

RESEARCH REPORT

ASSOCIATION BETWEEN SELFITIS AND MENTAL WELL-BEING AMONG ACADEMIC PROFESSIONALS OF KARACHI

ABSTRACT

BACKGROUND AND AIMS

A selfie is referred to a photograph that one has taken of oneself, typically from a smartphone or webcam, often shared on social media websites. Recent studies suggested that selfie addiction negatively affects the mental and social health of individuals. The American Psychiatric Association confirmed obsessive selfie-taking as a mental disorder. Therefore, this study aims to explore the association between selfie syndrome and mental well-being among academic professionals of Karachi.

METHODOLOGY

The cross-sectional survey was conducted on academic professionals, selected through the non-probability sampling technique. The data was collected through Selfitis Behavioural Scale and Warwick–Edinburgh Mental Well-being Scale.

RESULTS

A total number of 100 participants were included in the study with a mean age of 29 ± 10.8 years. The findings showed that 42% to 45% of the selected sample showed severe to moderate selfitis behaviour while 13% had mild selfitis behaviour with no significant association with mental well-being.

CONCLUSION

It was concluded that the majority of individuals were suffering from moderate to severe selfitis behaviour with no significant association with mental well-being. Further studies are suggested to identify how selfitis behaviour influences the mental well-being of different age-groups in Pakistan.

KEYWORDS

Health, Function, Social, Behavior, Disorder, Syndrome.

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INTRODUCTION

Selfie refers to a self-portrait picture taken from a cell phone camera¹. Many people share their selfies on social media websites and obsessively check for others likes and dislikes^{1,2}. Google statistics reported that in 2018, 93 million selfies were uploaded on social media websites per day². In addition, Goffman et al³ refers to a selfie as a form of self-presentation. According to his theory, people present themselves positively to gain the approval and attention of others; also, it is regarded as a medium of impression management through portraying one's ideal self³. Furthermore, social psychologists demonstrated that there are two basic social needs of a human that can be linked with the increasing trend of taking selfies, which includes the need of approval, belongingness and self-presentation^{3,4}. The other two reasons of selfie popularity is easy access to cell phones, camera and increased data sharing on social network sites⁴. Last year, over 1.5 billion young individuals used smart phones and a large number of pictures were uploaded on social network sites^{4,5}. In 2016, a study analysed the perception and attitude toward selfie taking on school-going population. It was concluded that 42.6% of the participants took their selfie on a daily basis with an average of 18.1% girls and 15.2% boys; taking more than four selfies a day⁵.

With growing interest towards the internet, selfie-taking behaviour has become a part of an individual's life⁵. Moreover, social media applications have provided a platform for social acceptance that has led to a surge of selfie taking in recent years, affecting the individual's mental health^{5,6}. Moreover, a number of studies have concluded that the urge of compulsive selfie-taking is a mental disorder⁶. It was highlighted that the selfie is not just clicking a self-portrait; it allows the person to establish its individuality and self-importance⁶. In addition, the selfie trend is gaining popularity in young adults^{5,7}. According to the survey conducted in 2018, 70% of the young people aged 18-30 years preferred to take selfies while 11% took selfies everyday⁷. Furthermore, 70% of the young individuals showed high motivation of posting a selfie onto social network sites⁸. Psychological studies identified a strong association between selfie-taking behaviour and narcissistic personality traits⁹.

Recent studies have demonstrated that social acceptance is an innate need of every individual^{9,10}. It was reported that the continuous chain of selfie posting, responses and feedback, particularly the number of likes received, plays an important role in the perception of social acceptance in adolescents - particularly among girls¹⁰. With the core purpose being peer acceptance, selfies have become a popular practice of seeking attention and acceptance^{10,11}. These findings showed an association of selfitis behaviour with a maladaptive personality trait such as narcissism, also self-acceptance can be linked with external validation¹². With the recognition of the negative impact of selfies, it has now become

an important area for investigation.

Selfitis is an obsessive clicking of self-portraits using a digital camera¹³. Multiple studies have highlighted strongly positive association between selfitis, narcissism, and negative correlation with self-esteem¹²⁻¹³. In addition, it may lead to a complex addiction disorder such as editing, posting and repeatedly checking the phone i.e. waiting for a response on shared pictures. In addition, selfitis is a psychological disorder comprised of three levels, which starts with board line the phase in which a selfie is taken for self-pleasure 3 times a day but not posted on social media, while the second level (acute) starts with the same number of selfies however, they are posted on social media¹². While, the final level (chronic) is the phase of uncontrolled urges to take selfies at any time of a day and posting them on social media in order to get appraisal or attention from the surrounding¹². People with chronic selfitis may go up to dangerous levels to click their ideal selfie – even on the cost of risking their lives^{12,13}. Yet limited studies are available to indicate the levels of selfitis behaviour while its effect on different aspects of human life continues to be a trending topic for researchers, however, traits that lead to selfie taking behaviour still remains unclear. The impact of the selfie on identity production has been under investigation for over a decade, little knowledge is available on negative aspects of selfie taking behaviour on mental health of its consumers in Pakistan. Moreover, researchers are shifting their attention towards personality traits that are relatively involved in this phenomenon and how different personalities react to such behaviours¹⁴. A number of psychologists believe that selfitis is associated with different personality traits such as narcissism, self-orientation, peculiarity; imperiousness and self-centeredness^{14,15}. Also, it may lead to other comorbidities such as eating disorders and body image dissatisfaction¹³.

Taking a selfie is the representation of an ideal self^{13,14}. Studies have shown that individuals have different specific ways for self-representation thus; they seek such behaviours by taking selfies and consider it a good concept to validate and express oneself¹⁴. Several studies have emphasised the link between self-esteem with selfie taking behaviour¹²⁻¹⁴. High number of selfie taking, closely relates to low self-esteem and poor self-image¹⁴. In 2019, a research was conducted to explore the selfie-mania influence on an adolescent's self-esteem and showed a positive correlation between selfie mania and self-esteem¹⁵. Another study suggested that selfitis is more likely to increase in order to seek attention, appraisal and the positive response of others and is ultimately the root cause of narcissistic behaviour¹⁶. On the contrary, a few studies suggested that selfies have a high influence in boosting self-confidence and self-image¹⁷.

Despite of this fact, the extent of selfie addiction can be judged by the increasing number of deaths that occur while trying to capture the perfect portrait¹⁸. In 2018, incidents and death occurrences related to selfies were reported from October 2011

to November 2017, accounted for 59 deaths and 137 accidents around the world¹⁸. Furthermore, Pakistan was placed on the second position with nine deaths in killer-selfie incidents¹⁹. A number of researches tend to focus on individual factors, especially personality traits that can lead to addicted behaviour¹⁹. However, none of the studies have explored the effects of excessive interaction of selfie syndrome on individual lives and its impact on their well-being. Therefore, this study aims to explore the association between selfie syndrome and mental well-being among academic professionals of Karachi.

METHODOLOGY

Study Setting

Data was collected from educational institutes of Karachi.

Study Design

Cross-sectional study.

Target Population

Academic Professionals using social media \geq 2 hours per day.

Duration of Study

6 months.

Sampling Technique

Non-Probability Convenience Sampling Technique.

Sample Size

N=100.

Sample Selection

• Inclusion Criteria

Male and female academic professionals with \geq 2 years of experience and mobile phone usage with social media exposure of \geq 2 hours per day²⁰.

• Exclusion Criteria

Individuals who refused to participate or do not have access to social media.

Data Collection Tool

Data will be collected on two scales, described as follows:

- The Warwick-Edinburgh Mental Well-being Scale (WEMWBS) will be used to measure mental well-being on a 14-item scale with 5 response categories ranging from 1 to 5, i.e. none of the time to all of the time, providing a total score from 14 to 70²¹.

- The Selfitis Behaviour Scale (SBS) was used to identify selfie syndrome by using exploratory factor analysis comprised of environmental enhancement, social competition, attention seeking, mood modification, self-confidence, and conformity. Responses are rated on a scale of 5 point: 5 = strongly agree, 4 = Agree, 3 = Neither Agree or Disagree, 2 = Disagree, 1 = Strongly Disagree. The higher the score, the greater the likelihood of selfitis behaviour²².

Data Collection Procedure

Participants were recruited on the basis of inclusion criteria from educational institutes of Karachi through convenience sampling technique. Prior to the data collection, all participants were provided with informed consent in order to procure detailed information about the study. Followed by the consent, participants were given Selfie Behaviour Scale (SBS) and Warwick-Edinburgh Mental Well-being Scale (WEMWBS) to evaluate the association between level of selfitis and mental well-being.

Data Analysis Strategy

Data was entered and analysed on SPSS (Statistical Package for Social Sciences). Participant's demographic details were represented through descriptive statistics through mean and standard deviation whereas, chi-square was applied to indicate association between the variables.

RESULTS

A total number of 100 participants were included in the study with mean age of 29 ± 10.8 years. The detailed description of demographic characteristics is shown in Table-1.

Table.1 shows Demographic Details of Participants

No. of Participants	n = 100
Gender	Male (n=10) Female (n=90)
Age (Years)	29±10.8
Educational Level	Bachelors (49%) Masters (37%) Doctorate (14%)
Years of Experience	5.05±2.6

On WEMWBS, the average mean score was 50.37 ± 13.5 indicated moderate level of mental well-being, while on SBS, 45% people showed moderate selfitis behaviour followed by severe selfitis behaviour which accounts for 42% while 13% of the participants showed mild behaviour (Figure-1).

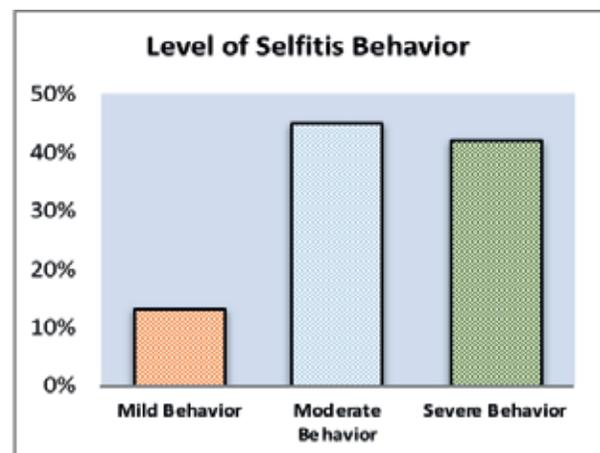


Figure.1 Shows level of Selfitis Behaviour

Moreover, no significant association was found between level of selfitis and mental well-being as depicted in Table-2.

Table-2 Chi-Square Test of Association

No. of Participants	n= 100
Pearson Chi -square	79.60
P-value	0.65

DISCUSSION

The findings of our study revealed that a majority of individuals were suffering from moderate to severe selfitis behaviour with no significant association with mental well-being. Several studies showed that culture diversities around the world differ as the perception and acceptance for selfies in the social arena of its users²¹⁻²³. Moreover, some societies perceived excessive selfie taking behaviour as negative, while for others it is an important source of communication and interaction with the outside world²². Our study advocates that the association between selfie syndrome and health well-being has an impact not only on the social but also physical, mental, psychological, socio-economic factors of its users although limited studies have been conducted in this regard. Literature has reported that negative personality traits are associated with selfies²⁰. It was also revealed that approximately 21% individuals also deleted their selfies if they do not get any likes. This indicated that people seek self-approval in the form of likes on their self-portraits²¹⁻²³. This is also taken as an insight of how one is viewed by others and might lead to negative impressions fostered by personality developmental traits²⁴. According to the studies, overall 16% people had negative experience with posted selfies on social media²². Moreover, it was indicated that 11% people take selfies every day, besides they may or may not post it on any social media either way due to suffering from selfitis²³. However, these values are small but have a significant number. People seem to have genuine insight to their reputation, yet they might have achieved meta-accuracy only by capitalising on the fact that others see them similarly to how they see themselves²¹.

With the evidence provided by different scientific studies, it was reported that selfies are associated with personal characteristics and is positively related to narcissism, attention-seeking behaviour, self-centered behaviour, and loneliness²¹. With evident motive to attract others, seeking attention and to increase the social network, selfie behaviour is found to be closely related to narcissism²². Both genders are equally involved in having highly self-reported traits of narcissism with excessive use of social media²³. Furthermore, around 7% individuals feel unreliable in the wake of taking selfies while 16% had a negative involvement in posting selfies²⁴. These findings demonstrated externalisation and narcissism among individuals. Therefore, people

need adherence to a couple of safe selfie rules while snapping pictures²⁵.

Researches also reported that individuals with low self-esteem are more engaged in self-promoting behaviour as compared to individuals with high self-esteem²⁴. Similarly, several studies show a broader area of self-esteem affected by this recurrent behaviour^{23,24}. Self-esteem and self-worth are assumed to be associated with appearance. Individuals imposed their desired self-portrait to get approved by others while mainly focusing on their good characteristics²⁴. These virtual images is to cater to a specific population in which people of similar interests, ideas are to be attracted.

Several studies stated that self-image has a remarkable effect on the mood and self-esteem that may lead the women towards psychological stress regarding their self-presentation^{25,26}. They were more anxious, less confident, and felt less physically attractive without retouching or editing picture²⁶. However, more harmful effects were found in women who could retake and retouch their selfies²⁵. In addition, women are more likely to get affected by the number of likes they receive that altered their overall global state of self-expressions²⁶. Therefore, it is important to identify the selfie behaviour that may influence an individual's well-being.

In addition, selfies must be viewed as a cultural artifact, not merely as the cause of psychosis or other mental disorders. It is an effective way to communicate with different communities and audiences all around the world²⁷. Another study conducted by Kaur addresses the gap in relationships with well-being and body confidence²⁸. Therefore, further interventions should be in general population that suggested having a negative impact on adolescents' well-being and body confidence²⁹. Moreover, social health analysis should also be conducted as social media is said to be responsible for the development of psychiatry disorders such as personality disorders, addiction, voyeurism etc. Furthermore, selfie-taking addiction may also lead to tragic accidents and deaths therefore the behaviour needs to be addressed at an earliest to prevent further consequences.

Strength & Limitations

There are several limitations involved in this study, including time constraint due to which further participants couldn't be approached. Moreover, only a few males volunteered to participate in the survey thereby male gender couldn't be evaluated to the required extent. As the study was conducted in a small group, therefore results cannot be generalised. With a larger sample and different subgroups, we might have arrived at the results with different percentages for the identification of selfie syndrome. In addition, gender wise association was not explored and may serve as a research gap. Also, with regard to mental well-being, the time and condition of the participants was not investigated either which may lead to the element of response bias due to varying situations. However, according to the author, this study is one of its kinds to be

conducted in Pakistan among academic professionals considering standard and common assessment tools. The study has explored selfitis among the group that is more prone to the use of social media as per the nature of their work that may lead to adverse mental health consequences in the future.

Future Directions

As selfitis may increase in the overall population with the advent of technology, therefore, it is recommended to spread awareness among the people of all age groups, children to adults regarding selfitis and its effect on mental well-being. Health education programmes, pamphlets and posters may be helpful to create awareness about the selfie syndrome, whereas, mass-media and other communication methods could also help a lot in encouraging people to deal with their psychological disorders. Further surveys should be conducted in the population to rule out the factors involved in selfitis behaviour, moreover interventions should be given to address psychological disorders that are evolving due to such issues.

CONCLUSION

It was concluded that the majority of individuals were suffering from moderate to severe selfitis behaviour with no significant association with mental well-being. Further studies are required to assess the level of selfitis and its effect on well-being along with its influence on mental, social, physical and psychological health with standard assessment tools.

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