

ORIGINAL ARTICLE

Examining the Relationship Between Social Support and Social Media Addiction: Role of Self-Esteem

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Main Points

- Social media addiction (SMA) has a negative association with social support.
- Social media addiction has a negative association with self-esteem.
- Self-esteem significantly explains the link between social support and SMA.
- Self-esteem and social support play a crucial role in preventing SMA.

Abstract

This study aimed to investigate the associations between social support, self-esteem, and social media addiction. The participants were 383 (55.09% female) adults aged 18 – 32 years ($M = 21.10$, standard deviation = 4.14). Data were collected using the self-report questionnaire. Correlation analysis was conducted to examine the associations between the variables. The Process Macro was employed to investigate the role of self-esteem to explain the relationship between social support and social media addiction. Bootstrap analysis was performed to investigate the significance of the direct and indirect relations between the variables. The findings demonstrated that social media addiction was negatively correlated to both social support and self-esteem, whereas social support was positively correlated to self-esteem. Gender had no significant effect on any of the variables. Even when age and daily hours of social media use were checked as covariates, according to the findings, self-esteem significantly explains how social support and social media addiction are related. Therefore, increased social support and self-esteem may prevent social media addiction.

Keywords: Mediation, self-esteem, social media addiction, social support, young adults

Introduction

Today, the Internet offers a wide variety of options for human interaction, which can encourage people to favor online communication over face-to-face communication (Yi & Gong, 2009). People may also prefer to use social media because they lack social skills (Caplan, 2003). However, online communication may cause Internet addiction, whereas face-to-face communication and support lessen online dependency (Yeh et al., 2008). The communication and support provided by social media cannot replace face-to-face communication and support and can even lead to addiction. Therefore, it is crucial to determine protective components so that those with a low perception of social support do not

become addicted to social media. Accordingly, this study explores how self-esteem may explain the link between social support and social media addiction (SMA).

Social Support and Social Media Addiction

A critical component of social relationships is social support, which involves the interpersonal exchange of assistance (Heaney & Israel, 2002). Social support may also be characterized as an individual's having knowledge of one or more emotions, such as believing that they are loved and valued, being a member of a communication network, and having a sense of mutual responsibility (Cobb,

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1976). In a crisis, such individuals believe they are cared for and have a solid social network because of their perception of social support. It comprises not just receiving direct support, but also the perception that support is available when required (Taylor, 2011).

Given the frequency of worldwide use of the Internet, social relations have shifted to social media platforms, enabling people to build relationships on social media that they cannot form in the real world (Young, 1998). Thus, Aksoy (2018) found that a lack of friends is the primary reason for using social media. People's interpersonal interactions on social media can also provide social support. Nonetheless, people who seek social support may tend to overuse social media. Social media addiction can disrupt daily life activities due to the amount of time and effort spent on these platforms, as well as hinder real-life interpersonal relationships (Andreassen & Pallesen, 2014).

Self-Esteem as a Protective Factor

Self-esteem generally referred to "a person's evaluation of oneself" (Leary & Baumeister, 2000). This evaluation can be either positive or negative (Rosenberg et al., 1995). On the other hand, it is argued that self-esteem is not just a person's self-evaluation. It is also indicated that self-esteem is monitored by how others react to oneself (Leary & Baumeister, 2000). It is also stated that others shape one's view of oneself (Harter, 2012). Therefore, it can be said that one of the factors that increase self-esteem is social support. Social support can not only directly enhance self-esteem (Behnke et al., 2011) but can also indirectly affect mental health by improving self-esteem (Ibarra-Rovillard & Kuiper, 2011). Without self-esteem, people cannot maintain a healthy and balanced personality (Leary & Baumeister, 2000). Thus, self-esteem can be both a vulnerability and a protective factor (Hagen et al., 2020).

The Present Study

Self-esteem is directly affected by perceived social support (Koc & Arslan, 2019), which is positively related to self-esteem (Kumar et al., 2014). According to sociometric theory, being seen as close, valuable, or important in interpersonal relationships increases self-esteem (Leary & Baumeister, 2000) as does being confident that one will receive help from a particular person (Hoffman et al., 1993). Therefore, *there is a positive association between social support and self-esteem (H1)*.

Individuals with low self-esteem may perceive social media as a secure space due to the problems they experience in face-to-face relationships. Hence, they may use it for purposes such as self-expression and escaping from their problems (Błachnio et al., 2013). Self-esteem is also an important predictor of SMA (Balci & Yeles Karaman, 2020). Therefore, the following hypothesis is proposed: *there is a negative association between self-esteem and SMA (H2)*.

People may use social media more because they can form relationships that would be impossible in the real world (Young, 1998) and because they lack friends in real life (Aksoy, 2018). Therefore, perceived social support may negatively correlate with Internet addiction (Gunuc & Dogan, 2013) and SMA (Tas,

2022). Therefore, *social support has a negative association with SMA (H3)*.

Low self-esteem negatively impacts mental health, whereas high self-esteem protects it (Hagen et al., 2020). Self-esteem is also affected by factors like being seen as close, valuable, and important by others (Leary & Baumeister, 2000). Thus, in studies where perceived social support is the independent variable, it seems that self-esteem mediates its association with the dependent variables (Koc & Arslan, 2019). Therefore, *self-esteem has mediation role between social support and SMA (H4)*. In previous studies, it was seen that the mediation role of self-esteem in the association between social support and SMA was not examined. Therefore, this study is the first to examine the mediation role of self-esteem in the relationship between social support and SMA. In addition, this study, which reveals the role of social support and self-esteem in the prevention of SMA, is thought to contribute significantly to the literature and addiction studies.

Material and Methods

Participants and Procedures

The data were collected from 383 young adults aged 18 – 43 years ($M_{age} = 21.10$, $SD = 4.14$). Regarding gender, 172 (45%) of the participants were male, while 211 (55%) were female. Regarding education level, 73 (19.01%) were high school graduates, 218 (56.92%) were university students, and 92 (24.02%) were university graduates. The daily consumption of social media ranged from 1 to 14 hours (Mean = 4.09, $SD = 1.96$).

Before starting data collection, ethical approval for the research was first obtained from the Human Research Board. The participants in the study were contacted via the Internet. The data were collected using Google Forms via a link posted on the researcher's social media accounts. Informed consent was obtained from all participants. The consent form consisted of information about the aim of the study, the confidentiality of personal data, the possibility for participants to terminate their participation at any time, and the conditions of volunteering to participate in the study.

Measures

Multidimensional Scale of Perceived Social Support

The Multidimensional Scale of Perceived Social Support (MSPSS) scale was developed by Zimet et al. (1988), was first adapted into Turkish by Eker and Arkar (1995), and then by Eker et al. (2001). The scale has 12 items in 3 dimensions (family, significant other, and friends). The scale is scored using a 7-point Likert-type scale (1—very strongly disagree, 7—very strongly agree). The factor loadings of the scale items ranged from .71 to .93, while reliability coefficients for the total score in psychiatric patients, surgical patients, and normal sample groups ranged between .83 and .91. The MSPSS is negatively and significantly correlated with variables such as loneliness, hopelessness, and psychological symptoms (Eker et al., 2001). In the present study, the scale reliability coefficients reached a good level ($\alpha = .91$, $\omega = .89$).

Rosenberg Self-Esteem Scale

The Rosenberg Self-Esteem Scale (RSES) was developed by Rosenberg (1965) and translated to Turkish by Çuhadaroglu

(1986). The RSES is a one-dimensional scale comprising five positive and five negative statements, scored on a 4-point Likert-type scale (1—strongly disagree, 4—strongly agree). After reverse-scoring the relevant items, high scores mean high self-esteem. The Turkish scale's reliability coefficient was .76, while its test – retest correlation coefficient was .71 (Çuhadarolu, 1986). In this study, the scale's reliability coefficients were high ($\alpha = .90$, $\omega = .91$).

Bergen Social Media Addiction Scale

The Bergen Social Media Addiction Scale (BSMAS) was developed by Andreassen et al. (2016) and translated to Turkish by Demirci (2019). The BSMAS is a one-dimensional six-item scale. Responses are scored using a 5-point Likert-type scale (1—never, 5—very often). Confirmatory factor analysis (CFA) was performed on the scale. Comparative Fit Index (CFI), Tucker-Lewis Index (TLI), Standardized Root Mean Square Residual (SRMR), Root Mean Square Error of Approximation (RMSEA) values were examined for goodness of fit. CFA results indicated that the fit indices of the BSMAS were at a good level (CFI = .99; TLI = .99; SRMR = .031; RMSEA = .039). The scale factor loadings were between .43 and .90. Regarding reliability, the scale's coefficient of internal consistency was .83, while the test – retest reliability coefficient was .83. (Demirci, 2019). In this study, the reliability coefficients of the BSMAS were good ($\alpha = .77$, $\omega = .77$).

Data Analysis

The descriptive statistics, assumptions of normality (skewness and kurtosis), and reliability coefficients were examined. Independent samples *t*-tests were used to examine whether the study's main variables varied significantly by gender. The associations between the variables were analyzed using correlation analysis.

The role of self-esteem in explaining the association between social support and SMA was analyzed using the Process Macro. Social support, self-esteem, and SMA scores differed significantly by participant age and daily hours of social media use (Tables 1 and 2). Therefore, age and daily hours of social media use were checked as covariates in the analyses. To determine whether or not the total, direct, and indirect relations in the hypothesis model tested were significant, bootstrapping analysis was performed with a 95% confidence interval and 5000 resamples. The effect is considered significant as long as the confidence intervals do not include zero (Hayes, 2018). Data were investigated using the IBM Statistical Package for the Social Sciences program (IBM Corp, 2016) and Jamovi (The Jamovi Project, 2020).

Results

Preliminary Analysis

The preliminary analysis (Table 1) showed that the skewness values ranged from $-.522$ to $.091$, while the kurtosis values ranged from $-.613$ to $-.389$. Therefore, the data distributions can be considered normal (Tabachnick & Fidell, 2013). The variables' reliability coefficients ranged between .77 and .91, which indicates a good level.

The correlation analysis indicated that SMA was negatively and significantly related to both social support ($r = -.406$, $p < .001$) and self-esteem ($r = -.456$, $p < .001$), while social support had a positive and significant relationship with self-esteem ($r = .548$, $p < .001$). Participant's age was positively related to both social support ($r = .173$, $p < .01$) and self-esteem ($r = .204$, $p < .001$) and negatively related to daily hours of social media usage ($r = -.179$, $p < .01$) and SMA. Daily hours of social media usage were negatively associated with social support ($r = -.161$, $p < .01$) and self-esteem ($r = -.239$, $p < .001$) and positively correlated with SMA ($r = .402$, $p < .001$).

Table 1.
Descriptive Statistics, Reliability Coefficients, and Correlations

Variables	<i>M</i>	<i>SD</i>	Skewness	Kurtosis	α	ω	1	2	3	4
(1) Age	21.10	4.14	3.64	14.45	–	–	1			
(2) DSMU	4.09	1.96	1.51	4.46	–	–	–.179*	1		
(3) SS	59.37	17.81	–.522	–.490	.910	.891	.173*	–.161*	1	
(4) SE	29.06	7.16	–.449	–.613	.900	.908	.204**	–.239**	.548**	1
(5) SMA	17.74	5.59	.091	–.389	.766	.766	–.283**	.402**	–.406**	–.456**

Note: α = Cronbach's alpha; ω = McDonald's omega; DSMU = daily hours of social media use; SS = Social Support, SE = Self-Esteem, SMA = Social Media Addition.

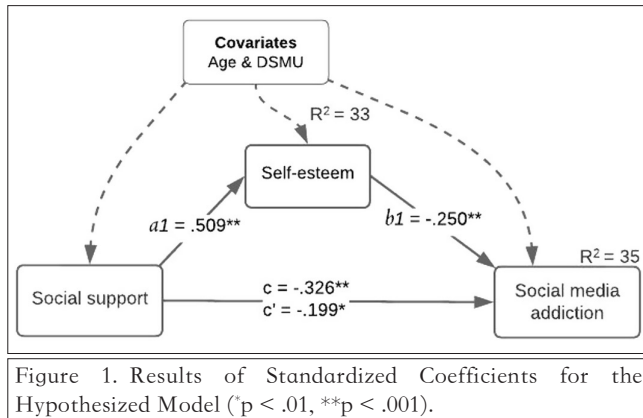
* $p < .01$.

** $p < .001$.

Table 2.
Scores for Social Support, Self-Esteem, and SMA according to the Gender Variable

Variables	Male (<i>n</i> = 172)		Female (<i>n</i> = 211)		<i>t</i>	<i>df</i>	Cohen's <i>d</i>
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>			
SS	59.02	18.25	59.66	17.47	–0.35 _{ns}	381	–0.04
SE	29.54	7.18	28.66	7.13	1.20 _{ns}	381	0.12
SMA	17.49	5.89	17.94	5.35	–0.78 _{ns}	381	–0.08

Note. ns = nonsignificant. SS = social support, SE = self-esteem, SMA = social media addiction.



Independent samples t -test results indicated that there were no significant gender differences in the scores of social support ($t = -0.35$; $p > .05$), self-esteem ($t = 1.20$; $p > .05$), or SMA ($t = -0.78$; $p > .05$).

Mediation Analysis

The mediation analysis indicated that social support was positively and significantly related to self-esteem ($\beta = .509$, $p < .001$). Both the total ($\beta = -.326$, $p < .001$) and direct ($\beta = -.199$, $p < .01$) relationships between social support and SMA were significant. Together, social support and self-esteem explained 35% of the variance in SMA (Figure 1).

The bootstrapping analysis revealed that the direct and indirect associations of the variables in the hypothesis model tested were significant even when controlling for age and daily hours of social media use as covariates (Table 3). Self-esteem played a significant role in explaining the associations between social support and SMA. Table 3 shows the 95% bias-corrected confidence interval values of the unstandardized total, direct, and indirect relations.

Discussion

This study examined the associations between social support, self-esteem, and SMA. Regarding the study hypotheses, the results confirmed, first, that social support was positively

related to self-esteem ($H1$), which is in line with previous studies suggesting that social support is an important determinant of self-esteem (Kumar et al., 2014). Being seen as close, valuable, or important in interpersonal interactions increases self-esteem (Leary & Baumeister, 2000).

Second, the results confirmed that self-esteem is negatively linked to SMA ($H2$). This result is consistent with earlier research findings (Andreassen et al., 2016). These results suggest that social media can provide a safe environment for people to express themselves (Blachnio et al., 2013). Moreover, people can show themselves as the person they want to be (Batmaz et al., 2022) and increase their self-esteem by receiving likes, thanks to the image they project.

Third, the results confirmed that perceived social support is negatively correlated with SMA ($H3$). This is also consistent with earlier studies (Gunuc & Dogan, 2013). Internet addicts may have a lower likelihood of receiving enough and effective social support (Tan, 2019) because Internet addiction can restrict their social network and support (Kaminska, 2014). In order to find this support, they may then use social media more or even excessively.

Fourth, the findings demonstrated that self-esteem significantly explained the relationship between social support and SMA ($H4$). That is, people with low self-esteem (Kumar et al., 2014) may use social media more (Andreassen et al., 2016) due to insufficient social support in the real world, which is associated with low self-esteem.

Limitations and Suggestions for Future Research

In summary, this study showed that individuals with strong social support resources may also have high self-esteem and thus can use social media more functionally. This suggests that social support and self-esteem may be important protective factors against problematic social media use. This study has some limitations. First, the sample was limited to 383 adult participants. Therefore, further studies can be carried out with a larger sample. Second, the current study used a cross-sectional design, so forthcoming longitudinal studies could be carried out to better understand the causal relationships suggested by the present findings.

Table 3.
Results of Bootstrap Analysis

					95% CI		
					Coefficient	LL	UL
Total effect					-.102**	-.129	-.075
Direct effects							
SS	→	SE			.205**	.171	.239
SE	→	SMA			-.195**	-.287	-.118
SS	→	SMA			-.062**	-.093	-.032
Indirect effect							
SS	→	SE	→	SMA	-.040**	-.059	-.023

Note: CI = confidence interval, LL = lower limit, UL = upper limit., SS = Social Support, SE = Self-Esteem, SMA = Social Media Addiction.

Number of bootstrap samples for the percentile bootstrap confidence intervals = 5000.

* $p < .01$.

** $p < .001$.

The results suggest that self-esteem helps explain the link between social support and SMA. That is, low self-esteem promotes dependence on social media, whereas high self-esteem provides protection. Future studies conducted by mental health professionals could investigate how to increase self-esteem, for example, by providing psychological counseling to people with low self-esteem or conducting psychoeducation with groups that appear to be at risk in terms of self-esteem. In addition, people's self-esteem is lower if they perceive that their social support resources are inadequate. Therefore, it is essential to enhance people's social support networks and raise awareness about accessing quality social assistance. Finally, community-wide policies on face-to-face support networks should be implemented, and skills-based psychoeducational activities that support positive social relationships should be conducted, so that people do not have to resort to seeking social support through social media platforms.

Data Availability: The data presented in this study are available on request from the corresponding author.

Ethics Committee Approval: Ethical committee approval was received from the Ethics Committee of Trakya University Social Sciences and Humanities Research (Approval no: 11/28, Date: 28.12.2022).

Informed Consent: Written informed consent was obtained from the patients who agreed to take part in the study.

Peer-review: Externally peer-reviewed.

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References

- Andreassen, C. S., & Pallesen, S. (2014). Social network site addiction: An overview. *Current Pharmaceutical Design*, 20(25), 4053 – 4061. [\[CrossRef\]](#)
- Andreassen, C. S., Pallesen, S., & Griffiths, M. D. (2016). The relationship between addictive use of social media, narcissism, and self-esteem: Findings from a large national survey. *Addictive Behaviors*, 64, 287 – 293. [\[CrossRef\]](#)
- Balci, Ş., & Yeles Karaman, S. (2020). Social media usage, self-presentation, narcissism, and self-esteem as predictors of instagram addiction: An intercultural comparison. *Erciyes İletişim Dergisi*, 7(2), 1213 – 1239. [\[CrossRef\]](#)
- Batmaz, H., Türk, N., Kaya, A., Yıldırım, M., & Assistant, R. (2022). Cyberbullying and cyber victimization: Examining mediating roles of empathy and resilience. *Current Psychology*, 1 – 11. [\[CrossRef\]](#)
- Behnke, A. O., Plunkett, S. W., Sands, T., & Bámaca-Colbert, M. Y. (2011). The relationship between Latino adolescents' perceptions of discrimination, neighborhood risk, and parenting on self-esteem and depressive symptoms. *Journal of Cross-Cultural Psychology*, 42(7), 1179 – 1197. [\[CrossRef\]](#)
- Błachnio, A., Przepiórka, A., & Rudnicka, P. (2013). Psychological determinants of using Facebook: A research review. *International Journal of Human-Computer Interaction*, 29(11), 775 – 787. [\[CrossRef\]](#)
- Caplan, S. E. (2003). Preference for online social interaction: A theory of problematic internet use and psychosocial well-being. *Communication Research*, 30(6), 625 – 648. [\[CrossRef\]](#)
- Cobb, S. (1976). Presidential Address-1976. Social support as a moderator of life stress. *Psychosomatic Medicine*, 38(5), 300 – 314. [\[CrossRef\]](#)
- Çuhadaroğlu, F. (1986). *Adolesanlarda benlik saygısı* [Self-esteem in adolescents] [Yayınlanmamış uzmanlık tezi]. Hacettepe Üniversitesi.
- Demirci, İ. (2019). The adaptation of the Bergen Social Media Addiction Scale to Turkish and the evaluation its relationships with depression and anxiety symptoms. *Anatolian Journal of Psychiatry*, 20, 15 – 22. [\[CrossRef\]](#)
- Eker, D., Arkar, H., & Yıldız, H. (2001). Çok Boyutlu Algılanan Sosyal Destek Ölçeği'nin gözden geçirilmiş formunun faktör yapısı, geçerlik ve güvenilirliği [Factorial structure, validity, and reliability of the Multidimensional Scale of Perceived Social Support]. *Turkish Journal of Psychology*, 12(1), 17 – 25.
- Gunuc, S., & Dogan, A. (2013). The relationships between Turkish adolescents' Internet addiction, their perceived social support and family activities. *Computers in Human Behavior*, 29(6), 2197 – 2207. [\[CrossRef\]](#)
- Hagen, R., Havnen, A., Hjemdal, O., Kennair, L. E. O., Ryum, T., & Solem, S. (2020). Protective and vulnerability factors in self-esteem: The role of metacognitions, brooding, and resilience. *Frontiers in Psychology*, 11, 1447. [\[CrossRef\]](#)
- Harter, S. (2012). *Self-perception profile for children: Manual and questionnaires*. University of Denver.
- Hayes, A. F. (2018). *Introduction to mediation, moderation, and conditional process analysis: A regression-based approach*. Guilford Press.
- Heaney, C. A., & Israel, B. A. (2002). Social networks and social support. In K. Glanz, B. K. Rimer, & K. Viswanath (Eds.), *Health behavior and health education: Theory, research, and practice* (pp. 189 – 210). Jossey-Bass.
- Hoffman, M. A., Levy-Shiff, R., & Ushpiz, V. (1993). Moderating effects of adolescent social orientation on the relation between social support and self-esteem. *Journal of Youth and Adolescence*, 22(1), 23 – 31. [\[CrossRef\]](#)
- Ibarra-Rovillard, M. S., & Kuiper, N. A. (2011). Social support and social negativity findings in depression: Perceived responsiveness to basic psychological needs. *Clinical Psychology Review*, 31(3), 342 – 352. [\[CrossRef\]](#)
- Kaminska, O. V. (2014). Impact of Internet addiction on the individual. *Science and Education a New Dimension. Pedagogy and Psychology – Budapest*, 15, 99 – 103.
- Koc, H., & Arslan, C. (2019). Üniversite öğrencilerinde algılanan sosyal destek, benlik saygısı ve sabır arasındaki ilişkiler [The relationship between perceived social support, SelfEsteem and patience in university students]. *Türk Psikolojik Danışma ve Rehberlik Dergisi*, 9(54), 821 – 840.
- Kumar, R., Lal, R., & Bhuchar, V. (2014). Impact of social support in relation to self-esteem and aggression among adolescents. *International Journal of Scientific and Research Publications*, 4(12), 1 – 5.
- Leary, M. R., & Baumeister, R. F. (2000). The nature and function of self-esteem: Sociometer theory. In M. P. Zanna (Ed.), *Advances in experimental social psychology* (pp. 1 – 62). Academic Press. [\[CrossRef\]](#)
- Rosenberg, M. (1965). *Society and the adolescent self-image*. Princeton University Press.
- Rosenberg, M., Schooler, C., Schoenbach, C., & Rosenberg, F. (1995). Global self-esteem and specific self-esteem: Different concepts, different outcomes. *American Sociological Review*, 60(1), 141 – 156. [\[CrossRef\]](#)
- Tabachnick, B. G., & Fidell, L. S. (2013). *Using multivariate statistics* (6th ed.). Pearson.

- Tan, K. A. (2019). The effects of personal susceptibility and social support on Internet addiction: An application of Adler's theory of individual psychology. *International Journal of Mental Health and Addiction*, 17(4), 806 – 816. [\[CrossRef\]](#)
- Tas, F. (2022). Perceived stress, social support and social media addiction in university students during the COVID-19 pandemic. *Bağımlılık Dergisi*, 23(1), 95 – 104. [\[CrossRef\]](#)
- Taylor, S. E. (2011). Social support: A review. In H. S. Friedman (Ed.), *The Oxford handbook of health psychology* (pp. 189 – 214). Oxford University Press.
- Yeh, Y. C., Ko, H. C., Wu, J. Y.-W., & Cheng, C. P. (2008). Gender differences in relationships of actual and virtual social support to internet addiction mediated through depressive symptoms among college students in Taiwan. *Cyberpsychology and Behavior*, 11(4), 485 – 487. [\[CrossRef\]](#)
- Yi, Y., & Gong, T. (2009). An integrated model of customer social exchange relationship: The moderating role of customer experience. *Service Industries Journal*, 29(11), 1513 – 1528. [\[CrossRef\]](#)
- Young, K. S. (1998). Internet addiction: The emergence of a new clinical disorder. *CyberPsychology and Behavior*, 1(3), 237 – 244. [\[CrossRef\]](#)
- Zimet, G. D., Dahlem, N. W., Zimet, S. G., & Farley, G. K. (1988). The multidimensional scale of perceived social support. *Journal of Personality Assessment*, 52(1), 30 – 41. [\[CrossRef\]](#)