



Prevalence of Nomophobia among nursing students in a selected Nursing College of Kashmir

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Abstract

Introduction: Although communication technology is extremely important in daily life, excessive smartphone use can result in behavioral addictions. Nomophobia is a type of smartphone addiction that is linked to anxiety brought on by being cut off from the mobile network or not being able to use a smartphone.

Methodology: The study determined the extent to which student nurses suffer from nomophobia in a selected College of Nursing in Kashmir. The study used a quantitative research approach with descriptive research design. The data was gathered from 90 B.sc Nursing 2nd semester students using a Standardized Nomophobia Questionnaire. Convenient sampling technique was used. Using descriptive and inferential statistics, the collected data was analyzed.

Results: Majority of the participants were between the ages of 18 to 20 years, Most of the participants have been using smartphone since 3-4 years. Most of them use smartphone for 1-2 hour per day , 35.55 % check mobile phone less than 10 times per day, 95.5 % of students use internet on their mobile phones, Majority of participants check mobile phone every 1 hour. The findings reveal that 6.67 % of nursing students had no nomophobia, 40 % had mild nomophobia, 50 % had moderate nomophobia and 3.33 % had severe nomophobia. Significant association was found between nomophobia with demographic variables such as smartphone usage per day, frequency of checking mobile phone, and internet usage.

Conclusion: 50% of the nursing students have moderate nomophobia. The growing concern of nomophobia in the nursing students calls for integrated interventions within educational settings to promote healthier digital habits.

Keywords: Prevalence, Nomophobia, nursing students

Introduction

In the era of unprecedented connectivity, the omnipresence of smartphones has become an inseparable facet of our daily lives. Yet, within this digital tapestry, a modern anxiety takes center stage — nomophobia, the fear of being without a cell phone. As society becomes increasingly reliant on these pocket-sized devices for communication, information, and social connection, nomophobia represents a significant issue warranting further investigation. In recent years, smartphone addiction has emerged as a

significant public health concern due to the increase in smartphone use.

The term NOMOPHOBIA or NO MOBILE PHONE PHOBIA is psychological condition where individuals fear being without their mobile phone or losing connection to it.¹ Based on the DSM-IV's classifications, NOMOPHOBIA is a phrase that signifies a "phobia for a particular/specific things."² The United Kingdom (UK) Post Office first used the term "NOMOPHOBIA"³ in 2008 as part of a study that

they commissioned from YouGov, a UK-based research firm. The purpose of this study was to determine the likelihood of anxiety disorders brought on by excessive cell phone use. The survey revealed that nearly 53% of British mobile phone users experienced anxiety when they "lose their mobile phone, run out of battery or credit, or have no network coverage." As per this study, 47% of women and over 58% of men reported having anxiety related to mobile phones, while 9% reported experiencing anxiety when their phones were off. 55% of the participants stated that inability to maintain communication with their loved ones was the primary reason for their phobia.

The term nomophobia describes the anxiety that arises from a fear of not having access to a cell phone. The phenomenon known as "over-connection syndrome" happens when using a mobile phone decreases in-person encounters, significantly disrupting a person's social and familial ties.³The following are signs and symptoms of nomophobia :-

1. Anxiety
2. Respiratory alterations
3. Trembling
4. Perspiration
5. Agitation
6. Disorientation
7. Tachycardia

Anand, S et al ⁴conducted a study to determine how common nomophobia is among Kollam nursing students. Using the purposive sampling technique, 643 first- to last-year BSc nursing students enrolled in private nursing schools in Kollam were chosen. According to the study's findings, over 50% of nursing students use their smartphones for roughly five hours per day. In all, 42% of nursing students check their smartphones less than ten times a day.

Only 2 percent of nursing students suffered from severe nomophobia. (mild 54%, moderate 33%, and no nomophobia 11%). Nomophobia was present in 34.84 percent of nursing students. At the 0.05 level, a significant association was noted between nursing students' nomophobia and demographic factors such study level, smartphone use length, frequency of phone checks, and frequency of phone check episodes.

Thakur, M and Bharti, V⁵conducted a study to evaluate degree of student nurses' nomophobia in

M.M college of nursing, kumarhatti- solan. Convenient Sampling method was used to choose 125 nursing students. Nomophobia questionnaire (NMP-Q) was utilized to gather data. The findings of the study disclosed that highest number of nursing students lie in the category "Moderate level" and no single nursing student lies in the category "Absence of Nomophobia". The findings of the study disclosed that the maximum number of students have moderate level of nomophobia.

Given the growing dependence of these future healthcare professionals on mobile devices for communication, learning materials and clinical support, the occurrence of nomophobia among student nurses warrant thorough exploration.

Statement of the Problem: A descriptive study to assess the prevalence of Nomophobia among nursing students in a selected Nursing College of Kashmir.

Objectives

1. To assess the prevalence of nomophobia among the nursing students in a selected Nursing College of Kashmir.
2. To seek association between nomophobia and the selected sociodemographic variables.

Methodology: For this study, a quantitative research approach was adopted. The study employed a descriptive cross-sectional research design. 90 B.sc Nursing 2nd semester students of a selected College of Nursing in Kashmir were chosen as research subjects utilizing convenient sampling technique.

The tool was divided into two sections:

Section A : Participant information sheet: This section included inquiries about demographic traits such as age, gender, religion, residence, type of family, duration of smart phone use, internet usage, smartphone usage per day, frequency of checking mobile phone and intervals between your checking phone.

Section B: Standardised Nomophobia questionnaire.

The NMP-Q has 20 questions, each scored on a 7-point [Likert scale](#). The total score on the NMP-Q is 20 at its lowest (20 * 1) or 140 (7 * 20) at its highest.

Score	Interpretation
20	Absence of nomophobia
21 – 59	Mild level of nomophobia
60 -99	Moderate level of nomophobia
100 -140	Severe nomophobia

Ethical Considerations

Ethical clearance was obtained from the ethical committee of selected Nursing college of Kashmir. Every study participant provided written informed permission. Student-provided information was anonymized and kept private. The subjects were entirely free to choose whether or not to take part in the study.

Results

The findings of the study have been organised into following sections:

Section A : Nursing student distribution according to demographic factors

Table 1: Distribution of student nurses according to demographic variables N = 90

S.No.	Demographic variables	Frequency (%)
1.	Age (years)	
	18-20	54 (60)
	21-23	32 (35.55)
	24-26	4 (4.44)
	>26	0
2.	Gender	
	Male	34 (37.77)
	Female	56 (62.22)
3.	Religion	
	Muslim	90 (100)
	Hindu	0
	Christian	0

	Other	0
4. Residence		
	Urban	72 (80)
	Rural	18 (20)
5. Type of Family		
	Nuclear	68 (61.2)
	Joint	15 (16.66)
	Extended	6 (6.67)
6. How long you have been using smart phone (in years)		
	< 1	8(8.88)
	1-2	16 (17.77)
	2-3	27 (30)
	3-4	30 (33.33)
	4-5	6 (6.67)
	> 5	3 (3.33)
7. Smartpone usage per day		
	< 1 hour	5 (5.55)
	1-2 hour	33 (36.67)
	3-4 hour	22 (24.44)
	4-5 hour	19 (21.11))
	> 5 hours	11(12.22)

8.	Frequency of checking mobile phone (times per day)	
	< 10 times	32 (35.55)
	10-20 times	29 (32.22)
	20-30 times	15 (16.67)
	30-40 times	8 (8.88)
	40-50 times	4 (4.44)
	>50 times	2 (2.22)
9.	Internet usage	
	Yes	86 (95.55)
	No	4 (4.44)
10.	Intervals between your checking phone	
	5 minutes	9 (10)
	10 minutes	3 (3.33)
	20 minutes	18 (20)
	1 hour	31 (34.44)
	2 hour	8 (8.88)
	3 hour	7 (7.77)
	Longer than 3 hours	14 (15.55)

The data in Table 1 depicts that 60 % of the participants were in the age group of 18 to 20 years, 62.2 % were females, 80% were from urban area, 61.2 % belonged to nuclear family, 16.6 % belonged to joint family, 6.67 % belonged to extended family, 8.88% have been using smartphone for a period less than 1 year, 17.77 % for period 1-2 years, 30% for 2-3 years, 33.33 % for 3-4 years, 6.67 % for 4-5 years and 3.33 % for greater than 5 years, 5.55 % use smartphone for less than 1 hour per day, 36.67 % for 1-2 hour per day, 24.44 % for 3-4 hour per day, 21.11% for 4-5 hour per day and 12.22 % for greater than 5 hours per day, 35.55 % check mobile phone less than 10 times per day, 32.22 % check 10-20 times per day, 16.67 % check 20 -30 times per day, 8.88 % check 30-40 times per day, 4.44 % check 40-50 times per day and 2.22 % check greater than 50 times per day, 95.5 % of students use internet on their mobile phones, with respect to interval between checking phone, 10 % of students check every 5 minutes, 3.33 % check every 10 minutes, 20 % check every 20 minutes, 34.44 % check every 1 hour, 8.88 % check every 2 hour, 7.77 % check every 3 hours and 15.55 % check their phones at an interval of longer than 3 hours.

Section B: Distribution of nursing students based on prevalence of Nomophobia

Table 2: Level of Nomophobia among student nurses N = 90

Level of Nomophobia	f (%)
Absence of nomophobia	6 (6.67)
Mild nomophobia	36 (40)
Moderate nomophobia	45 (50)
Severe nomophobia	3 (3.33)

The data in Table 2 reveals that 6.67 % of nursing students had no nomophobia, 40 % had mild nomophobia, 50 % had moderate nomophobia and 3.33 % had severe nomophobia.

Section C: Relationship between certain sociodemographic factors and the degree of nomophobia

Table 3 : Association between nomophobia with selected socio-demographic variables N =90

Demographic variables	Chi square	P < 0.05
Age	0.27	NS
Gender	2.1	NS
Religion	7.62	NS
Residence	4.36	NS
Type of Family	2.28	NS
How long you have been using smart phone (in years)	7.13	NS
Smartphone usage per day	36.2	S
Frequency of checking mobile phone	46.53	S
Internet usage	28.3	S
Intervals between your checking phone	9.13	NS

The data in the Table 3 reveals that Nomophobia and demographic factors such daily smartphone usage, frequency of mobile phone checks, and internet usage were found to be significantly correlated.

Discussion

6.67 percent of nursing students did not have nomophobia, 40% had mild nomophobia, 50% had moderate nomophobia, and 3.33% had severe

nomophobia, according to the study's findings. The results of this study align with those of a prior investigation on the frequency of nomophobia among nursing students in Kollam, which was carried out by Anand S et al. The results of their investigation show that 11 % of the nursing students had no nomophobia, 54 % had mild nomophobia, 33% had moderate nomophobia and only 2% had severe nomophobia.

The results of the present study depict that 8.88% have been using smartphone for a period less than 1 year, 17.77 % for period 1-2 years, 30% for 2-3 years, 33.33 % for 3-4 years, 6.67 % for 4-5 years and 3.33 % for greater than 5 years, 5.55 % use smartphone for less than 1 hour per day, 36.67 % for 1-2 hour per day, 24.44 % for 3-4 hour per day, 21.11% for 4-5 hour per day and 12.22 % for greater than 5 hours per day, 35.55 % check mobile phone less than 10 times per day, 32.22 % check 10-20 times per day, 16.67 % check 20 -30 times per day, 8.88 % check 30-40 times per day, 4.44 % check 40-50 times per day and 2.22 % check greater than 50 times per day, 95.5 % of students use internet on their mobile phones, with respect to interval between checking phone, 10 % of students check every 5 minutes, 3.33 % check every 10 minutes, 20 % check every 20 minutes, 34.44 % check every 1 hour, 8.88 % check every 2 hour, 7.77 % check every 3 hours and 15.55 % check their phones at an interval of longer than 3 hours. The findings of the study align with the investigation on the frequency of nomophobia among nursing students in Kollam carried out by Anand S et al. According to the results of their study, 33% of participants use their smartphones for one to two hours per day. Just 13% of participants use their smartphones for less than an hour. Accordingly, 42% of participants check their phones less than ten times each day, whereas 9% of participants use their phones for four to five hours and more than five hours. In addition, 37% of participants check ten to twenty times a day. In all, though, 9% of participants checked their phones more than thirty times.

The results of the present study depict that Nomophobia and demographic factors such daily smartphone usage, frequency of mobile phone checks, and internet usage were found to be significantly correlated. The study's results are consistent with a study by Aslani, M. et al.⁶ that sought to ascertain the prevalence of nomophobia and its contributing factors among nursing students at Hamedan University of Medical Sciences in western Iran. The results of their study show a substantial relationship between the degree of nomophobia and the frequency of smartphone checks, daily internet usage, and primary phone usage.

Limitations

The limited sample size limits the findings' applicability to a broader population.

Conclusion

Nomophobia is increasingly recognized as a significant risk to individuals' social, mental as well as physical well-being. More time must be spent in the real world than the virtual one. The study revealed nomophobia prevalence among nursing students, indicating a growing dependency on mobile phones. This dependency may significantly impair their academic achievement, clinical efficiency, and comprehensive well-being. Hence to mitigate potential adverse effects, there is a need to implement awareness programs, foster digital well-being, and advocate for responsible technology use among nursing students.

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