DOI: 10.55646/jaren.galenos.2026.43179
J Acad Res Nurs 2026;12(1):47-53



# The Relationship Between Various Stress Factors and Social Media Addiction Among Nurses

## *Hemşirelerde Çeşitli Stres Faktörleri ile Sosyal Medya Bağımlılığı Arasındaki İlişki*

Nükhet Bayer[1], Bayram Demir[2]

[1]Lokman Hekim University Faculty of Nursing, Department of Nursing, Ankara, Türkiye
[2]Batman University Faculty of Arts and Sciences, Department of Sociology, Batman, Türkiye

**Cite this article as:** Bayer N, Demir B. The relationship between various stress factors and social media addiction among nurses. J Acad Res Nurs. 2026;12(1):47-53

## ABSTRACT

**Objective:** This study utilized the conservation of resources theory and self-perception theory to assess the relationship between two stress factors, parental status (having children) and working in stressful nursing working units (intensive care unit and emergency unit), and their relationship with virtual communication, virtual tolerance, and perceived social media addiction. The study was based on the conservation of resources theory and self-perception theory.

**Methods:** A cross-sectional research design was used. Data were analyzed using structural equation modeling to examine the relation among stress factors, virtual communication, virtual tolerance, and perceived social media addiction.

**Results:** Parental status and working in an intensive care unit were significantly associated with higher virtual communication scores, which in turn were related to higher levels of virtual tolerance and perceived social media addiction. Years of professional experience were significantly and negatively associated with virtual communication, virtual tolerance, and perceived addiction. However, working in an emergency unit was not found to be a significant predictor. The model explained more than half of the variance in virtual tolerance, nearly half of the variance in perceived social media addiction, and approximately one-fourth of the variance in virtual communication.

**Conclusion:** The findings highlight the importance of examining the relationship between occupational stress factors and social media use among nurses. Further research is needed to explore additional stress factors and develop strategies to manage stress and reduce problematic social media use in nursing populations.

**Keywords:** Virtual tolerance, virtual communication, perceived addiction, stress, nursing

## ÖZ

**Amaç:** Bu çalışma, kaynakların korunması kuramı ve öz-algı kuramı temelinde, ebeveynlik durumu (çocuk sahibi olma) ve stresli hemşirelik birimlerinde çalışma (yoğun bakım ve acil servis) gibi iki stres faktörünün sanal iletişim, sanal tolerans ve algılanan sosyal medya bağımlılığı ile ilişkisini incelemeyi amaçlamaktadır.

**Yöntem:** Araştırmada kesitsel araştırma tasarımı kullanılmıştır. Değişkenler arasındaki ilişkiyi incelemek amacıyla yapısal eşitlik modellemesi kullanılmıştır.

**Bulgular:** Ebeveynlik durumu ve yoğun bakım ünitesinde çalışma, sanal iletişim puanları ile ilişkili bulunmuştur. Sanal iletişim ise sanal tolerans ve algılanan sosyal medya bağımlılığı puanları ile ilişkili bulunmuştur. Meslekte geçirilen yıl sayısı, sanal iletişim, sanal tolerans ve algılanan bağımlılıkla anlamlı fakat negatif yönde ilişkili bulunmuştur. Ayrıca, acil serviste çalışmanın anlamlı bir yordayıcı olmadığı saptanmıştır. Model; sanal toleranstaki varyansın yarısından fazlasını, algılanan sosyal medya bağımlılığındaki varyansın yaklaşık yarısını ve sanal iletişimdeki varyansın dörtte birini açıklamıştır.

**ORCID IDs:** NB. 0000-0003-3177-0596; BD. 0000-0003-2547-2664

**Corresponding Author:** Nükhet Bayer,
**E-mail:** nukhetbayer@yahoo.com

**Received Date:** 08.03.2026 **Accepted Date:** 16.04.2026
**Publication Date:** 28.04.2026

Copyright© 2026 University of Health Sciences Türkiye, Gaziosmanpaşa Training and Research Hospital. Published by Galenos Publishing House on behalf of University of Health Sciences Türkiye, Gaziosmanpaşa Training and Research Hospital. This is an open access article under the Creative Commons AttributionNonCommercial 4.0 International (CC BY-NC 4.0) License.

Copyright© 2026 Sağlık Bilimleri Üniversitesi Gaziosmanpaşa Eğitim ve Araştırma Hastanesi. Sağlık Bilimleri Üniversitesi, Gaziosmanpaşa Eğitim ve Araştırma Hastanesi adına Galenos Yayınevi tarafından yayımlanmıştır. Creative Commons Atıf-GayriTicari 4.0 Uluslararası (CC BY-NC 4.0) Uluslararası Lisansı ile lisanslanmış, açık erişimli bir makaledir.

**Sonuç:** Hemşirelerde iş stresi faktörleri ile sosyal medya kullanımı arasındaki ilişkinin incelenmesinin önemini ortaya koymaktadır. Gelecekteki araştırmalarda stres faktörlerinin sosyal medya kullanımı ile ilişkisi incelenmeli ve hemşirelerin stresle başa çıkmalarını destekleyecek stratejiler geliştirilmelidir.

**Anahtar kelimeler:** Sanal tolerans, sanal iletişim, bağımlılık algısı, stres, hemşirelik

## INTRODUCTION

It can be argued that one of the most influential technological factors shaping social life in the 21st century is internet-based technology, which enables interpersonal interaction to occur independently of time and space. Social media applications, which have become widespread over the last fifteen years, have acted as a catalyst in this process by accelerating both individual-individual and individual-technology interactions. In the social sciences, the relationship between society, the individual, and technology, as well as their mutual influence, has been the subject of numerous studies and scholars. Manuel Castells [1] addressed this relationship by introducing the concept of the "network society" in his book The Rise of the Network Society, published in 2000. According to Castells [1], the development of the internet and the widespread adoption of social media have significantly transformed the ways in which individuals communicate and interact. The field of healthcare can also be considered a significant sphere of social interaction, particularly in terms of professional practice and communication. As part of social life, healthcare personnel are likewise increasingly involved in the use of social media platforms.

Healthcare personnel have first-hand contact with patients, so they must be able to communicate with patients and build rapport [2]. However, stress experienced in the workplace can hinder performance [2] and is to be related to turnover intentions [3]. To overcome stress, nurses can turn to different forms of support. Social media has been found to be either a stressor, a resource, and/or a tool for coping with stress [4]. Social media has been at the forefront of much research due to its widespread use and ease of access across the world [5]. However, despite social media "rapidly bleeding into the workplace" [6], most of the research in this area is conducted on college students. The current study hypothesized that nurses who experience various stress factors turn to social media, which is then related to their addiction and perception of addiction. For this model, both the conservation of resources (COR) [7] and self-perception theory [8] were utilized. The rest of the introduction is structured to discuss the stress factors examined, social media, and the theories used for evaluating the interplay of factors.

Stress is described as a person's sense of external demands that exceed their perception of their ability to handle such expectations [2]. Nursing can lead to high levels of occupational stress, and this stress has a detrimental effect on both physical and mental health [9]. "Stress from patients and their families, workload stress, stress from conflicts with supervisors, and stress from conflicts with peers" explained 40% of the turnover intentions of nurses [2]. Due to nursing being a stressful job [9], the researchers hypothesized that more years on the job could be viewed as a stress factor.

From the existing research that focuses on specific nursing working units, the critical care (intensive care) working unit was found to be related to increased levels of stress [10]. Similarly [11], refers to how cross-sectional research has demonstrated that the work stress levels of emergency department nurses are very high. Although nursing units have previously been researched, the majority of this work focuses on burnout levels and how it relates to things like care quality or employment outcomes [12], their perceptions of their work environment [13], and their working conditions [12,14]. The current study included both intensive care unit and emergency unit nurses and examined their social media addiction and perception [10,11].

Moreover, as referred to by [15], interpersonal problems influence the stress levels of nurses [16], talk about the challenges that doctors experience while attempting to manage and balance their job and families. Childcare is a major source of stress for nurses [17,18]. Having children in a household has been associated with stress [19]. Therefore, the current study examined the relationship between having children and social media addiction and perception.

Social media addiction can be defined in various ways. One way to define social media addiction is to divide it into two types: virtual tolerance and virtual communication. Tolerance relates to one's tolerance for screen time. Communication relates to the need to develop close bonds with others [20]. Prior studies on nursing students found that they scored higher in virtual communication compared to virtual tolerance [21,22]. As reported by [22], prior research on virtual tolerance and communication has tended to focus on either technical domains [23], "or students from [the] Faculty of Education [24], and [students from] mass communication" [25]. As outlined by [26], virtual communication scores have increased during coronavirus disease-2019. The current study advances previous research by focusing on practicing nurses rather than students [3], refer to [27] and note the dearth of research on nurses' views toward social media. It is crucial to investigate the relationship between nurses and factors that may be related to their use of technology, smartphones, and in particular, social media. Among the limited existing research, several researchers have looked at the impact of social media addiction on job engagement and perceived work overload [28]. Nevertheless, neither research examined if factors that can lead to stress (working unit differences, number of years on the job, and children) are related to social media addiction and perception.

Furthermore, although there are studies that focus on social media addiction, albeit limited, to date, there exists no study that examines the perception of nurses about social media addiction. Perceived social media addiction (PSMA) has in general been studied in limited areas [2,5], therefore one of the aims of the study was to examine both social media addiction and perceived addiction.

The variations that one might anticipate based on stress may be explained using the COR theory [7]. An imbalance between an individual's situation and environmental needs can be used to explain stress [29]. Due to nursing being a very stressful job, often nurses feel a loss of resources or a lack of gain in resources in their work environment. This can direct the nurses to search for other outlets to gain new resources to deal with a stressful environment. Resource investment, which entails investing in resources to guard against resource loss and increase stress tolerance, is one aspect of resource conservation. One resource that individuals use to boost their resources and deal with stress is social media; it can be easily accessed through a smartphone anytime. It provides an opportunity for people to connect with their loved ones, exchange information, and stimulate one another [30]. Thus, it is a way to energize one's self; however, as research indicates, there are detrimental aspects of social media due to its addictive nature [31]. The current study defined stress as working in intensive care or emergency units, having children, and the number of years on the job. Although the theory of COR has been utilized in organizations, these studies focus on organizational roles and behaviors [32]. This is the first study to utilize this theory to examine social media addiction and perception.

Self-perception theory asserts that individuals examine their own behavior to form their perceptions and attitudes [8]. Therefore, the excessive use of social media (communication and tolerance) is expected to later have a relationship with perception of addiction. In other words, the perception or attitude would follow the behavior of participating in social media in a problematic or addictive manner.

Specifically, the following questions were formulated as seen in Figure 1:

**Hypothesis 1:** Stress factors (working in intensive care or emergency units, parental status, number of years on the job) predict virtual communication scores.

**Hypothesis 2:** Virtual communication predict both virtual tolerance and PSMA.

**Hypothesis 3:** Virtual tolerance predict PSMA.

**Hypothesis 4:** Is PSMA indirectly predicted by the various stress factors (working in intensive care or emergency units, parental status, number of years on the job).

**Hypothesis 5:** Is virtual tolerance indirectly predicted by the various stress factors (working in intensive care or emergency units, parental status, number of years on the job).

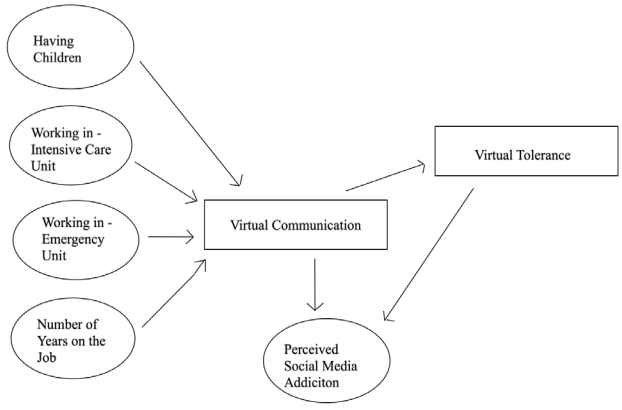



**Figure 1.** Model that encompasses stress factors and social media

## MATERIAL AND METHOD

### Participants

Surveys were filled in person by intensive care and emergency unit nurses who volunteered to participate in the study and had at least one year of experience at the institution. According to the Daniel Soper sample size calculator, to exceed 95% for the power of the study with a 5% significance level and an effect size of 0.3, the recommended minimum sample size is 288. For this study, from a total of 450 potentially eligible intensive care unit nurses, 400 agreed to participate. Due to missing information, 100 out of the 400 surveys were removed, resulting in a 75% response rate. The age of the participants ranged from 21 to 54 with more females (≈75%) compared to males.

### Procedures

The study was approved by an Institutional Review Board Committee by the university [1]. Data was collected in the City Hospital of Ankara during the year 2025 between the months August and September. The head nurse was contacted and provided with the surveys. Four weeks were provided to complete the survey. The head nurses collected the surveys and brought them to the researchers. The selected measures specifically examined current situations, thus preventing recall bias. Publication bias was avoided since the hypotheses were derived from theory. Ethical approval for the study was obtained from the Lokman Hekim University Non-Interventional Clinical Research Ethics Committee (approval no: 2025/201, date: 29.08.2025). Written informed consent was obtained from all participants before data collection. Participation was voluntary, and participants were informed about the purpose of the study. Confidentiality and anonymity were ensured throughout the study.

### Examined Variables

This study examined the following variables: having children (yes/no), working unit (emergency unit/intensive care unit), number of years on the job, virtual tolerance, virtual communication, and PSMA. A description of each and how it was measured is described in the next section.

### Measures

The study distributed the Demographic Information Form and the Social Media Addiction Scale: Adult Form.

### Demographic Information

This form asked nurses whether they have children, the number of years on the job, and their specific working unit.

### PSMA [4]

This is a single question on a numerical scale scored between 0-100 adjusted by [5], utilizing [33]'s five-point Likert scale question to increase variability in responses. "To what extent do you feel addicted to social media?" It was initially asked by [33] and referred to as "Self-declared Social Media Addiction". Previous research has examined the relationship between PSMA and the Social Media Disorder Scale. In one research, the sum of scores on the SMD scale were calculated and the convergent validity with PSMA/self-declared social media addiction were determined to be medium to large [33]. Similarly, another study examined the specific items on the SMD-9 scale and found two of the items to be predictive of PSMA. Perception of addiction was related to withdrawal and persistence. The question on withdrawal was, "often felt bad when you could not use social media (yes/no)", and the question on persistence was, "tried to spend less time on social media but failed (yes/no)" [5].

### Social Media Addiction Scale - Adult Form

This is a measure developed by Şahin [31], it examines the two factors of virtual tolerance and virtual communication. The survey utilizes a five-point Likert scale, with a total of 20 items. Test-retest reliability for the measure as a whole was 0.93, with 0.90 for virtual communication, and 0.91 for virtual tolerance. Internal consistency of the measure is high with 0.91 for virtual communication and 0.92 for virtual tolerance [34]. While tolerance examines the tolerance towards time spent on screen, communication refers to the need to form intimate relationships [20].

## RESULTS

### Descriptive Statistics

Fifty-seven percent of the participants had children. Around 81.8% of the nurses worked in the intensive care unit while 18.2% worked in the emergency unit. The average number of years on the job was eleven. The average age was 33.5 with 7% of the participants with a vocational degree, 10.3% of the participants with an associate degree, 74% of the participants with a bachelor's degree, 5.3% with a masters degree, and 3.3% with a doctorate degree.

### Measurement Model

Outliers were checked using the Mahalanobis distance. Two responses were removed for being above the critical value. Collinearity was checked using the variance inflation factor and tolerance levels and homoscedasticity was checked using the Loess line. Moreover, the assumption of positive definitiveness was met because the determinant was not zero and the Kaiser-Meyer-Olkin measure of sampling adequacy (0.94) was greater than 0.5. The Cronbach alpha for the Social Media Addiction Scale-Adult Form [34] measure was 0.92, virtual tolerance was 0.80, virtual communication was 0.91. The composite reliability for virtual tolerance (0.99) and virtual communication (0.99) were both above 0.70. The construct validity for virtual tolerance and virtual communication was 0.85 and 0.90, respectively.

Confirmatory factor analysis of the Social Media Addiction Scale-Adult Form [34] was conducted by testing the measurement model. The comparative fit index (CFI), Tucker Lewis index (TLI), and the root mean squared error of approximation (RMSEA) were examined to determine model fit (CFI=0.9, TLI=0.9, RMSEA=0.8).

### Structural Equation Model (SEM)

This was followed by calculating the SEM, with the data supporting the hypothesized model. The model showed a good fit and was therefore retained; ($\chi^2$/df=0.33, RMSEA=0.02, normed fit index=0.99, CFI=1.00, relative fit index=0.97, TLI=1.00). The squared multiple correlations demonstrated that the model explained 64.7% of the variance in virtual tolerance, 47.2% of the variance in PSMA, and 20.8% of the variance in virtual communication.

Having children, working in the intensive care unit, and the number of years on the job were all significantly related to virtual communication scores, as seen in Table 1. Number of years on the job was the most related to virtual communication scores, followed by working in an intensive care unit and having children. The number of years on the job was negatively

**Table 1. Hypothesis Testing**

| Relationships | | | Standardized | t-values | p-values | Hypothesis results |
|---|---|---|---|---|---|---|
| Kids | → | Virtual communication | 0.18 | 2.42 | * | Supported |
| Intensive care unit | → | Virtual communication | 0.18 | 2.94 | ** | Supported |
| Emergency unit | → | Virtual communication | 0.08 | 1.35 | 0.18 | Rejected |
| Years on the job | → | Virtual communication | -0.21 | -2.88 | ** | Supported |
| Virtual communication | → | Virtual tolerance | 0.80 | 22.96 | *** | Supported |
| Virtual tolerance | → | Perceived addiction | 0.30 | 4.09 | *** | Supported |
| Virtual communication | → | Perceived addiction | 0.43 | 5.93 | *** | Supported |

*: Significant at 0.05, **: Significant at 0.01, ***: Significant at 0.001

related to virtual communication scores, indicating that as the number of years on the job increased, the usage of social media for communication purposes decreased. Working in the emergency unit was not significantly related to virtual communication scores.

Virtual communication scores which could be a maximum of 45 points decreased by 1.69 points with each additional 8.90 years on the job. With each increase in virtual communication scores, virtual tolerance scores of which the maximum score could be 55 points increased by 6.16 points. With each standard deviation increase in virtual tolerance scores PSMA increased by 6.77%. With each standard deviation increase in virtual communication scores there was a 9.81% increase in PSMA.

The significance of the indirect effects was determined using a bootstrapping method with a 95% confidence interval. The standardized indirect effect of the number of years on the job on virtual tolerance (-0.277, -0.062) and PSMA (-0.234, -0.051) was significant. The standardized indirect effect of working in an intensive care unit on virtual tolerance (0.033, 0.239) and PSMA (0.028, 0.195) was significant. The standardized indirect effect of kids on virtual tolerance (0.004, 0.278) and PSMA (0.003, 0.229) was significant. The standardized indirect effect of virtual communication on PSMA (0.096, 0.360) was significant. The standardized indirect effect of working in the emergency working unit was not significant for virtual tolerance and PSMA.

## DISCUSSION

Stress has become a major concern within the field of nursing [35]. The intensive care and emergency working units were examined in the current study since previous research has found both working units to be related to high levels of stress [10,15]. This study hypothesized that working in stressful working units would result in a need to increase resources by communicating excessively with others on social media with the aim of with standing stress. Results supported this hypothesis.

In this study, working in an intensive care unit was directly related to virtual communication scores and indirectly related to virtual tolerance and PSMA. These results support previous findings of nursing students scoring high in both virtual communication and virtual tolerance, with higher scores in virtual communication [21]. The need to develop close bonds [20] may occur before one's tolerance increases for screen time. The scores of virtual communications were high, which was in turn related to increased tolerance scores.

Working in an emergency unit was not related to virtual communication scores, virtual tolerance scores, or PSMA scores. One of the primary factors contributing to stress is related to the working conditions provided by the hospitals and the insufficient number of nurses working in emergency units [35]. It is possible that the hospital the data was collected from offered better working conditions or had a sufficient number of nurses working in the emergency unit. Another explanation could be that nurses working in emergency units may be busier and have less time to turn to social media as a resource. The working dynamics of emergency departments may differ from those of intensive care units. Emergency departments are clinical environments characterized by high job demands due to unpredictable patient volumes, exposure to traumatic cases, and the risk of workplace violence. In addition, emergency departments involve a rapid and continuous workflow, requiring nurses to remain constantly engaged in patient care and decision-making processes. In contrast, intensive care units generally involve prolonged patient monitoring processes, which may occasionally provide more opportunities for communication through digital platforms. These differences in workflow and work organization may partially explain why working in an intensive care unit was associated with higher virtual communication scores, whereas working in an emergency unit did not show such an association [35].

The theory of self-perception was supported in the study. When virtual communication and virtual tolerance scores were high (i.e., intensive care unit), PSMA was found to be significant. However, when virtual communication and virtual tolerance scores were low, PSMA was not significant. The nurses' specific behaviors served as indicators, leading them to either perceive themselves as addicted or not addicted.

The burden of childcare has been associated with high level of stress for parents [17,18]. Therefore, the study hypothesized that having children would increase the stress levels of the nurses and could thus lead to a social media addiction. The current study confirmed a significant relationship.

The number of years on the job was significantly but negatively related to virtual communication scores, and indirectly to virtual tolerance and PSMA scores. The strongest relationship was with virtual communication scores, indicating a decreased need to communicate with others excessively through social media. One possible explanation provided by [36] is that the initial years may be more stressful for nurses, however, with experience, the later stages of employment may lead to a decreasing trend in stress levels.

In addition, generational differences may also help explain this finding. Younger nurses who are more proficient in using digital technologies may tend to use social media more intensively as part of their daily communication and stress-coping processes. In contrast, nurses with longer professional experience may rely more on interpersonal communication methods and professional coping skills that they have developed throughout their clinical practice. Moreover, increasing professional experience may contribute to the development of stress-management skills through professional maturation and professionalization. Therefore, the need to use social media as a coping mechanism may decrease [36].

Overall, the model explained over half of the variance in virtual tolerance, close to half of the variance in PSMA, and around one-fourth of the variance in virtual communication. It is important

to note that this study took place in the capital city of Türkiye. Results may be similar or different in more rural areas [18] refer to the importance of examining different samples and comparing rural community centers with metropolitan cities. Higher levels of stress have been noted in urban settings [37].

A closer examination of how nurses handle stress and their selected outlets for resource and support is warranted. It is conceivable that the nurses working in emergency working units employ distinct coping strategies with the aim of increasing their resources and enhancing their ability to handle stress in the workplace. Since social media can either be a stressor, a resource, and/or a tool for coping with stress [3], future studies can aim to distinguish how nurses utilize social media and follow the implications of such decisions. Moreover, previous studies have examined the relationship between social media addiction and the alexithymia scores of nursing students [38]. Alexithymia, which includes symptoms such as indifference towards others and difficulty articulating emotions, can seriously hinder the support that a nurse can provide his/her patients. Examining these variables with regard to working nurses and determining if stress is a mediator between these two variables can be valuable.

### Study Limitations

It is difficult to generalize the findings of the study due to the limited existing literature on the topic and the small sample size. Moreover, since the current study collected data from the capital city, the results may vary depending on location. Results should be compared in the future with other cities and rural areas. Additionally, since the study only asked whether the nurses did or did not have children, the information provided was limited. In the future, the researchers can ask participants the number of children they have to determine if it changes the results. For instance, do people who have one child have similar or different results from people who have three children?

## CONCLUSION

The current study used the theory of COR and the theory of self-perception theory to examine stress factors (having children, working in intensive care units or emergency units, and the number of years on the job) and their relationship with social media (virtual communication and virtual tolerance) and PSMA. Due to nursing being a very stressful job, often nurses feel a loss of resources or a lack of gain in resources in their work environment. This can direct the nurses to search for other outlets to gain new resources to deal with a stressful environment. Results showed that having children was significantly related to virtual communication. Having children was further indirectly related to virtual tolerance and PSMA. Similarly, working in an intensive care unit was directly related to virtual communication and indirectly related to virtual tolerance and PSMA. However, working in an emergency unit was not significantly related to social media use or perception of addiction. Reasoning behind this and comparing perceived stress levels and its relationship with social media use and perception of addiction is warranted. The number of years on the job was significantly but negatively related to virtual communication and indirectly to virtual tolerance and PSMA. Further examination is necessary to determine various stress factors and their relationship with social media use and perception of addiction.

### Ethics

**Ethics Committee Approval:** Ethical approval for the study was obtained from the Lokman Hekim University Non-Interventional Clinical Research Ethics Committee (approval no: 2025/201, date: 29.08.2025).

**Informed Consent:** Written informed consent was obtained from all participants before data collection. Participation was voluntary, and participants were informed about the purpose of the study. Confidentiality and anonymity were ensured throughout the study.

### Footnotes

#### Authorship Contributions

Concept: NB; Design: NB; Data Collection or Processing: NB; Analysis or Interpretation: NB; Literature Search: NB; Writing: NB, BD.

**Conflict of Interest:** No conflict of interest was declared by the authors.

**Financial Disclosure:** The authors declared that this study received no financial support.

## References

1. Castells M. Enformasyon çağı: ekonomi, toplum ve kültür: ağ toplumunun yükselişi. 2nd ed. İstanbul: İstanbul Bilgi Üniversitesi Yayınları; 2003. [Crossref]
2. Onan N, Ünsal Barlas G, Karaca S, Kocaman Yıldırım N, Taşkıran Ö, Sümeli F. The relations between perceived stress, communication skills and psychological symptoms in oncology nurses. MÜSBED. 2015; 5(3): 170-7. [Crossref]
3. Lee EK, Kim JS. Nursing stress factors affecting turnover intention among hospital nurses. Int J Nurs Pract. 2020; 26(6): e12819. [Crossref]
4. Passos Souza Amaral A, Fontes De La Longuiniere AC, Nunes Machado de Oliveira Santos J, Benemérita Alves Vilela A, Sales Vieira SN, de Jesus Cruz Sanches G. Occupational stress: the exposure of an emergency unit nursing team. J Res Fundam Care Online. 2019; 11: 455-60. [Crossref]
5. Allahverdi FZ. Relationship between perceived social media addiction and social media applications frequency usage among university students. Psychology in the Schools. 2022; 59(6): 1075-87. [Crossref]
6. Allahverdi FZ. The relationship between the items of the social media disorder scale and perceived social media addiction. Curr Psychol. 2022; 41: 7200-7. [Crossref]
7. Avallone I, Gibbon B. Nurses' perceptions of their work environment in a nursing development unit. J Adv Nurs. 1998; 27(6): 1193-201. [Crossref]
8. Basu S, Harris A, Mason S, Norman J. A longitudinal assessment of occupational stress in emergency department nursing staff. J Nurs Manag. 2020; 28(1): 167-74. [Crossref]
9. Bem DJ. Self-perception: an alternative interpretation of cognitive dissonance phenomena. Psychol Rev. 1967; 74(3): 183-200. [Crossref]
10. Bilgin O, Taş İ. Effects of perceived social support and psychological resilience on social media addiction among university students. Universal Journal of Educational Research. 2018; 6(4): 751-8. [Crossref]
11. Chen Q, Chen M, Lo CKM, Chan KL, Ip P. Stress in balancing work and family among working parents in Hong Kong. Int J Environ Res Public Health. 2022; 19(9): 5599. [Crossref]
12. Chotpitayasunondh V, Douglas KM. The effects of phubbing on social interaction. Journal of Applied Social Psychology. 2018; 48(6): 304-16. [Crossref]
13. van den Eijnden RJJM, Lemmens JS, Valkenburg PM. The social media disorder scale. Computers in Human Behavior. 2016; 61: 478-87. [Crossref]
14. Fauzi R, Saaiddin NI, Ibrahim NS, Abdullah SS. Effect of social media addiction on academic performance among nursing students. The Malaysian Journal of Nursing. 2021; 13(1): 3-9. [Crossref]
15. Bem DJ. Self-perception: the dependent variable of human performance. Organizational Behavior and Human Performance. 1967; 2(2): 105-21. [Crossref]

16. Ferreira LTK, Iguti AM, Monteiro I. Working conditions and health among nursing staff in intensive care units. International Journal on Working Conditions. 2017; (13): 21-34. [Crossref]
17. Göbel P, Sanlier N, Yilmaz S, Açikalin B, Kocabaş Ş. The correlation between social media addiction and emotional eating during the COVID-19 quarantine period. Ecol Food Nutr. 2023; 62(1-2): 60-74. [Crossref]
18. Guo H, Ni C, Liu C, Li J, Liu S. Perceived job stress among community nurses: a multi-center cross-sectional study. Int J Nurs Pract. 2019; 25(1): e12703. [Crossref]
19. Happell B, Dwyer T, Reid-Searl K, Burke KJ, Caperchione CM, Gaskin CJ. Nurses and stress: recognizing causes and seeking solutions. J Nurs Manag. 2013; 21(4): 638-47. [Crossref]
20. Hobfoll SE. Conservation of resource caravans and engaged settings. Journal of Occupational and Organizational Psychology. 2011; 84(1): 116-22. [Crossref]
21. Hoşgör H, Coşkun F, Çalişkan F, Gündüz Hoşgör D. Relationship between nomophobia, fear of missing out, and perceived work overload in nurses in Turkey. Perspect Psychiatr Care. 2021; 57(3): 1026-33. [Crossref]
22. Hoşgör H, Ülker Dörttepe Z, Memiş K. Social media addiction and work engagement among nurses. Perspect Psychiatr Care. 2021; 57(4): 1966-73. [Crossref]
23. İlter SM, Ovayolu Ö. The relations between the alexithymia levels and social media addictions of nursing students. Perspect Psychiatr Care. 2022; 58(4): 2330-6. [Crossref]
24. Al-Menayes JJ. Dimensions of social media addiction among university students in Kuwait. Psychology and Behavioral Sciences. 2015; 4(1): 23-8. [Crossref]
25. Koc M, Gulyagci S. Facebook addiction among Turkish college students: the role of psychological health, demographic, and usage characteristics. Cyberpsychol Behav Soc Netw. 2013; 16(4): 279-84. [Crossref]
26. Lavee Y, Sharlin S, Katz R. The effect of parenting stress on marital quality: an integrated mother-father model. Journal of Family Issues. 1996; 17(1): 114-35. [Crossref]
27. Lim J, Bogossian F, Ahern K. Stress and coping in Australian nurses: a systematic review. Int Nurs Rev. 2010; 57(1): 22-31. [Crossref]
28. McGrath JE. Social and psychological factors in stress. Illinois: University of Illinois; 1970. [Crossref]
29. Opie T, Dollard M, Lenthall S, Wakerman J, Dunn S, Knight S, et al. Levels of occupational stress in the remote area nursing workforce. Aust J Rural Health. 2010; 18(6): 235-41. [Crossref]
30. Rahman MA, Duradoni M, Guazzini A. Identification and prediction of phubbing behavior: a data-driven approach. Neural Comput & Applic. 2022; 34: 3885-94. [Crossref]
31. Şahin C. The predictive level of social media addiction for life satisfaction: a study on university students. The Turkish Online Journal of Educational Technology. 2017; 16: 120-5. [Crossref]
32. Terzi B, Bulut S, Kaya N. Factors affecting nursing and midwifery students' attitudes toward social media. Nurse Educ Pract. 2019; 35: 141-9. [Crossref]
33. Töyry S, Kalimo R, Äärimaa M, Juntunen J, Seuri M, Räsänen K. Children and work-related stress among physicians. Stress Health. 2004; 20: 213-21. [Crossref]
34. Tutal Ö, Erensoy H, Luş M. Relationship between psychological symptoms, impulsivity and social media use problems. Journal of Dependence. 2021; 22(1): 43-52. [Crossref]
35. Ulrich M, Keller J, Hoenig K, Waller C, Grön G. Neural correlates of experimentally induced flow experiences. Neuroimage. 2014; 86: 194-202. [Crossref]
36. Van Bogaert P, Timmermans O, Weeks SM, van Heusden D, Wouters K, Franck E. Nursing unit teams matter: impact of unit-level nurse practice environment, nurse work characteristics, and burnout on nurse reported job outcomes, and quality of care, and patient adverse events--a cross-sectional survey. Int J Nurs Stud. 2014; 51(8): 1123-34. [Crossref]
37. Wolfers LN, Utz S. Social media use, stress, and coping. Curr Opin Psychol. 2022; 45: 101305. [Crossref]
38. Zhang S, Kwok RCW, Lowry PB, Liu Z, Wu J. The influence of role stress on self-disclosure on social networking sites: a conservation of resources perspective. Information & Management. 2019; 56: 103147. [Crossref]