



A study to assess nomophobia among nursing student in order to develop a pamphlet regarding prevention of nomophobia in Aurangabad city

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Abstract

Nomophobia is a proposed name for the phobia of being out of cellular phone contact. It has been considered as a symptom or syndrome of problematic digital media use in mental health, the definitions of which are not standardized. In today's contemporary digital and virtual society, anxiety is the affliction of life. New addition to the stress list is "nomophobia," the fear of being out of mobile phone contact. This disorder, nomophobia is an acronym for "no mobile phone phobia." It is a result of the development of technologies that enable virtual communication. Nomophobia refers to discomfort, anxiety, nervousness, or anguish caused by being out of contact with a mobile phone. The study was conducted with the objective To assess Nomo phobia among nursing students, To associated Nomo phobia with selected demographic variable. And To distribute pamphlet to the nursing students who are prone to nomophobia. Descriptive Approach with descriptive research Design was used in this study. 380 Nursing students were selected by using Non-Probability Convenience Sampling for the study. Modified Nomophobic Rating Scale were used to collect the data. Distribution of Nursing students regarding nomophobic score, the overall percentage shows that (0.53%) are at risk, (46.32%) are Mild, (40.52%) are moderate, (12.63%) are severe. The minimum score was 0 and the maximum score was 125, the mean score for the test was 67.01 ± 20.69 and mean percentage of knowledge was 53.60. There was a significant association of nomophobic score in relation to age, types of mobile phone, Duration of mobile phone, number of mobile phones, number of Sim card used regarding Nomophobia. There was a no significant association of nomophobic score is gender, occupation, family income, academic performance of last year, Number of mobile in family regarding Nomophobia. Mobile phone use with increasing adoption of smartphones promotes an addiction-like behavior that is evolving as a public health problem in a large proportion of Indian youth.

Keywords: nomophobia, nursing students

Introduction

Nomophobia is a proposed name for the phobia of being out of cellular phone contact. It has been considered as a symptom or syndrome of problematic digital media use in mental health, the definitions of which are not standardized [1].

In today's contemporary digital and virtual society, anxiety is the affliction of life. New addition to the stress list is "nomophobia," the fear of being out of mobile phone contact. This disorder, nomophobia is an acronym for "no mobile phone phobia." It is a result of the development of technologies that enable virtual communication. Nomophobia refers to discomfort, anxiety, nervousness, or anguish caused by being out of contact with a mobile phone [2].

The term nomophobia or No Mobile Phone Phobia is used to describe a psychological condition when people have a fear of being detached from mobile phone connectivity. The term nomophobia is constructed on definitions described in the DSMIV; it has been labelled as a "phobia for a particular/specific thing". Various psychological factors are involved when a person overuses the mobile phone, e.g., low self-esteem, extrovert personality. The burden of this problem is now increasing globally. Other mental disorders

like, social phobia or social anxiety, and panic disorder may also precipitate nomophobic symptoms. It is very difficult to differentiate whether the patient become nomophobic due to mobile phone addiction or existing anxiety disorders manifest as nomophobic symptoms. The signs and symptoms are observed in nomophobia cases include- anxiety, respiratory alterations, trembling, perspiration, agitation, disorientation and tachycardia. Nomophobia may also act as a proxy to other disorders. So, we have to be very judicious regarding its diagnosis. Some mental disorders can precipitate nomophobia also and vice versa. The complexity of this condition is very challenging to the patients' family members as well as for the physicians as nomophobia shares common clinical symptoms with other disorders. That's why nomophobia should be diagnosed by exclusion. We have to stay 2 in the real world more than virtual world. We have to re-establish the human-human interactions, face to face connections. So, we need to limit our use of mobile phones rather than banning it because we cannot escape the force of technological advancement [3].

Review of Literature and Need of the Study

Sanjay Dixit, Harish Shukla, AK Bhagwat, Arpita Bindal, Abhilasha Goyal, Alia K Zaidi, and Akansha Shrivastava

conducted a study on evaluation of mobile phone dependence among students of a medical college and associated hospital of Central India, The study population comprised 106 (53%) males and 94 (47%) females; of these 92(46%) were day scholars and 108 (54%) were residents of hostels. The majority of students were of the age group 17-28 year, of which 80 (40%) were of 20 year of age. Out of the entire study group, the students having nomophobia score 10-23 were maximum from I st professional (20.5%) and least from IIIrd professional -part - 2 (8%). The students having nomophobia score >24 was maximum from IIIrd professional part - 1 (7%) and minimum from internship (1%). Overall, 18.5% students were found to be nomophobes. In gender-based observation, 19% males and 18% females were found to be nomophobes. Twenty one out of 109 (19.26%) hostellers and 16 out of 91 (17.58%) day scholars were found to be nomophobic [4].

The students become disturbed without their mobile phone, when there is no network coverage or battery has drained out or balance is not there and thus, losing their contact with the mobile definitely affects the concentration level of persons in a negative way. This is known as Nomophobia which refers to discomfort, anxiety, nervousness or anguish caused by being out of contact with a mobile phone [5].

According to the teens, on one side phones have made their life more comfortable, convenient and more safer but on the other side extreme mobile phone use has led to poor perceived health which includes tiredness, stress, headaches, and concentration difficulties. Among the teenagers, the unregulated usage and over dependent attitude on these devices have caused distraction in their academic activities due to the excessive time channeled to these devices. Studies have shown a direct relationship between student’s performance and academic excellence as those using mobile phones are more distracted and are less attentive during lecture and other academic work. Thus, ownership of a mobile phone has social, economic, psychological and educational ill effects on medical students as it usually impacts their attitude and behavior towards academic

activities. Hence, the investigator attempted to take up study to assess nomophobia among nursing students in Aurangabad City [6].

Problem Statement

“A study to assess Nomo phobia among nursing student in order to develop a pamphlet regarding prevention of Nomo phobia in Aurangabad City.”

Objective of Study

1. To assess Nomo phobia among nursing students.
2. To associated Nomo phobia with selected demographic variable.
3. To distribute pamphlet to the nursing students who are prone to nomophobia.

Research Methodology

Research Approach: Descriptive Approach

Research Design: Descriptive Research Design.

Population: Nursing students, Aurangabad

Sample: Nursing students

Sample Size: 380 students

Setting: The study was conducted in Nursing college, Aurangabad.

Sampling Technique: Non-Probability Convenience Sampling

Tool: Modified Nomophobic Rating Scale including demographic variables was used for the study.

Sampling Criteria

Inclusion Criteria

1. Student who are willing participation in the study.
2. Student who are available at the time of data collection.

Exclusion Criteria

Students who don’t have phone.

Findings

Section A

Table 1: Distribution of subjects according to their demographic variables *n=380*

Sr.no.	Demographic variable	Frequency	Percentage (%)
1	Age		
	17-18 years	55	14.47
	19-20 years	198	52.10
	21-22 years	117	30.78
2	Gender		
	23-24 years	10	2.6
	Male	175	46.06
3	Parent’s occupation		
	Female	205	53.94
	Government service	112	29.47
	Private service	50	13.15
4	Family Income		
	Business Other	173	45.52
	Other	45	11.86
	1-15000	96	25.26
5	Type of mobile		
	15001-30000	119	31.31
	I phone	19	5
	30001- 45000	77	20.26
6	Duration of mobile phone		
	45001 & above	88	23.17
	Android	335	88.15
5	Handset	26	6.85
	I phone	19	5

	1-12 months	114	30
	12-24 months	86	22.63
	24-36 months	62	16.31
	36 & Above	118	31.06
7	No. of mobile		
	1	320	84.21
	2	42	11.05
	3 & Above	18	4.74
8	No. of sim card used		
	1	197	51.84
	2	151	39.74
	3	18	4.73
	4 & Above	14	3.69
9	Approximate duration spends on mobile phone (in hour)		
	1-3	188	49.47
	4-6	123	32.37
	7 & Above	69	18.16
10	Academic performance (last year)		
	ATKT	33	8.68
	50-60%	144	37.89
	60-70%	143	37.64
	70 % Above	60	15.79
11	No. of mobile in family		
	1-3	174	45.78
	4-6	182	47.89
	7 & Above	24	6.33
12	Relationship Status		
	In Relationship	76	20
	Single	304	80

Section B

Assessment of the nomophobia among nursing students This section deals with the assessment of nomophobia. The level of nomophobia is divided under following headings: at risk, mild, moderate, severe.

Table 2: Nomophobia among nursing students.n=380

Level of nomophobia score	Score	Percentage score	Nomophobia score	
			Frequency	Percentage
At risk	0-31	0-25%	2	0.53%
Mild	32-62	26-50%	176	46.32%
Moderate	63-93	51-75%	154	40.52%
Severe	94-125	76-100%	48	12.63%
Minimum score	0			
Maximum score	125			
Mean score	67.01 ± 20.69			
Mean Percentage	53.60			

The above table shows that the Nomophobic score distribution of Nursing students (0.53%) are At risk, (46.32%) are Mild, (40.52%) are moderate, (12.63%) are severe. The minimum score was 0 and the maximum score was 125, the mean score for the test was 67.01 ± 20.69 and mean percentage of knowledge was 53.60.

There was a significant association of nomophobic score in relation to age, types of mobile phone, Duration of mobile phone, number of mobile phones, Number of Sim card used regarding Nomophobia. There was a no significant association of Nomophobic score is gender, occupation, family income, academic performance of last year, Number of mobile in family regarding Nomophobia.

Discussion

The finding of the study show that mean and standard deviation was 67.01and 20.69respectively. And also, the

mean percentage of nomophobic score of nursing Students was53.60 respectively. So, it is concluded that nursing students have nomophobia. Iqbal Ahmad Farooqui, Prasad Pore, Jayashree Gothankar, (22 Dec 2017) conducted a study on Nomophobia: an emerging issue in medical institutions, Found that A medical college in Pune city. Study period: December 2015 to February 2016. A cross-sectional study was carried out on all the students of 1st year MBBS. A predesigned and pretested questionnaire was used to collect data. Data were analyzed statistically by simple proportions using SPSS v20. A total of 145 students were monitored according to inclusion and exclusion criteria. Amongst all the participants, 45.5% were males (66/145) and 54.5% were females (79/145). Mild Nomophobia was found in 17.9% students whereas 60% had moderate and 22.1% had severe Nomophobia. Amongst the males, 56.06% and 24.24% had moderate and severe Nomophobia, respectively while in females, moderate and severe Nomophobia was found to be 63.25% and 20.25%, respectively. Nomophobia is found to be prevalent in students of 1st year MBBS [7].

Conclusion

Mobile phone use with increasing adoption of smartphones promotes an addiction-like behavior that is evolving as a public health problem in a large proportion of Indian youth.

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