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Introduction

Technological advances have promoted use of smartphones and mobile phones (hereafter smartphone use also indicates mobile phone use unless explicitly mentioned) as smartphones o er entertainment, convenience and social rewards [1]. Surveys from BankMyCell et al [2] suggest that over 80% of individuals worldwide (>6.6 billion) own at least one smartphone (not counting mobile phones) and over 90% (>7.2 billion) own at least one mobile phone or smartphone. Smartphone use increased during the COVID-19 pandemic [3, 4], including with respect to remote meetings, online learning, and telehealth [5, 6]. As such, issues related to smartphone use (e.g., smartphone addiction or problematic use of smartphones) warrant consideration [7, 8], particularly with respect to mental health concerns.

Among concerns associated with smartphone use [9–13], phubbing may need additional attention from health-care professionals. Phubbing, a merged word combining "phone" and "snubbing" [14, 15], has been de ned as "ignoring other individuals by using a mobile phone during a face-to-face conversation" [16]. According to this de nition, individuals who engage repeatedly in phubbing may experience impaired in-person social functioning. In other words, phubbing may reduce human contacts and promote problems in human interactions. Such impaired in-person interactions may promote mental health problems, and mental health professionals should consider impacts of phubbing.

Karada et al. [15] developed a Phubbing Scale (PS). Of the 10 PS items, two factors (with ve items in each factor) were identied by principal component analysis [16]. PS scores with measures related to smartphone addiction, such as social media, internet, and gaming addictions [17–22]. Although the PS has been used across dierent countries to assess associations with addictions, relatively few studies have examined its psychometric properties [16].

To the best of the authors' knowledge, the PS has been tested for its psychometric properties in a Spanish sample [19] and a cross-country sample with 20 countries involvement [23]. e two-factor structure of PS was con rmed in the Spanish sample [19]; however, this two-factor structure was not invariant across the 20-country sample [23]. Nevertheless, Blachnio et al. [23] found that a shortened PS (i.e., 8-item PS, abbreviated as PS-8) was invariant across the 20 countries. García-Castro et al. [16] con rmed that the PS-8 is a feasible instrument with good validity.

Among the psychometric testing methods used for examining the factor structure of the PS-8 (i.e., whether it is a one-factor or a two-factor structure), only con r-matory factor analysis (CFA) has been used. erefore, although the PS-8 has been validated across 20 countries,

empirical psychometric studies of the PS-8 remain limited. Speci cally, two other advanced forms of psychometric testing (i.e., network [24–26] and Rasch analyses [27–31]) could be used to investigate further the factor structure of the PS-8 and to test that phubbing assessed by the PS-8 is di erent from internet addiction. Because a good instrument should have convergent evidence regarding its psychometric properties [32], it is important to have di erent psychometric methods support an instrument's factor structure.

Apart from the lack of network and Rasch analyses for the PS-8, the present authors are not aware of any psychometric examinations of the PS-8 among Iranian and Lin et al. BMC Psychiatry (2023) 23:763 Page 3 of 9

Measures: 8-item Phubbing Scale (PS-8)

e PS-8 contains 8 items assessed on a ve-point Likert scale, of which scoring 1 indicates never and 5 indicates always. e PS-8 has been proposed to have a two-factor structure, with the rst four items within a domain of Communication Disturbance and the last four times within a domain of Phone Obsession. Higher PS-8 scores re ect more severe phubbing. e PS-8 has been recently validated with a two-factor structure supported and satisfactory internal consistency (=0.85 for Communication Disturbance and 0.76 for Phone Obsession) [16]. e 10-item version of the Phubbing Scale (i.e., PS) has been validated in the Iranian Persian [34] and Pakistan Urdu [23] languages.

Internet Disorder Scale-short form (IDS9-SF)

e IDS9-SF contains 9 items assessed on a ve-point Likert scale, of which scoring 1 indicates never and 5 indicates very often [35]. e IDS9-SF has been proposed to have a one-factor structure with all nine items loading on the same domain of internet addiction. A higher score in the IDS9-SF re ects more severe internet addiction.

e IDS9-SF has been validated among Iranian, Pakistani, and Bangla samples via network analysis [26].

Data analysis

Participants' characteristics and basic item properties of the PS-8 were analyzed using descriptive statistics, including means with standard deviations (SDs) and frequencies with percentages. Afterward, three types of psychometric testing (con rmatory factor, network, and Rasch analyses) were used to examine psychometric properties of the PS-8. After verifying the factor structure of the PS-8, internal consistency using Cronbach's and McDonald's was examined for the entire PS-8 and potential domains of the PS-8 (if the PS-8 was found to have more than one underlying factor). When Cronbach's and McDonald's were higher than 0.7, the internal consistency was deemed satisfactory [36, 37].

Network analysis

Network analyses can provide insight into items' structures, positions, and dyadic properties in easy-to-understand patterns [24]. Correlations between PS-8 items may be visualized using lines of di erent widths to visualize if any two items have strong or weak correlations [25, 26]. With such illustrations, network analyses can provide straightforward information regarding whether an instrument (e.g., the PS-8 in the present study) assesses the same construct in a manner di ering from other constructs (e.g., internet addiction).

at is, when concurrently using network analysis on two di erent scales, one can identify if the two di erent scales assess di erent concepts. e network analysis included all 17 items of the PS-8 and IDS9-SF. e required minimum sample size in network analysis based on Leme's $et\ al\ [38]$ recommendation was $[(17)+(17\times16/2)=153]$. Using the Extended Bayesian Information Criterion (EBICglasso) as an estimator with 1000 bootstraps, analyses were conducted in Je reys' Amazing Statistics Program (JASP) version 0.15.0.0. In the model, each variable is a node and connections between nodes are edges.

Con rmatory factor analysis (CFA)

CFA with a diagonally weighted least squares estimator was used to test two potential factor structures of the PS-8: (i) a one-factor structure that has all 8 PS-8 items embedded in the same construct; (ii) a two-factor structure that has the rst 4 PS-8 items embedded in the construct of Communication Disturbance and the last 4 PS-8 items in the construct of Phone Obsession.

Several t indices were used to examine if the proposed factor structures (i.e., one-factor and two-factor structure) had satisfactory data-model ts. A comparative t index (CFI) and Tucker-Lewis index (TLI) higher than 0.9 together with root mean square error of approximation (RMSEA) and standardized root mean square (SRMR) less than 0.08 indicate satisfactory t [39–41]. After the factor structures were examined using CFA, the better structure was further tested for measurement invariance across country (i.e., Bangladesh, Iran, and Pakistan) and across males and females. ree nested models were used in the measurement invariance test: (i) con gural model that assumes each subgroup having the same factor structure; (ii) metric invariant model (aka weak invariant model) that assumes each subgroup having equivalent factor loadings; and (iii) scalar invariant (aka strong invariant model) that assumes each subgroup having equivalent factor loadings and item intercepts [42, 43].

e equivalence of factor loadings and item intercepts was examined using di erences in CFI, RMSEA, and SRMR (i.e., CFI, RMSEA, and SRMR). With CFI > -0.01 together with RMSEA and SRMR</br>
-0.01 together with RMSEA and SRMR</br>
-0.01 [44–46], the equivalence was considered supported and the PS-8 considered as metric or scalar invariant across the testing subgroups. e required minimum sample size in CFA based on the RMSEA (http://quantpsy.org/rmsea/rmsea.htm) was 525 when type I error at 0.05, power at 0.9, null RMSEA at 0, and alternative RMSEA at 0.05. JASP was used for CFA.

Rasch analysis

Rasch analyses possess a mathematic advantage of converting item scores into continuous scales [27, 28]. With the use of additive unit, Rasch analyses assess if items in an instrument are embedded in a unidimensional concept [29]. Moreover, Rasch analyses can examine if

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Table 1 Descriptive characteristics of the sample (n = 1,902)

Variables		N (100%)/ Mean (± SD)
Age, years		26.3 (± 8.1)
Gender		
	Male	928 (48.8%)
	Female	957 (50.4%)
	Prefer not to say	16 (0.8%)
Country		
	Bangladesh	534 (28.1%)
	Iran	702 (36.9%)
	Pakistan	666 (35%)
Marital status		
	Married	533 (28.0%)
	Single	1348 (70.9%)
	Divorced/widowed	21 (1.1%)
Living area	Urban	1499 (78.8%)
	Rural	264 (13.9%)
	Suburb	139 (7.3%)
Current smoker	Yes	297 (15.6%)
Cellphone use per day (in hours)		6.42 (± 4.66)

di erent subgroups interpret item descriptions di erently or show di erential item functioning (DIF) [30, 31].

If the network analysis and CFA results showed that the PS-8 was unidimensional, all 8 items would be analyzed in the Rasch analysis simultaneously to examine if they all embedded in the same construct. If a two-factor structure of the PS-8 was supported by the network analysis and CFA results, two Rasch models would be constructed: one construct testing the rst four items for the Communication Disturbance domain; another testing the last four items for the Phone Obsession domain. In t and out t mean square (MnSq) was used to test if each PS-8 item t in its embedded construct: both in t and out t MnSq scores ranging between 0.5 and 1.5 indicate good t [47, 48]. Afterward, DIF of each PS-8 item was assessed to examine if any item had substantial DIF across countries or sex/gender. A substantial DIF was de ned as a DIF contrast (i.e., di culty di erences between subgroups) larger than 1 [49]. e required minimum sample size in Rasch analysis based on a ve-point Likert scale is between $25 \times (5+1)=150$ and $100 \times (5+1)=600$ [50].

Results

Among the 1902 participants who completed the PS-8, 957 were female (50.4%), 928 were male (48.8%), and 16 did not want to disclose (0.8%). Participants were relatively young (mean age=26.3 years; SD=8.1) and relatively equally distributed across the three countries: 534 (28.1%) in Bangladesh, 702 (36.9%) in Iran, and 666 (35.0%) in Pakistan. On average, they spent 6.42 hours (SD=4.66) using a cellphone per day. Additional participant information is reported in Table 1. e PS-8 item properties are reported in Table 2. In brief, the mean scores of the 8 items were between 2.00 and 3.85; the skewness (-0.91 to 0.86) and kurtosis (-1.24 to -0.15) values were close to normal distribution.

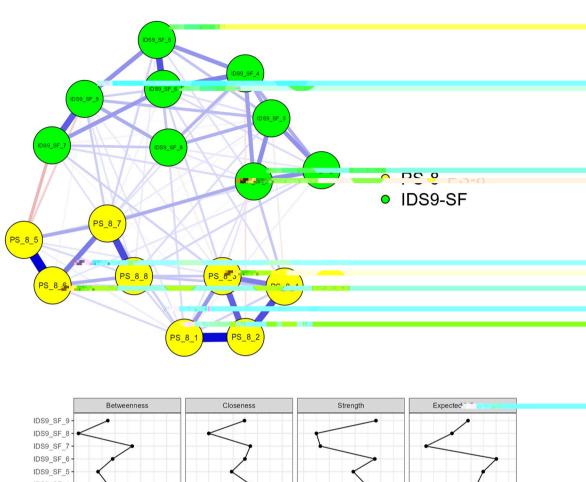
Network analysis showed that all PS-8 items were closely associated, and all IDS9-SF items were closely associated. In addition, two clear factors were identied: one for phubbing and another for internet addiction (Fig. 1). e accuracy and the stability of the estimation in the network analysis model was assessed using bootstrapped the 95% con dence intervals (CIs) of the edge e estimated CIs for most of the edges were narrow, indicating edge-weight accuracy. As shown in Fig. 1 and Supplementary Table S1, there were positive correlations between PS-8 and IDS9-SF items. nodes of the PS-8 (PS8-1 to 8) and IDS9-SF (IDS1 to 9) items clustered together in di erent sections of the netere were noticeable and strong edge connection between IDS2 and PS8-7. Additional results regarding the network analysis can be found in Supplementary materials.

e two-factor structure of the PS-8 was con rmed by CFA (Table 3). Although some t indices were acceptable for a one-factor structure of the PS-8, some t indices were unsatisfactory (e.g., RMSEA>0.08 for each country sample and the entire sample). Unsatisfactory t indices were not observed for the two-factor structure of the PS-8 (CFI=0.970 to 0.997; TLI=0.956 to 0.996; RMSEA=0.025 to 0.058; and SRMR=0.038 to 0.076), except for one slightly high value in RMSEA

Table 2 Properties of items from the 8-item Phubbing Scale

Item	Mean	SD	Kurtosis	Skewness
1. My eyes start wandering on my phone when I'm together with others	2.26	1.06	-0.54	0.47
2. I am always busy with my mobile phone when I'm with my friends	2.08	1.01	-0.31	0.63
3. People complain about me dealing with my mobile phone	2.00	1.10	-0.15	0.86
4. I'm busy with my mobile phone when I'm with friends	2.36	1.11	-0.57	0.44
5. My phone is always within my reach	3.85	1.24	-0.18	-0.91
6. When I wake up in the morning, I rst check the messages on my phone	3.55	1.33	-0.95	-0.48
7. I feel incomplete without my mobile phone	2.85	1.41	-1.25	0.11
8. My mobile phone use increases day by day	2.82	2.85	-1.00	0.18

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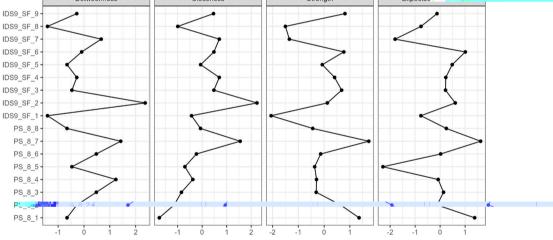


Fig. 1 Network of Relationships Between Phubbing and Internet Use Disorder. Note. positive and negative associations are indicated by blue and red lines, respectively

(0.093) among Pakistani participants. erefore, measurement invariance of the PS-8 was conducted for its two-factor structure. Metric (or weak) invariance was supported for the PS-8 across countries (CFI=0.014; RMSEA = -0.017; and SRMR = -0.013) and scalar (or strong) invariance was supported across sex/gender (CFI=0.000 and -0.001; RMSEA=0.002 and -0.003; and SRMR=0.000 and -0.003). However, scalar invariance of the PS-8 across countries was not fully supported

(CFI = -0.020; RMSEA = 0.019; and SRMR = 0.014) (Table 4).

e unidimensionality of each domain in the PS-8 was supported by Rasch analysis. For the Communication Disturbance domain, in t MnSq ranged between 0.83 and 1.14, and out t MnSq ranged between 0.82 and 1.11. For Phone Obsession, in t MnSq ranged between 0.93 and 1.12, and out t MnSq ranged between 0.90 and 1.17. e absolute DIF contrasts between countries and between sexes/genders were all less than 1, indicating

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Table 3 Con rmatory factor analysis t indices and internal consistency for the 8-item Phubbing Scale

	N	Female	Male	Age: Mean (SD)	² (df)	CFI	TLI	RMSEA (95%CI)	SRMR		
One-factor st	ructure										
Iran	702	356 (50.7%)	336 (47.9%)	33.25 (8.70)	79.335 (20)	0.979	0.971	0.065 (0.050-0.080)	0.062	0.841	0.836
Bangladesh	534	270 (50.6%)	259 (48.5%)	22.69 (4.58)	153.857 (20)	0.948	0.928	0.112 (0.096–0.129)	0.094	0.847	0.845
Pakistan	666	331 (49.7%)	334 (50.2%)	21.77 (2.50)	369.027 (20)	0.905	0.866	0.162 (0.148–0.177)	0.132	0.856	0.861
All countries	1902	957	928	26.3 (8.1)	524.025 (20)	0.943	0.920	0.115 (0.107-0.141)	0.094	0.846	0.841
Two-factor st	ructure										
Iran	702	356 (50.7%)	336 (47.9%)	33.25 (8.70)	27.122 (19)	0.997	0.996	0.025 (0.000-0.044)	0.038	0.843/0.718	0.844/0.724
Bangladesh	534	270 (50.6%)	259 (48.5%)	22.69 (4.58)	37.208 (19)	0.993	0.990	0.042 (0.021–0.062)	0.047	0.845/0.781	0.844/0.792
Pakistan	666	331 (49.7%)	334 (50.2%)	21.77 (2.50)	129.415 (19)	0.970	0.956	0.093 (0.079–0.109)	0.076	0.844/0.848	0.845/0.852
All countries	1902	957	928	26.3 (8.1)	140.240 (19)	0.986	0.980	0.058 (0.049-0.067)	0.049	0.841/0.784	0.841/0.788

df=degree of freedom; CFI=comparative fit index; TLI=Tucker-Lewis index; RMSEA=root mean square residual of approximation; SRMR=standardized root mea square error; α = Cronbach's α ; ω = McDonald's ω

Table 4 Measurement invariance of the 8-item Phubbing Scale in two-factor structure across 3 countries and genders/sexes

	2	df	CFI	RMSEA	SRMR	CFI	RMSEA	SRMR
Across Country								
Con gural invariance	385.852	73	0.966	0.082	0.072			
Metric (weak) invariance	252.763	69	0.980	0.065	0.059	0.014	-0.017	-0.013
Scalar (strong) invariance	445.542	81	0.960	0.084	0.073	-0.020	0.019	0.014
Across gender/sex								
Con gural invariance	191.529	73	0.987	0.051	0.053			
Metric (weak) invariance	189.451	69	0.987	0.053	0.053	0.000	0.002	0.000
Scalar (strong) invariance	208.406	81	0.986	0.050	0.050	-0.001	-0.003	-0.003

 $df = degree\ of\ freedom; CFI = comparative\ fit\ index;\ RMSEA = root\ mean\ square\ error\ of\ approximation;\ SRMR = standardized\ root\ mean\ square\ residual$

Table 5 Rasch analysis results for the 8-item Phubbing Scale

Item#	Di culty	Mean square		Di erential	item functioning		
		In t	Out t	I vs. B	I vs. P	B vs. P	M vs. F
Item 1	-0.23	0.94	0.94	0.45	0.62	-0.17	0.06
Item 2	0.25	0.83	0.82	-0.34	-0.27	-0.07	0.12
Item 3	0.47	1.14	1.11	0.54	0.39	0.15	-0.17
Item 4	-0.49	1.08	1.07	-0.60	-0.69	0.10	-0.35
Item 5	-0.89	1.12	1.17	-0.38	-0.51	0.13	-0.03
Item 6	-0.40	0.93	0.90	-0.60	-0.25	-0.35	-0.44
Item 7	0.62	0.93	0.92	0.65	0.76	-0.11	0.07
Item 8	0.67	0.94	1.00	0.24	-0.04	0.28	0.15

 $I\!=\!Iran;\,B\!=\!Bangladesh;\,P\!=\!Pakistan;\,M\!=\!male;\,F\!=\!female.$

no substantial DIF across countries or sexes/genders (Table 5). Moreover, the internal consistency of the PS-8 (its two factors and the entire PS-8) was satisfactory with both Cronbach's and McDonald's higher than 0.7 in each country sample and the entire sample (Table 3).

Discussion

e present study used advanced psychometric testing methods to understand the psychometric properties of the PS-8 across three understudied country populations: Bangladesh, Iran, and Pakistan. Network analysis results showed a clear pattern that phubbing is a di erent concept from internet addiction. e concept of phubbing assessed via PS-8 could be further classi ed into two domains. Speci cally, network analysis provided visual

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information and evidence [25, 26] that the eight PS-8 items were di erent from the nine IDS9-SF items. CFA further supported the two-factor structure of the PS-8 and this two-factor structure was invariant across genders/sexes and countries. Finally, Rasch analysis indicated that the four PS-8 items were embedded in one construct and the last PS-8 items in another. All PS-8 items did not have substantial DIF across gender/sex and country, also indicating that these items are invariant across subgroups. erefore, the prior proposed two-factor structure for the PS-8 [16, 23] was fully supported by the present study's ndings.

e satisfactory psychometric properties of the PS-8 found in the present study were comparable to those from a recent article assessing the psychometric properties of the Portuguese PS-8 [16]. However, García-Castro et al. [16] only assessed the PS-8 in one Portuguese sample. Although they found the two-factor structure of the PS-8 to be invariant across men and women, their results did not provide evidence regarding whether the PS-8 was invariant across countries. Blachnio et al. [23] examined both the PS and PS-8 regarding measurement invariance across 20 countries. ey found that the PS could not satisfy measurement invariance, while the PS-8 could. Although the PS-8 was found to be invariant across countries, Błachnio et al. [23] did not include Iranian and Bangladeshi participants in their sample. cannot conclude if the two-factor structure of PS-8 could be replicated among Iranians and Bangladeshis. present study thus extended the factor structure evidence of the PS-8 to these groups. More speci cally, Błachnio et al. [23] had a Pakistani sample in their study and found that the PS-8 was invariant across Pakistani and other countries' participants. e present study found the PS-8 to be invariant across Pakistani, Iranian, and Bangladeshi participants; thus, the PS-8 may be invariant across Iran, Bangladesh, and the countries involved in Blachnio et al's [23] study. Nevertheless, this possibility is based on indirect evidence, and future studies are needed to test this directly. e present study extended the two-factor structure ndings of the PS-8 from CFA using another advanced psychometric testing method (i.e., Rasch analysis). Rasch analyses involve converting ordinal scales into continuous scales [27, 28], and ndings supported those from network analysis and CFA. e rst four PS-8 items showed appropriate in t and out t MnSq, indicating that the four items embedded in the same construct. Similarly, the last four PS-8 had appropriate in t and out t MnSq. Rasch analysis additionally veri ed measurement invariance ndings indicating no substantial DIF items in the PS-8 items.

Study limitations warrant mention. First, the present study did not use any external criterion measures to examine the concurrent validity or criterion-related

validity of the PS-8. erefore, it is unclear if the PS-8 tested among participants from the three countries linked to similar relevant constructs (e.g., smartphone addiction or social media addiction). Second, the present study did not examine test-retest reliability of the PS-8. erefore, it is unclear if the PS-8 could reproduce similar scores across times when participants would be expected to have no changes in their phubbing behavird, the present study used online survey to coliors. lect data. erefore, potential participants without access of internet during the study period could not participate. In this regard, the representativeness of the present samples is restricted. In addition, the online survey is a type of self-reports, and is thus subject to social desirability biases.

Conclusion

In conclusion, the present study suggest that the PS-8 may be a feasible and robust instrument for healthcare providers, especially mental health professionals, to quickly assess and evaluate an individual's phubbing e two-factor structure of the PS-8 was conbehaviors. rmed using di erent statistical methods, which indicate that its factor structure is stable. Indeed, ndings from measurement invariance in CFA and DIF in Rasch analysis all support that the PS-8 is invariant across women and men and the three studied countries (i.e., Bangladesh, Iran, and Pakistan). erefore, the PS-8 can be used for sex-/gender-related and country comparisons. With the strong psychometric properties of the PS-8, healthcare providers may use it to help identify individuals at risk of having phubbing problems and provide interventions as indicated.

Supplementary Information

The online version contains supplementary material available at https://doi.org/10.1186/s12888-023-05251-4.

Supplementary Material 1: Supplementary Table S1. Edge weights between the 8-item Phubbing Scale (PS-8) and IDS9-SF items among 1902 participants

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Authors' contributions

All authors listed have made a substantial, direct and intellectual contribution to the work. CY Lin and Amir H Pakpour: Conceptualization, Writing – original draft, Writing – review & editing, Methodology, Data curation, Project administration, Supervision. Mohammed A. Mamun, Firoj al Mamun, Irfan Ullah, Ismail Hosen, Syed Ahsan Zia, Najma Iqbal Malik, Ali Poorebrahim, Morteza Pourgholami, and Marc Potenza: Writing – review & editing, Methodology, Investigation, Data curation, Supervision, Validation. All authors read and approved the nal manuscript.

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Data availability

The dataset for the study is available from the corresponding author upon reasonable request.

Declarations

Ethics approval and consent to participate

The studies involving human participants were reviewed and approved by the Institutional Review Boards of the Institute of Allergy and Clinical Immunology of Bangladesh, Department of Psychology, University of Sargodha, Sargodha, Pakistan, and Qazvin University of Medical Sciences. The participants took part voluntarily and remained anonymous. We protected their privacy and maintained the con-dentiality of personal records when processing personal data. All methods were carried out in accordance with relevant guidelines and regulations. Written informed consent to participate in this study was provided by the participants.

Consent for publication

Not applicable.

Competing interests

The authors declare no competing interests.

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References

- Chang KC, Chang YH, Yen CF, et al. A longitudinal study of the e ects of problematic smartphone use on social functioning among people with schizophrenia: Mediating roles for sleep quality and self-stigma [published online ahead of print, 2022 Apr 7]. J Behav Addict. 2022;11(2):567–576. https://doi.org/10.1556/2006.2022.00012
- BankMyCell. How Many Phones Are in the World? [Internet]. 2022 [cited 2022 Jul 6]. Available from: https://www.bankmycell.com/blog/ how-many-phones-are-in-the-world.
- Chen CY, Chen IH, O'Brien KS, Latner JD, Lin CY. Psychological distress and internet-related behaviors between schoolchildren with and without overweight during the COVID-19 outbreak. Int J Obes (Lond). 2021;45(3):677–686. https://doi.org/10.1038/s41366-021-00741-5
- Fung XCC, Siu A, Potenza MN, O'Brien KS, Latner JD, Chen CY, Chen IH, Lin CY. Problematic use of internet-related activities and perceived weight stigma in schoolchildren: A longitudinal study across di erent epidemic periods of COVID-19 in China. Front Psychiatry. 2021;12:675839. https://doi.org/10.3389/ fpsyt.2021.675839. PMID: 34211473; PMCID: PMC8240199.
- Chen CY, Chen IH, Hou WL, Potenza MN, O'Brien KS, Lin CY, Latner JD. The relationship between children's problematic Internet-related behaviors and psychological distress during the onset of the COVID-19 pandemic: A longitudinal study. J Addict Med. 2022 May/Jun 01;16(3):e73—e80. https://doi. org/10.1097/ADM.00000000000000907. PMID: 34138935.
- Chen IH, Chen CY, Pakpour AH, Gri ths MD, Lin CY, Li XD, Tsang HWH. Problematic internet-related behaviors mediate the associations between levels of internet engagement and distress among schoolchildren during COVID-19 lockdown: A longitudinal structural equation modeling study. J Behav Addict. 2021;10(1):135–48. PMID: 32116294; PMCID: PMC7997945.
- Chen CY, Chen IH, Pakpour AH, Lin CY, Gri ths MD. Internet-related behaviors and psychological distress among schoolchildren during the COVID-19 school hiatus. Cyberpsychol Behav Soc Netw. 2021;24(10):654–63. https://doi. org/10.1089/cyber.2020.0562.
- Chen IH, Chen CY, Liu CH, Ahorsu DK, Gri ths MD, Chen YP, Kuo YJ, Lin CY, Pakpour AH, Wang SM. Internet addiction and psychological distress among Chinese schoolchildren before and during the COVID-19 outbreak: A latent class analysis. J Behav Addict., 'Xu P, Chen JS, Chang YL, Wang X, Jiang X, Gri ths MD, Pakpour AH, Lin CY. (2022). Gender Di erences in the Associations Between Physical Activity, Smartphone Use, and Weight Stigma. Frontiers in Public Health, 10, 862829. https://doi.org/10.3389/fpubh.2022.862829.
- Ahorsu DK, Adjorlolo S, Nurmala I, Ruckwongpatr K, Strong C, Lin C-Y. Problematic Porn Use and cross-cultural dierences: A brief review. Curr Addict Rep. 2023;10:572–80. https://doi.org/10.1007/s40429-023-00505-3.

- Alimoradi Z, Lot A, Lin CY, Gri ths MD, Pakpour AH. Estimation of Behavioral Addiction Prevalence During COVID-19 Pandemic: A Systematic Review and Meta-analysis. Curr Addict Rep. 2022;9(4):486–517. https://doi.org/10.1007/ s40429-022-00435-6.
- Kakul F, Javed S. Internet Gaming Disorder: An Interplay of Cognitive Psychopathology. Asian J Soc Health Behav. 2023;6:36–45. https://doi.org/10.4103/ shb.shb 209 22.
- Ruckwongpatr K, Chirawat P, Ghavifekr S, Gan WY, Tung SEH, Nurmala I, Nadhiroh SR, Pramukti I, Lin C-Y. Problematic Internet Use (PIU) in Youth: A Brief Literature Review of Selected Topics. Curr Opin Behav Sci. 2022;46:101150. https://doi.org/10.1016/j.cobeha.2022.101150.
- Ghazi FR, Gan WY, Tung SEH, et al. Problematic Gaming in Malaysian University Students: Translation and Psychometric Evaluation of the Malay Language Versions of Gaming Disorder Test and Gaming Disorder Scale for Young Adults. Eval Health Prof. 2023;1632787231185845. https://doi. org/10.1177/01632787231185845.
- Chotpitayasunondh V, Douglas KM. The e ects of phubbing on social interaction. J Appl Soc Psychol. 2018;48(6):304–16. https://doi.org/10.1111/ iasp.12506.
- Karada E, Tosunta B, Erzen E, Duru P, Bostan N, ahin BM, et al. Determinants of phubbing, which is the sum of many virtual addictions: a structural equation model. J Behav Addict. 2015;4(2):60–74. https://doi.org/10.1556/2006.4.2015.005.
- García-Castro FJ, Abreu AM, Rando B, Blanca MJ. The Phubbing Scale (PS-8) in the Portuguese population: psychometric properties. Psicologia, re exao e critica: revista semestral do Departamento de. Psicologia da UFRGS. 2022;35(1):7. https://doi.org/10.1186/s41155-022-00209-z.
- Al-Saggaf Y, O'Donnell SB. Phubbing: perceptions, reasons behind, predictors, and impacts. Hum Behav Emerg Technol. 2019;1(2):132–40. https://doi.org/10.1002/bbe2.137.
- Blachnio A, Przepiorka A. Be awarel If you start using Facebook problematically you will feel lonely: phubbing, loneliness, self-esteem, and Facebook intrusion. A cross-sectional study. Soc Sci Comput Rev. 2019;37(2):270–8. https://doi.org/10.1177/0894439318754490.
- Blanca MJ, Bendayan R. Spanish version of the Phubbing Scale: Internet addiction, Facebook intrusion, and fear of missing out as correlates. Psicothema. 2018;30(4):449–54. https://doi.org/10.7334/psicothema2018.153.
- Davey S, Davey A, Raghav SK, Singh JV, Singh N, Błachnio A, Przepiórka A. Predictors and consequences of Phubbing among adolescents and youth in India: an impact evaluation study. J Fam Community Med. 2018;25(1):35–42. https://doi.org/10.4103/jfcm.JFCM_71_17.
- Ivanova A, Gorbaniuk O, Błachnio A, Przepiórka A, Mraka N, Polishchuk V, Gorbaniuk J. Mobile phone addiction, phubbing, and depression among men and women: a moderated mediation analysis. Psychiatry O. 2020;91(3):655–68. https://doi.org/10.1007/s11126-020-09723-8.
- Yam FC, Kumca iz H. Adaptation of general phubbing scale to Turkish culture and investigation of phubbing levels of university students in terms of various variables. Addicta: Turk J Addict. 2020;7(1):48–60. https://doi.org/10.5152/addicta.2020.19061.
- Błachnio A, Przepiórka A, Gorbaniuk O, Bendayan R, McNeill M, Angeluci A, Abreu AM, Ben-Ezra M, Benvenuti M, Blanca MJ, Brkljacic T. Measurement invariance of the Phubbing Scale across 20 countries. Int J Psychol. 2021;56(6):885–94. https://doi.org/10.1002/ijop.12842.
- Borgatti SP, Mehra A, Brass DJ, Labianca G. Network analysis in the social sciences. Science. 2009;323:892–5. https://doi.org/10.1126/science.1165821.
- Lecuona O, Lin CY, Rozgonjuk D, Norekvål TM, Iversen MM, Mamun MA, Gri ths MD, Lin TI, Pakpour AH. A Network Analysis of the Fear of COVID-19 Scale (FCV-19S): A Large-Scale Cross-Cultural Study in Iran, Bangladesh, and Norway. Int J Environ Res Public Health. 2022;19(11):6824. https://doi. org/10.3390/ijerph19116824.
- Li L, Mamun MA, Al-Mamun F, Ullah I, Hosen I, Zia SA, Poorebrahim A, Pourgholami M, Lin CY, Pontes HM, Gri ths MD, Pakpour AH. A network analysis of the Internet Disorder Scale-Short Form (IDS9-SF): A large-scale cross-cultural study in Iran, Pakistan, and Bangladesh. Curr Psychol. 2022. https://doi.org/10.1007/s12144-022-03284-8. Advance online publication.
- Chang CC, Su JA, Tsai CS, Yen CF, Liu JH, Lin CY. Rasch analysis suggested three unidimensional domains for A liate Stigma Scale: additional psychometric evaluation. J Clin Epidemiol. 2015;68(6):674–83. https://doi. org/10.1016/j.jclinepi.2014.11.023.
- 28. Chang KC, Wang JD, Tang HP, Cheng CM, Lin CY. Psychometric evaluation using Rasch analysis of the WHOQOL-BREF in heroin-dependent people undergoing methadone maintenance treatment: further item