

Considerations on Internet Addiction and Depression Among Syrian College Students

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Editorial

We have read with great interest the article entitled “Internet Addiction and Depression among Syrian College Students: A Cross-Sectional Study” published recently in *Psychiatry International* [1]. The findings of this study suggested that problematic internet use (PIU) is a significant concern among college students in medical schools with a relatively high overall prevalence (89%). The findings also revealed a significant correlation between PIU and depression symptoms in the surveyed participants. It gives much important information for providing mental health care to college students. As such, there are a few points, which we would like to bring up.

In such a study, concluded that the overall prevalence of PIU was 89% in the surveyed participants (2891 participants in total), as assessed using a self-reported internet addiction assessment tool (IAT) [1]. This is a bit surprising, considering that most other studies have reported a much lower prevalence of PIU. For instance, the reported prevalence of PIU in young people only ranged from 10.2% to 45.1% in several studies in recent years (including those conducted during the COVID-19 pandemic) [2-6]. We notice that [1] used a cutoff of the IAT score ≥ 50 to define PIU, which is in line with many earlier studies using the same tool [7,8]. However, whether such a cutoff is still optimal for the current sample might be questionable. This is because the use of the internet has significantly increased in recent years and is being largely engaged with most people’s daily lives and work such a trend might be accelerated by the COVID-19 pandemic lockdowns globally [9]. As a result, the use of the same cutoff points of PIU scales as several years ago may lead to an over-estimated prevalence of PIU nowadays. In fact,

similar opinions have been expressed by other researchers in multiple recent studies [10,11]. Thus, it might be valuable to explore whether there would be a more optimal cutoff point of IAT in the surveyed population.

In the current study [1], the IAT and the Depression Prediction Scale (DPS) were used to measure the participants’ PIU and depression symptoms, respectively. The authors claimed that these two scales were taken from another study in Bangladesh [12] and translated for Syrian locals. The translated versions of these scales were shown to have good internal consistencies as suggested by relatively high Cronbach’s alpha coefficients [1]. Nevertheless, in addition to internal consistency, there are other important and necessary to consider properties to support a translated scale’s reliability and validity, such as the test-retest reliability [13-15]. These properties of the translated scales (IAT and DPS in the Syriac language) might be investigated in further studies if they were not evaluated yet.

In the current study, the same cutoff point (IAT score ≥ 50) was used in both female and male participants. Nevertheless, there has been ample evidence supporting that female and male participants may differ in terms of multiple psychological aspects [16,17]. As for the PIU, multiple studies have also used different cutoff points to define the problematic internet/smartphone use in female and male subjects [10,18]. Thus, it might be meaningful to explore whether there would be different optimal cutoff points of the IAT scores in female/male participants in future studies.

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