



ISSN: 0976-3031

Available Online at <http://www.recentscientific.com>

CODEN: IJRSFP (USA)

International Journal of Recent Scientific Research  
Vol. 9, Issue, 12(D), pp. 30026-30029, December, 2018

**International Journal of  
Recent Scientific  
Research**

DOI: 10.24327/IJRSR

## Research Article

### USING OF EXCESSIVE INTERNET MAY HAVE MORE MENTAL HEALTH PROBLEMS

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DOI: <http://dx.doi.org/10.24327/ijrsr.2018.0912.2979>

#### ARTICLE INFO

##### Article History:

Received 4<sup>th</sup> September, 2018  
Received in revised form 25<sup>th</sup>  
October, 2018  
Accepted 18<sup>th</sup> November, 2018  
Published online 28<sup>th</sup> December, 2018

##### Key Words:

Internet Addiction, Internet Users,  
Psychiatric Symptoms, BSI

#### ABSTRACT

**Background:** The usage of internet has increased rapidly in recent years, and this has brought about addiction. The negative aspects of internet overuse on young adults, such as sleep deprivation and attention deficits, are being increasingly recognized recently. **Purpose:** The purpose of current investigation was to examine the influence of Internet Addiction on mental health in college students **Method:** The sample consisted of (n=120) participants of either sex (Group I, n=74) addicted and (Group II, n=46) Non-addicted age ranging between (18-25) years. The instrument for data collection which was tagged "Internet Addiction Test (IAT) and Brief Symptom Inventory (BSI) was administered to the respondents and used for the study. **Results:** Analysis of the data indicates that internet addicted participants were more hostile, anxious, suffering with inferiority complex and feeling of dizziness in comparison to other. **Conclusion:** 62.1% internet addicted participants were found to be more anxious, feeling of tense, restless, nervousness, fatigue compared with non-addicted participants.

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#### INTRODUCTION

Internet addiction disorder is an interdisciplinary phenomenon and it has been studied from different viewpoints in terms of various sciences such as medicine, computer, sociology, law, ethics, and psychology. Internet addiction has been raised as a mental disorder in psychology and medical science and this disorder as a new form of addiction in recent years has attracted the attention of researchers from various fields including psychology, psychiatry, sociology and other disciplines[1,2]. However, the excessive smartphone use is strongly associated with a number of mental health issues, including stress and an increased risk of abnormal anxiety[3,4]. When internet usage interferes with one's daily life, the condition is called internet addiction (IA). Just like any other addiction, IA is accompanied by physiological dependence, tolerance, and withdrawal symptoms. Internet usage and IA are related to vulnerability and psychological, family and social stress several studies reported a positive correlation between IA, depression, and anxiety [5-7]. IA generally causes depression, anxiety, and a sense of isolation, thus a considerable number of individuals with IA experience stress and exhibit low self-esteem. It has been observed that the rates of depression, stress, and suicidal ideation increase as IA becomes more serious [8]

Much research[9-12] has shown that there is a positive relationship between internet addiction and mental health. Van Gelder [10] in his research on university students found that people who are prone to the Internet addiction, are easily tired and dejected. They are alone, bashful and shy, while having low quality of life and suffering from depression and other types of problems. Presence of Internet addiction is often accompanied by certain noteworthy neurological changes[13-15]. Individuals with Internet addiction have been found to report abnormal brain activation[16]. Internet addiction also reduces striatal dopamine transporters[17] and associate strongly with dopaminergic brain systems dysfunctions [18] indicating that it has a serious impact on the functioning of the brain.

##### Purpose of the Study

The main purpose of this study was to examine the influence of Internet addiction on mental health in college students, while specific ones are as follows:

To examine the influence of Internet addiction on mental health in college students

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**Hypotheses**

The following null hypotheses will be tested:

To find out the influence of Internet addiction on mental health in college students

**Instruments**

Internet addiction was assessed with Young’s IAT (Internet Addiction Test) [19]. The questionnaire contains 20 questions based on criteria for pathological gambling. These 20 questions reflect typical addictive behaviors. Widiyam to and McMurrans report that the scale mirrors six dimensions of Internet addiction: preoccupation, salience, excessive Internet use, neglect of obligations/work, anticipation, lack of self-control, and neglect of social life [20]. Degrees of Internet addiction have been classified using a point’s scale; the scoring range is 20-100: (a) 20-49 points - normal, (b) 50-79 points - moderate addiction, and (c) 80-100 points - severe addiction. Every question scores up to 5 points, with 1 point for very rare, 2 for rarely, 3 for often, 4 for very often, 5 for always. The scale shows very good internal consistency.

**Brief Symptom Inventory (BSI)**

Brief Symptom Inventory is the short form of SCL-90-R [21] and a means of screening psychological disorders. This questionnaire included the following nine symptoms: somatization (SOM), obsessive-compulsive (OC), interpersonal sensitivity (IS), depression (DEP), anxiety (AX), hostility (HOS), phobic anxiety (PHOB), paranoia (PAR), and psychoticism (PSY). The questionnaire also has three overall indexes: the total Positive Symptoms (PST), (the number of psychiatric symptoms regardless of the severity of each measure), Positive Symptom Distress index to assess the severity of symptoms, and Global Severity Index PSDI (GSI) (the scores indicate the number and severity of symptoms of distress). Each phrase of the questionnaire measures turmoil in a 5-point scale from 0 “not at all” to 4-severe”.

structure of dimensions are given; more consensus than differences between the two versions is observed. This questionnaire is a useful tool for researchers, particularly working related to the results and assessment of clinical treatment [34]

**METHOD**

The sample consisted of (n=120) participants divided into two groups (group I, n=74) i.e. Addicted (group II, n=46) Non-Addicted age ranging between (18-25) years. Mean age of (group I, n=74) was found to be 21.18±2.30 and mean age of (group II, n=46) was found to be 21.68± 3.51 year respectively.

**Procedure**

This Test was administered to the college going students by asking them to fill up the relevant demographic details. Later they were requested to answer both internet addiction test and brief Symptoms Inventory, they were asked to indicate their responses in the respective sheets given to them. Once the data were collected, they were screened for completeness

**Statistical Analysis**

Chi-square, Percentage and Mean, SD was used to analyze the data.

**RESULT & DISCUSSION**

The result of present study has been given below and consecutively discussed.

**Sample Characteristics**

With regard to socio demographic characteristics of the subjects (54.66%) were male and (46.33%) were female in both groups.

**Table 1** showing percentage of two group (internet addicted and non addicted) on Brief Symptom Inventory (BSI)

| Areas                     | Group | Not at all | A little bit | Moderately | Quite a bit | Extremely  | Refused   | Total | Less % | More % |
|---------------------------|-------|------------|--------------|------------|-------------|------------|-----------|-------|--------|--------|
| Somatization              | G-1   | 3(4.05%)   | 7(9.45%)     | 18(24.32%) | 19(25.67%)  | 25(33.78)  | 2(2.70%)  | 74    | 13.51% | 59.5%  |
|                           | G-2   | 8(17.39%)  | 7(15.21%)    | 7(15.21%)  | 10(21.73%)  | 11(23.91%) | 3(6.52%)  | 46    | 32.6%  | 45.6%  |
| Obsession-Compulsion      | G-1   | 8(10.81%)  | 13(17.56%)   | 13(17.56%) | 18(24.32%)  | 15(20.27%) | 7(9.45%)  | 74    | 28.3%  | 44.5%  |
|                           | G-2   | 9(19.56%)  | 4(8.69%)     | 10(21.73%) | 9(19.56%)   | 8(17.39%)  | 6(13.04%) | 46    | 28.2%  | 36.9%  |
| Interpersonal Sensitivity | G-1   | 4(5.40%)   | 7(9.45%)     | 13(17.56%) | 20(27.02%)  | 24(32.43%) | 5(6.75%)  | 74    | 14.8%  | 59.4%  |
|                           | G-2   | 7(15.21%)  | 8(17.39%)    | 6(13.04%)  | 11(23.91%)  | 12(26.08)  | 2(4.34%)  | 46    | 32.6%  | 50.0%  |
| Depression                | G-1   | 6(8.10%)   | 15(20.27%)   | 12(16.21%) | 16(21.62%)  | 20(27.02%) | 5(6.75%)  | 74    | 28.3%  | 48.6%  |
|                           | G-2   | 10(21.73%) | 13(28.26%)   | 8(17.39%)  | 9(19.56%)   | 5(10.86%)  | 1(2.17%)  | 46    | 50.0%  | 30.4%  |
| Anxiety                   | G-1   | 4(5.40%)   | 6(8.10%)     | 13(17.56%) | 22(29.72%)  | 24(32.43%) | 5(6.75%)  | 74    | 13.5%  | 62.1%  |
|                           | G-2   | 11(23.91%) | 5(10.86%)    | 6(13.04%)  | 11(23.91)   | 9(19.56%)  | 5(10.86)  | 46    | 34.7%  | 43.4%  |
| Hostility                 | G-1   | 4(5.40%)   | 5(6.75%)     | 19(25.67%) | 22(29.72%)  | 21(28.37%) | 4(5.40%)  | 74    | 12.1%  | 58.1%  |
|                           | G-2   | 13(28.26%) | 8(17.39%)    | 8(17.39%)  | 11(23.91%)  | 7(15.21%)  | 0(0%)     | 46    | 45.6%  | 39.1%  |
| Paranoid Ideation         | G-1   | 12(16.21%) | 13(17.56%)   | 18(24.32%) | 18(24.32%)  | 11(14.86%) | 2(2.70%)  | 74    | 33.7%  | 39.1%  |
|                           | G-2   | 12(26.08%) | 6(13.04%)    | 11(23.91%) | 10(21.73%)  | 7(15.21%)  | 0(0%)     | 46    | 39.1%  | 36.9%  |
| Phobic Anxiety            | G-1   | 8(10.81%)  | 18(24.32%)   | 15(20.27%) | 19(25.67%)  | 11(14.86%) | 3(4.05%)  | 74    | 35.1%  | 40.5%  |
|                           | G-2   | 16(34.78%) | 9(19.56%)    | 6(13.04%)  | 5(10.86%)   | 8(17.39%)  | 2(4.34%)  | 46    | 54.3%  | 28.2%  |
| Psychoticism              | G-1   | 11(14.86%) | 17(22.97%)   | 17(22.97%) | 16(21.62%)  | 7(9.45%)   | 6(8.10%)  | 74    | 37.8%  | 31.0%  |
|                           | G-2   | 13(28.26%) | 10(21.73%)   | 7(15.21%)  | 9(19.56%)   | 7(15.21%)  | 0(0%)     | 46    | 50.0%  | 34.7%  |

Although BSI is designed to measure psychiatric symptoms, Factor structure of its basic form is shown by a number of studies. Derogotis 9 Operating considers and states that although a slight difference between the practical and the

Table 1 indicate the overview of participants on their own psychological symptoms, in this table data categories from “not at all” and “a little bit” have been combined under the heading “% less,” data from the categories “quite a bit” and

“extremely.” have been combined under the heading “% more.” According to our findings, 59.5% internet addicted participants had more physical complaints in comparison to non-addicted group. In dimension of “obsession-compulsion” 44.5% addicted participants had more obsessive complaints in comparison to other. Finding also indicate that there were no difference found in interpersonal sensitivity group. 48.6 % addicted sample felt more hopeless, helpless, worthlessness and insomnia in comparison to other. The percentage of addicted participants (62.1%) were found to be higher in comparison to other on dimension of anxiety it indicates that addicted participants were more agitated, irritated, lack of concentration etc. 58.1% internet addicted group were found to be very hostile in comparison to other. There was no wide difference in paranoid ideation group. 40.5% internet addicted participants held excessive worried, fearful in comparison to other participants. There was no difference found in Psychoticism.

people with chronic fatigue have an increased risk for different illnesses [26].

### CONCLUSION

Nowadays, internet has been part of our daily lives. It has everything to offer the internet also becoming more and more important for everybody especially college students because it facilitates the students in many ways. Similar to every invention, the internet carries the number of advantages and disadvantages. However, the result of high levels of Internet use shows more negative effects by decreased social engagement. Internet addiction leaves negative effects on individuals. As prevention is better than treatment and according to this study it is necessary to take this phenomenon into consideration as a psychological problem that often involves the younger generation who are responsible for future society construction and through education.

**Table 2** Quantity of Psychiatric symptoms of two groups on Brief Symptom Inventory (BSI)

| S. N | Primary symptoms          | Groups  | Quantity of the symptoms |           | X2                 |
|------|---------------------------|---------|--------------------------|-----------|--------------------|
|      |                           |         | Less                     | More      |                    |
| 1    | Somatization              | Group-1 | 10(13.5%)                | 44(59.5%) | 5.76*<br>(p<.05)   |
|      |                           | Group-2 | 15(32.6%)                | 21(45.6%) |                    |
| 2    | Obsession-Compulsion      | Group-1 | 21(28.3%)                | 33(44.5%) | 0.15<br>N.S.       |
|      |                           | Group-2 | 13(28.2%)                | 17(36.9%) |                    |
| 3    | Interpersonal Sensitivity | Group-1 | 11(14.8%)                | 44(59.4%) | 4.23*<br>(p<.05)   |
|      |                           | Group-2 | 15(32.6%)                | 23(50%)   |                    |
| 4    | Depression                | Group-1 | 21(28.3%)                | 36(48.6%) | 5.77*<br>(p<.05)   |
|      |                           | Group-2 | 23(50%)                  | 14(30.4%) |                    |
| 5    | Anxiety                   | Group-1 | 10(13.5%)                | 46(62.1%) | 7.64**<br>(p<.01)  |
|      |                           | Group-2 | 16(34.7%)                | 20(43.4%) |                    |
| 6    | Hostility                 | Group-1 | 9(12.1%)                 | 43(58.1%) | 13.46**<br>(p<.01) |
|      |                           | Group-2 | 21(45.6%)                | 18(39.1%) |                    |
| 7    | Paranoid Ideation         | Group-1 | 25(33.7%)                | 29(39.1%) | 3.54<br>N.S.       |
|      |                           | Group-2 | 18(39.1%)                | 17(36.9)  |                    |
| 8    | Phobic Anxiety            | Group-1 | 26(35.1%)                | 30(40.5%) | 3.41<br>N.S.       |
|      |                           | Group-2 | 25(54.35)                | 13(28.2%) |                    |
| 9    | Psychoticism              | Group-1 | 28(37.8%)                | 23(31.0%) | 0.14<br>N.S.       |
|      |                           | Group-2 | 23(50%)                  | 16(34.7%) |                    |

\*\*Significant at p<.01 level, \*at p<.05

Table 2 Demonstrate 59.5% internet addicted participants had more physical complaints in comparison to non-addicted. The difference was statistically significant at (p<.05) level. Some studies reported similar finding that severe Internet addicts had the lowest ratings of promotion and perception of health status suggesting that Internet addiction has a negative influence on the health status of adolescents [22]. After analysis of the data it could be said that 59.5% internet addicted participants had more sensitive in interpersonal relationship in comparison to non-addicted. The difference was statistically significant (p<.05) level. 48.6 % addicted sample felt more hopeless, worthlessness and insomnia in comparison to other. The difference was statistically significant (p<.05) level. With regard to psychological aspects, the positive associations of IA and SA with depression and anxiety have been widely reported [23,24] The percentage of addicted group (62.1%) were found to be higher in comparison to other. In dimension of anxiety the difference was significant at (p<.01) level, it indicate that addicted participants were more fatigue, agitated, irritated, lack of concentration etc. 58.1% internet addicted participants were found to be very hostile in comparison to non- addicted participants. There was significant difference at (p<.01). Some other studies reported that Fatigue and exhaustion are mostly connected to a stressful way of life [25]. Further-more, chronic fatigue has negative consequences for health and 73% of

### Acknowledgement

The author appreciates all those who participated in the study and helped to facilitate the research process.

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**How to cite this article:**

Nooria Sultani et al. 2018, Using of Excessive Internet May Have More Mental Health Problems. *Int J Recent Sci Res.* 9(12), pp. 30026-30029. DOI: <http://dx.doi.org/10.24327/ijrsr.2018.0912.2979>

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