



Is Facebook creating “iDisorders”? The link between clinical symptoms of psychiatric disorders and technology use, attitudes and anxiety

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ABSTRACT

This study systematically tested whether the use of specific technologies or media (including certain types of Facebook use), technology-related anxieties, and technology-related attitudes (including multi-tasking preference) would predict clinical symptoms of six personality disorders (schizoid, narcissistic, antisocial, compulsive, paranoid and histrionic) and three mood disorders (major depression, dysthymia and bipolar-mania). In addition, the study examined the unique contributions of technology uses after factoring out demographics, anxiety and attitudes. Teens, young adults and adults ($N = 1143$) completed an anonymous, online questionnaire that assessed these variables. Each disorder had a unique set of predictors with 17 of the 22 significant predictors being Facebook general use, impression management and friendship. More Facebook friends predicted more clinical symptoms of bipolar-mania, narcissism and histrionic personality disorder but fewer symptoms of dysthymia and schizoid personality disorder. Technology-related attitudes and anxieties significantly predicted clinical symptoms of the disorders. After factoring out attitudes and anxiety, Facebook and selected technology uses predicted clinical symptoms with Facebook use, impression management and friendship being the best predictors. The results showed both positive and negative aspects of technology including social media as well as apparently detrimental effects of a preference for multitasking.

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1. Introduction

In 1995, Robert Kraut and his colleagues provided Internet access and a computer to 93 households who had no Internet experience and tracked their psychological health over several years in the HomeNet Project (Kraut et al., 2002). After the initial year of Internet use the researchers concluded that greater use of the Internet was associated with more signs of loneliness and depression. Although this study later showed that the negative influence dissipated over time and experience, concern over the impact of technology on psychological health has escalated to the extent that 16 years later the American Pediatric Association's Council on Communications and Media reported that “Facebook depression” was a potential problem for tweens and teens (O’Keeffe & Clarke-Pearson, 2011). Further, Rosen, Cheever, and Carrier (2012) reported on a new psychological malady referred to as an “iDisorder” which was defined as the negative relationship between technology usage and psychological health. The current study examines the impact of the use of specific technologies and media on clinical symptoms of mood disorders such as major

depression, dysthymia and mania, as well as personality disorders including narcissism, antisocial personality disorder, OCD, paranoia, histrionic personality disorder and schizoid personality disorder. In addition to looking at media usage, the study examines the impact of attitudes toward technology and multitasking as well as technology-related anxiety about not being able to check technological devices as often as one would like.

1.1. Mood disorders

There is now extensive evidence documenting a relationship between depression and excessive texting, viewing video clips, video gaming, chatting, e-mailing, listening to music and other media uses (Allam, 2010; Amichai-Hamburger & Ben-Artzi, 2009; Augner & Hacker, 2012; Chen & Tzeng, 2010; Cristakis, Moreno, Jelenchick, Myaing, & Zhou, 2011; de Wit, van Straten, Lamers, Cuijpers, & Penninx, 2011; Dong, Lu, Zhou, & Zhao, 2011; Farb, Anderson, Block, & Segal, 2011; Huang, 2010; Kalpidou, Costin, & Morris, 2011; Katsumata, Matsumoto, Kitani, & Takeshima, 2008; Lu et al., 2011; Morrison & Gore, 2010; Primack, Swanier, Georgiopoulos, Land, & Fine, 2009; Primack et al., 2011; Van der Aa et al., 2009). Further, studies have linked dysthymia with Internet addiction (Ko, Yen, Chen, Chen, & Yen, 2008). In one study, Lu et al. (2011) found depression to be associated with both Internet and text message dependency. In addition, a study by de Wit et al.

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(2011) found that adults with major depressive disorder spent excessive amounts of leisure time on the computer, while those with dysthymia, panic disorder, and agoraphobia spent more time watching television than the control group and those with other disorders.

Depression appears to be transmittable through technological interaction via “emotional contagion” (Hancock, Gee, Ciaccio, & Mae-Hwah Lin, 2008). Hancock et al. (2008) found that depressing media, particularly movies and music, induced negative affect. Taking this phenomenon one step further, in a controlled laboratory study, Hancock et al. (2008) found that not only did the viewers and listeners become depressed, but when they had a subsequent instant message conversation, their partners used fewer words, more sad terms, and exchanged messages at slower rates indicating that they, too, tended to experience negative affect, albeit secondhand. With a large number of negative thoughts evidenced in blogs (Goh & Huang, 2009) and through social networking (Davila et al., 2012; Holleran, 2010; Moreno et al., 2011; Okamoto et al., 2011) emotional contagion theory could predict signs of depression spreading through social networking sites and online communication.

Some research has indicated significant positive associations between social networking activities and depressive symptoms while other recent studies have shown no relationship or even, in one condition, a negative relationship, between Facebook use and depression. According to Davila et al. (2012), “depressive symptoms were associated with quality of social networking interactions, not quantity” (p. 72). Davila et al.’s study, which examined the social networking behaviors of 334 undergraduate students, found that more negative and less positive interactions on social networking sites were associated with greater depressive symptoms. One social networking act—unfriending—has been shown to be related to strong negative emotional responses (Bevan, Pfyf, & Barclay, 2012) while a Croatian study (Pantic et al., 2012) found that time spent on Facebook by high school students was positively correlated with depression. A study of American university students found that more intense Facebook use predicted increased loneliness (Lou, Yan, Nickerson, & McMorris, 2012) and a study of Swedish young adults found that more mobile phone use predicted increased symptoms of depression a year later (Thomee, Harenstam, & Hagberg, 2011).

A longitudinal study concluded that Facebook use led to a gain in bridging social ties and those with low self-esteem reported more gains in their social ties via Facebook (Steinfeld, Ellison, & Lampe, 2008). Social ties and building one’s relationship with others has been related to measures of well-being, self-esteem and life satisfaction (Bargh, McKenna, & Fitzsimons, 2002; Helliwell & Putnam, 2004; Subramanyam & Smahel, 2011). Additionally, Kalpidou et al. (2011) found that those college students who reported having Facebook friends experienced lower emotional adjustment to college life. Further, those who were depressed were more likely to have low self-esteem and post depressing status updates and college students who spent more time on Facebook reported having lower self-esteem than those who spent less time (Kalpidou et al., 2011).

In contrast, recent work (Jelenchick, Eickhoff, & Moreno, in press) found no relationship between social networking and depression with a sample of 190 older adolescents, while a recent doctoral dissertation (Simoncic, 2012) found that not only were there no negative correlations between Facebook activity and depression but for females with high levels of neuroticism, high levels of Facebook activity were associated with lower levels of depression. These negative relationships were corroborated by additional studies of Dutch adolescents with low friendship quality who spent more hours surfing the Internet (Selfhout, Brantje, Delsing, ter Bogt, & Meeus, 2009), of American adolescents

(Ohannessian, 2009), and of older Americans (Cotton, Ford, Ford, & Hale, 2012).

Rapid task switching, also known as multitasking, may be one root cause of depression (Rosen et al., 2012). In the only empirical study to examine this relationship, Kotikalapudi, Chellappan, Montgomery, Wunsch, and Lutzen (2012) observed students’ Internet use through multiple measures taken from the university server and detected that those students who showed more “flow duration entropy”—likely the result of task switching—had more depressive symptoms than those with less entropy. A large-scale, cross-national survey (Mieczakowski, Goldhaber, & Clarkson, 2011) reported negative correlations between being distracted from work and well-being in the UK, Australia and China and being distracted from personal life by work communications and well-being in only the UK and China although they do report that the correlations were small.

1.2. Personality disorders

1.2.1. Narcissism

The relationship between social networking sites and narcissistic personality disorder is garnering attention in both popular media and in scientific research (Buffardi & Campbell, 2008). According to the DSM-IV-TR (American Psychiatric Association, 2000), narcissistic personality disorder is an Axis II disorder marked by a grandiose sense of self-importance, fantasies of unlimited power, self-promotion, vanity, and superficial relationships. Twenge and Campbell (2009) argued that narcissism is an “epidemic” that has escalated in the past two decades. Using a cross-sectional study of more than 16,000 college students, Twenge and Campbell found that today’s college students score substantially higher on the Narcissistic Personality Inventory than their cohorts just 20 years ago. In fact, two-thirds of recent college students scored above the average (Raskin & Shaw, 1988) compared to half of the college students who took the same test in the late 1970s and early 1980s. Bergman, Fearington, Davenport, and Bergman (2011) suggested that narcissism is increasing due to generational values. He posits that younger generations—including the Net Generation, born in the 1980s, and the iGeneration, born in the 1990s (Rosen, Carrier, & Cheever, 2010)—show a strong urge to report their activities and believe that their social media audience cares about them, two symptoms central to the diagnostic criteria of narcissistic personality disorder.

Further studies suggest that narcissism is exacerbated, and even encouraged, by social networking sites (Bergman et al., 2011; Buffardi & Campbell, 2008; Carpenter, 2012; McKinney, Kelly, & Duran, 2012; Ryan & Xenos, 2011) perhaps due to the rapid rise in social networking sites that encourage users to post status updates and photos and comment on others’ posts and photos. For example, on these sites, people often report the existence of superficial friendships, self-promotion by way of customizable pages, and vanity by way of photo albums capable of carrying thousands of pictures (Bergman et al., 2011). Mehdizadeh (2010) proposed that it is the controlled environment of these webpages that appeals to the narcissist; users of social networking sites may contort their profile pictures, status updates, biographies, and even lists of friends in order to appear more attractive.

Mehdizadeh’s hypothesis is supported by research demonstrating that higher scores on the Narcissistic Personality Inventory predicted higher self-promotion on social networking sites (Buffardi & Campbell, 2008) as well as more use of personal pronouns such as *I* and *me* along with more self-promoting photos on Facebook pages (DeWall, Buffardi, Bonser, & Campbell, 2011). Other research has shown that more time spent on Facebook and a higher frequency of checking Facebook predicted higher narcissism scores (Mehdizadeh, 2010; Ryan & Xenos, 2011). In another study,

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