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Online-specific fear of missing out and Internet-use expectancies contribute to symptoms of Internet-communication disorder



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ABSTRACT

Some of the most frequently used online applications are Facebook, WhatsApp, and Twitter. These applications allow individuals to communicate with other users, to share information or pictures, and to stay in contact with friends all over the world. However, a growing number of users suffer from negative consequences due to their excessive use of these applications, which can be referred to as Internet-communication disorder. The frequent use and easy access of these applications may also trigger the individual's fear of missing out on content when not accessing these applications. Using a sample of 270 participants, a structural equation model was analyzed to investigate the role of psychopathological symptoms and the fear of missing out on expectancies towards Internet-communication applications in the development of symptoms of an Internet-communication disorder. The results suggest that psychopathological symptoms predict higher fear of missing out on the individual's Internet-communication applications and higher expectancies to use these applications as a helpful tool to escape from negative feelings. These specific cognitions mediate the effect of psychopathological symptoms on Internet-communication disorder. Our results are in line with the theoretical model by Brand et al. (2016) as they show how Internet-related cognitive bias mediates the relationship between a person's core characteristics (e.g., psychopathological symptoms) and Internet-communication disorder. However, further studies should investigate the role of the fear of missing out as a specific predisposition, as well as specific cognition in the online context.

1. Introduction

Today, the Internet is used by approximately 3.7 billion people all around the world (InternetWorldStats, 2016). Especially the multitude of Internet-communication applications and social networking sites (SNS) – such as Facebook, WhatsApp, Twitter, and Instagram – as well as the extremely widespread use of smartphones represent opportunities for users. Such applications and platforms allow users to construct an individual profile; to share personal information, photos, and videos; to stay in contact with distant friends; and to stay informed about ongoing events (Amichai-Hamburger & Vinitzky, 2010; Kuss & Griffiths, 2011). Past research indicates different motives and expectancies of Internet-communication users such as meeting social needs, regulating negative emotions, and getting positive feedback from others (Krämer & Winter, 2008; Neubaum & Krämer, 2015). Nadkarni and Hofmann (2012) define the user's need to belong and the need for self-presentation as two basic social needs associated with Facebook use. Other social factors, for example group identification, collective self-esteem, or keeping in touch with friends, seem to be additional motives for participating in SNS (Floros & Siomos, 2013: Kuss & Griffiths, 2011). These socially related motives have a significant effect on repeated Facebook use and could be integrated into the Uses and Gratification Approach by Katz, Blumler, and Gurevich (1974). Furthermore, it has been found that the feeling of being socially isolated, having a higher level of shyness, and having feelings of anxiety in social interactions are positively correlated with spending more time on SNS (Ryan & Xenos, 2011). Accordingly, SNS are frequently used as an environment for shy and/or lonely people to interact with other individuals. In this context, it becomes easier to gratify social needs online than via offline communication (Banjanin, Banjanin, Dimitrijevic, & Pantic, 2015; Bhagat, 2015; Jin, 2013; Steinfield, Ellison, & Lampe, 2008).

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Despite the positive opportunities of the above-mentioned services, such as SNS or instant messenger, there is a small but significant amount of people who report negative consequences in everyday life, which could be ascribed to their excessive and time-consuming use of the Internet in general or Internet-communication applications in particular (e.g., Griffiths, 2000; Kuss & Griffiths, 2011; Young, Pistner, O'Mara, & Buchanan, 1999). The ubiquity of Internet-based cell phones (smartphones) and other handheld devices is an important factor in this behavior, given that most mobile devices allow people to have permanent access to their online social networks and Internet-communication applications. This constant access makes it possible to communicate/interact with others at any place and any time and can lead to compulsive checking behaviors and excessive engagement (Choi et al., 2015; Montag et al., 2015). Several studies have addressed similarities between substance-use disorders and behavioral addictions, and in particular between substance-use disorder and specific Internet-use disorders, such as Internet-communication disorder (ICD; Brand, Young, & Laier, 2014; Brand, Young, Laier, Wölfling, & Potenza, 2016; Kuss & Griffiths, 2011; Wegmann & Brand, 2016). Similarly to cases of behavioral addiction, individuals suffering from Internet-use disorder show symptoms such as loss of control, relapse, withdrawal, tolerance, preoccupation, neglect of interests and negative consequences in social, academic, and personal life (Griffiths, 2005; Spada, 2014). There is an ongoing debate about the classification of addictive behavior and about the parallels between substance-use disorders and behavioral addictions. Several authors recommend that research about behavioral addictions should be based on theoretical considerations instead of merely investigating the similarities between substance and non-substance-use disorders (Billieux, Schimmenti. Khazaal. Maurage, & Heeren, 2015; Brand et al., 2016). Davis (2001) offered one of the first theoretical models, which differentiates between a generalized and a specific type of Internet-use disorder. He also suggested several predictors of the development and maintenance of Internet-use disorder. Some years later in which new technologies and applications have been delivered, Brand, Young, et al. (2014) and Dong and Potenza (2014) have described two new theoretical models illustrating the mechanisms of Internet-use disorder (Brand, Young, et al., 2014) or Internet-gaming disorder, specifically (Dong & Potenza, 2014). Both models are based on the model by Davis (2001), but integrate several new elements. The recently suggested I-PACE model (I-PACE stands for Interaction of Person-Affect-Cognition-Execution; Brand et al., 2016) is a revision of the model by Brand, Young, et al. (2014) and includes several reflections on the model by Dong and Potenza (2014), as well as recent empirical evidence. The I-PACE model illustrates the different levels of the addiction process and is useful for understanding the development and maintenance of specific Internetuse disorders, including but not limited to Internet-gaming disorder. This model is a process model emphasizing the interaction of several of a person's core characteristics and cognitive, affective, and executive processes. It includes the following key components: The first level of the model describes the person's core characteristics, such as personality factors (e.g., impulsivity and low conscientiousness), social cognitions (e.g., loneliness and perceived lack of social support), psychopathological symptoms (e.g., depression and social anxiety), as well as biopsychological factors. Additionally, specific predispositions and motives for using certain Internet applications play an important role in the onset of the addiction process. The second level of the model includes mediating and moderating variables supporting the user's choice to use a specific Internet application for the purpose of gratification and mood management. These could be coping styles, Internet-related cognitive biases as well as affective and cognitive responses similar to those that have already been reported for other addictive behaviors and substance-related disorders (e.g., cue-reactivity, craving, urge for mood regulation, and attentional bias; Boyer & Dickerson, 2003; Lorenz et al., 2012; Potenza et al., 2003; van Holst, van den Brink, Veltman, & Goudriaan, 2010). The experience of gratification reinforces the individual's mediating and moderating factors and also the user's motives for using the application. Therefore, the individual decides to use the specific application more often, leading to a type of reinforcement circle and resulting in an addictive use of Internet-communication applications (for a more detailed overview of the model and a review of the underlying empirical studies, see Brand et al., 2016).

In the current study, we transferred some of the main hypotheses of the I-PACE model to ICD. A central aspect of this model are Internetrelated cognitive biases, such as the expectancies of some users that certain applications are optimal and convenient for gratifying their current needs and desires. Transferring these theoretical ideas to ICD. the repeated and excessive use of SNS and other Internet-communication applications becomes more likely if an individual develops the expectancy that communication applications are the best way to regulate current mood or emotion, to experience pleasure or to distract him or herself from problems in daily life. This has already been shown in previous studies emphasizing that the effect of a person's core characteristics, such as depression and social anxiety, is partially mediated by specific cognitions such as individual's Internet-use coping style and self-regulation expectancies, abilities (Wegmann & Brand, 2016; Wegmann, Stodt, & Brand, 2015). In addition to the effect of specific cognitions, social aspects also play a major role in the development and maintenance of an ICD (Andreassen, 2015; Omar & Subramanian, 2013; Wegmann & Brand, 2016).

Overall, we assume that a person's core characteristics, such as psychopathological symptoms, have an effect on the development and maintenance of an ICD but that this effect is mediated by specific cognitions. This argumentation is directly derived from the I-PACE model. We specify these cognitions as expectancies to experience pleasure or to avoid negative emotions when using Internet-communication applications and as the fear of missing out on something (FoMO; Przybylski, Murayama, DeHaan, & Gladwell, 2013). The current study also discusses FoMO as a bifactorial construct and investigates the role of FoMO in the development and maintenance of an ICD in the light of other variables associated with the I-PACE model by Brand et al. (2016).

2. The Fear of Missing Out construct

Fear of Missing Out (FoMO) has been defined as "(...) *a pervasive apprehension that others might be having rewarding experiences from which one is absent* (...)" (Przybylski et al., 2013, p. 1842). The authors presented an operationalized and empirically based picture of the FoMO-phenomenon and developed a self-report questionnaire, which reflects people's fears and worries about being out of touch with experiences across their extended social environment. According to the authors, FoMO was shown to mediate the effects of certain personal characteristics (need deficits, emotional problems) on social media engagement (Przybylski et al., 2013).

The concept of FoMO is relatively new and not yet fully consolidated as a construct, and its role in the development of maladaptive use of Internet-communication applications is not yet fully understood. On an empirical level it has been shown that, on one hand, FoMO mediates the link between psychopathological symptoms and negative consequences of maladaptive use of SNS on mobile devices (Oberst, Wegmann, Stodt, Brand, & Chamarro, 2017), between motivational deficits and social media engagement (Alt, 2015), and between need deficits or emotional problems and social media use (Przybylski et al., 2013). On the other hand, FoMO was also used as a predictor and turned out to predict smartphone addiction (Chotpitayasunondh & Douglas, 2016) and emotional distress (Gil, Del Valle, Oberst, & Chamarro, 2015). On a theoretical level, the construct of FoMO is usually described and assessed in an online context, but neither its definition nor the items of the FoMO scale (except one) refer to online behavior (for example Gil et al., 2015; Przybylski et al., 2013).

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