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Screen Addiction, Psychological Distress, Coping Styles, and Life Satisfaction among Young Men and Women

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Abstract: Screen addiction is an ever-growing issue in today's day and age, it negatively affects our mental health, relationships, productivity, and overall well-being. The aim of the study is to explore the relationship between screen addiction, psychological distress, coping styles and life satisfaction among young adults. A total of 120 students (60 males, 60 females) between the age of 18-25 participated in the study. A correlational design with t-tests was employed in this study. Standardized scales were used to measure screen addiction, psychological distress, coping styles, and life satisfaction. Results found a significant positive correlation between psychological distress and screen addiction, while no significant relationship was found between screen addiction and life satisfaction. Additionally, significant gender differences were observed in coping styles, with males scoring higher on behavioral disengagement and humor. These findings highlight the complex role of coping in screen addiction and highlight a need to introduce interventions tailored to young adults in colleges.

Keywords: *Screen Addiction, Psychological Distress, Coping Styles, Life Satisfaction, Young Adults*

1. Introduction

Even though the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) does not include screen addiction as a behavioral addiction, it is an ever-growing issue in today's day and age. Screen addiction refers to a compulsive need to use screen devices such as smartphones, iPads, laptops, gaming consoles, TV, etc., it includes any digital screen that keeps your attention for long periods of time. Social media addiction, gaming addiction, porn

addiction, and similar addictions can be classified under the broader umbrella of screen addiction. Whether it be schoolwork, playing video games, or using social media the amount of time spent on screens is exponentially growing. On comparison, children born in the 1970s were exposed to screens around age 4 whereas, children born in today's time are exposed to screens since they are 4 months old (Zimmerman et al., 2007). Spending extended periods of time on screens has been correlated with higher stress, depression, and anxiety symptoms (Francisquini et al., 2024). The way individuals deal with this stress is dependent on their coping styles. Coping refers to the strategies an individual might use to manage the internal or external demands of the environment.

Ultimately, these variables affect an individual's life satisfaction, which reflects a person's general sense of fulfillment. It is important to understand how variables like screen addiction, psychological distress, coping styles, and life satisfaction intersect and affect an individual's life, this is especially important in the case of young adults and adults as they represent the age group most immersed in screens (Smith, 2015).

A survey done by TheHindu (March, 2024) revealed that about 60% children between the age of 5-16 years displayed behaviors which were indicative towards a potential screen addiction, 85% parents expressed their difficulty in managing their child's online content consumption. The survey was conducted by a company Baatu Tech, the data was collected from a sample of 1000 parents.

A study by Mahmoud et al. (2012) sought to understand the relationship among young adult college students' depression, anxiety, stress, demographics, life satisfaction, and coping styles. 508 undergraduate students between the ages 18-24 were enrolled in the study. Results found that maladaptive coping was the main predictor of depression, anxiety, and stress.

A study was conducted to understand screen time trajectories and psychosocial well-being among Chinese adolescents. A sample of 1480 participants took part in the study. Findings revealed that adolescents with high screen time exhibited a higher likelihood of presenting depressive symptoms, anxiety symptoms, and emotional problems. They were less likely to demonstrate prosocial behavior or make use of positive coping styles (Wang et al., 2024).

Screen Addiction

To explain screen addiction, it is imperative to first understand addictive behavior. "Under the DSM definition, addiction is not based on the duration or frequency of use, but rather the behavioral health consequences of that use" (Medicine et al., 2016). Stiglic and Viner (2019) described screen addiction as "pathological compulsive use of screen-based devices."

Lin et al. (2019) defined screen addiction as “excessive, uncontrolled, and obsessive media consumption using screen media devices”.

According to Saritepeci et al. (2023) screen addiction refers to “psychological and behavioral withdrawal symptoms of individuals when they are disconnected from the context of using screen media such as smartphones, tablets, TV, etc.” Internet addiction, digital game addiction, computer addiction, TV addiction, smartphone addiction, etc., all belong to subtypes of screen addiction (Macit and Kavafoğlu, 2019).

Khalili-Mahani et al. (2019) conducted a study to explore the patterns of stress and various screen uses in relation with self-admitted screen addiction. A sample of 459 participated in the study. Results showed a diversified link between screen dependence and emotional and perceptual stressors that transfer the pattern of screen use towards entertainment and social networking.

A study by Aragay et al. (2023) sought to understand the differences in screen addiction in the past 15 years. 118 patients treated at the Behavioral Addictions Unit of Consorci Sanitari de Terrassa in Spain were included in the study. The sample was split into three groups according to the time frame in which they started treatment: between 2005 and 2010 (before the rise in new technologies), between 2011 and 2019 (a time of major ICT development), and between 2020 and 2021 (with massive internet use due to pandemic). The findings indicated that prevalence of screen addiction cases associated with technological advancements increased over the course of the study, the increase was accentuated during the COVID-19 period.

A study was conducted to investigate the impact of screen exposure on screen addiction and sensory processing in typically developing children aged 6-10 years. The study examined 71 children who spent less than two hours in front of a screen and 74 children who spent two hours or more in front of one. Results found, screen addiction, distraction, and sedentary factors to be statistically significant in the group with high screen exposure (Tekeci et al., 2024).

Psychological Distress

Belay et al. (2021) described psychological distress as “emotional suffering characterized by symptoms of depression (e.g., lack of interest, sadness, and hopelessness) and anxiety (e.g., restlessness and tension). It is often accompanied by physical symptoms including, insomnia, headaches, and fatigue, which can vary across different populations and contexts.”

Azizi et al. (2021) described it as “an unpleasant state of depression and anxiety with both physical and emotional manifestations, often accompanied by psychosocial and

behavioral symptoms”. According to DSM-5, “Psychological distress is an undifferentiated cluster of symptoms, including anxiety and depression, functional impairments, disruptive personality traits, and behavioral challenges (Battle, 2013)”.

A study by Jackson and Finney (2002) sought to understand the parallels between negative life events and psychological distress among a population of young adults. Students from three different universities participated in the study. Results found younger students more likely to be angry or hostile towards negative life events than older ones.

A study was conducted to explore racial and gender differences in discrimination and psychological distress. A sample of 3894 black and white young adults between the age of 18-28 were enrolled in the study. Results found that black men and women experience more types of discrimination than white men and women. However, the positive correlation between psychological distress and discrimination was more significant in white men than it was found in black men and women (Smith & Jen’nan, 2024).

Sacker and Cable (2010) conducted a study to examine transitions to adulthood and psychological distress in young adults born 12 years apart. Results found delaying the transition to adulthood promotes psychological health, but failing to transition to independent living is linked to psychological distress.

Ishtiaq et al. (2021) conducted a study to analyze parental perception on screen time and psychological distress in young children. 230 employees from medical and non-medical departments from a teaching hospital in Karachi, Pakistan took part in the study. Findings revealed average daily screen time for boys and girls was 2.5 and 2 hours respectively. Preschool children had a higher screen time in contrast to school-aged children while emotional score was higher for school-aged children.

Coping Styles

Coping is defined as “thoughts and behaviors mobilized to manage internal and external stressful situations” (Folkman and Moskowitz, 2004). Venner (1988) described it as “conscious and voluntary mobilization of acts, different from ‘defense mechanisms’ that are subconscious or unconscious adaptive responses, both of which aim to reduce or tolerate stress.” According to Coppens et al. (2010) “coping is divided into reactive coping (a reaction following the stressor) and proactive coping (aiming to neutralize future stressors)”

Everly and Lating (2002) specified “coping strategies can be divided into adaptive strategies (that reduce stress and promote long-term well-being, including, exercise, relaxation, and good nutrition) versus maladaptive strategies (that reduce stress in short term but erode longer-term well-being, including drug and alcohol abuse and interpersonal withdrawal).”

Khodarahimi and Fathi (2016) conducted a study which sought to understand the relationship between mental health, coping styles, and risk-taking behaviors in young adults. 92 males and 208 females participated in the study. Results found 11% variability of total risk-taking behavior was explained by coping styles. Men had a higher score in confrontive coping styles and risk-taking behavior.

A study was conducted to examine the correlation between mobile addiction and coping styles among Chinese adolescents. China National Knowledge Infrastructure (CNKI), WANFANG DATA, Chongqing VIP Information Co., Ltd (VIP), PubMed, Web of Science, Embase, and PsycINFO were searched to perform a meta-analysis. No significant correlation was found between positive coping styles and mobile addiction, but moderate positive correlation was found between negative coping style and mobile addiction in adolescents (Lu et al., 2021).

A study was conducted by Li et al. (2021) to explore the relationship between coping styles and psychological distress among insomnia disorder patients. The sample included 79 adult insomnia patients and 80 healthy people as control. Analysis showed that while negative coping style score was significantly higher in insomnia patients, control group had a significantly higher positive coping style score.

A study was conducted to understand the association between psychological distress, coping style, and health habits in nursing students. 181 Japanese nursing students enrolled in the study. Results found that psychological distress was significantly and positively associated with avoidance coping and negatively with active coping (Tada, 2017).

Life Satisfaction

Life satisfaction is defined as “assessment of one’s life as a whole, rather than just their present state of happiness, is known as life satisfaction” (Adhikari and Kewalramani, 2024). Sousa and Lyubomirsky (2001) described it as “a contentment with or acceptance of one’s life circumstances, or the fulfillment of one’s wants and needs for one’s life as a whole” Diener et al. (2002) defined it as “a person’s cognitive and affective evaluations of his or her life”

A study was conducted by Matheny et al. (2002) to explore coping resources, perceived stress, and life satisfaction among American and Turkish university students. Result found that these models explained between 30-62% of variance, with social support and a sense of financial freedom being particularly helpful in predicting life satisfaction.

A study was conducted to examine life satisfaction and active coping style as predictors of recovery from surgery. A sample of 112 adult patients undergoing different surgical

procedures were enrolled in the study. Findings revealed that lower life satisfaction was seen in patients who had a complicated recovery (Kopp et al., 2003).

A study by Koivumaa-Honkanen (2001) sought to understand self-reported life satisfaction and recovery from depression in patients. 188 depressive patients out of which 137 had major depression participated in the study. Results found depression has a significant effect of life satisfaction, but life satisfaction concurrently improves with depression recovery.

2. Purpose

The purpose is to study the Impact of Screen Addiction on Psychological Distress, Coping Styles, Life Satisfaction among Young Adults

3. Hypothesis

H₁: Screen addiction will be positively correlated with psychological distress.

H₂: Screen addiction will be negatively correlated with life satisfaction.

H₃: Screen addiction will be significantly correlated with coping styles.

H₄: There will be a significant gender difference in coping styles among young adults.

4. Method

4.1 Sample

A total sample of 120, including 60 males and 60 females between the age of 18 to 25 was collected from the city Chandigarh, India.

4.2 Measures

Multiple Screen Addiction Scale (MSAS): The Multiple Screen Addiction Scale was used to measure screen addiction for the study among young adults between the age of 18 to 25. The scale was developed by Saritepeci (2021). The scale consisted of 16 items and the rating scale included never (1), rarely (2), sometimes (3), often (4), and always (5), its subdimensions include Excessive Screen Time, Compulsive Behavior, and Loss of Control.

Kessler Psychological Distress Scale (K10): The Kessler Psychological Distress Scale was used to measure psychological distress among young adults between the age of 18 to 25. The Psychological Distress Scale was developed by Kessler et al. (2003). The scale consists of a 10-item questionnaire with a five-level response rating scale including none of the time (1), a little of the time (2), some of the time (3), most of the time (4), and most of the time (5).

Brief COPE: The scale was used to measure the different ways of coping in young adults between the age of 18 to 25. The Brief COPE questionnaire was developed by Carver (1997). The questionnaire consisted of 28 items. The scale used a 4-point rating scale including

not at all (1), little bit (2), medium amount (3), and doing a lot (4). The scale had 14 sub divisions including, self-distraction, active coping, denial, substance use, use of emotional support, use of instrumental support, behavioral disengagement, venting, positive reframing, planning, humor, acceptance, religion, and self-blame.

Satisfaction with Life Scale (SWLS): The Satisfaction with Life Scale was used to measure life satisfaction for the study. The scale was developed by Diener (1985). SWLS, a five-item scale was designed to measure global life satisfaction. The rating scale included strongly disagree (1), disagree (2), slightly disagree (3), neither agree nor disagree (4), slightly agree (5), agree (6), and strongly agree (7).

4.3 Procedure

The participants were informed about the purpose of the research, and the questionnaires were filled through google forms. Each participant was thanked for their cooperation and kind help. Standardized psychological tests were administered to the participants.

5. Analysis of Data

Results

Table 1: N, Mean, and Standard Deviation

	Gender	Multiple Screen Addiction	Psychological Distress	Self-Distraction	Active Coping	Denial	Substance Use	Emotional Support	Instrumental Support	Behavioural Disengagement	Venting	Positive Reframing	Planning	Humor	Acceptance	Religion	Self-Blame	Life Satisfaction
N	Female	60	60	60	60	60	60	60	60	60	60	60	60	60	60	60	60	60
	Male	60	60	60	60	60	60	60	60	60	60	60	60	60	60	60	60	60
Mean	Female	43.4	26.9	5.02	5.27	3.97	3.32	4.87	4.20	3.87	4.38	4.97	5.22	4.15	5.02	4.33	4.67	18.1
	Male	43.1	24.8	5.42	5.53	4.13	3.88	4.73	4.63	4.48	4.58	5.10	5.57	5.23	5.47	4.63	4.98	17.8
Standard deviation	Female	10.5	10.0	1.48	1.41	1.76	1.59	1.61	1.56	1.58	1.40	1.55	1.75	1.97	1.80	1.78	1.80	7.38
	Male	10.3	8.08	1.58	1.59	1.71	1.81	1.82	1.89	1.81	1.68	1.68	1.88	1.89	1.94	1.92	1.98	8.35

Table 2: Correlation Matrix

	Multiple Screen Addiction	Psychological Distress	Self-Distraction	Active Coping	Denial	Substance Use	Use Of Emotional Support	Use Of Instrumental Support	Behavioural Disengagement	Venting	Positive Reframing	Planning	Humor	Acceptance	Religion	Self-Blame	Life Satisfaction
Multiple Screen Addiction	—																
Psychological Distress	0.419***	—															
Self-Distraction	0.351***	0.360***	—														
Active Coping	0.026	0.074	0.519***	—													
Denial	0.243**	0.480***	0.325***	0.167	—												
Substance Use	0.158	0.267**	0.205*	0.124	0.540***	—											
Use Of Emotional Support	-0.017	0.060	0.346***	0.371***	0.253**	0.183*	—										
Use Of Instrumental Support	-0.011	0.065	0.294**	0.254**	0.306***	0.272**	0.649***	—									
Behavioural Disengagement	0.371***	0.540***	0.244**	-0.014	0.520***	0.507***	0.232*	0.330***	—								
Venting	0.281**	0.334***	0.384***	0.184*	0.485***	0.396***	0.367***	0.482***	0.490***	—							
Positive Reframing	0.280**	0.114	0.550***	0.480***	0.141	0.111	0.413***	0.433***	0.195*	0.428***	—						
Planning	0.274**	0.317***	0.629***	0.536***	0.213*	0.091	0.355***	0.361***	0.309***	0.468***	0.649***	—					
Humor	0.319***	0.141	0.381***	0.148	0.116	0.298***	0.001	0.098	0.297***	0.310***	0.287**	0.196*	—				
Acceptance	0.192*	0.122	0.452***	0.440***	0.103	0.095	0.261**	0.335***	0.117	0.316***	0.611***	0.587***	0.359***	—			
Religion	0.122	0.123	0.241**	0.274**	0.315***	0.333***	0.288**	0.407***	0.261**	0.414***	0.371***	0.408***	0.036	0.281**	—		
Self-Blame	0.430***	0.475***	0.482***	0.211*	0.481***	0.368***	0.093	0.138	0.447***	0.536***	0.321***	0.517***	0.310***	0.327***	0.178	—	
Life Satisfaction	0.063	-0.179	0.101	0.090	-0.053	0.006	0.229*	0.149	0.027	0.114	0.230*	0.034	0.102	0.116	0.191*	-0.234**	—

Table 3: Independent Sample T Test

		Statistic	df	p
Multiple Screen Addiction	Student's t	0.175	118	0.861
Psychological Distress	Student's t	1.252	118	0.213
Self-Distracton	Student's t	-1.434	118	0.154
Active Coping	Student's t	-0.972	118	0.333
Denial	Student's t	-0.526	118	0.600
Substance Use	Student's t	-1.820	118	0.071
Use Of Emotional Support	Student's t	0.425	118	0.672
Use Of Instrumental Support	Student's t	-1.371	118	0.173
Behavioral Disengagement	Student's t	-1.990	118	0.049
Venting	Student's t	-0.708	118	0.481
Positive Reframing	Student's t	-0.451	118	0.653
Planning	Student's t	-1.056	118	0.293
Humor	Student's t	-3.071	118	0.003
Acceptance	Student's t	-1.319	118	0.190
Religion	Student's t	-0.887	118	0.377
Self-Blame	Student's t	-0.917	118	0.361
Life Satisfaction	Student's t	0.185	118	0.853

Note. $H_a \mu_{\text{Female}} \neq \mu_{\text{Male}}$ **Table 4: Group Descriptives**

	Group	N	Mean	Median	SD	SE
Multiple Screen Addiction	Female	60	43.40	43.00	10.50	1.356
	Male	60	43.07	43.50	10.31	1.331
Psychological Distress	Female	60	26.85	27.50	10.04	1.296
	Male	60	24.77	25.00	8.08	1.044
Self-Distracton	Female	60	5.02	5.00	1.48	0.191
	Male	60	5.42	5.00	1.58	0.203
Active Coping	Female	60	5.27	5.00	1.41	0.182
	Male	60	5.53	6.00	1.59	0.205
Denial	Female	60	3.97	3.50	1.76	0.227
	Male	60	4.13	4.00	1.71	0.221
Substance Use	Female	60	3.32	3.00	1.59	0.205
	Male	60	3.88	4.00	1.81	0.234
Use Of Emotional Support	Female	60	4.87	5.00	1.61	0.208
	Male	60	4.73	5.00	1.82	0.235
Use Of Instrumental Support	Female	60	4.20	4.00	1.56	0.201
	Male	60	4.63	4.00	1.89	0.244
Behavioral Disengagement	Female	60	3.87	4.00	1.58	0.204
	Male	60	4.48	4.00	1.81	0.233
Venting	Female	60	4.38	4.50	1.40	0.181
	Male	60	4.58	5.00	1.68	0.217

Positive Reframing	Female	60	4.97	5.00	1.55	0.200
	Male	60	5.10	5.00	1.68	0.217
Planning	Female	60	5.22	5.00	1.75	0.226
	Male	60	5.57	5.50	1.88	0.243
Humor	Female	60	4.15	4.00	1.97	0.255
	Male	60	5.23	5.00	1.89	0.244
Acceptance	Female	60	5.02	5.00	1.80	0.232
	Male	60	5.47	6.00	1.94	0.250
Religion	Female	60	4.33	4.00	1.78	0.230
	Male	60	4.63	5.00	1.92	0.248
Self-Blame	Female	60	4.67	4.00	1.80	0.232
	Male	60	4.98	5.00	1.98	0.255
Life Satisfaction	Female	60	18.05	18.50	7.38	0.952
	Male	60	17.78	17.00	8.35	1.078

6. Discussion of Results

On the basis of correlation analysis, the results found that there is a significant positive correlation between psychological distress and multiple screen addiction ($r=0.41$, $p<.001$). The results support the hypothesis that there will be a significant positive correlation between psychological distress and multiple screen addiction. The outcomes of this study corroborate the findings of previous studies like of Ahmed (2022), the study sought to explore screen time addiction and its relationship with borderline personality disorder and psychological distress. 150 participants were enrolled in the study. Findings indicated that there is a significantly positive relation between screen time addiction and psychological distress and between screen time addiction and borderline personality disorder.

The results found that life satisfaction has significant positive correlation with use of emotional support ($r=0.22$, $p<.05$), positive reframing ($r=0.23$, $p<.05$), and religion ($r=0.19$, $p<.05$). It has a significant negative correlation with self-blame ($r=-0.23$, $p<.01$). Life satisfaction has no significant relationship with multiple screen addiction, thus the hypothesis that there will be a significant negative correlation of multiple screen addiction with life satisfaction is contradicted. According to earlier research findings conducted on nursing students to examine the levels of internet addiction, loneliness, and life satisfaction, no significant relationship was found between students' internet addiction, loneliness, and life satisfaction. However, a positive relationship was found between loneliness and life satisfaction (Turan et al., 2020).

Problem focused coping strategies include active coping, planning, and use of instrumental support. In the present study, active coping came out to have a significant positive

correlation with self-distraction ($r=0.51$, $p<.001$). Planning had a significant positive correlation with multiple screen addiction ($r=0.27$, $p<.01$), psychological distress ($r=0.31$, $p<.001$), self-distraction ($r=0.62$, $p<.001$), active coping ($r=0.53$, $p<.001$), use of emotional support ($r=0.35$, $p<.001$), use of instrumental support ($r=0.36$, $p<.001$), behavioral disengagement ($r=0.30$, $p<.001$), venting ($r=0.46$, $p<.001$), and positive reframing ($r=0.64$, $p<.001$). Results found out that use of instrumental support was significantly positively correlated with self-distraction ($r=0.29$, $p<.01$), active coping ($r=0.25$, $p<.01$), denial ($r=0.30$, $p<.001$), substance use ($r=0.27$, $p<.01$), and use of emotional support ($r=0.64$, $p<.001$). The Goodness-of-fit hypothesis suggests that the extent to which each strategy will be effective is determined by the perceived controllability of the event (Lazarus, 1993).

Emotion focused coping strategies include use of emotional support, positive reframing, acceptance, humor, and religion. Findings indicate that use of emotional support is significantly positively correlated with self-distraction ($r=0.34$, $p<.001$), active coping ($r=0.37$, $p<.001$), denial ($r=0.25$, $p<.01$), and substance use ($r=0.18$, $p<.05$). Positive reframing had significant positive correlation with multiple screen addiction ($r=0.28$, $p<.01$), self-distraction ($r=0.55$, $p<.001$), active coping ($r=0.48$, $p<.001$), use of emotional support ($r=0.41$, $p<.001$), use of instrumental support ($r=0.43$, $p<.001$), behavioral disengagement ($r=0.19$, $p<.05$), and venting ($r=0.42$, $p<.001$). Acceptance came out to be positively correlated with multiple screen addiction ($r=0.19$, $p<.05$), self-distraction ($r=0.45$, $p<.001$), active coping ($r=0.44$, $p<.001$), use of emotional support ($r=0.26$, $p<.01$), use of instrumental support ($r=0.33$, $p<.001$), venting ($r=0.31$, $p<.001$), positive reframing ($r=0.61$, $p<.001$), planning ($r=0.58$, $p<.001$), and humor ($r=0.35$, $p<.001$). Humor had a significant positive correlation with multiple screen addiction ($r=0.31$, $p<.001$), self-distraction ($r=0.38$, $p<.001$), substance use ($r=0.29$, $p<.001$), behavioral disengagement ($r=0.29$, $p<.001$), venting ($r=0.31$, $p<.001$), positive reframing ($r=0.28$, $p<.01$), and planning ($r=0.19$, $p<.05$). Results found that religion has a significant positive correlation with self-distraction ($r=0.24$, $p<.01$), active coping ($r=0.27$, $p<.01$), denial ($r=0.31$, $p<.001$), substance use ($r=0.33$, $p<.001$), use of emotional support ($r=0.28$, $p<.01$), use of instrumental support ($r=0.40$, $p<.001$), behavioral disengagement ($r=0.26$, $p<.01$), venting ($r=0.41$, $p<.001$), positive reframing ($r=0.37$, $p<.001$), planning ($r=0.40$, $p<.001$), and acceptance ($r=0.28$, $p<.01$). Previous study by Zhou et al. (2017) explored the role of coping styles in personality and internet addiction. Findings revealed that emotion focused coping accounts for the relationship between big five personality and adolescent internet addiction.

Maladaptive or avoidant coping strategies include self-distraction, denial, venting, substance use, behavioral disengagement, and self-blame. Results found that self-distraction is

significantly positively correlated with multiple screen addiction ($r=0.35$, $p<.001$), and psychological distress ($r=0.36$, $p<.001$). Denial had significant positive correlation with multiple screen addiction ($r=0.24$, $p<.01$), psychological distress ($r=0.48$, $p<.001$), and self-distraction ($r=0.32$, $p<.001$). Venting had significant positive correlation with multiple screen addiction ($r=0.28$, $p<.01$), psychological distress ($r=0.33$, $p<.001$), self-distraction ($r=0.38$, $p<.001$), active coping ($r=0.18$, $p<.05$), denial ($r=0.48$, $p<.001$), substance use ($r=0.39$, $p<.001$), use of emotional support ($r=0.36$, $p<.001$), use of instrumental support ($r=0.48$, $p<.001$), and behavioral disengagement ($r=0.49$, $p<.001$). Substance use had significant positive correlation with psychological distress ($r=0.26$, $p<.01$), self-distraction ($r=0.20$, $p<.05$), and denial ($r=0.54$, $p<.001$). Findings revealed that behavioral disengagement has significant positive correlation with multiple screen addiction ($r=0.37$, $p<.001$), psychological distress ($r=0.54$, $p<.001$), self-distraction ($r=0.24$, $p<.01$), denial ($r=0.52$, $p<.001$), substance use ($r=0.50$, $p<.001$), use of emotional support ($r=0.23$, $p<.05$), and use of instrumental support ($r=0.33$, $p<.001$). Self-blame had significant positive correlation with multiple screen addiction ($r=0.43$, $p<.001$), psychological distress ($r=0.47$, $p<.001$), self-distraction ($r=0.48$, $p<.001$), active coping ($r=0.21$, $p<.05$), denial ($r=0.48$, $p<.001$), substance use ($r=0.36$), behavioral disengagement ($r=0.44$, $p<.001$), venting ($r=0.53$, $p<.001$), positive reframing ($r=0.32$, $p<.001$), planning ($r=0.51$, $p<.001$), humor ($r=0.31$, $p<.001$), and acceptance ($r=0.32$, $p<.001$). Similar findings were found in previous studies which sought to understand social media addiction, escapism, and coping strategies and their association with problematic internet use in adolescents. Results found that problematic internet use was associated with negative coping strategies, preferring virtual life, virtual pleasure, and escapism (Yildirim et al., 2024).

An Independent sample t-test was conducted to compare coping styles between males and females. Findings revealed that males scored significantly higher than females on behavioral disengagement ($t=-1.99$). Similarly, males scored significantly higher on humor than females ($t=-3.07$). The results thus support the hypothesis that there will be a significant difference between males and females in coping strategies. These findings corroborate with the previous studies which sought to explore gender differences in the use of engagement and disengagement coping strategies. 277 females and 293 males undergoing chemotherapy were enrolled in the study. Findings revealed that men reported higher scores in humor and substance use whereas women scored higher for denial venting self-distraction (Oppegaard et al., 2020).

7. Conclusion

The present study highlights the complex interplay between screen addiction, psychological distress, life satisfaction, and coping strategies. Screen addiction was positively correlated with psychological distress, but no significant relationship was found between screen addiction and life satisfaction. Although, life satisfaction was related to coping styles like use of emotional support, positive reframing, and religious coping. Life satisfaction was also found to be negatively related to self-blame.

Problem focused coping styles which are generally considered adaptive demonstrated complex patterns in this study. Active coping showed a positive correlation with self-distraction, indicating individuals attempting to directly address stressors may simultaneously rely on avoidant strategies. Similarly, planning was positively correlated with screen addiction, psychological distress, adaptive strategies (use of emotional support, positive reframing), and maladaptive strategies (self-distraction, behavioral disengagement, venting), which suggested planning in this context of screen use may also reflect overthinking when stressor is less controllable, hence contributing to greater stress. The use of instrumental support was also associated with adaptive strategies (active coping, emotional support) and maladaptive strategies (denial, substance use, self-distraction), highlighting that screen addiction is a factor which is hard to control, hence even adaptive strategies may entangle with maladaptive strategies.

Use of emotional support showed positive correlation with adaptive strategies (active coping) and maladaptive strategies (self-distraction, denial, substance use) suggesting that support seeking may coexist with avoidance. Positive reframing was positively correlated screen addiction and maladaptive strategies (venting, self-distraction) highlighting that positive reframing may be less effective in uncontrollable stress context like screen overuse. Similarly, humor and religion also showed positive association with screen addiction and maladaptive behaviors (substance use, venting, denial), indicating that they may have served as avoidance-based strategies.

As expected, maladaptive coping strategies such as self-distraction, denial, venting, substance use, behavioral disengagement, and self-blame showed significant positive correlations with screen addiction and psychological distress. Results found that males tend to rely more on behavioral disengagement and humor as compared to females. Independent samples t-test was conducted to examine these gender differences.

The findings in this study highlight the need for interventions that promote use of healthy coping strategies. Awareness campaigns should be held in colleges to aware the

students about the ill-effects of prolonged screen use. Students should be encouraged to seek help if they experience distress, counselling facilities should be made available for the same.

Limitations

The use of convenience sampling may have introduced sampling bias, limiting the external validity of the findings. The sample size was relatively small and cannot be representative of the whole population, also the study focused only on young adults which again cannot be representative of other age groups. Although standard psychometric tests were employed, screen addiction, psychological distress, coping styles, and life satisfaction are complex variables and cannot be fully captured by self-report measures alone. Finally, cultural variables were not examined, hence limiting the cultural validity of the results.

References

- Adhikari, T., & Kewalramani, S. (2024). A Comparative Study on Life Satisfaction and Well-Being Among the Residents of Urban and Rural Communities. *International Journal of Indian Psychology*, 12(2).
- Ahmed, A. (2022). Screen time addiction and its relationship with borderline personality disorder and psychological distress. *Annals of Human and Social Sciences*, 3(2), 785-795.
- Aragay, N., Vallès, V., Ramos-Grille, I., Garrido, G., Grimalt, E. G., Miranda Ruiz, E., & Jovell-Fernández, E. (2023). Differences in screen addiction in the past 15 years. *International Journal of Environmental Research and Public Health*, 21(1), 1.
- Azizi, M., Ebadi, A., Ostadtaghizadeh, A., Dehghani Tafti, A., Roudini, J., Barati, M., ... & Bidaki, R. (2021). Psychological distress model among Iranian pre-hospital personnel in disasters: a grounded theory study. *Frontiers in psychology*, 12, 689226.
- Battle, D. E. (2013). Diagnostic and statistical manual of mental disorders (DSM). In *Codas* (Vol. 25, No. 2, pp. 191-192).
- Belay, A. S., Guangul, M. M., Asmare, W. N., & Mesafint, G. (2021). Prevalence and associated factors of psychological distress among nurses in public hospitals, Southwest, Ethiopia: A cross-sectional study. *Ethiopian Journal of Health Sciences*, 31(6).
- Coppens, C. M., de Boer, S. F., & Koolhaas, J. M. (2010). Coping styles and behavioural flexibility: towards underlying mechanisms. *Philosophical Transactions of the Royal Society B: Biological Sciences*, 365(1560), 4021-4028.

- Diener, E., Lucas, R. E., Oishi, S., & Suh, E. M. (2002). Looking up and looking down: Weighting good and bad information in life satisfaction judgments. *Personality and Social Psychology Bulletin*, 28(4), 437-445.
- Everly Jr, G. S., & Lating, J. M. (2002). *A clinical guide to the treatment of the human stress response*. Boston, MA: Springer US.
- Folkman, S., & Moskowitz, J. T. (2004). Coping: Pitfalls and promise. *Annu. Rev. Psychol.*, 55(1), 745-774.
- Francisquini, M. C. J., Silva, T. M. D. S., Santos, G. C. D., Barbosa, R. D. O., Dias, P. H. G., Ruiz, A. B., ... & Stabelini, A. (2024). Associations of screen time with symptoms of stress, anxiety, and depression in adolescents. *Revista Paulista de Pediatria*, 43, e2023250.
- Ishtiaq, A., Ashraf, H., Iftikhar, S., & Baig-Ansari, N. (2021). Parental perception on screen time and psychological distress among young children. *Journal of Family Medicine and Primary Care*, 10(2), 765-772.
- Jackson, P. B., & Finney, M. (2002). Negative life events and psychological distress among young adults. *Social Psychology Quarterly*, 186-201.
- Khalili-Mahani, N., Smyrnova, A., & Kakinami, L. (2019). To each stress its own screen: a cross-sectional survey of the patterns of stress and various screen uses in relation to self-admitted screen addiction. *Journal of medical Internet research*, 21(4), e11485.
- Khodarahimi, S., & Fathi, R. (2016). Mental health, coping styles, and risk-taking behaviors in young adults. *Journal of Forensic Psychology Practice*, 16(4), 287-303.
- Koivumaa-Honkanen, H., Honkanen, R., Antikainen, R., Hintikka, J., Laukkanen, E., Honkalampi, K., & Viinamäki, H. (2001). Self-reported life satisfaction and recovery from depression in a 1-year prospective study. *Acta Psychiatrica Scandinavica*, 103(1), 38-44.
- Kopp, M., Bonatti, H., Haller, C., Rumpold, G., Söllner, W., Holzner, B., ... & Günther, V. (2003). Life satisfaction and active coping style are important predictors of recovery from surgery. *Journal of psychosomatic research*, 55(4), 371-377.
- Lazarus, R. S. (1993). Coping theory and research: past, present, and future. *Biopsychosocial Science and Medicine*, 55(3), 234-247.
- Li, Y., Cong, X., Chen, S., & Li, Y. (2021). Relationships of coping styles and psychological distress among patients with insomnia disorder. *BMC psychiatry*, 21(1), 255.
- Lin, T. T., Kononova, A., & Chiang, Y. H. (2020). Screen addiction and media multitasking among American and Taiwanese users. *Journal of Computer Information Systems*.

- Lu, G. L., Ding, Y. M., Zhang, Y. M., Huang, H. T., Liang, Y. P., & Chen, C. R. (2021). The correlation between mobile phone addiction and coping style among Chinese adolescents: a meta-analysis. *Child and adolescent psychiatry and mental health*, 15(1), 60.
- Macit, Z. B., & Kavafoğlu, S. (2019). Screen: Subject of all information technology addiction. *Middle Black Sea Journal of Health Science*, 5(3), 293-301.
- Mahmoud, J. S. R., Staten, R. T., Hall, L. A., & Lennie, T. A. (2012). The relationship among young adult college students' depression, anxiety, stress, demographics, life satisfaction, and coping styles. *Issues in mental health nursing*, 33(3), 149-156.
- Matheny, K. B., Curlette, W. L., Aysan, F., Herrington, A., Gfroerer, C. A., Thompson, D., & Hamarat, E. (2002). Coping resources, perceived stress, and life satisfaction among Turkish and American university students. *International Journal of Stress Management*, 9(2), 81-97.
- Medicine, N. a. O. S. E. A., Division, H. a. M., Policy, B. O. H. S., Education, D. O. B. a. S. S. A., Sciences, B. O. B. C. a. S., & Statistics, C. O. N. (2016). *Measuring Recovery from Substance Use or Mental Disorders: Workshop Summary*. National Academies Press.
- Oppegaard, K. R., Dunn, L. B., Kober, K. M., Mackin, L., Hammer, M. J., Conley, Y. P., ... & Miaskowski, C. (2020, September). Gender Differences in the Use of Engagement and Disengagement Coping Strategies in Oncology Patients Receiving Chemotherapy. In *Oncology nursing forum* (Vol. 47, No. 5, p. 586).
- Pti. (2024, March 25). 60% children at risk of digital addiction: Survey. The Hindu. <https://www.thehindu.com/sci-tech/technology/60-children-at-risk-of-digital-addiction-survey/article67989890.ece>
- Sacker, A., & Cable, N. (2010). Transitions to adulthood and psychological distress in young adults born 12 years apart: constraints on and resources for development. *Psychological Medicine*, 40(2), 301-313.
- Saritepeci, M., Yildiz Durak, H., & Atman Uslu, N. (2023). A latent profile analysis for the study of multiple screen addiction, mobile social gaming addiction, general mattering, and family sense of belonging in university students. *International Journal of Mental Health and Addiction*, 21(6), 3699-3720.
- Smith, A. (2015). Chapter Three: A „week in the life analysis of smartphone users. URL: <http://www.pewinternet.org/2015/04/01/chapter-three-a-week-in-the-lifeanalysis-of-smartphone-users>.

- Smith, I. Z., & Jen'nan, G. R. (2024). Racial and gender differences in discrimination and psychological distress among young adults. *Social Science & Medicine*, 354, 117070.
- Sousa, L., & Lyubomirsky, S. (2001). Life satisfaction. *Encyclopedia of women and gender: Sex similarities and differences and the impact of society on gender*, 2, 667-676.
- Stiglic, N., & Viner, R. M. (2019). Effects of screentime on the health and well-being of children and adolescents: a systematic review of reviews. *BMJ open*, 9(1), e023191.
- Tada, A. (2017). The associations among psychological distress, coping style, and health habits in Japanese nursing students: a cross-sectional study. *International Journal of Environmental Research and Public Health*, 14(11), 1434.
- Tekeci, Y., Torpil, B., & Altuntaş, O. (2024). The Impact of Screen Exposure on Screen Addiction and Sensory Processing in Typically Developing Children Aged 6–10 Years. *Children*, 11(4), 464.
- Turan, N., Durgun, H., Kaya, H., Aştı, T., Yılmaz, Y., Gündüz, G., ... & Ertaş, G. (2020). Relationship between nursing students' levels of internet addiction, loneliness, and life satisfaction. *Perspectives in psychiatric care*, 56(3), 598-604.
- Venner, M. (1988). Adjustment, coping and defense mechanisms--deciding factors in the therapeutic process. *Zeitschrift für die gesamte innere Medizin und ihre Grenzgebiete*, 43(2), 40-43.
- Wang, W., Jiang, W., Zhu, L., Lu, C., Li, Y., Lai, W., & Guo, L. (2024). Screen time trajectories and psychosocial well-being among Chinese adolescents: a longitudinal study. *BMC psychiatry*, 24(1), 863.
- Yildirim Demirdöğen, E., Akinci, M. A., Bozkurt, A., Bayraktutan, B., Turan, B., Aydoğdu, S., ... & Ferahkaya, H. (2024). Social media addiction, escapism and coping strategies are associated with the problematic internet use of adolescents in Türkiye: a multi-center study. *Frontiers in Psychiatry*, 15, 1355759.
- Zhou, Y., Li, D., Li, X., Wang, Y., & Zhao, L. (2017). Big five personality and adolescent Internet addiction: The mediating role of coping style. *Addictive behaviors*, 64, 42-48.
- Zimmerman, F. J., Christakis, D. A., & Meltzoff, A. N. (2007). Television and DVD/video viewing in children younger than 2 years. *Archives of pediatrics & adolescent medicine*, 161(5), 473-479.