



Social Media Addiction on Health-Related Risk-Taking Behaviors through Social Comparison among Young Adults

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Abstract: Social media addiction, social comparison, and health-related risk-taking behaviors have emerged as increasingly interconnected phenomena in the lives of young adults. Excessive and compulsive use of social media platforms often fosters frequent social comparison, which in turn can shape how individuals perceive, monitor, and respond to their own health. These dynamics have raised growing concern among researchers and mental health professionals, given their potential to influence anxiety-driven health behaviors in the digital age. The current study aimed to understand the relationship between Social Media Addiction, Social Comparison, and Health-Related Risk-Taking Behaviors among Young Adults. In an age where social media platforms have become deeply embedded in everyday life, constant exposure to curated and idealized content increasingly shapes how young adults evaluate themselves and their health. A sample of 70 young adults was taken to examine the relationship. Standardized scales were used for each variable, including the Bergen Social Media Addiction Scale, the Cyberchondria Severity Scale, and the Iowa-Netherlands Comparison Orientation Measure. The findings showed a significant positive correlation between Social Media Addiction and Health-Related Risk-Taking Behaviors, revealing that higher levels of social media addiction are associated with greater engagement in health-anxiety-driven online behaviors. Moreover, Social Media Addiction showed a significant positive relationship with Social Comparison, and Social Comparison, in turn, showed a significant positive relationship with Health-Related Risk-Taking Behaviors, together suggesting that young adults who compare themselves more frequently with others online are also more prone to compulsive, anxiety-driven health-related searching. The study did not find a significant

relationship between two specific components, Excessiveness and Reassurance, revealing that excessive health-searching and reassurance-seeking behavior may function independently of one another among young adults. The study suggests that more research be conducted in this field by taking a much larger sample and testing the mediating pathway through formal statistical modeling, along with a need for digital wellness interventions and mental health awareness programs that help young adults build healthier, less comparison-driven relationships with social media and their own health.

Keywords: *Social Media Addiction, Health-Related Risk-Taking Behaviors, Social Comparison, Young Adults*

1. Introduction

"We are what we repeatedly do."

~Aristotle

In the digital age, what young adults repeatedly do is scroll, compare, and seek validation, often without realizing the psychological toll it takes. *"Digital addictions are not merely personal failures but structural outcomes."* These words, echoed in India's Economic Survey 2025–26, captures the growing national concern around excessive digital engagement among the youth. The survey flagged rising digital addiction and screen-related mental health disorders as a significant public health threat, noting that internet and smartphone usage is now near-universal among individuals aged 15–29 as internet connections jumped from 250 million in 2014 to nearly 970 million in 2024, with mobile and internet use almost universal among the 15-29 age group. Social media, once a tool for connection and communication, has today become deeply embedded in the everyday psychological functioning of young adults shaping how they perceive themselves, their health, and their worth in comparison to others.

Social media platforms are no longer passive spaces for interaction; they have become arenas of constant self-evaluation. Social validation and comparison through likes, shares, and follower counts drive repetitive checking behavior and anxiety, particularly among adolescents and young adults, while the fear of missing out fuels compulsive engagement with these platforms. Over time, this pattern of excessive, compulsive engagement crosses into what researchers' term social media additional behavioral addiction marked by preoccupation, mood modification, tolerance, withdrawal, conflict, and relapse (Andreassen, 2015). Indian data reflects

this growing concern as well: nearly 36.9% of college students in India exhibit addiction-related behaviors connected to anxiety, poor sleep, and decreased academic performance, while globally, addiction affects approximately 18.4% of students worldwide, with higher percentages reported across Asia.

A key psychological mechanism underlying the harms of social media lies in social comparison. Leon Festinger's Theory of Social Comparison Processes (1954) proposed that individuals possess an inherent drive to evaluate their own opinions and abilities, and in the absence of objective standards, they do so by comparing themselves to others. Social media platforms, by design, provide an abundant and constant supply of comparison targets curated, idealized portrayals of others' bodies, lifestyles, and health choices (Vogel et al., 2014). Repeated exposure to such content can distort young adults' self-perception, particularly regarding their own health and physical adequacy, prompting behaviors aimed at closing this perceived gap.

This is where health-related risk-taking behavior enters the picture. As individuals increasingly turn to the internet not just to compare themselves but to seek validation or resolution for health-related insecurities, patterns of excessive online health-searching, distress, reassurance-seeking, and compulsive checking emerge a phenomenon known as cyberchondria (Starcevic & Berle, 2013). Unlike ordinary health information-seeking, cyberchondria is characterized by searches that escalate rather than resolve anxiety, often leaving individuals more distressed than before they began searching. Fergus and Spada (2017) further linked this pattern to underlying metacognitive beliefs particularly beliefs about the uncontrollability of one's own thoughts suggesting that cyberchondria is not merely a behavioral quirk but a cognitively rooted response to uncertainty, amplified by the addictive pull of digital platforms.

Taken together, these three constructs social media addiction, social comparison, and health-related risk-taking behavior appear deeply interconnected in the lives of today's young adults, yet the relationship between them remains underexplored, particularly within the Indian context. While considerable research has examined social media addiction's links to self-esteem, depression, and body image, comparatively little empirical work has directly examined how addictive social media engagement, through the mechanism of social comparison, may translate into compulsive, anxiety-driven, health-related online behavior.

The current research seeks to examine the relationship between Social Media Addiction, Social Comparison, and Health-Related Risk-Taking Behaviors among young adults, addressing

a gap in the literature concerning the psychological pathways through which everyday digital habits may quietly compound into anxiety-driven health behavior, and contributing to the broader, urgent conversation on youth mental health and digital wellbeing in India.

1.1 Social Media Addiction

Social Media Addiction refers to “a pattern of excessive and compulsive social media use marked by six core features: salience, mood modification, tolerance, withdrawal, conflict, and relapse” (Andreassen et al., 2012). Social Media Addiction refers to “a behavioral pattern in which an individual exhibits symptoms such as preoccupation, tolerance, withdrawal, escape, and conflict in relation to social media use, paralleling the diagnostic criteria used for other behavioral addictions” (Van den Eijnden et al., 2016).

Purba et al. (2023) conducted a systematic review and meta-analysis to examine the association between social media use and health risk behaviors among adolescents aged 10–19 years. The review included 126 studies, comprising a total sample of 1,431,534 adolescents, of which 73 studies were included in the meta-analysis. The researchers examined various dimensions of social media use, including frequency and duration of use, as well as exposure to health risk behavior-related content, and their associations with alcohol use, tobacco use, drug use, electronic nicotine delivery system use, unhealthy dietary behavior, physical inactivity, gambling, antisocial behavior, sexual risk behavior, and multiple health risk behaviors. The findings indicated that frequent social media use was significantly associated with increased odds of alcohol consumption, tobacco use, drug use, gambling, antisocial behavior, sexual risk behaviors, and engagement in multiple health risk behaviors.

Additionally, adolescents exposed to social media content depicting health risk behaviors were more likely to engage in unhealthy dietary behaviors, alcohol use, and electronic nicotine delivery system use, with user-generated content showing stronger associations than marketer-generated content for alcohol consumption. Although evidence for causality remained limited due to the predominance of observational studies, the review concluded that social media use is consistently associated with a range of adverse health risk behaviors among adolescents, highlighting the need for interventions targeting harmful social media exposure and promoting healthier online environments.

Ilakkuvan et al. (2018) investigated patterns of social media use among young adults and examined their relationship with health-risk behaviors and mental health outcomes. Using a

national sample of 1,062 individuals aged 18–24 years, the authors identified five distinct social media user profiles: Low Users, High Users, Professional Users, Creative Users, and Mainstream Users. The findings revealed significant differences among these groups regarding alcohol, tobacco, and other drug (ATOD) use, as well as depressive symptoms. Specifically, Creative Users were more likely to engage in substance use but reported lower levels of depressive symptoms compared to High Users. Mainstream Users demonstrated greater involvement in socially accepted substances such as alcohol and hookah, whereas Professional Users showed higher odds of alcohol, cigarettes, and cigar use. Low Users were found to have higher odds of using illicit substances, including cocaine and heroin. The authors concluded that social media use patterns are significantly associated with health-risk behaviors and depressive symptoms among young adults, highlighting the importance of considering platform-specific use when designing health promotion and risk-reduction interventions.

Sümen and Evgin (2021) examined the relationship between social media addiction, sleep quality, and psychological problems among high school students during the COVID-19 pandemic. Using a cross-sectional correlational research design, the study included 1,274 high school students from 15 schools in southern Turkey. The researchers assessed social media addiction, psychological difficulties, prosocial behaviors, and sleep quality using standardized self-report measures and employed path analysis to examine the relationships among these variables. The findings revealed that higher levels of social media addiction were significantly associated with greater emotional problems, conduct problems, attention deficits, peer problems, poorer sleep quality, and lower sleep efficiency. Additionally, students experiencing greater psychological difficulties reported higher levels of social media addiction, whereas prosocial behaviors were found to reduce the likelihood of social media addiction. The study further demonstrated that increased social media addiction negatively affected sleep efficiency, although its direct effect on overall sleep quality was not statistically significant in the path model. The authors concluded that excessive social media use is associated with adverse psychological and sleep-related outcomes among adolescents and emphasized the importance of interventions promoting healthy social media use, psychological well-being, and sleep hygiene to support adolescent health.

1.2 Health-Related Risk-Taking Behaviors

Health-Related Risk-Taking Behaviors refers to “actions that depart from socially normative or health-protective conduct and have the potential to compromise an individual's

physical health, psychosocial development, or overall well-being, encompassing conduct such as substance use, risky sexual activity, and other behaviors that jeopardize health and safety” (Jessor & Jessor, 1977). Health-Related Risk-Taking Behaviors refers to “a set of preventable behaviors that contribute to the leading causes of morbidity and mortality among youth and adults, encompassing behaviors that contribute to unintentional injuries and violence, tobacco use, alcohol and other drug use, sexual behaviors related to unintended pregnancy and sexually transmitted infections, unhealthy dietary behaviors, and physical inactivity” (Kann et al., 2018).

Jahangard et al. (2019) examined the prevalence of risky and health-promoting behaviors among young adults and explored their patterns of health attitudes, health-related behaviors, and mental and physical well-being. Using a cross-sectional research design, the study included 800 undergraduate university students selected through multistage cluster sampling from two cities in Iran. Standardized self-report questionnaires were administered to assess health behaviors, substance use, dietary habits, physical activity, self-care practices, and psychological well-being. The findings revealed that 13.3% of the participants were regular smokers, 14.3% reported alcohol consumption during the previous year, and heavy drinking was common among alcohol users. Although 95% of the students reported engaging in regular physical activity, unhealthy dietary habits, including frequent fast-food and salt consumption, were highly prevalent, and only 23.9% of the participants had a normal body mass index. Additionally, self-care behaviors, such as breast and testicular self-examinations, were reported by only a small proportion of students. The study also identified the presence of several risky behaviors, including unprotected sexual activity, speeding, inconsistent seatbelt use, and low participation in preventive health screening practices. The authors concluded that despite the presence of some health-promoting behaviors, many young adults continue to engage in multiple health-risk behaviors. They emphasized that improving health literacy and implementing comprehensive health promotion programs are essential for encouraging healthier lifestyle choices and reducing risky behaviors among university students.

Hoyt et al. (2012) examined the prospective relationship between positive well-being during adolescence and health outcomes in young adulthood. Using a longitudinal research design, the study analyzed data from the first three waves of the National Longitudinal Study of Adolescent Health (Add Health), comprising a nationally representative sample of 10,147 adolescents in the United States. The researchers investigated whether positive well-being during adolescence predicted perceived general health and engagement in risky health behaviors during

young adulthood while controlling for depressive symptoms, baseline health, demographic characteristics, and prior health-risk behaviors. The findings revealed that adolescents with higher levels of positive well-being were significantly more likely to report better perceived general health and significantly less likely to engage in risky health behaviors in young adulthood. Specifically, greater positive well-being was associated with lower participation in behaviors such as physical inactivity, frequent fast-food consumption, binge drinking, cigarette smoking, marijuana use, and illicit drug use. Furthermore, positive well-being remained a significant predictor of favorable health outcomes even after controlling for depressive symptoms, indicating that positive psychological functioning contributes independently to long-term health. The authors concluded that promoting positive well-being during adolescence may serve as a protective factor against future health-risk behaviors and recommended incorporating positive youth development strategies into health promotion programs to enhance long-term physical and psychological well-being.

Larson et al. (2015) examined the association between sports and energy drink consumption and health-risk behaviours among young adults in the United States. Using a cross-sectional research design, the study analyzed data from 2,287 young adults (55% female; mean age = 25.3 years) who participated in the third wave of the Project EAT (Eating and Activity in Teens and Young Adults) study. The researchers investigated the relationship between weekly consumption of sports and energy drinks and a range of health-related behaviours, including dietary habits, physical activity, media use, weight-control behaviours, sleep patterns, and substance use. The findings revealed that approximately one-third of participants consumed sports drinks and nearly one-fifth consumed energy drinks at least once per week. Weekly sports drink consumption was significantly associated with higher intake of sugar-sweetened beverages and fruit juice, greater video game use, binge drinking, and the use of muscle-enhancing substances among both men and women. Similarly, weekly energy drink consumption was associated with less frequent breakfast consumption, higher intake of sugar-sweetened beverages, increased video game use, unhealthy weight-control behaviours, sleep difficulties, cigarette smoking, binge drinking, and other substance use. These associations remained significant after controlling for sociodemographic characteristics and sensation-seeking behaviour. The authors concluded that sports and energy drink consumption tends to cluster with multiple health-risk behaviours among young adults and emphasized the importance of developing comprehensive health promotion

interventions that address unhealthy dietary practices, substance use, sleep habits, and other related risk behaviours.

1.3 Social Comparison

“Social Comparison refers to the process by which individuals evaluate their own opinions and abilities by comparing themselves with others, particularly when objective standards for self-evaluation are unavailable” (Festinger, 1954). Social Comparison refers to “a relatively stable individual's tendency to attend to and compare one's own standing, abilities, opinions, or attributes with those of other people as a means of self-evaluation” (Gibbons & Buunk, 1999).

Le Blanc-Brillon et al. (2025) examined the relationship between social media use, social comparison, and mental health among young adults. Across two studies involving 552 participants, the researchers investigated whether upward and downward social comparisons mediated the association between social networking site (SNS) use and self-esteem, as well as depressive symptoms. The findings revealed that greater use of Instagram and Facebook was associated with increased exposure to upward social comparisons, which in turn predicted lower global and physical self-esteem and higher depressive symptoms. Furthermore, upward social comparisons emerged as a significant mediator between SNS use and mental health outcomes, whereas downward comparisons showed limited influence. The study also found that the perceived extremity of upward comparisons negatively affected self-esteem and positively influenced depressive symptoms. These findings highlight the critical role of social comparison processes in explaining how social media use affects psychological well-being among young adults and suggest that reducing harmful upward comparisons may help mitigate the negative mental health consequences associated with social media use.

Samra, Warburton, and Collins (2022) examined the relationship between problematic social media use (PSMU), social comparison, and depression among young adults. Using a two-part correlational research design, the study included 144 participants, primarily undergraduate students in Australia. Participants completed standardized self-report measures assessing problematic social media use, depression, self-esteem, and social comparison tendencies, followed by a laboratory task in which they viewed upward and downward social comparison images from social media. The researchers investigated whether social comparison processes mediated the relationship between PSMU and depression. The findings revealed that higher levels of problematic social media use were significantly associated with greater depressive symptoms,

lower self-esteem, and a stronger tendency to engage in upward and negative social comparisons. Female participants reported higher levels of problematic social media use, were more likely to prefer upward comparison images, and compared themselves more negatively with others on social media than male participants. Furthermore, upward social comparison and negative social comparison significantly and partially mediated the relationship between problematic social media use and depression, indicating that individuals with higher levels of problematic social media use were more likely to compare themselves unfavorably with others, thereby experiencing greater depressive symptoms. The authors concluded that social comparison serves as an important psychological mechanism linking problematic social media use with depression and suggested that interventions targeting upward social comparison may help reduce the adverse psychological effects associated with excessive social media use.

Piko et al. (2024) examined the role of social comparison and online social support in social media addiction, with self-esteem and loneliness as mediating variables among university students. Using a cross-sectional research design, the study surveyed 201 Hungarian university students aged 18–30 years through an online questionnaire. The researchers assessed social media addiction, social comparison orientation, online social support, self-esteem, and loneliness using standardized self-report measures and employed structural equation modeling to examine the relationships among these variables. The findings revealed that social comparison was directly associated with higher levels of social media addiction and indirectly influenced addiction through loneliness, self-esteem, and online social support. Specifically, greater social comparison tendencies were associated with increased loneliness and lower self-esteem, both of which contributed to higher levels of social media addiction. Additionally, social comparison was positively related to online social support, which reduced loneliness but simultaneously increased the likelihood of social media addiction. The study further demonstrated that higher self-esteem served as a protective factor against social media addiction, whereas loneliness increased vulnerability to problematic social media use. The authors concluded that social comparison and online social support represent a double-edged phenomenon, as they may simultaneously provide emotional support and increase the risk of social media addiction. They emphasized the importance of promoting social media literacy and developing interventions that help individuals manage social comparison tendencies while encouraging healthier online engagement.

González-Castro et al. (2026) examined the relationship between social media use, social comparison, maladaptive emotion regulation, and mental health across different age groups and gender. Using a cross-sectional research design, the study included a nationally representative sample of 1,700 participants aged 16–75 years from Spain. The researchers assessed social media use, social comparison, maladaptive emotion regulation, anxiety, depression, and anger using standardized measures and path analysis. The findings revealed that greater social media use was associated with higher levels of social comparison, maladaptive emotion regulation, anxiety, depression, and anger. Social comparison and maladaptive emotion regulation significantly mediated the relationship between social media use and psychological distress, with younger participants, particularly Generation Z, reporting the highest levels of social media use and mental health problems. The authors concluded that the quality of social media engagement, particularly social comparison and maladaptive emotion regulation, plays a more important role in psychological well-being than screen time alone, highlighting the need for interventions that promote healthier online engagement and adaptive emotion regulation strategies.

1.4 Purpose

The purpose of this study is to explore the relationship between problematic social media use and health-related risk-taking behaviors among young adults, and to understand the role of social comparison in this association.

1.5 Hypothesis

H₁: There will be a significant relationship between Social Media Addiction and Health-Related Risk-Taking Behaviors among Young Adults.

H₂: There will be a significant relationship between Social Media Addiction and Social Comparison among Young Adults.

H₃: There will be a significant relationship between Social Comparison and Health-Related Risk-Taking Behaviors among Young Adults.

2. Methodology

2.1 Sample

A total sample of 70 young adults (35 males and 35 females), aged 18–25 years, was collected from the city.

2.2 Measures

Bergen Social Media Addiction Scale (BSMAS) was developed by Andreassen, Pallesen, and Griffiths (2017), used to measure social media addiction across six core addiction components: salience, tolerance, mood modification, relapse, withdrawal, and conflict. Items consist of 6 statements rated on a 5-point Likert scale (1 = Very rarely to 5 = Very often), with a total score ranging from 6 to 30, where higher scores indicate greater addiction severity and scores above 24 suggest a higher risk of social media disorder. The scale is unidimensional and has been validated across multiple cultures and age groups.

The Cyberchondria Severity Scale (CSS) was developed by McElroy, Shevlin, and colleagues (short form: McElroy et al., 2019), used to measure problematic and distressing online health-related searching across five core components: compulsion, distress, excessiveness, reassurance, and mistrust of medical professional. Items consist of 12 statements rated on a 5-point Likert scale (1 = Never to 5 = Always), with a total score ranging from 12 to 60, where higher scores indicate greater cyberchondria severity. The scale is multidimensional and has been validated across multiple populations and age groups.

Iowa-Netherlands Comparison Orientation Measure (INCOM) was developed by Gibbons and Buunk (1999), used to measure individual differences in the tendency to engage in social comparison with others. Items consist of 11 statements rated on a 5-point Likert scale (1 = Strongly disagree to 5 = Strongly agree), with a total score ranging from 11 to 55, where higher scores indicate a greater tendency toward social comparison orientation. The scale comprises two subdimensions of ability of comparison and opinion comparison and has been validated across multiple cultures and age groups.

2.3 Procedures

The participants were informed about the purpose of the research, and the questionnaires were filled through Google forms. Each participant was thanked for their cooperation. Standardised psychological tests were administered to the participants.

3. Analysis of Data

3.1 Results

Table 1. *N, Mean and Standard Deviation.*

	Social Media Addiction	Health-Related Risk-Taking Behaviors	Excessiveness	Distress	Reassurance	Compulsion	Social Comparison
N	70	70	70	70	70	70	70
Mean	16.4	28.5	8.37	6.93	6.39	6.83	34.7
Standard deviation	5.03	8.45	2.42	2.64	2.61	2.80	4.98

Table 2. *Correlation of all variables.*

	Health-Related Risk-Taking Behaviors	Excessiveness	Distress	Reassurance	Compulsion	Social Comparison	Social Media Addiction
Health-Related Risk-Taking Behaviors	—						
Excessiveness	0.647***	—					
Distress	0.904***	0.552***	—				
Reassurance	0.736***	0.131	0.538***	—			
Compulsion	0.917***	0.443***	0.804***	0.668***	—		
Social Comparison	0.397***	0.326**	0.328**	0.309**	0.317**	—	
Social Media Addiction	0.504***	0.334**	0.456***	0.412***	0.417***	0.439***	—

Note. * $p < .05$, ** $p < .01$, *** $p < .001$

Table 3. *Independent Samples T-Test*

		Statistic	df	p
Health-Related Risk-Taking Behaviors	Student's t	-0.762	68.0	.449
Excessiveness	Student's t	0.788	68.0	.434

Distress	Student's t	-0.314	68.0	.754
Reassurance	Student's t	-1.917	68.0	.059
Compulsion	Student's t	-0.937	68.0	.352
Social Media Addiction	Student's t	0.165 ^a	68.0	.869
Social Comparison	Student's t	-1.830	68.0	.072

Note. $H_a: \mu_{\text{Female}} \neq \mu_{\text{Male}}$

4. Discussion of Results

The study sought to comprehend the connections between young adults' health-related risk-taking behaviours, social comparison, and social media addiction (including all of its components). Numerous important connections between the variables and their constituent parts were found in the results.

The study's first hypothesis was supported by a substantial positive correlation ($r = .504$, $p < .001$) between social media addiction and health-related risk-taking behaviours. Young adults who use social media excessively and compulsively are more likely to participate in excessive symptom-searching and health-related discomfort because they are constantly exposed to health, fitness, and wellness information. This result corroborates the findings of Starcevic and Berle's (2013) study, which contends that cyberchondria, an obsessive search for health information, is a generalisation of compulsive online interaction.

Social Media Addiction also showed a significant positive relationship with Social Comparison ($r = .439$, $p < .001$), supporting the second hypothesis of the study. As seen in this study, young adults high on social media addiction are also high on social comparison, constantly evaluating their lives, appearance, and health against the curated content of others online. This is in line with Festinger's (1954) Social Comparison Theory, which explains that greater exposure to others' content increases the tendency to compare oneself with them.

Social Comparison further showed a significant positive correlation with Health-Related Risk-Taking Behaviors ($r = .397$, $p < .001$), confirming the third hypothesis. This suggests that young adults who compare themselves more with others on social media are also more likely to engage in health-anxiety-driven behaviors such as excessive searching, reassurance-seeking, and

health-related distress. However, the subscale Excessiveness did not show any significant correlation with Reassurance ($r = .131$, $p > .05$), indicating that excessive health-searching and reassurance-seeking may operate independently of one another among young adults. The study's relatively small sample size could also account for the absence of a stronger statistical relationship between these two components.

In addition to the correlational findings, independent samples t -tests were conducted to examine whether gender differences existed across the key study variables. The results indicated no statistically significant gender differences in Health-Related Risk-Taking Behaviors, $t(68) = -0.762$, $p = .449$, Excessiveness, $t(68) = 0.788$, $p = .434$, Distress, $t(68) = -0.314$, $p = .754$, Reassurance, $t(68) = -1.917$, $p = .059$, Compulsion, $t(68) = -0.937$, $p = .352$, Social Media Addiction, $t(68) = 0.165$, $p = .869$, or Social Comparison, $t(68) = -1.830$, $p = .072$ (all $p > .05$). It should be noted that Levene's test for Social Media Addiction was significant, indicating a violation of the assumption of equal variances; therefore, results for this variable should be interpreted with caution, and the corresponding Welch's t -test statistic is recommended for reporting. Overall, these findings suggest that male and female participants did not differ meaningfully in their levels of social media addiction, social comparison tendencies, or health-related risk-taking behaviors, indicating that the relationships observed among the core study variables are unlikely to be confounded by gender.

Taken together, these findings suggest that social media addiction, through its association with heightened social comparison, plays a meaningful role in shaping health-related risk-taking behaviors among young adults, and that this pattern holds broadly across genders.

5. Conclusion

Young adults today carry the weight of constant digital comparison, evaluating their bodies, health, and lives against the curated realities of others online. This overwhelming exposure to idealized content translates, over time, into compulsive engagement patterns that quietly affect their psychological and health-related wellbeing. It is therefore important to study and identify the factors that give rise to such maladaptive online behaviors. This study aimed to understand the relationship between Social Media Addiction, Social Comparison, and Health-Related Risk-Taking Behaviors among young adults. A sample of 70 young adults was taken to examine these relationships, using standardized scales for each variable.

The findings revealed a significant positive correlation between Social Media Addiction and Health-Related Risk-Taking Behaviors, indicating that higher levels of social media addiction are associated with greater engagement in health-anxiety-driven online behaviors among young adults. Social Media Addiction also showed a significant positive relationship with Social Comparison, which, in turn, showed a significant positive relationship with Health-Related Risk-Taking Behaviors. However, not all components of Health-Related Risk-Taking Behaviors were correlated with one another, as Excessiveness did not show a significant relationship with Reassurance, suggesting that these two components may function independently among young adults. Additionally, independent samples t-tests revealed no significant gender differences across any of the study variables, indicating that the observed relationships between social media addiction, social comparison, and health-related risk-taking behaviors hold broadly across male and female young adults. The study suggests that further research be conducted in this field using a much larger sample and testing the mediating pathway through formal statistical modeling.

These findings underscore the need for structured digital wellness interventions among young adults. Educational institutions and mental health professionals should develop programs that help young adults build healthier, more mindful relationships with social media, particularly around content related to health, fitness, and appearance. Creating safe, open platforms for discussing health-related anxieties and insecurities, rather than resorting to compulsive online searching, may help reduce reliance on the internet for reassurance and lower associated distress.

While the study provides meaningful insights, certain limitations must be acknowledged. The cross-sectional design could not capture the long-term or causal effects of social media addiction and social comparison on health-related risk-taking behavior over time. The relatively small sample size may also account for the moderate strength of some associations, particularly at the subscale level, which further highlights a broader gap in research on digital-age mental health concerns among Indian young adults. The suggestions outlined above offer possible directions for future work in this field.

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