

## Original Article

# Social media addiction and its association with eating disorder risk among first-year students at a private Peruvian university

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### Abstract

University students face increasing exposure to social media platforms that often promote idealized body standards, raising concerns about their potential impact on eating behaviors. This study explored whether social media addiction and body image dissatisfaction are associated with the risk of eating disorders (EDs) among first-year students at a private Peruvian university. A cross-sectional study was conducted with 403 participants who completed three validated instruments: the Social Media Addiction Questionnaire, the Body Dissatisfaction Scale, and the EAT-26. Data were analyzed using bivariate and multivariate models to estimate prevalence ratios (PR). Overall, 13.6% of students were at risk of EDs, with women showing higher prevalence (15%) than men (10%). WhatsApp, Instagram, and TikTok were the most commonly used platforms. High social media addiction was significantly associated with EDs risk (adjusted PR=3.03; 95% CI: 1.33–6.91; p=0.02), whereas body dissatisfaction showed no significant association. These findings point to a possible link between social media engagement patterns and EDs risk in this population, though further research is needed to better understand this relationship. Considering social media consumption habits could be a useful element in eating disorder prevention efforts among young university populations.

**Keywords:** eating disorder, social media, body dissatisfaction, internet addiction, body image, university students

### Introduction

Eating disorders (EDs) encompass profound psychological disturbances, where individuals perceive their weight and body image with distortion, giving rise to body dissatisfaction and an overwhelming preoccupation with food intake, ultimately resulting in dangerous eating behaviors [1]. The demographic group most vulnerable to the onset of EDs consists of adolescents, constituting 80% of cases, and falling within the age range of 10 to 19. This period of transition marks a phase of substantial change, priming adolescents for adulthood [2].

Scientific evidence strongly supports the connection between social [3, 4] and mass media [5–7] with body dissatisfaction, as these platforms often promote an ideal of beauty and approval-seeking behavior. Within the Latin American context, this issue has also been documented. In Peru, urban areas have shown a high incidence of EDs, with a prevalence of 6% in Lima and Callao in 2017 [8]. A study from the same year, also performed in Peru, found a potential diagnosis rate of 10.1% among first-year undergraduate students, with higher rates in women (11.3%) than in men (8.6%) [9].

Adding to this concern, in the context of the COVID-19 pandemic, the use of Information and Communication



Technologies has become increasingly important, with internet access playing a significant role in the daily lives of adolescents. According to data from the National Institute of Statistics and Informatics of Peru, young people and adolescents made the most use of the internet, with 90.9% of the 19–24 age range and 88.3% of the 12–18 age group accessing it during the last quarter of 2020 [10].

This widespread connectivity has significant implications. The easy access to the internet for adolescents exposes them to platforms that often promote an idealized standard of beauty and success based on physical appearance. Functional neuroimaging research suggests that excessive internet use can affect impulse control and motivation by altering brain structures, particularly the dorsolateral prefrontal cortex. These findings support the hypothesis that excessive internet use can have significant consequences on adolescents' mental health, leading to appearance dissatisfaction and potentially triggering EDs, self-esteem issues, and depression [11].

Studies across different countries support these concerns. In Turkey, duration of Internet use among students has been associated with addiction to smartphones and the Internet itself, influencing the development of EDs [12]. In Spain, factors such as self-esteem, body image, the ideal body, and social media use have been observed to play crucial roles in the disordered eating behaviors of female university students [13].

Given the substantial impact on future morbidity and mortality caused by EDs, it is imperative to conduct comprehensive research on this topic. Understanding the factors influencing the progression of EDs in adolescents is crucial for timely prevention, ensuring optimal physical, mental, and social health for this population. For that reason, the objective of this study was to evaluate the association between social media addiction, body image dissatisfaction, and the risk of EDs among university students in the context of a private university in Peru.

## Material and methods

This cross-sectional study was carried out on first-year undergraduate students of a private university in the capital of Peru. Students between the ages of 18 and 27 were selected. The research protocol was approved by the Ethics Committee of the Universidad Científica del Sur, with approval number 000-DACND-DAFCS-U.CIENTIFICA-2022.

After obtaining approval from the academic authorities of the educational institution, a virtual platform was used to reach the target population. The informed consent link was shared with students through Google Forms, giving them the opportunity to decide whether or not to participate in the research. The informed consent provided a clear explanation of the research objectives and their significance. Students who chose and accepted to participate were directed to the survey through the same link. The survey consisted of two sections: the first section collected general student information, while the second section included 24 questions from the Social Media Addiction Questionnaire (ARS), 26 questions from the Eating Attitudes Test-26 (EAT-26), and 2 questions with corresponding images from the Body Dissatisfaction Scale (BDS). The survey was designed to be completed within a maximum time of 25 minutes.

## Social media addiction questionnaire

The employed questionnaire encompasses three distinct dimensions centered on social media behavior: firstly, analyzing social media obsession, encompassing recurring thoughts and distress when not connected to any platform; secondly, exploring the feeling of losing control due to network inactivity; and finally, addressing excessive social media use and difficulties in managing dedicated time [14].

This questionnaire, developed and validated in 2014 by Ecurra, M. and Salad, E., originally consisted of 31 items and was administered to a sample of 380 students from various universities in Lima, Peru. Following analysis, eight items were excluded due to inappropriate behavior, resulting in a total of 24 items. The items are rated on a five-point Likert scale, with 4 indicating "always" and 0 indicating "never". The reliability of the questionnaire is supported by high Cronbach's alpha coefficients, ranging from 0.88 to 0.92, surpassing the threshold of 0.85 and ensuring the instrument's reliability [14].

## Body Dissatisfaction Scale (BDS)

This questionnaire consists of two versions, one featuring images of nine male bodies and the other featuring images of nine female bodies. In both versions, the bodies are numbered from 1 to 9 in ascending order of size. Body image dissatisfaction is determined by calculating the discrepancy between the participant's actual body and their idealized body. A discrepancy score

ranging from 1 to 3 indicates low body dissatisfaction, while a score from 4 to 5 suggests moderate body dissatisfaction. A discrepancy score from 6 to 8 reflects high body dissatisfaction. Conversely, if the participant selects the same body number for their actual and idealized bodies, they receive a score of zero, indicating no body dissatisfaction [15].

The pictorial scale for assessing body image dissatisfaction was developed and validated in 2016 by Mutale, G., Dunn, A., Stiller, J., and Larkin, R. To establish its validity, the scale was administered to 190 students (130 women and 60 men) from Trent University in Canada. Participants were asked to select their ideal body and indicate their perceived actual body. Construct validity was supported by a significant negative correlation between body dissatisfaction measured by the Body Dissatisfaction Scale (BDS) and body appreciation scores,  $r(57)=-.46$ ,  $p<.001$ . Additionally, there was a significant correlation between ratings of perceived actual body size and participants' BMI,  $r(57)=0.83$ ,  $p<.001$ , indicating strong construct validity [15].

### Eating Attitudes Questionnaire (EAT-26)

Each question in the questionnaire consists of 6 alternative responses with different scores: 0 points (never, rarely, sometimes); 1 point (often); 2 points (very often); 3 points (always). The total score is obtained by summing the responses from the 26 items, taking into account that item 25 is reverse-scored. Participants with higher scores indicate a greater risk of Bulimia Nervosa (BN) or Anorexia Nervosa (AN). This instrument comprises 3 subscales: 1) Diet, which includes 13 questions regarding concerns about thinness and evasive behaviors towards fattening foods; 2) Bulimia and food preoccupation, consisting of 6 questions about thoughts on food intake and bulimic behaviors; and 3) Oral control, comprising 7 questions about the influence of external factors on weight gain and personal control over food intake [16, 17].

To determine the risk of EDs in women and men aged 15 to 25, Constain, G., Ramirez, C., et al. evaluat-

ed the diagnostic utility and validity of the EAT-26. A cut-off score of 20, consistent with the initial version of the EAT-26, was considered. Regarding reliability, a Cronbach's alpha of 92.1% was obtained for the female version and 89% for the male version, both indicating excellent reliability of the instrument [16, 17].

### Data analysis

The Microsoft Excel software was used in order to facilitate the management and sorting of the data, involving a careful input process and arrangement into suitable fields to uphold precision and uniformity. Following this, the dataset was then transferred to SPSS version 25, a robust platform, to undergo an exhaustive round of statistical analysis.

Chi-square test was used to determine a possible relationship between the variables and EDs. Furthermore, bivariate and multivariate analyses were used, to assess prevalence ratio (PR), to delve into how the dependent variables influenced the risk of EDs. The confidence level set at 95%, coupled with a margin of error of 5%, was leveraged to bolster the dependability and validity of the outcomes. Descriptive statistics were utilized to determine demographic characteristics of the participants, including sex distribution, age (with a specific focus on participants aged 18 years or older), and other relevant variables.

### Results

Sex distribution revealed a higher prevalence of female participants, comprising 72.7% of the overall population, representing 293 students. In contrast, male students accounted for 27.3% of the sample, equivalent to 110 students (Table 1). Furthermore, the sample was stratified into two age groups: 18 years, and older. Among these, the 18-year-old group exhibited the highest proportion, constituting 68% of the sample, corresponding to 274 students. Conversely, those aged more than 18 accounted for 32%, representing 129 students (Table 1).

Table 1: Characteristics of the sample of students from a private Peruvian university.

Variables	n	%
Total	403	100
Sex	Male	27.3
	Female	72.2

Table 1: Continued.

Variables	n	%	
Age	Total	403	100
	18 years	274	68.0
	Over 18 years old	129	32.0
Risk of eating disorder	Total	403	100
	At risk	55	13.6
	Without risk	348	86.4
Body image dissatisfaction	Total	403	100
	High body dissatisfaction	70	17.4
	Low body dissatisfaction	279	69.2
	Moderate body dissatisfaction	54	13.4
Social media addiction	Total	403	100
	High social media addiction	14	3.5
	Low social media addiction	216	53.6
	Moderate social media addiction	173	42.9
Most commonly used social media platform	Total	403	100
	Discord	1	0.2
	Facebook	23	5.7
	Instagram	116	28.8
	Tik Tok	65	16.1
	Twitter	8	2.0
	WhatsApp	176	43.7
YouTube	14	3.5	

The prevalence of risk of EDs in the studied sample was 13.6%. Regarding the variable of body image dissatisfaction, it was observed that the highest prevalence was found in the low dissatisfaction level, accounting for 69.2%, followed by mild dissatisfaction at 13.4%, and high dissatisfaction at 17.4%. As for the variable of social media addiction, approximately half of the sample exhibited a low level of addiction, comprising 53.6%, followed by moderate addiction at 42.9%, and lastly, high addiction at 3.5%. Notably, the leading social media platforms used by the students were WhatsApp, Instagram, and TikTok, with a prevalence of 43.7%, 28.8%, and 16.1%, respectively.

Table 2 demonstrates that the variables Social Media Addiction and Age may be associated with the risk of EDs, as a statistically significant association was found in this population, with a p-value of 0.02 for both variables. On the other hand, the variables Body Image

Dissatisfaction and sex did not show any statistical significance with the risk of EDs (p-value>0.05).

Additionally, it was found that female participants had a higher prevalence of EDs risk compared to males, with 15% and 10%, respectively. Furthermore, it was observed that 18-year-old students had a higher prevalence of EDs risk compared to students older than 18 years, with 16.4% and 7.8%, respectively.

Table 3 provides evidence that the following variables impact the PR of EDs risk: having a high addiction to social media increases the risk by 235.4% (PR=3.354, 95% CI: 1.504 to 7.479). On the other hand, being older than 18 years acts as a protective factor against the risk of EDs, reducing it risk by 52.8% (PR=0.472, 95% CI: 0.246 to 0.906). Regarding the sub-variable of Body Image Dissatisfaction, no statistically significant association was found across its levels. Similarly, no statistically significant association was found for the sub-variable of sex.

Table 2: Chi-square results between subgroups and the risk of eating disorders.

Variables		Risk of eating disorder						P-value
		Total		At risk		Without risk		
		n	%	n	%	n	%	
<b>Social media addiction</b>	Total	403	100.0	55	13.6	348	86.4	0.02
	High social media addiction	14	100.0	5	35.7	9	64.3	
	Low social media addiction	216	100.0	23	10.6	193	89.4	
	Moderate social media addiction	173	100.0	27	15.6	146	84.4	
<b>Body image dissatisfaction</b>	Total	403	100.0	55	13.6	348	86.4	0.80
	High body dissatisfaction	70	100.0	11	15.7	59	84.3	
	Low body dissatisfaction	279	100.0	36	12.9	243	87.1	
	Moderate body dissatisfaction	54	100.0	8	14.8	46	85.2	
<b>Sex</b>	Total	403	100.0	55	13.6	348	86.4	0.19
	Male	110	100.0	11	10.0	99	90.0	
	Female	293	100.0	44	15.0	249	85	
<b>Age</b>	Total	403	100.0	55	13.6	348	86.4	0.02
	18 years	274	100.0	45	16.4	229	83.6	
	Over 18 years old	129	100.0	10	7.8	119	92.2	
<b>Most commonly used social media platform</b>	Total	403	100.0	55	13.6	348	86.4	0.44
	Discord	1	100.0	0	0.0	1	100.0	
	Facebook	23	100.0	0	0.0	23	100.0	
	Instagram	116	100.0	15	12.9	101	87.1	
	Tik Tok	65	100.0	13	20.0	52	80.0	
	Twitter	8	100.0	1	12.5	7	87.5	
	WhatsApp	176	100.0	23	13.1	153	86.9	
YouTube	14	100.0	3	21.4	11	78.6		

Table 3: Bivariate analysis of the prevalence ratio of the sample of students from a private Peruvian university.

Variables		P-value	PR	Confidence Interval	
				Lower	Higher
<b>Body image dissatisfaction</b>	High body dissatisfaction	.535	1.218	.654	2.269
	Low body dissatisfaction	.702	1.148	.565	2.332
	Moderate body dissatisfaction		Ref.		
<b>Social media addiction</b>	High social media addiction	.003	3.354	1.504	7.479
	Low social media addiction	.149	1.466	.872	2.463
	Moderate social media addiction		Ref.		
<b>Sex</b>	Male	.201	.666	.357	1.242
	Female		Ref.		
<b>Age</b>	Over 18 years old	.024	.472	.246	.906
	18 years old		Ref.		

Upon conducting multivariate analysis for each variable, it was found that in students who exhibited high addiction to social media, the PR of EDs risk increased by 203% (Adjusted Prevalence Ratio [PRa]=3.028, 95% CI: 1.327 to 6.908). Furthermore, being older than 18 years acted as a protective factor against the risk of EDs, reducing its risk by 50.8% (Adjusted PR=0.492, 95% CI: 0.258 to 0.941). It is important to note that in this study, being older than 18 years encompasses the ages ranging from 19 to 27 years. On the other hand, again body image dissatisfaction and sex did not exhibit a significant association with the risk of EDs, with a p-value>0.05 (Table 4).

## Discussion

This study aimed to explore the association between social media addiction, body image dissatisfaction, and eating disorder risk among students from a private Peruvian university. The main finding was a significant association between high social media addiction and eating disorder risk, with students exhibiting high addiction levels showing a threefold higher prevalence compared to those with low addiction. These results align with previous research conducted in similar populations within Peru.

A previous study conducted in another private university in Peru found a high prevalence of EDs among students, particularly among women. Despite the fact that the results are similar with respect to which sex presents higher rates of EDs, the proportion was high-

er than that of this investigation, showing up to 21% of the cases [18]. This variability in prevalence rates may reflect differences in sample characteristics or measurement approaches across studies.

After conducting multivariate analysis of the PR in the sample, it was found that having a high addiction to social media increases the prevalence of EDs by 203%. This aligns with the findings of Yurtdaş *et al.*, who discovered that adolescents who spend 7 hours or more per day consuming nutrition-related information on social media have a higher risk of developing EDs [19].

Beyond time spent online, the psychological mechanisms underlying this relationship deserve attention. Social media addiction can influence social appearance anxiety, as individuals tend to negatively self-evaluate when comparing themselves to the idealized lives portrayed on these platforms. According to the theory of social comparison, exposure to attractive images posted by influencers can trigger feelings of jealousy and inferiority, posing a risk to mental health [4]. Several studies have demonstrated a correlation between social appearance anxiety in adolescents and EDs [5–7].

Similarly, Wilksch *et al.* suggest that platforms that focus on image posting and viewing are associated with higher levels of EDs. Their study found that having social media accounts was associated with an increase in EDs among high school students. Female students with Snapchat accounts were more likely to engage in behaviors such as under-eating, skipping meals, following strict dietary plans, and having greater weight and body shape control. Male students with accounts on Snapchat, Instagram, Facebook, or Tumblr were

Table 4: Multivariate analysis of the prevalence ratio of a Peruvian private university student sample.

Variables	P-value	Adjusted PR	Confidence Interval		
			Lower	Higher	
<b>Body image dissatisfaction</b>	High body dissatisfaction	.549	1.209	.650	2.248
	Low body dissatisfaction	.861	1.064	.530	2.138
	Moderate body dissatisfaction		Ref.		
<b>Social media addiction</b>	High social media addiction	.008	3.028	1.327	6.908
	Low social media addiction	.183	1.429	.845	2.414
	Moderate social media addiction		Ref.		
<b>Sex</b>	Male	.183	.668	.369	1.210
	Female		Ref.		
<b>Age</b>	Over 18 years old	.032	.492	.258	.941
	18 years old		Ref.		

more likely to skip meals [20]. Another study found an association between the frequency of comparing one's own physical appearance to that of people followed on social media and body dissatisfaction and drive for thinness [21]. Despite these studies being conducted in a different population from the present research, which focuses on university students, it is important to prioritize the study of high school students. This is because adolescence is a critical period for the development of autonomy, and it is precisely during this period that dietary habits are adopted, which will become part of their future lifestyle.

Comparable results were found in the study by Al-Bisher et al., where it was concluded that searching for nutritional information on social media for a duration of 31 to 60 minutes was correlated with the presence of eating concerns, with a  $p\text{-value} \leq 0.049$  (95% CI: 1.000 to 1.187). The prevalence of such issues among the female participants in the study was found to be 49.6%. While the research demonstrates similarities regarding the association between social media use and the risk of eating concerns, it also reveals a significantly high prevalence of eating concerns. Despite the fact that these are similar results, it must be emphasized that it was not directly associated with the risk of EDs [22].

Social media has a significant impact on body image, stereotypes, and beauty standards, particularly among young people, despite its lack of reliability as a source of accurate nutritional information due to the prevalence of distorted content [23]. Increased use of Instagram is linked to higher levels of body dissatisfaction due to its visual nature and exposure to diverse body types [24]. In contrast, Twitter is most strongly connected to the risk of EDs due to its reduced control over content, facilitating access to communities promoting ED-favoring attitudes [3]. However, this study identified TikTok and Instagram, the social networks with less text in posts, as the ones most associated with the risk of EDs. This finding diverges from previous studies, possibly due to they were not conducted in a specifically Latin American population.

Addiction to social media can contribute to increased body dissatisfaction. However, it is also essential to consider the frequency with which users compare their physical appearance to others on social media. In line with this, Jiotsa et al. found a significant relationship between the frequency of participants comparing their physical appearance to that of the people they follow on social media. This suggests that the more individuals compare themselves to the photos of

other users on social media, the higher their body dissatisfaction and desire for thinness tend to be. It is further asserted that body dissatisfaction and the pursuit of thinness may amplify the inclination to engage in comparisons with images on social media [21].

Regarding body image dissatisfaction, this study yielded unexpected results. No statistically significant association was found between body image dissatisfaction and the risk of EDs ( $p > 0.05$ ). However, Aparicio et al., in their investigation conducted among Spanish female university students, found a negative correlation between higher scores on the EAT-26 and lower levels of body satisfaction, with a  $p\text{-value} < 0.01$ . This highlights that body image dissatisfaction leads to emotional and psychological distress, which is crucial in developing EDs. The disparity between studies may be attributed to differences in the population, as the previous research focused solely on Caucasian women; in contrast, the current study involved a population of Latin American university students [13].

Similarly, in a study conducted at a university in Southern China, Hao et al. found that male and female students who experienced high body dissatisfaction had higher scores on restrictive eating behaviors. In their quest to change their body shape due to the lack of satisfaction, they may be more prone to developing EDs. This difference in results can be attributed to the cultural context in China, where the beauty ideal has traditionally revolved around having a slim and slender body, a belief deeply ingrained in the minds of the population from ancient times to the present day [25].

Concerning sex differences, in the present study, the prevalence of risk of EDs was found to be higher in women at 15% compared to men at 10%. A similar result was found in the research conducted by Purkiewicz et al., where females accounted for most individuals at risk for EDs at 69%, compared to males at 52%. While both studies agree that the prevalence of EDs risk is more common in women, it is essential not to overlook the male population. In the study by Purkiewicz et al., over half of the men were at risk for EDs. Additionally, the study population was similar to the present research as it focused on university students aged 18 to 26. However, that study was conducted in a European country and was limited to students from the Faculty of Health Sciences and the Faculty of Food Sciences. This specificity in the sample may explain the significant differences in the percentages, particularly the high prevalence of EDs risk among males [26].

Regarding limitations, it is important to consider that this was a cross-sectional design which restricts

establishing causal relationships. Additionally, the sample was limited only to first-year undergraduate students from a single university, impacting generalizability of the population. Additionally, self-report surveys could bring some potential biases, like recall and response bias. Future research should include a more diverse sample and employ a longitudinal design.

## Conclusions

In conclusion, this study found a significant association between high social media addiction and an increased prevalence of eating disorder risk among first-year university students at a private Peruvian institution. Notably, this association persisted even when body image dissatisfaction showed no significant link with eating disorder risk, suggesting that the pattern of social media engagement itself may warrant particular attention in prevention efforts. Given the limited research addressing this issue in Latin American populations, these findings have practical implications for university settings. University wellness programs could incorporate early screening for social media addiction during first-year orientation, alongside workshops promoting healthy digital habits. Additionally, considering that Instagram and TikTok were among the most used platforms, awareness campaigns delivered through these same channels may effectively reach at-risk students. Further longitudinal research is needed to clarify the directionality of this association and to evaluate the effectiveness of such interventions in the Peruvian context.

## Conflict of interest

The authors declare no conflict of interest.

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