

Smart Phone Addiction and Mental Health; A Perspective

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Abstract—An evaluative research approach was used for the study . Sample consisted of 50 adolescent students The convenient sampling Technique was used. A structured questionnaire was used to assess the knowledge and Structured teaching was provided to find its effectiveness. The mean percentage of post-test knowledge score (83.1%) was higher than the mean percentage of pre-test knowledge score (51.9%). The calculated „t“ value showed a significant difference between mean pre and post- test knowledge scores. Calculate ‘x²’values are not showed significant association between age and source of information with their pre-test knowledge scores . The findings of the study showed that there was a deficit in knowledge of smartphone Addiction and its prevention before administration of structured teaching. The results Indicated that the structured teaching program is effective in increasing the knowledge in Selected adolescent students on smartphone addiction.

Index Terms—Effectiveness, structured teaching program, knowledge, smartphone addiction and Selected adolescent students.

I. INTRODUCTION

Smartphones are defined as a personal device that indicate social identity and status for the user and its main difference of any other mobile phone is that it ensures a continuous connection to the internet and provide several services including sociability, entertainment, information finding, time management, coping strategies, and social identity maintenance [1]. As an integral part of the modern world smartphone acts as major navigator, personal assistant, and entertainment source for everyone [2]. Smartphone addiction" is a term used to describe a pattern of smartphone use that is

excessive, compulsive, and potentially harmful. It involves a lack of control over device usage, even when it leads to negative outcomes [3]. This behavioural addiction is characterized by an individual's inability to regulate their phone usage, even when it negatively impacts their well-being, relationships, or daily routines

[4]. Addiction to smart phones is classified clinically as behavioural addiction resulted from an excessive problematic usage of smart phones that effect the daily life of the users [5]. Smartphone addiction in adolescents is characterized by excessive use of smartphones to feel good and an unwillingness to stop, even if it means losing friendship, a bad influence on academics and decline in physical social activities [7]. The proliferation of smartphones and their integration into daily life has led to a significant

increase in their usage, particularly among adolescentsp [8]. Adolescence is a transitional stage of physical and psychological development that generally occurs during the period from puberty to legal adulthood, adolescence is usually associated with the teenage years [6]. Adolescence are extremely vulnerable to developing a smart phone addiction [9]. Adolescents can't always manage screen time effectively, and are also the group known for spending the most time on their phones. The study found that about 27% of smartphone owners between 11 and 14 years old never turn their smart phones off, even to sleep. The adolescents other risk factors for smart phone addiction include smartphone users who suffer from anxiety, depression, low-self-esteem, introvert, disciplined self-control [2]. Smartphone addiction, a growing concern among adolescents, involves compulsive and excessive phone use leading to

negative impacts on daily life. This research explores the prevalence, associated factors, and potential consequences of smartphone addiction in adolescents, highlighting the need for understanding and intervention strategies^[12].

II. OBJECTIVE OF THE STUDY

1. To assess the pre-test level of knowledge on smartphone addiction among adolescent Students.
2. To assess the post-test level of knowledge on smartphone addiction among adolescent Students.
3. To evaluate effectiveness of STP by comparing pre-test and post test scores.
4. To find out the association between pre-test knowledge and demographic variables among adolescent students

HYPOTHESIS

H1: The mean post-test knowledge score of adolescent students will be significantly higher than their mean pre-test score on knowledge on smartphone addiction.

H2: There will be significant association between the pretest knowledge of adolescent students And selected demographic variables.

III. METHODS AND MATERIALS

An evaluative research approach was used for the study. The convenient sampling technique was used. The sample size consists of 50 adolescent Students who were fulfilling the inclusion criteria. A structured knowledge questionnaire was used to assess the knowledge and Structured Teaching Programme was implemented to evaluate its effectiveness. The group included only those study subjects who were present at the time of data collection.

IV. RESULT AND ANALYSIS

SECTION II: ANALYSIS OF PRE – TEST AND POST-TEST KNOWLEGDE SCORES OF RESPONDENTS AND EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME

Section – 2a: Overall and Aspect Wise Pre-test Knowledge Level/Scores on Ill effect caused by Smartphone addiction on mental health

TABLE – 4 Classification of Respondent Pre-test Knowledge level on Ill effect caused by Smartphone addiction on mental health

Knowledge level	Score	Respondents	
		Number	Present (%)
Inadequate	≤50%	27	54.0
Moderate	51-75 %	23	46.0
Adequate	>75%	0	0.0
Total		50	100.0

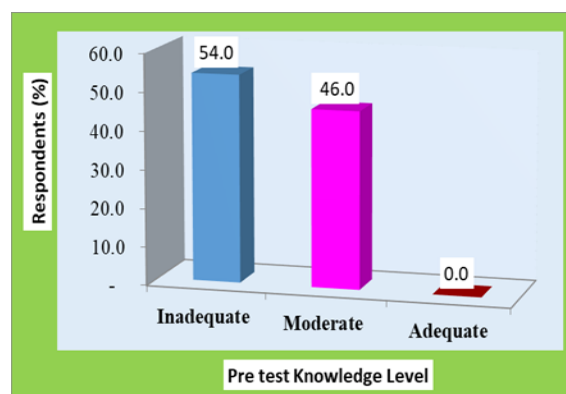


Figure. 11: Classification of Respondent Pre test Knowledge level on Ill effect caused by Smartphone addiction on mental health.

The classification of respondent pre-test Knowledge level on Ill effect caused by smartphone addiction on mental health is depicted in figure 11 reveals that 54% have inadequate knowledge, 46% have moderate knowledge and 0.0 % have adequate knowledge.

Section – 2c : Overall and Aspect wise Pre test and Post test Knowledge level/score on Ill effect caused by Smartphone addiction on mental health

TABLE – 8 Overall Pretest and Post test Mean Knowledge scores on Ill effect caused by Smartphone addiction on mental health.

N =50.

Aspects	Max. Score	Knowledge Scores				Paired 't' Test
		Mean	SD	Mean%	SD%	
Pretest	30	15.56	3.28	51.9	10.9	21.42*
Posttest	30	24.92	2.78	83.1	9.3	
Enhancement	30	9.36	3.08	31.2	10.3	

* Significant at 5% level, $t(0.05, 49df) = 1.96$

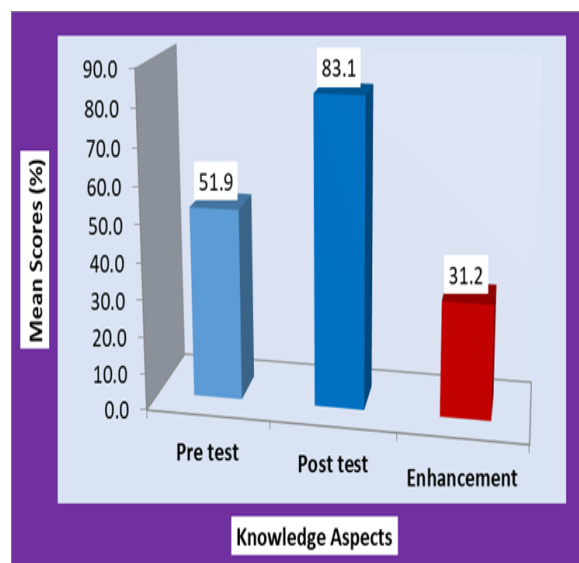


Figure. 13: Over all Pre test and Post test Mean Knowledge scores on Ill effect caused by Smartphone addiction on mental health.

The Over all Pre test and Post test Mean Knowledge scores on Ill effect caused by smartphone addiction on mental health is depicted in figure 13 reveals that in post-test 83.1% have knowledge aspect, in pre-test 51.9% have knowledge aspect, in enhancement 31.2% have knowledge aspect.

Section-3: Association between demographic variables and pre test knowledge level on ill effect caused by smartphone addiction on mental health.

The findings revealed that association of post-test level of knowledge of study participants and their selected socio-demographic variable and calculated χ^2 value. The calculated χ^2 value with regard to all the selected social-demographic variables viz. age ($\chi^2=5.35^*$), gender ($\chi^2=5.83^*$), year of study ($\chi^2=3.98^*$), Type of family ($\chi^2=7.26^*$), occupation of mother ($\chi^2=4.82^*$), were more than the table value at 0.05 level of significance which indicates that there is a significant association between pre-test knowledge scores and demographic variables, hence The association between age group and Pre test Knowledge level on Ill effect caused by smartphone addiction on mental health is depicted in figure 16 reveals that 63.2% in 15-17 years have inadequate knowledge, 36.8% in 15-17 years have moderate knowledge, 75.0% in 18-19 years have moderate knowledge, 25.0% in 18-19 years have inadequate knowledge

V. DISCUSSION.

This chapter presents the major findings of the study and discusses them in relation to similar studies conducted by other researchers. The present study intended to assess the effectiveness of structure teaching program on knowledge regarding ill effect caused by smart phone addiction among adolescent student on mental health in Rns PU college of Murudeshwar. The findings of the study are discussed with reference to the objectives and with findings of Other studies.

Structure knowledge questionnaire was use to collect the data. One group pre and post-test pre experimental research design was used to evaluate the knowledge of 50 respondents (1 Year PU students) regarding ill effect caused by smart phone addiction among adolescent students on mental health. The pre-test was followed by implementation of structure teaching program and post test was conducted on the 7th day to evaluate effectiveness of structure teaching program.

VI. CONCLUSION

The aim of the study was to assess the knowledge of adolescent students regarding smartphone addiction and to find the effectiveness of structured teaching program in enhancing the knowledge level of adolescent students. Thus the present study existing knowledge of adolescent students regarding smartphone addiction and provide the information with the aid of structured teaching program, which include the various aspect of smartphone addiction such as general information and causes of smartphone addiction. After applying inclusion and exclusion criteria of sampling 50 adolescent students were included the study data was collected by structured knowledge questionnaire. Data was analyzed and interpreted by applying statistical method.

VII. SUMMURY

The main findings of pre-test indicate that selected adolescent students had lack of knowledge about smartphone addiction and its prevention the effectiveness of structured teaching program was tested in terms of difference between pre-test and post-test knowledge scores and the

findings showed that it was statistically significant at level of significance. The findings of the proved that structured teaching program is an effective strategy in improving the knowledge of the selected adolescent students regarding smartphone addiction and its prevention. Thus, the structured teaching program provided by the investigator helped the adolescent students to improve their knowledge.

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