

The relationship between social media addiction levels and alexithymia in young people at home during pandemic process

Melike Yavaş Çelik^{*ID} and Fatma Karasu

Department of Nursing, Yusuf Şerefoğlu Faculty of Health Sciences, Kilis 7 Aralık University, Mehmet Sanlı, 79000, Kilis Merkez, Kilis, Turkey. *Author for correspondence. E-mail: www_com_tr@hotmail.com

ABSTRACT. This study was conducted to determine the relationship between social media addiction levels and alexithymia in young people who were at home during the pandemic process. The descriptive and cross-sectional study was conducted with 520 young people between 01.01.2021-15.01.2021. Data were collected using a personal information form, Social Media Addiction Scale and Toronto Alexithymia Scale. Kruskal-Wallis, Mann-Whitney U tests and correlation and regression analysis were used to evaluate the data. The total score average of the Social Media Addiction Scale of the youth was 94.65 ± 37.63 and the total score average of the Toronto Alexithymia Scale was 50.04 ± 12.14 . It was determined that 44.6% of the Toronto Alexithymia Scale received 51 points. A positive and moderate correlation was found between Social Media Addiction Scale and Toronto Alexithymia Scale ($r = 0.463$, $p = 0.001$). Social media addiction was found to affect alexithymia by 21.3% according to the regression analysis. It has been determined that the social media addiction levels of the young people are medium and their alexithymia levels are high. It has been found that there is a significant relationship between social media addiction and alexithymia.

Keywords: social media addiction; alexithymia; pandemic of Covid-19.

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Introduction

The coronavirus (Covid-19) infection that emerged in Wuhan, China in December 2019 has affected the whole world. The spread of the disease by droplets caused it to spread rapidly. The rapid spread has caused the number of infected people to exceed expected. (Ho, Chee, & Ho, 2020; World Health Organization [WHO] (2020). A short while later, in March, the Covid -19 infection was declared as a pandemic epidemic by WHO (2020). Pandemics that remind people of the reality of death can affect people's psychological health quite negatively. Factors such as staying at home continuously in order to protect against the epidemic, the decrease in social relations, when the epidemic process will end or the factors affecting this process may be unknown (Torales, O'Higgins, Castaldelli-Maia, & Ventriglio, 2020). Unfortunately, all the measures taken after this serious epidemic have remained incurable and the death rates continue to increase. The data available to scientists related to this virus are limited (it affects older and chronically ill individuals, has a very rapid transition, is transmitted through droplets, is larger than many viruses, and constantly changes the cell membrane) (Wu, Leung & Leung, 2020; Wu & Mc Googan, 2020; Lu & Shi, 2020) It is stated that the Covid-19, which is effective not only with the elderly population, but also on all age groups, is more effective in spreading the epidemic of young population due to the fact that young people and children spend milder and even without symptoms (WHO, 2020). For this reason, in many countries, education has started to be given distance education and students are invited to stay at home to prevent the spread of the epidemic. In our country, while providing distance education, the population under the age of 20 has been restricted. In a study, it was determined that the social competencies and life satisfaction of young people who were dependent on staying at home were negatively affected and they were also negatively affected psychologically (Yavaş Çelik, 2021).

Although alexithymia, known as emotional deafness, was first proposed to explain the symptoms seen in psychosomatic patients, today alexithymia is accepted as a personality trait that we encounter in many different psychiatric disorders, even in healthy populations (Şaşıoğlu, Gülol, & Tosun, 2014). Taylor, Parker,

and Bagby (1991) claim that individuals with alexithymia tend to engage in compulsive behaviors in order to regulate their emotions (Taylor et al., 1991). Speranza et al. (2004) suggested that individuals with alexithymia exhibit dependent behaviors because of their lack of insight and self-knowledge (Speranza et al., 2004). When the literature is reviewed, it is frequently seen with disorders such as psychoactive substance (Taylor et al., 1990, Uzun, Ates, Cansever, & Ozşahin, 2003, Thorberg, Young, Sullivan, & Lyvers, 2009; Berardis et al., 2009; Elmas, Cesur & Oral, 2017).

It has been determined that during the pandemic period, the duration of young people's exposure to social media increased (Ozturk Eyimaya & Yalçın Irmak, 2021). It is also known that social media use is associated with alexithymia (Berardis et al., 2009). Alexithymia is a serious problem when it is thought that it inhibits the ability to define and elaborate one's inner feelings, abstract thinking, and accept that somatic symptoms can be an expression of psychological distress (Şaşıoğlu et al., 2014). Spending a long time at home can increase young people's use of internet and social media. because most of the young people nowadays spend most of their free time by spending time on social media and internet. Few young people are engaged in activities such as painting and reading books anymore (Birinci, 2021). For this reason, it is thought that young people who have a lot of free time at home due to the pandemic can use social media and internet more. In addition, considering the negative effects on social and work relations, the impact of individuals on their lives is a very important problem. Therefore, In this study, we aimed to reveal the Relationship between Social Media Addiction Levels and Alexithymia in Young People Associated with Staying at Home During Pandemic Process.

Research questions

- What are the social media and alexithymia levels of young people?
- Is there a relationship between social media addiction and alexithymia?

Material and methods

Research design

A digital questionnaire was created by the researchers to minimize face-to-face interaction due to the pandemic. The digital survey form was shared on social media platforms (such as Whatsapp, Instagram, and Twitter) and respondents were asked to share it with other people. At the beginning of the digital questionnaire sent to the participants, they were asked whether they would like to participate in the study.

Research population and sample

The current study is in the descriptive and cross-sectional type, and the young people between the ages of 17-24 in Turkey are the population of the research. Youngs (n=520) individuals were reached using the snowball sampling method, which is one of the non-probabilistic sampling methods. The participants in the sample are students, Turkish citizens, Muslims, middle-income people and people who can communicate without any health problems.

Collection of the research data

The study was conducted with 520 young people who agreed to participate in the study between the dates of January the 1st and the 15th, 2021. Completing the questionnaire took an average of 10-15 minutes. Questionnaires (12) were not included in the study, since individuals under the age of 13 and over the age of 24 answered the digital questionnaire.

Inclusion criterias

- Being in the age range of 17-24,
- Being able to use the social media,
- To volunteer to participate in the study,
- In the process of quarantine at home and continuing education remotely.

Data collection tools

'The personal information form, the social media addiction scale and Toronto Alexithymia scale' were used as the data collection tools.

The personal information form consists: of a total of 16 questions prepared by the researchers in line with the literature, including some characteristics of socio-demographic and social media use (region of residence, age, gender, social media, television, and internet gaming time before and after the pandemic, increased duration of social media, television, internet gaming during the pandemic process, having difficulty in recognizing, discerning and verbalizing emotions, experiencing limitations in imagining, having a mechanical way of thinking, taking extreme care to be in harmony with the environment) (Craparo, 2011; Arcan & Yüce, 2016; Gao et al., 2018; Taş & Güneş, 2019).

The Social Media Addiction Scale (SMAS): It was developed by Tutgun-Ünal and Deniz (2015) to measure social media addiction. The scale consists of 41 items and is in 5-point Likert type. The distribution of the items into the scale's four different sub-dimensions are listed as (the items 1., 2., 3., 4., 5., 6., 7., 8., 9., 10., 11., 12. for Occupation sub-dimension; the items 13., 14., 15., 16., 17. for Mood Modification; the items 18., 19., 20., 21., 22. for Relapse, and the items 23., 24., 25., 26., 27., 28., 29., 30., 31., 32., 33., 34., 35., 36., 37., 38., 39., 40., 41. for Conflict). The Occupation sub-dimension measures the effect of social media on occupying the person, the Mood Modification sub-dimension measures the effect of social media on one's emotions, the Relapse sub-dimension measures the inability to control the use of social media and the repetition of it in the same dose, the Conflict sub-dimension measures the effect of social media on causing negative consequences in one's life. The lowest score that can be obtained from SMAS is 41 and the highest score is 205. The high score obtained from the scale indicates that social media addiction has also increased. In this study, the Cronbach Alpha coefficient was calculated as 0.97 for the total SMAS and 0.81-0.97 for the sub-dimensions.

Toronto alexithymia scale (TAS-20): It was developed by Taylor, Ryan and Bagby (1985). Later, Bagby, Parker and Taylor (1994) reduced the original version of the scale from 26 items to 20 items. The Turkish validity and reliability adaptation of the scale was performed by Güleç et al. (2009), and they calculated the Cronbach's Alpha coefficient of 0.78 and the internal consistency coefficient of the subscales between 0.57 and 0.80. The scale has 20-items, and it is in the form of 5-point Likert type. It has three sub-dimensions, and the first one is difficulty in identifying feelings (items 1, 3, 6, 7, 9, 13, 14), the second one is difficulty in describing feelings (items 2, 4, 11, 12, 17), and the third one is externally-oriented thinking (items 5, 8, 10, 15, 16, 18, 19, 20). While the scores of all the remaining items in the calculation are added together, the scores of the 4, 5, 10, 18 and 19 items are added up in reverse (Güleç et al., 2009). As the scores increase, the severity of alexithymia increases. For the cut-off score of the scale, it is recommended to take 51 points as the lower value, if it is desired to work with a group that is not alexithymic, and 59 points as the upper value, if it is desired to work with the alexithymic group. As the total score obtained from the scale increases, the level of alexithymia enhances. Individuals who score 51 and above on the scale are considered to be alexithymic (Güleç et al., 2009). In this study, the Cronbach Alpha coefficient was calculated between 0.84 for the total scale and 0.65-0.83 for the subscales.

Data analysis

The data were evaluated in the SPSS 24.0 (Statistical packet for Social Sciences for Windows) statistical program. In the statistical analysis, the suitability of the data to the normal distribution was evaluated with the Skewness and Kurtosis (± 1) distribution test, and it was determined that the data were not suitable for normal distribution. In the evaluation of the data collected for the study, in addition to descriptive statistics (percentages, frequencies, means, standard deviation, minimum and maximum values), Kruskal-Wallis tests were used for the comparison of two independent variables, and Mann-Whitney U tests for the comparison of three or more independent variables. The analyzes used for each of the statistical tests are detailed below the tables. You can see these reviews here (Table 2, 3, 4). Pearson correlation analysis was used to measure the relationship between SMAS, TAS-20 total and subscale scores. Pearson's correlation coefficients < 0.2 were expressed as very poor, 0.2-0.39 poor, 0.4-0.59 medium, 0.6-0.79 high, ≥ 0.8 very high correlation. The Cronbach Alpha coefficient was also calculated.

Ethical aspects of the research

The permission of the Kilis 7 Aralık University Ethics Committee (Ethics Committee Number: 2020/01) was obtained to conduct the study. In addition, Research Permission from the Republic of Turkey, Ministry of Health has also been obtained. Volunteering was taken as a basis by writing the purpose of the research on the digitally prepared form. This study was conducted in accordance with the Declaration of Helsinki Principles.

Results

The average age was 20.21 ± 2.07 years, the average social media usage before the pandemic was 3.17 ± 2.21 hours and the average social media usage after the pandemic was 5.25 ± 3.21 hours; TV watching average before the pandemic was 1.31 ± 1.36 hours and after the pandemic it was 2.21 ± 2.27 hours; Internet gaming average before the pandemic was 0.44 ± 1.04 hours and after the pandemic it was 0.97 ± 2.35 hours.

It was determined that 63.8% of the individuals participating in the study live in the Southeastern Anatolia region, 76.2% of them are between the ages of 17-21, 77.1% are women, 59.6% had the duration of usege social media of 1-3 hours before the pandemic, 43.7% had the duration of usege social media of 4-6 hours after the pandemic, social media usage increased during the pandemic of 85% of the participants, 55.6% had the duration of watching TV of 1-2 hours before the pandemic, 41.7% had the duration of watching TV of 3 and more hours after the pandemic, 54% increased the duration of TV watching during the pandemic, 4.6% had the duration of internet gaming of 3 and more hours before pandemic, 15.2% had the duration of internet gaming of 3 and more hours after the pandemic, 25.6% had the duration of internet gaming increased on during the pandemic, 40.0% had difficulty in noticing, discerning and verbalizing their feelings, 24.0% had limitations in imagination, 27.9% had a mechanical way of thinking, 47.7% took extreme care to be in harmony with the environment (Table 1).

Table 1. Distribution of socio-demographic and social media usage characteristics of the participants (n = 520).

		n	%
Region of living	Southeastern Anatolia	332	63.8
	Mediterranean	122	23.5
	Marmara	37	7.1
	Others*	29	5.6
Age	17-21 between the ages	396	76.2
	22-24 between the ages	124	23.8
Sex	Famale	401	77.1
	Male	119	22.9
Social media usage duration before the pandemic (hour)	< 1	35	6.7
	1-3	310	59.6
	4-6	139	26.7
	> 6	36	6.9
Social media usage duration after the pandemic (hour)	< 1	19	3.7
	1-3	139	26.7
	4-6	227	43.7
	> 6	135	26.0
Increase in social media use during the pandemic	Yes	442	85.0
	No	78	15.0
Duration of watching TV before the pandemic (hour)	< 1	162	31.2
	1-2	289	55.6
	≥ 3	69	13.3
Duration of watching TV after the pandemic (hour)	< 1	137	26.3
	1-2	166	31.9
	≥ 3	217	41.7
Increasing duration of TV watching during the pandemic	Yes	281	54.0
	No	239	46.0
Duration of internet gaming before pandemic (hour)	< 1	406	78.1
	1-2	90	17.3
	≥ 3	24	4.6
Duration of internet gaming after pandemic (hour)	< 1	374	71.9
	1-2	67	12.9
	≥ 3	79	15.2
Increasing duration of internet gaming during the pandemic	Yes	133	25.6
	No	387	74.4
Difficulty in noticing, discerning and verbalizing their feelings	Yes	208	40.0
	No	312	60.0
Having limitations in imagination	Yes	125	24.0
	No	395	76.0
Mechanical way of thinking	Yes	145	27.9
	No	375	72.1
Extreme care to be in harmony with the environment	Yes	248	47.7
	No	272	52.3
	Total	520	100.0

*Others=Eastern Anatolia Region 14, Aegean Region 7, Central Anatolia Region 6, Black Sea Region 2 person.

A significant difference was determined between the mean SMDS and TAS total scores in terms of participant's some status (Social media usage duration of young people before and after the pandemic, increase in social media use during the pandemic, duration of watching TV after the pandemic, increasing duration of TV watching during the pandemic, duration of internet gaming after pandemic, increasing duration of internet gaming during the pandemic, difficulty in noticing, discerning and verbalizing their feelings, having limitations in imagination, having a mechanical way of thinking) ($p < 0.05$) (Table 2).

Table 2. Comparison of some characteristics of participants' socio-demographic and social media use with SMAS and TAS mean scores ($n = 520$).

		SMAS		TAS	
		$\bar{X} \pm SS$	Önemlilik	$\bar{X} \pm SS$	Önemlilik
Region of living	Southeastern Anatolia	94.96 \pm 38.05	** $p=0.608$	49.44 \pm 12.14	** $p=0.240$
	Mediterranean	93.73 \pm 36.87		51.35 \pm 12.65	
	Marmara	90.54 \pm 38.94		50.40 \pm 12.07	
	Others*	100.17 \pm 35.39		50.96 \pm 9.92	
Age	17-21 between the ages	96.06 \pm 38.82	*** $p=0.657$	50.14 \pm 12.18	*** $p=0.809$
	22-24 between the ages	89.89 \pm 33.03		49.70 \pm 12.04	
Sex	Female	95.05 \pm 37.54	*** $p=0.255$	50.03 \pm 12.04	*** $p=0.906$
	Male	93.39 \pm 38.05		50.08 \pm 12.50	
Social media usage duration before the pandemic (hour)	< 1	90.68 \pm 45.69	** $p=0.036$	51.00 \pm 14.48	** $p=0.725$
	1-3	92.34 \pm 38.22		49.57 \pm 11.99	
	4-6	99.96 \pm 35.31		50.65 \pm 12.04	
	> 6	97.94 \pm 31.23		50.86 \pm 11.65	
Social media usage duration after the pandemic (hour)	< 1	70.84 \pm 36.75	** $p=0.001$	47.57 \pm 13.47	** $p=0.001$
	1-3	80.52 \pm 36.99		46.82 \pm 11.96	
	4-6	99.25 \pm 35.55		51.56 \pm 11.41	
	> 6	104.82 \pm 36.55		51.17 \pm 12.75	
Increase in social media use during the pandemic	Yes	99.81 \pm 37.22	*** $p=0.001$	51.00 \pm 12.11	*** $p=0.001$
	No	65.42 \pm 24.35		44.62 \pm 10.89	
Duration of watching TV before the pandemic (hour)	< 1	92.86 \pm 37.35	** $p=0.687$	50.79 \pm 12.91	** $p=0.230$
	1-2	95.83 \pm 37.46		49.34 \pm 12.02	
	≥ 3	93.92 \pm 39.33		51.24 \pm 10.62	
Duration of watching TV after the pandemic (hour)	< 1	91.25 \pm 37.79	** $p=0.029$	50.26 \pm 13.02	** $p=0.398$
	1-2	90.16 \pm 34.31		48.93 \pm 12.07	
	≥ 3	100.23 \pm 39.37		50.76 \pm 39.37	
Increasing duration of TV watching during the pandemic	Yes	100.95 \pm 37.84	*** $p=0.001$	50.95 \pm 12.10	*** $p=0.067$
	No	87.24 \pm 36.08		48.98 \pm 12.12	
Duration of internet gaming before pandemic (hour)	< 1	92.83 \pm 37.36	** $p=0.058$	49.76 \pm 12.12	** $p=0.013$
	1-2	102.90 \pm 38.72		52.56 \pm 12.35	
	≥ 3	94.45 \pm 35.98		45.37 \pm 10.09	
Duration of internet gaming after pandemic (hour)	< 1	91.34 \pm 37.17	*** $p=0.001$	49.83 \pm 12.12	*** $p=0.695$
	1-2	98.73 \pm 37.75		50.67 \pm 12.50	
	≥ 3	106.86 \pm 37.33		50.54 \pm 12.04	
Increasing duration of internet gaming during the pandemic	Yes	106.42 \pm 35.63	*** $p=0.001$	50.68 \pm 12.29	*** $p=0.389$
	No	90.60 \pm 37.49		49.82 \pm 12.10	
Difficulty in noticing, discerning and verbalizing their feelings	Yes	104.62 \pm 39.55	*** $p=0.001$	56.31 \pm 11.97	*** $p=0.001$
	No	88.00 \pm 34.80		45.87 \pm 10.34	
Having limitations in imagination	Yes	106.04 \pm 42.01	*** $p=0.001$	54.93 \pm 13.40	*** $p=0.001$
	No	91.05 \pm 35.44		48.50 \pm 11.30	
Mechanical way of thinking	Yes	111.56 \pm 42.19	*** $p=0.001$	54.88 \pm 12.64	*** $p=0.001$
	No	88.11 \pm 33.56		48.17 \pm 11.42	
Extreme care to be in harmony with the environment	Yes	97.47 \pm 38.62	*** $p=0.134$	51.11 \pm 12.31	*** $p=0.042$
	No	92.08 \pm 36.59		49.07 \pm 11.92	

SMAS= Social Media Addiction Scale, TAS= Toronto Alexithymia Scale. *Others=Eastern Anatolia Region 14, Aegean Region 7, Central Anatolia Region 6, Black Sea Region 2 person. **Kruskal Wallis testi.

The total SMAS mean score of the youth was 94.65 ± 37.63 , and the total TAS mean score was 50.04 ± 12.14 . It was determined that 44.6% of TAS has got ≥ 51 points (Table 3).

Table 3. Distribution of mean scores of SMAS and TAS total and sub-dimensions.

	$\bar{X} \pm SS$	Minimum	Maksimum
SMAS total	94.65 \pm 37.63	41	205
Busyness	32.71 \pm 12.34	12	60
Emotion Regulation	12.87 \pm 5.70	5	25
Repeat	10.85 \pm 5.44	5	25
Conflict	38.20 \pm 18.73	19	95
TAS	50.04 \pm 12.14	24	93
Difficulty Identifying Feelings	16.82 \pm 6.04	7	35
Difficulty Describing Feelings	12.60 \pm 3.62	5	25
Externally-Oriented Thinking	21.97 \pm 6.48	8	40
		n	%
TAS categorical values			
0-50 puan		288	55.4
≥ 51 puan		232	44.6

SMAS= Social Media Addiction Scale, TAS= Toronto Alexithymia Scale.

A positive and moderate relationship was determined between Social Media Addiction Scale and Toronto Alexithymia Scale ($r = 0.463$, $p = 0.001$). In other words, as social media addiction increases, the level of alexithymia also increases. A positive relationship was found between the Social Media Addiction Scale and all sub-dimensions of the Toronto Alexithymia Scale (Table 4).

Table 4. Correlation distribution of SMAS and TAS total and sub-dimensions.

		1	2	3	4	5	6	7	8
1 SMAS total									
2 Busyness	r	0.878							
	p	0.001							
3 Emotion Regulation	r	0.821	0.754						
	p	0.001	0.001						
4 Repeat	r	0.850	0.675	0.632					
	p	0.001	0.001	0.001					
5 Conflict	r	0.934	0.679	0.665	0.780				
	p	0.001	0.001	0.001	0.001				
6 TAS	r	0.463	0.365	0.398	0.386	0.457			
	p	0.001	0.001	0.001	0.001	0.001			
7 Difficulty Identifying Feelings	r	0.462	0.401	0.385	0.372	0.439	0.840		
	p	0.001	0.001	0.001	0.001	0.001	0.001		
8 Difficulty Describing Feelings	r	0.439	0.389	0.362	0.386	0.404	0.766	0.726	
	p	0.001	0.001	0.001	0.001	0.001	0.001	0.001	
9 Externally-Oriented Thinking	r	0.362	0.362	0.315	0.282	0.312	0.505	0.776	0.694
	p	0.001	0.001	0.001	0.001	0.001	0.001	0.001	0.001

*Correlation test, $p < 0.01$

As a result of simple linear regression analysis, a significant relationship was found between SMAS and TAS ($R = 0.463$; $R^2 = 0.214$; $p < 0.01$). According to the regression analysis; social media addiction has been found to affect alexithymia by 21.3% (Figure 1).

Discussion

During the pandemic period, it has been reported that young people use social media, play games on the internet, and spend time in front of the screen as the only method of being at home and socializing (Ozturk Eyimaya & Yalçın Irmak, 2021). When the literature is examined, it has been reported that individuals with alexithymia are frequently seen with the disorders such as, TV watching, mobile phone and internet addiction (Taylor et al., 1990; Uzun et al., 2003; Thorberg et al., 2009). For this reason, it was predicted that the use of social media, internet games and TV watching time would increase in young people due to the pandemic, and this study was conducted to evaluate the relationship between social media and alexithymia, considering that this situation will trigger alexithymia.

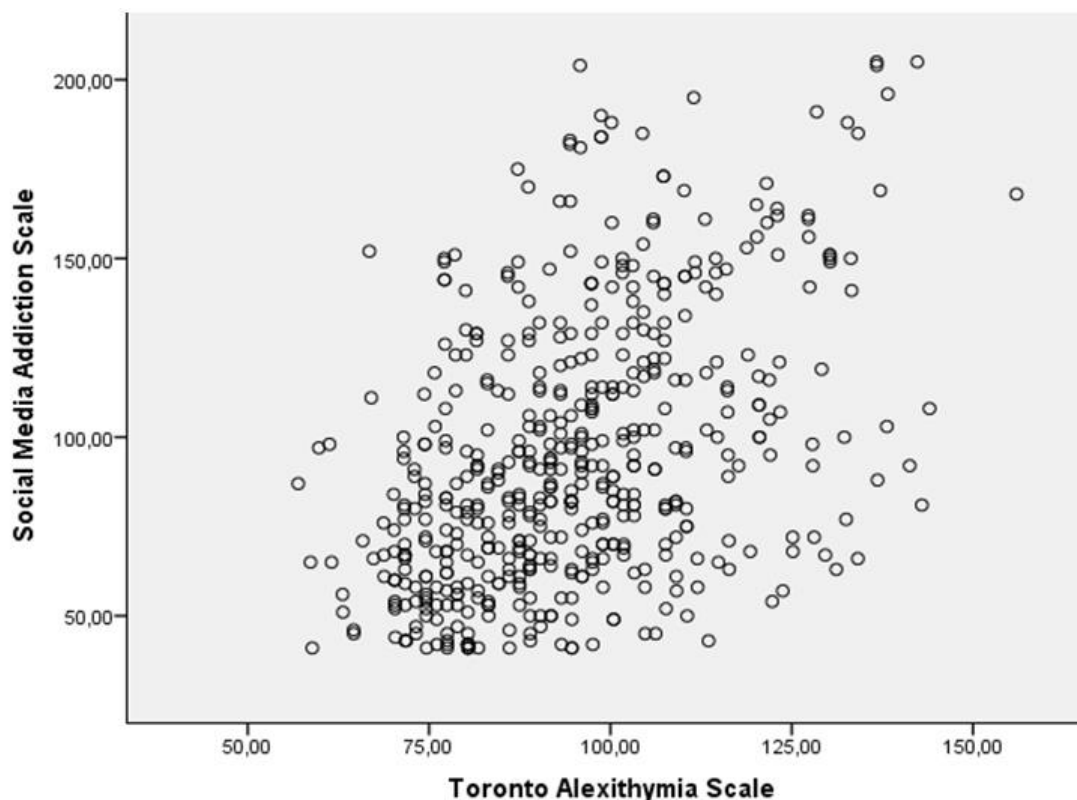


Figure 1. Regression analysis distribution between SMAS and TAS.

In the present paper, it was found that the SMAS score averages of the young people, who stated that the use of social media increased in the pandemic, and that there was an increase in watching television and playing games on the internet, was significantly higher. In addition, when we examine the duration of social media usage, TV watching and internet game playing of the young people in the pandemic; It was determined that the SMAS score averages of those who used social media for > 6 hours in the pandemic, those who watched television ≥ 3 hours in the pandemic, and who had a game time of ≥ 3 hours on the internet in the pandemic were significantly higher. All these results have shown us that the social media use of the young people, the time they play online games, and the time they watch TV have increased significantly in the pandemic. At the same time, before the pandemic, except for the use of social media, the SMAS score averages did not make a significant difference between the times of watching TV and playing internet games, and the increase between the SMAS mean scores before and after the pandemic in Table 2; It reveals the increase in the social media, TV watching and internet usage of the young people in the pandemic. These results are striking. It is reported that the internet and social media use is widespread among young people, and they mostly use social media to spend their free time, play internet games and watch TV (Bağcı, 2019). Young people have a lot of free time due to being at home in the Covid-19 pandemic. In the studies conducted during the Covid-19 pandemic process, it has been determined that the rate of participation in internet games has increased significantly, and the age group with the highest increase in gaming has been the adolescents and young people. Furthermore, it is stated that this increase is due to individuals' use of games to spend time at home, to linger, and to make use of their spare time (King, Delfabbro, Billieux, & Potenza, 2020; Göker & Turan, 2020). The results of this study are similar to the literature.

Alexithymic individuals have difficulty in recognizing, defining, verbally expressing their emotions, and distinguishing their emotions from bodily sensations. At the same time, the imagination and fantasy lives of individuals with alexithymia lack limited creativity, and their empathy skills are also not developed. For this reason, they are more mentally involved with objects and situations in the external world rather than leaning on their own inner world, and they also have a mechanical way of thinking (Epözdemir, 2012; Timoney & Holder, 2013). It has been determined that the SMAS score averages of young people who have difficulty in recognizing, discerning and verbalizing their emotions, which are among the symptoms of alexithymia, having problems in imagining, and having a mechanical thinking style are found to be significantly higher,

and also the social media addiction of youth with alexithymia has shown that situation. It is also stated in the literature that the individuals with alexithymia are more prone to social media addiction than other individuals (Craparo, 2011; Epözdemir, 2012; Timoney & Holder, 2013; Arcan & Yüce, 2016). Additionally, the TAS-20 score averages of the young people, who had difficulty in recognizing, discerning and verbalizing their emotions, having problems in imagining, having a mechanical way of thinking, and taking extreme care to be in harmony with the environment, were found to be significantly higher. These results showed that the symptoms of alexithymia observed in young people were parallel with the high average scores obtained from the scale, and these young people were at the alexithymic level.

It has been determined that the social media addiction levels of the young people were at a moderate level. It was found that the SMAS, which was answered by the young people, had the highest average score in the conflict sub-dimension and the lowest in the relapse sub-dimension. The questions in the conflict sub-dimension of the scale investigate whether the individuals continue to use social media even though it harms their social relations. The fact that this dimension has the highest score showed us that although young people know that they are harming them, they cannot give up using social media. Unfortunately, studies have shown that young people cannot resist this addiction. In many studies, it has been clearly seen that the use of social media among young people has increased and the use of social media among young people is becoming widespread (Hawi & Samaha, 2016; Çiftçi, 2018; Baz, 2018).

It was found that the young people had high levels of alexithymia, the highest mean scores for externally-oriented thinking and difficulty in identifying the feelings. In addition, it was found that 44.6% of the young people had alexithymia characteristics. In a similar study conducted with 515 university students in Greece, it was determined that 57% of the students did not have alexithymia, while 12.5% had alexithymia (Kandri, Bonotis, Floros, & Zafiropoulou, 2014). Alexithymia is a concept associated with feelings and interpersonal relationships. Alexithymic individuals usually do not go deep into their problems, and try to deal with them only superficially. Most of the time, they have difficulty in using their defense mechanisms. Therefore, they face many threats such as burnout, depression, social isolation, substance abuse, and social media addiction. In the current study, the high level of alexithymia is considered as the reason for the situation, in which the young people cannot continue their education, do not have social interaction, and use social media for socialization during the pandemic process.

When the relationship between Social Media Addiction and Alexithymia was examined, it was determined that there was a positive relationship between the two, and as social media addiction increased, the level of alexithymia also enhanced. Social media addiction was found to affect alexithymia by 21.3% according to the regression analysis. There are studies showing that there is a close relationship between alexithymia and social media addiction (Taylor, Bagby, & Parker, 1991; Berardis et al., 2009; Şaşıoğlu et al., 2014; Şar, 2018). However, this relationship is a controversial issue whether the individuals with alexithymia display addictive behaviors due to lack of insight and self-knowledge, or whether the social media addiction is caused by preventing the socialization and mutual relations in the individuals (Avcı, 2019). The relationship between social media and alexithymia stated in the literature (as the social media addiction increases, alexithymia increases/the social media addiction increases in people with alexithymia) (Berardis et al., 2009; Gao et al., 2018) has also been demonstrated with very strong results in the present study. It was determined that the TAS-20 mean scores of the young people, who used social media for 4-6 hours during the pandemic, and stated that their use of social media increased during the pandemic process, were higher. Moreover, it was determined that the TAS-20 scores of the young people, who used the Internet for 1-2 hours before the pandemic, were significantly higher. The studies in the literature reported that participants with higher internet addiction scores had higher alexithymia scores, and there was a positive relationship between the internet addiction and alexithymia scores (Craparo, 2011; Arcan & Yüce, 2016). The results of this study are in line with the findings of the literature.

Limitation

The study has a few limitations. One of them data could not be collected face to face due to the COVID-19 pandemic. Another is to have a device that supports the program to participate in this study and fill out the questionnaire. Those who do not have such a device were excluded from the study. In addition, internet requirements and the ability to fill in the questionnaire are needed to fill the questionnaire. Those who did not have the internet or the ability to fill in the questionnaire were excluded from the study.

Conclusion

It was determined that the social media usage, the duration of watching television and playing internet games of the young people increased during the pandemic process. It was also found that the social media addiction levels of the young people were at the medium level, and their alexithymia levels were high, and as social media addiction increased, the level of alexithymia also enhanced. For this reason, by dealing with young people with alexithymia more carefully and providing training to solve their problems, we believe that these individuals can be supported to improve their current and future relationships.

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