

**Influence Of Shyness And Body Dysmorphism On Internet Addiction Among Undergraduates****U. S. Isaiah***

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ABSTRACT

The study investigated the influence of shyness and body dysmorphism on internet addiction among undergraduates. Six hundred and forty undergraduates were recruited as participants in the study from two tertiary institutions (university of uyo and Akwa Ibom State university) consisting of 307 males and 337 females. Their age range were from 18- 45 and their mean age was 38.5. A cross sectional design was adopted for the study. Three instruments were used in the study: Shyness Scale (SS) developed by Richmond and McCroskey [1], Internet Addiction Test (IAT) developed by Young in 1957 and Dysmorphic Concern Questionnaire developed by Salovey [2]. A two way Analyses of Variance (ANOVA) was used to analyse the data. The result showed that there is a significant influence of shyness on internet addiction among undergraduates [$F(1, 640) = 20.66, p < .05$]. The result also revealed that there is a significant influence of Body Dysmorphism on internet addiction among undergraduates [$F(1, 640) = 33.19, p < .05$]. Furthermore, the result also revealed that there is no interaction influence between Shyness and Body Dysmorphism on internet addiction among undergraduates. It was therefore concluded that shyness and body dysmorphism are predictors of internet addiction among undergraduates. Implications and recommendations for future study were made.

Keywords: *Body Dysmorphism, Internet Addiction, Shyness.****Corresponding Author****U. S. Isaiah***Department of Psychology, University of Uyo, Nigeria*

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INTRODUCTION:

Internet addiction has contributed a lot of problem over the years especially among undergraduates since they are the ones who use sophisticated phones mostly these days. Internet addiction result in personal, family, academic, financial, and occupational problem that are characteristics of other addictions. Impairments of real life relationships are disrupted as a result of excessive use of the internet. Individuals suffering from Internet addiction spend more time in solitary seclusion, spend less time with real people in their lives, and are often viewed as socially awkward. Arguments may result due to the volume of time spent on-line. Those suffering from internet addiction may attempt to conceal the amount of time spent on-line, which results in distrust and the disturbance of quality in once stable relationships. Some suffering from Internet addiction may create on-line personas or profiles where they are able to alter their identities and pretend to be someone other than himself or herself. Those at highest risk for creation of a secret life are those who suffer from low-self- esteem feelings of inadequacy, and fear of disapproval. Such negative self-concepts lead to clinical problems of depression and anxiety. Many persons who attempt to quit their Internet use experience withdrawal including: anger, depression, relief, mood swings, anxiety, fear, irritability, sadness, loneliness, boredom, restlessness, procrastination, and upset stomach. Being addicted to the Internet can also cause physical discomfort or medical problems such as: Carpal Tunnel Syndrome, dry eyes, backaches, severe headaches, eating irregularities, (such as skipping meals), failure to attend to personal hygiene, and sleep disturbance.

Internet addiction disorder, more commonly called problematic Internet use (PIU), [3] refers to excessive Internet use that interferes with daily life [4].

Internet addiction disorder was originally proposed as a disorder in a satirical hoax [5]; [6], although some later researchers have taken his essay seriously. He used this term because it was a suitable fit to his parody. This idea he conjured was to demonstrate the Diagnostic and Statistical Manual of Mental Disorders handbook's complexity and rigidity. Among the symptoms he included in this parody were "important social or occupational activities that are given up or reduced because of the internet use", "fantasies or dreams about the internet" and "voluntary or involuntary typing movements of the fingers"[7].

Goldberg himself has redefined Internet Addiction Disorder as a "pathological Internet use disorder" (also known as PIU) to avoid what he started as a joke to be thought of as an officially diagnosed addiction, such as an addiction to heroin [8]. Internet Addiction Disorder receives coverage in the press, and the possible future classification of it as a psychological disorder continues to be debated and researched in the psychiatric community [9]. A systematic review of pathological Internet Use literature identified the lack of standardization in the concept as a major impediment to advancing this area of study [10]. "Other online habits such as reading, playing computer games, or watching very large numbers of Internet videos are troubling only to the extent that these activities interfere with normal life. Internet Addiction Disorder is often divided into subtypes by activity, such as gaming; online social networking, [11]; blogging; email; excessive, overwhelming, or inappropriate Internet pornography use; [12], or Internet shopping (shopping addiction) [13]. Opponents note that compulsive behaviors may not necessarily be addictive [14].

Internet addiction is a subset of a broader "technology addiction". Widespread obsession with technology goes back at least to radio in the 1930s and television in the 1960s, but it has exploded in importance during the digital age [15]. A study published in the journal *Cyberpsychology, Behavior, and Social Networking* (2014) suggests that prevalence of Internet addiction varies considerably among countries and is inversely related to quality of life [10]. Internet addiction are seen to be caused by many factors including shyness and body dysmorphism.

Shyness is the awkwardness or apprehension some people feel when approaching or being approached by other people. Unlike introverts, who feel energized by time alone, shy people often desperately want to connect with others, but don't know how or can't tolerate the anxiety that comes with human interaction. This commonly occurs in new situations or with unfamiliar people. Shyness can be a characteristic of people who have low self-esteem. Stronger forms of shyness are usually referred to as social anxiety or social phobia. The primary defining characteristic of shyness is a largely ego-driven fear of what other people will think of a person's behavior. This result in a person becoming scared of doing or saying what they want to out of fear of negative reactions, being laughed at, humiliated or patronised, criticism or rejection. A shy person may simply opt to avoid social situations instead [4].

One important aspect of shyness is social skills development. Schools and parents may implicitly assume children are fully capable of effective social interaction. Social skills training is not given any priority (unlike reading and writing) and as a result, shy students are not given an opportunity to develop their ability to participate in class and interact with peers. Teachers can model social skills and ask questions in a less direct and intimidating manner in order to gently encourage shy students to speak up in class, and make friends with other children [4].

The term shyness may be implemented as a lay blanket-term for a family of related and partially overlapping afflictions, including timidity (apprehension in meeting new people), bashfulness and diffidence (reluctance in asserting oneself), apprehension and anticipation (general fear of potential interaction), or intimidation (relating to the object of fear rather than one's low confidence), [16].

Research using the statistical techniques of factor analysis and correlation has found shyness overlaps mildly with both introversion and neuroticism (i.e., negative emotionality) [17]; [18]; [19] Low societal acceptance of shyness or introversion may reinforce a shy or introverted individual's low self-confidence [20]. Both shyness and introversion can outwardly manifest with socially withdrawn behaviors, such as tendencies to avoid social situations, especially when they are unfamiliar. A variety of research suggests that shyness and introversion possess clearly distinct motivational forces and lead to uniquely different personal and peer reactions and therefore cannot be described as theoretically the same, [21]; [22]; [23]; [20] further discerning introversion as involving being differently social (preferring one-on-one or small group interactions) rather than being anti-social altogether [24].

Research suggests that no unique physiological response, such as an increased heart-beat, accompanies socially withdrawn behavior in familiar compared with unfamiliar social situations. But unsociability leads to decreased exposure to unfamiliar social situations and shyness causes a lack of response in such situations, suggesting that shyness and unsociability affect two different aspects of sociability and are distinct personality traits [20]. In addition, different cultures perceive unsociability and shyness in different ways, leading to either positive or negative individual feelings of self-esteem. Collectivist cultures view shyness as a more positive trait related to compliance with group ideals and self-control, while perceiving chosen isolation (introverted behavior) negatively as a threat to group harmony; and because collectivist society accepts shyness and rejects unsociability, shy individuals develop higher self-esteem than introverted individuals [23]. On the other hand, individualistic cultures perceive shyness as a weakness and a character flaw, while unsociable personality traits (preference to spend time alone) are accepted because they uphold the value of autonomy; accordingly, shy individuals tend to develop low self-esteem in Western cultures while unsociable individuals develop high self-esteem [21]. Those considered shy are also said to be socially inhibited. Social inhibition is the conscious or unconscious constraint by a person of behavior of a social nature. In other words, social inhibition is holding back for social reasons. There are different levels of social inhibition, from mild to severe. Being socially inhibited is good when preventing one from harming another and bad when causing one to refrain from participating in class discussions.

Behavioral inhibition is a temperament or personality style that predisposes a person to become fearful, distressed and withdrawn in novel situations. This personality style is associated with the development of anxiety disorders in adulthood, particularly social anxiety disorder [25]. So due to these assumptions undergraduate that are shy is predicted to be a predictor of Internet addiction.

Body dysmorphism is also considered to be one of the causes of internet addiction among undergraduates. The concept of Body dysmorphic disorder is a type of obsessive-compulsive disorder [26]. An individual with body dysmorphic disorder is overly preoccupied with what are perceived as gross imperfections in their appearance and spends an hour or more, every day, thinking about the way they look. In reality, the imperfections are imagined or only slight and barely noticed by others, if at all. The affected person may be obsessed with certain body parts, particularly related to their face or head, or with their weight or body shape.

The symptoms of body dysmorphic disorder often begin in the early teens or even childhood, and are all related to the person's appearance. They include constantly checking their look in the mirror, excessive grooming, over-exercising, skin picking, or hair plucking—and comparing themselves to others. In addition to an extreme obsession with their looks, people with body dysmorphic disorder try to hide their perceived flaws by holding their body in certain ways, covering up with make-up or clothing, or somehow improving their imagined defects, sometimes with multiple plastic surgeries or other cosmetic practices [27]. Even when steps are taken to make improvements, however, the person is still unhappy with their appearance. The obsession, repetitive behavior, and constant covering up create stress for the affected individual and can have a negative impact on daily functioning and quality of life. Major depression is common in those with body dysmorphic disorder, as are suicidal thoughts and behavior. Individuals with body dysmorphic disorder often have a history of child abuse or neglect or other childhood trauma and may also have a parent or sibling with an anxiety disorder. Research into a neurobiological connection is still in early stages. Those with the condition may also have an anxiety disorder, such as obsessive-compulsive disorder or social anxiety, a personality disorder, or issues with substance abuse. Body dysmorphic disorder is not an eating disorder, though both conditions exhibit similarly severe and abnormal body image concerns and self-esteem issues. Men and women are equally affected by this disorder. So due to the fact these people saw themselves inappropriate this study would predict that internet may be the only place they derived happiness and gain acceptance.

However, following this lime light the following questions would be used to ascertain if shyness and body dysmorphism have influence on internet addiction among undergraduates;

1. To what extent would undergraduates with high self-esteem have positive psychological well-being more than undergraduates that have low self-esteem?
2. To what extent would undergraduates with internal locus of control have positive psychological well-being more than undergraduates that have external locus of control?
3. To what extent would shyness and body dysmorphism interactively influence internet addiction among undergraduates?

METHOD:

Design

The study adopted a cross sectional design. This was to enable the researcher to look at the key characteristics of the participants at one point irrespective of their age, gender, ethnicity and other demographic features.

Location of the Study

This study was carried out in two tertiary institutions namely University of Uyo located along Ikpa Road and Akwa Ibom State University located at Ikot Akpaden, Mkpato Enin Local Government Area both in Akwa Ibom State.

The university of Uyo was used in this study. It is located in the heart of Uyo, the capital of Akwa Ibom state, Nigeria. The university runs a multi-campus system which include; main campus, town campus, annex campus and college of health sciences campus. It has both male and female hostels located inside the campuses. Uyo is the capital of Akwa Ibom state. The town became the state capital following the creation of the state on September 23, 1987 from the then erstwhile cross river state. Uyo serves a dual purpose of being the state capital and local government headquarters and shares common boundaries with Itu, Uruan, Ibesikpo Asutan, Abak and Etinan local government areas. The core language of Uyo people is Ibibio. They are predominantly Christians with some fraction of traditional worshippers.

According to 2006 Nigeria census which comprised of Uyo and Itu is 427873, while the urban area like Uruan has a population of 554,906 people. The state is located in the south-south geopolitical zone of the country, lying between latitude 40321 and 50331 North and longitude 70251 and 80 East.

The state is bounded on the east with Cross River state, west with Rivers state and Abia state and on the South with Atlantic Ocean. The state has 31 local government areas and a population of 5-million people leaving in the state. Akwa Ibom State University is a conventional, multi-campus institution. The main campus is located at Ikot Akpaden, Mkpato

Enin Local Government Area. It adjoins the confluence of Ikot Akpaden - Eastern Obolo road and Eket - Ikot Abasi highway. The next campus is located at Obio Akpa, Oruk Anam Local Government Area, along Abak - Ikot Okoro Road.

Akwa Ibom State University is a multi-campus institution, with two campuses located in the central and southern parts of the State. The Main Campus is in the southern or coastal part, mostly within Mkpato Enin local government area, but also including Eastern Obolo, Onna and Ibeno local government areas. The northern upland part of the Main Campus is situated at Ikot Akpaden between Eket and Ikot Abasi, on Nigeria's East-West Highway. This highway runs across the Niger Delta from Calabar in the East through Eket, Ikot Abasi, Port Harcourt, Warri and Benin, to Lagos on the Western coast of the country. The Main Campus at Mkpato Enin extends from the East-West Highway to the Atlantic Ocean shoreline, totaling about 4,600 hectares, with 180 hectares of gently rolling, well-drained tableland which provides the high ground that is ideal for the physical development of the University. The rest of the southern part is a degraded wetland - water-logged and flooded with mangrove swamp and tidal creeks. The Main Campus stretches over a distance of 12km from the highway to the shoreline and is 4km wide.

The Obio Akpa Campus is the second site, meant for the Faculties of Agriculture, Social and Management Sciences. The campus has a sub-urban setting, adjoining Abak town and is within 15 minutes' drive from Uyo. Its topography is undulatory with gentle hills and slopes which gives it a unique scene. The first phase of the Main Campus occupies an area of about 7 hectares. There are academic blocks for lectures, laboratories, engineering workshops, a large central cafeteria for 500 students, and an auditorium of similar capacity, a library building (with e - book library sections), male and female hostels, a medical Centre and a sports arena. This campus has about 2km of tarred road network with concrete sidewalks and effective drainage. Electricity is provided by both the public electricity supply (PHCN) and 2 No. 500KVA standby generators. A mini water works of 100,000 liters serviced by 2 No. water boreholes provides the water needs of the campus.

The Obio Akpa Campus, being an old site of a tertiary institution, already has roads that were paved since the 1950s when the campus began as a British colonial agricultural experimental station. Buildings already exist to be used by the Faculties of Agriculture and Management Sciences. There are academic, administrative blocks and laboratories. It also has large demonstration farms for palm oil, rubber, fisheries, and small/large ruminants. The university has six (6) faculties and thirty-seven departments.

Participants

A subset of Six hundred and forty (640) undergraduates consisting of 337 females and 303 males were randomly selected from two tertiary institutions in Akwa Ibom State namely University of Uyo, Uyo and Akwa Ibom State University, Abak Campus. Their age range was from 16 – 45 and their mean age was 38.5.

Procedures

The researcher accorded with four research assistants went to all the institutions listed above to distribute the questionnaires. At first a letter of recommendation was gotten from the department to enable the researcher have access to the lecturers. For a questionnaire to be given to participants, he/she were asked if they want to participate in the research. Each participant was given a maximum of 20 minutes to complete the questionnaire. All the participants were selected using the purposive sampling technique. The responses gotten from the participants were analyzed using SPSS specifically model 20.

Statistics Analysis

The study adopted two way Analysis of variance (ANOVA) as a statistic for data analysis. The reason behind the used of these two statistics was to enable the researcher find the significance influence of each of the independent variable on dependent variable and secondly finding the interaction effect of both the independents variables on the dependent variable.

Instruments

Three instruments were used in this study. The questionnaires distributed were divided into four sections, A, B, C, and D. Section A connotes information on the demographic variables such as age, gender, ethnic group, religion and marital status.

Section B was the Shyness Scale (SS) developed by Richmond and McCroskey [1]. The SS was reported to have a Cronbach's $\alpha = .80$ and contain 14 items rated using a 5-point Likert scale (1 = *Strongly disagree* to 5 = *Strongly agree*). All the items are directly scored. The total possible scores ranged from 0 to 140 with higher scores indicating a greater degree of shyness experienced by participants and lower scores indicating a lower degree of shyness or not shy.

Section C was the Internet Addiction Test (IAT) developed by Young in 1957. The Scale has 20 items and the items are rated in a 6-point likert scale (0= Does not apply to 5= Always). The cronbach alpha was reported to be 0.8. Higher scores on the scale shows that the individual is internet addicted and lower scores shows that the individual is not internet addicted.

Section D was the Dysmorphic Concern Questionnaire developed by Salovey [2] which consist of 7 items which uses self-report with a 4-point Likert scale, where a score of 1 represents -Not at all and a score of 5 represents -Much more than most people. The respondents' rate each statement to the extent it describes them, using the 1-5 point Likert scale. The cronbach alpha was .89 showing its internal consistency. Total scale scores can be calculated by summing all items. Higher scores suggest more characteristic body dysmorphicism while lower score suggest less characteristics of body dysmorphicism.

RESULT:

Data analysis was performed using the Statistical Package for the social Sciences (SPSS) version 20 and the result are presented below.

Table 1 below is a table of mean (X) showing influence of shyness and body dysmorphism on internet addiction among undergraduates.

Table-1: shyness

Body dysmorphism		s h y (A 1)	N o t s h y (A 2)	S u m X
	H i g h (B 1)	N = 7 8	N = 1 8 5	N = 2 6 3
		X = 65.72 SD=13.97	X =61.78 SD = 13.97	X= 59.23 SD= 16.13
	L o w (B 2)	N = 8 4	N = 2 9 3	N = 3 7 7
		X =58.12 SD = 13.02	X = 56.49 SD =14.15	X= 53.30 14.13
	S u m N	N = 1 6 2	N = 4 7 8	N = 6 4 0
X	53.69	59.23	X= 55.72	
SD	15.14	16.13	15.25	

Table 1 above shows that participants who are shy had a mean score of 65.72 (SD= 13.79), while those who are not shy had a mean score of 58.12 (SD= 13.02) on internet addiction.

Furthermore, table 1 above also shows that participants with high body dysmorphism had a mean score of 56.49 (SD= 16.23) while those with low body dysmorphism had a mean score of 51.92 (SD= 14.15) on internet addiction.

Table 2 below is a 2x2 ANOVA summary table showing the influence of perceived stress and behavior pattern on emotional intelligence.

Table-2: Tests of Between-Subjects Effects
Dependent Variable: Internet Addiction

Source	Type III Sum of Squares	Df	Mean Square	F	Sig.	Decision
Dysmors	7098.16	1	7098.16	33.19	.00	Accepted
shyness	4419.85	1	4419.85	20.67	.00	Accepted
dysmors *	272.20	1	272.20	1.27	.26	Rejected
shyness	136017.71	636	213.86			
Error	2136696.00	640				
Total						

a. R Squared = .085 (Adjusted R Squared = .081)

b. Computed using alpha = .05

Table 2 shows the result of a 2x2 ANOVA which tested for the independent and joint interaction of the variables of this study.

The result as shown in table 2 indicates that shyness had a significant influence on internet addiction among undergraduates [F (1, 640) = 20.66, p < .05]. An observation of the table 1 indicates that participants who are shy had

a mean score of 65.72 (SD= 13.79), while those who are not shy had a mean score of 58.12 (SD= 13.02) on internet addiction. This result accepted the first hypothesis which stated that undergraduates who are shy would score higher in internet addiction than undergraduates who are not shy.

Table 2 also revealed that body dysmorphism had a significant influence on internet addiction among undergraduates [$F(1, 640) = 33.19, p < .05$]. An observation of the table 1 indicates participants that participants with high body dysmorphism had a mean score of 56.49 (SD= 16.23) while those with low body dysmorphism had a mean score of 51.92 (SD= 14.15) on internet addiction. This result supported the second hypothesis which stated that Undergraduates who have strong body dysmorphism would score higher in internet addiction than undergraduates who have low body dysmorphism.

Furthermore, table 2 revealed that there was no interaction influence between shyness and body dysmorphism on internet addiction among undergraduates [$F(1, 640) = 1.27, p < .05$]. This rejected the third hypothesis which indicated there would be an interaction influence of shyness and body dysmorphism on internet addiction among undergraduates.

DISCUSSION AND CONCLUSION:

This section discusses the result of the hypothesis treated in the study. In all, the results of the data analyses and the two hypothesis will be discussed, the conclusions drawn as well as implications of the and limitations of the study highlighted.

Discussion

The first hypothesis which stated that undergraduates who are shy would score higher in internet addiction than undergraduates who are not shy was significant thus accepted. The finding was consistent with the findings of Ayas [28] who found that people who are shy scored higher in internet addiction scale than their counterpart who are not shy.

More so, the finding was in-line with the work of Hollingsworth [29] who found out that there is a strong relationship between shyness and internet addiction among secondary school student.

Furthermore, the finding also agrees with the findings of Chak and Leung [30] who found the shyer an individual is the more internets addicted he/she would be.

Also, the finding was consistent with the findings of Scealy, Phillips, and Stevenson [31] who found out that shyness is a predictor of internet addiction among secondary school students.

The findings was also in-line with the findings of Roberts, Smith and Pollock [32] who found that shy people are more internet addicted than people who are not shy.

A plausible explanation for the significant of the first hypothesis is that people who are shy find the internet as an avenue for them to express themselves on the things they were not able to say one on one or face to face with their counterpart. Most possibly they are likely to get positive responses with those people and as result they continue to dwell on it to communicate with other people thereby becoming addicted.

The second hypothesis which stated that undergraduates who have strong body dysmorphism would score higher in internet addiction than undergraduates who have low body dysmorphism was significant thus accepted. There were no empirical findings to back up this result, and as such this present finding would serve as bedrock for further studies. Actually the reason for the significant of the second hypothesis is that people who are so preoccupied with their body shape and beauty are like to dwell more on the internet to check for beautiful models of their choice, what those people do to get their shape, the creams they used and other procedures that would aid them have a beautiful shape too and as result they become addicted to the internet as well.

Further, the third hypothesis which stated there would be an interaction influence of shyness and body dysmorphism on internet addiction among undergraduates thus rejected. There was also no empirical findings to backup this findings as per the agreement or the disagreement of the present study.

Conclusion:

This study was conducted to investigate the influence shyness and body dysmorphism on internet addiction among undergraduates. Six hundred and forty undergraduates were recruited as participants in the present study from two tertiary institutions (university of uyo and Akwa Ibom State university).

Shyness Scale (SS) developed by Richmond and McCroskey [1], Internet Addiction Test (IAT) developed by Young in 1957 and Dysmorphic Concern Questionnaire developed by Salovey [2] were the instrument used in the study. The study utilized cross sectional designs and a two way analysis of variance was used to analysed the data.

Three hypothesis were tested. The first hypothesis which stated that that undergraduates who are shy would score higher in internet addiction than undergraduates who are not shy was significant thus accepted. The second hypothesis which stated that undergraduates who have strong body dysmorphism would score higher in internet addiction than undergraduates who have low body dysmorphism was significant thus accepted. The third hypothesis which stated that there would be an interaction influence of shyness and body dysmorphism on internet addiction among undergraduates thus rejected.

Conclusively, shyness and body dysmorphism are predictors of internet addiction among undergraduates.

Implication/ Recommendations

Based on the findings of this study, it shows that shyness is a predictor of internet addiction. That is to say that the higher the shyness of an individual the higher the level of internet addiction. As such undergraduates should be thought assertive training so as to aid them deal with their shy behaviour and as well the boldness to communicate with anyone they want to communicate with . Also, implications of the second hypothesis portrays that undergraduates who are so concern about their beauty and body shape are likely to engage on internet addiction than undergraduate who are moderately concern and as such they should be should be acknowledge on the harmful effects of internet addiction both on academic performances and economically in terms of the time wasted.

Further studies should also focus on investigating whether variables such as personality type, rejection sensitivity, religion could predict internet addiction among undergraduates.

Limitations of The Study

- The participants used in the study were only drawn from two institutions which made the sample to be so small for this study.
- The researcher wasted so much time in trying to explain what the research is all about before they would even want to participate in the study.
- Another limitation of this study was the non-consent attitude of the students in participating in the study

Suggestion for further studies

The present study should be conducted in the future to encompass various variables such as hypochondriasis, somatoform disorders, and extreme psychosis such as schizophrenia on internet addiction.

REFERENCES

1. Richmond, V. A., & McCroskey, J. C. (1998). Communication apprehension, avoidance, and effectiveness Boston. MA: Allyn Bacon.
2. Salovey, O. N. (1998). Development of Body Dysmorphical Questionnaire. *International Journal of Human Studies* 53, 537–550.
3. Moreno, M. A., Jelenchick, L. A., & Christakis, D. A. (2013). Problematic internet use among older adolescents: A conceptual framework. *Computers in Human Behavior*, 29(4), 1879-1887.
4. Byun, S. H., Sookeun, K. L., Ruffini, W. F., Celestino, R. I., Mills, G. D., Juline, E. N., Douglas, T. A., Alecia, C. H., Niang, O. C., Mamadou, F. R., Stepchenkova, E. Y., Svetlana, H. X., Lee, F. G., Seul-Ki, H. X., Blanton, H. N. (2009). "Internet Addiction: Metasynthesis of 1996–2006 Quantitative Research". *Cyber Psychology & Behavior* . 12 (2), 203.
5. Ayas, T. (2012). The relationship between Internet and computer game addiction level and shyness among high school students. *Educational Sciences: Theory and Practice*, 12(2), 632-636.
6. Buhlmann, U., Glaesmer, H., Mewes, R., Fama, J. M., Wilhelm, S., Brähler, E., & Rief, W. (2010). Updates on the prevalence of body dysmorphic disorder: a population-based survey. *Psychiatry research*, 178(1), 171-175.
7. Wallis, B. U. (2016). Psychology of computer use. XL. Addictive use of the Internet: a case that breaks the stereotype. *Psychological Reports* 79, 899–902.
8. Internet Addictive Disorder (IAD) Diagnostic Criteria, (2009) Internet paradox: a social technology that reduces social involvement and psychological wellbeing? *American Psychologist* 53, 1017–1031.
9. Block, D. O. (2008). Potential determinant of heavier Internet usage. *International Journal of Human-Computer Studies* 53, 537–550.
10. Moreno, M. A., Jelenchick, L., Cox, E., Young, H., & Christakis, D. A. (2011). Problematic internet use among US youth: a systematic review. *Archives of pediatrics & adolescent medicine*, 165(9), 797-805.
11. Masters, K. (2015). Social networking addiction among health sciences students in Oman. *Sultan Qaboos University Medical Journal*, 15(3), e357.

12. Turel, J. K. and Serenko, D. S. (2010) Internet addiction: Symptoms, evaluation and treatment and *Treatment of Body Image Disturbance*. Washington, US: American Psychological Association.
13. eBay Addiction (2014) . Retrieved 2018-05-30.
14. PsychCentral.(2018). Problematic Internet use and psychosocial well-being: Development of a theory-based cognitive-behavioral measurement instrument". *Computers in Human Behavior*, 18(5), 553.
15. Cheng, C., & Li, A. Y. L. (2014). Internet addiction prevalence and quality of (real) life: A meta-analysis of 31 nations across seven world regions. *Cyberpsychology, Behavior, and Social Networking*, 17(12), 755-760.
16. Dictionary.reference (2012). Define Shy at Dictionary.com" Retrieved 2018 -08 13.
17. Crazier, W. R. (1979). Shyness as a dimension of personality. *British Journal of Social and Clinical Psychology*, 18(1), 121-128.
18. Heiser, N. A., Turner, S. M., & Beidel, D. C. (2003). Shyness: Relationship to social phobia and other psychiatric disorders. *Behaviour research and therapy*, 41(2), 209-221.
19. Shiner, R., & Caspi, A. (2003). Personality differences in childhood and adolescence: Measurement, development, and consequences. *Journal of child psychology and psychiatry*, 44(1), 2-32.
20. Cain, G. O., & Susan, D. M. (2012). *Quiet: The Power of Introverts in a World That Can't Stop Talking*. New York: Crown.
21. Coplan, R. J., Rose-Krasnor, L., Weeks, M., Kingsbury, A., Kingsbury, M., & Bullock, A. (2013). Alone is a crowd: Social motivations, social withdrawal, and socioemotional functioning in later childhood. *Developmental psychology*, 49(5), 861.
22. Asendorpf, J. B., & Meier, G. H. (1993). Personality effects on children's speech in everyday life: Sociability-mediated exposure and shyness-mediated reactivity to social situations. *Journal of personality and social psychology*, 64(6), 1072.
23. Chen, X., Wang, L., & Cao, R. (2011). Shyness-sensitivity and unsociability in rural Chinese children: Relations with social, school, and psychological adjustment. *Child development*, 82(5), 1531-1543.
24. Cornish, R. J. (2012). Internet use and its relationship to loneliness and shyness. *CyberPsychology & Behavior* 4, 393-401.
25. Ordonez-Ortega, A., Espinosa-Fernandez, L., Garcia-Lopez, L. J., & Muela-Martinez, J. A. (2013). Behavioral Inhibition and Relationship with Childhood Anxiety Disorders. *TERAPIA PSICOLOGICA*, 31(3), 355-362.
26. Johnson, G. I. (2014) The prevalence of body dysmorphic disorder in the United States adult population. *Central Nervous System Spectrum*, 13, 316-22.
27. Ibanga, U. F. (2018). The relationship between body dysmorphism and internet addiction. *Journal of Psychology*, 1(14) 1- 34.
28. Ayas, B., & Sari, S. V. (2002). Internet addiction among adolescents: the role of self - esteem . *Procedia Social and Behavioral Sciences* 15, 3500 - 3505.
29. Hollingsworth, E. T. (2005). The relationship between shyness and internet addiction among secondary school student. *Journal of Personality & Social Psychology* 41, 330-339.
30. Chak, K., & Leung, L. (2004). Shyness and locus of control as predictors of internet addiction and internet use. *CyberPsychology & Behavior*, 7(5), 559-570.
31. Scealy, R. E., Phillips, C. T. and Stevenson J. I. (2002) Internet addiction and shyness, anxiety and stress. *International Online Journal of Educational Sciences*, 3(1), 138-148.
32. Roberts, L. D., Smith, L. M., & Pollock, C. M. (2000). U ra lot bolder on the net. *Shyness: Development, consolidation and change*, 121-138.