



FEAR OF MISSING OUT (FOMO): ASSOCIATION WITH EMOTION REGULATION, ANXIETY AND SOMATIC SYMPTOMS AMONG MEDICAL STUDENTS

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ABSTRACT **Background:** Social media plays a significant role in our daily life, from posting photos on Instagram while eating to checking photos on Facebook while waiting in the grocery line. Fear of Missing Out (FoMO) is a known predictor of problematic smartphone use. Extensive use of social media is a major concern among young adults nowadays. **Aim:** In our study, we aim to find the association between Fear of Missing Out (FoMO) and various mental health problems like emotion regulation, anxiety and somatic symptoms. **Methods:** A cross-sectional study was carried out among 150 medical students. Scales like Fear of Missing Out Scale (FoMOs), Emotion Regulation Questionnaire (ERQ), Depression Anxiety and Stress Scale - 21 Items (DASS-21), 8-item Somatic Symptom Scale (SSS-8) were used to assess the association among various factors. **Result:** 70 out of 150 participants were having higher FoMO score. The study found a statistically significant association between FoMO and Expressive Suppression (emotional expression), Anxiety, Somatic burden. However the association between FoMO and Cognitive Reappraisal (emotional experience) was not found to be statistically significant. **Conclusion:** The results from this study suggest that FoMO appears to be an important factor in understanding health outcomes associated with social media use.

KEYWORDS :

INTRODUCTION

Social media plays a significant role in our day to day life from posting photos on Instagram while eating to checking photos on Facebook while waiting in the grocery line. People are spending a lot of time browsing the different media throughout the day. According to one Global survey in 2018 which was reported in Globalwebindex (GWI), internet users are now spending an average of 2 hours and 22 minutes per day on social networking and messaging platforms.^[1]

The dual nature of social media has driven popular interest in the concept of Fear of Missing Out (FoMO). Defined as a pervasive apprehension that others might be having rewarding experiences from which one is absent, FoMO is characterized by the desire to stay continually connected with what others are doing.^[2]

Of course, fear of missing out is hardly new. It has been induced throughout history by triggers such as newspaper society pages, party pictures, and annual holiday letters and e-mail, depicting people at their festive best. But now, instead of receiving occasional polite updates, we get reminders round the clock through our smartphone, tablet, laptop, etc.^[3] Easy access to this information via technology can potentially motivate individuals to easily compare their own lives to the lives they read about through online postings and observations through pictures on social media sites-causing them to feel less satisfied with their lives and behaviors.^[4]

Being constantly connected to social media and always being able to view the things you're missing out on can cause individuals to begin to experience feelings of dissatisfaction, anxiety, and unworthiness.^[6]

In our study, we aim to test the relationship between FoMO with

Emotional regulation, anxiety and somatic symptoms.

METHODOLOGY

This cross-sectional study was performed at a tertiary care hospital and affiliated medical college in western India. The study was approved by the Institutional Ethical Committee.

The study population consists of 18-35 years old medical students including MBBS students, interns and resident doctors using social media sites on a regular basis. Those reporting psychiatric disorders were excluded from the study. Written informed consent was obtained from the participants.

The sample size was set at 150. Socio-demographic details were recorded. Anonymity and confidentiality was maintained. No incentives were offered to take part in the study.

To assess different variables, four different scales/ questionnaires were used, which are described in brief below:

1. Fear of Missing Out Scale (FoMOs) was developed by Przybylski and colleagues. It is a 10 item measures, asking participants to indicate how true each statement is of their general experiences (ranging from 0-5, 1= not at all true of me & 5=extremely true of me).^[2]

2. Emotion Regulation Questionnaire (ERQ) A 10-item scale designed to measure respondents' tendency to regulate their emotions in two ways, Cognitive Reappraisal (emotional experience) and Expressive Suppression (emotional expression) using a 7-point Likert-type scale ranging from 1 (strongly disagree) to 7 (strongly agree). The higher the score the greater the use of emotion regulation strategy.^[7]

3. Depression, Anxiety and Stress Scale - 21 Items (DASS-21) A set of three self-report scales designed to measure the emotional states of depression, anxiety, and stress. Each of the three DASS-21 scales contains 7 items, divided into subscales with similar content.^[8]

4. Somatic Symptom Scale – 8 (SSS-8) The 8-item Somatic Symptom Scale (SSS-8) is a reliable and valid self-report measure of somatic symptom burden.^[9]

The statistical analysis was performed using SPSS software. To measure the linear association between two variables, *Spearman's Rho Test* was applied.

RESULTS

Among the 150 participants, 54% (n=81) were Male and 46% (n=69) were Female. The mean age group was found to be 21.9 years. The sample consisted of 27.3% (n=41) Interns, 24.0% (n=36) 3rd Year MBBS students, 23.3% (n=35) 2nd Year MBBS students, 14.7% (n=22) 2nd Year Residents and 10.7% (n=16) 1st Year Residents. Most commonly used social media were Whatsapp (99.3%) and Facebook (80.7%), the rest were Instagram (82%), Twitter (76.7%) and Snapchat (45.3%). 10 participants reported of having medical comorbidities like Asthma (n=4), Hypertension (n=2) and some individuals with migraine, vitiligo, glaucoma and tinnitus. 14.7% (n=22) report of using substances like Alcohol, smoking, Tobacco on occasional basis.

To assess Fear Of Missing Out, **FoMO scale** was applied. Average response was 20, which was used as a cut off score. 70 participants were having higher FoMO score.

Emotional regulation was assessed by **Emotion Regulation Questionnaire (ERQ)** which assessed questions about one's emotional life, in particular, how we control (that is, regulate and manage) our emotions. It involves two distinct aspects of emotional life: One is an emotional experience, or what you feel like inside described here as cognitive reappraisal (M=27.24, SD=6.82) and the other is emotional expression, or how you show your emotions in the way you talk, gesture, or behave described here as expressive suppression (M=17.83, SD=5.63).

Depression, Anxiety and Stress Scale - 21 Items (DASS-21) assessed depression (M=7.74, SD=8.18), anxiety (M=15.11, SD=5.75) and stress (M=10.4, SD=7.70). **Somatic Symptom Scale – 8 (SSS-8)** gave somatic burden (M=2.27, SD=3.57).

To measure the linear association between two variables, Spearman's Rho test was applied, which measured correlation coefficient (r_s) and p-value (2-tailed). The test concluded statistically significant association between FoMO and Expressive Suppression (emotional expression) ($r_s=0.248$, $p=0.002$), FoMO and Anxiety ($r_s=0.575$, $p=0$), FoMO and Somatic burden ($r_s=0.322$, $p=0.005$). However association between FoMO and Cognitive Reappraisal (emotional experience) was not statistically significant ($r_s=0.042$, $p=0.606$). Table 1 describes the results of the test.

Table 1
Correlations

| | | Cognitive Reappraisal | Expressive Suppression | Anxiety score | Somatic burden |
|-------------------|-----------------------------------|-----------------------|------------------------|---------------|----------------|
| FoMO score | correlation coefficient (r_s) | 0.042 | 0.248 | 0.575 | 0.322 |
| | p-value (2-tailed) | 0.606* | 0.002** | 0** | 0.005** |
| | N | 150 | 150 | 150 | 150 |

p-value is significant if <0.05

*The association between the two variables would not be considered statistically significant.

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DISCUSSION

This study provided evidence that FoMO is associated with various aspects of emotion regulation- specifically emotional expression rather than experience, anxiety and somatic symptoms. The results of

this study combined with the small body of previous research suggests that FoMO is an important factor in understanding outcomes related to social media use.

The results from this study combined with a few previous research work suggests that FoMO is an important factor in understanding the outcomes of extensive social media use. Longitudinal studies can be carried out to explain how experiencing FoMO influences behaviors and health over time, and to establish directional relationships between FoMO, social media use and health.

The relationship between FoMO and poor health, in part, can be explained by the suggestion that modern technologies have changed several aspects of the human experience and that digital mediums can weaken the self-reflection and hamper the well-being.^[10]

Given these significant increase in technology, counselors and practitioners working with young individuals experiencing health related or interpersonal problems should recognize the impact social media use and FoMO have on those problems and incorporate discussions of social media and FoMO into one-on-one conversations.

Society plays an important part in every individual's life. As a human being, we all have the urge to feel connected with each other. We need to feel supported, valued, and loved. As technology has advanced, it has played an important role in shaping the impact of social media. Various resources like Facebook, Whatsapp, Instagram, etc. are easily accessible to every smartphone user nowadays. These social resources provide a multitude of opportunities for interaction which is a positive aspect; however, on the downside, they often broadcast more options than can be pursued owing to the practical restrictions and time limitations.

Relative deprivation is a sociological term that refers to the dissatisfaction people feel when they compare their positions to others and grasp that they have less. The impact of this goes beyond social activities in real time; it stretches to self-perceptions and how people formulate long-term goals. According to JWT Intelligence (J. Walter Thompson Intelligence), Nearly 6 in 10 survey respondents told us it's important for their Facebook, Twitter or other social media profiles to convey a certain image; approximately two-thirds of teens and adult Millennials felt this way. Individuals have a tendency to become more anxious, irritable, feel more inadequate and have temporarily lower self-esteem after viewing social media.^[5]

More research is needed to understand what components of health are most influenced by FoMO and how health may be improved through interventions to reduce FoMO.^[11]

This study was conducted among a specific group of population (medical students) which limits the generalizability of the findings. As this is a cross-sectional study, there are limits to the conclusions that can be drawn. Causal direction of these relationships cannot be determined, so it is unclear if greater psychological symptoms (depression, anxiety etc.) led to more social media use and therefore more FoMO or if greater FoMO leads to experiencing more physical symptoms.

CONCLUSION

This study demonstrated the association between FoMO and emotion regulation, anxiety and somatic symptoms among young population specifically medical students. FoMO appears to be an important factor in understanding health outcomes associated with social media use.

Source of support

Nil.

Conflict of interest

There are no conflicts of interest.

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