Predictive Roles of Psychological Resilience and Coping Skills on Social Media Addiction

Psikolojik Sağlamlık ve Başa Çıkma Becerilerinin Sosyal Medya Bağımlılığını Yordama Düzeyi

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ABSTRACT

Social media addiction is fundamentally evaluated as a behavioral addiction. The studies on this issue stress the relation of long-term social media usage that may transform into addiction with chronic stress, depression, low psychological well-being and decreased life satisfaction. This study aims to examine the relationship between psychological resilience and coping skills of young adults and their levels of social media addiction. Participants of the study consists of total 436 young adults, 296 (68%) of which are female and 140 (32%) of which are male. "Social Media Addiction Scale", "The Brief Resilience Scale" and "COPE Inventory- Brief Form" are applied to the participants. The results indicated that mean scores of social media addiction scales show low levels of social media addiction by the participants. According to multiple regression analysis results, psychological resilience, acceptance, substance use, focusing on and venting of emotions, and turning to religion have significant effect on predicting social media addiction. Psychological resilience is a predictor of social media addiction in negative direction. On the other hand, there is a relationship between emotion-oriented and unfunctional coping strategies and social media addiction.

Keywords: Social media addiction, psychological resilience, coping skills

ÖZ

Sosyal medya bağımlılığı temelde davranışsal bir bağımlılık olarak değerlendirilmektedir. Bu konuda yapılan çalışmalar, bağımlılığa dönüşebilen uzun süreli sosyal medya kullanımının kronik stres, depresyon, düşük psikolojik iyi oluş ve yaşam memnuniyetinde azalma ile ilişkisini vurgulamaktadır. Bu araştırmanın amacı, genç yetişkinlerin sosyal medya bağımlılık düzeylerinin belirlenmesi ve psikolojik sağlamlık ve başa çıkma stillerinin sosyal medya bağımlılığını ne derece yordadığının incelenmesidir. Araştırmanın çalışma grubu 296'sı (%68) kadın ve 140'ı (%32) erkek olmak üzere toplam 436 genç yetişkinden oluşmaktadır. Katılımcılara "Sosyal Medya Bağımlılığı Ölçeği (SMBÖ)", "Kısa Psikolojik Sağlamlık Ölçeği (KPSÖ)" ve "Başa Çıkma Stilleri Ölçeği Kısa Formu (BÇSÖ-KF)" uygulanmıştır. Sosyal medya bağımlılığı ölçeğinin ortalama puanlarına göre katılımcıların sosyal medyaya düşük düzeyde bağımlı oldukları saptanmıştır. Çoklu regresyon analizi sonuçlarına göre, sosyal medya bağımlılığını yordamada sırasıyla psikolojik sağlamlık, kabullenme, madde kullanımı, duygulara odaklanma ve ortaya koyma, dine yönelmenin anlamlı düzeyde yordayıcı etkisinin olduğu saptanmıştır.

Anahtar sözcükler: Sosyal medya bağımlılığı, psikolojik sağlamlık, başa çıkma becerileri

Introduction

Since human is a social being, she needs to establish a relationship by interacting through communication. (Onyeator and Okpara 2019). In recent years, with the development of internet technology, the direction of interpersonal communication has changed and the use of social media (such as Facebook, Instagram, Whatsapp) has become widespread (Ponnusamy et al. 2020). Today many people use social media since it has become an important spare time activity and allows people to online communicate with each other without the limits of time and space (Hussain and Griffiths 2019). However, studies on young adults report the prevalence of "under the risk of becoming social media addict" as 15.2% (Turel and Cavagnaro 2019).

Social media addiction (SMA) is fundamentally evaluated as a behavioral addiction (Griffiths 2005). Andreassen, Torsheim, and Pallesen (2014) define social media addiction as "deterioration of individuals' social activities, interpersonal relationships, works/

professions and/or health and welfare for extremely occupation with social media, being overly motivated for using social media and spending too much energy and time for using social media". SMB (Balcı et al. 2019), which is becoming increasingly common at the global level, is not yet included in the addiction classification in DSM or ICD, but is defined as a psychological disorder by some researchers (Turel and Cavagnaro 2019).

Literature includes many approaches explaining the development of SMA (Turel and Selenko 2012). According to cognitive-behavioral approach, excessive social networking is a result of cognitive dissonance and causes addictive behavior through intensifying with a series of external problems (for instance, social isolation and lack of peer relations). Social skill approach suggests that individuals with poor self-presentation extensively use social networks since they prefer online social interaction to face-to-face communication, which results in addiction. This behavioral pattern initially encourages obsessive use types reinforced with awards. On the other hand, socio-cognitive approach defends that individuals with low autonomy and competence face social media addiction risk as a result of their inclination to social media with the expectation of getting positive results (filling the void of loneliness, etc.) (Balcı et al. 2019).

All these approaches cannot solely explain SMA; however, an eclectic approach can be a better way to explain the potential development of SMA. For instance, the effects of predisposing factors (attachment styles and its psychopathologies, for instance) on SMA can be mediated by motivational factors like psychological needs and pursuit of satisfaction (Blackwell et al. 2017, Chen 2019). Together with the effects of social (social norm and social identity, for instance) and cognitive (attitude and outcome expectation, for instance) factors, satisfying the psychological needs of an individual may cause a strong will to use social media (Ajzen 1991, Sun and Zhang 2021). Social and cultural environment (geopolitical environments with limited socialization, for instance) and perceptions towards technology (design, environment and platform cultures) can also be the causes of SMA (Karahanna et al. 2018, Mahamid and Berte 2019, Tarafdar et al. 2020).

There are scientific evidences suggesting that excessive social media addiction can cause traditional drug-related addiction type symptoms (Andreassen 2015, Kuss and Griffiths 2011). These symptoms include insufficient self-regulation, neglecting personal life, cognitive preoccupation, mood modification, tolerance, withdrawal, conflict, relapse, hiding addictive behaviors and escape (Griffiths 2005). The studies on this issue (Tromholt 2016, Huang 2017, Casale and Fioravanti 2018) stress the relation of long-term social media usage that may transform into addiction with chronical stress, depression, low psychological well-being and decreased life satisfaction.

Psychological resilience of individuals can play a significant role as a protective factor in preventing problematic behaviors. Psychological resilience is an individual trait that helps people overcome difficulties and adjust and develop themselves (Hu et al. 2015). Studies in literature stress that individuals with high psychological resilience have higher possibilities to access social sources developing psychological health, to act and behave appropriately for achieving a healthy life style, to process data and to use present sources (Yang and Wen 2015). Studies on addiction have found that psychological resilience is negatively related with smart phone addiction (Shen 2020), game addiction (Lussier et al. 2007), social media addiction (Bilgin and Tas 2018) and internet addiction (Robertson et al. 2018).

Individuals with high psychological resilience are reported to consult to task-oriented coping strategies in coping with stress (Freire et al. 2016). Lazarus and Folkman (1984) define coping as the reaction of individuals towards stressful situations that include potentially negative results. There are three types of coping strategies that people can commonly consult to decrease psychological tension; which are task-oriented, emotion-oriented and avoidance-oriented coping strategies (Smith et al. 2016). Task-oriented coping strategy focuses on solving problems, making decisions and taking actions. Emotion-oriented coping strategy is based on coping through self-expression of emotions. Avoidance-oriented coping strategy, though, is a coping style which encourages individuals to cognitively disengage from problems through distracting activities (Majumdar and Ray 2010, Smith et al. 2016).

Studies have found that task-oriented coping has higher possibilities to produce positive results (Hsieh et al. 2012). However, emotion-oriented and avoidance-oriented coping strategies are reported to be more frequently inclined in coping with social media addiction (Sriwilai and Charoensukmongkol 2016). Al-Gamal, Alzayyat, and Ahmad (2016) conducted a study on university students and found that young people had task-oriented and avoidance-oriented coping strategies. Students using task-oriented strategy were reported to be less inclined to be addicted to social media, while avoidance-oriented coping strategy encouraged higher social media addiction. In addition, students using emotion-oriented coping strategy were found to have higher possibility to become social media addicts (Al-Gamal et al. 2016).

Young adults who could not yet fully develop problem solving skills always have higher potential for addictive behaviors to cope with stress (Mamamid and Berte 2019). Studies on social media addiction (Ramesh Masthi et al. 2018, Aparicio-Martínez et al. 2020) stress the increase of social media addiction rates among young people day by day. Adolescents and young adults spending more time using social media have been reported to have lower psychological well-being including more stress and psychological problems (Rosen et al. 2014), lower life satisfaction (Booker et al. 2015), less happiness (Twenge and Campbell 2018), higher feelings of loneliness and social isolation (Primack et al. 2017), and more depressive symptoms and more anxiety and depression diagnosis (Twenge and Campbell 2018). Being on social media may be entertaining and soothing (Klobas et al. 2018) but may become a (dissonant) coping mechanism adopted to temporarily avoid from pressures and negative senses of self (burnout regarding school and suicidal ideation) (Masur et al. 2014).

It is thought that the rapid spread of social media addiction, especially among young adults, makes it necessary to carry out studies in this field. It is predicted that it is important to investigate the variables associated with social media addiction, especially in terms of contributing to the development of social media addiction prevention and intervention practices. It is thought that revealing the extent to which the resilience and coping styles of young adults predict social media addiction will contribute to studies in this field. Therefore, the present study aims to determine the social media addiction levels of young adults and examine to what level their coping styles predict their social media addictions. For this purpose, "What is the level of social media addiction of young adults?", "Is there a significant relationship between social media addiction psychological resilience and coping style scores of young adults?" and "Do psychological resilience and coping styles of young adults significantly predict their social media addiction scores?" questions are tried to be answered.

Method

In this study, relational screening model was used to examine the relationship between social media addiction, resilience and coping styles of young adults. Relational screening models are research models that aim to determine the existence and/or degree of change between two or more variables (Karasar 2012).

Sample

In this study, the minimum sample size was calculated with the G*Power 3.1.9.4 program to determine the sample size. Accordingly, the minimum sample number required for 95% statistical power and 0.05 margin of error was calculated as 199. However, considering the evaluations about missing values and extreme values, 534 young adults who actively use at least one social media tool and voluntarily participated in the study were reached.

To determine the study group, convenient sampling method was used in order to be easily accessible and applicable (Creswell 2016). 68% (296) of the participants were female and 32% (140) of them were male. The ages of the study group ranged between 18 and 30; the age average was 22.22.

Measures

Personal information form was used in order to gather personal data of the participants regarding their socio-demographic information and social media usage. In addition, Social Media Addiction Scale (SMAC), The Brief Resilience Scale (BRS) and COPE Inventory- Brief Form (COPE- BF) we used.

Social Media Addiction Scale (SMAC)

Social Media Addiction Scale developed by Tutgun-Ünal and Deniz (2015) in order to measure social media addictions of young adults. The scale is in 5 Likert type, consists of 41 items and has four-factor structure. These sub-factors are Occupation, Mood Regulation, Repetition and Conflict and

the sum of all factors explain 59% of variance. Lowest score of the scale is 41, while the highest is 205. Social media addiction levels were determined by dividing the interval obtained by considering the lowest score and the highest score that can be obtained from the SMDS and subscales. Social media addiction levels according to the scores obtained, for SMBI (Total): Scores between 41-73 indicate no addiction, scores between 74-106 indicate low level addiction, scores between 107-139 indicate medium level addiction, scores between 140-172 indicate high level addiction, scores between 173-205 indicate very high level addiction; for occupation subscale: scores between 12-21 indicate no addiction, scores between 22-31 indicate low level addiction, scores between 32-41 indicate medium level addiction, scores between 42-51 indicate high level addiction, scores between 52-60 indicate very high level addiction; for mood modification and relapse subscales: scores between 5-8 indicate no addiction, scores between 9-12 indicate low level addiction, scores between 13-16 indicate medium level addiction, scores between 17-20 indicate high level addiction, scores between 21-25 indicate very high level addiction; for conflict subscale: scores between 19-33 indicate no addiction, scores between 34-48 indicate low level addiction, scores between 49-63 indicate medium level addiction, scores between 64-78 indicate high level addiction, scores between 79-95 indicate very high level addiction. Cronbach alpha value, which is internal consistency coefficient of the scale, was determined as .967 (Tutgun-Ünal 2015). The present study found validity coefficient of the scale as .964 for the total scale, .927 for occupation, .880 for mood regulation, .895 for repetition and .941 for conflict sub-factors.

The Brief Resilience Scale (BRS)

The Brief Resilience Scale which was developed by Smith et al. (2008) and adapted to Turkish Language by Doğan (2015), in order to measure the psychological resilience of the participants. The scale is in 5 Likert type and consists of 6 items; exploratory factor analysis was conducted to determine the construct validity for 4 different sample groups and a single-factor structure that explained 57% to 67% of total variance was obtained. Internal consistency coefficient of the scale was found between .80 and .91, and test-retest reliability coefficient ranged between .62 and .69. The present study found internal consistency coefficient as .861.

COPE Inventory- Brief Form

COPE Inventory- Brief Form which was developed by Carver (1997) and adapted to Turkish Language by Bacanlı, Sürücü and İlhan (2013), in order to measure the different attitudes individuals, engage in stressful situations. COPE Inventory- Brief Form consists of 14 sub-scales and the raw score that can be taken from each sub-scale ranges between 2 and 8. Internal consistency coefficients of the dimensions of COPE-BF ranged between 0.39 in restraint coping and 0.92 in humor; the measurements for retest reliability conducted after two weeks gave scores between .44 in restraint coping and planning and .90 in turning to religion. The present study found the internal consistency reliability coefficients for the scale as .708 for using

instrumental social support, .904 for humor, .763 for focus on and venting of emotions, .854 for substance use, .659 for acceptance, .886 for turning to religion, .616 for denial, .692 for behavioral disengagement, .697 for positive reinterpretation, and .606 for planning. The internal consistency reliability coefficients of other sub-scales were calculated as .521 for suppression of competing activities, .492 for mental disengagement, .353 for restraint coping and .320 for using emotional social support, which caused them to be excluded from the analyses of the present study.

Procedure

In order to collect the data of this study, application permission was obtained from Trakya University Scientific Research and Ethics Review Board (dated 12.07.2021 and protocol number E.84945) for ethical approval. All stages of the study were complied with the ethical rules of the Declaration of Helsinki. After obtaining the ethics committee permission, data collection tools were transferred to the "Google Forms" platform and the link obtained was shared via social networks. Before the research link was shared, the electronic usability of the scales was tested and the seamless link was shared with the participants. The online form consists of the aim of the study, conditions of participation in the study, informed consent, demographic questions and items of the scales used in the study. The participants were informed with an informed consent text, and the participants who approved it accepted that they participated in the study completely voluntarily and that the information they gave was used for scientific purposes. Participants who approve the informed consent form cannot proceed to the next item without marking the statements in the online form. In this way, lost data was prevented and participants with the same IP address were included in only one evaluation. Data collection was carried out after the participants who approved the informed consent form completed the scales. Participation in the research was voluntary and confidential. Data collection was carried out for two months and it was predicted that it would take an average of 15-20 minutes for all participants to complete the scales through the application system.

Statistical Analysis

The mean scores of the scale were calculated to determine the social media addiction levels of young adults, and correlation test and multiple regression analysis were performed to reveal whether psychological resilience and coping styles predict social media addiction. In order to reveal whether social media addiction is predicted by resilience and coping styles variables, resilience is included in the analysis with its unidimensional structure and coping styles variable with its multidimensional structure. Resilience and coping styles variables were included in the regression model at the same time as they have similar importance and temporal sequencing in terms of predicting social media addiction.

The data obtained online in the research was first exported and then transferred to the IBM SPSS 21 program. Data acquisition tools were applied to total 534 people. Before data analysis, scales were checked and no erroneous or unfilled answers were found. Then, in one-way extreme value analysis, the answers of 54 people whose z value were out of ±3.29 were excluded from data set. In multiway extreme value analysis, Mahalanobis distance value was used, which excluded another 44 participants from analyses. Multicollinearity hypothesis were calculated through examining variance inflation factors (VIF) and no tolerance value close to zero or below 10 were not detected.

The presence of autocorrelation between observed values were examined via Durbin-Watson values and they were found to be between reference values (1.95). As a result, 436 individuals were included in the analyses, which met the necessary assumptions for the analyses. Frequency distribution, percentage and multiple regression analyses were used in the analyses of data. Skewness (between .987 and -.120) and kurtosis (between .364 and -1.033) values were examined before regression analyses and since all values were between +1.5 and -1.5 (Tabachnick and Fidell 2013), no variable was needed to be transformed.

Results

Table 1 presents the descriptive statistical values (mean, standard deviation, standard error, minimum and maximum levels) regarding social media addiction levels of young adults.

Examining the mean scores of the sub-dimensions of social media addiction scale in Table 1 in terms of addiction intervals, the participants were observed to be addicted at medium level according to occupation ($\overline{x}$ =33.18) and mood regulation ($\overline{x}$ =12.52) sub-dimensions and at low level according to repetition ($\overline{x}$ =9.89) sub-dimension; they were found unaddicted according to conflict ($\overline{x}$ =32.52) sub-dimension, however they are observed to be social media addict at low level according to social media addiction scale ($\overline{x}$ =88.11).

In addition, the present study conducted correlation analysis in order to observe the relationship between dependent and independent variables. Table 2 presents the correlation values between variables.

Table 2 shows that there is a negative and significant relationship between social media addiction scores and psychological resilience (r= -.368, p<.001), acceptance (r= -.165, p<.001), positive reinterpretation (r= -.201, p<.001) and planning (r= -.228, p<.001) scores, while there is a positive and significant relationship between focus on and venting of emotions (r = .265, p<.001), substance use (r = .192, p<.001), turning to religion (r= .138, p<.01) and behavioral disengagement (r= .253, p<.001).

The results of multiple regression analysis in Table 3 conducted for social media addiction scores show that psychological resilience, using instrumental social support, humor, focus on and venting of emotions, substance use, acceptance, turning to religion, denial, behavioral disengagement, positive reinterpretation and planning variables predict social media addiction scores at statistically significant level (F= 12.07, p <.001). The abovementioned variables are observed to explain 24% of total variance in social media addiction level scores.

Examining standardized beta coefficients and given the directions of inter-variable relations, psychological resilience (β= -.244, p <.001) and acceptance (β= -.112, p <.05), respectively, have significant predictive effect on social media addiction at negative direction, while substance use (β=.192, p <.001), focus on and venting of emotions (β=.161, p <.001) and turning to religion (β=.147, p <.001), respectively, at positive direction.

However, using instrumental social support, humor, denial, behavioral disengagement, positive reinterpretation and planning were observed to have no significant effect on social media addiction scores.

Table 1. Descriptive statistics on the social media addiction levels of the participants

Variables (N=436)	Sub-Scale/Scale		sd	SeX	Min.	Max.
Social Media Addiction	Occupation	33.18	10.05	.48145	12.00	60.00
	Mood Regulation	12.52	4.70	.22532	5.00	25.00
	Repetition	9.89	4.49	.21498	5.00	25.00
	Conflict	32.52	12.65	.60564	19.00	76.00

Table 2. The correlation values between the sub-scales of social media addiction, psychological resilience and coping skills

Variab.	1	2	3	4	5	6	7	8	9	10	11	12
1. SMAC												
2. PSR	-.368***											
3. UISS	-.015	.007										
4. HUM	.021	.085	.043									
5. FVE	.265***	-.352***	.263***	-.038								
6. SU	.192***	-.049	-.037	.225***	-.016							
7. ACC	-.165***	.111**	.168***	.135**	.015	-.023						
8. TR	.138**	-.094*	.007	-.157***	.115**	-.261***	.000					
9. DEN	.066	.051	-.163***	.165***	-.203***	.214***	-.109**	.081*				
10. BD	.253***	-.410***	-.115**	.041	.183***	.157***	-.058	.058	.240***			
11. PR	-.201***	.390***	.233***	.072	-.138**	-.204***	.257***	.107*	.041	-.301***		
12. PL	-.228***	.295***	.388***	.150***	-.049	-.110**	.358***	.009	-.071	-.332***	.563***	

*p<.05, **p<.01, ***p<.001; PSR: Psychological Resilience, UISS: Using Instrumental Social Support, HUM: Humor, FVE: Focus on and Venting of Emotions, SU: Substance Use, ACC: Acceptance, TR: Turning to Religion, DEN: Denial, BD: Behavioral Disengagement, PR: Positive Reinterpretation, PL: Planning

Table 3. Multiple regression analysis results regarding predicting social media addiction levels

Predicting Variables	B	SE$_B$	β	t	R	R²	F
Constant	88.917	12.795		6.949***			
PSR	-1.366	.289	-.244	-4.720***			
UISS	.128	.943	.007	.136			
HUM	.762	.690	.050	1.105			
FVE	2.850	.859	.161	3.316***			
SU	4.674	1.149	.192	4.067***	.49	.24	12.07
ACC	-2.266	.933	-.112	-2.429*			
TR	2.162	.673	.147	3.213***			
DEN	.367	.945	.019	.389			
BD	.972	1.005	.049	.968			
PR	.709	1.155	.034	.614			
PL	-2.247	1.300	-.100	-1.729			

*p<.05, *** p <.001. ; PSR: Psychological Resilience, UISS: Using Instrumental Social Support, HUM: Humor, FVE: Focus on and Venting of Emotions, SU: Substance Use, ACC: Acceptance, TR: Turning to Religion, DEN: Denial, BD: Behavioral Disengagement, PR: Positive Reinterpretation, PL: Planning.

Discussion

The present study examined the relationship between social media addiction levels of young adults, and their psychological resilience and coping skill. According to the findings, social media addiction levels increase as the coping styles of young adults focus on and venting of emotions, substance use, turning to religion, and behavioral disengagement increase. Social media addiction levels decrease as acceptance, positive reinterpretation and planning coping styles increase. In addition, as the social media addiction levels of young adults increase, their psychological resilience decreases. According to Mahamid and Berte (2019), young people are more inclined to social media addiction since they are developmentally insufficient in task-oriented coping. Due to the increase in social media usage, youths are vulnerable to addiction risk.

According to the findings of this study, it is seen that young adults are low dependent on social media, but there are differences in addiction level in sub-dimensions (occupation and mood regulation medium, repetition low, conflict not dependent). Similarly, the studies conducted on university students by Aktan (2018) and Özdemir (2019) found medium levels of social media addiction in occupation and mood regulation sub-dimensions. In addition, low levels of addiction in repetition sub-dimension are consistent with the findings of Özdemir (2019). Tutgun and Deniz (2019) conducted a study on nursing students and obtained similar findings that they had medium levels of addiction in occupation and mood regulation sub-dimensions, low levels of addiction in repetition sub-dimension and no addiction in conflict sub-dimension. According to the findings, the absence of conflict emotion in social media environments can be evaluated as a positive situation. Psychological resilience, though, is a protective factor towards decreasing addiction possibility (Robertson et al. 2018). Therefore, examining the variables predicting social media addiction in the present study is critical for future protective and preventive mental health studies.

Further results of the present study demonstrate that psychological resilience and acceptance, respectively, have negatively and substance use, focus on and venting of emotions and turning to religion have positively significant effect on predicting social media addiction. That psychological resilience negatively predicts social media addiction is an expected finding. This finding of the present study is consisted with the ones of Bilgin and Tas (2018) and Çardak (2013). The studies examining the relationship between digital addictions and psychological resilience (Lussier et al. 2007, Johnson et al. 2011, Shen 2020) report that more resilient individuals with high risks have lower levels of possibilities to be the victims of addiction. Robertson et al. (2018) found in their study that psychological resilience as a powerful predictor was also related with coping skills with stress in digital addictions. Individuals with weaker psychological resilience have higher possibility to encounter stressful life events and to use unfunctional coping strategies as response

(Aldwin and Revenson 1987). Increasing psychological resilience that provides necessary skills to respond effectively to stressful situations and protect mental health may prevent social media addiction.

Acceptance from coping skills is expected to negatively predict social media addiction level. Acceptance can be defined as accepting the encountered stressful situation and is theoretically under emotion-oriented coping strategies dimension (Bacanlı et al. 2013). Thus, Hazar (2011) stated that individuals tended to abstain from uneasiness rather than accepting it, which reinforced addictive element. Emotion-oriented strategies aims to decrease distress feeling and manage stress (Lazarus and Folkman 1984). Similarly, past studies are consistent with the finding that emotion-oriented strategies positively predict social media addiction (Sriwilai and Charoensukmongkol 2016). As a mood regulation strategy at the same time, acceptance expresses the reality of a negative situation and recognizing it to adapt, and helps individuals establish secondary control (Vishkin et al. 2019). Being aware of and accepting the problem which are the first steps of addiction treatments are significant steps in struggling but alone not enough for behavioral changes (Ögel 2010).

Substance use and focus on and venting of emotions from the coping skills are expected to positively predict social media addiction level. Substance use can be explained as using alcohol, sedative or drugs in stressful situations. Focus on and venting of emotions are defined as self-expression of the emotions of individuals who are exposed to stressful situations. Both coping skills are theoretically in unfunctional coping dimension (Bacanlı et al. 2013). A study of Facebook users found that strategies to focus on emotions and avoid stressful situations were predictors of heavy use of Facebook (Błachnio et al. 2017). Similarly, the results of the studies on behavioral addictions show that individuals use passive coping skills including behavioral disengagement, mental disengagement, focus on and venting of emotions, denial and substance use (Acar et al. 2019, Hassanbeigi et al. 2013, Koçhan and İlhan 2015). The evidences on the relationship between social media addiction and substance use indicate the comorbidity of substance and behavioral addictions. For instance, individuals meeting the criteria of Internet addiction has higher risks of developing substance addiction (Grant et al. 2010, Petry 2002). The relationship between peer pressure and drugs and between alcohol and smoking addiction were found compatible with internet addiction (Esen and Gündoğdu 2010). The finding of the present study regarding this issue shows the importance of thorough examination of the relationship between social media addiction and other substance (alcohol, cigarettes, drug, etc.) use.

Religion and spirituality are known to be used as the sources for coping with generally negative emotions (Giordano et al. 2008). Of coping skills, turning to religion is not expected to positively predict social media addiction level. Studies examining the relationship between social media addiction and turning to religion coping skill report a positive relationship between

negative religious coping and social media/internet addiction (Jafri 2015, Hasan and Jaber 2019, Korkmaz 2021). In the scale used in the present study, "turning to religion" from emotion-oriented coping skills is defined as individuals' seeking to find peace in their religious beliefs (Bacanlı et al. 2013). However, scale items do not explicitly express how this effort is, in other words what positive/negative religious coping skills are. Future studies can focus on religious coping skills in the relationship between social media addiction and coping skills. Studies demonstrate the presence of a relationship between coping with stress and all dimensions of religious coping (Karakaş and Koç 2014). Religious coping skills as praying, getting occupied with religion, interpreting favorably, accounting everything with divine reasons, consenting to the will of God, seeking refuge in God, leaving the rest to God, etc. are reported to be effective in accepting and solving events in stressful and uneasy situations (Kavas 2013, Karakaş and Koç 2014, Vishkin et al. 2014, Aydın 2016). In Turkey, both social media usage and religiousness rates are high (Korkmaz 2021). Given the fact that the participants of the present study are addicted to social media at low levels, "turning to religion" from emotion-oriented coping strategies can be said to not be solely sufficient in focusing on solving problem.

The research found that using instrumental social support and planning from task-oriented coping strategies, humor and positive reinterpretation from emotion-oriented coping strategies and behavioral disengagement and denial from non-functional coping strategies had no significantly predictive effect on social media addiction, which may have resulted from low levels of social media addiction of participants, low levels of repetition and absence of conflict in sub-dimensions. Similarly, the studies of Angane et al. (2020) found that students with internet addiction use emotion-focused coping styles rather than problem-focused coping styles. Güldal et al. (2022) revealed that there is no relationship between social media addiction and humor, and that humor increases psychological flexibility. Ignoring, not caring, and denying dysfunctional coping styles require excessive mental effort (Lin et al 2020). In this study, due to the low social media addiction of the participants, they may not have applied behaviorally to the disengagement and denial coping style. In their study examining the coping skills of male patients receiving treatment in internet addiction clinics in Turkey, Senormanci et al. (2014) found significantly high unfunctional attitudes of addicted individuals as "behavioral and mental disengagement", "humor", "denial", and "alcohol-drug". Future studies are advised to examine the predictive effects of these variables on different sample groups with more extensive social media usage and higher addiction levels.

In summary, the present study determines that psychological resilience is important in decreasing social media addiction, and emotion-oriented and unfunctional coping strategies from stress coping skills affect social media addiction. The findings of many studies examining the relationship between social media

addiction and coping skills report that people prefer emotion and avoidance-oriented coping strategies due to having low levels of motivation for being task-oriented (Al-Gamal et al. 2016, Sriwilai and Charoensukmongkol 2016, Andreassen et al. 2017, Demircioğlu and Köse 2018,). Both coping strategies are beneficial for distraction however is regarded as a unfunctional coping skill in long term (Sriwilai and Charoensukmongkol 2016). Even though emotion-oriented coping strategy helps to lower stress through mood regulation, it leads people to ignore their problems, which in return cause social media addiction (Sriwilai and Charoensukmongkol 2016). Young people using emotion-oriented coping strategy were found to be more likely to become social media addicts (Al-Gamal et al. 2016). Avoidance-oriented coping strategy may promote social media addiction since it encourages avoiding abandonment and problems (Al-Gamal et al. 2016). Therefore, reinforcing psychological resilience and developing task-oriented coping strategies can play a significant role in preventing and intervening in social media addiction. It can be recommended to organize awareness-based activities, group work and seminars for young adults to increase psychological resilience, develop coping styles and prevent social media addiction.

Conclusion

This research has some limitations that should be considered, the first one of which is that the method of the study is relational and does not present causality. Conducting future studies that demonstrate cause and effect relationship between the variables affecting social media addiction is significant in providing protective and preventive mental health services. Another limitation is that most of the sample group consisted of females and did not included individuals with different race/ethnical origins and beliefs. Future studies can significantly contribute to literature by creating appropriate sample group and comparing their results. Finally, this study depends on self-report data, therefore results may have been affected from response bias.

Despite all limitations, this study presents data about the predictors of social media addiction in young adults aged between 18- 30 years. Psychological resilience is a predictor of social media addiction in negative direction. Psychological counselling and guidance services are advised to be given to young adults to reinforce their psychological resilience. On the other hand, there is a relationship between emotion-oriented and unfunctional coping strategies and social media addiction. Both strategies yield result in short term; however, decreasing or preventing social media addiction in long term seem to be impossible without task-oriented coping strategies. Therefore, young people should be supported to develop their problem-solving skills when facing stressful situations or events in psychological counselling and guidance services, which can also contribute to reinforcing their psychological resilience.

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