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A study to assess the impact of mobile phone and internet use on self reported behavior changes among undergraduate students in Naincy college of nursing, Jeolikote, Nainital, Uttarakhand

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Abstract

Purpose of the study:-

The purpose of the study was to determine the impact of mobile phone and internet use on self reported behavior among undergraduate students.

Background:-

Based on the data of the only statistic a number of mobile phone subscribers in India has increased by 11% in 2015 compared to years 2013 and according to a report of times of India; India will exceed 200 million Smartphone users by the years 2018 .It is known that the mobile phone use in India is very common in well educated young population. 84% people worldwide are educated to Smartphone. With wider increase no. of mobile apps and website, it's time to leverage students depend to Smartphone and teach them information literacy in a mobile setting.81% of Smartphone there mobile phone switched on all of the time even when they are in bed or in bathroom. The purpose of the study was to observe the impact of mobile phone and internet use on self reported behavior.

Objectives:-

- *To assess the behavior of the students related to Mobile phone use.*
- *To compare the knowledge score on adverse effects of Internet addiction among adolescents.*
- *To determine the relation between mobile phone dependency level and self reported Behavior.*
- *To find association between mobile phone dependence, and psychological changes.*

Materials and Methodology:-

Descriptive cross- sectional design was adapted. The study was conducted in selected nursing college of Nainital district. 30 nursing students were selected by convenience sampling technique the tool designed to collect the data were socio-demographic Performa and Likert scale. Data was analysis in the form of differential (mean, frequency and percentage) and inferential (chi-square) statistics.

Result:-

Total 30 nursing students were selected by convenient sampling technique. All participants belong to age group of 18-19 year. 13% participants belongs to age group of 20-21 year, 7% participants belongs to age group of 20-23 year. Study reveals that 30% of the students reported severe behavioral impact of mobile phone use, 47% students reported moderate dependence, 20% of students reported mild dependence whereas, absence of mobile phone dependence was found in only 3% of students. The mean value for the test was 0.618, the mean percentage is 61.8% and the standard deviation is 61.95.

Conclusion:-

Mobile phone dependence has been found to be an emerging public health problem. There is need to identify it early so as to generate adequate awareness and planed educational treatment interventions. Precautionary measures to prevent unnecessary excessive exposure to mobile phone are needed. There is also need to identify vulnerable group for example children and adolescent whom can be targeted for any interventional campaigns. In our research it is found that Minor proportions of students have dependency in mobile phone vary from moderate to severe.

Keywords: - *Self reported behavior, Mobile phone dependency, UG students.*

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I. Introduction

Worldwide, mobile phone usage has been increased dramatically which could affect the health of the people. India has the second largest number of mobile phone users. However there are only few studies conducted in India to assess its effects on health.[1]

Mobile phones are low-powered radiofrequency transmitters with frequencies between 450 and 2700 MHz, operating through a network of base stations.[2] The World Health Organization (WHO) established the International EMF Project in 1996 to evaluate the science, recommend research to fill any gaps in knowledge and to conduct formal health risk assessments of RF exposure.

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The cell phone is one of the most rapidly growing new technologies in the world (Rebello, 2010). In 2001, cell phone users were less than a billion worldwide with the majority of the users from the developed countries.[3]

The mobile phones are available to

The people right from the age of 12 years. The mobile phone technology has brought the world closer. The students are using mobile phones for playing games, sending messages, calling even when the class is in progress.[4]

he impact of the mobile phone on young people"s peer groups has been extensive. Adolescence is a

The impact of mobile phone on young people peer groups has been extension. And thus communication amongst peer group members is central to the identity of the individual. The impact of the mobile phone on peer relationships has transformed the peer group into a truly networked society[5]

If the mobile dependency perseveres, then there will be possible long-term health risks, including behavioral change and diminished in the academic performance of adolescents. Most of the population will run toward technology and gradually become dependent on it.[6]

However, several studies have emphasized that mobile phone use is also linked to a wide range of problematic behaviors, which led several scholars to coin the term "Problematic Mobile Phone Use" in the mid-2000s to describe the inability to regulate one's use of the mobile phone, which is associated with negative consequences in daily life (Bianchi & Phillips, 2005; Billieux, Van der Linden, & Rochat, 2008).[7]

II. Material And Methods

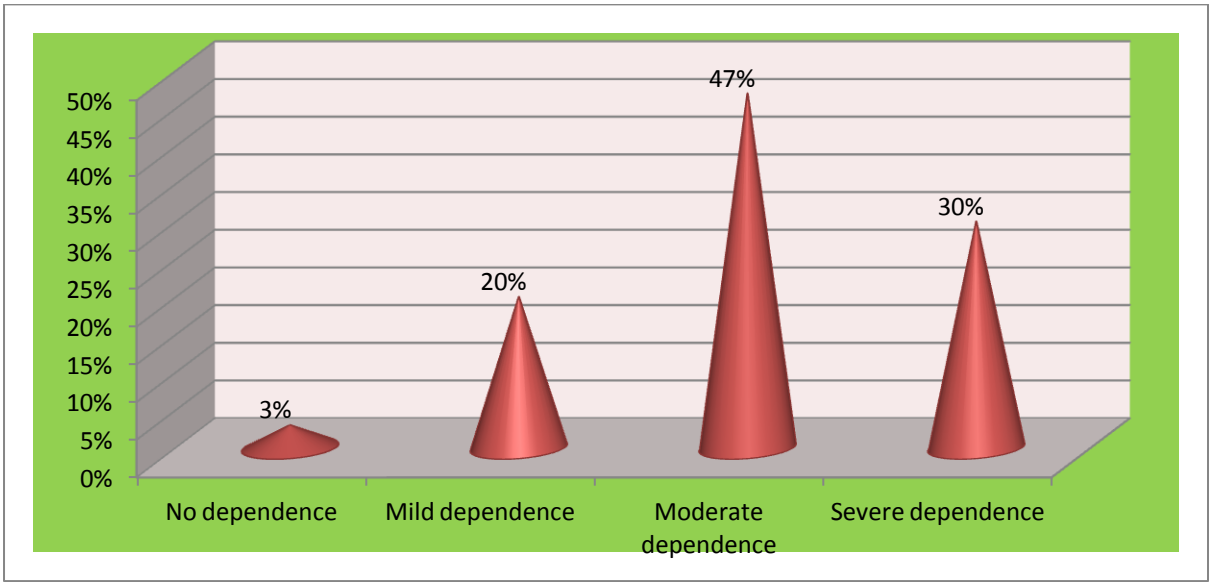
The Quantitative approach and Non- experimental, descriptive Cross –sectional design was used in this study. Convenience sampling technique was used to collect the 30 undergraduate adolescent students. The study was conducted at **Naincy College of Nursing, jeolikote, Nainital UTTARAKHAND.** The nursing students including in the study was students of selected college, who were willing to participate in the study, present at the time of data collection and able to understand and speak Hindi language. The investigator had collected the data after getting permission from the authority from Naincy College of Nursing, (Uttarakhand). and approval was obtained to conduct the study. A sample was identified and the samples were students of (B.sc nursing). The participants were informed about the purpose of the study and written consent was taken from the participants. Then the data was collected in July 2020.Self reported behavior was assessed by using baseline data and knowledge Questionnaires with the help of Likert scale. After that data analysis and interpretation is done. Descriptive statistics includes frequency, percentage, mean, standard deviation was used to describe the result.

III. Findings

TABLE-1 Percentage distribution of samples according to their demographic characteristics.

S.NO.	DEMOGRAPHIC VARIABLES	FREQUENCY	PERCENTAGE
1	**Age in years**		
	18-19	23	77%
	20-21	4	13%
	22-23	2	7%
	24-25	1	3%
2	**No. Of siblings**		
	No sibling	2	7%
	1 sibling	5	17%

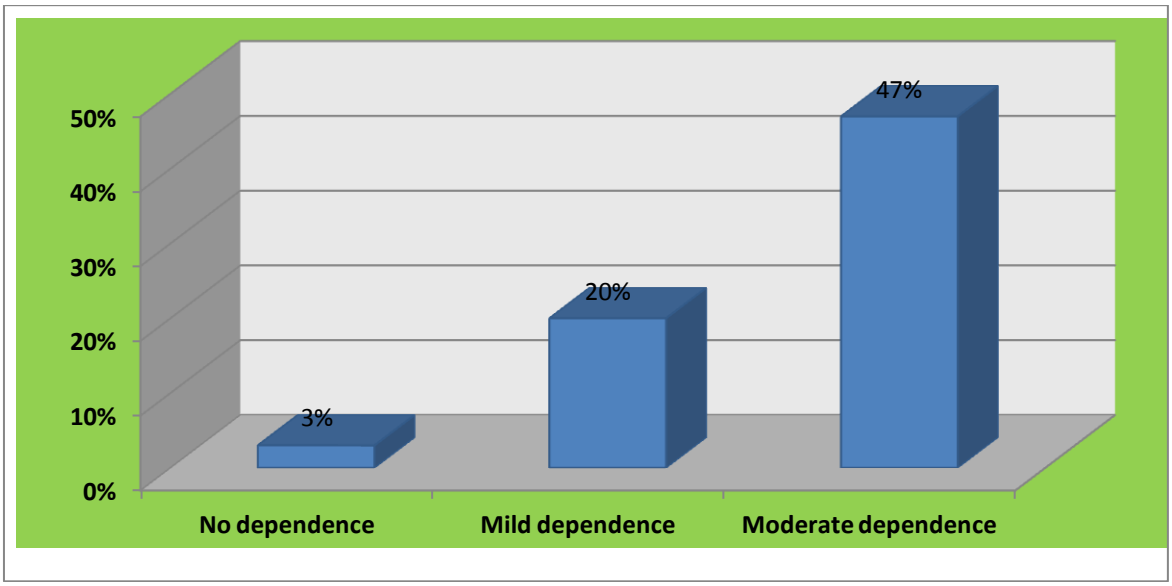
	2 sibling	19	63%
	3 or more	4	13%
3	**Family**		
	Joint	17	57%
	Nuclear	13	43%
4	**Occupation of mother**		
	Homemaker	27	90%
	Employee	2	7%
	Daily wages	1	3%
5	**Occupation of father**		
	Unemployed	2	7%
	Employee	12	40%
	Businessman	13	43%
	Daily wages	3	10%
6	**Family Income**		
	<10,000	2	7%
	10001- 15000	9	23%
	15001- 20000	8	30%
	> 20,000	12	40%
7	**Domicile**		
	Rural	19	63%
	Urban	11	37%
8	**Health problem**		
	Yes	26	13%
	No	4	87%
9	**Emotional Problem**		
	Yes	6	20%
	No	24	80%
10	**Family problem**		
	Yes	5	17%
	No	24	83%



LEVELOF IMPACT OF MOBILE PHOE

Figure 1; Cone diagram showing percentage distribution of students according to their impact of mobile phone use.

The above depicts that 30% of the students have severe dependence on mobile phone, 47% students have moderate dependence, and 20% of students have mild dependence, whereas absence of mobile phone impact was found in only 3% of students.



LEVEL OF IMPACT OF MOBILE PHONE

Figure 2; Cone Diagram showing percentage distribution of students according to their impact of mobile phone use.

The above figure depicts that 30% of the students have severe dependence on mobile phone, 47% students have moderate dependence, and 20% of students have mild dependence, whereas absence of mobile phone impact was found in only 3% of the students.

TABLE 2; Mean, Mean percentage and SD of the test on impact of mobile phone among undergraduate students.

Test on impact of mobile phone	Mean	Mean %	SD
Score of test	0.618	61.8%	21.95%

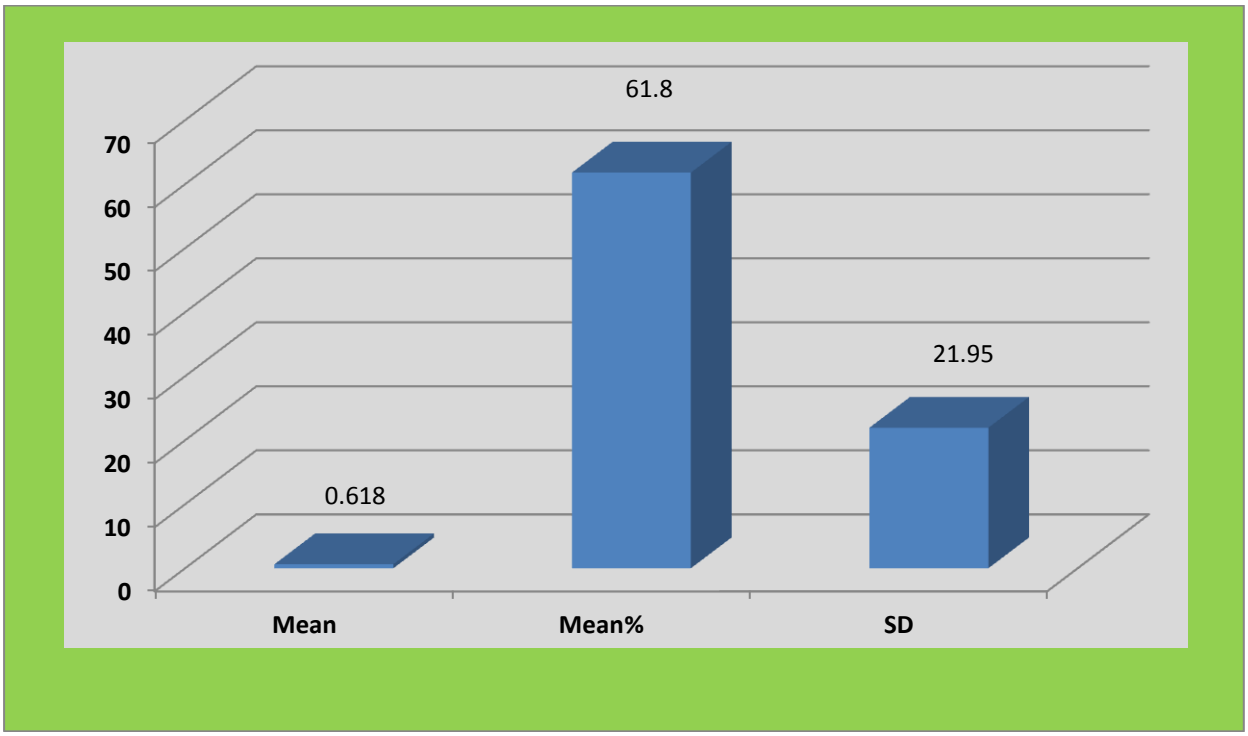


TABLE 3; Association between level of mobile phone dependence and selected demographic variables.

S.NO.	VARIABLES	MOBILE PHONE DEPENDENCE				X^2	DF	P VALUE	INFERENCE
		No	Mild	Moderate	Severe				
		f	f	f	f				
1	AGE					0.168	9	16.91	NS
	18-19	1	5	10	8				
	20-21	0	1	2	1				
	22-23	0	0	1	0				
	24-25	0	0	1	0				
2	Sibling					2.984	9	16.91	NS
	No	0	0	0	0				
	1	0	2	3	3				
	2	1	3	9	4				
	3 or more	0	1	2	2				
3	Type of family					1.580	3	7.81	NS
	Joint	1	5	8	5				
	Nuclear	0	1	6	4				
4	Occupation of mother					5.142	6	12.59	NS
	Homemaker								
	Employee	1	4	13	9				
	Daily wages	0	2	1	0				
		0	0	0	0				
5	Occupation of father					3.273	9	16.91	NS
	Unemployed								
	Businessman	0	1	1	0				
	Employee	1	2	7	6				
	Daily wages	0	2	3	2				
		0	1	3	1				
6	Family income					8.433	9	16.91	NS
	<10,000	0	2	1	1				
	10001- 15000	1	1	3	5				
	15001- 20000	0	1	3	1				
	> 20,000	0	2	7	2				
7	Domicile					8.67	3	7.81	NS
	Rural	0	2	4	4				
	Urban	1	4	10	5				
8	Health problem					0.256	3	7.81	NS
	Yes	1	5	12	8				
	No	0	1	2	1				
9	Emotional Problem					62.94	3	7.81	NS
	Yes								
	No	1	3	2	1				
		0	3	12	8				
10	Family problem					7.51	3	7.81	NS
	Yes	1	3	2	0				
	No	0	3	12	9				

IV. Discussion

Discussion is the action or process of talking about something typically in order to reach a decision or to exchange ideas of the findings. This chapter describes the results with respect to the objectives of the study and also compares the similar study with the present study findings. Knowledge of behavioral changes , the findings of this study has provided insight information on behavioral changes due to mobile phone and internet use which could help in designing appropriate intervals and as a base for base for further wide scales in others part of the country.

The study aimed to assess the behavioral changes due to mobile phone and internet use among undergraduate students in selected colleges of jeolikote. The hypothesis formulated shows that there was significant relationship between the levels of impact of mobile phone on undergraduate students.

In the present study, majority of the respondents 76% students belongs to age group of 18-19 years. This study was supported by Subramani Parasuraman., (2017) also stated the majority of students were between the ages of (18-19 years)

In the present study the highest percentage of the students 57% were belongs to nuclear family. In the present study conducted by Geneva (2010) also stated that among the sample of 70, (58%) of the students having nuclear family.

In the present study the highest percentage of the students 63% were belongs to rural area. In the present study supported by Jumoke Soyeni also stated that majority of the students 60% belongs to rural area.

In the present study the highest percentage of the students 87% have health problem. In the present study supported by Jose-de-Sola also stated finding that 85% students have health problem related to mobile phone use.

Objectives:-

- To assess the behavior of the students related to mobile phone and internet use on nursing college of Jeolikote Nainital.
- To assess the level of behavior changes as per Likert scale.
- To find the association between mobile phone dependence, the level of behavioral changes with selected demographic variables.

To assess the impact of mobile phone and internet usae on self reported behavior among undergraduate students of selected college of jeolikote. The present study reveals that the Mean of the test is 0.618% and SD Value is 61.95. The researcher concludes that students are mild dependence of mobile phone and internet use.

To find out the Association between level of mobile phone dependence and selected demographic variables.

Analysis revealed that association between knowledge and practice score with selected demographic variables was done by using Chi-square. analysis revealed that there is significant association between emotional problem and domicile whereas age, no of siblings, types of family, occupation of mother and father, income of family, health problem and family problem are found to be non significant.

HYPOTHESIS FORMULATED WERE-

H_1: There will be significant relation between mobile phone dependence level and level of behavioral changes among college students.

Analysis revealed that there is significant relation between mobile phone dependence level and level of behavioral changes. Since there is moderate level of dependence of mobile phone that concludes that H1 is accepted.

H_2: There will be significant association between the mobile phone dependence, level of behavioral changes among college students and selected demographic variables.

Analysis revealed that there is significant relation between emotional problem and domicile whereas age, no of siblings, types of family, occupation of mother and father, income of family, health problem and family problem are found to be non significant. Therefore H2 is accepted.

V. Conclusion

Based on the findings of the study, the data is indicating that mobile phone impact is an important health problem in the College students. New studies are required to assess the real problem and thereby take appropriate steps to tackle the growing problem. It was concluded that referring the students with suspected dependence to advanced health care facilities, performing occasional scans for early diagnosis and informing the students about controlled mobile phone use are required for the purpose of definitive diagnosis and treatment. It may be required to give priority to this matter, conduct more studies and evaluate them.

SOURCE OF FUNDING- Self funded

ETHICAL CLEARANCE- No ethical issue

CONFLICT CLEARANCE- There is no conflict of interest exit.

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