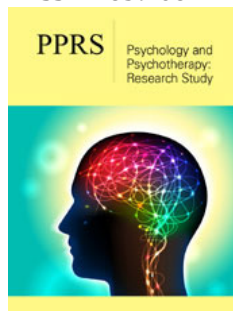


Nomophobia and FOMO Syndrome: Are they 21st Century Occupational Diseases?

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Abstract

Technostress is a negative psychological state of the worker. Its appearance is related to the use of information and communication technologies, or the threat of using these technologies in the future. Technostress appears due to the worker's inability to manage new information and communication technologies healthily. Thus, the worker may perceive a mismatch between the need to use new technologies in his job and the resources, skills, or time available to him to satisfy that demand. This can end in a negative psychological state and subsequent illness. However, the current context forces the worker to learn to deal with new technologies that are also always being renewed. So much so, that we can find the opposite phenomenon to the lack of adaptation: addiction to these new technologies. This techno-addiction can manifest itself in two recent illnesses discussed in this article: nomophobia and FOMO syndrome.

Keywords: Nomophobia; FOMO syndrome; Occupational diseases; Psychological state; Subsequent illness

Introduction

According to the WHO constitution states, «Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity» [1]. An important implication of this definition is that mental health is more than just the absence of mental disorders or disabilities. In current and recent times, with technological development and especially with the COVID-19 pandemic, new ways of working have appeared [2]. They have brought new emerging risks, among which techno-stress stands out as the main psychosocial risk [3]. Internet, smartphones, apps, email, instant messaging applications, social networks, computers, tablets. All of them are concepts already standardized and assimilated into our society. Information and communication technologies (hereinafter ICTs) are already part of our private and public lives [2]. When we talk about new technologies, the first thing to keep in mind is that these are not synonymous with computing, but refer to technological advances, programs, applications, etc., with communication being the fundamental basis [4]. The new technologies have brought about a revolution in the world of prevention, since, at present, most of the non-traumatic pathologies suffered by workers are related to the techno-stress caused by the excessive use made of them, both outside and within the working day. Through mobile devices, many workers are «connected» 24 hours a day and are not aware of the health risks that this type of behaviour entails. Given this situation, it is very difficult to discern which pathologies derive from professional activity and personal life [5]. Given this reality, organizations need to address the risks of technological innovations to prevent their impact [6].

In recent decades, significant technological advances have taken place in the workplace, which have transformed the way many people carry out their tasks [7]. The effects of these changes on occupational safety and health have also been notable: in some cases, more traditional hazards and risks have been reduced or eliminated, for example through industrial

automation, but new technologies have also created new risks or emerging risks [2,3,5]. The changes generated by new technologies require prevention and advice to avoid damage and unwanted negative effects on both organizations and workers. The introduction of new information and communication technologies in all areas has generated different forms of communication, relationship, information, learning, and, of course, work [4]. Everything seems to be advantageous. However, there are also drawbacks of which we are now beginning to be aware. The adaptive changes that these new technologies entail have brought with them serious and important risks and consequences, both for the workers and for the companies in which the workers work.

Thus, these changes imply very negative consequences for workers [8]: poor performance at work, lack of concentration, tension and visual fatigue, stress and anxiety, inadequate postures, problems in the family and social environment, addiction, and the need to be permanently connected, loss of hours of sleep with its corresponding consequences, work accidents, etc., in short, a loss of healthy habits. Thus, these changes imply very negative consequences for companies [9], in the form of sick leave, absenteeism, or reduced work performance due to insufficient or inappropriate use of new technologies. Technostress is one of the newest risks due to the use and utilization of new technologies, manifested in two ways, either by maladjustment or rejection or by total dependence. It can be said that technostress is a specific form of work stress related to the use of ICTs [10]. Technostress is a general term that encompasses other problems that start from the same root. It is not a new concept. Craig Brod defined technostress in 1984: he said that it was a disease of modern adaptation, caused by the inability to deal healthily with new computer technologies [11]. On the one hand, the worker's maladjustment to new technologies or the worker's mistrust of new technologies can cause techno-anxiety (or technophobia), which is the most common type of technostress, or it can also cause techno-fatigue (or computer fatigue syndrome), which is fatigue and mental exhaustion due to the continued ICT use of [3].

On the other hand, however, we have disorders caused by addiction [12]. We are talking about the compulsive and uncontrollable need of the worker for ICTs. Here they would be:

- a. Techno-addiction: This is a compulsive and uncontrollable need to use always ICTs, beyond the work environment and for long periods. This behavior has a very negative influence on the person, leading to obsessive-compulsive behavior.
- b. The FOMO syndrome: This is the feeling of missing something. It is a disorder produced by the advancement of technology and the number of options that are presented, the need to be continuously connected, and aware of everything that happens on the networks.
- c. Nomophobia: This is the irrational fear of leaving home without a mobile phone.

These last two, Nomophobia and FOMO syndrome, will focus on this article. Besides, there are techno-stressors [13] known as windows syndrome, digital amnesia, email apnea or intoxication, among others. Personal characteristics and skills are basic when it comes to dealing with the requirements posed by new technologies. It does not affect all groups equally. Certain people perceive the labor demands posed by ICTs as a stimulating and motivating challenge. Others, on the other hand, either for reasons of character or lack of knowledge, are not (or do not think they are) capable of coping with these demands, which makes them more vulnerable to techno-stress.

Materials and Methods

The advancement of technology has brought the possibility that we are permanently connected to what other people are doing. It causes social anxiety and fear of missing out on opportunities, fear of missing out on experiences, and even fear of missing out on information. The desire to be accepted by other individuals and not feel excluded as a social entity is a proven psychological need. This need is fueled by the fact that we are connected 24 hours a day, 7 days a week; it influences the psychological health of people. Besides, there is the personal sphere. We live in the year 2022. People look for a partner online and break up with them using WhatsApp, they have conversations with many strangers and every detail (images, videos, or comments) of their lives are posted on social networks. And this is a problem that occurs more frequently among young people and especially adolescents. When this common thread of social relations is cut, anxiety arises, nervousness arises, tachycardias arise, headaches and stomach aches arise, resistance to stress arises, obsessive thoughts arise and even attacks arise. of panic. All of them are typical of a situation of dependency or a situation of addiction. This article has been written in Spain. The data provided by the Spanish National Institute of Statistics reveal that 96% of families have at least one mobile phone [14] and that 77% of people who access the Internet do so through this electronic device [15] that for many have become something more than indispensable: an addictive focus that is generating a new cast of disorders linked to its use.

The most important of them all is nomophobia. Nomophobia is a recent disorder that arises in the 21st century, derived from globalization and the technological advances that we have experienced in the field of communication. Its name comes from the acronym "no-mobile-phone phobia" [16]. This disorder is defined as the fear of not being in contact with a mobile phone or smartphone [17]. In other words, nomophobia is the irrational fear that many users feel of not having a mobile phone, either because they have left it at home, the battery has run out, they are out of coverage, they have used up the balance, they have stolen or simply damaged. This term was coined as a result of a study carried out by the British Post Office (Royal Mail), commissioned to the You Gov polling institute to assess the level of anxiety that users of mobile phones suffer [18]. If the statistics determine that the owners of these devices carry out some activity with them an average of 34

times a day, the aforementioned study concludes that 58% of men and 48% of women feel panic when thinking about the possibility of not having their mobile phone, to which we must add 9% of users who get stressed just by having to keep them turned off [19]. More than half justify their nomophobia due to the isolation caused by not being able to contact or talk to their friends or relatives, and 10% attribute their addiction to work needs, which forces them to be located permanently [20].

We use these devices daily to communicate, get information, watch videos, listen to music, take photos, and a host of other things, anytime, anywhere. We have information and communication just a click away, making our lives easier and more practical. Each year the number of people who own smartphones increases: it is currently estimated that 3.8 billion people are users of these devices [19]. However, this accepted daily use in our society also has its negative consequences. Precisely, nomophobia is one of the main and most problematic. Nomophobia has also been shown to cause the development of other mental or personality disorders, as well as self-esteem problems, seriously affecting people's happiness, especially in the younger population [21]. All this has a great impact on the general health of the person, in addition to hurting other aspects of life such as study and work by creating a strong dependence on mobile phones, causing constant distractions and the inability to maintain concentration. At a social level, it has been shown to affect relationships and interactions between individuals, producing a distance and isolation from the physical world [22]. Therefore, it is important to stop the problem as soon as possible. To stop it, we have to start a mobile phone addiction treatment to minimize the consequences [23].

Nomophobia is not yet considered a pathology or a behavioral disorder. However, nomophobia is a consequence of an addiction; Nomophobia is a consequence of excessive use of the mobile phone, generally for all kinds of activities except for talking. And the most curious of all: this dependency leads to social isolation with close people: the relationship with other people a nomophobic makes it through WhatsApp, through social networks, through online games, etc. Thus, a nomophobe is easily recognizable because he is a person who constantly looks at his mobile phone to check if he has received a message; is a person who loses hours of sleep to interconnect in social networks; is a person who refuses to go anywhere where there is no coverage; he is a person who never turns off his mobile phone; He is a person who is always on the lookout for a plug to recharge the phone's battery...

As a consequence, people who suffer from nomophobia have fairly clear symptoms, with the following standing out among the identifying symptoms [19,21,24,25]:

a. Nomophobes are people who use their mobile phones abusively, spending more and more time on them. Thus, attention to the smartphone forces them to neglect other activities such as study, work, leisure, relationships with family and friends, etc.

b. Nomophobes are people who use the smartphone permanently, even in inappropriate places and situations or in places and situations where the use of the device is prohibited, or the use of the device is dangerous. In line with the previous section, nomophobes can avoid these situations of prohibition or danger to continue using the smartphone.

c. Nomophobes are people who feel anxious and nervous about losing their mobile phone. It includes the possibility of not having it nearby or the possibility of not having it available, as well as the possibility of not being able to use it due to being «out of range», due to battery depletion.

d. Nomophobes are people who have two or more devices and who also always carry a charger with them.

e. Nomophobes are people who check their mobile phones continuously to check the reception of messages or calls.

f. Nomophobes are people who keep their mobile phones permanently on (24 hours a day) and even sleep near them.

g. Nomophobes are people with few personal/physical social interactions: nomophobes prefer to communicate through new communication technologies.

h. Nomophobes are people who repeatedly try to control their smartphone use, or who try to at least reduce their mobile phone use.

i. Nomophobes are people who get into debt or spend a lot of money on the use of mobile phones.

j. Nomophobes are people who have a symptomatic state according to the symptoms expressed above: agitation, irritability, anguish, disorientation, and frequently, physical symptoms such as tachycardia, tremors, or respiratory disorders, among others.

Addiction to social networks and the Internet, in general, has become one of the main problems in today's young population [26]. Here comes the phenomenon of FOMO syndrome. FOMO is an acronym of English that means "Fear of Missing Out". It means fear of missing something, fear of letting something go, or simply the fear of being absent. This syndrome is recognized by psychologists. FOMO syndrome is related to the anxiety produced by the fear of missing out on a social event or any other experience (that the patient considers positive), especially the type of activities that you find out about via social networks [27]. It is a psychological pathology produced by the development of the Internet and the advancement of technology. This apprehension of thinking that you could be living rewarding experiences from which the user is absent is on the rise and can become a worrying psychological burden. FOMO syndrome refers to the irresistible need of the worker to be continuously connected to the Internet and to actively participate in social networks [26]. So, the different platforms that exist today to establish live and direct contact, play a crucial role in the development of addictions to mobile phones or even to video

game consoles that allow online interaction with other players. The phenomenon of FOMO syndrome acts in such a way on the person that they begin to use digital platforms excessively, driven by the fear of being excluded and missing out on experiences. The desire to stay constantly connected and compulsively check social networks arises. Being this, the first thing to consult when waking up and the last thing before going to sleep. In this way, the use of networks covers the main daily activities of the person, giving rise to a problematic routine [28,29]. Misuse of social networks or problematic use of social networks occurs when the person uses them to relieve some discomfort such as stress, loneliness, or depression. The person tends to get more and more involved since social networks provide a series of rewards and comfort, experiencing a sense of self-efficacy, belonging, and satisfaction. Thus, real relationships begin to be ignored, changing them for daily virtual interaction [30].

There is a more or less marked pattern among people who suffer from FOMO. It is usually about people who have low self-esteem, who feel that they are inferior to other people and that they do not value themselves. They are people who have a bad relationship with social networks and who spend a large part of their time on them and can develop a disorder if it becomes an addiction. In all this context, one last factor is added and that is the feeling of loneliness. People who feel lonely need to increase their social life by using social networks, which makes them prone to FOMO. Dr. Andy Przybylski investigated the ability of more than 2,000 participants to switch off smartphones [31]. Dr. Przybylski discovered that FOMO syndrome is more intense among young people and in particular among young men. The lower the level of social satisfaction, the higher the FOMO intensity. The individuals who give more value to social networks and more time occupying them in their lives, develop FOMO. In other words, the greater the use of the mobile, the greater the degree of FOMO; the fear of missing out on experiences feeds back into their desire to use the mobile phone more frequently to feel connected and satisfy unsatisfied psychological needs. This leads to problematic and abusive use of technology triggering the need for smartphone addiction treatment [31].

Dr. Przybylski's investigation focused on the consequences it can have on mental health, being able to produce depression or anxiety among people who suffer from it. In fact, this phenomenon, which occurs in social networks of trying to show how you want to be and not how you are, generates the perception that life is free of inconveniences, that problems do not exist, and that it is always interesting and attractive. It causes a large part of the population, especially in young people, that their social identity is formed through this mirage, which seriously harms health and ends up having psychological consequences over time.

Thus, a patient suffering from FOMO syndrome can be located when:

- a. The person makes greater use of the mobile phone because there is an increased fear of missing out on other

experiences.

- b. There is a significant decrease in emotional well-being in the person.
- c. There is stress associated with negative experiences with other users on social networks.
- d. On the one hand, there is a feeling of insecurity and even irritation in face-to-face activities in real life and, on the other hand, more dependence on virtual interactions.
- e. The person suffers from anxiety, a feeling of loneliness, or a feeling of abandonment, shows a feeling of exclusion due to lack of participation.

Finally, we have to be clear about the consequences of suffering from the FOMO syndrome [30]. The tendency to excessively use electronic devices is one of the main consequences. The permanent revision or the obsessive update of the different social networks, to know the activity of others or constantly document one's own life is also another consequence of the FOMO syndrome. Thus, academic motivation decreases in students and work motivation in workers: a person suffering from FOMO focuses all their attention on virtual interaction. Self-esteem and self-concept problems also appear in these people [32]: there is a constant comparison between one's own life and the life that other people reflect on social networks. It can lead to very serious personal image problems. In fact, these people come to have expectations in social networks of relief or attenuation of their discomfort, achieving this only momentarily and in the short term. It can cause anxiety. In addition, a FOMO person usually has problems with personal initiative or with relating to other people in real life. This last aspect is especially important in adolescents [33] because they are in the stage of greatest effort to determine their personal identity and personal autonomy. In response to this new reality, psychology professionals have to launch rehabilitation programs against addiction to new technologies. These programs must aim to teach addicted people to increase their real social activities and develop strategies to solve problems related to new information and communication tools.

It requires a flexible approach adapted to the characteristics of each person, which is based on clinical evidence and combines three elements:

- a) Individual therapy, where the role of technology in a person's life is explored and tools are provided so that the Internet is no longer the center of a person's life. Other therapies such as cognitive-behavioral therapy, relaxation, and/or Mindfulness are also used.
- b) Technological hygiene, where new skills are taught to interact with the Internet more healthily and efficiently.
- c) Skills for real life and health. Internet addiction makes the affected person neglect their diet, stop playing sports and alter their sleep patterns, so it is essential to teach new personal care habits that break the vicious circle of addiction.

Conclusion

With social networks we have the possibility of being aware of the activities carried out by the people we follow, exposing all those situations that we could be doing at a precise moment. It happens that we are spectators of endless options that we cannot cover and we end up developing the perception that others are having better experiences than ours. The feeling that our life is less interesting than that around us, completely losing contact with reality and entering the false game of imagination, assumptions, and interpretation, is very harmful to our emotional health. The use of mobile phones has spread to all age groups and it is common to see children who still do not know how to walk handling their parents' smartphones perfectly. However, our children do not have enough (brain and behavioral) maturity to be able to make rational use of mobile phones, so in many cases, these behaviors lead to addictive behaviors. A lot of children (girls and boys interchangeably), just like adults, are not able to control their use of smartphones, letting themselves be carried away by the need to be «always connected» to social networks or instant messaging. As more time is spent, they are observed neglecting their studies, relationships with their friends, and disobeying their parents. The mobile phone, by itself, is not a harmful tool. Their functions can provide support in different areas of the person, both professionally and academically. However, it is important to determine the risk situations to correct the maladaptive use of digital platforms, as well as to increase strategies and social skills, and self-esteem.

In other words, he is not able to disconnect from the electronic world that has been built because for him it means not to exist, which gives its name to other disorders related to mobile phone dependence and FOMO syndrome. The treatment of problems due to abusive use of the mobile begins with the evaluation of the nature of the problem and the difficulties associated with it. The treatment must address the proper use and promotion of the child's protective factors (promotion of self-esteem and the ability to solve problems, training in social skills and emotional intelligence; use of free time...) In this way, both the child and his family learn to make good use of new technologies. As in the rest of the preventive activity, it is necessary to evaluate the level of risk to which the workers are exposed and, based on this information, plan and implement a series of preventive measures to minimize or eliminate the risk, adapting the technologies of information and communication to the requirements and skills of each worker; to grant them sufficient autonomy and control over the tasks they must perform, in short, putting technology at the service of the worker. Appropriate training and information are crucial for workers to strengthen their skills and competencies in the use of information and communication technologies while developing proactive attitudes and abandoning initial misgivings. Attending specific training courses on the use of technology is one of the prevention strategies par excellence, as it allows us to deal with technological change.

A good design of the job, in which this technology is going to be implemented or innovated, generates a healthy job, turning technology into a powerful instrument to enrich

personal interaction and fostering the feeling of belonging while reinforcing the organization's culture. Nowadays, information and communication technologies are practically essential means in the work environment and their profitable use is a priority factor for the competitiveness of companies, as long as these tools can fulfill in an ideal way its function, which is to optimize the performance of tasks. Information and communication technologies have brought many advantages to business development, being a key factor not only in that economic development but also in work-life balance (family, flexibility, mobility when working, saving time, etc.). Information and communication technologies are currently seen as an occupational risk factor and not so much as another means of making workers aware of taking preventive measures to avoid health problems or accidents in their daily work. We must find a balance between the benefits and contraindications of information and communication technologies.

The treatment of problems due to abusive use of the mobile begins with the evaluation of the nature of the problem and the difficulties associated with it. The treatment addresses the proper use and promotion of the child's protective factors (promotion of self-esteem and problem-solving ability, training in social skills and emotional intelligence, use of free time...) In this way, both the child and their family learn to make good use of new technologies. In the particular case of nomophobia, cognitive-behavioural psychotherapy is one of the most widely used methods in the treatment of addiction to new technologies and the Internet and has proven its effectiveness for this type of disorder. In this case, it is a brief therapy that includes structured sessions and specific objectives where both the patient and the therapist have active roles. Some of the objectives that we should focus on are reducing the time spent on the mobile phone, online connections, distraction strategies, improving face-to-face relationships, and doing other activities to replace the time spent on the mobile such as, for example, doing sports. To achieve this, we will work on the catastrophic interpretations of possible events that the patient may think of what would happen if they were without a mobile phone for a long period. We will also focus on the conditioning of the fears that he may have and on the behaviours to avoid them. For all this, the use of diaries is essential: in them, patients record data about their daily use of the mobile phone. Thus, with this type of therapy, an attempt will be made to increase the person's ability to concentrate on their behaviours, making them aware of how much time they spend using the telephone, for what reasons they do so, and what activities or situations they are no longer enjoying and sharing for that need to be connected.

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