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RESEARCH / ARAŞTIRMA

Relationship Between Perceived Social Support Level for Physical Activity and Social Media Use Duration in Adolescents

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ABSTRACT

Objective: This study was planned to determine the relationship between the level of perceived social support for physical activity and the duration of social media use in adolescents.
Material and Methods: This descriptive study was conducted between March and April 2024 with adolescents aged 10-19 years using an online survey method. The sample of the study consisted of 272 adolescents living in Isparta, who were reached through the snowball sampling method, who were one of the purposive sampling types, and who met the sample inclusion criteria. Independent groups t-tests, one-way analysis of variance (ANOVA) and post hoc analyses were used to examine the differences in scale scores according to the descriptive characteristics of the participants.
Results: A total of 68.4% of the adolescents in the study were girls, 53.7% were in secondary education, 68.8% were in the age range of 15-19 years, 90.4% used social media, 45.5% used social media for between 3 and 6 hours, 44.1% played sports, and 62.9% preferred to spend time on social media instead of playing sports. The mean total score of social support in the physical activities of the adolescents was 12.83±6.49 out of the maximum score of 30 points that could be obtained from the scale. There was a significant difference between social support scores and age, sex, educational status, sporting status, and social media use status ($p<0.05$). In this study, adolescents who used social media for between 3 and 6 hours had lower social support scores for physical activities ($p<0.05$).
Conclusion: The perceived level of peer and parental social support for physical activity was low in adolescents. Our study highlighted the important role of physical activity in reducing social media usage time and emphasized the necessity of not only intrinsic motivation but also parental and peer support to increase young people's participation in physical activity.
Keywords: Adolescent, physical activity, social media, social support.

Adölesanlarda Fiziksel Aktivite için Algılanan Sosyal Destek Düzeyinin Sosyal Medya Kullanım Süresi ile İlişkisi

ÖZET

Amaç: Bu araştırma adölesanlarda fiziksel aktivite için algılanan sosyal destek düzeyi ile sosyal medya kullanım süresi arasındaki ilişkinin belirlenmesi amacıyla planlanmıştır.
Gereç ve Yöntem: Tanımlayıcı nitelikte tasarlanan bu araştırma, Mart-Nisan 2024 tarihleri arasında, 10-19 yaş arası adölesanlar ile online anket yöntemi kullanılarak yürütülmüştür. Araştırmanın örneklemini Isparta ilinde yaşayan, amaçlı örnekleme türlerinden kartopu örnekleme yöntemiyle ulaşılan ve örneklem dahil edilme kriterlerine uyan 272 adölesan oluşturmaktadır. Katılanların tanımlayıcı özelliklerine göre ölçek düzeylerindeki farklılaşmaların incelenmesinde bağımsız gruplar t-testi, tek yönlü varyans analizi (ANOVA) ve post hoc analizleri kullanıldı.
Bulgular: Çalışmada yer alan adölesanların %68,4'ünün kız, %53,7'sinin ortaöğretim, %68,8'inin 15-19 yaş aralığında olduğu, %90,4'ünün sosyal medya kullandığı, %45,5'inin sosyal medya kullanım süresinin 3-6 saat arasında olduğu, %44,1'inin spor yaptığı ve %62,9'unun spor yerine sosyal medyada vakit geçirmeyi tercih ettiği belirlendi. Adölesanların fiziksel aktivitelerde sosyal destek toplam puan ortalaması ölçekten alınması gereken en yüksek 30 puan üzerinden 12,83±6,49 olarak saptandı. Sosyal destek puanları ile yaş, cinsiyet, eğitim durumu, spor yapma durumu ve sosyal medya kullanım durumu arasında anlamlı bir farkın olduğu saptandı ($p<0,05$). Araştırmada 3-6 saat arası sosyal medya kullanan adölesanların, fiziksel aktivitelerde sosyal destek puanları daha düşük bulundu ($p<0,05$).
Sonuç: Adölesanlarda fiziksel aktiviteye yönelik algılanan akran ve ebeveyn sosyal destek düzeyinin düşük olduğu görüldü. Çalışmamız, sosyal medya kullanım süresini azaltmada fiziksel aktivitenin önemli bir rol oynadığını ve gençlerin fiziksel aktiviteye katılımını artırmak için içsel motivasyonun yanı sıra ebeveyn ve akran desteğinin de gerekli olduğunu vurgulamıştır.
Anahtar Kelimeler: Adölesan, fiziksel aktivite, sosyal medya, sosyal destek.

1. Introduction

Adolescence is a period of development with rapid development. Regular physical activity during this period supports the healthy development of young people. Regular physical activity in adolescents is known to protect future physical health; improve behavior, discipline and sense of responsibility, self-confidence and psychological well-being, and reduce the risk of anxiety, depression, obesity, and chronic diseases (1,2).

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A sedentary lifestyle is associated with obesity, posture disorders, and increased physical health problems (3). At least 60 minutes of moderate-to-vigorous physical activity per day is recommended for children and adolescents aged 5-17 years (1, 4). However, it is reported that a significant proportion of young people do not engage in regular physical activity (5). Worldwide, 81% of adolescents between the ages of 11 and 17 years are found to be physically inactive (5,6). In our country, according to the classification of the World Health Organization, 41% of young people between the ages of 15 and 18 years had a physical activity level (PAL) below 1.69 and had a sedentary/light activity lifestyle (7). According to the results of the Turkey Child Survey 2022, which was conducted in Türkiye, only 6.9% of children between the ages of 4 and 17 years had participated in at least 60 minutes of sports in the past week. In addition, children stated that they were physically active only 1.2 days per week on average (2).

After the COVID-19 pandemic, a decrease in children's physical activity rates was observed due to mandatory isolation rules, and an increases in social media and screen use rates were reported (3). In addition, ongoing advances in technology have further facilitated access to social media tools such as smartphones, tablets, and laptops (8). Today, a large part of the social and emotional development of adolescents takes place through media, the internet, and mobile phones (9). Adolescents use social media to communicate with friends, share photos and videos, disseminate information, reduce emotional stress, and have fun (8,10). However, the uncontrolled use of social media can lead to anxiety, depression, and psychological problems (11). According to Pew Research Center (2024) data, 93% of adolescents are active on social media. The American Psychological Association reported that adolescents spend almost 5 hours per day on social media (12). However, reducing the use of social media tools to less than 2 hours per day and limiting the use of the internet and social media in a way that does not affect at least 8 hours of sleep and regular physical activity in adolescents are recommended (12). This draws attention to the relationship between increasing social media use and the physical activity levels of young people.

Current evidence supports the association between social media and physical activity (13-15). Excessive use of smartphones and other digital devices may also cause physical problems, such as a more sedentary lifestyle (13), which is positively associated with childhood obesity (3,14). The associations of increased periods of social media use with health behaviors and physical activity are of concern (14). Regular physical activity promotes the maintenance and improvement of physical and psychological health (11). Family and peer influence is known to be important on development and behavior in adolescence (16). Social support for physical activity has been identified as a determinant of physical activity, with peer and parental support identified as predictors of physical activity (16-18).

Protecting and improving adolescent health is among the roles of pediatric nurses. In primary health care services, parents and adolescents can be counseled about balancing social media use and encouraging physical activity, which can have positive effects on the general health and well-being of adolescents. In addition, physical activity during adolescence provides numerous social, psychological, and physiological benefits and helps prevent engagement in risky behaviors. A review of the literature in recent years reveals that although studies have investigated the relationships between physical activity and social media addiction, and between smartphones and internet addiction in adolescents (3,14,15,19,20), studies investigating the relationships between the level of perceived support for physical activity and the duration of social media use are limited. This study aimed to better understand the relationship between perceived support for physical activity and social media usage time. The findings may contribute to identifying alternative activities to prevent risky behaviors and to developing more effective intervention strategies through the design of appropriate programs tailored to adolescents.

2. Material and Method

2.1. Aim of the Study

This study aimed to determine the relationship between the level of perceived social support for physical activity in adolescents and the duration of social media use.

2.2. Types of Study

Our study is descriptive and correlational research.

2.3. Research Questions

1. What is the level of social support perceived by adolescents from their parents and peers for physical activity?

2. What is the relationship between the level of social support perceived by adolescents and social media use?

2.4. Place and Time of the Study

The research was conducted in a province in the Mediterranean region of Turkey between March and April 2024.

2.5. Study Population and Sample

The population of the study consisted of adolescents between the ages of 10 and 19 years in the province where the study was conducted, and the sample consisted of 272 adolescents reached by the snowball sampling method, which is one of the purposive sampling methods.

2.6. Inclusion and Exclusion Criteria

Adolescents aged 10-19 years, who could read, write and speak Turkish, and who agreed to participate in the study were included in the study.

2.7. Data Collection Tools Used in the Research

2.7.1. Introduction of the Information Form

The form developed by the researchers in line with the literature (21-23) had a total of 10 questions. The questions for adolescents consisted of sociodemographic data such as age, sex, and educational status, and questions about total duration of social media use.

2.7.2. Social Support Scale in Physical Activities

This scale was developed by Farias Junior et al. in 2014 to measure perceived social support in physical activities among adolescents aged 10-19 years (24). A study of the validity and reliability of the scale in Türkiye was conducted by Küçükibiş and Eskiler (25). The necessary permission for the use of the measurement tool in the current study were obtained from the responsible author. The Social Support in Physical Activities Scale is a 4-point scale (0 = Never, 1 = Rarely, 2 = Often, 3 = Always) and consists of 10 items and two subscales.

The subscales are called parental social support scale (Sample item: How often in a typical week does your mother or father encourage you to engage in physical activity?) and peer social support scale (Sample item: How often do your friends tell you that you perform physical activities well in a typical week?). The items related to parental and peer support are summed separately to calculate subscale scores, and the total score is obtained by summing all the items. The mean scores are calculated by dividing the sum of the relevant subscale or the total score by the number of items.

Higher scores on the scale indicate greater perceived social support for participation in physical activity. In Küçükibiş and Eskiler's study, the Cronbach's alpha coefficient values for both factors of the scale (parental and peer social support dimensions) were 0.781 and 0.817, respectively. In our study, the Cronbach's alpha coefficient values for both factors of the scale (parental and peer social support dimensions) were 0.842 and 0.876, respectively.

2.8. Data Collection Method

In the collection of the data of the study, first, the "Introductory Information Form" and "Social Support Scale in Physical Activities" were transferred to Google Forms and a digital survey link consisting of three sections was created. The first part of this link contained information about the researchers and the informed consent form. The second section included the "Introductory Information Form" and the third section included the "Social Support Scale in Physical Activities". Approval for participation in the study was provided through this digital form and adolescents who checked the approval box completed their participation in the study by accessing the questions in the other part of the study. To ensure that the data were completed fully by the adolescents, the obligation to answer each question in the questionnaire was added.

The snowball sampling method, which is among the nonprobability sampling methods, was used in the study and the survey link was shared with individuals who met the research criteria by the participants. To prevent the same adolescents from completing more than one form in the study, the phone number information in the introduction form was assigned as participant identification information. Only one dataset belonging to the same phone number was included in the study.

2.9. Analysis of Research Data

The data obtained in the study were evaluated using the IBM SPSS Statistics for Windows, version 22.0 (SPSS Inc., Chicago, IL, USA) statistical program. Frequency and percentage analyses were used to determine the descriptive characteristics of the participants and mean and standard deviation statistics were used to analyze the scale. Kurtosis and Skewness values were analyzed to determine whether the research variables were normally distributed. The variables were determined to be normally distributed. Parametric methods were used to analyze the data. Independent groups t-tests, one-way analysis of variance (ANOVA) and post hoc (Tukey, LSD) analyses were used to examine the differences in scale levels according to the descriptive characteristics of the participants. $P<0.05$ was considered statistically significant for a type-I error rate of 5%.

2.10. Ethical Aspects of the Study

Ethics committee permission (Date/Number: 05.03.2024/2024/107) was obtained from the Istanbul University-Cerrahpaşa Social and Human Sciences Research Ethics Committee for the conduct of this study. Online informed consent was obtained from the participants in the study in accordance with the principles of the Declaration of Helsinki. All stages of the study were conducted in accordance with the "Research Publication Ethics".

3. Results

The demographic characteristics of the participants in the study, which were used to examined the relationship between the level of perceived social support for physical activity in adolescents and the duration of social media use, are given in Table 1.

It was observed that 68.8% of the adolescents who participated in our study were between the ages of 15-17 years, 68.4% were female, 53.7% were studying in secondary education, 44.1% played sports, 43.3% of those who played sports did jogging and walking, and 35% did sports for at least 30-45 minutes per day. A total of 90.4% of the adolescents used social media, 45.5% used social media for between 3 and 6 hours, 56.2% considered themselves physically active, and 62.9% spent time on social media instead of sports (Table 1).

Table 1. Distribution of participants according to descriptive characteristics (n=272)

Groups	n	%
Age (years)		
10-14	85	31.2
15-19	187	68.8
Sex		
Male	86	31.6
Female	186	68.4
Educational status		
Primary education	23	8.5
Secondary Education	146	53.7
University	103	37.9
Playing sports		
Yes	120	44.1
No	152	55.9
Frequency of playing sports (Minimum)		
30-45 min / day	42	35.0
30-45 min / At least once per week	29	24.2
30-45 min / twice a week	22	18.3
30-45 min / 3 times a week	27	22.5
Type of Sport		
Jogging or walking	52	43.3
Fitness	20	16.7
Playing for a team professionally	28	23.3
Other	20	16.7
Social Media Use Status		
Yes	246	90.4
No	26	9.6
Frequency of using social media tools		
Between 1 and 3 hours	88	35.8
Between 3-6 hours	112	45.5
6 hours and over	46	18.7
Thinking you are physically active		
I Don't Think I'm Active	52	19.1
I Think I am Active	153	56.2
Undecided	67	24.6
Spending time on social media instead of sports		
Yes	171	62.9
No	101	37.1

The mean "total social support" of the participants was 12.83±6.49 (Min=0; Max=30), the mean "parental social support" was 5.86±3.68 (Min=0; Max=15), and the mean "peer social support" was 6.97±4.09 (Min=0; Max=15) (Table 2).

Table 2. Social support score averages

	N	Min.	Max.	Mean±SD
Social support total	272	0.0	30.0	12.83±6.49
Parental social support	272	0.0	15.0	5.86±3.68
Peer social support	272	0.0	15.0	6.97±4.09

Min: Minimum, **Max:** Maximum, **SD:** Standard Deviation

The results of the analysis conducted to examine the differences in of social support scores according to descriptive characteristics are presented in Appendix 1.

The perceived social support score for physical activity in adolescents significantly differed according to age (p<0.001). The total social support scores and parental and peer social support scores of adolescents aged 10-14 years were higher than the total social support scores of adolescents aged 15-19 years (p<0.001 and p<0.001; p<0.001 and p<0.001; p=0.034 and p<0.05, respectively). The perceived social support score for physical activity in adolescents significantly differed according to sex (p<0.05). The total social support scores and parental and peer social support scores of males were higher than total social support scores of females (p=0.005 and p<0.05; p=0.036 and p<0.05; p=0.016 and p<0.05, respectively). The social support scores of the adolescents significantly differed according to their educational status (p<0.05). The total social support scores and parental social support scores of young people studying in primary school were higher than the total social support scores of young people studying in university (p<0.05) (Appendix 1).

The perceived social support score for physical activity of the adolescents significantly differed according to their status of playing sports (p<0.05). The total social support scores and parental and peer social support scores of adolescents who played sports were greater than those of adolescents who did not play sports (p<0.001 and p<0.001; p<0.001 and p<0.001; p=0.001 and p<0.05, respectively). The perceived parental social support score for physical activity in adolescents significantly differed according to the type of sport played (p<0.05). The parental social support score of adolescents whose sport type was jogging or walking was greater than that of adolescents whose sport type was fitness (p=0.047 and p<0.05, respectively) (Appendix 1).

The perceived parental social support score for physical activity in adolescents significantly differed according to social media use (p<0.05). The parental social support scores of social media users were lower than the parental social support scores of nonsocial media users (p=0.017 and p<0.05, respectively). The perceived parental social support score for physical activity in adolescents significantly differed according to the frequency of using social media tools (p<0.05). The parental social support scores of adolescents who used social media for 1-3 hours were higher than the parental social support scores of adolescents who used social media for 3-6 hours and 6 hours or more (p=0.036 and p<0.05, respectively).

The perceived social support score for physical activity of the adolescents significantly differed according to the variable of thinking that they were physically active (p<0.05). The total social support scores and parental and peer social support scores of adolescents who thought that they were physically active were greater than those of adolescents who did not think that they were physically active (p<0.001 and p<0.05; p<0.001 and p<0.05; p=0.007 and p<0.05, respectively). The perceived social support score for physical activity in adolescents significantly differed according to spending time on social media instead of playing sports (p<0.05). The total social support scores and parental social support scores of adolescents who spent time on social media instead of playing sports were found to be lower than those of adolescents who did not spend time on social media instead of playing sports (p<0.001 and p<0.05; p<0.001 and p<0.05, respectively) (Appendix 1)

4. Discussion

Adolescents' use of social media, which has increased considerably in the last decade, has positive and negative effects on health behaviors. Understanding the relationship between the frequency of social media use and health behaviors in this population is important because social media is the most important communication tool communication tool preferred by adolescents. With the increase in conditions such as obesity and technology addiction in adolescents, the level of social support that directs them to physical activities and the existence of programs covering these activities have gained importance (23). In this study, which examined the relationship between the level of perceived social support for physical activity in adolescents and the duration of social media use, it was found that the social support perceived by young people aged 10-19 years from their parents and peers was low, the time spent in front of the screen was long, and the social support perceived by young people with high social media use time from their parents was insufficient.

In studies conducted with adolescents, it has been reported that males have higher levels of physical activity (16,26) and that the fact that they are more active in playing sports may be due to their higher levels of social support (22,27). Although the majority of the adolescents in our study were girls, the social support levels of boys from their parents and peers for physical activity were similarly found to be higher than those of girls. This may be due to factors such as living standards, social perspective, the cultural-economic structure of the society, climate and geographic conditions, transportation modes, and occupational positions (23,28). In addition, in our study, it was found that jogging and walking sport types received more social support from parents than fitness sport types. This result may be due to parents' belief that fitness sports may negatively affect girls' moral values and sex roles (29) through social structure. This may also be related to the fact that running and walking can be performed outdoors, but fitness often requires a gym membership. The self-efficacy levels of adolescents are fundamental elements that directly or indirectly contribute to their health behaviors (30). In this respect, parents' joint participation in physical activity, verbal praise, and support of sports activities are critical to support children's social and emotional development.

In our study, the social support levels of primary and secondary school students from their parents were found to be higher than those of university students. This may be because university students are more independent than primary and secondary school students are and because the influence of peers shapes their behaviors, as does the influence of their parents (31). Peers, in particular, can provide friendships to university students during physical activity and influence their behavior choices through reinforcement (16). However, social and cultural interactions within the university environment, along with emotional changes and academic stress, require university students to make additional psychological efforts to adapt successfully (30,31). Therefore, the low levels of social support found in our study may be explained by these challenges.

International guidelines recommend that young people should engage in moderate-to-vigorous physical activity for at least 60 minutes per day, with a maximum screen time of 2 hours (32, 33). Gill et al. (16) reported that approximately one quarter of adolescents who participated in their studies were active for at least 1 hour per day. In our study, 44.1% of the adolescents were active in sports and 35% of those who were active did sports for at least 30-45 minutes per day. Regular physical activity has many health benefits and contributes significantly to the quality of life of young people. Today, a sedentary lifestyle is a major public health problem and most adolescents spend too much time in sedentary activities such as sitting in front of a screen (34). Recently, when physical activity has become a leisure preference, it is seen that the leisure preference among young people has been shown to be mostly internet use with technological developments (12,33). In our study, it was found that the majority of adolescents used social media for 3-6 hours,

were not physically active, and 62.9% spent time on social media instead of playing sports. People acquire certain behaviors by participating in social and physical activities with the guidance of the family, teachers, or social environment, especially from childhood. Behaviors such as participation in physical activities contribute to social, physical, and psychological development in adolescents (35). However, some studies in the literature (18,22,23,36) emphasize the inadequacy of physical activity levels in adolescents and the importance of increasing awareness on this issue for both young people and parents.

Although some studies have shown that social support from parents and peers directly affects the physical activity level of adolescents (11,16,23,30,31), it should be kept in mind that social support from parents and peers will positively affects the physical activity behaviors of adolescents (37). In our study, it was observed that the social support received from peers and parents for physical activity by young people who thought they were physically active was greater than that received by young people who did not think they were physically active. De Camargo et al. (38) reported that adolescents who engaged in moderate-to-vigorous physical activity had high levels of social support from peers and parents, and some studies reported that peer support was more effective than parental support in making adolescents physically active (37,39). In the study of Akpınar and Cankurt (27), parents' interest in physical activity positively affected the continuity and frequency of physical activity of their children. Demographic factors such as parents' economic status and educational status may effect the physical activity of young people (27). The family's interest in sports is an important factor in children's love and orientation toward sports. Therefore, it can be said that one of the factors affecting individuals' physical activity behaviors in childhood and adolescence and their tendency to maintain these behaviors is the level of social support perceived from parents and peers.

In studies conducted by Booker et al. (40) and Sampasa-Kanyinga and Chaput (41) with adolescents, the physical activity levels of young people with high social media use and their compliance with recommendations for screen time were lower. In our study, the screen time of adolescents was found to be high and adolescents who spent time on social media instead of playing sports did not receive sufficient social support from their parents for their physical activity. Parental behaviors and attitudes have important effects on young people. Parents who can transform the correct information they have learned into health behaviors will be good role models, especially for their own children (42), because in today's modern life, significant changes have occurred in people's lifestyles with the increased use of new technologies. In some occupational fields, the fact that parents continue to stay in front of the screen in the evening, and the adoption of a sedentary lifestyle by families due to busy work schedules (37), may set a negative example for young people. In our study, it was observed that adolescents with high frequency of social media use had low levels of social support perceived from their parents regarding physical activity. Although many factors affect the level of physical activity and frequency of social media use in adolescents, studies in the literature have presented different results. Aydıl (21), reported that the frequency of adolescents' participation in physical activity and the level of perceived social support did not affect internet addiction levels, whereas in the studies conducted by Booker et al. (40) and Shimoga et al. (43), reported that the frequency of social media use among young people who were not active in physical activity was high. Studies on the relationship between social media use and health behaviors suggest that the time spent on social media use replaces the time spent on physical activity and that perceived social support is an important criterion.

5. Conclusion and Recommendations

In our study, social support for physical activity from parents and peers was found to be an insufficient factor among adolescents. There were differences in perceptions of social support according to sex, educational status, and social media use and frequency. More research is needed to better understand the effects of these factors on the physical activity levels of young people. Inadequate physical activity, which has become a global public health problem, continues to progress rapidly with technological developments. In this respect, our study reveals the importance of investigating the factors affecting physical activity levels in adolescents and draws attention to the importance of participation in physical activity and the necessity of parental and peer support, as well as intrinsic motivation in the physical activity levels of young people in reducing the time spent in front of screens.

To reduce adolescents' screen time, parents should provide encouraging physical interventions to physically active adolescents; develop educational programs that explain the medical, social, and emotional benefits of physical activity to parents; and discuss the use of digital technology in young people, which should be used in planning educational activities. The social media use time of young people in different age groups should be considered, and sports activities should be encouraged. Studies examining parental attitudes toward adolescents according to sport type are also recommended.

6. Contribution to the Field

Our study focused on the importance of participation in physical activity in reducing social media use and the necessity of parental and peer support as well as intrinsic motivation in the physical activity levels of young people. The content shared on social media and the nature of interactions may also influence this relationship. In this context, future research would benefit from a more detailed examination of social media content and usage dynamics. In addition, to protect against the possible negative effects of increased media use time, it was emphasized that awareness training for parents on strategies to increase the level of social support in physical activity should be increased.

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Conflict of Interest

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Authorship Contribution

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Appendix 1. Differentiation of social support scores according to descriptive characteristics (n=272)

Demographic characteristics	n	Social support total	Parental social support	Peer social support
Age		**Mean ± SD**	**Mean ± SD**	**Mean ± SD**
10-14	85	15.18±6.11	7.42±3.78	7.75±4.02
15-19	187	11.77±6.39	5.15±3.41	6.62±4.08
t		4.13	4.92	2.13
p		<0.001	<0.001	0.034
Sex		**Mean ± SD**	**Mean ± SD**	**Mean ± SD**
Male	86	14.39±5.97	6.55±3.64	7.85±3.93
Female	186	12.11±6.61	5.54±3.66	6.57±4.11
t		2.73	2.10	2.42
p		0.005	0.036	0.016
Educational Status		**Mean ± SD**	**Mean ± SD**	**Mean ± SD**
Primary education	23	15.00±5.61	8.09±4.05	6.91±4.09
Secondary Education	146	13.37±6.65	5.90±3.60	7.47±4.23
University	103	11.59±6.27	5.31±3.54	6.28±3.81
F		3.74	5.55	2.59
P		0.025	0.004	0.077
PostHoc		1,2>3 (p<0.05)	1>2,3 (p<0.05)	
Playing sports		**Mean ± SD**	**Mean ± SD**	**Mean ± SD**
Yes	120	15.17±5.58	7.31±3.47	7.87±3.61
No	152	10.99±6.57	4.72±3.43	6.27±4.31
t		5.57	6.15	3.25
P		<0.001	<0.001	0.001
Frequency of playing sports		**Mean ± SD**	**Mean ± SD**	**Mean ± SD**
30- 45 min / day	42	15.93±5.80	7.43±3.48	8.50±3.65
30- 45 min / At least once per week	29	14.34±6.24	6.72±3.48	7.62±4.05
30- 45 min / twice per week	22	15.23±5.32	7.68±3.82	7.55±3.46
30- 45 min / 3 times a week	27	14.85±4.78	7.44±3.27	7.41±3.21
F		0.49	0.38	0.67
P		0.69	0.77	0.57
Type of Sport		**Mean ± SD**	**Mean ± SD**	**Mean ± SD**
Jogging or walking	52	16.19±5.48	7.73±3.41	8.46±3.71
Fitness	20	12.50±4.66	5.95±3.20	6.55±3.10
Playing for a team professionally	28	14.39±5.50	6.57±3.20	7.82±3.49
Other	20	16.30±6.10	8.60±3.80	7.70±3.88
F		2.67	2.73	1.39
p		0.051	0.047	0.251
PostHoc			1,4>2, 4>3 (p<0.05)	
Social media use status		**Mean ± SD**	**Mean ± SD**	**Mean ± SD**
Yes	246	12.58±6.33	5.69±3.55	6.90±4.06
No	26	15.19±7.57	7.50±4.46	7.69±4.33
T		-1.958	-2.411	-0.941
P		0.051	0.017	0.347
Frequency of using social media tools		**Mean ± SD**	**Mean ± SD**	**Mean ± SD**
1- 3 hours	88	13.57±6.48	6.45±3.68	7.11±4.15
3-6 hours	112	12.38±6.35	5.35±3.42	7.04±4.09
6 hours and over	46	11.20±5.78	5.04±3.44	6.15±3.83
F		2.248	3.384	0.962
p		0.108	0.036	0.384
PostHoc			1>2,3 (p<0.05)	
Thinking You Are Physically Active		**Mean ± SD**	**Mean ± SD**	**Mean ± SD**
I Don't Think I'm Active	52	10.31±5.89	4.60±3.06	5.71±4.18
I Think I am Active	153	14.33±6.38	6.70±3.62	7.63±4.09
Undecided	67	11.39±6.33	4.92±3.79	6.46±3.77
F		10.318	9.815	5.104
P		<0.001	<0.001	0.007
Spending time on social media instead of sports		**Mean ± SD**	**Mean ± SD**	**Mean ± SD**
Yes	171	11.73±6.27	5.09±3.44	6.64±4.12
No	101	14.70±6.45	7.16±3.73	7.545±4.00
t		-3.736	-4.639	-1.774
p		<0.001	<0.001	0.077

F: ANOVA Test; t: Independent Groups T-Test; PostHoc:Tukey, LSD