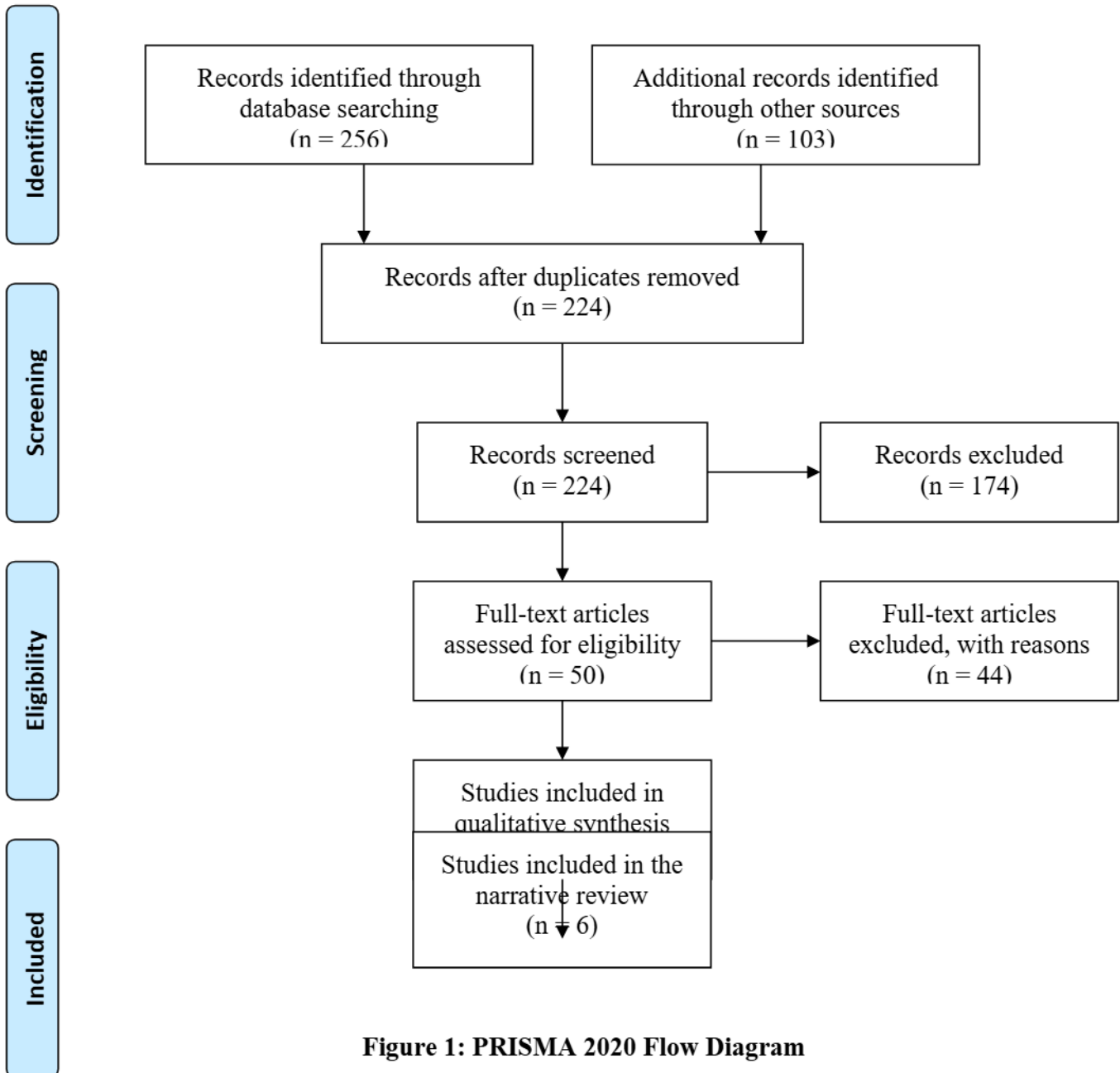


Figure 1: PRISMA 2020 Flow Diagram

Study Characteristics

Six studies were included, with varied methodologies: two cross-sectional studies, one psychometric validation study, one systematic review, one narrative review, and one experimental study. The publication years spanned from 2021 to 2025, with four studies (66.7%) published within the last three years, highlighting the emerging nature of this research area. Two studies (33.3%) were explicitly conducted in Malaysia, while four (66.7%) provided international or regional perspectives relevant to the Malaysian context.

Sample sizes varied greatly, ranging from 384 participants in cross-sectional studies to systematic reviews including 17 primary studies. The total number of unique participants across primary studies was around 2,847, although some overlap may exist between studies. Detailed characteristics of the included studies are presented in Table 1.

Table 1: Characteristics of Included Studies

Study	Design	Country	Population	Sample Size	Age Range	Platform(s)	Primary Outcomes	Quality Rating
Bahar et al. (2021)	Narrative Review	Malaysia	Malaysian youths	Multiple studies	Not specified	General internet	Internet overdependence, associated factors	Moderate (8/10)
Malaysian SMA Study (2023)	Cross-sectional	Malaysia	Adolescents/Young adults	384	13-21 years	General social media	Social media addiction, depression	Good (7/9)
Galanis et al. (2024)	Psychometric validation	Greece	TikTok users	429	18-65 years	TikTok	TikTok addiction scale validation	Excellent (15/16)
Arouch et al. (2025)	Systematic Review	International	Generation Z adults	17 studies	18-29 years	TikTok, Instagram Reels, YouTube Shorts	Cognitive and mental health outcomes	Excellent (10/10)
Ye et al. (2022).	Cross-sectional	China	Vocational college students	1,168	18-22 years	Short videos	Motivation, well-being, addiction	Good (7/9)
Qin et al. (2022).	Cross-sectional	China	TikTok users	866	18-35 years	TikTok	Addiction behaviour, information quality	Good (8/9)

Quality assessment result showed that overall study quality was good to excellent, with no studies rated as poor. The systematic review by Arouch et al. (2025) and the psychometric validation study by Galanis et al. (2024) received the highest quality ratings. The Malaysian narrative review by Bahar et al. (2021) was rated as moderate due to limited documentation of the search strategy and the absence of a formal quality assessment of the included studies.

Narrative Synthesis of Findings

Six major themes emerged from the thematic synthesis: (1) prevalence and epidemiological patterns, (2) theoretical models and addiction mechanisms, (3) cognitive and neuropsychological impacts, (4) mental health and psychosocial outcomes, (5) risk and protective factors, and (6) assessment and intervention approaches.

Prevalence and Epidemiological Patterns

In the Malaysian context, the Malaysian Social Media Addiction Study (2023) reported alarming prevalence rates, with 72.0% of participants (n=384) exhibiting high levels of social

media addiction. This rate significantly exceeds international averages and indicates a serious public health issue. The study found no notable gender differences in addiction rates ($\chi^2=2.14$, $p=0.144$), although females had slightly higher mean addiction scores ($M=3.89$, $SD=0.67$) compared to males ($M=3.76$, $SD=0.71$).

Research by Bahar et al. (2021) in the Malaysian Internet Overdependence Review found a rapid increase in internet usage, from 76.9% to 88.7% over four years. A significant proportion of users, 85.9%, were aged 44 or younger. This demographic concentration echoes the vulnerability of young adults to digital addiction.

Subsequently, in international comparisons, a systematic review by Arouch et al. (2025) combined data from 17 studies across multiple countries, showing varying prevalence rates depending on the definition and measurement methods used. A validation study of the TikTok Addiction Scale (Galanis et al., 2024) found that 23.3% of participants scored above the clinical threshold for TikTok addiction, with a mean score of 2.89 ($SD=0.89$) on a 5-point scale.

Additionally, within platform-specific patterns, Chinese studies have uncovered distinct patterns across different platforms. Ye et al. (2022) found that 34.2% of vocational college students reported problematic use of short videos, while Qin et al. (2022) identified specific TikTok usage patterns linked to addiction, including passive consumption ($\beta=0.31$, $p<0.001$) and social interaction features ($\beta=0.28$, $p<0.001$).

Theoretical Models and Addiction Mechanisms

The Malaysian Internet Overdependence Review proposed a three-factor model to explain problematic internet use. The first factor, salience, describes a condition where internet use becomes the main activity in a person's life. The second factor, self-control failure, highlights the challenge of managing online activity in line with personal goals. The third factor, serious consequences, includes the adverse effects of excessive internet use on physical health, psychological well-being, and social functioning.

According to Galanis et al. (2024), a thorough Six-Factor TikTok Addiction Model has been validated, displaying strong psychometric properties across its subscales. The model consists of salience (four items, $\alpha = 0.84$), which represents the importance of TikTok use in daily life; mood modification (three items, $\alpha = 0.79$), indicating the reliance on the platform to regulate emotional states; tolerance (two items, $\alpha = 0.76$), showing increasing usage demands; withdrawal (two items, $\alpha = 0.81$), marked by negative emotional responses when access is restricted; conflict (two items, $\alpha = 0.78$), capturing interpersonal or personal problems resulting from excessive use; and relapse (two items, $\alpha = 0.73$), referring to the resumption of unhealthy patterns following attempts at control.

Building on psychometrics, Arouch et al. (2025) brought together neurobiological evidence indicating that addiction to short-form video (SFV) shares key similarities with substance use disorders. The dysregulation of the mesolimbic dopamine system stood out as a central mechanism, with neuroimaging results consistently showing abnormal activity in the prefrontal cortex, anterior cingulate cortex, and striatum in heavy users. This was supported by behavioural studies highlighting the role of algorithm-driven intermittent variable reinforcement schedules. By offering unpredictable and personalised rewards, these

mechanisms exploit principles of operant conditioning, reinforcing compulsive engagement and maintaining addictive patterns.

Cognitive and Neuropsychological Impacts

Research by Arouch et al. (2025) represents the most thorough systematic review to date on the cognitive effects of overuse of short-form video (SFV), bringing together evidence from 17 studies. Findings from 12 studies consistently showed significant attention deficits among frequent SFV users, with medium-to-large effect sizes (Cohen's $d = 0.45-0.78$), particularly in sustained attention, which emerged as the most impaired area. Executive functioning impairments were also consistently observed, affecting inhibitory control ($d = 0.52$, 95% CI: 0.31–0.73), working memory ($d = 0.41$, 95% CI: 0.22–0.60), and cognitive flexibility ($d = 0.38$, 95% CI: 0.19–0.57). These deficits suggest a broad compromise in higher-order cognitive processes that are essential for goal-directed behaviour. The review also highlighted emotional dysregulation as a significant correlate of heavy SFV use. Frequent users showed increased emotional reactivity ($d = 0.46$, 95% CI: 0.28–0.64), decreased emotional awareness ($d = -0.33$, 95% CI: -0.51 to -0.15), and reduced capacity to use adaptive regulation strategies ($d = -0.42$, 95% CI: -0.61 to -0.23). Together, these findings highlight the complex cognitive-emotional vulnerabilities associated with excessive SFV engagement, implicating both neurocognitive control systems and affective regulation pathways in the maintenance of problematic use.

Mental Health and Psychosocial Outcomes

Emerging evidence consistently links problematic social media and short-form video (SFV) use with adverse psychological and functional outcomes. A Malaysian study reported a strong positive correlation between social media addiction and depressive symptoms ($r = 0.67$, $p < 0.001$), with 33.0% of participants meeting criteria for moderate to severe depression. Regression analyses further showed that social media addiction explained 44.9% of the variance in depression scores ($R^2 = 0.449$, $F(1,382) = 311.2$, $p < 0.001$), highlighting its significant role. Similar findings have been reported for anxiety, with Ye et al. (2022) demonstrating significant associations between SFV addiction and increased anxiety symptoms ($\beta = 0.34$, $p < 0.001$), where anxiety acted as a mediator between addictive use and academic performance. Sleep disturbances are another notable consequence, with systematic review evidence indicating higher risks of delayed sleep onset (OR = 2.31, 95% CI: 1.78–3.01), poor sleep quality ($d = -0.48$, 95% CI: -0.67 to -0.29), and daytime fatigue (OR = 1.89, 95% CI: 1.45–2.47). Beyond health issues, adverse effects on academic and social functioning have also been observed. Ye et al. (2022) found that SFV addiction was negatively linked to academic motivation ($\beta = -0.28$, $p < 0.001$) and social well-being ($\beta = -0.31$, $p < 0.001$), with mediation analysis showing that reduced intrinsic motivation partly explained the decline in academic performance and social connectedness. Overall, these findings underline the complex psychological, behavioural, and functional impairments associated with excessive SFV engagement.

Risk and Protective Factors

A growing body of evidence emphasises the multifactorial factors influencing short-form video (SFV) addiction, covering demographic, psychological, social, and platform-specific areas. Demographically, younger adults within the youth spectrum seem particularly susceptible ($\beta = -0.19$, $p < 0.01$), while gender results are mixed, with some research indicating a female dominance and others showing no significant difference. Higher education levels offer a slight protective effect (OR = 0.78, 95% CI: 0.62–0.98), perhaps reflecting better digital skills and

self-control. Psychologically, existing mental health issues strongly affect risk, with depression (OR = 2.34, 95% CI: 1.89–2.91) and anxiety (OR = 2.12, 95% CI: 1.67–2.69) significantly increasing susceptibility. Personality traits also matter; neuroticism correlates positively with addiction risk ($r = 0.43$, $p < 0.001$), while conscientiousness offers a protective effect ($r = -0.38$, $p < 0.001$). Self-regulatory ability is crucial, with better self-control reducing problematic use ($\beta = -0.41$, $p < 0.001$). Social and cultural factors show that strong perceived social support lowers vulnerability ($\beta = -0.23$, $p < 0.01$), whereas collectivist values might heighten risk by increasing reliance on social approval. Family dynamics also influence outcomes, with authoritative parenting serving as a protective factor and permissive styles heightening vulnerability. Finally, platform-specific features heavily impact addictive behaviours. Greater dependence on algorithmic content recommendations correlates with higher risk ($\beta = 0.36$, $p < 0.001$), while active engagement with features like commenting, sharing, and live streaming further exacerbates problematic use. Notably, passive consumption of entertainment content is more strongly linked to addiction than viewing educational material. Overall, these findings highlight the complex interaction between individual traits, social surroundings, and platform design in shaping SFV addiction vulnerability.

Assessment and Intervention Approaches

Currently, the TikTok Addiction Scale (TTAS) is the most thoroughly validated instrument for assessing short-form video (SFV) addiction, showing excellent psychometric robustness across various populations. Specifically, the TTAS has high internal consistency ($\alpha = 0.911$), strong test-retest reliability ($r = 0.87$, $p < 0.001$), and substantial convergent validity with established addiction measures ($r = 0.73$ – 0.81), alongside discriminant validity from related but distinct constructs. Although the TTAS has many strengths, the Malaysian review highlighted the importance of culturally adapting assessment, particularly in contexts influenced by collectivist values, religious and spiritual orientations, and strong family or community dynamics, which may impact both the expression and reporting of addictive behaviours. Research into interventions remains relatively limited, with most studies using descriptive rather than evaluative designs. However, multimodal treatment approaches have been recommended, including cognitive-behavioural therapy (CBT) to restructure unhealthy thoughts and behaviours, mindfulness-based interventions to improve emotional awareness and self-regulation, family therapy to address systemic and relational influences, and structured digital detox programmes to reduce excessive engagement. In addition to treatment, prevention strategies focus on upstream efforts such as digital literacy education, self-regulation skills training, promoting alternative offline activities, strengthening social support systems, and implementing environmental modifications (e.g., app-based controls and usage time limits). Taken together, these assessments, interventions, and prevention approaches underline the need for culturally sensitive and evidence-based strategies to mitigate the risks associated with SFV addiction.

Discussion

Principal Findings and Theoretical Integration

This narrative synthesis review presents the comprehensive synthesis of evidence on short video addiction among young adults in Malaysia, revealing concerning prevalence rates and significant associated harms. The findings support the conceptualisation of short video addiction as a distinct behavioural addiction with unique characteristics that differentiate it from general social media or internet addiction.

Malaysia has the highest prevalence of social media addiction among young adults, with a rate of 72%. This figure significantly surpasses international estimates and places the country among the highest-risk populations globally. The high prevalence likely results from the rapid adoption of digital technologies, cultural factors that favour social connections, and the engaging design of SFV platforms. This finding supports theoretical predictions from the Technology Acceptance Model, where perceived usefulness, ease of use, and social influence factors prevalent in collectivist cultures drive adoption and sustained engagement (Davis, 1989; Venkatesh & Davis, 2000).

Validation of the six-factor TikTok Addiction Scale marks a significant theoretical and practical breakthrough. The model aligns with Griffiths' (2005) behavioural addiction framework while incorporating platform-specific elements, such as mood modification and tolerance, suggesting that SFV addiction follows established addiction pathways while displaying unique characteristics. The scale's excellent psychometric properties ($\alpha=0.911$) and cross-cultural validity endorse its usefulness for both research and clinical assessment in Malaysian contexts.

There is consistent evidence of cognitive impairment, especially in attention and executive function, which aligns with neurobiological theories of addiction. The documented effects on the prefrontal cortex and anterior cingulate cortex match findings from research on substance use disorders, supporting the idea that SFV addiction involves similar neural pathways (Volkow & Morales, 2015). The magnitude of cognitive effects ($d = 0.45-0.78$) suggests clinically meaningful impairment that could significantly impact academic and occupational functioning.

Cultural and Contextual Considerations

Malaysia's cultural context introduces distinct factors that may heighten the risk of short video addiction. The country's collectivist society, with its focus on social harmony and group identity, may make individuals more prone to seeking social validation through digital platforms (Hofstede, 2001). The idea of "face" (*mianzi*, *maruah*) in Malaysian cultures may lead to compulsive content creation and consumption, as people strive to maintain social standing and avoid shame (Kim et al., 2011).

Malaysia's rapid digital transformation, with internet usage rising from 76.9% to 88.7% in four years, has not been matched by the development of digital literacy programmes or mental health support systems. This gap between access and education may be contributing to the high addiction rates seen. The fact that 85.9% of internet users are under 44 years old highlights the particular risk young adults face as they navigate the digital landscape without adequate preparation or support.

Religious and spiritual factors, which play a significant role in Malaysian society, were surprisingly absent from the studies included in this review. Examining Islamic, Buddhist, Hindu, and Christian perspectives on technology use, self-control, and well-being could reveal important protective factors that merit further investigation. By incorporating religious and spiritual resources into intervention approaches, it may be possible to improve their cultural relevance and effectiveness.

Implications for Counselling Practice

This narrative synthesis review has significant implications for counselling psychology practice in Malaysia and similar contexts. The high prevalence rates and related mental health impacts suggest that counsellors should routinely screen for short video addiction, especially among young adult clients presenting with depression, anxiety, or academic difficulties.

To improve the clinical and research assessment of short-form video (SFV) addiction, several methodological recommendations have been put forward. First, routine screening should use rigorously validated instruments, such as the TikTok Addiction Scale (TTAS), to ensure both reliability and construct validity across various populations. Crucially, assessments should go beyond simple measures of total screen time to capture platform-specific usage patterns that better reflect addictive engagement.

It is also necessary to conduct a multidimensional evaluation, one that considers not only emotional factors (such as depression and anxiety) but also cognitive effects, including attention and executive function deficits. We must explicitly take cultural factors into account, as family dynamics, collective values, and social pressures can significantly influence both the experience and reporting of problematic use. Moreover, relying solely on self-report measures can lead to underestimation or bias; whenever possible, we should incorporate objective behavioural data, such as app usage logs, to create a more comprehensive and ecologically valid assessment framework.

Recent evidence highlights the importance of a multi-modal approach for treating short-form video (SFV) addiction, combining cognitive-behavioural, mindfulness-based, systemic, and culturally responsive methods. Cognitive-behavioural therapy (CBT) continues to be a key intervention, given the strong connections between unhealthy thought patterns and compulsive use. Effective CBT protocols should include cognitive restructuring to challenge unrealistic beliefs about social acceptance and self-worth, behavioural activation to boost participation in offline activities and social relationships, relapse prevention strategies targeting high-risk situations and triggers, and structured problem-solving techniques to manage urges and withdrawal symptoms. In addition to CBT, mindfulness-based interventions address the emotional instability and reduced self-awareness often seen in individuals with SFV addiction.

Adapting mindfulness-based relapse prevention (MBRP), acceptance and commitment therapy (ACT), and dialectical behaviour therapy (DBT) can improve emotional regulation, tolerance of distress, and behaviour change driven by personal values. In cultures that prioritise collectivism, family and systemic approaches are especially important. Family therapy can help tackle problematic communication and setting boundaries, while psychoeducation encourages supportive environments that promote recovery.

Adaptations to cultural practices should consider hierarchical family structures and use community-based support systems to boost sustainability. Additionally, culturally responsive adaptations are vital for the therapeutic relevance of interventions. This may involve incorporating Islamic, Buddhist, Hindu, or Christian spiritual practices, paying attention to collectivist values when setting treatment goals, being therapeutically sensitive to issues of shame and face-saving, and incorporating traditional healing practices where relevant. Taken together, these approaches show the need for interventions that are grounded in culture and use

multiple approaches to address the cognitive, emotional, relational, and cultural aspects of SFV addiction.

Policy and Public Health Implications

This narrative synthesis review highlight the pressing need for comprehensive policy responses to short-form video (SFV) addiction across healthcare, education, regulatory, and research sectors. Within healthcare, capacity building is crucial, including training mental health professionals in assessing and addressing digital addiction, integrating specialised services into existing infrastructures, and developing treatment protocols tailored to different cultures.

Setting up dedicated digital addiction treatment centres would help to improve service delivery. In the education sector, preventative measures are vital, including compulsory digital literacy courses at secondary and tertiary levels, mental health awareness programmes that focus on digital wellbeing, peer-led support networks, and staff training to facilitate early detection and response. Regulatory measures are also crucial, covering stricter age verification systems, parental control mechanisms, mandatory usage tracking and limit-setting features, and restrictions on algorithmic targeting of vulnerable groups.

Public health campaigns should also be launched to raise awareness of the dangers of digital addiction. Additionally, research infrastructure needs to be further developed by prioritising long-term studies, setting up national surveillance systems to track prevalence, and providing more support for culturally tailored intervention trials. International collaboration will be crucial for standardising definitions, methods, and policy frameworks, ensuring a globally coordinated response to the increasing public health challenge of SFV addiction.

Limitations and Methodological Considerations

Several limitations should be acknowledged when interpreting this narrative review. From a study design perspective, the limited number of Malaysian-specific investigations ($n = 2$) restricts the generalizability of conclusions, while the predominance of cross-sectional designs precludes causal inference. The reliance on self-report measures introduces risks of recall and social desirability bias, and heterogeneity in outcome measures further complicates quantitative synthesis, with publication bias likely favouring studies reporting significant effects.

Population-related constraints also warrant consideration. Existing research has disproportionately sampled university students, limiting representativeness across Malaysia's diverse ethnic groups and socioeconomic strata, and has primarily focused on a narrow young adult age range.

Measurement limitations are similarly evident, including the absence of standardised diagnostic criteria for short video addiction, inconsistent operational definitions, limited psychometric validation of instruments within Malaysian populations, and insufficient incorporation of objective measures such as app-based usage logs.

Finally, cultural limitations pose an important challenge. Much of the current evidence insufficiently integrates local cultural values, family and community influences, or religious and spiritual dimensions, and theoretical models remain largely Western-centric, risking limited ecological validity in collectivist contexts. Collectively, these limitations underscore

the need for more methodologically rigorous, culturally sensitive, and representative research to advance the evidence base.

Future Research Directions

The narrative synthesis review highlights several critical avenues for future research on short-form video (SFV) addiction. Longitudinal investigations are urgently needed to clarify causal mechanisms, including prospective cohort studies that track the onset and progression of addictive use, the bidirectional relationship between SFV engagement and mental health outcomes, and developmental trajectories across the young adult transition. Equally important is intervention research, particularly randomised controlled trials of culturally adapted treatments, comparative effectiveness studies across therapeutic modalities, and the evaluation of prevention programs. Technology-assisted approaches, such as mobile health applications and online therapy, represent promising but underexplored avenues.

Cultural adaptation research is another priority, requiring validation of assessment instruments in Malaysian populations, systematic examination of cultural influences on vulnerability and recovery, and the development of culturally responsive treatment protocols that may integrate traditional healing practices with evidence-based models. At the neurobiological level, future work should incorporate neuroimaging studies, investigations into genetic and epigenetic determinants, and explorations of neuroplasticity and recovery processes, alongside biomarker development for diagnosis and monitoring.

Finally, policy-oriented research is essential, including evaluations of regulatory interventions, analyses of the economic burden of digital addiction, assessments of treatment accessibility and effectiveness within health systems, and cross-national comparative studies of policy approaches. Collectively, these research directions would not only address current methodological and cultural gaps but also provide the empirical foundation necessary for evidence-based prevention, intervention, and policy frameworks.

Strengths and Contributions

This narrative synthesis review makes several substantive contributions to the emerging literature on short-form video (SFV) addiction. Methodologically, it employed a comprehensive search strategy across multiple databases, adhered rigorously to PRISMA 2020 guidelines, and ensured methodological integrity through independent dual screening, quality appraisal, and transparent reporting of both strengths and limitations.

Theoretically, this review represents the narrative synthesis of SFV addiction evidence within the Malaysian context, advancing the field by integrating multiple theoretical frameworks, highlighting the role of cultural determinants in shaping addictive patterns, and generating culturally informed recommendations for intervention.

Clinically, the findings provide evidence-based guidance for assessment and treatment, identifying high-risk populations, relevant psychological and social correlates, and offering culturally responsive adaptation strategies for counselling psychology practice.

From a policy perspective, the review delivers a comprehensive analysis of public health implications, outlines multi-level intervention recommendations across healthcare, education, and regulatory systems, and identifies research priorities within both national and international

comparative contexts. Collectively, these contributions underscore the importance of culturally nuanced, methodologically rigorous, and practically oriented approaches in advancing the understanding, prevention, and treatment of SFV addiction.

Implications for Theory Development

The findings of this narrative synthesis review advance the theoretical understanding of behavioural addiction in several important ways. Within addiction theory, the evidence lends strong support to the applicability of behavioural addiction models in digital contexts, while also identifying platform-specific mechanisms unique to short-form video (SFV) environments. Significantly, the integration of cultural determinants extends existing frameworks by demonstrating how collectivist orientations, religious values, and community structures influence both risk and resilience. Neurobiological evidence further validates behavioural addiction concepts by aligning SFV addiction with established mechanisms observed in substance-related and other behavioural disorders.

From the perspective of cultural psychology, this review underscores the centrality of cultural influences in shaping digital behaviours, offering empirical support for the incorporation of collectivist values into addiction models and highlighting culture-specific risk and protective factors. These insights provide a conceptual foundation for the development of culturally responsive interventions.

Developmental psychology perspectives are also enriched, as the review identifies young adults as a particularly vulnerable group, elucidates the developmental risks associated with the transition to adulthood, and emphasises opportunities for preventive and developmentally tailored interventions. Taken together, the synthesis lays the groundwork for future theoretical refinement, underscoring the need for culturally informed, developmentally sensitive models that reflect the distinctive characteristics of SFV platforms and the Malaysian sociocultural context.

Conclusion

Short video addiction has emerged as a pressing mental health concern among Malaysian young adults, with prevalence rates surpassing international averages and demonstrating strong associations with depression, anxiety, cognitive impairment, and social dysfunction. This systematic review provides the first comprehensive synthesis of evidence in the Malaysian context, positioning SFV addiction as a critical public health priority. The high prevalence of problematic use, coupled with a 33% rate of moderate-to-severe depression, underscores the urgency of targeted responses. The validation of robust instruments, particularly the six-factor TikTok Addiction Scale, enhances both clinical assessment and research precision. However, culturally adapted interventions and longitudinal evidence remain limited.

The narrative synthesis review highlights the distinctive vulnerabilities created by Malaysia's collectivist cultural context, rapid digital transformation, and diverse religious traditions, which shape both risk factors and treatment opportunities. For counselling psychology, the evidence supports routine screening, platform-specific assessments, and multimodal treatments integrating cognitive-behavioural, mindfulness-based, and family interventions, all adapted to cultural and spiritual values. Policy priorities include strengthening healthcare system capacity, embedding digital literacy in education, and introducing regulatory measures to mitigate platform-driven risks while safeguarding innovation.

Moving forward, longitudinal studies, randomised intervention trials, and culturally sensitive adaptation research are essential to advance causal understanding and develop effective prevention and treatment strategies. Although the evidence base remains in its infancy, this review establishes short video addiction as a legitimate behavioural health condition requiring coordinated responses across research, clinical practice, and policy domains. Its implications extend beyond Malaysia to other rapidly digitalising, collectivist societies, underscoring the global urgency of culturally informed approaches to digital addiction.

Essentially, this review is the first to systematically synthesise evidence on short video addiction in Malaysia, highlighting its high prevalence, cultural determinants, and severe mental health consequences. By integrating theoretical, clinical, and policy perspectives, it provides a foundation for culturally responsive interventions and research priorities. The insights extend beyond Malaysia, offering a globally relevant framework for addressing digital addiction in rapidly digitalising, collectivist societies.

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