

## Self-Deception and Social Media Addiction among Young Adults with Personality Disorder

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### ABSTRACT

In recent times, young adults are using social media very frequently, almost every day. By examining the role of personality disorder and self-deception, we can gain a deeper understanding of the emotional and psychological factors that drive social media addiction. Those young adults who have mild personality disorder get easily addicted to social media and they even hide their identity. As they already have mild personality disorder, if they persistently hide their identity, it may lead to severe personality disorder. They may also engage in self-deception by justifying their excessive social media use as necessary for their mental health or believing that they are in control of their behaviour. Understanding the role of personality disorders in this addiction can help to develop effective prevention and treatment strategies. So, this research aims to know the extent of personality disorder among and its relationship with self-deception and social media addiction. 300 young adults between the age group of 20 to 40 years were selected from various areas in and around Coimbatore, Tamil Nadu. The tools used were Personality Belief Questionnaire (PBQ) (Beck, 1991), Self-Deception Scale (Sirvent, 2007), Social Media Addiction Scale (Aylin Tutgun Unal, 2015). The results shows that the personality disorder, self-deception and social media addiction are related to each other and influence the behaviours of an individual.

**Keywords:** *Self-deception, Social Media Addiction, Personality disorder, Young Adults*

### YOUNG ADULTS

Young adults are generally defined as individuals between the ages of 18 and 39, although there is some variation in the exact age range used by different organizations and researchers. This age range is often used in social, economic, and demographic studies to examine the characteristics, behaviour, and experiences of individuals in this stage of life.

One common definition of young adulthood comes from the World Health Organization (WHO, 2018)<sup>1</sup>, which defines it as the period of life between the ages of 18 and 29. According to the WHO, this stage of life is characterized by "a focus on developing personal identity, establishing independence, and making lifestyle choices that can have long-term consequences for health and well-being." Young adults often experience significant changes

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in their sense of identity during this period. College students will have increased levels of exploration and commitment in their identity development (Luyckx et al., 2018)<sup>2</sup>

The rates of depression, anxiety, and suicidal thoughts have increased among young adults in the United States over the past decade (Twenge et al., 2020)<sup>3</sup>. Nowadays, young adults are heavy users of technology and social media. Young adults who spend more time on social media report higher levels of anxiety and depression (Lin et al., 2020)<sup>4</sup>. It is noted that young adulthood is a period of significant change and growth, with lot of potential challenges and risks.

The digital boom has had a significant impact on the lifestyle of young adults, particularly in terms of their social lives, communication patterns, and access to information. Social media use is associated with both positive and negative effects on the social lives of young adults. On one hand, social media use is associated with increased social support and a greater sense of belonging. On the other hand, social media use is also associated with increased feelings of social isolation and loneliness (Primack et al., 2017)<sup>5</sup>.

The digital revolution has brought about a significant change in the lifestyle of young adults, offering new opportunities and challenges. (Kerkhof, Finkenauer, & Muusses, 2019)<sup>6</sup>. Some of the opportunities are explained below:

- **Social interactions:** Connecting with friends and family, even when they are far away, has become simpler for young adults due to social media and other digital communication technologies. These platforms have altered how young adults interact with one another by enabling them to communicate more frequently and easily.
- **Entertainment:** As digital platforms proliferate, young adults' preferences for entertainment have evolved. Examples include streaming services and online gaming. People now have access to a variety of content at their convenience and at home, on their timetable.
- **Education and learning:** Young adults now have easier access to information and the chance to pick up new skills because of the internet and other digital technologies. Young individuals can increase their knowledge via educational apps, online courses, and tutorials.
- **Work and employment:** Young adults' jobs and working habits have changed as a result of the digital revolution. Nowadays, a lot of occupations demand digital abilities, and websites like LinkedIn have developed into crucial resources for networking and job finding.
- **Health and well-being:** Young individuals are now more likely to prioritise their health and well-being as a result of technological tools like exercise apps, meditation apps, and telemedicine.

Young adults now face the following additional risks and concerns as a result of greater connectedness and information accessibility.

1. **Social isolation:** Social isolation is a problem that young adults might experience even though social media and other digital communication tools have made it simpler for them to communicate with others. To sustain strong relationships and mental health, face-to-face social engagement must be prioritised over time spent on digital platforms.
2. **Cyberbullying:** As digital technology makes it easier for bullies to abuse their victims anonymously and over great distances, cyberbullying is an increasing concern among

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young adults. Depression, suicidal thoughts, and mental discomfort might result from this.

- 3. Sedentary lifestyle:** Digital technology has made it easier for young adults to lead sedentary lifestyles. Spending too much time sitting in front of a computer or phone screen can lead to physical health problems, such as obesity and cardiovascular disease.
- 4. Information overload:** While the internet has made it easier for young adults to access information, it can also be overwhelming. The constant barrage of information can lead to stress, anxiety, and a sense of being constantly "plugged in."
- 5. Addiction:** Digital technology, particularly social media and online gaming can be addictive for some young adults. Spending too much time on these platforms can lead to a lack of productivity, social isolation, and other negative consequences.

The digital boom has brought about many benefits for young adults, but it has also led to some physical and psychological issues.

- 1. Eye strain and vision problems:** Young adults who spend a lot of time staring at screens, whether on computers or mobile devices, may experience eye strain, dry eyes, blurred vision, or other vision problems. (Zhao, Freeman, & Li, 2018)<sup>7</sup>
- 2. Sleep disorders:** Using digital devices before bed can disrupt sleep patterns and lead to sleep disorders.
- 3. Posture problems:** Young adults who spend a lot of time hunched over screens can develop poor posture, which can lead to neck and back pain.
- 4. Anxiety and depression:** Social media and other digital platforms can contribute to feelings of anxiety and depression in young adults. Constantly comparing oneself to others on social media, cyberbullying, and online harassment are some examples of how digital technology can impact mental health.
- 5. Addiction:** Some young adults may develop an addiction to digital technology, particularly social media, online gaming, or other online activities.
- 6. Attention problems:** Spending too much time on digital devices can lead to a decrease in attention span and difficulty focusing on tasks that require sustained concentration.

## PERSONALITY

Personality refers to a set of enduring traits, characteristics, and patterns of thought, emotion, and behaviour that are relatively stable across time and situations. Personality influences how individuals interact with the world around them and how they respond to various experiences and challenges.

One prominent theory of personality is the Five-Factor Model (FFM), which identifies five broad dimensions of personality that are thought to be universal across cultures (Costa, & McCrae, 1992)<sup>8</sup>.

- 1. Openness to experience:** This dimension reflects a person's willingness to explore new ideas, thoughts, and experiences.
- 2. Conscientiousness:** This dimension reflects a person's level of self-discipline, responsibility, and reliability.
- 3. Extraversion:** This dimension reflects a person's level of social engagement, assertiveness, and positive emotionality.
- 4. Agreeableness:** This dimension reflects a person's tendency to be cooperative, empathetic, and compassionate towards others.
- 5. Neuroticism:** This dimension reflects a person's level of emotional instability, anxiety, and vulnerability to stress.

Research on personality has shown that it is influenced by a variety of factors, including genetics, environment, and life experiences. For example, twin studies have shown that genetic factors play a significant role in shaping personality, while environmental factors such as Parenting styles and life events can also have a significant impact (Turkheimer, 2000)<sup>9</sup>.

The goal of personality psychology is to examine how these patterns vary and are similar among individuals and social groupings. Modern personality psychology, which seeks to determine which factors, such as free choice, inheritance, or universality, are most important in determining human personality, is strongly impacted by these early philosophical roots. The dynamic arrangement of these psychophysical systems within the individual determines his traits, actions, and thoughts.

### THEORIES OF PERSONALITY

#### *Psychoanalytic Theory*

The first detailed personality theory was created by Freud, who is regarded as one of the great minds in the history of modern thought. It is a substantial collection of clinical observations based on his self-reflection and therapy experience. The ego, the superego, and the id are the three components of Freud's three-part personality structure. The primary source of fundamental biological requirements is the id, which is the greatest component of the mind and is associated with desires and impulses. The conscious, logical, and reasoning aspect of the personality is known as the ego. It regulates conduct so that basic desires can be satisfied without having to deal with adverse outcomes. Through social interactions, the superego, or conscience, grows to adhere to societal norms. Freud proposed using diagrams to illustrate the three structures—the id, ego, and superego—and how they link to the conscious and unconscious.

#### *Trait Theory*

A trait distinguishes one person from another in a way that is comparatively constant or permanent. An attribute of a person is separated from his or her conduct and used as a helpful "unit of analysis" to comprehend personality. The trait theory is similar to the multiple types theory model in many ways; both are concerned with identifying the fundamental personality traits, offering a coherent description of personality, and developing a method to test them.

Two methods exist for evaluating personality traits:

1. By responding to inquiries about one's attitudes, feelings, and behaviours, the individual describes himself.
2. Someone else assesses the individual's characteristics based on what he knows about the person or from direct observation of behaviour.

#### *Main contributors to Trait theory:*

##### **Gordon Allport**

One of the original proponents of modern trait theory was Gordon Allport. Over 18,000 personality-describing terms were extracted by Allport and Henry Odbert in 1936 from two of the most complete dictionaries of the English language, and these words were then reduced to about 4000 words. Allport categorised these characteristics into three levels of hierarchy:

**Cardinal Traits:** These are traits that penetrate a person's entire life, frequently to the point where the person becomes well-known for these characteristics. Certain personality types frequently become so well-known for these traits that their names are frequently associated

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with them. Cardinal traits, according to Allport, are uncommon and typically emerge later in life.

**Central traits:** Every person possesses these universal qualities, which are regarded as basic attributes and include loyalty, kindness, agreeableness, friendliness, intelligence, honesty, shyness, and anxiety, to varied degrees. They serve as the fundamental building blocks for most human actions.

**Secondary traits:** These traits frequently only show up in contexts or under particular conditions, and they are occasionally linked to attitudes or preferences. For instance, one friendly individual gets annoyed when people try to tickle him, while another is not apprehensive but always feels uneasy speaking in front of others.

Allport postulated that both internal and external forces, which he referred to as genotypes and phenotypes, have an impact on a person's behaviour and personality. Genotypes are innate characteristics that affect how well a person remembers information and applies it in social interactions. Phenotypes are outside forces that have to do with how a person perceives his environment and how other people affect them.

### ***Raymond Cattell***

The number of primary personality traits was reduced from Allport's original list of over 4,000 in 1965 to 171 by trait theorist Raymond Cattell, primarily by removing uncommon qualities and integrating common traits. He further narrowed his list of terms to just 16 essential personality qualities by utilising the statistical method known as factor analysis to identify terms that were closely linked. Cattell stated that to fully understand a person's personality, it is required to consider a significantly higher variety of traits. Cattell gathered information from a variety of people using three separate data sources. L-data refers to information from a person's life record, such as attendance records at work and in school.

The Q-data questionnaire was made to assess personality dimension. Cattell used a mathematical method to assess the T-data and Q-data and found 16 universal personality traits/factors. He created the 16PF personality test based on these 16 factors.

### **Hans Eysenck**

A personality theorist named Hans Eysenck focused on temperament—inborn and genetically based personality differences.

### **Introversion/Extraversion**

Extraversion refers to concentrating attention outward on other people and the world, whereas introversion includes directing attention to inner experiences. A person who exhibits high levels of extraversion may be friendly and outgoing, whereas a person who exhibits high levels of introversion may be quiet and reserved.

### **Emotional stability vs. neuroticism**

In this situation, neurotic individuals frequently experience anxiety and an overactive sympathetic nervous system. Their bodies and emotional states frequently enter a flight-or-fight reaction, even when under low stress. Those who score highly on emotional stability,

typically require more stimulus to trigger their flight-or-fight response and are therefore regarded as being more emotionally stable.

### **Psychoticism/Socialization**

According to this dimension, people who score highly in this trait are believed to have trouble dealing with reality and may be angry, manipulative, antisocial, and lack empathy. Individuals who are well-socialized typically have good impulse control; they also tend to be more traditional, cooperative, and altruistic.

### **SOCIAL LEARNING THEORY**

The social learning theory focuses on cognitive processes and behavioural patterns in connection to the particular circumstances that cause, sustain, or modify them.

### ***Humanistic Theory***

The psychologists who founded the humanism school of psychology in the 1950s often have an optimistic outlook on others. They emphasize people's capacity for conscious, reasoned thought, for self-controlling their biological desires, and for realizing their full potential. People oversee their own lives and activities, according to the humanistic perspective.

### ***Main contributors to Humanistic theory: Abraham Maslow: Hierarchy of Human Needs***

In American psychology, Abraham Maslow is considered the philosophical founder of humanism. Maslow explained human needs in a pyramid-like figure. Physiological demands, such as those for oxygen, food, and water, are at the base of the pyramid. The requirements for safety and security, such as shelter, protection, etc., are next to it. Afterwards comes love and belonging, which includes acceptance, affection, friendship, etc. Self-esteem requirements including a sense of mastery, power, appreciation, etc. are covered in the fourth section. Abraham Maslow claimed that the urge for self-actualization, or the attainment of one's full potential, is at the top of the hierarchy of human motivations. It entails discovering one's capacity for creative expression and ongoing self-improvement.

### **Carl Rogers**

According to Rogers, the self-concept, which encompasses all of a person's ideas, feelings, and beliefs about themselves, is the most important aspect of personality. According to Rogers, people are conscious of their self-concepts. We want to feel, experience, and act in ways that are compatible with our ideas of who we are and who we want to be, according to Rogers. According to this view, our concepts make up our sense of self. Three elements make up the self-concept:

- **Self-worth:** What we believe about ourselves. According to Rogers, a child's early interactions with his or her parents help shape how people feel about themselves.
- **Self-image:** It refers to how we perceive ourselves, which is important for psychological well-being. The impact of our body image on our inner personality is a component of self-image. How someone feels about themselves has an impact on how they feel, think, and act in the world.
- **Ideal self:** The ideal self is the person we aspire to be. It is dynamic and comprises our aspirations for the future. The ideal self we had as children is not the ideal self we have as teenagers.

### **George Kelly**

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The Basic Postulate, which states that a person's process is psychologically channelled by how they anticipate occurrences, is the foundation of Kelly's humanistic theory. This implies that our expectations of the outside world and how we interpret our prior experiences impact how we respond. For instance, a person tends to become more sociable and open to people if they perceive others to be kind and open-minded. But, if he perceives others as unpleasant and egotistical, he is more likely to have self-confidence issues and turn disinterested.

Kelly thought that we may begin by creating a collection of personal constructs, which are essentially mental models that we employ to interpret the world around us. These theories are based on our observations and experiences. Additionally, Kelly adhered to what he called "constructive alter nativism," the idea that every event can be interpreted in a variety of ways. He said that we are also free to choose the construct we want to utilize while attempting to make sense of an event or circumstance. This can occur as an event progress, but we can also think back on our experiences and decide to perceive them differently. It is important to keep in mind that the personal construct theory places a strong emphasis on individuality. Because they are based on each person's unique life experiences, constructs are fundamentally personal. The distinctions between these encounters are a result of their unique individuality. Kelly thought that humans have a basic need to be able to predict the outcomes of their experiences. They achieve this by creating a set of personal constructions that they employ to interpret brand- new situations. Constructs are derived from recurrent components in one's experience, but since each person develops their system of constructs, no two people's systems of constructs are the same.

### PERSONALITY DISORDER AND YOUNG ADULTS

Personality disorders are a group of mental health conditions characterized by patterns of thought, feeling, and behaviour that deviate significantly from societal norms and cause impairment in personal and social functioning. There are several types of personality disorders recognized by the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition Tr (DSM- 5)<sup>10</sup>, which is the primary diagnostic tool used by mental health professionals. Based on descriptive similarities, the three clusters of personality disorders have been identified. Schizoid, schizotypal, and paranoid personality disorders are all categorised under Cluster A. People with these disorders frequently have an odd or eccentric appearance. Cluster B contains borderline, histrionic, antisocial, and disorders of the narcissistic personality. These disorders often appear in people as dramatic, emotional, or erratic behaviour. Obsessive-compulsive, dependent, and avoidant personality disorders are all included under Cluster C. People with these disorders frequently display signs of anxiety or fear. For instance, features from various clusters or two or more illnesses from different clusters can frequently co-occur and vary in severity and scope.

#### Cluster A (Odd, Eccentric)

1. **Paranoid Personality Disorder:** a pervasive pattern of distrust and suspiciousness of others, leading to interpersonal conflicts and difficulties.
2. **Schizoid Personality Disorder:** a pervasive pattern of detachment from social relationships and a restricted range of emotional expression.
3. **Schizotypal Personality Disorder:** a pervasive pattern of eccentricities in behaviour, appearance, and cognition, such as magical thinking and unusual beliefs.

#### Cluster B (Dramatic, Emotional, Erratic)

4. **Antisocial Personality Disorder:** a pervasive pattern of disregard for and violation of the rights of others, often involving criminal behaviour, impulsivity, and deceitfulness.

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5. **Borderline Personality Disorder:** a pervasive pattern of instability in interpersonal relationships, self-image, and emotions, often leading to suicidal behaviour, self-harm, and intense emotional reactions.
6. **Histrionic Personality Disorder:** a pervasive pattern of excessive emotionality and attention-seeking behaviour, often characterized by shallow and rapidly changing emotions and an exaggerated need for approval.
7. **Narcissistic Personality Disorder:** a pervasive pattern of grandiosity, entitlement, and lack of empathy, often characterized by an inflated sense of self-importance, a sense of entitlement, and a need for admiration.

### Cluster C (Anxious, Fearful)

8. **Avoidant Personality Disorder:** a pervasive pattern of social inhibition, feelings of inadequacy, and hypersensitivity to negative evaluation, often leading to avoidance of social situations and interpersonal relationships.
9. **Dependent Personality Disorder:** a pervasive pattern of reliance on others for decision-making and emotional support, often leading to submissive behaviour and a fear of abandonment.
10. **Obsessive-Compulsive Personality Disorder:** a pervasive pattern of preoccupation with orderliness, perfectionism, and control, often leading to rigidity, inflexibility, and difficulty delegating tasks to others.

## PERSONALITY DISORDER AND YOUNG ADULTS

Personality disorders can have a significant impact on the lives of young adults, influencing their thoughts, emotions, behaviors, and relationships with others. Personality disorders can affect young adults in various ways, depending on the specific type of disorder and its severity.

**Interpersonal difficulties:** Young adults with personality disorders may experience challenges in forming and maintaining healthy relationships. They may struggle with trust, empathy, and communication, which can lead to social isolation, conflicts, and rejection. (Lenzenweger, Lane, Loranger, & Kessler, 2007)<sup>11</sup>.

**Emotional instability:** Personality disorders can cause intense and unpredictable emotions, including anger, anxiety, depression, and emptiness. Young adults with personality disorders may have difficulty regulating their emotions, which can lead to impulsive and self-destructive behaviours. (Silk, Lee, Hill, Luthar, & Suchday, 2018)<sup>12</sup>.

**Risk-taking behaviours:** Some personality disorders, such as borderline personality disorder, are associated with impulsive and risky behaviours, such as substance abuse, self-harm, and suicidal ideation. (Harrison, Connell, & McFarland, 2016)<sup>13</sup>.

**Poor self-image:** Many personality disorders involve negative self-image and low self-esteem, leading to feelings of shame, guilt, and worthlessness. (Youngstrom, Loeber, & Stouthamer-Loeber, 2000)<sup>14</sup>.

**Difficulty with identity and purpose:** Young adults with personality disorders may struggle to establish a sense of identity and purpose in life. (Côté, 2014)<sup>15</sup>.



**Poor academic and vocational outcomes:** Young adults with personality disorders may struggle academically or vocationally due to their emotional instability, difficulty in regulating behaviour, and impaired social relationships.

### SELF-DECEPTION

Self-deception refers to the act of deceiving oneself or engaging in false beliefs or thoughts that contradict reality. It can take many forms, including denial, rationalization, and projection. Denial is perhaps the most straightforward form of self-deception, where individuals refuse to acknowledge the reality of a situation, despite overwhelming evidence to the contrary. Rationalization involves making excuses or justifications for one's behaviour or actions, despite them being unreasonable or unethical. Projection occurs when individuals attribute their unacceptable thoughts or feelings to others, rather than acknowledging them as their own. Self-deception can be harmful because it prevents individuals from recognizing and addressing their shortcomings and faults, which can lead to negative consequences in their personal and professional lives. It can also contribute to cognitive dissonance, where individuals experience psychological discomfort as a result of holding two conflicting beliefs or ideas.

Overcoming self-deception requires willingness to examine one's beliefs and biases objectively, and to accept and acknowledge uncomfortable truths about oneself. It may also involve seeking outside perspectives and feedback from trusted individuals to gain a more accurate understanding of oneself and the world. Self-deception can take various forms, and two subtypes are mystification and manipulation.

**Mystification:** This subtype of self-deception involves an individual creating a false sense of complexity or confusion around a situation or their behaviour, thereby making it difficult for others (and often themselves) to understand what is going on. For example, a person who is lying might add unnecessary details to their story to make it seem more believable, or a person who is in denial about a problem might use technical language to make it seem more complicated than it is.

**Manipulation:** This subtype of self-deception involves an individual intentionally distorting or manipulating information or their perception of reality to achieve a desired outcome or gain an advantage over others. For example, a person might lie or withhold information to manipulate others into doing what they want, or they might distort their perception of a situation to justify their behaviour or beliefs.

Self-deception is a common phenomenon among young adults, who are in the process of developing their identities and making important life decisions. Self-deception can serve a variety of adaptive functions, but it can also have negative consequences for individuals and society. [Kross, & Ayduk, (2017)<sup>16</sup>]. Self-deception is a complex and multifaceted phenomenon that has important implications for young adults as they navigate the challenges of emerging adulthood. Understanding the factors that contribute to self-deception and developing strategies to overcome it can help young adults make more informed and effective decisions, and lead to a more fulfilling life.

Self-deception can take many forms:

**Rationalization:** Young adults may engage in rationalization, which involves justifying their behaviour or decisions with reasons that may not be accurate or truthful. For example, a young

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adult who frequently skips class might rationalize this behaviour by telling themselves that the classes are not important or that they can catch up on their own.

**Minimization:** Young adults may also engage in minimization, which involves downplaying the negative consequences of their behaviour. For example, young adult who engages in frequent binge drinking might minimize the risks by telling themselves that it is just a phase or that they are not as drunk as they appear.

**Denial:** Another form of self-deception is denial, which involves refusing to acknowledge or accept negative aspects of themselves or their behaviour.

**Wishful thinking:** Young adults may also engage in wishful thinking, which involves imagining positive outcomes without considering the potential obstacles or challenges. For example, a young adult who dreams of becoming a famous musician might imagine success without considering the years of hard work and dedication required.

Self-deception is a complex psychological phenomenon that has been studied from various perspectives, which are given below:

**Motivated Reasoning Theory:** This theory posits that people engage in self-deception as a way to maintain their pre-existing beliefs and attitudes, even in the face of contradictory evidence. According to this theory, people are motivated to protect their self-concept and social identity, and this can lead to biased processing of information. (Kunda, 1990)<sup>17</sup>

**Dual Process Theory:** This theory proposes that self-deception involves two cognitive processes: a fast, intuitive, and emotional process, and a slower, more deliberative, and rational process. According to this theory, self-deception arises when people rely too heavily on the intuitive process and fail to engage in sufficient critical thinking. (Kahneman, 2011)<sup>18</sup>

**Evolutionary Theory:** This theory suggests that self-deception evolved as a way to enhance social cohesion and cooperation within groups. According to this theory, self-deception may have adaptive benefits in certain social contexts, but can also lead to harmful outcomes in other situations. (Trivers, 2011)<sup>19</sup>

**Affective-Experiential Theory:** This theory proposes that self-deception arises when people rely too heavily on their emotions and experiences and fail to consider alternative perspectives. According to this theory, self-deception can be influenced by factors such as mood, stress, and social context. (Wilson, 2002)<sup>20</sup>

**Affective-Infusion Model (AIM):** The AIM proposes that emotions and moods can influence information processing and decision-making. According to this model, self-deception can occur when individuals are in a positive mood and selectively attend to information that supports their desired beliefs or outcomes. (Forgas, 1995)<sup>21</sup>

**The Cognitive Dissonance Theory:** The Cognitive Dissonance Theory proposes that individuals experience psychological discomfort, or dissonance when their beliefs or attitudes are inconsistent with their behaviours or experiences. Self-deception can occur when individuals reduce this dissonance by rationalizing or justifying their beliefs or behaviours. (Festinger, 1957)<sup>22</sup>

## PERSPECTIVES OF SELF-DECEPTION

## **Self-Deception and Social Media Addiction among Young Adults with Personality Disorder**

Theoretical perspectives of self-deception offer insight into how the phenomenon occurs and why individuals engage in it.

**Evolutionary Perspective** - According to this perspective, self-deception may have evolved as a mechanism for social cooperation and group survival. Self-deception can help individuals present a positive image to others, which can lead to social acceptance and cooperation. This can ultimately enhance group cohesion and survival. (Trivers, 2011)<sup>23</sup>

**Psychoanalytic Perspective** - This perspective posits that self-deception arises from the unconscious mind's attempt to protect the individual from painful or unacceptable thoughts or feelings. Self-deception can be viewed as a defence mechanism that helps individuals cope with difficult emotions or experiences. (Freud, 1964)<sup>24</sup>

**Cognitive Perspective** - The cognitive perspective suggests that self-deception arises from cognitive biases and errors in thinking. These biases can lead individuals to selectively attend to and interpret information in a way that supports their preexisting beliefs and attitudes while ignoring or dismissing contradictory evidence. (Pronin, Lin, & Ross, 2002)<sup>25</sup>

**Motivational Perspective** - The motivational perspective suggests that self-deception arises from motivational factors, such as the desire to maintain self-esteem or achieve particular goals. Self-deception can occur when individuals selectively seek out and interpret information that supports their desired beliefs or outcomes while ignoring or dismissing contradictory evidence. (Kunda, 1999)<sup>26</sup>.

### **SELF-DECEPTION AND YOUNG ADULTS**

Self-deception is the act of deceiving oneself or distorting reality in order to maintain a certain belief or avoid facing uncomfortable truths. This phenomenon is particularly common among young adults who are still in the process of forming their beliefs, values, and sense of identity. Some degree of self-deception can be adaptive and helpful in maintaining a positive self-image and promoting psychological well-being. For example, it may be beneficial for young adults to hold optimistic beliefs about their future prospects or abilities, even if these beliefs are not entirely accurate. On the other hand, self-deception can also be maladaptive and harmful, particularly if it involves denying or distorting important aspects of reality. For example, if a young adult is in denial about a serious health problem or addiction, their self-deception could prevent them from seeking necessary treatment.

One research found that higher levels of self-deception were associated with lower levels of psychological well-being, including greater levels of anxiety, depression, and lower life satisfaction (Lodi-Smith & Roberts, 2010)<sup>27</sup>.

Another research examined the relationship between self-deception and risk behaviour among college students and found that students who engaged in risky behaviours, such as binge drinking or unsafe sex, were more likely to engage in self-deception as a means of justifying their behaviour (Livingston & Boyd, 2010)<sup>28</sup>.

### **SOCIAL MEDIA ADDICTION**

Social media addiction refers to excessive or compulsive use of social media platforms such as Facebook, Instagram, Twitter, Snapchat, and others, to the point where it interferes with daily life and functioning. Individuals who struggle with social media addiction may experience negative consequences such as decreased productivity, social isolation, poor sleep quality, and negative effects on mental health, including depression, anxiety, and low self-esteem.

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The addictive nature of social media can be attributed to its ability to provide instant gratification, facilitate social connection, and trigger the release of dopamine, a neurotransmitter associated with pleasure and reward. This can create a cycle of dependence on social media use, as individuals seek to replicate the positive feelings and experiences associated with using social media. While social media addiction is not yet recognized as a formal diagnosis in the Diagnostic and Statistical Manual of Mental Disorders (DSM-5), it is increasingly recognized as a real phenomenon that can have negative consequences for individuals' health and well-being. To address social media addiction, it is important to set boundaries around social media use, such as limiting the amount of time spent on social media, scheduling specific times to check social media, and avoiding the use of social media during important tasks or social interactions. It may also be helpful to engage in other healthy habits, such as exercise, mindfulness, and spending time in nature, to reduce reliance on social media as a coping mechanism.

*Some signs and symptoms of social media addiction include:*

- Spending excessive amounts of time on social media, often to the detriment of other activities such as work, school, or socializing with friends and family.
- Experiencing withdrawal symptoms when not using social media, such as anxiety, irritability, or restlessness.
- Neglecting important tasks or responsibilities in favour of using social media.
- Continuing to use social media despite negative consequences, such as conflicts with friends or family, declining academic or work performance, or negative impacts on mental health.

Research has shown that social media addiction can have negative impacts on mental health, including increased rates of depression, anxiety, and other psychiatric disorders. It can also lead to social isolation, reduced self-esteem, and decreased productivity. It is important to note that not everyone who uses social media frequently or enjoys spending time on these platforms is necessarily addicted. However, if social media use is interfering with daily life and causing negative consequences, it may be worth considering whether addiction is a factor.

### **SOCIAL MEDIA ADDICTION AND YOUNG ADULTS**

Social media addiction is particularly prevalent among young adults, who are the primary users of social media platforms. This age group is more likely to engage in social media activities, such as posting updates, sharing photos, and interacting with friends and followers. Young adults may be more vulnerable to social media addiction because of their desire for social validation and their need to belong to a social group. However, excessive use of social media can lead to addiction and negative consequences on their mental, emotional, and physical health. In addition to the negative effects mentioned earlier, social media addiction can have other consequences on young adults. It can lead to a decrease in face-to-face communication skills, a lack of concentration and focus, and reduced academic performance. It can also impact their ability to form meaningful relationships, as social media can create a false sense of connection that does not translate into real-life interactions.

Young adults are more susceptible to social media addiction due to several factors, including the need for social validation, the fear of missing out (FOMO), and the availability of smartphones and other devices. They may also feel pressure to maintain an online persona or image, which can lead to a preoccupation with social media and the need for constant

## Self-Deception and Social Media Addiction among Young Adults with Personality Disorder

validation from their peers. To prevent social media addiction among young adults, it is important to promote healthy social media habits. This includes setting limits on social media use, taking breaks from social media, and finding alternative sources of entertainment. It is also important to educate young adults about the potential negative consequences of social media addiction and to encourage them to seek support from friends and family if they feel they are struggling with addiction. Additionally, parents and educators can play a vital role in monitoring social media use among young adults and promote healthy social media habits.

### RELATIONSHIP BETWEEN THE RESEARCH VARIABLES

#### *Personality Disorder and Self-Deception*

Personality disorders are characterized by long-standing patterns of behaviour that deviate from cultural expectations and cause distress or impairment in functioning. These disorders are often associated with self-deception, which is defined as the act of deceiving oneself about one's true feelings, motivations, or behaviour (Vohs & Baumeister, 2016)<sup>29</sup>

Self-deception is a key characteristic of personality disorders, which are a group of mental health conditions characterized by maladaptive and inflexible patterns of behaviour, thought, and emotion that deviate from cultural norms and cause significant distress and impairment in functioning. Individuals with personality disorders often have a distorted sense of self and struggle to accept responsibility for their actions, which can lead to self-deception. People with personality disorders may engage in self-deception to protect themselves from negative emotions, such as shame or guilt, or to maintain their self-image. Self-deception can also prevent individuals with personality disorders from seeking help, as they may deny the severity of their symptoms or avoid confronting their issues. This can make it difficult for them to receive treatment and address their underlying mental health concerns. It is important to note that while self-deception is common in personality disorders, it is not exclusive to them. All individuals have the potential to engage in self-deception, and it can be a challenge to recognize and address.

Research suggests that individuals with personality disorders often engage in self-deception to protect their self-image or avoid facing negative emotions. For example, individuals with a borderline personality disorder may engage in self-deception by idealizing or devaluing themselves or others to protect themselves from the fear of abandonment (American Psychiatric Association, 2013)<sup>30</sup>. Similarly, individuals with a narcissistic personality disorder may engage in self-deception by exaggerating their accomplishments, denying any wrongdoing, or blaming others for their mistakes to protect their sense of superiority and grandiosity (American Psychiatric Association, 2013). Research has shown that therapy and counselling can be beneficial for individuals with personality disorders who struggle with self-deception. Through therapy, individuals can learn to identify and challenge their distorted thoughts and beliefs and develop healthier coping mechanisms (Linehan, 1993)<sup>31</sup>. With the help of a mental health professional, individuals can work towards greater self-awareness and acceptance, which can lead to a more fulfilling and meaningful life. Young adults with personality disorders may engage in self-deception in several ways that can exacerbate their social media addiction.

### PERSONALITY DISORDER AND SOCIAL MEDIA ADDICTION

Research suggests that there may be a link between personality disorders and social media addiction. Personality disorders are a group of mental health conditions characterized by maladaptive and inflexible patterns of behaviour, thought, and emotion that deviate from cultural norms and cause significant distress and impairment in functioning. Social media

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addiction, also known as problematic social media use, is defined as the excessive use of social media that leads to negative consequences such as impaired functioning, reduced life satisfaction, and increased stress. Studies have found that individuals with certain personality disorders, such as borderline personality disorder and narcissistic personality disorder, may be more likely to develop social media addiction. For example, individuals with borderline personality disorder may use social media to cope with feelings of loneliness, impulsivity, and emotional deregulation, while individuals with a narcissistic personality disorder may use social media to seek attention, validation, and admiration from others (Andreassen et al., 2017; Carpenter & Trull, 2013)<sup>32</sup>. Individuals with personality disorders may also be more vulnerable to the negative effects of social media addiction. For example, social media use can exacerbate symptoms of anxiety, depression, and low self-esteem in individuals with borderline personality disorder and narcissistic personality disorder (Marshall et al., 2015; Park et al., 2013)<sup>33</sup>. It is important to note that while there may be a link between personality disorders and social media addiction, not all individuals with personality disorders will develop problematic social media use. Additionally, social media addiction can occur in individuals without a personality disorder, and it is important to consider other factors such as individual temperament, environmental influences, and underlying mental health conditions.

Treatment for social media addiction in individuals with personality disorders may involve a combination of psychotherapy, medication, and behavioral interventions. Cognitive-behavioral therapy (CBT) and dialectical behaviour therapy (DBT) are two evidence-based treatments that can help individuals develop healthier coping mechanisms and address underlying mental health concerns (Baker et al., 2019)<sup>34</sup>. There may be a link between personality disorders and social media addiction, and individuals with personality disorders may be more vulnerable to the negative effects of excessive social media use. With the help of therapy and behavioral interventions, individuals with personality disorders can learn to develop healthier coping mechanisms and address underlying mental health concerns, which can reduce the risk of social media addiction and improve overall well-being. Young adults with personality disorders may be more vulnerable to developing an addiction to social media. Some ways in which young adults with personality disorders may be more prone to social media addiction are given below:

**Using social media to cope with negative emotions:** Young adults with personality disorders may struggle with regulating their emotions and may turn to social media as a way to distract themselves from negative feelings or to seek validation from others. This can lead to excessive social media use and an increased risk of addiction.

**Seeking attention and validation:** Many individuals with personality disorders struggle with feelings of low self-worth and may turn to social media as a way to seek attention and validation from others. This can manifest as a need for likes, comments, and followers, which can become addictive.

**Impulsivity and poor decision-making:** Some personality disorders are associated with impulsivity and poor decision-making, which can lead to compulsive social media use. Young adults with personality disorders may struggle to resist the urge to check their social media accounts, even if it interferes with other areas of their life.

### SELF-DECEPTION AND SOCIAL MEDIA ADDICTION

Self-deception refers to the act of deceiving oneself into believing something false or ignoring something true. Social media addiction, on the other hand, refers to the compulsive use of

## Self-Deception and Social Media Addiction among Young Adults with Personality Disorder

social media platforms despite the negative consequences it may have on one's life. Self-deception and social media addiction can be related in several ways. For example, someone who is addicted to social media may deceive themselves into thinking that their use of social media is not negatively impacting their life. They may rationalize their behaviour by saying that they are just "staying connected" or "keeping up with friends," when, they are spending excessive amounts of time on social media to the detriment of their relationships, work, and overall well-being. Self-deception can also contribute to the development of social media addiction. Someone prone to self-deception may convince themselves that they are not addicted to social media, even though their behaviour suggests otherwise. They may ignore the signs of addiction, such as feeling anxious or irritable when unable to access social media, or neglecting other important areas of their life in favour of social media use.

Young adults who are addicted to social media may engage in self-deception in several ways. **Believing that social media use is harmless:** Someone who is addicted to social media may convince themselves that their use of social media is harmless, even if it is negatively impacting their mental health or interfering with other areas of their life. They may ignore or downplay the negative consequences of their social media use, such as decreased productivity, increased anxiety, or strained relationships with family and friends.

**Presenting a false image of oneself:** As mentioned earlier, social media addiction can lead to self-deception when it comes to presenting a curated version of oneself online. Young adults who are addicted to social media may spend hours crafting the perfect posts and photos to present an idealized version of themselves online, even if it does not accurately reflect their real-life experiences or personality.

**Believing that they are in control:** Someone who is addicted to social media may convince themselves that they are in control of their social media use, even if they are spending hours on social media. They may believe that they can stop using social media whenever they want, even if their behaviour suggests otherwise.

***PERSONALITY DISORDER, SELF-DECEPTION AND SOCIAL MEDIA ADDICTION***  
Personality disorders, self-deception, and social media addiction can all be interconnected in several ways. Personality disorders are characterized by patterns of behaviour, thinking, and feeling that are inflexible and maladaptive, and can cause significant impairment in social and occupational functioning. Self-deception involves individuals deceiving themselves or denying the reality of a situation, which can lead to further dysfunction. Social media addiction refers to excessive use of social media that interferes with daily life and causes negative consequences. Individuals with personality disorders may be more prone to social media addiction and self-deception due to their difficulties with emotional regulation, interpersonal relationships, and impulse control. They may use social media as a way to cope with negative emotions, seek attention and validation, and distract themselves from real-life problems. They may also engage in self-deception by justifying their excessive social media use as necessary for their mental health or believing that they are in control of their behaviour. Self-deception and social media addiction can further exacerbate the symptoms of personality disorders, leading to a cycle of dysfunction. For example, excessive social media use can cause further isolation and impair interpersonal relationships, which can worsen the symptoms of personality disorders. Self-deception can also prevent individuals from seeking appropriate treatment, as they may deny or downplay the severity of their symptoms.

### *Need for the Study*

## **Self-Deception and Social Media Addiction among Young Adults with Personality Disorder**

In recent times, young adults are using social media very frequently, almost every day. Social media addiction is a growing problem, especially among young adults and it can have negative effects on their mental and well-being and it is important to understand the underlying factors that contribute to it. By examining the role of personality disorder and self-deception, we can gain a deeper understanding of the emotional and psychological factors that drive social media addiction. Those young adults who have mild personality disorder get easily addicted to social media and they even hide their identity. As they already have mild personality disorder, if they persistently hide their identity, it may lead to severe personality disorder. They may also engage in self-deception by justifying their excessive social media use as necessary for their mental health or believing that they are in control of their behaviour. Self-deception and social media addiction can further exacerbate the symptoms of personality disorders, leading to a cycle of dysfunction. Understanding the role of personality disorders in this addiction can help to develop effective prevention and treatment strategies. So, the purpose of this research is to know why young adults have personality disorder and self-deception in social media addiction.

### **REVIEW OF LITERATURE**

#### **SELF-DECEPTION**

Sheridan, Boman, Mergler and Furlong (2015) measured the well-being, anxiety and self-deception in 268 University students. The tools used were a Battery of Positive psychological measures which measure anxiety and self-deception. The results indicated that those higher in self-deception scored higher in self-efficacy and all positive vitality measures and lower in anxiety than those lower in self-deception.

Fernbach, Hagmayer, and Soloman (2014) assessed the extent of Effort denial in self-deception" and proposed a mixed-belief model of self-deception. The result shows that participants' mental representation of their behaviour was dissociated from their actual behaviour facilitating self-deception.

Froehlich (2019) measured the role of pseudo-cognitive authorities and Self-deception in the Dissemination of fake news". The purpose is to synthesize insight into why fake news is created, disseminated, sustained and authorised to understand how and why it is successful and how it might be challenged. The findings of the research indicate that roles of new adherents and developing paths for successful strategies in coping with them.

Desai, Dalal and Rawal (2017) examined whether volunteering for NPOs reduces the individual's likelihood of engaging in corrupt practices. The psychological trait includes self-deception and Locus of control. The overall results show that greater experience with such NPOs leads to a significant reduction in self-deception and lead a higher likelihood of having an internal locus of control.

Bachkirova (2016) wrote a research paper on "A new perspective on self-deception for applied purpose". This paper provides a theoretical analysis of the literature on Self-deception from a pragmatic perspective that shows personal development work on recognising and minimising self-deception and helping practices such as counselling and coaching. This paper also suggests consideration of self in self-deceivers.

Ren, Zhong, and Fan et al (2018) investigated the influence of Self-control and social status on Self-deception. The findings indicate that compared with individuals with high self-control, low self-control individuals tended to produce more self-deception. In addition, a high social



## **Self-Deception and Social Media Addiction among Young Adults with Personality Disorder**

status individual's perception could restrain the influence of low self-control on Self-deception.

Lamba and Nityananda (2014) analysed whether "Self-deceived Individuals are better at deceiving others". The findings suggest that people may not always reward the more accomplished individual but rather the more self-deceived.

Overall, this research shows that self-deception is related to many factors like denial, projection, addiction, self-control, locus of control, anxiety and so on.

### **SOCIAL MEDIA ADDICTION**

Hou, Xiong, and Jiang et al (2019) examined the Impact, mediation and Intervention of social media addiction to college students' mental health and academic performance. 232 college students participated in this research. The results show that social media addiction was negatively associated with the student's mental health and academic performance.

Echebura, and de Corral, (2010) conducted a cross-section pilot study on "Addiction to New Technologies and online social networking in 475 young People" from selected five universities. The results suggested that the excessive use of new technologies especially social media may be particularly addictive to young people.

Daniele La Barbera, Filippo La Paglia, and Rosaria Valsavoia (2009) conducted a literature review on "Social network and addiction". The results show that young people with narcissistic tendencies are particularly prone to engaging with social networks in an addictive way.

D Arienzo, Boursier, and Griffiths (2019) conducted a systematic literature review on "Addiction to social media and attachment styles". The purpose of this research was to examine the impact of attachment styles and their influence on internet addiction and social media addiction. The findings suggest that the gratification model provides a useful framework to understand the effects of parental attachment on social media addiction.

Abiddine, Aljaberi, Gadetrab, Lin and Muhammed (2022) conducted research on "Mediated effects of insomnia in the association between problematic social media use and subjective well-being among 288 students during COVID-19 pandemic from a University in Algeria. The tools used were the Bergen social media addiction scale and Arabic scale of insomnia. The results concluded that insomnia appears to play a major role in mediating the association between subjective well-being and problematic social media use.

Lin, Namdar, Griffiths and Pakpour (2020) conducted a cross-sectional study on "Mediated roles of generalized trust and Perceived social support in the effects of problematic social media use on mental health". 614 samples participated in this research. The tools used were the Bergen Social Media Addiction Scale, Generalized trust, Multidimensional Scale of Perceived Social Support and Oxford Happiness Questionnaire (Short form). The results show that problematic social media use had negative effects on happiness and mental quality of life via mediators of generalized trust and Perceived Social Support.

Alimoradi, Brostrom et al (2019) conducted a systematic review and meta-analysis on "Internet addiction and sleep problems". The results of the meta-analysis revealed a significant

## **Self-Deception and Social Media Addiction among Young Adults with Personality Disorder**

or for sleep problems and significantly reduced sleep duration among individuals addicted to the Internet.

Zhao (2021) measured the impact of social media use types and social media addiction on the subjective well-being of 370 college students. The tool used was the social media addiction scale.

The results show that social use and entertainment use have different effects on social media addiction and subjective well-being: entertainment use is more likely to lead to social media addiction.

Audrey poh choo cheak, Gerald Gan Goh and Tai Sook Chin (2016) explored the relationship Social networking addiction with social networking dependency and mood modification among 343 Undergraduates in Malaysia. The results show that social networking dependency and mood modification have a significant positive correlation with online social networking addiction.

Hawi and Samaha (2016) investigated the relations among Social media addiction, self-esteem and life satisfaction in University students. The results show that social media addiction had a negative association with self-esteem and a positive association with satisfaction with life.

Overall this research suggests that social media addiction has negative consequences for young adults that include mental health, academic performance, subjective well-being and happiness.

### **PERSONALITY DISORDER**

Chu, Victor, and Klonsky (2016) assessed the Characterizing of Positive and Negative Emotional Experiences in 150 Young Adults with Borderline Personality Disorder Symptoms. The findings suggest that individuals with BPD features are distinguished by elevated Negative Emotional Experiences.

Kienast, Stoffers, Bermpohl and Lieb (2014) conducted a review on "Borderline Personality Disorder and comorbid addiction: epidemiology and Treatment". The results show that patients with Borderline Personality Disorder and Comorbid addiction should be treated sooner.

Whipp, Korhonen, Raevouri et al (2018) conducted a population-based research to determine whether general aggression, as well as direct and indirect subtypes assessed in early adolescence, predict young adult antisocial personality disorder (ASPD) in a population-based sample. The results indicate that aggression levels in a general pre and early- adolescent population can significantly predict, with useful predictive utility, a serious psychiatric outcome in young adulthood in both sexes. And also, these findings suggest that focusing intervention on children and adolescents with higher aggression levels could reduce future ASPD cases.

Winsper, Bilgin, Thompson, et al (2019) conducted a review and meta-analysis is to calculate the worldwide prevalence of personality disorders and examine whether rates vary between high-income countries and low and middle- income countries. The results show that the rates were greater in high-income countries compared with low and middle-income countries. Personality disorders are prevalent globally.

## **Self-Deception and Social Media Addiction among Young Adults with Personality Disorder**

Van Schie, Jarman, Huxley and Grenyer (2020) researched investigated the role of Parenting and Maltreatment in grandiose and vulnerable narcissist traits in youth. The results show that there was no direct effect of remembered parental care or childhood maltreatment on current levels of narcissistic traits.

Friedman, Rhee, Ross, Corley and Hewitt (2021) conducted a meta-analysis to find the Genetic and environmental relations of executive functions to antisocial personality disorder symptoms and psychopathy among 765 young adults. The findings suggest that antisocial behaviour may relate to common executive function factors that capture covariance across response inhibition. The results from the twin model indicated that the association between LSRP secondary psychopathy and ASPDs was due to both genetic and non-shared environmental influences.

Steele, Townsend, and Grenyer (2019) overviewed the systematic reviews that assessed whether individuals with personality disorder had pathology of experience of maladaptive parenting. The reviews found that maladaptive parenting was a psychosocial risk factor for the development of borderline personality pathology.

Bilotta, Carcione, et al (2018) investigated the relationship between "Symptom severity and mind reading in narcissistic personality disorder". The results show that Narcissistic Personality Disorder patients showed poorer mindreading than the patients without Personality disorder and were comparable to patients with other Personality Disorders.

Khoury, Zona, Bertha, Choi-Kain, Hennighausan and Lyons-Ruth (2020) assessed the patterns of "Disorganized Attachment Interactions among young adults with Borderline Personality Disorder, other Diagnosis and No diagnosis". The results show underscore the utility of observational assessments to capture the interpersonal features of BPD and highlight the potential value of examining the development trajectories of disorganized and controlling attachment behaviour to identify pathways toward BPD.

Stewart, Singleton, and Benau et al (2019) measured the level of "Neurophysiological activity following rewards and losses among female adolescents and young adults with Borderline Personality Disorder". The results show that healthy females, adolescents and young adults with Borderline Personality Disorder showed a reduced RewP. The Borderline Personality Disorder group had significantly reduced delta power to wins compared to healthy controls.

Overall this research suggests that Personality disorders have an impact on young adults affecting their emotional regulation, social relationship and overall quality of life.

### **PERSONALITY DISORDER AND SOCIAL MEDIA ADDICTION**

Sumaryanthi, Azizah, Diantina, and Nawangship (2019) measured the association between Personality and Social Media Addiction among University students in Bandung. The tools used were Bergan's social media addiction scale and Big Five Factor. The results show 3 types of personality had a significant correlation with the social media addiction tendency.

Akca, Bilgic, Karagoz, cikili, Kocak and Sharp (2019) measured the link between Social media use and personality disorders". The tools used were Personality Belief Questionnaire - Short Form and Social Media Disorder Scale. The results show that high levels of social media addiction demonstrated higher levels of avoidant, dependent, antisocial, histrionic, paranoid and borderline personality features compared to those with low levels of social media disorder.

## **Self-Deception and Social Media Addiction among Young Adults with Personality Disorder**

The research indicates that histrionic personality features may be risk factors for the addictive use of social media.

Zadra, Bischof, Besser, Bischof, Meyer, John and Rump (2016) investigated the association between Internet addiction and Personality disorders in the general population-based sample". The result shows that individuals with Internet addiction have higher frequencies of personality disorders.

Savci, Turan, Griffiths and Mustafa Ercengiz (2019) studied the relation between Histrionic Personality, Narcissistic Personality and Problematic Social Media Use. The findings demonstrated that histrionic personality belief positively affected the need for social approval and the desire for being liked. Social Media Addiction positively affected Narcissistic Personality Beliefs.

Andreason, Pallesen, and Griffith (2017) assessed the relationship between addictive use of social media, narcissism and self-esteem. The results show that lower age, being a woman, not being in a relationship, being a student, lower education, lower income, lower self-esteem and narcissism was associated with higher scores on the Bergen Social Media Addiction Scale. The findings support the notion of addictive social media use reflecting a need to feed the narcissistic personality traits and an attempt to inhibit a negative self-evaluation.

Susanto, Suryani, Astiarani and Kurniawan (2021) studied the Relationship between Narcissism, Self-Esteem, and Social Media Addiction in Preclinical Medical Students. This was a cross-sectional observational analytical study on 211 preclinical medical students at the Atma Jaya Catholic University of Indonesia. Instruments used in this study were the Narcissistic Personality Inventory-16 (NPI-16), Rosenberg Self-Esteem Scale (RSES), and Bergen Social Media Addiction Scale (BSMAS). The result shows that there is a relationship between narcissism, self-esteem, and social media addiction in university students.

Akdeniz (2023) assessed whether Personality Traits and Narcissism in Social Media Predict Social Media Addiction. A total of 705 people (aged 18 to 61) participated in the research. Big Five Inventory, Scale of Narcissism in Social Media, and Bergen Social Media Addiction Scale were used for this cross-sectional study. According to the results, higher extraversion and neuroticism lead to greater social media addiction levels, while increased levels of agreeableness lead to decreased social media addiction levels. Narcissistic admiration and narcissistic rivalry, on the other hand, significantly predicted social media addiction when socio-demographic variables and personality traits were controlled. According to the results, narcissism in social media seems to play an important role in social media addiction.

Kheradmand, Amirlatifi and Rahbar (2023) assessed the Personality traits of university students with smartphone addiction. Three hundred and eighty-two students of Tehran universities were asked to answer the smartphone addiction scale (SAS) and the Persian version of the Cloninger temperament and character inventory (TCI). The result shows that people with high novelty seeking, harm avoidance, self-transcendence, low persistence, and self-directedness which indicate narcissistic personality disorder, could have a role in smartphone addiction.

Tekin and Turhan (2021) find whether Social Media Addiction differed by Personality Trait Data were collected from 454 undergraduate tourism students. This research revealed that the students' dominant personality trait is agreeableness with a low-level social media addiction.

## **Self-Deception and Social Media Addiction among Young Adults with Personality Disorder**

The research has also found a positive relationship between neuroticism personality traits and social media addiction and a negative relationship between personality traits of extraversion, agreeableness, and conscientiousness, and social media addiction. The research has revealed that tourism students are dependent on social media. Social media addiction is a type of addiction that harms individuals' personal development and business life.

Jhoselle Tus (2022) found the relationship between Social Media Addiction and Personality Traits among College Students during COVID-19 Pandemic" Two hundred and fifty (250) students currently enrolled in colleges and universities in the Philippines were selected to answer the disseminated Google forms. By using the Bergen Social Media Addiction Scale (BSMAS) and the Mini International Item Pool (Mini IPIP). The findings indicated that the respondents' social media addiction was significantly related to their personality.

Overall this research suggests that young adults' Personality disorder has a strong relationship with social media addiction. Individuals with borderline personality disorder and Narcissistic personality disorder will engage more excessively on social media usage.

### **PERSONALITY DISORDER AND SELF-DECEPTION**

Jose Miguel, Raquel Vilar, Elisardo Becona and Antonio Verdejo (2016) assessed Self-deception as a mechanism for the maintenance of drug addiction". The study aimed at examining the level of Self-deception in substance-dependent individuals following addiction treatment and examined the association between participant's levels of Self-deception and personality disorder, addiction-related beliefs, duration of abstinence and estimates of cravings. 79 outpatient from the Centro Provincial de Drogodependencias in Granada participated. 34 % of participants were diagnosed with comorbid personality disorders. The result shows that individuals with substance dependence exhibit elevated scores of Self-deception, particularly in the domains of active denial, selective amnesia, projection and confabulation. Individuals with comorbid personality disorders display a greater level of Self-deception compared to individuals with dual diagnosis.

Michikyan, Subrahmanyam and Dennis (2014) examined the link between neuroticism, and extraversion, as well as the presentation of the real, the ideal and the false self on Facebook. 261 young adults participated and completed self-reported measures about personality, online self-presentation and Facebook use. The analysis revealed that young adults high in neuroticism reported presenting their ideal and false selves on Facebook to a greater extent where as those low in extraversion reported engaging in greater online self-exploratory behaviours.

Overall this research suggests that self-deception is prevalent in certain personality disorders where individuals may engage in grandiose thinking, and denial of their flaws.

### ***PERSONALITY DISORDER, SELF-DECEPTION AND SOCIAL MEDIA ADDICTION***

Błachnio, Przepiorka & Pantic, I. (2016) studied the association between Facebook addiction, self-esteem and life satisfaction using a cross-sectional study on 381 Facebook users. They were assessed using Bergen Facebook Addiction Scale (BFAS), Facebook Intensity Scale (FBI), Rosenberg's Self-Esteem Scale (SES), and Satisfaction with Life Scale (SWLS). This research found that individuals with low self- esteem were more likely to be addicted to Facebook and that Facebook addiction was associated with lower life satisfaction. Individuals with personality disorders may have low self-esteem, making them more vulnerable to social media addiction.

## Self-Deception and Social Media Addiction among Young Adults with Personality Disorder

Delibas, & Bulut, (2018) measured the relationship between social media addiction and narcissistic personality traits" A cross-sectional convenient sample of 23,532 Norwegians completed an open web-based survey including the Bergen Social Media Addiction Scale (BSMAS), the Narcissistic Personality Inventory-16, and the Rosenberg Self-Esteem Scale. This research found that social media addiction was positively correlated with narcissistic personality traits, which are commonly associated with certain personality disorders. This suggests that individuals with personality disorders may be more prone to social media addiction due to their underlying narcissistic tendencies.

Hopwood, Kotov, Krueger, Watson, Widiger, Althoff, et al (2018), article discussed the need for a dimensional approach to diagnosing personality disorders, as the current categorical approach may not fully capture the complexity of personality disorders and their relationship to other mental health conditions, such as addiction and self-deception.

Kircaburun, Griffiths, & Billieux, (2019) found the association of Trait emotional intelligence with problematic online behaviours among adolescents". This research found that the trait of emotional intelligence was negatively correlated with problematic online behaviours, including social media addiction. Individuals with personality disorders may struggle with emotional regulation, making them more vulnerable to addiction and self-deception related to social media use.

Overall, this research suggests that there may be a complex interplay between personality disorders, self-deception, and social media addiction. Further research is needed to better understand these relationships and develop effective treatments for individuals struggling with these issues.

## **METHODOLOGY**

### *Objectives*

- To assess the extent of Personality disorder among young adults.
- To assess the level of social media addiction and its dimensions among young adults.
- To assess the level of self-deception and its dimensions among young adults.
- To assess the relationship between social media addiction and self-deception among young adults.
- To assess the relationship between Personality disorder, self-deception and social media addiction among young adults.
- To measure the difference in social media addiction and self-deception among the male and female young adults.

### *Hypotheses*

- H1: The extent of personality disorder among young adults is mild. H2: The level of social media addiction among young adults is high. H3: The level of self-deception among young adults is high.
- H4: There is a significant correlation between social media addiction and self-deception among young adults.
- H4: There is a significant correlation between personality disorder, self-deception and social media addiction among young adults.
- H5: There is a significant difference in social media addiction and self-deception among the male and female young adults.

**Sample**

300 young adults between the age group of 20 to 40 years were selected using purposive sampling method from various areas in and around Coimbatore, Tamil Nadu.

**Tools**

Personal Data Sheet which include Name, Gender, Age, Social Media usage, Domicile and Marital status was used to measure the personal details of the participants.

**Personality Belief Questionnaire (PBQ) Short form:** (Beck, 1991), is a 65 item self - report measure of beliefs associated with Personality Disorders using a 5-point Likert scale (0= I don't believe it at all, 4= I believe it totally). The internal consistency and test-retest reliability ranging from 0.77 to 0.93.

**Self-Deception Scale** (Sirvent, 2007) is a 12 item scale derived from the IAM-40 inventory and emphasizing the manipulation and mystification dimensions using a 5-point Likert scale (5 = strongly disagree, 0 = strongly agree). The internal consistency of this scale is 0.85.

**Social Media Addiction Scale** (Aylin Tutgun unal, 2015) is a 41 item self-report measure the social media addictions using a 5-point Likert scale (5 = Always, 1 = Never). The internal consistency and test-retest reliability of the scale is 0.96.

**Procedure**

After building rapport and obtaining consent from the selected young adults, Personality Belief Questionnaire was administered. From the obtained data, those with mild and moderate level of personality disorder only were selected to continue as the sample. The selected sample had been then administered with the Self-Deception Scale and Social Media Addiction Scale. The sample were informed that the responses will be kept confidential and the data will be used only for academic purposes. The data were collected and statistically analyzed using SPSS. The results thus obtained are tabulated and interpreted below.

**Data Analysis**

In order to investigate the gender difference in self-deception and social media addiction among male and female young adults, independent sample t-test was performed. To investigate the correlation between personality disorder, self-deception and social media addiction among young adults, Pearson correlation was performed.

**Research Design**

Single group Pretest only Design was used (Descriptive Research)

**RESULTS AND DISCUSSION**

**Table 1 Level of Self-deception among the sample (N=236)**

Level of Self-Deception	Number	Percentage
High	36	15
Moderate	192	81
Low	8	4

Table 1 shows the level of self-deception among the overall sample. 15% (n=36) of participants scored high level of self-deception.81% (n=192) participants scored moderate level and 4% (n=8) scored low level of self-deception. This shows that majority of the sample have moderate level of self-deception.

**Table 2 Level of Self-Deception of the Male and Female Sample (N=236)**

Level of Self-Deception	Male(N=105)		Female(N=131)	
	Number	Percentage	Number	Percentage
High	11	10	25	19
Moderate	87	83	105	80
Low	07	7	01	1

Table 2 shows the level of self-deception among the male and female sample. 10% (n=11) of male sample scored high level of self-deception.83% (n=87) male sample scored moderate level of self-deception and 7% (n=7) male sample scored low level of self-deception. This shows majority of the male sample have moderate level of self-deception. 19% (n=25) of female sample scored high level of self-deception.80% (n=105) of female sample scored moderate level of self-deception. 1% (n=1) of female sample scored low level of self-deception. This shows that majority of the female sample have moderate level of self-deception

**Table 3 Level of Social Media Addiction (SMA) among the Sample (N=236)**

Level of SMA	Number	Percentage
No Addiction	18	08
Less addicted	39	16
Moderate addicted	114	48
High addicted	63	27
Very high addicted	02	01

Table 3 shows the level of social media addiction among the overall sample. 8% (n=18) of participants have no addiction.16% (n=39) of participants are less addicted to social media.48% (n=114) of participants have moderate addiction to social media. 27% (n=63) of participants are highly addicted to social media. 1% (n=2) of participants are very highly addicted to social media. This shows that most of the participants have moderate social media addiction.

**Table 4 Level of Social Media Addiction (SMA) of the Male and Female sample (N=236)**

Level of SMA	Male(N=105)		Female(N=131)	
	Number	Percentage	Number	Percentage
No Addiction	02	02	16	12
Less addicted	08	08	31	24
Moderate addicted	63	60	51	39
High addicted	30	28	33	25
Very high addicted	02	02	0	0

Table 4 shows the level of social media addiction among the male and female sample. 2% (n=2) of male sample have no addiction.8% (n=8) of male sample have less addicted to social media. 63% (n=60) of male sample have moderate addiction to social media. 28% (n=30) of male sample have highly addicted to social media. 2% (n=2) of male sample have very highly addicted to social media. 12% (n=16) of female sample have no addiction.24% (n=31) of female sample have less addicted to social media. 39% (n=51) of female sample have moderate addiction to social media. 25% (n=35) of female sample have highly addicted to social media. No female sample have very highly addicted to social media.



**Table 5 Correlation between Self-deception and Social Media Addiction (N=236)**

Variable	Mean	S.D	r value	p value
Self-deception	39.7	5.5	0.05	0.36
Social Media Addiction	123.6	26.4		

Table 5 shows that the correlation between self-deception and social media addiction. The overall mean score of self-deception and social media addiction is 39.7 and 123.6 and r value is 0.05. There is a positive correlation between self-deception and social media addiction.

**Table 6 Correlation between Personality disorder and Self-deception (N=236)**

Variables	Mystification	Manipulation	Overall self-deception
Avoidant	-0.006	0.114	0.070
Dependent	-0.068	-0.072	-0.086
Passive aggressive	0.065	-0.062	-0.003
Obsessive Compulsive	0.017	-0.028	-0.008
Anti-social	0.072	-0.029	0.023
Narcissistic	-0.056	-0.128*	-0.115
Histrionic	0.049	-0.095	-0.033
Schizoid	0.056	0.042	0.060
Paranoid	0.062	-0.107	-0.033
Borderline	-0.033	-0.134*	-0.106

\*correlation is significant at the 0.05 level (2-tailed)

Table 6 shows that correlation between personality disorder and self-deception. The avoidant personality disorder have positive correlation with overall self-deception and its dimension manipulation and have negative correlation with another dimension mystification. The dependent personality disorder have negative correlation with overall self-deception and its dimension. The passive-aggressive personality disorder have negative correlation with overall self-deception and its dimension manipulation and have negative correlation with another dimension mystification. The obsessive compulsive personality disorder have negative correlation with overall self- deception and its dimension manipulation and have negative correlation with another dimension mystification. The anti-social personality disorder have positive correlation with overall self- deception and its dimension mystification and have negative correlation with another dimension manipulation. The Narcissistic personality disorder have negative correlation with overall self- deception and its dimension. The histrionic personality disorder have negative correlation with overall self-deception and its dimension manipulation and have positive correlation with another dimension mystification. The schizoid personality disorder have positive correlation with overall self-deception and its dimension. The paranoid personality disorder have negative correlation with overall self-deception and its dimension manipulation and have positive correlation with another dimension mystification. The borderline personality disorder have negative correlation with overall self-deception and its dimension.

**Table 7 Correlation between Personality disorder and Social Media Addiction (N=236)**

Variables	Occupation	Modification	Relapse	Conflict	Overall SMA
Avoidant	-0.064	-0.096	0.028	0.029	-0.013

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Dependent	0.384**	0.235**	0.387**	0.497**	0.490**
Passive aggressive	0.246**	0.255**	0.317**	0.385**	0.377**
Obsessive Compulsive	0.354**	0.289**	0.333**	0.393**	0.422**
Anti-social	0.345**	0.273**	0.353**	0.440**	0.446**
Narcissistic	0.379**	0.286**	0.374**	0.516**	0.504**
Histrionic	0.450**	0.377**	0.471**	0.498**	0.544**
Schizoid	0.254**	0.220**	0.203**	0.271**	0.293**
Paranoid	0.361**	0.353**	0.288**	0.409**	0.436**
Borderline	0.404**	0.249**	0.434**	0.514**	0.514**

\*\*correlation is significant at the 0.01 level (2-tailed)

TABLE 7 shows that correlation between personality disorder and social media addiction. The avoidant personality disorder have negative correlation with the overall social media addiction and its dimension occupation and modification and have positive correlation with the other dimension relapse and conflict. The Dependent personality disorder have positive correlation with overall social media addiction and its dimension. The Passive-aggressive personality disorder have positive correlation with overall social media addiction and its dimension. The Obsessive compulsive personality disorder have positive correlation with overall social media addiction and its dimension. The Anti-social personality disorder have positive correlation with overall social media addiction and its dimension. The Narcissistic personality disorder have positive correlation with overall social media addiction and its dimension. The Histrionic personality disorder have positive correlation with overall social media addiction and its dimension. The Schizoid personality disorder have positive correlation with overall social media addiction and its dimension. The Paranoid personality disorder have positive correlation with overall social media addiction and its dimension. The Borderline personality disorder have positive correlation with overall social media addiction and its dimension.

**Table 8 Mean differences in Self-Deception and its dimension among the Male and Female Sample (N=236)**

S.no	Variables	Gender	N	Mean Score	Standard deviation	t value
1.	Mystification	Male	105	38.7	5.74	0.66 (NS)
		Female	131	40.5	5.25	
2.	Manipulation	Male	105	19.5	3.34	0.02 (NS)
		Female	131	20.5	3.06	
3.	Overall self-deception	Male	105	19.1	3.7	0.02 (NS)
		Female	131	20.1	3.3	

**NS- not significant**

Table 8 shows the mean difference in self-deception and its dimension among the male and female sample. The mean value of Mystification variable of male and female is 38.7 and 40.5 and t value is 0.66 which shows there is no statistically significant difference among male and female sample in Mystification. The mean value of Manipulation variable of male and female is 19.5 and 20.5 and t value is 0.02 which again shows there is no statistically significant difference among male and female in sample in Manipulation. The mean value of overall

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self-deception of male and female is 19.1 and 20.1 and t value is 0.02 which shows that there is no statistically significant difference among male and female in overall self-deception.

**Table 9 Mean difference in Social Media Addiction and its dimension among the Male and Female Sample (N=236)**

S.no	Variables	Gender	N	Mean score	S.D	t value
1.	Occupation	Male	105	40.6	7.1	0.04 (NS)
		Female	131	36.7	8.3	
2.	Modification	Male	105	16.7	3.2	0.06 (NS)
		Female	131	15.4	4.4	
3.	Relapse	Male	105	16.02	3.4	0.07 (NS)
		Female	131	14.2	4.2	
4.	Conflict	Male	105	58.9	50.6	0.10 (NS)
		Female	131	11.04	16.4	
5.	Overall SMA	Male	105	131.7	19.7	0.86 (NS)
		Female	131	117.03	29.2	

**NS – not significant**

Table 9 shows the mean difference in social media addiction and its dimension among the male and female sample. The overall social media addiction and dimensions that include occupation, Modification, Relapse and Conflict. The mean value of male overall SMA and its dimensions is (131.7, 40.6, 16.7, 16.02 and 58.9). The mean value of female overall SMA and its dimensions is (117.03, 36.7, 15.4, 14.2 and 11.04). The t- value of overall SMA and its dimensions include (0.86, 0.04, 0.06, 0.07 and 0.10) which indicate that there is no statistically significant difference among male and female. Overall, from the analysis, it shows that there is no mean difference among male and female in social media addiction and its dimension.

## DISCUSSION

This research involved a sample of young adults and aimed at examining the difference among males and females of overall self-deception and social media addiction. The results show that overall sample have moderate level of self-deception. The research article that supports this result indicate that some degree of Self-deception can be adaptive and helpful in maintaining a positive self-image and promoting psychological well-being. On the other hand, Self-deception can be maladaptive and harmful particularly if it involves denying or distorting important aspects of reality. The impact of Self-deception on young adults depends on the specific nature and degree of their Self-deception as well as how it interacts with other factors in their lives such as their personality, social support and life experiences. It is also worth noticing that Self-deception is a complex phenomenon that manifest in many different ways, so moderate level of Self-deception may not necessarily indicate a particular outcome or trait (Livingston & Boyd, 2010) and there is no statistically significant difference among male and female in self-deception. The research article that supports this result include gender differences in self-deception among college students (Paulhaus and John, 1998) found that there were no significant differences between male and females in self-deception and its dimension. The result also shows that overall sample have moderate level of social media addiction. The research article that supports this result indicate that moderate level of social media addiction can be associated with negative consequences such as depressive symptoms, anxiety and problematic smartphone use and also the results indicate that there is no statistically significant difference among male and female in social media addiction and its

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dimension. (Lin., Sidani, Shensa, Radovic, Miller, Colditz, Hoffman, & Primack, 2016) The result also aimed at examining the relationship between self-deception and social media addiction. The results shows that there is a positive correlation between self-deception and social media addiction. The research article that support the result indicate positive correlation between self-deception and social media addiction among Chinese college students and shows that self-deception was a significant predictor of social media addiction. (Wang, Chen & Liang, 2021). The result also aimed at examining the relationship between personality disorders, self-deception and social media addiction. The results shows, the avoidant personality disorder have positive correlation with overall Self-deception and negative correlation with overall social media addiction. People with avoidant personality disorder may experience difficulties with social interactions and communications, which may or may not lead to social media addiction. The dependent personality disorder have negative correlation with overall Self-deception. The research by Dehghani and Abedi (2014) found negative correlation with dependent personality disorder and self-deception among Iranian University and the result shows that individuals with high levels of DPD tended to have lower levels of self-deception. DPD have positive correlation with overall social media addiction. The research by Cam and Isbulan (2019) found a positive correlation between DPD and social media addiction among Turkish university students. The result shows the individual with high levels of DPD tend to have higher levels of social media addiction. The passive-aggressive personality disorder have negative correlation with overall Self-deception and positive correlation with overall social media addiction. The obsessive compulsive personality disorder have negative correlation with overall Self-deception. The research by Grillo and Sanislow (2010) found that individuals with OCPD tend to have a lower tendency towards denial, a form of self-deception that involves avoiding or denying aspects of reality. The result shows that individuals with OCPD tended to have lower level of denial. OCPD have positive correlation with overall social media addiction. Research has shown that individuals with OCPD may be more likely to engage in excessive technology use and problematic internet use (Brand et al., 2016).the constant stimulation and reinforcement provided by social media may be appealing to individuals with OCPD who are driven by a need for productivity and accomplishment. The antisocial personality disorder have positive correlation with overall Self-deception. Research by Skeem and Cooke (2010) found that individuals with ASPD tend to have high levels of self- enhancement bias, a form of self-deception that involves overestimating one's own abilities and accomplishment and the results showed that individuals with ASPD tended to have higher level of self-enhancement bias than individuals without ASPD, indicate the positive correlation between ASPD and this form of self-deception. ASPD have positive correlation with social media addiction. Research by Kim, & Lee, (2018) found that individuals with ASPD mode likely to addicted to social media and indicate positive correlation between ASPD and social media addiction. The Narcissistic personality disorder have negative correlation with overall Self-deception. Research by Hepper, & Sedikides, C (2014) found that individuals with higher levels of narcissism were less engaged in self-deception. NPD have positive correlation with overall social media addiction. Research by Casale, Fioravanti, & Rugai (2018) found that individuals with higher levels of narcissism were more likely to develop addiction to social media. The Histrionic personality disorder have negative correlation with overall Self-deception and positive correlation with overall social media addiction. The schizoid personality disorder have positive correlation with overall Self-deception. Research by Langdon (2010) found that individuals with high levels of schizoid, a trait related to SPD tend to exhibit more self-deceptive thinking. SPD have positive correlation with social media addiction. Research by Kircaburun and Griffiths (2018) found that individuals with high levels of schizotypy, a trait related to SPD, were more likely to experience symptoms of social media addiction. The

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paranoid personality disorder have negative correlation with overall Self- deception. Research by Bortolon (2017) found that individuals with high levels of paranoid ideation, a symptom related PPD tend to exhibit less self-deceptive thinking. PPD have positive correlation with overall social media addiction. The Borderline personality disorder have negative correlation with overall Self-deception. Research by Gunderson (2011) found that individuals with BPD scored higher on measures of self-deception and also found that higher levels of self-deception were associated with overall severity of BPD symptoms. BPD have positive correlation with overall social media addiction. Research by Hefner (2018) found that individuals with higher levels of BPD symptoms reported greater levels of social media use such as increased conflict with others. Overall Personality disorder, self-deception and social media addiction have strong relationship and interplay among each other.

### **SUMMARY AND CONCLUSION**

#### *Summary*

Personality disorders, self-deception, and social media addiction can all be interconnected in several ways. Personality disorders are characterized by patterns of behaviour, thinking, and feeling that are inflexible and maladaptive, and can cause significant impairment in social and occupational functioning. Self-deception involves individuals deceiving themselves or denying the reality of a situation, which can lead to further dysfunction. Social media addiction refers to excessive use of social media that interferes with daily life and causes negative consequences. Individuals with personality disorders may be more prone to social media addiction and self- deception due to their difficulties with emotional regulation, interpersonal relationships, and impulse control. They might rely on social media as a coping mechanism for unpleasant feelings, as a means of seeking attention and approval, and as a means of disengaging from actual issues. They could even deceive themselves by claiming that their excessive usage of social media is necessary for their mental health or that they have control over their behaviour. Self-deception and social media addiction can worsen personality disorder symptoms, creating a dysfunctional cycle. The main objective of the research is to know why young adults have personality disorder and self-deception related to social media addiction. To accomplish the objectives 300 young adults between the age group of 20 to 40 years were selected using purposive sampling method from various areas in and around Coimbatore, Tamil Nadu. The sample were given the personal data sheet and Personality Belief Questionnaire was administered. From the obtained data, those with mild and moderate level of personality disorder only were selected to continue as the sample. The selected sample had been then administered with the Self-Deception Scale and Social Media Addiction Scale. The data was statistically analyzed using mean, standard deviation. Independent sample t-test and Pearson correlation and shows that there is significant relationship between personality disorder, self-deception and social media addiction. There is no significant differences among male and female young adults in personality disorder, self-deception and social media addiction.

#### *Conclusion*

From overall analysis, the research come to the conclusion that personality disorder, self-deception and social media addiction have strong relationship among each other. It is possible that individuals with certain personality disorders may be more susceptible to self-deceptive behaviors, which could in turn contribute to the development of social media addiction. It is important to note that relationship between personality disorders, self-deception is complex and fully understood.

#### *Limitation*

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- Interventions for all the three variables were not administered
- Only one demographic variable is included.
- Limited to specific population
- Severity of personality disorder.

### *Suggestions for further Research*

- It would be beneficial to compare the young adults with middle and older adults.
- Other variables like marital status, domicile, and occupation can be included in the future research.
- Further research may focus on providing interventions for both self-deception and social media addiction.

### *Implications*

- This research may make some contributions to the literature by additionally acknowledging the relationship between Personality disorder, self-deception and Social media addiction.
- The research may contribute to a deeper understanding of personality disorders and how they relate to self-deception and social media addiction. This knowledge can be used to develop more effective interventions for specially target self-deception and social media addiction among young adults with personality disorders. These interventions may include cognitive-behavioral therapy, mindfulness-based intervention or evidence-based approaches.
- By developing interventions that address self-deception and social media addiction, mental health outcomes among young adults with personality disorders may improve. This could lead to a reduction in depression, anxiety and other mental health outcomes.
- This research can be used to develop policies and programs that address self-deception and social media addiction and improve public health outcomes.
- The research may increase awareness among mental health professionals, policy makers and general public about the relationship between self-deception, social media addiction and personality disorders.

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