Original Research Article

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Selfie addiction: the prodigious self-portraits

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ABSTRACT

Background: Selfie's are self-portrait taken to admire the excessive pride in one's own appearance. When these selfies are taken persistently in increased numbers with futile efforts to stop taking them is called as "SELFIE ADDICTION". There is an uncontrollable craving for taking selfie's which has a great impact on the life style modifications substantially in the adolescent age group. This problem has just commenced but it has disseminated rapidly to a greater magnitude.

Methods: This study was done as a community based cross sectional study at Pondicherry, Chennai and Kadaloor district during November 2015 and February 2016 with the objectives of assessing the prevalence and its risk factors of the Selfie addiction among adolescents. Individuals of adolescent age group were randomly selected and the data were collected using direct questionnaire method with proper informed consent. The data was entered in MS excel sheet and analysis was done using SPSS software.

Results: A total of 766 college students were interviewed of which 53% were males with the mean age of 19 years. The purposes of taking selfies were time pass (46%), to admire themselves (14.5%), to post in social network sites (23.7%). Among the study participants 87% of them had the habit of taking selfies regularly using mobile phones and the number of selfies per minute varied from 2 to 10 per minute. The prevalence of selfie addiction was present among 111 (14.5%) and it was significantly associated with gender, higher version mobile phone users, early morning selfie takers, chronic mobile users.

Conclusions: The prevalence of selfie addiction among adolescent population in our study was moderately high and hence interventions should be made to create cognizance among the general population about the risk factors and its consequences.

Keywords: Portraits, Selfies, Self-portraits, Selfie Addiction

INTRODUCTION

Selfies are self-portrait taken to admire the excessive pride in one's own appearance. When these selfies are taken persistently in increased numbers with futile efforts to stop taking them is called as "SELFIE ADDICTION". The APA has defines it as: "the obsessive compulsive desire to take photos of one's self and post them on social media as a way to make up for the lack of self-esteem and to fill a gap in intimacy".1

Universally, taking selfies has become as an ineluctable part of our daily lives. In India, advent of smartphones plays a major role in enhancing the operative techniques of the individuals. Additionally, increased technological features such as touch screen interface, internet access

and quality cameras has brought a drastic life style modification among all the individuals irrespective of their ages. Purchasing a smartphone changes from an individual to another based on their priorities. Earlier there were not many options, but in the course of the present day choosing a phone has become a challenge. Despite the many criteria like hardware and features, brand names and cost variabilities, the significant role of decision making is based upon the display and camera features. One might own even a top-notch DSLR but capturing the best moments is always with your phone. Fortunately, technological development has got ridden of smudgy and low-resolution pictures. The motive of photography was initiated to cherish them as memories. Photography was used as a tool to commemorate the memories that cannot be retrieved. Technology has helped us to develop from vivid memories of going into a dark room for printing photos to instant photographs. Evolutionary changes of "Memories" to "World of fascination" that has ultimately led us to craving world for "Selfitis".

There are no studies in India investigating the addiction towards Selfie. Based on this perspective, this study was conducted to assess the prevalence and risk factors associated with Selfie addiction among adolescents.

Aims and objectives was to assess the prevalence of selfie addiction among school and college going population and to find out the socio demographic factors associated with selfie addiction.

METHODS

Initially, this study was done as a community based cross sectional study at Kadaloor district during November 2015 with the objectives of assessing the prevalence and its risk factors of the selfie addiction among adolescents. The investigator of the study solicited the officials of randomly selected private institutions in Kadaloor district to elucidate the objectives of the study. 3 administrative officials accepted to conduct the study in their institution. The scrutiniser of the research finalised dates which was preferable for both the management and the participants. Individuals of adolescent age group were randomly selected, and the data were collected using direct questionnaire method with proper informed consent. The questionnaire includes general socio demographic profiles, usage pattern of selfies, group selfies, frequency of taking selfies and selfie-addiction scale. The goal of the research was completely explained to the partakers. The participants were assured that their identity will not be declared to any of their institutional authorities or their parents. The scrutineer adhered to anonymity and maintained strict confidentiality throughout the study. Data collection was done by questionnaire and direct interview method using a standardized questionnaire. Astonishingly, all the volunteers who participated in this study were very enthusiastic throughout the study. They also added that the questionnaire and selfie-addiction scale was very fascinating and requested us to inform them about the outcome of this research. At this moment, we decided to conduct the study as a comparative study and further initiatives were made. The scrutiniser then visited randomly selected institutions at Pondicherry and Chennai elucidating the importance of our study during January 2016. After getting authorised consent from various institutions the study was successfully coordinated in the similar method as conducted in Kadaloor district. The data were entered in MS excel sheet and analyzed using SPSS software-20.

Scale for selfie-addiction

The questionnaire was devised and validated by Dr. Balaji Arumugam and Dr. Saranya Nagalingam.² This Selfie Addiction scale is a sound tool in identifying addictive patterns and also factors related to Selfie addiction. Selfie addiction was assessed using this simplified version of 10 item questionnaire which included 10 questions, based on Likert Scale and the scoring was given accordingly.

(Strongly Agree-5, Agree-4, Neutral-3, Disagree-2, Strongly Disagree-1)

Summed score of these 10 questions represents attitude towards Selfie or condition that has caused by Selfie addiction. The Score varies from minimum of 10 points to maximum of 50 points. This scale was devised with intent of igniting the populace about a mental disorder that are caused by the addiction of taking selfies. Scores between:

- <20-Normal
- 21-30-Mildly Addicted
- 31-40-Moderately Addicted
- 41-50-Severely Addicted.

Even if an individual strongly disagrees to all the questions then the minimum score would be 10. If an individual Strongly Agrees to all the questions, then the maximum score would be 50. Sometimes, if a person completely gives a neutrality outcome then the score would be 30 (In this study, author have not met up with such a unique situation since the investigator took initiatives to bring out the proper answers from the participants). The Addictive behavioural pattern can be observed prominently (moderate and severe) on an individual if their scores are more than 30.

Addictive behaviors

The Following 5 questions are considered the most important on the aspect of finding individuals who are addicted to selfies and need expeditious intervention to recover back to their normal life-style. All the questions were validated for addiction but still these questions are self-reported states they are selfie-addicts who are

undergoing process of compulsive disorder to seek attention by serially posing before their smart phones:

- I find myself uncontrollable to stop taking selfies once I start it
- I take selfies even during sad situations
- I endeavour to cut down the amount of selfies I take, but I fail
- I need counselling to reduce my selfie addiction
- I cannot survive without taking selfies.

RESULTS

Socio-demographic profile

Our investigator was able to collect datas from 766 participants. Out of 766 participants, 53 % (405) were males and 47% (361) females (Figure 1), with mean age of 19 years. There is a belief that selfies are taken with high technological advances and hence higher socioeconomic status people experiment in becoming addicts. But, in our study majority of the study participants belonged to class IV 318 (41.6%), class III 279 (36.4%) and class II 169 (22%). This also implies that Socioeconomic factor does not play a role in creating addiction. This may be due to technological advances being cost effectively available for lower socio-economic statuses (Table 1).

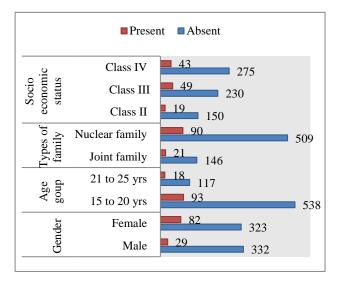


Figure 1: Distribution of selfie addiction among different groups.

Selfie taking habits and reasons for taking selfies: Among the study population the average number of selfies taken by them was 25 per day, with the average number of selfies taken in a minute-5/minute and approximately 20% of them take selfies daily. Eighty-five percentage of the study population take group selfies. Over all 40% of the study participants felt angry, depressed, irritable, restless and sad when they are not able to take selfies. Technological industry has undergone an expeditious augmentation in a short period of time. An awesome tool

for cherishing valuable memories is photography. Earlier, photos were taken by others from a particular distance focusing the memories into a picture. The trend of taking selfies must have been initiated "when there is no one around to take a picture" or "when you don't want to miss the person who is taking a photograph on that picture" But, nowadays the majority of the population took selfies for time pass 51% (392), to admire themselves 181 (24%) and to post in social network sites 98 (13%) (Table 2).

Table 1: Socio demographic profile of the study population.

| Variable | Frequency | Percentage |
|-----------------------|-----------|------------|
| Age group | | |
| 15 to 20 years | 631 | 82.4 |
| 21 to 25 years | 135 | 17.6 |
| Gender | | |
| Female | 361 | 47 |
| Male | 405 | 53 |
| Type of family | | |
| Joint family | 167 | 21.8 |
| Nuclear family | 599 | 78.2 |
| Socio economic status | | |
| Class II | 169 | 22 |
| Class III | 279 | 36.4 |
| Class IV | 318 | 41.6 |

Table 2: Selfie taking habits.

| Variable | Frequency | Percentage | | |
|--|-----------|------------|--|--|
| How often do you take selfies? | | | | |
| Daily | 146 | 19 | | |
| Weekly | 143 | 18.7 | | |
| Occasionally | 477 | 62.3 | | |
| Reason for taking selfies? | | | | |
| Just for Time pass | 392 | 51 | | |
| To admire myself | 181 | 24 | | |
| To post in Social media | 98 | 13 | | |
| To send my friend | 95 | 12 | | |
| Do you take group selfies? | | | | |
| Yes | 648 | 84.6 | | |
| No | 118 | 15.4 | | |
| Do you get annoyed when interrupted while taking | | | | |
| selfies? | | | | |
| Yes | 170 | 22 | | |
| No | 596 | 78 | | |
| How do you feel when you are not able to take | | | | |
| selfies? | 20 | 2.0 | | |
| Angry | 29 | 3.8 | | |
| Depressed | 24 | 3.1 | | |
| Irritable | 47 | 6.1 | | |
| Restless | 51 | 6.7 | | |
| Sad | 154 | 20 | | |
| Normal | 461 | 60.3 | | |

Selfie addiction

Our study has shown that the overall prevalence of selfie addiction according to the ten-point scale was 14% (Figure 2) among this study population of aged between 15 to 25 years.

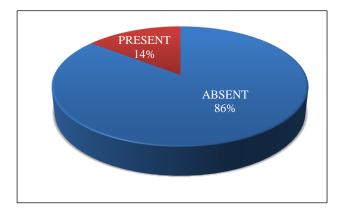


Figure 2: Prevalence of selfie addiction.

There are some significant factors associated with selfie addiction which was analysed using chi square test. The factors associated with selfie addiction in this study was shown in the Table 3.

Table 3: Factors associated with selfie addiction (Chi-Square test).

| Associated factors | Chi - Square | P value |
|--|-----------------|---------|
| Sex | 22.978 | 0.001 |
| Time spent on taking selfies | 43.367 | 0.001 |
| Early morning mobile users | 34.220 | 0.001 |
| Increased frequency | 19.546 | 0.002 |
| Mental status when unable to take selfie | 39.700 | 0.00001 |

DISCUSSION

Selfies have environed and transfigured the entire lifestyle of the personage. Memories transformed into fascination that led to incorrigible craving for selfies. At this point of time, introduction of technologically advanced smartphones as inevitable part of life-styles processed the formation of selfie addicts. Our present Cross sectional study done among teenage population among Chennai revealed that the prevalence of selfie addiction were 14%.

A study from a Vats M et al stated that the exact prevalence is not known but as per the experts, approximately 40% or higher percentage of teenage, young and adult population in the developed world is suffering from the selfie syndrome with the manifestations varying from mild to severe. World wide availability of smart phones, Wi-Fi and mobile data package has worsened this scenario further.³ He also

explained that the selfie syndrome reflects a combination of the wide spectrum of varying degree of Neuropsychiatric disorders. Some persons may have underlying stress disorder, self-obsessed and narcissistic generation, obsessive compulsive behaviour, anxiety, mania or even bipolar disorder but a new study suggests that it can even be linked to body dysmorphia. Taking Selfies could lead to narcissism, addiction, mental illness and even suicide. This syndrome is characterized by most of the time sticking on the social media network via face book, Twitter, Instagram, whats app, etc.³

As such there are no such prevalence studies conducted in India and this article being the first of its kind. But the scholars from Carnegie Mellon University and Indraprastha Institute of Information Delhi have said that India has had the maximum number of selfie-deaths than any country over the last two years. According to the study, at least 25 people have died worldwide since March 2014 after trying to take selfies and also in most of the cases, men are the ones who have suffered the most.⁴

Our study states that the prevalence of selfie addiction is more common among females (76%) than males (24%). Tifentale A and Manovich L conducted a study among the images from the instagram among five cities namely MOSCOW, BERLIN, BANGKOK, NEW YORK and SAO PAOLO and presented lot of interesting findings.⁵ The results showed that the frequency of female selfies were more as 1.3 times in BANGKOK, 1.9 times more in BERLIN, 4.6 times more in MOSCOW. Similarly, the effects of selfies on the psycho social characteristics was explained and reviewed by Krishna SG et al in the article Selfie syndrome which includes impulsivity, lack of empathy, machiavellianism and self-objectification.⁶

Although various efforts have been made here and there in developed countries to explore the burden and the effects of selfie syndrome, still it remains the iceberg. Large scale multicenteric studies are needed for assessing all the dimensions of selfie syndrome.

CONCLUSION

Our research was conducted with an intention to uncover certainty of this condition. The study revealed that, about 14% of the partakers were selfie-addicts. We feel this has a threatening indication for taking necessary actions to create cognizance among the general population about the risk factors and harmful effects of selfies since this study was conducted before 2 years where the word "SELFIES" were emerging. Currently, so many deaths were already reported due to Selfie taking addictive behaviours. Hence, the addictive percentile would have inflated than our expectation.

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