ÜNİVERSİTE ÖĞRENCİLERİNDE SOSYAL MEDYA BAĞIMLILIĞININ SOSYAL DIŞLANMA İLE İLİŞKİSİ

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ÖZET

Araştırmada üniversite öğrencilerinin sosyal medya bağımlılıklarının sosyal dışlanmaları ile ilişkisinin incelenmesi amaçlanmıştır. Tanımlayıcı ve kesitsel türdeki araştırmaya sosyal medya platformları üzerinden ulaşılan 466 üniversite öğrencisi dahil edilmiştir. Araştırma verileri; Tanıtıcı Bilgi Formu, Sosyal Medya Bağımlılığı Ölçeği-Öğrenci Formu, Ergenler için Sosyal Dışlanma Ostracism Ölçeği'nin yer aldığı Google Form kullanılarak hazırlanan bir anket formu aracılığıyla toplanmıştır. Araştırma sonucunda elde edilen verilerin analizleri SPSS programı kullanılarak analiz edilmiştir. Araştırmaya katılan öğrencilerin Sosyal Medya Bağımlılığı Ölçeği-Öğrenci Formu toplam puan ortalaması 70,75±18,47, Ergenler için Ostrasizm (Sosyal dışlanma) Ölçeğinin toplam puan ortalaması ise 20,36±5,97 olarak tespit edilmiştir. Öğrencilerin %45,9'unun sosyal medya bağımlılığı ölçeği toplam puanı ölçek ortalamasının üzerindedir ve %60,3'ünün sosyal dışlanma ölçeği toplam puanı ölçek ortalamasının üzerindedir. Sosyal dışlanmanın sosyal medya bağımlılığının bir yordayıcısı olduğu tespit edilmiştir. Üniversitelerde öğrencilerin, sosyal medya bağımlılıklarının önlenmesinde sosyal aktiviteler yapabilecekleri ortamların oluşturulması ve psikososyal sağlık hizmetleri sunulurken sosyal dışlanma durumunun da göz önüne alınması yararlı olabilir.

Anahtar Kelimeler: Bağımlılık, sosyal medya, sosyal dışlanma, öğrenci.

THE RELATIONSHIP BETWEEN SOCIAL MEDIA ADDICTION AND SOCIAL EXCLUSION AMONG UNIVERSITY STUDENTS

ABSTRACT

The aim of this study is to examine the relationship between social media addiction and social exclusion among university students. A descriptive and cross-sectional study included 466 university students, reached through social media platforms. Research data were collected through a questionnaire consisting of an introductory information form, the Social Media Addiction Scale-Student Form, and the Ostracism Scale for Adolescents, all prepared using Google Forms. The data obtained from the research were analyzed using the SPSS program. The mean total score on the Social Media Addiction Scale-Student Form for the participating students was 70.75±18.47, while the mean total score on the Ostracism (social exclusion) Scale for Adolescents was 20.36±5.97. It was determined that 45.9% of the students scored above the scale average on the social media addiction scale, and 60.3% scored above the scale average on the social exclusion scale. It was found that social exclusion is a predictor of social media addiction. In preventing social media addiction among university students, creating healthy environments where students can engage in social activities and considering the situation of social exclusion in the provision of psychosocial health services may be beneficial.

Keywords: Addiction, social media, social exclusion, student.

1.INTRODUCTION

Today's youth were born in the internet age and have become ubiquitous users of technology and online communication tools in daily life (Xiao, Peng, & Liao, 2022:13496). In the last few years, social networking platforms, which are also used as communication tools, have become a global phenomenon with the increasing number of users (Bakry et all., 2022:50). With the development of digital technology, the internet and social

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networks have made life easier for people in many ways and individuals have started to use social media platforms (e.g., Facebook, Twitter, Instagram, Snapchat) to access news, information, entertainment, send photos, express their ideas, and maintain friends and family ties (Whiting & Williams, 2013:362). The use of the internet and social media has increased in recent years due to the fact that social relationships that cannot be easily established face-to-face in daily life can be established over the internet, these relationships are much less risky, individuals can express their feelings and thoughts freely, and they can exaggerate themselves in the way they want to present themselves (Baş & Diktaş, 2020:193).

The Digital 2023: Global Overview Report points out this increase, which reports that 5.16 billion people in the world are internet users and 64.4 per cent of the world's population use online communication tools. Working-age internet users are reported to spend an average of 6 hours and 37 minutes per day online. It has also been shown that 4.76 billion people worldwide, which corresponds to approximately 60 per cent of the total global population, use social media and 137 million new users in 2023 (Simon, 2023).

In parallel with the developments in the World, our country uses the internet and social media at almost the same pace. According to the data of the Turkish Statistical Institute (TSI) for the year 2022, it was reported that internet usage among individuals in the 16-74 age group was 85% and 94.1% of households had access to the internet from home. It was determined that the most used social media and messaging applications by individuals were WhatsApp with 82.0%, YouTube with 67.2% and Instagram with 57.6% (TSI, 2022).

Innovations and developments in technology in the world and in our country have fundamentally changed the interaction and communication patterns of adolescents and young adults, made a great change in their life and daily routines, and provided important opportunities for them to make new friends and develop relationships with them. However, it has started to raise concerns due to the fact that every person can easily access the internet and there is no limitation on its use. Among these concerns are the psychological consequences of social media use, and positive and negative findings regarding these psychological consequences are also reported (Aktan, 2018a:35; Aktan, 2018b:405). It has been shown that online socializing under certain conditions can be beneficial and help to increase self-esteem and sense of belonging, which may indirectly have a positive effect on psychological well-being (Clark, Algoe, & Green, 2018:32; Best, Manktelow, & Taylor, 2014:27). Research findings have also provided evidence that certain types of media can produce positive or pro-social attitudes among young people and promote positive qualities such as cooperation and problem-solving skills (Adachi & Willoughby, 2013:155).

Some of the studies have focused on examining the negative effects of internet use and excessive use of social media on mental health (Odgers & Jensen, 2020:336; Keles, McCrae, & Grealish, 2020:79). Empirical evidence has revealed that social media use causes or significantly worsens a variety of illnesses and problems, including exposure to danger, social isolation (Best, Manktelow, & Taylor, 2014:27), depression (Yoon, Kleinman, Mertz, & Brannick, 2019:65; Raudsepp, 2019:197), cyberbullying (Best, Manktelow, & Taylor, 2014:27), sleep disturbance, increased obesity rates, social skills deficits, decreased sexual activity, and increased adolescent mental health problems (Orben, 2020:407). It has also shown that adolescents with pre-existing mental health problems use social media to relieve themselves of stressful symptoms through online connections (Boer, Stevens, Finkenauer, de Looze, & van den Eijnden, 2021:106645). There is also evidence that various online activities, including social media use, develop social alienation, loneliness (Bakry et all., 2022:50) and a high potential for addiction (Nations, 2020) in adolescents and young adults (Andreassen, Pallesen, & Griffiths, 2017:287). Casale and Fioravanti (2018) reported that individuals use social media more to meet the need to

belong, reduce the feeling of loneliness and minimize the feeling of exclusion or rejection, and that excessive use leads to addiction (Casale &Fioravanti, 2018:312).

Social ostracism refers to the concepts of social disability or social dislocation and the deterioration of the relationship between the individual and society. Akın et al. (2016) defines social exclusion as being ignored and ignored by others; or being excluded, ridiculed, rejected, ignored in social situations by a group (Akın, Uysal, & Akın, 2016:895). Studies have shown that social ostracism (exclusion) in individuals may cause many maladaptive behaviors and psychological problems (Bakry et all., 2022:50; Öztosun, 2018; Kaşıkçı, Denli, & Karaman Güney, 2021:147). These problems can be seen as loneliness, inadequacy, depression, aggression, addiction and weakness in emotion regulation (Akın, Uysal, & Akın, 2016:895). Individuals experiencing such problems are at risk of using social media more and becoming addicted because they do not share the same space with other people (Aktan, 2018a:35). In the light of all this information, this study aimed to examine the relationship between social media addiction and social exclusion levels of university students.

2. METHOD

Type of research: The research is descriptive and cross-sectional. Research data were collected between 05.01.2023 and 05.04.2023.

Population and sample of the study: The sample of the study consisted of students continuing their university education in Türkiye. The sample of the study consisted of 466 students who were reached by appropriate sampling method from the population. To determine the sample size, G*Power (version 3.1.9.2., Düsseldorf, Germany) software was used. A prior power analyze was performed based on a Bivariate normal model test (alpha significance e=0.01 (two tailed), power=95%, and correlation=0.20). Based on a power analyze, the minimum number of participants to be included in the study sample was calculated as 436. To increase the representation power of the population, the sample consisted of 466 university students who met the inclusion criteria and agreed to participate in the present study. The inclusion criteria were being a student at a university in Turkey, being over the age of 18, having no problem in reading and understanding Turkish, agreeing to participate in the study voluntarily, and using any of the social media accounts. Those who did not meet the inclusion criteria were not included in the study.

Research Implementation: The research data were collected by distributing an online questionnaire form prepared using google form through social media platforms (e.g. Linkedin, Facebook, Twitter, Instagram, WhatsApp). Participants were reached through social media platforms (e.g., WhatsApp, Instagram and Twitter) through posts made as 'message', 'story' and 'new post'. The subject, purpose and inclusion criteria of the research were explained in the posts. In the study, it was obligatory to fill in each question in the questionnaire, and the participants were allowed to go back and make changes in their answers. In the first part of the form, the informed consent form and the consent question were included. Students answered the questionnaire after confirming that they voluntarily agreed to participate in the study. It was ensured that a student could respond more than once by adjusting the response submission once. For the preliminary evaluation of the data collection form, the link of the form was sent to 5 students and it was confirmed that there were no technical problems such as both the comprehensibility of the form and the opening, marking and sending of the form. The data of the students who made the preliminary evaluation were not included in the sample of the study.

Data collection tool: In the study, an introductory information form consisting of a total of 14 questions, eight questions to determine the socio-demographic characteristics of the students and six questions to define their social media use, and the Social Media Addiction Scale-Student Form and The Ostracism Experience Scale for Adolescents were used.

Social Media Addiction Scale-Student Form (SMAS-SF): It is developed by Şahin (2018) to determine the social media addiction levels of secondary for high school and university students. Within the framework of the validity studies, exploratory and confirmatory analyses were carried out and it was determined that the SMAS-SF has a five-point Likert-type structure consisting of 4 sub-dimensions (virtual tolerance, virtual communication, virtual problem and virtual information) and 29 items (Şahin, 2018:169). The KMO coefficient of the scale was found to be .96 and Barlet's significance value χ^2=12680.88 (p=.00). The internal consistency coefficient (Cronbach Alpha coefficient) for the whole scale was found to be .93, and the internal consistency coefficients for the sub-factors were found to be between .81 and .86. In addition, the test-retest coefficient of the scale was found to be .94. The highest score that can be obtained from the scale is 145 and the lowest score is 29. A high score indicates that the individual perceives himself/herself as a 'social media addict'. In this study, the Cronbach Alpha coefficient of the scale was found to be .93.

The Ostracism Experience Scale for Adolescents (OES-A): It is a self-report scale developed by Gilman et al. (2013) to measure adolescents' perceptions of social ostracism (Gilman, Carter-Sowell, DeWall, Adams, & Carboni, 2013:319). The scale was adapted into Turkish by Akın et al. (2016) and validity and reliability studies were conducted (Akın, Uysal, & Akın, 2016:895). The scale consists of 11 items and two sub-dimensions. Items 1-5 were used to predict the dimension of being ignored and items 6-11 were used to predict the dimension of being excluded. A high score obtained from the scale indicates that individuals have a high level of social exclusion perception. The Cronbach's Alpha internal consistency reliability coefficients of the scale were found to be .93 for the sub-dimension of being ignored, .90 for the sub-dimension of exclusion, and .89 for the whole scale. In this study, the Cronbach Alpha coefficient of the scale was found to be .873.

Statistical analysis

The data obtained as a result of the research were analysed using SPSS 23 (Statistic Package for Social Science) software. Number, percentage distribution, mean and standard deviation analyses were used among descriptive statistical analyses. Normality of distribution of the scale scores was assessed using skewness and kurtosis values, with values between -1.5 and + 1.5 being regarded as normal (Tabachnick & Fidell, 2013). Univariate analyses were applied (Student's t test and one-way analysis of variance [ANOVA] for parametric tests. Linear regression analysis were employed to identify associations between variables. Statistical significance level was accepted as p<0.05.

Ethical issues

Ethics committee approval was obtained from Batman University Ethics Committee for the study (Number: 2023/01-17; Date: 04.01.2023). The informed consent form and information about the purpose of the study were presented on the first page of the online questionnaire. After the participants read the information on the first page, they ticked the option that they declared that they voluntarily participated in the study.

3.RESULTS
Results related to sociodemographic characteristics

A total of 32 students stated that they had a psychiatric illness, including one anorexia (3.1%), three attention deficit and hyperactivity disorder (9.4%), 18 anxiety disorder (56.3%), one bipolar disorder (3.1%), four depression (12.5%), and five obsessive-compulsive disorder (15.6%). Of the students who stated that they felt addicted (n=225), 45 (19.6%) were addicted to cigarettes/tobacco, two were addicted to alcohol (0.9%), one was addicted to gambling (0.4%), 147 were addicted to technology (63.9%), and six stated their addiction as other (15.2%).

Table 1. Total and Sub-dimensional Mean Scores of the SMAS-SF and OES-A Scales

	n	Minimum	Maximum	Mean±SD
Virtual tolerance	466	5.00	25.00	13.40±4.45
Virtual communication	466	9.00	39.00	20.36±5.97
Virtual problem	466	9.00	40.00	19.28±6.61
Virtual information	466	6.00	30.00	17.69±4.78
SMAS-SF	466	29.00	126.00	70.75±18.47
Ignored	466	5.00	22.00	8.09±3.43
Excluded	466	6.00	30.00	17.01±4.71
OES-A	466	11.00	46.00	25.11±6.77

SMAS-SF: Social Media Addiction Scale-Student Form
OES-A: The Ostracism Experience Scale for Adolescents

The findings comparing some sociodemographic characteristics with the total and sub-dimensions of the SMAS-SF, OES-A are presented in Table 1. While women's virtual tolerance and virtual information scores were higher than men's, no difference was found between virtual communication, virtual problem and total scores of SMAS-SF. There was no difference between women and men in the total and sub-dimension scores of the OES-A (Table 2).

While the virtual information sub-dimension score of the SMAS-SF of students with low income was significantly lower than those with medium income, it was found that the total and other sub-dimension scores of the SMAS-SF and the total and sub-dimensions of the OES-A did not differ according to income status (Table 2).

No significant difference was found between the age of the students, the class in which the students were studying, the cohabitation status of the parents, and the presence of a diagnosis of a psychiatric illness and the total and sub-dimensions of the SMAS-SF and the total and sub-dimensions of the OES-A (Table 2).

Table 2. Comparison of Some Socio-Demographic Characteristics and Mean Scores of SMAS-SF, OES-A and its Subscales

	Number Percentage	Virtual tolerance	Virtual communication	Virtual problem	Virtual information	SMAS-SF	Ignored	Excluded	OES-A
Gender									
Female	335 (71.9)	13.81±4.45[a]	20.53±5.79[a]	19.39±6.71[a]	18.03±4.67[a]	71.77±18.26[a]	8.02±3.28[a]	16.79±4.50[a]	24.82±6.64[a]
Male	131 (28.1)	12.36±4.28[b]	19.92±6.40[a]	19.01±6.35[a]	16.83±4.95[b]	68.14±18.83[a]	8.26±3.80[a]	17.59±5.16[a]	25.86±7.08[a]
Test value		t:3.188 p:.002**	t:.987 p:.324	t:.556 p: .579	t:2.44 p:.015*	t:1.91 p:.056	t:-.678 p:.498	t:-1.65 p:.098	t:-1.494 p:.136
Age									
18-22	355 (76.2)	13.38±4.41[a]	20.29±5.86[a]	19.15±6.50[a]	17.59±4.78[a]	70.42±18.15[a]	8.06±3.35[a]	17.09±4.62[a]	25.15±6.68[a]
23 and above	111 (23.8)	13.47±4.58[a]	20.57±6.31[a]	19.72±6.93[a]	18.02±4.77[a]	71.80±19.51[a]	8.19±3.71[a]	16.77±4.97[a]	24.97±7.08[a]
Test value		t:-.189 p:.850	t:-.436 p:.663	t:-.420 p:.675	t:-.791 p:.429	t:-.826 p:.409	t:-.683 p:.495	t:-.364 p:.716	t:.627 p:.531
Class of education									
Preparatory and 1st year	155 (33.3)	13.04±4.24[a]	19.76±5.86[a]	19.04±6.27[a]	17.59±4.82[a]	69.45±17.74[a]	8.16±3.30[a]	17.13±4.48[a]	25.30±6.69[a]
2nd class	123 (26.4)	13.24±4.22[a]	20.74±5.44[a]	18.98±6.39[a]	17.14±4.30[a]	70.12±16.55[a]	8.18±3.45[a]	17.33±4.54[a]	25.52±6.62[a]

	n (%)								
3rd class	68 (14.6)	14.35±4.87[a]	21.19±6.72[a]	20.55±7.34[a]	18.45±5.37[a]	74.55±21.24[a]	7.66±3.25[a]	16.94±5.40[a]	24.60±6.85[a]
4th and above	120 (25.8)	13.50±4.66[a]	20.25±6.16[a]	19.19±6.80[a]	17.97±4.81[a]	70.93±19.50[a]	8.15±3.70[a]	16.59±4.74[a]	24.74±7.02[a]
Test value		F:1.444 p:.229	F:1.133 p:.335	F:1.003 p:.391	F:1.276 p:.282	F:1.272 p:.283	F:.421 p:738	F:.549 p:.649	F:.436 p:.727
Perceived income status									
Low	102 (21.9)	13.09±5.01[a]	19.94±6.32[a]	18.70±7.16[a]	16.56±5.00[a]	68.31±20.74[a]	8.02±3.38[a]	17.86±5.05[a]	25.89±6.97[a]
Average	351 (75.3)	13.49±4.27[a]	20.41±5.76[a]	19.35±6.16[b]	17.97±4.65[a]	71.23±17.34[a]	8.11±3.43[a]	16.79±4.55[a]	24.90±6.65[a]
High	13 (2.8)	13.61±4.64[a]	22.23±8.34[a]	22.07±11.85[a]	19.07±5.20[a,b]	77.00±27.09[a]	8.15±4.29[a]	16.38±5.53[a]	24.53±8.31[a]
Test value		F:.320 p:.726	F:.902 p:.406	F:1.574 p:.208	F:4.036 p:.018*	F:1.756 p:.174	F:.024 p:.976	F:2.156 p:.117	F:.880 p:.415
Marriage status of the parents									
Together	414 (88.8)	13.34±4.46[a]	20.40±5.98[a]	19.27±6.63[a]	17.55±4.74[a]	70.58±18.56[a]	8.12±3.48[a]	17.14±4.59[a]	25.27±6.64[a]
Separate	52 (11.2)	13.92±4.38[a]	20.00±5.94[a]	19.36±6.49[a]	18.84±4.92[a]	72.13±17.90[a]	7.82±3.04[a]	16.03±5.43[a]	23.865±7.66[a]
Test value		t:-.885 p:.376	t:.461 p:.645	t:-.090 p:.928	t:-1.839 p:.067	t:.-571 p:. 568	t:.595 p:.552	t:1.597 p:.111	t:1.411 p:.159
Diagnosis of psychiatric illness									
Yes	32 (6.9)	14.09±4.79[a]	20.78±6.41[a]	19.50±7.26[a]	18.68±4.44[a]	73.06±19.784[a]	8.84±3.41[a]	15.71±4.55[a]	24.56±6.73[a]
No	434 (93.1)	13.35±4.42[a]	20.32±5.94[a]	19.27±6.56[a]	17.62±4.80[a]	70.58±18.38[a]	8.03±3.4[a]	17.11±4.70[a]	25.15±6.78[a]
Test value		t:.903 p:.367	t:.413 p:.680	t:.188 p:.851	t:.1.212 p:.226	t:.732 p:.465	t:1.278 p:.202	t:-1.623 p:.105	t:-.476 p:.634
Paternal education level									
Illiterate	10 (2.1)	12.90±4.59[a]	20.33±6.58[a]	19.49±6.56[a]	16.66±4.24[a]	69.39±19.47[a]	8.41±3.49[a]	18.11±5.31[a]	24.98±6.18[a]
Elementary school graduate	245 (52.6)	13.19±4.41[a]	20.26±6.06[a]	18.96±6.75[a]	17.71±4.96[a]	70.13±19.06[a]	7.98±3.29[a]	17.00±4.41[a]	24.58±8.19[a]
High school graduate	104 (22.3)	14.13±4.33[a]	20.62±5.15[a]	19.17±6.13[a]	17.41±4.23[a]	71.35±15.57[a]	7.80±3.49[a]	16.77±5.68[a]	25.04±7.02[a]
University degree or higher	107 (23.0)	13.92±4.55[a]	20.50±5.97[a]	20.52±6.46[a]	18.68±4.83[a]	73.64±17.96[a]	8.55±3.89[a]	16.48±4.23[a]	25.11±6.77[a]
Test value		F:1.350 p:.257	F:.081 p:.971	F:1.071 p:.361	F:1.917 p:.126	F:.791 p:.499	F:.824 p:.481	F:1.318 p:.268	F:.941 p:.421
Maternal education level									
Illiterate	53 (11.4)	12.40±4.19[ab]	20.40±7.30[a]	19.70±4.76[a,b]	16.20±5.53[a]	68.70±19.88[a.b]	8.80±4.13	22.30±6.48[a]	31.10±8.62[a]
Elementary school graduate	276 (59.2)	12.69±4.32[a]	19.71±5.56[a]	18.43±6.45[a]	17.33±4.91[a]	68.17±18.06[a]	7.98±3.34	17.06±4.60[b]	25.04±6.47[b]
High school graduate	67 (14.4)	14.30±4.61[b]	21.46±6.25[a]	19.87±6.75[a,b]	18.30±4.57[a]	73.95±18.90[b]	7.73±3.09	16.56±4.49[b]	24.29±6.48[b]
University degree or higher	70 (15.0)	14.26±4.35[b]	20.77±6.34[a]	20.63±6.74[b]	18.08±4.55[a]	73.75±18.17[b]	8.63±3.85	16.85±4.71[b]	25.49±7.31[a,b]
Test value		F:5.131 p:.002**	F:2.339 p:.073	F:3.180 p:.024*	F:1.601 p:.188	F:3.680 p:.012*	F:1.500 p:.214	F:4.675 p:.003**	F:3.272 p:.021

*p<0.05 **p<0.01; a. b. c. d. e. f letters indicate the difference according to Duncan multiple comparison test.

Result on the use of social media

The mean total score of the students participating in the study was found to be 70.75±18.47 and the mean total score of the OES-A was found to be 20.36±5.97 (Table 1). It was found that 45.9% (n=214) of the university students who participated in the study were above the mean total score of the social media addiction scale and 60.3% (n=281) were above the mean total score of the social exclusion scale.

While the scores of the total and sub-dimensions of the SMAS-SF and the total and ignored sub-dimension of the OES-A of the students who felt dependent were significantly higher than those who did not feel dependent, no difference was found between the scores of the excluded sub-dimension of the OES-A (Table 3).

Table 3. Comparison of Social Media Use Characteristics and Mean Scores of SMAS-SF, OES-A and Sub-Dimension Scores

	Number Percentage	Virtual tolerance	Virtual communication	Virtual problem	Virtual information	SMAS-SF	Ignored	Excluded	OES-A
Do you feel dependent									
Yes	225 (48.3)	15.22±4.45[a]	22.58±6.19[a]	22.07±6.39[a]	18.80±4.80[a]	78.68±18.28[a]	8.88±3.63[a]	17.06±4.43[a]	25.951±7.00[a]
No	241 (51.7)	11.71±3.73[b]	18.28±4.92[b]	16.68±5.68[b]	16.67±4.53[b]	63.35±15.351[b]	7.356±3.07[b]	16.97±4.95[a]	24.33±6.47[b]
Test value		t:9.184 p:.000**	t:8.307 p:.000**	t:9.629 p:.000**	t:4.918 p:.000***	t:9.764 p:.000**	t:4.881 p:.000**	t:.210 p:.834	t:.2.594 p:.010**
Most frequently used social media account									
Instagram	320 (68.7)	13.80±4.31[a]	20.79±5.78[a]	19.39±6.66[a]	18.23±4.59[a,c]	72.22±18.13[a]	7.72±3.11[a]	16.90±4.47[a]	24.63±6.33[a]
Twitter	47(10.1)	13.00±5.08[a,b]	19.14±5.73[a]	18.74±6.72[a]	17.40±4.82[c]	68.29±19.29[a,c]	7.48±3.18[a]	15.97±4.90[a]	23.46±6.81[a]
YouTube	70(15.0)	12.15±4.31[b]	19.32±6.52[a]	19.14±6.25[a]	15.02±4.86[b]	65.65±18.63[b,c]	9.71±4.27[b]	18.12±5.14[a]	27.84±7.70[b,c]
Other	29(6.2)	12.65±4.67[a,b]	20.06±6.71[a]	19.34±6.88[a]	18.72±4.47[c]	70.79±18.89[a,c]	9.20±3.75[a,b]	17.27±5.41[a]	26.48±7.37[a,c]
Test value		F:3.160 p:.024*	F:1.929 p:.124	F:.144 p:.933	F:9.626 p:.000**	F:2.763 p:.042	F:8.252 p:.000**	F:2.169 p:.091	F:5.814 p:.001**
Total time spent on social media									
Less than 1 hour	23 (4.9)	8.39±2.99[a]	14.13±5.92[a]	13.21±6.70[a]	13.17±5.09[a]	48.91±18.43[a]	6.82±3.12[a]	16.56±6.38[a]	25.07±6.88[a]
Between 1-3 hours	177 (38.0)	11.13±3.55[b]	18.29±5.05[a]	16.57±5.55[a]	16.31±4.75[b]	62.31±15.01[b]	7.88±3.41[a]	17.18±4.92[a]	25.00±6.43[a]
Between 3-5 hours	165 (35.4)	14.24±3.72[c]	21.24±5.24[b]	20.35±5.76[b]	18.47±4.25[c,f]	74.32±15.29[c]	8.06±3.25[a]	16.94±4.48[a]	24.98±6.56[a]

	N								
Between 5-7 hours	75 (16.1)	16.41±3.88[d]	23.25±6.14[b]	22.40±6.13[b]	19.92±4.24[d,e,f]	81.98±16.71[d]	8.62±3.61[a]	16.36±3.76[a]	27.96±7.37[a]
More than 7 hours	26 (5.6)	19.30±2.92[e]	25.96±5.62[c]	27.42±5.90[c]	19.80±3.98[e]	92.50±14.31[e]	9.30±4.13[a]	18.65±5.14[a]	25.07±6.88[a]
Test value		F:61.036 p:.000**	F:27.789 p:.000**	F:35.540 p:.000**	F:17.386 p:.000**	F:49.112 p:.000**	F:2.228 p:.065	F:1.275 p:.279	F:1.546 p:.188
Where do you follow the news									
Instagram	217 (46.6)	13.66±4.27[a]	20.57±5.53[a,c]	19.17±6.53[a]	17.64±4.81[a,c]	71.06±17.73[a]	7.96±3.48[a]	17.04±4.92[a]	25.01±7.07[a]
Twitter	186 (39.9)	13.93±4.56[a]	21.01±6.26[a]	20.12±6.68[a]	18.67±4.38[a]	73.74±18.55[a]	7.88±3.10[a]	16.45±4.25[a]	24.33±6.04[a]
YouTube	25 (5.4)	11.12±4.11[b]	17.16±5.85[b]	16.96±6.01[a]	13.68±4.77[b]	58.92±16.88[b]	10.44±5.16[b]	19.60±5.35[b]	30.04±8.67[b]
Other	38 (8.2)	10.86±3.91[b]	18.05±6.01[b,c]	17.36±6.47[a]	15.84±4.67[b,c]	62.13±18.19[b]	8.28±2.87[a]	17.94±4.52[a]	26.23±5.73[a]
Test value		F:7.744 p:.000**	F:5.254 p:.001**	F:3.173 p:.024*	F:11.077 p:.000**	F:8.188 p:.000**	F:4.332 p:.005**	F:3.979 p:.008	F:5.751 p:.001**
Social media use by the mother									
Yes	302 (64.8)	13.73±4.35[a]	20.45±5.71[a]	19.35±6.61[a]	18.02±4.58[a]	71.56±17.66[a]	7.95±3.38[a]	16.70±4.51[a]	24.65±6.64[a]
No	164 (35.2)	12.80±4.58[b]	20.18±6.42[a]	19.17±6.62[a]	17.10±5.09[b]	69.26±19.86[a]	8.34±3.53[a]	17.60±4.99[b]	25.95±6.94[b]
Test value		t:2.162 p:.031*	t:.456 p:.648	t:.281 p:.779	t:1.989 p:.047*	t:1.281 p:.201	t:-1.171 p:.242	t:-1.982 p:048*	t:-1.972 p:.049*
Does your father use social media?									
Yes	345 (74.0)	13.56±4.50[a]	20.40±5.94[a]	19.21±6.57[a]	17.74±4.90[a]	70.92±18.34[a]	8.11±3.37[a]	16.98±4.42[a]	25.10±6.46[a]
No	121 (26.0)	12.96±4.28[a]	20.24±6.08[a]	19.49±6.72[a]	17.57±4.43[a]	70.28±18.91[a]	8.03±3.63[a]	17.10±5.44[a]	25.14±7.61[a]
Test value		t:1.266 p:.206	t:.241	t:-.403	t:.345 p:.730	t:.328	t:.228	t:.-.217	t:-.050

| p:.810 | p:.687 | | p:.743 | p:.820 | p:.829 | p:.960 |

*p<0.05 **p<0.01 a. b. c. d. e. f letters indicate the difference according to Duncan multiple comparison test.

It was determined that the virtual tolerance score was significantly related to the time spent on the computer and the higher the time spent on the computer, the higher the virtual tolerance score. The total score of SMAS-SF increases as the time spent on the computer increases. No significant difference was found between the time spent on social media accounts and the total score and sub-dimensions of the OES-A (Table 3).

While the virtual tolerance and virtual information score of the students who use Instagram most frequently from social media accounts are significantly higher than those who use YouTube most frequently, there is no difference in virtual communication and virtual problem scores. The virtual information score of those who use Instagram and Twitter most frequently from social media accounts is higher than those who use YouTube most frequently. Those who use Instagram most frequently have a higher score in the total score of SMAS-SF than those who use YouTube most frequently. The ignored scores and OES-A total scores of the students who most frequently used Instagram and Twitter were lower than those who most frequently used YouTube, but no difference was found between the most frequently used social media account and the excluded scores (Table 3).

The virtual tolerance score of those who follow the news on Instagram and Twitter is higher than those who follow the news on YouTube and other social media accounts. The virtual communication score of those who follow the news on Instagram is higher than those who follow the news on YouTube, and the virtual communication score of those who follow the news on Twitter is higher than those who follow the news on YouTube and other social media accounts. No difference was found between the virtual problem score and the social media account where the news is followed. While the virtual information score of those who follow the news on Instagram is higher than those who follow the news on YouTube, the virtual information score of those who follow the news on Twitter is higher than those who follow the news on YouTube and other sources. The total score of those who follow the news on Instagram and Twitter is higher than those who follow the news on YouTube and other accounts. The total scores of those who follow the news on Instagram and Twitter are significantly lower than those who follow the news on YouTube (Table 3).

The virtual tolerance and virtual information score of the SMAS-SF of the students whose mothers used social media were significantly higher than the students whose mothers did not use social media, while there was no difference between the virtual communication, virtual problem and total score of the SMAS-SF. While the total and excluded sub-dimension scores of the students whose mothers did not use social media were significantly higher than the students whose mothers used social media, no difference was found between the score of the ignored sub-dimension of the OES-A. No significant difference was found between the father's social media use and the total and sub-dimensions of the SMAS-SF, total and sub-dimensions of the OES-A (Table 3). In the simple linear regression analysis conducted to determine the effect of the total score of social excluded on social media addiction of the students participating in the study, it was found that social excluded was a predictor of social media addiction (F: 7.492; p: .006). The social excluded scale score explains 16% of the variance in the social media addiction scale score (ß: .126) (Table 4).

Table 4. The Effect of Social Exclusion on Social Media Addiction

SMAS-SF	B	Sh.	ß	T	P	R	R^2	F	P
OES-A	.344	.126	.126	2.737	.006	.126	.016	7.492	.006
Durbin-Watson: 2.081									
Constant: .344									

4. DISCUSSION

In this study, the relationship between social media addiction and social excluded levels of university students was evaluated, social excluded was found to be a predictor of social media addiction and the social excluded

scale score explained 16% of the variance in the social media addiction scale score. In a study supporting our research finding, it was reported that there was a positive relationship between social excluded experiences and social media addiction in adolescents and social media addiction increased when social excluded increased (Öztosun, 2018; Kaşıkçı, Denli, & Karaman Güney, 2021:147).

In our study, no significant difference was found between the age of the students, the class of study and the total and sub-dimensions of the SMAS-SF. Supporting the results of this study, in the studies conducted by İliş (2018) with university students and Deniz & Gürültü (2018) with high school students, it was concluded that there was no significant relationship between the grade level of the students and social media addiction (İliş, 2018; Deniz & Gürültü, 2018:355). Given the scope of this research, studies aiming to reduce students' social media addiction may be carried out for all classes regardless of class and age.

In this study, while women's virtual tolerance and virtual information scores were higher than men's, there was no difference between virtual communication, virtual problem and total scores of SMAS-SF. In the study conducted by Aktan (2018b) with university students, it was concluded that there was no significant difference in social media addiction levels between male and female students, which supports our research findings (Aktan, 2018b:405). Contrary to this finding, there are also studies showing that girls are more addicted to social media and use mobile phones more than boys (Xiao, Peng, & Liao, 2022:13496). The fact that there are no problems related to access to the Internet and that boys and girls are provided with equal access to the Internet at home and at school may explain the finding that there is no difference between boys and girls.

In our study, no significant difference was found between income status and social media addiction and social excluded. When the literature on the subject was examined, it was observed that in some studies, social media addiction scores decreased as the income level decreased, and in some studies, there was no relationship between socioeconomic level and internet addiction (Lam, Peng, & Mai, 2009:403).

In the present study, as the time spent on the computer increased, the total score of the SMAS-SF increased. Similarly, there are many research results indicating that social media addiction levels increase with increasing time spent on social media (Aktan, 2018b:405; Deniz & Gürültü, 2018:355; İliş, 2018). These results are consistent with the information that the time spent on social media, which is an important indicator of social media addiction, is high.

In the present study, when the total time spent on social media among university students was evaluated, 177 students spent between 1-3 hours, 165 students were observed to spend between 3-5 hours and 75 students were observed to spend between 5-7 hours. Bakry and colleagues (2022) reported that 42.4% of the participants spent between 4 and 6 hours on social media (Bakry et al., 2022:50). In addition, in a study conducted among university students in Jordan, it was found that the majority of students spent 3 hours or more on social media (Maqableh, Rajab, Quteshat, Masa'deh, Khatib, & Karajeh, 2015:159). This study and other studies on the subject reveal that a significant amount of time is spent on social media accounts.

In the present study, the most frequently used social media accounts among university students are found to be Instagram, YouTube, Twitter and others, respectively; the most frequently followed social media accounts with news are Instagram, Twitter and YouTube, respectively. Similarly, according to the latest data of TSI, the most frequently used social media and messaging applications of individuals are WhatsApp, YouTube and Instagram, respectively.

In the literature, there are few studies examining the relationship between social media addiction and social excluded. For this reason, studies in which comparisons were made with variables considered to be close (such as loneliness, social isolation, lack of social support) were examined and discussed in the study.

In our study, it was determined that the scores of university students on the social excluded scale were between 11 and 46 and the average was approximately 25. It was found that there were 281 individuals who scored above the average and this data constituted 60.3% of the total participants. Bakry et al. (2022) reported in their study

that approximately 4% of the participants felt excluded and approximately half of them felt lonely and that they found a significant relationship between social media addiction and loneliness (Bakry et al., 2022:50).

In our study, a total of 32 students were diagnosed with a psychiatric disorder, including anorexia in one student (3.1%), attention deficit and hyperactivity disorder in three students (9.4%), anxiety disorder in 18 students (56.3%), bipolar disorder in one student (3.1%), depression in four students (12.5%), and obsessive-compulsive disorder in five students (15.6%). In addition, 45 (19.6%) of the students who stated that they felt addicted (n=225) were addicted to cigarettes/tobacco, two were addicted to alcohol (0.9%), one was addicted to gambling (0.4%), 147 were addicted to technology (63.9%); six of them stated their addictions as other (15.2%). There is evidence that internet use and excessive use of social media negatively affect students in terms of bio-psychosocial aspects, meeting new individuals, academic studies and mental health (Yıldız & Koçak, 2020:1102). In addition, studies have also revealed that social media addiction causes or significantly worsens various diseases and problems, including depression (Yoon, Kleinman, Mertz, & Brannick, 2019:65; Raudsepp, 2019:197), loneliness, sleep problems, anxiety, worry, social isolation (Best, Manktelow, & Taylor, 2014:27), cyberbullying, and increased rates of obesity (Orben, 2020:407). On the other hand, it is thought that psychological disorders may be a reason for the increase in social media use. It has been shown that adolescents with mental health problems use social media to relieve themselves from stressful symptoms through online connections (Boer, Stevens, Finkenauer, de Looze, & van den Eijnden, 2021:106645).

5. CONCLUSION AND RECOMMENDATIONS

According to the findings of our research, social excluded is an important factor of social media addiction. For this reason, it may be useful to create healthy environments in universities where students can socialize and to consider social excluded in the provision of psychosocial health services. The collection of research data through social media accounts made it necessary to reach students who already use social media. Future research on the subject may provide information about the prevalence of students who never use social media by conducting in person interviews. Considering that social media addiction is high among university students, it is recommended to provide services to prevent addiction in university students. In addition, it would be useful to provide awareness and psychosocial treatment studies for students with social media addiction, especially psychosocial health services of universities, to establish collaborations with other institutions and to facilitate students' access to services.

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