

Investigation of the Risk of Social Media Addiction and Individual-Social Problems in Adolescents

Ergenlerde Sosyal Medya Bağımlılığı Riski ile Bireysel-Sosyal Sorunların İncelenmesi

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ABSTRACT

Objective: This study aimed to investigate the relationship between social media addiction and individual as well as social problems in adolescents.

Method: A cross-sectional, relational design was employed from October 2020 to October 2021, involving 1007 students. Data were collected using the Participant Information Form (PIF), Social Media Addiction Scale for Adolescents (SMASA), and Multidimensional Adolescent Rating Scale (MARS).

Results: The findings revealed no direct relationship between social media addiction risk and individual or social problems in adolescents. However, social media addiction scores significantly varied based on the duration and frequency of social media use. Additionally, the study identified associations between the duration of social media use and factors such as depression, school and family problems, confusion, and intrusive thoughts among adolescents.

Conclusion: The results indicate that both the duration and frequency of social media use influence adolescents' social media addiction levels and their psychological well-being.

Keywords: Adolescence, adolescence problems, social media addiction

ÖZ

Amaç: Bu çalışmada, ergenlerde sosyal medya bağımlılığı riski ile bireysel ve sosyal sorunların incelenmesi amaçlanmıştır.

Yöntem: Çalışma Ekim 2020 – Ekim 2021 tarihleri arasında 1007 öğrenci ile kesitsel ve ilişkisel olarak yapılmıştır. Veri toplama aracı olarak Katılımcı Bilgi Formu (KBF), Ergenler İçin Sosyal Medya Bağımlılık Ölçeği (ESMBÖ) ve Çok Boyutlu Ergen Derecelendirme Ölçeği (ÇBEDÖ) kullanılmıştır. **Bulgular:** Çalışmada ergenlerde sosyal medya bağımlılığı riski ile bireysel-sosyal sorunlar arasında herhangi bir ilişki bulunamamıştır. Ancak ergenlerin sosyal medya bağımlılık puanlarının sosyal medya kullanım süresine ve kullanım sıklığına göre farklılık gösterdiği tespit edilmiştir. Bunun yanı sıra ergenlerin depresyon, okul ve aile sorunları, kafa karışıklığı ve rahatsız edici düşüncelerin sosyal medya kullanım süreleri ile ilişkili olduğu tespit edilmiştir.

Sonuç: Sonuçlara göre sosyal medya kullanım süresi ile kullanım sıklığı ergenlerin sosyal medya bağımlılık puanlarını ve aynı zamanda psikolojik durumlarını etkilemektedir.

Anahtar sözcükler: Ergenlik, ergenlik dönemi sorunları, sosyal medya bağımlılığı

Introduction

There are currently more than 4.2 billion active social media users because of technological developments (Statistica 2020). This rate is increasing daily as individuals can receive news, get information, have fun, send photos, seek friendships, and maintain family relationships through many social media platforms due to the rapidly expanding internet connection (Ryan et al. 2014). Although it is stated that interaction with social media strengthens users' communication with each other, family, and social ties; studies have shown that excessive use can lead to social media addiction (Griffiths and Kuss 2017, Kuss and Griffiths 2017).

Social media addiction has been defined by Andreassen and Pallesen (2015) as excessive concern about social networks, strong motivation to engage in logging into or using social networks and spending so much time and effort on these sites that it harms work, interpersonal relationships, psychological health, and well-being. Kuss

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and Griffiths (2012) regarded social media addiction as a type of internet addiction, while the World Health Organization described it as excessive use of social media becoming an addictive behavior (WHO 2019). However, despite various definitions of social media addiction, there is insufficient evidence regarding diagnostic criteria. Therefore, it has not been included in the DSM-5, which covers substance-related disorders and behavioral addictions like internet addiction (APA 2013).

Griffiths (2007) suggested that any behavior meeting the criteria of salience, tolerance, mood modification, conflict, withdrawal symptoms, and relapse could be defined as an addiction. Accordingly, in the case of social media taking control and becoming a significant part of a person's life, salience is observed; mood modification emerges when it is used as a coping strategy for anxiety and stress. Tolerance develops as the user gradually increases the time spent on social media to alter their mood. However, withdrawal symptoms occur when the individual experiences stress and other negative emotions due to the inability to access social media; conflicts arise when social media is preferred over face-to-face interactions, hobbies, or activities. Relapse occurs when despite attempting to reduce social media usage, the individual fails to do so (Griffiths et al. 2014).

In the context of behavioral addictions, it is also stated that adolescents are at higher risk than other age groups (Ceyhan et al. 2007, Yang and Tung 2007). Studies conducted in this direction indicate that the use of social media has increased to meet the emotional needs of adolescents and reduce their perceived loneliness (Fernandes et al. 2020, O'day et al. 2021). It is claimed that 71% of adolescents aged between 13-17 years use more than one social media because of increased smartphone use, and 24% of these adolescents are almost constantly online during the day (Lenhart et al. 2015). However, at this point, it is emphasized that the relationship between social media and mental problems should be considered when evaluating them (Beeres et al. 2020). Because it is still unclear whether social media is causally related to adolescents' mental health according to research (Tromholt 2016, Heffer et al. 2019, Nesi et al. 2021).

Theoretically, empirical and longitudinal evidence supports the relationship between social media addiction and poor mental health (Tromholt 2016, Beeres et al. 2020). For example, Banyai et al. (2017), found, low self-confidence and high levels of depression symptoms associated with excessive social media use and addictive behavior in 4.5% of adolescents in their study including 5961 adolescents. In a recent systematic review that included 42 studies, it was concluded that social media addiction and negative mental health affect sleep quality (Alanzo et al. 2020). At the same time, researchers stated that excessive use of social media mediates anxiety, guilt, and stress in adolescents and negatively affects school performance (Dagher et al. 2021, Luo et al. 2021, Ohannessian et al. 2021).

When the information is evaluated, it can be said that adolescents should have priority to be protected from social media addiction. Because adolescents are undoubtedly in a vulnerable period against mental problems due to both physical and environmental changes (Mastrotheodoros et al. 2020). Therefore, it aims to contribute to the literature by evaluating the relationship between individual/social problems and the risk of social media addiction in adolescence.

Method

Sample

The study was conducted descriptive, cross-sectional, and relational between October 2020 and October 2021. The sample of this study includes 5520 students who are 9th, 10th, 11th and 12th-grade students of state high schools located in Yenimahalle district of Ankara province and responded positively to the research announcement. Before data collection, a pilot study was conducted with 100 adolescents, and the sample size at a 95% confidence interval was calculated by using "G. Power-3.1.9.2" program. The minimum sample size was determined as 374 by accepting the study effect size, alpha value, and theoretical power as 0.217, 0.05, and 0.99, respectively.

The inclusion criteria for this study were determined as follows: not having speech, sight, and hearing disabilities (1), not having disabilities in fine and gross motor skills (2) and consenting to participate in the study (3). Due to differences in educational content, health vocational high schools, commercial high schools, and technical and vocational high schools were excluded. Additionally, individuals reporting neuropsychiatric issues affecting sensory functions and experiencing difficulties in interpersonal relationships were not included in the study, as it was believed that this could also affect the study results (Coenen et al. 2016). 1027 positive responses were received to the invitation to work. However, 20 questionnaires were excluded due to incomplete completion. A total of 1007 students who met the inclusion criteria were included in the study.

Procedure

To implement the study prepared by the Declaration of Helsinki, necessary permissions were obtained from the Ufuk University Institute of Social and Human Sciences Ethics Committee (Association date: 24.09.2020 Decision Number: 2020/62) and Ankara Provincial Directorate of National Education (Board date: 04.01.2021 Decision number: E-14588481- 605.99-18761777). Apart from these permissions, written permissions were obtained by e-mail from the researchers who conducted the validity and reliability study of SMASA and MARS, which were decided to be used in the study. Before the data collection phase, written consent was obtained from the students and their parents who would participate in the research.

In the research, a questionnaire, which was pre-prepared on Google Forms, including "Parent Consent Form", "Student Consent Form" and "Participant Information Form", "Short Form of Social Media Addiction Scale for Adolescents" and "Multidimensional Adolescent Evaluation Scale" was prepared. The participants must answer all the questions. IP address restriction technology has been applied to prevent respondents from filling out the questionnaire more than once. Guidance counselors were contacted to apply the online questionnaire. Then, an announcement was made about the research via WhatsApp and the forms were shared, stating that no fee would be paid for participation in the research.

Measures

Participant Information Form (PIF)

This form was developed by the researchers and consists of 8 questions that query gender, age, income level of the family, parental union and parental education level, the participant's social media membership duration and frequency of use.

Social Media Addiction Scale for Adolescents (Short Form) (SMASA)

The validity, and reliability studies of the social media addiction scale for adolescents were conducted by Özgenel et al. (2019). Since the scale consists of 9 items, a minimum of 9 points and a maximum of 45 points can be obtained from the scale. The scale is rated on a five-point Likert scale (Never-1, Rarely-2, Sometimes-3, Often-4, Always-5). Getting a high score on the scale means that the individual's social media addiction level is high. On the other hand, a low score indicates a low level of social media addiction. The Cronbach Alpha reliability coefficient of the scale is 0.90 (Özgenel et al. 2019). In this study, the Cronbach Alpha reliability coefficient of the scale was determined as 0.88.

Multidimensional Adolescent Rating Scale (MARS)

The validity and reliability study of the scale, which was developed by Hudson (1996), was conducted by Mathiesen et al (2002). Its Turkish adaptation was carried out by Özmete and Kogar (2015). It is a scale that includes 177 items and is completed in an average of 15-20 minutes. Each question is answered under separate categories out of 7 points. The scale was separated into 16 different subscales (depression, self-confidence, problems with mother, problems with father, stress, problems with friends, problems with school, aggression, problems with family, feelings of guilt, confused thoughts, disturbing thoughts, memory loss/forgetfulness, suicide, alcohol use, substance use). Each sub-category contains 10-15 items. Thus, each subscale has its scoring. Participants respond to each of the 177 items by choosing an option on the 7-point scale. The scale was scored as never (1), very rarely (2), sometimes (3), occasionally (4), frequently (5) often (6), and always (7). Participants can mark with an X if they think that the question is not appropriate. Reverse/non-problematic questions marked with an asterisk (*) are scored as: 7 for 1, 6 for 2, 5 for 3, 4 for 4, 3 for 5, 2 for 6, and 1 for 7.

To interpret the answers of adolescents more easily in MARS subscales, each subscale is designed to produce a score between 0-100. Low scores indicate that the adolescent does not have a problem with the subject of the scale, while high scores represent serious problems. Each subscale is scored with a single formula and there is a single scoring procedure for 16 subscales. It was determined that the Cronbach alpha coefficients obtained from all sub-dimensions of the multidimensional adolescent rating scale ranged from 0.75 to 0.95 (Özmete and Kogar 2015). In this study, the alpha values of the scale and sub-dimensions were calculated between 0.62 and 0.95. The sub-dimensions allowed by the Ministry of National Education were studied.

Statistical Analysis

The data obtained in the research were analyzed using the SPSS (Statistical Package for Social Sciences) for

Windows 25.0 program. Descriptive statistical methods (number, percentage, mean, standard deviation) were used while evaluating the data. The conformity of the data to the normal distribution was checked with normality tests and skewness-kurtosis values. The scale scores provided the assumption of normal distribution. In terms of demographic characteristics and Social Media Addiction scores, an independent sample t-test was used for two-group comparisons and a one-way analysis of variance was used for more than two group comparisons. The relationship between Social Media Addiction scores and individual and social problems was examined with Pearson correlation analysis. In the comparisons of social media addiction and individual and social problems, independent sample t-test and one-way analysis of variance test were used. Bonferroni post hoc test was used to determine which group caused the difference.

Results

The majority of the participants in the study were between 13-15 years old, female (55.9%), individuals whose parents live together (92.3%), those whose parents have high school education (37.2%; 37.4%), individuals who use social media for 1-3 years (37.1%), and individuals whose frequency of social media use is several times a day (67.7%) (Table 1).

Table 1. Characteristics of participants (n= 1007)		
Characteristics	n	%
Gender		
Female	563	55,9
Male	444	44,1
Age range		
13-15 years old	695	69.0
16-18 years old	312	31.0
Parental relationship status		
Married	929	92.3
Divorced	78	7.7
Mother education status		
Illiterate	48	4.8
Primary education	351	34.9
High school	375	37.2
University	184	18.3
Master and PhD	49	4.9
Father education status		
Illiterate	13	1.3
Primary education	290	28.8
High school	377	37.4
University	244	24.2
Master and PhD	83	8.2
Family monthly income level		
Low	48	4.8
Middle	868	86.2
High	91	9.0
Duration of social media use		
less than 1 year	147	14.6
1-3 Years	374	37.1
4-6 Years	319	31.7
More than 6 Years	167	16.6
Frequency of social media use		
Once a day	216	21.4
More than once a day	682	67.7
Several times a week	109	10.8

n: Number of participants; %: Percentage

A statistically significant difference was found in the social media addiction scores of adolescents according to the duration and frequency of social media use ($p < 0.05$). According to the multiple comparison test performed to determine the group that differs, it has been determined that individuals who use social media for less than one year and for 1-3 years have lower social media addiction scores than those who use it longer than one year and more than 6 years, respectively. In addition to that, it has also been determined that the social media

addiction scores of those who use social media more than once a day are higher than those who use social media once a day or several times a week ($p < 0.05$) (Table 2).

Table 2. Comparison of Adolescent Social Media Addiction Scale according to the descriptive characteristics of the participants (n=1007)		
Characteristics	Social Media Addiction	Test/p
Gender		1.815**
Female	20.19±8.01	0.070
Male	19.27±7.95	
Age range		
13-15 years old	19.59±8.13	-1.124**
16-18 years old	20.21±7.69	0.261
Parental relationship status		
Married	19.77±7.93	-0.117**
Divorced	19.88±8.77	0.907
Mother education status		
Illiterate	18.83±8.22	0.299***
Primary education	19.74±7.96	
High school	19.75±7.90	
University	19.99±8.09	
Master and PhD	20.49±8.67	
Father education status		
Illiterate	19.20±7.95	1.656***
Primary education	19.59±8.09	
High school	20.44±7.71	
University	20.84±8.46	
Master and PhD	20.76±8.05	
Family monthly income level		
Low	45.79±16.91	0.354***
Middle	45.21±17.88	0.702
High	41.87±17.59	
Duration of social media use		
less than 1 year ¹	15.56±6.58	24.536***
1-3 Years ²	19.30±7.78	0.000*
4-6 Years ³	20.79±7.90	1 < 2.3.4; 2 < 4 ^a
More than 6 Years ⁴	22.65±8.22	
Frequency of social media use		
Once a day ¹	16.66±6.64	43.794***
More than once a day ²	21.34±7.93	0.000*
Several times a week ³	16.20±7.98	

n: Number of participants; *: Significance Level (p); ***:One-way analysis of variance (F) **: Independent sample t test; a:Bonferroni Post-hoc Test

When the scores obtained from the sub-dimensions of the Multidimensional Adolescent Rating Scale, including depression, self-confidence, problems with the mother, and stress, were examined; it was determined that male adolescents' scores in the problems with father and friend sub-dimensions were higher than female adolescents, and the scores from depression and self-confidence sub-dimensions of individuals between 13-15 years of age were higher than individuals between 16-18 years of age ($p < 0.05$). Besides, it was determined that those who use social media for less than 1 year have higher level of depression than those who use social media for more than 6 years (Table 3a).

Problems with the family sub-dimension scores of male adolescents and problem with school sub-dimension scores of adolescents between the ages of 13-15 were found to be higher. It has been observed that the scores obtained from the Problems with the Family sub-dimension differ according to the parental relationship status of the adolescents, and it has also been determined that the scores of adolescents with divorced parents were also higher (Table 3b). For the problems with School and Family sub-dimensions, it has been determined that the scores of the adolescents with 1-3 years of social media use were higher than those of the adolescents with more than 6 years of social media use. It was determined that the scores of adolescents with 4-6 years of social media use for confused thoughts were higher than those of adolescents with more than 6 years of social media use. It has been found that the scores for Disturbing Thoughts sub-dimension of adolescents with 1-3 years and 4-6 years of social media use were higher than the score of adolescents with more than 6 years of social media use duration (Table 3b).

Table 3a. Comparison of Multidimensional Adolescent Scale sub-dimensions according to the descriptive characteristics of the participants (n=1007)						
Characteristics	Depression	Self-Confidence	Problems with Mother	Problems with Father	Stress	Problems with Friends
Gender						
Female	43.39±15.15	42.5±13.81	22.82±15.34	24.45±18.32	39.36±23.92	30.43±15.79
Male	45.12±13.91	43.13±13.64	24.32±15.32	28.39±20.45	42±22.69	32.62±15.89
**Test / p value	-1.867 0.062	-0.713 0.476	-1.545 0.123	-3.225 0.001*	-1.773 0.076	-2.181 0.029*
Age range						
13-15 ages	46.08±14.58	43.39±13.57	23.85±15.43	26.82±19.16	40.88±23.07	31.87±15.91
16-18 ages	39.85±13.84	41.41±14	22.65±15.12	24.78±19.81	39.73±24.17	30.34±15.73
**Test / p value	6.369 0.000*	2.121 0.034*	1.151 0.250	1.545 0.123	0.725 0.469	1.415 0.157
Parental relationship status						
Married	44±14.57	42.8±13.72	23.48±15.37	25.96±18.94	40.31±23.38	31.33±15.91
Divorced	46.01±15.39	42.48±13.9	23.52±15.13	28.87±23.99	43.08±23.83	32.24±15.44
**Test / p value	-1.171 0.242	0.199 0.843	-0.023 0.982	-1.043 0.300	-1.002 0.317	-0.489 0.625
Duration of social media use						
< 1 year ¹	45.53±13.92	43.79±13.04	24.84±16.97	25.72±18.4	42.7±24.63	32.67±16.1
1-3 Years ²	44.21±14.7	42.93±13.78	23.2±15.39	26.9±19.72	41.01±23.02	32.03±15.28
4-6 Years ³	45.15±15	43.23±14.01	24.31±15.09	27.1±19.57	41.21±23.75	31.41±16.6
> 6 Years ⁴	40.89±14.02	40.69±13.59	21.33±14.02	23.25±18.94	36.23±22.19	28.83±15.35
***Test / p value Post-hoc	3.731 0.011* 1>4	1.679 0.170	1.832 0.140	1.718 0.162	2.453 0.062	1.982 0.115

n: Number of participants; p: Significance Level; **: Independent sample t test; ***: One-way analysis of variance; a: Bonferroni Post hoc Test

Table 3b. Comparison of Multidimensional Adolescent Scale sub-dimensions according to the descriptive characteristics of the participants (n=1007)							
Characteristics	Problems with School	Aggression	Problems with Family	Guilt	Confused Thoughts	Disturbing Thoughts	Forgetfulness
Gender							
Female	44.33±17.78	30.02±20.99	29.98±17.61	29.9±24.04	35.78±25.32	27.58±26.69	24.92±23.53
Male	45.7±17.86	31.93±20.34	33.58±20.2	32.12±24.07	38.76±24.99	28.72±26.67	27.42±24.49
**Test / P value	-1.205 0.228	-1.454 0.146	-2.971 0.003*	-1.460 0.145	-1.862 0.063	-0.671 0.502	-1.646 0.100
Age range							
13-15 ages	46.09±17.38	30.82±20.35	32.27±18.79	31.87±23.89	37.05±25.1	28.61±26.5	26.98±23.8
16-18 ages	42.37±18.53	30.94±21.55	30±18.98	28.67±24.34	37.19±25.48	26.91±27.05	23.9±24.25
**Test / P value	3.075 0.002*	-0.083 0.934	1.768 0.077	1.955 0.051	-0.084 0.933	0.936 0.349	1.888 0.059
Parental relationship status							
Married	45.04±17.93	30.99±20.81	31.2±18.69	30.93±24.23	37.05±25.31	28.16±26.9	26.18±24.2
Divorced	43.63±16.49	29.26±19.7	35.96±20.51	30.2±22.19	37.55±24.09	27.14±23.88	24.11±21.16
**Test / P value	0.672 0.502	0.711 0.477	-2.142 0.032	0.259 0.796	-0.167 0.867	0.326 0.745	0.821 0.414
Duration of social media use							
< 1 year ¹	46.34±16.18	31.54±19.65	33.1±19.34	32.75±25.07	38.17±25.13	28.86±25.05	27.08±24.33
1-3 Years ²	46.37±17.49	31.99±21.84	32.02±18.85	30.42±23.49	37.38±25.21	29.3±27.95	26.51±24.2
4-6 Years ³	44.59±18.12	29.98±20.46	32.29±18.44	32.61±24.69	39.14±26.44	29.69±27.52	26.72±24.42
>6 Years ⁴	41.15±18.87	29.41±19.52	27.84±19.02	26.93±22.88	31.6±22.11	21.61±22.42	22.67±22.14
**Test / P value Posthoc	3.687 0.012* 2>4	0.883 0.449	2.738 0.042* 2>4	2.407 0.066	3.475 0.016* 3>4	3.996 0.008* 2,3>4	1.325 0.265

n: Number of participants; p: Significance Level; **: Independent sample t test; ***: One-way analysis of variance; a: Bonferroni Post hoc Test

No significant correlation was found in the results of the Pearson correlation analysis performed to determine the relationship between the Social Media Addiction Scale in Adolescents and the Multidimensional Adolescent Scale ($p>0.05$) (Table 4).

Table 4. Relationship between scales

	1	2	3	4	5	6	7	8	9	10	11	12	13	14
SMASA	1													
Depression	-0.029	1												
Self-Confidence	0.014	0.538**	1											
Problems with Mother	-0.044	0.381**	0.351**	1										
Problems with Father	-0.018	0.401**	0.341**	0.553**	1									
Stress	-0.040	0.627**	0.479**	0.393**	0.396**	1								
Problems with Friends	-0.024	0.355**	0.427**	0.392**	0.389**	0.374**	1							
School	-0.012	0.449**	0.374**	0.337**	0.319**	0.385**	0.290**	1						
Aggression	0.023	0.065*	0.082**	0.232**	0.198**	0.309**	0.151**	0.127**	1					
Problems with Family	-0.014	0.422**	0.356**	0.586**	0.656**	0.398**	0.429**	0.427**	0.227**	1				
Guilt	-0.004	0.455**	0.401**	0.342**	0.391**	0.626**	0.400**	0.224**	0.298**	0.433**	1			
Confused thoughts	-0.004	0.465**	0.404**	0.302**	0.329**	0.635**	0.327**	0.349**	0.256**	0.400**	0.625**	1		
Disturbing thoughts	0.009	0.406**	0.305**	0.365**	0.363**	0.552**	0.334**	0.295**	0.298**	0.428**	0.616**	0.708**	1	
Forgetfulness	-0.012	0.349**	0.256**	0.349**	0.321**	0.444**	0.336**	0.307**	0.262**	0.430**	0.503**	0.554**	0.575**	1

**p<0.01; ESMB: Social Media Addiction in Adolescents; p: Level of significance

Discussion

This study was conducted to examine the relationship between the risk of social media addiction and individual and social problems in adolescents. In this study, which was carried out with a total of 1007 adolescents, it was determined that social media addiction was not related to individual and social problems of adolescents. This outcome might be related to the conduct of the study during the COVID-19 pandemic. The increased time spent at home with their families during this stressful and uncertain period, as a result of adhering to social isolation measures, may have enabled students to cope better with the stressful situation by communicating more and more effectively with their parents and siblings. Thus, maintaining their mental well-being. Indeed, some evidence suggests that during the COVID-19 pandemic. For example, there is several evidence to suggest that during the COVID-19 Individuals with higher levels of social media addiction were more likely to experience depression and psychological distress (Karakose et al. 2022, Sujarwota et al. 2023). Conversely, other studies have proposed that strong family relationships might alleviate mental health issues among students during the pandemic and have shown that good family relationships reduce the likelihood of anxiety and depression among students. (Chen et al. 2020, Wu et al. 2020).

Although no relationship was found between the risk of social media addiction and individual and social problems in adolescence in this study. It has been determined that the scores obtained by the adolescents in the Social Media Addiction and Multidimensional Adolescent Scale differ according to their descriptive characteristics. Accordingly, it has been determined that the social media addiction scores of adolescents differ according to the duration and frequency of social media use. An inconsistency has been noted in the results of the more recent meta-analysis study. According to the meta-analysis study, frequency and duration of social media use were associated with both problematic social media use and mental health problems (Cunningham et al. 2021). In the current study, regardless of social media use, levels of depression, self-confidence, stress, problems with parents and friends were higher in male adolescents than in female adolescents. In this respect, the fact that the studies were carried out in different socio-demographic, economic and cultural countries, and therefore the differences between the participants, may be the reason for the diversity of the results. Because it is seen that femininity and masculinity are defined and roles are determined by identities such as 'mother', 'father', 'child' in the family. Therefore, while women are charged with feelings of motherhood, care and

compassion, men may be discouraged from expressing their feelings based on stereotypes such as "men don't cry". All of this can affect adolescents in the process of developing their individual and social identities cognitively, behaviorally and spiritually.

Adolescents with male gender and divorced parents have problems in the family, and adolescents between the ages of 13-15 have problems with school. The lack of family support to share the problem in difficult situations, feeling alone, and feeling abandoned can be the reason adolescents with divorced parents have more parental problems. On the other hand, adaptation difficulties experienced during adolescence may also cause school problems. Evidence has shown that children and adolescents can experience various mood disorders and psychological repercussions depending on their ages, genders, levels of maturity, and the presence of a support system. In line with this, evidence has revealed that children from divorced families experience fear of abandonment (O'Hara et al. 2021), demonstrate less social adaptation (Wang et al. 2021), and exhibit higher levels of social fear, avoidance, depression, and suicidal thoughts (Obeid et al. 2021). Additionally, a study on the long-term effects of parental divorce on the mental health of young adults revealed higher emotional issues among 16-year-old adolescents whose parents had divorced (Chase-Lansdale et al. 1995). Another population-based study suggested a significant association between parental separation/divorce experiences and poor self-assessment of psychological health. Particularly among males experiencing this between 0-4 years of age and females experiencing this between 0-4, 10-14, and 15-18 years of age (Lindström and Rosvall 2016).

From the past to the present, studies conducted within the scope of behavioral addictions such as social media addiction and digital addiction have drawn attention to the physical and mental problems experienced by adolescents related to their usage time of technology. For instance, the impact of digital media on children's health was examined through focus groups and individual interviews with children aged 9-16 (N=368) from nine European countries. The study suggested that children reported experiencing physical health symptoms (eye problems, headaches, loss of appetite, and fatigue) as well as aggression and sleep issues within 30 minutes after using technology (Smahel et al. 2016). Recent studies have highlighted that higher daily usage time and frequency are associated with emerging negative emotional responses and potentially more severe clinical courses of mental health issues (Nesi et al. 2021). They also noted a high incidence of depression (Heffer et al. 2019), frequent recollection of conflicts with parents (McKone et al. 2021), and the capacity for complex thoughts and behaviors toward self-harm (Hinze et al. 2022).

The current study's results support the literature by demonstrating associations between social media usage time and adolescents' depression, school, and family problems, as well as complex and distressing thoughts. The findings suggest that the outcomes might be a consequence of the online education and friendships conducted during the period corresponding to the study. which coincided with the COVID-19 pandemic. As a matter of fact, it has been stated that the transformation of face-to-face learning methods into online education causes psychological problems in students. (Fathiyah et al. 2021).

There are some limitations in this study. First, although schools located Yenimahalle district of Ankara province in Turkey were invited, not all schools responded positively. Some students in schools who responded positively did not want to participate in the study, and some students' parents did not approve. Therefore this situation may have caused self-selection bias in the sample studied. Another limitation is the restricted nature of the data collection tool prepared to identify factors influencing adolescents' individual issues in relation to the risk of social media addiction. which might potentially reduce the likelihood of accurate completion.

Conclusion

In this study, no relationship was found between the risk of social media addiction and individual and social problems in adolescents. However, it was determined that the social media addiction scores of the adolescents differ according to the duration and the frequency of social media use and there is a correlation between depression, school, and family problems, and complex and disturbing thoughts according to the duration of social media use. In this regard, the school family studies can be carried out and training can be organized for both adolescents and parents about social media addiction. At the same time, workshops can be planned to inform parents about the appropriate or inappropriate use of social media and their mental effects on children.

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