Problematic Internet Use and Emotion Regulation in University Students: a pilot study.

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Problematic Internet Use (PIU) has commonly been considered as a middle stage of the continuum between normative use of internet and internet addiction (1). Literature suggests as mainly symptoms of PIU the use of Internet as a maladaptive way to cope with negative affect and distress and the preference for online social interaction (2). Young adults with emotion regulation difficulties may show more PIU symptoms, especially those experiencing more stressful or challengeable periods in their lives and with daily contact with online tools and internet devices.

MATERIALS AND METHODS

Undergraduate students (n=72) from University of Lisbon were randomly invited to participate in the study. After informed consent, they completed a brief sociodemographic and heath questionnaire and Problematic Internet Use, status Alexithymia, Impulsivity and Negative Affect were measured through Portuguese versions of psychometrically adequate scales (Table 1).

RESULTS

Participants characteristics:

- Mean age = 21 years old (SD=3,72)

Positive correlations were found especially between GPIU2 and NU and SS; and between GPIUS2 and DIF (Table 2).

| Table 2 - Spearr | nan Correla [.] | tions (* $p \leq$ | :.05 ** p ≤ | ≤.01) | |
|------------------|--------------------------|-------------------|---------------|---------------|--------------|
| | GPIUS2 Total | GPIUS2 POSI | GPIUS2 MR | GPIUS2 DSR | GPIUS2 NO |
| SUPPS-P NU | ,463** | ,331** | ,321** | ,356** | ,429** |
| SUPPS-P LPV | | | | | |
| SUPPS-P LPM | | | | | |
| SUPPS-P SS | ,385** | | ,375** | ,253* | ,328** |
| SUPPS-P PU | | | | | |
| TAS-20 Total | | | | | |
| TAS-20 DIF | ,269* | | | ,244* | |
| TAS-20 DDF | | | | | |
| TAS-20 EOT | | | | | |
| HADS-Anx | | | | | |
| HADS-Dep | ,241* | | | | |

Principal Component Analysis identified 2 main profiles (Table 3 and Chart 1).

| ble 3 - PC | Δ | Total Variance Explained | | | | | | |
|------------|-------|--------------------------|--------------|-------------------------------------|---------------|--------------|--|--|
| | | Initial Eigenvalues | | Extraction Sums of Squared Loadings | | | | |
| Component | Total | % of Variance | Cumulative % | Total | % of Variance | Cumulative % | | |
| 1 | 4,454 | 37,116 | 37,116 | 4,454 | 37,116 | 37,116 | | |
| 2 | 1,902 | 15,850 | 52,966 | 1,902 | 15,850 | 52,966 | | |

Chart 1 - PCA

| Co | omponent Plot | |
|------|---------------|---------------------------|
| 1,0- | | MODEL 1 (37% variance) |
| | SUPPS_PosUrg | PILL in individuals with |

- Mainly female (68%), without health problems (92%)
- Mainly no medications intake (73%) or psychoactive substances use (93%) in the last 3 months
- 19,7% reported relatives or close friends with gambling/gaming problems
- Moderate level of PIU (M=37,5; SD=13,46)

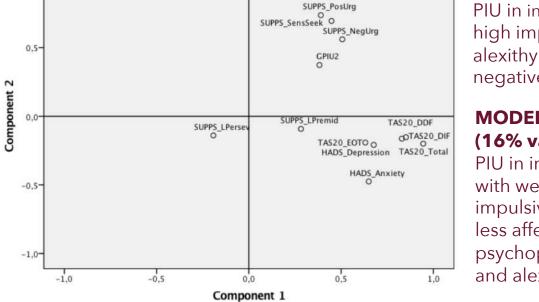
Table 1 – Psychometric tools

| Generalized | 15 items (5-point rating scale) assessing: |
|---|--|
| Problematic | POSI (preference for online social interaction) |
| Internet Use Scale- | MR (mood regulation) DSR (deficient self- |
| 2, GPIUS2 (3) | regulation) NO (negative outcomes) |
| Toronto | 20 items (5-point rating scale) assessing: |
| Alexithymia Scale | DIF (difficulties in identifying feelings) |
| of 20 items, | DDF (difficulties in describing feelings) |
| TAS-20 (4) | EOT (externally-oriented thinking) |
| Short Version of Impulsive Behavior Scale, S-UPPSP (5) | 20 items (4-point rating scale) measuring: NU (negative urgency) LPM (lack of premeditation) LPV (lack of perseverance) SS (sensation seeking) PU (positive urgency) |
| Hospital Anxiety and Depression Scale, HADS (6) | Anxiety and Depression subscales (each one composed of 7 items, 4-point rating scale) |

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PIU in individuals with high impulsivity, alexithymia and negative affect.

MODEL 2 (16% variance)

PIU in individuals with well-stablished impulsive traits and less affective psychopathology and alexithymia.

CONCLUSIONS

PIU seem to be particularly related with patterns involved in maladaptive emotion regulation, namely NU and SS (impulsivity) and also DIF (alexithymia).

PCA identified 2 specific profiles of individuals with PIU: 1) one with trace and state characteristics associated with emotion dysregulation; and 2) other, in which seem to prevail impulsive traits (especially sense of urgency and SS, excluding lack of premeditation and perseverance).

These findings may highlight specific features associated to PIU in university students, which need to be further investigated in different groups and larger samples. Preventive and harm reduction strategies and programs regarding PIU in this specific population may be required.

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