Psychological Well-Being as a Predictor of Social Media Addiction: A Survey on Health Workers

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Abstract: Social media stand out as one of the most important communication tools of today. Nearly 63 percent of Turkey's population (approximately 52 million people) (www.fundalina.com) uses social media. Social media, which facilitate life in many ways, including information, identity presentation, social interactions, practices and privacy, can create addiction when used more than necessary. Social media addiction is a manifestation of addictive behavioral symptoms and is associated with many psychological factors. With this study, we attempted to reveal the extent of the relationship between social media addiction and the psychological well-being of health workers in central Konya. The data were collected from 400 participants by face to face questionnaire technique. As a result of the research, it was determined that the participants had medium level social media addiction. Social media addiction increases as the period of daily social media usage and the frequency of weekly social media usage increase. Our study indicates that, as the education level and age increase, there is a decrease in the level of social media addiction. In addition, as the age of the participants increased, the risk of social media addiction decreased. In the study, it was also found that psychological well-being significantly predicted the score of social media addiction negatively.

Keywords: Social media addiction, psychological well-being, health worker, survey.

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Sosyal Medya Bağımlılığının Belirleyicisi Olarak Psikolojik İyi Oluş: Sağlık Çalışanları Üzerine Bir İnceleme

Öz: Sosyal medya, günümüzün en önemli iletişim araçlarından biri olarak ön plana çıkmaktadır. Türkiye'deki nüfusun neredeyse yüzde 63'ü (yaklaşık 52 milyon kişi) sosyal medya kullanmaktadır (www.fundalina.com). Bilgilenme, kimlik sunumu, sosyal etkileşimler, uygulamalar ve gizlilik dâhil birçok yönden hayatı kolaylaştıran sosyal medya, gereğinden fazla kullanıldığında bağımlılık oluşturabilmektedir. Sosyal medya bağımlılığı, davranışsal bağımlılık semptomlarında kendini gösteren bir türdür ve birçok psikolojik faktörle ilişkisi bulunmaktadır. İşte bu araştırmayla, Konya merkezdeki sağlık çalışanlarının sosyal medya bağımlılığı ile psikolojik iyi oluş düzeyleri arasındaki ilişki tespit edilmeye çalışılmıştır. Saha araştırması yönteminin kullanıldığı çalışmada veriler, 400 katılımcıdan yüz yüze anket tekniği ile toplanmıştır. Araştırma sonucunda katılımcıların orta düzey sosyal medya bağımlılığına sahip oldukları tespit edilmiştir. Sosyal medyanın günlük kullanım süresi ve haftalık kullanım sıklığı arttıkça, sosyal medya bağımlılığı da artmaktadır. Bunun yanında eğitim seviyesi ve yaş arttıkça, sosyal medya bağımlılık düzeyinde bir düşüş yaşanmaktadır. Ayrıca katılımcıların yaşı arttıkça, sosyal medya bağımlılık riskinin de azaldığı görülmüştür. Yine araştırmada psikolojik iyi oluş düzeyinin, sosyal medya bağımlılık puanını negatif yönde anlamlı biçimde yordadığı ortaya konulmuştur.

Anahtar Kelimeler: Sosyal medya bağımlılığı, psikolojik iyi oluş, sağlık çalışanı, saha araştırması.

Introduction

Developments in information and communication technologies have made the Internet an important part of individuals' daily lives (Ayas & Horzum, 2013). Social media, on the other hand, are one of the most favorite applications of the Internet, which have significantly developed into one of the most important communication tools. The frequency of daily use of social media has increased so much that it is foreseen that in the near future a significant portion of the internet usage will be provided by social media. Social media applications not only provide communication, but also try to meet almost all the needs of people by means of many other applications such as games, information acquisition and

search. Thus, individuals who find almost everything they seek on social media will not need any other tools (Tektaş, 2014: 852).

Social networking sites, which are the most common areas of use of the internet and which are increasingly used by young people, are defined as web-based services that allow individuals to access to them. Social media not only provide people with ideas, achievements, experiences, aspirations, lifestyles, knowledge and convictions in an area where they can share themselves, affect the use of time by people, from entertainment to socialization, consumption and information (Baz, 2018: 278; Balcı et al., 2019: 36). In other words, social media sites are virtual settings where users can create their own public profiles, interact with actual friends, and meet other people with common interests. Social networks are internet-based applications and are not evaluated without regard for the internet. Through social media, users become active content producers rather than passive listeners and thus stay connected and produce content easily for different mobile devices and operating systems. With the increasing use of the internet over the last few years, social media are now seen as a "global consumer phenomenon"(Kuss & Griffiths, 2011: 3528; Şahin, 2018: 169).

Looking at the situations in which social media are used, their frequency and the rates of increase on a global scale and in our country will provide us with important clues about social media addiction. In this context, when we look at the social media statistics prepared by *We Are Social* and *Hootsuit* every year, more than half of the world's population of approximately 7,68 billion, approximately 4,39 billion people, and in our country with a population of 82,4 million, 72% of the population, which is 59,36 million people, uses the Internet. In our country, 52 million people, 63% of the population, make up a large portion of the population actively using social media. According to these figures, it is remarkable that our country ranks at the top of the world in social media usage. According to 2019 data, another important indicator that shows Turkey high in ranking is its 43 million Facebook users and 38 million Instagram users. Social media usage preferences change over the years. In other words, Facebook usage has decreased by eight million compared with last year, while Instagram usage has increased by five million (Demirci, 2019: 16; dijilopedi, 2019). The

data above reveal that the habitual use of social media is growing day by day. Social media facilitate the transformation of users into active content producers, prompting easy connection and helping with the production of content for different mobile devices and media. Therefore, people use social media more than expected. Excessive, problem-triggering and pathological use gives rise to personal, social, vocational and educational problems for users. Unconscious, oncontrolled and excessive use of social media, which make life easier in many respects, reveals a condition defined as social media addiction (Şahin, 2018: 169).

Social media, which are accepted as the most popular communication tool of today, are one of the indispensable elements in our lives, and it strengthens its place in our lives with its integration into different sections. Social media, which were not cared much at first, have now become the focal point of every segment of every age (Tektaş 2014: 253). The excessive use of social media, which have become the focal point of our lives in this way, leads a pathological problem which is defined as social media addiction (Tutgun-Ünal & Deniz, 2015). Social media addiction brings along many psychological problems. Many psychological problems such as depression or social phobia are frequently seen in individuals who are addicted to social media. As a result, social media addiction negatively affects the psychology of individuals and makes it difficult for individuals to adapt to society (Söner & Yılmaz, 2018: 64). Much of the previous research concentrated on the use of a certain social networking site (i.e., Facebook), but social media use now has a great many platforms, and adolescents are far more likely to use such platforms as Snapchat and Instagram than Facebook (Griffiths & Kuss, 2017: 49). Such an increase in the use of social media is likely to present many problems. When the literature on social media addiction is examined, social media addiction is associated with social media applications (Balcı & Gölcü, 2013; Demir & Kumcağız, 2019; Baz, 2018) with self esteem (Uzun et al., 2016; Hawi & Samaha, 2016; Demirli & Aydıner, 2017; Buran Köse & Doğan, 2018), with depression (Balcı and Demir, 2018; Blachnio et al., 2015), with interaction apprehension (Kılınç, 2017) and loneliness (Eroğlu & Bayraktar 2017; Kim et al. 2009).

The increasing use of social media has in a sense made these tools a reality of our lives. The excessive use of social media, which are indispensable for such a life, will bring about a condition defined as addiction. In this context, our aim is to reveal how social media addiction affects the psychological states of individuals, i.e. social media addiction and psychological well-being levels. In summary, the direction and level of the relationship between social media addiction and psychological well-being are examined in the light of empirical findings.

Social Media Addiction

In recent decades, along with the development of information technologies, particularly with the rapid multiplication of Internet-based social media, the manners of interpersonal communication have dramatically changed. The universal social media platforms and the easy access to the Internet have led to social media addiction, namely, the unreasonable and excessive use of social media to the extent that it interferes with other aspects of daily life (Hou et al., 2019: 1-2).

People use addiction to refer to the physical attachment to substances like drugs or alcohol, and uncontrollable wonts or applications are called addictions. In fact, it can be expressed as the inability of an individual to control his or her own impulses in the execution of an action or causing an emotional, mental or physiological response. In other words, addiction is the inability of an individual to gain control over an object or an action and the inability to survive without it. When addiction is mentioned, chemical substances such as alcohol and cigarettes come to mind first. However, there are also types of addiction developed against other objects, individuals and situations (Şahin, 2018: 170; Söner & Yılmaz, 2018: 63; Bakır Ayğar & Uzun, 2018: 508). These are different types of behavior-based addictions such as Internet addiction, gambling addiction, food addiction and computer-game addiction. As a result, in addition to the misuse of chemicals in the known sense of addiction, different phenomena and experiences in any part of life are at risk of becoming addiction. That is, uncontrollable applications or habits can also be defined as addiction. In

this sense, the concept of technological addiction has started to be used in relation to the way people use the technologies that are in a constant process of development. Today, the most widely used type of technological addiction is internet addiction. Social networking addiction, virtual game addiction, virtual gambling addiction, virtual shopping addiction, smartphone addiction, Twitter addiction, Facebook addiction and social media addiction, which is a type of Internet addiction as a type of behavioral addictions, are the most extensively researched topics in the literature in recent years (Söner & Yılmaz 2018: 64; Şahin & Yağcı, 2017: 524-525).

When people find it difficult to control their behavior, they face some psychological problems. One of these psychological problems is addiction and it has been the subject of research in different genres in every age (Tutgun-Ünal & Deniz, 2016: 156). Although addictive use of the Internet has been extensively studied over the years, researchers have recently begun to research the impact of social media and its subclasses (such as Facebook and Twitter) (Hawi & Samaha, 2016: 2).

Nowadays, many social networks have emerged and reshaped people's communication, interaction, cooperation and even learning process. Murray argued that social networks and software created for social networking modify the way people communicate and share knowledge in today's societies. Many people of all ages join social networks for different purposes, and the number of users participating in online social networks is increasing day after day (Murray, 2008: 8; Çam & İşbulan, 2012: 15). With the ease of the use of social media networks and free internet access, it is gaining and increasing its popularity in society day by day. However, people spend more time on social media networks, causing them to face negative situations in their daily lives. Psychologists call these negative situations caused by the extreme utilization of social media networks as social media addiction (Balcı & Baloğlu, 2018: 214).

By definition, social media addiction is "overuse, inability to satisfy the desire to use, negligence of activities due to overuse, damage to social relations by overuse, use as an getaway from negative feelings and stress of life, having problems in reducing and stopping

use; being annoyed, lying about the duration and amount of use " (Savcı & Aysan, 2017: 204).

Social media addiction is defined by Andreassen and Pallesen as "being unduly concerned about social media, being directed by a strong motivation to log on to or use social media, and devoting so much time and effort to social media addiction that it disrupts other social engagements, occupational responsibilities, interpersonal relationships, and/or psychological health and well-being". Generally, those who are addicted to social media spend more time and desire to derive the same amount of pleasure from social networks as originally intended. They resort to social media in order to suppress feelings of guilt, anxiety, restlessness, helplessness, and depression, as well as to move past personal problems (mood modification). If prevented or forbidden from using social media, addicts tend to become stressed, uneasy, tense, or irritable, and feel bad if they cannot occupy themselves with social networking (withdrawal). They ignore the advice of others that they reduce time spent social networking. Social media addicts give a lower precedence to hobbies, work, leisure activities and exercises and disregard their spouses, family members or friends because of clashes. Social media addicts use their social networks so often that their health, sleep quality, relationships and well-being are all adversely affected (Andreassen, 2015: 175-176).

Social media addiction, which forms the basis for behavioral addictions, includes six components. These are (Demirci, 2018: 16):

a) Excessively engaging in and spending time on the use of social media sites,

b) Spending time on social media sites more than originally targeted and requiring an increase in activity time to achieve the same level of enjoyment,

c) Using social media sites to decrease negative emotions and unlearn individual problems,

d) Being nervous and uneasy when not in social media,

e) Failing to attempt to reduce the use of social networks,

f) Problems with interpersonal relations, physical and psychological health due to excessive use of social media.

The findings obtained both from consumer research and from empirical research regarding the usage patterns of social networking sites indicate that on the whole the use of regular social networking sites has increased tremendously over the last few years. Researchers have argued that the excessive use of new technologies, such as online social networks, can be particularly problematic for the young (Griffiths et al., 2014). The widespred use of social media has made itself the central topic of most research. The long-term use of social media by individuals is most likely to affect their psychology adversely.

Social media are known to be used for different reasons. The findings of Aksoy (2018: 864) display a lack of friends, the perception of social media usage as an activity, performing a task, following current events and finally mixing with real life as the reasons for social media addiction. Besides, it is noted that social media addiction has a beginning phase and a continuation phase. It is also reported that individuals who are in the first stage of addiction tend to use social media due to such reasons as lack of friends, lack of socialization and the monotony of life (their use of social media for 6 months or less). The individual who is at the continuation stage of addiction (social media usage duration is over 6 months) uses social media for such reasons as keeping up with the events, feeling of performing the task and maintaining social relations.

Again, socio-demographic use of social media may vary. For instance, Kuss and Griffiths (2011: 3528), in their study of the concept of social media addiction, conclude that female use social networking sites to communicate with their peers, and male use social networking sites for social indemnity, learning and social identification. Social media addiction leads to individual and interpersonal problems. In a study by Demirci (2019: 20), it was found that anxiety and depression symptoms and time dissipated on social media increased as social media addiction increased.

Social Media Addiction and Psychological Well-Being

The science of psychology, which aims to understand human beings, has shown rapid development and transformation in the last century. In the beginning, psychology, which

considered human beings as an organism, began to treat human beings as independent and sensible behaviors. In this transformation, psychopathology-oriented thinking was replaced by positive-thinking. As a result of this thought, positive psychological approach has developed and strengthened its existence today. Positive psychology, which helps individuals connect to life from birth to death and carry life to a more positive point, is a scientific field of study that reveals information and findings about what is positive in life. In other words, it is an area that works to support individuals to adapt to life in the most appropriate way (Eryılmaz, 2013: 1-2).

Since the beginning of the science of psychology, psychopathology such as anxiety, depression, psychosomatic diseases and schizophrenia have been discussed in studies of mental health. However, the human being is not an entity that possesses only psychopathological elements in its nature. People want to be happy and good. The concept of happiness, which is one of the most important philosophies in the history of thought, has been one of the greatest goals that human beings have pursued. Before the 1940s, the World Health Organization defined health as not having any symptoms. In 1947, it revised this definition and defined health as "not only being free from illness, but also having a complete physical, psychological and social well-being". This new definition of health is not only a conceptual change but also a sign of a paradigm change (Göcen, 2013: 98-99; Sarı & Yıldırım, 2017: 14).

Another sign of this radical change was that people became aware of their needs for positive psychology and started to question their understanding of happiness after World War II, which shook the whole world and affected the lives of many people. Together with Sigmund Freud, the science of psychology attempted to understand and define "what makes man unhappy" in addition to "what people are happy with". This obvious orientation of the science of psychology was soon reflected in research subjects in order to help people lead a more productive and satisfying life." Life satisfaction/ quality/ satisfaction, subjective well-being, psychological well-being and happiness" have become the subject matter of more and more research (Göcen, 2013: 98; Seligman & Csikszentmihalyi, 2000: 6). Together with all

these developments, the desire to investigate positive elements as well as negative elements of mental health has become dominant (Telef, 2013: 374).

In the literature of positive psychology, the concept of well-being is generally examined in two dimensions. The first focuses on the concept of subjective well-being, expressed as a hedonic point of view, and is defined as the cognitive-emotional evaluations of the individual's life. The notion of subjective well-being appeared in the late 1950s in searching for useful indicators of quality of life to monitor social modify and develop social policy. The opinions about subjective well-being (happiness), which is accepted as one of the most important research areas of positive psychology, date back to ancient philosophers. According to Aristotle, happiness, the meaning and aim of life, is the whole purpose and consequence of human presence. Subjective well-being is defined as having more life satisfaction and positive emotions and having fewer negative emotions. Life satisfaction in this definition constitutes the cognitive dimension of subjective well-being and includes the individual's assessments of various areas of life (marriage, work, health, success, etc.). The frequency of positive and negative emotions is the affective dimension of subjective well-being. Positive emotions include emotions such as enthusiasm, honor, interest, joy, joy and trust; negative emotions are made up of embarrassment, guilt, hate, anger and hatred. The second is the concept of psychological well-being, which is referred to as the eudomonism perspective, and the ability to manage the difficulties that a person generally faces in his or her life. Research into psychological well-being started in the 1980s based on past theories of clinical and adult developmental psychology, which began with experimental studies, focusing on one's potential for self-realization and meaningful life (Telef, 2013: 374; Keyes et al., 2002: 1007-1008; Sarı & Yıldırım, 2017: 15; Doğan & Eryılmaz, 2013: 108; Doğan, 2013: 56).

While the tradition of subjective well-being expresses well-being in terms of life satisfaction and happiness, that of psychological well-being is largely based on developmental forms of humans and existential difficulties of life. Although both the approaches assess well-being, they address different characteristics of what good means: subjective well-being includes more global assessments of impact and quality of life, whereas psychological well-being perceives improvements in the face of existential challenges of life

(eg. the pursuit of meaningful goals, personal development, and establishing quality bonds with others) (Keyes et al., 2002: 1007-1008).

Ryff (1989), one of the important representatives of the psychological well-being perspective, suggested six dimensions for healthy psychological functioning within the framework of the multi-dimensional psychological well-being model. Each aspect of psychological well-being expresses the different difficulties that individuals face when they strive to work positively (Beydoğan, Tangör & Curun, 2016: 2; Keyes et al., 2002: 1007-1008). These include self-acceptance, positive relationships with others, autonomy, environmental dominance, life purpose and personal development (Ryff, 1989: 1071). Self-acceptance refers to one's acceptance of himself/herself and his/her past life with all its positive and negative features and his/her self-perception. The second dimension is to develop and maintain positive, warm, sincere and trusting relationships with other people and take care of people's peace and happiness (Demirci & Şar, 2017: 2713). The dimension of autonomy is independent, which sets its own standards, resisting social pressures on thinking and acting in certain ways; it also icludes organizing his/her life according to personal standards and making and expressing decisions freely (Ryff, 1995: 101). Another aspect of environmental dominance is the ability of the individual to organize, select, adapt, and evaluate the opportunities around him according to his wishes, values and needs. The purpose of life expresses the belief that the person's life is meaningful and purposeful and the effort to reach his/ her goals (Demirci & Şar, 2017: 2713). In the personal development dimension, the importance of continuous development throughout life and self-realization of the individual come to the fore. In other words, it is very important to make the best use of one's abilities and capacities (personal development) for psychological well-being (Beydoğan Tangör & Curun, 2016: 2; Keyes et al., 2002: 1007-1008).

The increase in the use of the internet as a result of technological developments (especially frequency, purpose and applications of use) causes people to experience different psychological problems, and especially abuse of the internet has significant consequences on people, that is to say, they encounter psychological and social problems (Sezer, 2013: 490). In the research about psychological well-being, it is seen that the samples are mostly high

school and university students and adolescents. For example; In Çardak's (2013) study over the relation between internet addiction and psychological well-being of university students, supposedly, internet addiction basically appeared to predict psychological well-being negatively. Another study on the subject was the research findings of Kumcağız and Gündüz (2016) in revealing the relation between psychological well-being and smart phone addiction of university students; there was a important negative correlation between psychological well-being and smartphone addiction. In other words, while students' psychological well-being scores increase, their smartphone addiction scores decrease. In other words, smartphone addiction tends to decrease if their psychological well-being increases. A study conducted by Uz Baş et al. (2016) to reveal the relationship between problematic internet use and psychological well-being and social support among university students showed that there was a negative and significant relationship between psychological well-being, social support from friend, and perceived total social support, with the excessive use of problematic internet use subscale and negative results subscale of internet. In their research, Söner and Yılmaz (2018) aimed to research the social media addiction and psychological well-being of high school students in terms of diverse variant and to determine the relationship between social media addiction and psychological well-being; there was no substantial difference in psychological well-being between male and female students. It was seen that psychological well-being levels differed according to having smart phone and type of schools (Anatolian High School and Imam Hatip High School). Another finding was that there was a negative correlation between conflict and psychological well-being, one of the sub-dimensions of social media addiction.

The Internet provides tremendous educational advantages for college students as well as providing better opportunities for adults to communicate, learn and interact with the social community; however, excessive internet use can negatively affect the level of psychological well-being. In the study by Sharma and Sharma (2018), it was seen that students with high levels of internet addiction had a higher probability of having lower psychological well-being and significantly correlated with psychological well-being and psychological well-being dimensions of internet addiction. In addition, it was observed that internet addiction was a negative predictor of psychological well-being. Rehman et al. (2016)

found that there was a significant negative relationship between internet addiction and psychological well-being of young people. The study also found that there was an unimportant difference in psychological well-being between male and female teenagers; psychological well-being differed significantly according to residence status.

Here, in the light of the literature review above, this study tries to find answers to the following research questions:

Research Question 1: What are the social media usage patterns of the participants?

Research Question 2: What is the level of social media addiction of the participants?

Research Question 3: Do the participants' social media addiction levels differ according to demographic characteristics and patterns of social media use?

Research Question 4: What is the psychological well-being of the participants?

Research Question 5: What is the relationship between social media addiction and psychological well-being?

Method

This study is based on field research method; three central districts of Konya (Seljuk, Meram and Karatay) have a definitive character in revealing the relationship between social media addiction and psychological well-being of healthcare workers in charge. The data obtained for this purpose are evaluated in the following section.

Study Group

The population of the study consists of health workers using social media in central Konya. Both the business world and health care workers in Turkey increasingly utilize social media to be seen more. With social media, healthcare workers can contact more with the people they serve or plan to provide services to; the appointment traffic becomes more intense and communication becomes more practical. Services and jobs can be displayed more easily, thus creating a positive experience for the masses. Because of these benefits, health

workers and health institutions that want to come to the forefront in the health sector make it their goal to show up in social media (https://www.vayes.com.tr); however, excessive use may increase the risk of addiction. Therefore, based on the example of Konya, the effort to shed light on a social problem such as social media addiction makes our research meaningful.

Purposeful sampling was used to determine the sample; In order to obtain data, face to face questionnaires were applied. 450 questionnaires were distributed to the participants; as a result of the preliminary examination, it was decided that 400 questionnaires could be used. The return rate of the survey is 88 percent.

39.3 percent of the health workers contributing to this research are male (N= 157) and 60.8 percent (N= 243) are female. The distribution of participants by gender is suitable for comparison.

Descriptive statistics of age distribution are as follows; the lowest age was 17, the highest 56-year-old. The mean age of the individuals in the sample was 34 years.

When the educational status of the participants was examined, it was seen that 64 percent was university graduates, 23.5 percent high school graduates, 8 percent post-graduates, 2.8 percent secondary school graduates and 1.8 percent primary school graduates.

In terms of marital status, 67.8 percent of the respondents were married and 32.3 were single.

Data Collection Tools

In this study, which aims to shed light on the nature of the relationship between social media addiction and psychological well-being of health workers, a questionnaire consisting of 37 questions was used to collect data. Information about the scales included in the survey is presented below.

Social Media Addiction Scale-Adult Form (SMBÖ-YF): Şahin and Yağcı (2017) designed the scale to measure the social media addiction of adults (aged 18-60). It consists of 20 items prepared in 5 Likert type (1 = Not suitable for me, 5 = Very suitable for me). The lowest score that can be obtained from the scale is 20 and the lowest score is 100. As the score

increases, there is an increase in the level of social media addiction. Items 5 and 11 of the scale are reverse coded. The scale has two sub-dimensions: Virtual Tolerance (Items 1-11) and Virtual Communication (Items 12-20) (Şahin & Yağcı, 2017). Cronbach's Alpha internal consistency coefficient for the overall scale was 94; the sub-dimensions for virtual tolerance was 92, and virtual communication was found to be 91. In some studies, (Balcı et al., 2019; Baltacı, 2019) that used SMBÖ- YF in Turkey, reliability coefficient was found over 90. In this study, Cronbach's Alpha coefficient for the overall scale was found to be 92.

Psychological Well-Being Scale (PWB): Psychological Well-Being Scale (PWB), developed by Diener et al. (2009), consists of eight items explaining important aspects, from positive relations in human relations to feelings of competence, to having meaning and purpose in life. Each item is answered on a scale from 1, "Strongly Disagree" to 7, "Strongly Agree. All items are expressed in a positive way (Telef et al., 2013: 1301). The scores range from 8 (absolutely disagree with all items) to 56 (absolutely disagree with all items). High scores indicate that participants see themselves in very positive terms in different areas of their functioning. Although the scale does not measure individual psychological well-being, it provides an overview of the positive function between domains that are widely believed to be important (Diener al., 2009, 2010). The authors determined the reliability coefficient of the scale as 86. The scale was adapted to Turkish by Telef (2013). Telef (2013) calculated the internal consistency coefficient of the scale as 80 in the reliability study. In this study, Cronbach's Alpha coefficient stands out as 92.

Personal Information Form: Demographic variables such as age, gender, education and marital status of the participants were questioned in this section; it also includes questions to determine features such as social media usage time, frequency, usage reasons, connection statuses and the most commonly used social media tool.

Data Analysis

The fieldwork was conducted between October 1 and 15, 2019 through face-to-face interviews with the participants. The obtained data were analyzed by using a statistics program on computer. The Skewness and Kurtosis values obtained for the Social Media Addiction and Psychological Well-being scales used in the study ranged from -2.0 to +2.0; it

was understood that the data had a normal distribution (George & Mallery, 2010); therefore, parametric tests were preferred in the analysis of the data. Frequency Analysis was applied to determine the demographic characteristics of healthcare workers. Exploratory Factor Analysis (EFA) was used to determine the sub-dimensions of social media addiction and psychological well-being, and Confirmatory Factor Analysis (CFA) was used to determine structural validity. Independent Sample T-Test was used to determine whether the patterns of social media usage, psychological well-being and social media addiction differ according to gender and marital status; One-way ANOVA was used to determine differences according to educational background. The findings of the predictions of social media addiction by psychological well-being were revealed by Linear Regression Analysis. Correlation Analysis was used to determine the level and direction of the relationship between social media addiction level and psychological well-being.

Findings

Under this heading, first of all, descriptive statistics related to social media usage patterns, psychological well-being and social media addiction are evaluated; then the relationship between social media addiction and psychological well-being is examined.

Social Media Usage Patterns

Under this heading, the daily social media usage time of the participants was questioned. The results of the analysis indicate that health workers use social media for at least 2 minutes and at the most 720 minutes per day. The average daily social media usage time of the participants was 141 minutes; the standard deviation of the distribution is 121,53.

Table 1. Descriptive statistics of social media usage period

	N	Min.	Max.	$\bar{X}$	SD
Daily Social Media Usage Time	400	2 min.	720 min.	141,34	121,53

There was no significant difference between the duration of daily social media use according to the gender of health workers ($t=$ 1,82; p> ,05). Descriptive statistics results were

$\bar{X}$ = 132,46 for female and $\bar{X}$ = 155,08 for male, in terms of daily social media usage time, which indicates that they have values close to each other.

According to education level, daily social media usage period has a significant difference (*F*= 6,11; p< ,001). When Tukey Test results were examined at 5 percent significance level, a differentiation is observed between high school graduates ($\bar{X}$= 183,21) and undergraduates ($\bar{X}$= 128,14) and graduate students ($\bar{X}$= 95,93). Again, among secondary school graduates ($\bar{X}$= 220,00), compared with graduate students, daily social media is used longer. As a result, as the level of education increases, the daily social media usage period decreases.

Marital status was significant in terms of social media usage time (*t*= -5,66; p< ,001). Thus, descriptive statistics results have revealed that singles ($\bar{X}$= 189,37) used social media for longer than married respondents ($\bar{X}$= 118,47).

A similar differentiation occurs according to age. As the age of the participants increased, the duration of social media usage decreased (*r*= -, 321; p< ,01).

65% of the individuals in the study stated that they used social media regularly every day; 11,5 percent 1-2 days a week, 9,8 percent 3-4 days a week and 13,8 percent 5-6 days a week. The results show that the majority of respondents used regular social media every day.

Instagram (36 percent) was the most preferred social media tool among the participants. This is followed by Facebook (24,8 percent) and WhatsApp (23,8 percent). Among the other social media tools they used were Twitter, with 6,5 percent, YouTube with 5 percent, Snapchat with 1,5 percent and some other social media means with 2,5 percent.

It was determined on the results of the research conducted that health workers used social media mostly to follow the agenda (45,3 percent) and to have fun (20,8 percent). Social media are also used by 14,8 percent of the participants just to kill time, by 5,8 percent to chat with acquaintances, by 5 percent to exchange messages, by 3,5 percent to share video file/ photos, by 3,3 percent for relaxation, by 1,8 percent to make new friends and share videos/ photos and by 1,7% to make new friends.

From another perspective, 76 percent of the participants stated that they connected to social media via mobile phone; 2 percent had access to social media through computers and 22 percent had both tools.

Psychological Well-Being Level

Before discussing the psychological well-being of the participants, we present the results of the reliability analysis of the scale in *Table 2*. In the table, the mean and standard deviation (SD) scores of the 8 items in the scale are given. The individuals in the sample showed a higher level of expression in the items of the scale: "I am a good person and I live a good life" ($\bar{X}$= 5,41) and "people respect me" ($\bar{X}$= 5,36). Corrected item-total correlation coefficient has values ranging from 685 to 781. Again, no matter which scale is left out, the reliability coefficients of the remaining substances is over 90.

Table 2. Reliability analysis of psychological well-being scale

SUBSTANCES	Mean±SD	Correlation	Cronbach's α
I live a purposeful and meaningful life	5,10±1,69	,716	,913
I have supporting and satisfying social relations	5,11±1,54	,780	,908
I participate in daily activities and I am interested	4,90±1,56	,685	,915
I actively contribute to the happiness of others	5,04±1,53	,685	,915
I am competent and skilled in the activities that are important to me	5,14±1,54	,754	,910
I am a good person and I live a good life	5,41±1,46	,781	,908
I'm optimistic about my future	5,21±1,65	,750	,910
People respect me	5,36±1,44	,755	,910

In order to determine the psychological well-being of health workers, eight items were collected in the scale and transformed into a single variable. According to the descriptive statistics results, it was noted that the participants had the lowest 8 points and the highest 56 points. The average psychological well-being of health workers was 41,30. In other words, the participants had psychological well-being above the intermediate level.

Table 3. Descriptive statistics of psychological well-being level

	Min.	Max.	$\overline{X}$	Skewness	Kurtosis
Psychological Well-Being	8,00	56,00	41,30	-1,17	1,37

In the study, whether the data related to psychological well-being showed normal distribution was also examined. Skewness (-1,17) and kurtosis (1,37) values between -2 and +2; emphasize that the distribution is normal (George & Mallery 2010). Also, the skewness and kurtosis values of the scores obtained from the psychological well-being scale for male (-,978; 921) and female (-1,322; 1,791) indicate normal distribution.

Explanatory Factor Analysis (EFA) indicates the existence of a single dimension with an eigenvalue greater than 1 (5,19> 1); this dimension is capable of explaining 64,86 percent of the total variance. Factor loads of the items in the scale range from 75 to 84.

On the other hand, psychological well-being levels did not differ significantly according to gender (*t*= -1.05; p> ,05). Descriptive statistics results stress that psychological well-being levels of female ($\overline{X}$= 41,73) and male ($\overline{X}$= 40,64) have similar values.

Psychological well-being levels of health workers differ significantly according to marital status (*t*= 2.51; p< ,05). T-test results indicate that married respondents ($\overline{X}$= 42,16) had a higher psychological well-being score than single respondents ($\overline{X}$= 39,49).

In terms of education, psychological well-being levels differ significantly (*F*= 3,73; p< ,01). The Tukey Test results at 5 percent significance level indicate that differentiation occurs between university ($\overline{X}$= 42,53) and high school ($\overline{X}$= 38,31) graduates.

Social Media Addiction Level

In order to determine the social media addiction levels of the participants, 20 items were collected in the scale and transformed into a single variable. Descriptive statistics results reveal that the participants had the lowest 8 points and the highest 56 points. The average social media addiction of health workers is 48,92. In other words, participants have social media addiction below the middle level (*The answer to the second research question thus emerges*). A similar result was found in the study of Balcı et al. (2019: 54).

Table 4. Descriptive statistics of social media addiction level

	Min.	Max.	$\overline{X}$	Skewness	Kurtosis
Social Media Addiction	20,00	100,00	48,92	,383	-,405

In the research, skewness (,383) and kurtosis (-,405) values between -2 and +2 of the distribution indicate normality. In addition, the skewness and kurtosis values of the scores obtained from the social media addiction scale for male (,430; -,343) and female (,312; -,555) show normal distribution.

In Explanatory Factor Analysis (AFA), the two-dimensional structure (Virtual Tolerance and Virtual Communication) has the potential to explain 50,29 percent of the total variance.

In the Confirmatory Factor Analysis (CFA), compliance index values were CMIN = 3,46; RMSEA = 0,07; RMR = 0,07; GFI = 0,90; NFI = 0,91; RFI = 0,90; CFI = 0,91; AGFI = 0,85 and NFI = 0,91, generally accepted as acceptable (Byrne and Campbell, 1999: 561-562; Bengül, 2019) (*see Table 5*).

Table 5. Compliance indices obtained by confirmatory factor analysis

CONCORDANCE INDICES	Perfect Concordance	Acceptable Concordance	Concordance from DFA indices
CMIN ($\chi 2$ /sd.)	$0 \leq \chi 2/sd \leq 2$	$0\ 2 \leq \chi 2/sd \leq 5$	3,46
GFI	$,95 \leq GFI \leq 1,00$	$,90 \leq GFI \leq ,95$	,90
CFI	$.95 \leq CFI \leq 1,00$	$,90 \leq CFI \leq ,95$	,91
AGFI	$,90 \leq AGFI \leq 1,00$	$,85 \leq AGFI \leq ,90$	,85
NFI	$,95 \leq NFI \leq 1,00$	$,90 \leq NFI \leq ,95$	,91
RMSEA	$,00 \leq RMSEA \leq ,05$	$,05 \leq RMSEA \leq ,08$	,07
SRMR	$,00 \leq SRMR \leq ,05$	$,05 \leq SRMR \leq ,10$	,07

Social media addiction score did not differ significantly by gender (*t*= 1,15; p> ,05). In other words, male ($\overline{X}$= 50,05) and female ($\overline{X}$= 48,20) social media addiction levels are similar.

Social media addiction differs significantly according to marital status (*t*= -6,72; p< ,001). According to the descriptive statistics results, the social media addiction levels of the singles ($\overline{X}$= 56,13) are higher than the married ones ($\overline{X}$= 45,49).

The educational status of health workers also makes a significant difference in terms of social media addiction (F= 4,19; p< ,01). The Tukey Test results at 5 percent significance level indicate that high school graduates ($\bar{X}$= 54,09) have higher levels of addiction than undergraduate ($\bar{X}$= 47,26) students.

As the age of the participants increased, social media addiction levels decreased (r= -,347; p< ,01).

Table 6. Relationship between social media use time and social media addiction (Pearson *r*)

	Social Media Usage Time
Social Media Addiction	,641**

Note: **Correlation is significant at the 0,01 level (2-tailed).

Also, a positive, moderate significant relationship between daily social media usage duration and social media addiction (*r*=, 641; p< ,01) was demonstrated in this study. In other words, as the daily social media usage period increased, so did social media addiction.

Similarly, the social media addiction levels of health workers vary according to the frequency of weekly social media usage (*F*= 13,38; p< ,001). Regular daily ($\bar{X}$= 51,72) social media users have more signs of addiction than those who use social media 1-2 days per week ($\bar{X}$= 39,15) and 3-4 days per week ($\bar{X}$= 40,94). The increase in the frequency of social media usage of the participants causes an increase in the social media addiction.

Reasons for using social media also make a significant difference in terms of social media addiction (*F*= 9,00; p< ,001). When the Tukey Test results at 5 percent significance level are considered, it is seen that social media users who seek entertainment-oriented satisfaction ($\bar{X}$= 56,83) have higher addiction scores than the social media users who follow the agenda ($\bar{X}$= 44,49) and chat with acquaintances ($\bar{X}$= 40,52).

Social media addiction has a significant difference according to the preference of social media tool (*F*= 6,42; p< ,001). Social media addiction level of those who prefer Instagram ($\bar{X}$= 52,31) more in terms of usage is higher than WhatsApp ($\bar{X}$= 42,54) users.

Social media addiction scores differ significantly according to the connection tools to social media (*F*= 4,55; p< ,05). The level of addiction of those with an access to social media

through both computers and smart mobile phones ($\overline{X}$= 53,31) is higher than those connected thtough mobile phones only ($\overline{X}$= 47,70).

The Relationship between Social Media Addiction and Psychological Well-Being

In this part of the research, first of all, health workers' psychological well-being levels in explaining their social media addiction is examined through Linear Regression Analysis; then, the results are presented in *Table 7*.

Table 7. Results of linear regression analysis on prediction of social media addiction level by psychological well-being

	B	(β)	t	Sig.
(Fixed) Social Media Addiction (Index)	48,520		30,17	**,000**
Psychological Well-Being (Index)	-,147	-,230	-4,70	**,000**
R²= ,053; Adjusted R² = ,050		F= 22,15; df= 1; p= ,000		

Regression coefficient was found as -, 147 as a result of adding psychological well-being as an independent variable. Psychological well-being has the power to explain 5 percent of the variance in social media addiction score. When β and t values were examined to see whether social media addiction score predicted psychological well-being, it was seen that psychological well-being (β= -, 230; p< ,001) negatively predicted social media addiction score.

Table 8. The relationship between social media addiction and psychological well-being (Pearson *r*)

	Social Media Addiction
Psychological Well-Being	-,230**

Note: **Correlation is significant at the 0,01 level (2-tailed).

Finally, when the results of the Correlation Analysis were examined to reveal the strength and direction of the relationship between psychological well-being and social media addiction, there was a negatively weak level significant relationship between the two variables (*r*= -, 230; p< ,01). In other words, when there is an increase in the trends of people to lead a purposeful and meaningful life, to support and satisfy social relations, to deal with

daily activities, to enjoy the happiness of others, to be optimistic about the future" and so on, the level of addiction on social media is decreasing.

Discussion and Conclusion

In recent years, especially the development of information technologies and the rapid expansion of Internet-based social media (such as Facebook, Instagram, Twitter or WhatsApp) have greatly transformed interpersonal communication. The ubiquitous social media platforms and easy access to the Internet can lead to the potential for social media addiction, i.e. irrational and excessive use of social media to the extent that it interferes with other aspects of daily life. As such, social media addiction is associated with a range of emotional, relational, health and performance problems (Hou et al., 2019).

In this research, the possible relationship between social media addiction and psychological well-being is examined. In the scope of the research, social media usage habits of health workers were first questioned. Research results revealed that a significant number of respondents (65 percent) were confronted with regular social media every day, using them for an average of just over two hours (141 minutes) per day. Male and female had similar values in terms of daily use; as the level of education increased, the daily social media usage period decreased. A similar situation applies to the age category. As the age of health workers increased, the duration of social media usage decreased. The fact that young people in the community are leading the way in having the knowledge of new communication technology and using them can be effective in the emergence of such a result. Again, singles can stay on social media for longer than the married ones. The most commonly used social media tools of the participants were Instagram, Facebook and WhatsApp. Following the agenda, having fun and spending time are among the main reasons that lead health workers to social media. The majority of the participants (76 percent) prefer to connect to social media via mobile phone.

In the study, it was noted that the participants had psychological well-being levels above the intermediate level. Those who answered the research questions stated that they

were good people and they lived a good life; they believed more than others that they were respected by others, optimistic about their future, competent and capable. Female and male had similar rates of psychological well-being. Married people had higher psychological well-being than single and university educated students.

In the scope of the research, social media addiction of health workers was also examined. Participants showed a social media addiction level below the middle level. Gender made a significant difference in terms of social media addiction. The addiction level of high school graduates was higher than university graduates. As the age of health workers increased, the risk of social media addiction decreased. There was a positive correlation between the frequency of weekly usage and daily usage period and social media addiction. In other words, as the frequency of weekly social media usage and time spent on daily social media increased, addiction also increased. The addiction level of those who used Instagram more in daily life was higher than those who used WhatsApp.

As a result of this study, it was determined that psychological well-being negatively predicted the social media addiction significantly. In other words, among healthcare workers, an increase in the thought of living a purposeful and meaningful life, finding social relationships satisfactory, participating in daily activities and taking care of others, actively contributing to the happiness of others, seeing oneself as competent and resourceful, believing that a good person lives a good life, being optimistic and respectful about the future affect social media addiction negatively.

In conclusion, this study constitutes one of the limited efforts to understand the relationship between social media addiction and psychological well-being among healthcare workers in Konya. In the name of combating social media addiction and developing strategies, it is an important initiative which would encourage more researchers to do research. However, some limitations of this study should be considered. First of all, this research has a cross-sectional design. In order to better understand the relationship between social media addiction and psychological well-being, new studies are needed on different samples in different regions of the country. On the other hand, the scope of this research is limited to the personnel easily accessible in health centers in Konya. This may lead to self-

selection bias and health workers are not capable of representing the general population in the center of Konya. For the enrichment of the literature, future research should also consider such points as loneliness, narcissism, self-esteem, self-presentation, life satisfaction, academic and business performance and the possible relationship between social media addiction, in addition to psychological well-being.

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