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A hidden type of internet addiction? Intense and addictive use of social networking sites in adolescents

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ABSTRACT

Internet Gaming Disorder has been included as a preliminary diagnosis in DSM-5. The question remains, if there are additional internet activities related to addictive use. Especially, use of social networking sites has been discussed to be related to excessive use, but only few empirical studies are available. We wanted to explore, if use of social networking sites is related to addiction symptoms and psychosocial distress and which variables (demography, personality) predict addictive use. A representative sample of $n = 9173$ adolescents (12–19 years) was enrolled. Self-report questionnaires assessed demography, frequency of social networking sites use, internet addiction, personality, and psychosocial distress. Gender-specific associations were found between frequency of use of social networking sites and addiction criteria, especially regarding preoccupation and loss of control. Adolescents using social networking sites intensely were more often classified with internet addiction (4.1% boys, 3.6% girls) and displayed higher psychosocial distress. Frequency of social networking sites use and its addictive use were predicted by similar variables except for extraversion that was only related to frequency of use. Since the intense use of social networking sites can be related to addictive symptoms and is accompanied by psychosocial distress it might be considered as another form of addictive online behavior.

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1. Introduction

The concept of excessive and uncontrolled internet use leading to psychosocial distress and impaired level of functioning has attracted growing interest worldwide. The dynamics of preoccupation and craving, loss of alternative interests, social retreat, tolerance, withdrawal and loss of control causing negative consequences that some (vulnerable) individuals experience in relation to the overuse of specific online contents have led many researchers and clinicians to view this phenomenon as being related to an addiction syndrome. Indeed, several studies have reported similarities with substance-use disorders regarding its phenomenology and underlying neurobiological mechanisms (Duven, Müller, Beutel, & Wölfling, 2014; Ko et al., 2013; Kuss & Griffiths,

2012). Likewise, the concept of non-substance related addictions has become popular (Frascella, Potenza, Brown, & Childress, 2010). Therefore, the term Internet Addiction (IA) has been proposed to describe the phenomenon of excessive, uncontrolled usage of specific online-applications (e.g. online-gaming, use of online-pornography or social networking sites).

In their decision in 2013, the APA (2013) included Internet Gaming Disorder as one common sub-type from the umbrella-term IA into the appendix of the DSM-5 (Diagnostic and Statistical Manual of Mental Disorders, fifth edition; APA (2013); cf. (Petry & O'Brien, 2013)). While this decision was generally appreciated, it has also been criticized that types of IA not related to gaming were ignored. The APA explained their decision by pointing out that scientific evidence regarding online-gaming by far exceeds other types of IA and stressed the need for more research in order to allow for an estimation of their health-related impact.

Indeed, empirical investigations on specific sub-types of IA are scarce. However, studies focusing IA in general have repeatedly shown that other online activities are also used to a great extent by individuals meeting criteria for IA. Especially engagement in social networking sites (SNS) has been regarded as having potential for

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addictive use (Rumpf et al., 2013).

At present, no systematic survey with high methodological quality has been conducted exclusively investigating SNS-addiction (Kuss & Griffiths, 2011) but several studies on IA have demonstrated that SNS-use is a predictor for IA (Morrison & Gore, 2010; Müller, Beutel, Egloff & Wölfling, 2014; Müller, Beutel & Wölfling, 2014; Müller, Glaesmer, Brähler, Wölfling & Beutel, 2014). Likewise, among treatment seekers, addictive SNS-use has been observed (Müller, Beutel & Wölfling, 2014).

While addiction-specific research is lacking, several contributions have addressed motives and health-related correlates of (non-pathological) use of SNS. In a recent epidemiological survey encompassing European adolescents the authors (Tsitsika et al., 2014) showed that 70% of the participants were using SNS on a regular basis with 40% using it on average 2 h a day. It turned out that heavier SNS-use was predictive for heightened internalizing problems. Among young adolescents also relations with lower academic achievements and retreat from alternative activities were observable.

In their online-survey on 1143 subjects, Rosen, Whaling, Rab, Camer and Cheever, (2013) reported that the number of facebook-friends was associated with symptoms related to narcissism and histrionic personality disorders. Similarly, Mittal, Tessner and Walker (2007) demonstrated that young adults with schizotypal personality disorder spent more time on social media than healthy controls. Also, the degree of social anxiety has been discussed as a mediator of the effects of SNS-use (Rauch, Strobel, Bella, Odachowski, & Bloom, 2014).

Studies applying psychophysiological measures to analyze immediate effects of SNS-use have posed the suggestion that SNS-use might provoke a Core Flow State that has also been demonstrated being a part of computer gaming experience and thus contributing to its addictive potential (Mauri, Cipresso, Balgera, Villamira, & Riva, 2011).

1.1. Research questions

In 2013 the APA decided to include Internet Gaming Disorder in the appendix of the DSM-5. Thus, the spectrum of addictive use of online-activities was restricted to online gaming. Undoubtedly, the majority of empirical literature on IA has centered on the effects of computer gaming. Yet, it has been suggested to take additional online-activities into consideration, for instance addictive SNS-use (Kuss & Griffiths, 2011).

Based on preliminary data indicating addictive potential of SNS (Kuss & Griffiths, 2011, Tsitsika et al., 2014), we aimed to identify relationships between addiction symptoms and SNS-use. By examining a large sample we were interested to examine adolescents reporting SNS-use with high frequency and to estimate the frequency of addiction symptoms among them.

Secondly, we intended to replicate findings of increased psychosocial symptoms associated with Internet Gaming Disorder by examining psychosocial distress among addicted SNS-users. In accordance to prior surveys (Tsitsika et al., 2014) and findings on the specific sub-type of Internet Gaming Disorder in adolescents (Jang, Hwang, & Choi, 2008; Müller et al., 2015), we expect to find increased psychosocial distress in SNS-addiction.

Furthermore, our intention was to characterize those adolescents meeting criteria for SNS-addiction with regards to demography and associated personality traits. While empirical evidence is missing, it has been argued that females show an enhanced vulnerability to SNS-addiction (Kuss & Griffiths, 2011). Thus, we hypothesized that female gender will be a predictor of SNS-addiction. Specific personality traits, especially extraversion and social distrust have been associated to the extent SNS are used and

to underlying motives of usage (Rauch et al., 2014). While Wilson, Fornasier and White (2010) have reported high extraversion as one predictor of SNS-addiction, general models on IA have emphasized the role of decreased extraversion (Müller, Beutel, Egloff et al., 2014). In contrast, Wang, Ho, Chan, and Tse (2015) reported that addictive SNS-use was predicted by high extraversion, while addictive gaming was associated with low extraversion. Thus, it becomes clear that further studies are needed to elucidate personality correlates of heavy and addicted-SNS use. Therefore, we posed the working hypothesis, that high extraversion will be a predictor of frequency and intensity of SNS-usage while low extraversion is expected to act as a vulnerability-factor associated with addictive SNS-use.

2. Material and methods

2.1. Sampling procedure and data collection

Two questionnaire-based large-scale studies encompassing two separate representative samples of adolescents from two federal states of Germany were conducted. Participation was voluntary with each participant being informed about the study's background and asked to give written informed consent. The investigation was approved by the local ethical commissions and was in accordance with the Declaration of Helsinki.

The participants were drawn randomly according to a sampling plan stratified by region, school type, and age. 62 sampling units were determined for study 1 and 42 for study 2 with response rates between 66.1% and 54.3%. Sample sizes were based on power calculations (with an expected IA-frequency of 1%) and after data cleaning a total of $n = 3710$ (sample 1) respectively $n = 5463$ (sample 2) subjects entered the final data analyses. For the statistical analyses, both samples were aggregated ($N = 9173$).

2.2. Measures

The principal questionnaire contained general data (demographics) and specific contents. Patterns of internet use were assessed by nine items asking for the frequency of specific internet activities (use of online-games, social networking sites, online-pornography, downloading portals, online-gambling, online-shopping etc.) on 4-point Likert scales (0 = never to 3 = very often).

2.2.1. Scale for the Assessment of Internet and Computer game Addiction (AICA-S; (Müller, Beutel, Egloff et al., 2014; Müller, Beutel & Wölfling, 2014; Müller, Glaesmer et al., 2014)

For measuring internet addiction, this self-report scale that is based on the DSM-criteria for substance use disorders and gambling disorder (e.g. loss of control, tolerance, withdrawal etc.) was administered. Clinical aspects of internet use are assessed with 14 items on 4-point Likert scales and in dichotomous format. The final score ranges between 0 and 27 points. Cutoffs indicating non-problematic and addictive use (with a differentiation in "mildly addicted" and "addictive") were derived on the basis of general distribution analyses in community-based samples (Müller, Beutel, Egloff et al., 2014; Müller, Beutel & Wölfling, 2014; Müller, Glaesmer et al., 2014; Wölfling, Müller, & Beutel, 2011) and validated on a clinical level encompassing a sample of 221 treatment seekers (Müller, Beutel & Wölfling, 2014). AICA-S has repeatedly shown to be a reliable and valid self-assessment and is one of the few instruments with clinical validation data available (sensitivity = 80.5%; specificity = 82.4%).

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