



“EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME ON KNOWLEDGE REGARDING PREVENTION AND MANAGEMENT OF NOMOPHOBIA AMONG NURSING STUDENTS OF SELECTED COLLEGES IN GUWAHATI, ASSAM: AN EVALUATIVE STUDY”

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ABSTRACT:

BACKGROUND

Mobile phones are among the most significant and vital aspects of a person's life since they are used in every part of daily life. Mobile phones can have a lot of negative effects in addition to positive ones. Everyone, including adults, teens, and children, can be at risk from cell phone use and is a rising concern for students. The tendency of using mobile phones obsessively has been on the rise, leading to dependence on them. “Nomophobia,” or the fear of living without a mobile device, is the term used to describe the behavioral addiction to cell phones. Behavior that is so severe and persistent that it interferes with day-to-day living and is associated with discomfort, anxiety, uneasiness, or agony and is typically brought on by being disconnected from a mobile device. Nomophobia can be improved through awareness, treatment and lifestyle changes.

OBJECTIVES:

1. To assess the pre-test and post-test knowledge regarding Prevention and Management of Nomophobia among the students in selected colleges of Guwahati, Assam.
2. To evaluate the effectiveness of Structured Teaching Programme on knowledge regarding Prevention and Management of Nomophobia among the students in selected colleges of Guwahati, Assam.
3. To find out the association between pre-test knowledge with selected demographic variables.

METHOD AND MATERIAL

An evaluative design was used in the study to accomplish the objectives using probability random sampling technique for obtaining adequate sample for the study. Study was done on 100 nursing students in selected nursing colleges of Guwahati, Assam. Respondents were selected on the basis of inclusion and exclusion criteria. Structured Teaching Program with pre-test post-test structured knowledge questionnaire was used to assess the knowledge level of nursing students regarding prevention and management of Nomophobia.

RESULTS:

The analysis revealed that out of 100 nursing students, majority in the pre-test knowledge, majority i.e. 45(45%) had moderate knowledge, 32(32%) had adequate knowledge and 23(23%) had inadequate knowledge on Nomophobia among nursing students.

After the STP, 97(97%) had adequate knowledge and 3(3%) had moderate knowledge on Nomophobia among nursing students.

In pre-test, mean knowledge score was 13.24(SD 3.70) and whereas in post-test, the mean knowledge score was 18.16(SD1.38).

The calculated paired "t" test value of "t"(17.558) was more than the tabulated value(1,64)at 0.05 level of significance which indicated that the STP regarding prevention and management of nomophobia was effective in improving the knowledge of the student.

CONCLUSION: From this study, it was concluded that majority of the respondents had adequate knowledge after administration of STP which indicated that the STP regarding prevention and management of nomophobia was effective in improving the knowledge of the student.

Therefore, the investigator concluded that, there is a need of awareness to nursing students regarding prevention and management of Nomophobia and its impact on later life.

KEY WORDS

Knowledge, STP, Nomophobia.

INTRODUCTION

Technological advances have enabled many inventions that have increased the standard of living. Due to their widespread use in every aspect of daily life, mobile phones rank among the most important and crucial aspects of an individual's life. An increasing number of people are prone to using their mobile phones excessively, which can result in dependency. Negative consequences may arise for teenagers who turn to their phones as a coping method for stress, boredom, anxiety, or loneliness. Children suffer from two problems: an addiction to smartphone games and academic distraction caused by constant device checking.

The term "nomophobia," which refers to the fear of not having a mobile device, is used to characterize the behavioural addiction to cell phones.

Disconnecting from a mobile device interferes with day-to-day living and is accompanied by discomfort, anxiety, uneasiness, or agony.

When we think about our fears, they cause us to feel a great sense of dread, which often results in physical and mental symptoms.

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METHODOLOGY:

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DESCRIPTION OF THE TOOL-

In order to meet the objectives of the study, the following tools were constructed which consists of four sections:

SECTION I- Demographic data

SECTION II- Structured Knowledge Questionnaire

SECTION III- STP

DATA COLLECTION PROCESS:

The data collection period was scheduled from 30th September to 29th October 2023.

A formal written permission was obtained from respective Principal, of selected nursing colleges of Guwahati, Assam for conducting the research study by the investigator before collection of the data. The investigator visited the colleges on the respective dates for Pre-test and was introduced to the nursing students, who fulfilled the pre-determined selection criteria.

A written informed consent was also taken from the 100 BSc nursing student, who fulfilled the selection criteria. The respondents took 20-25 minute to complete in average. The investigator than gave STP regarding knowledge on prevention and management of Nomophobia. Post-test were conducted after seven days of pre-test.

RESULTS:**SECTION 1:****Table 1: Frequency and percentage distribution of demographic variables of nursing students.****n= 100**

Demographic Variables	Frequency (f)	Percentage (%)
Age in years		
17 – 22	95	95.0
23 – 28	3	3.0
29 – 35	2	2.0
Gender		
Male	5	5.0
Female	95	95.0
Type of family		
Nuclear	89	89.0
Joint	11	11.0
Number of siblings		
1	44	44.0
2	33	33.0
>2	23	23.0
Area of residence		
Urban	48	48.0
Rural	44	44.0
Slum	-	-
Others	8	8.0
Monthly income of students		

Demographic Variables	Frequency (f)	Percentage (%)
<10000	93	93.0
10001 – 15000	5	5.0
15001 – 20000	-	-
>20000	2	2.0
Hobbies of students		
Hobby related to smart phone	16	16.0
Cooking	24	24.0
Reading a book	25	25.0
Sports	2	2.0
Others	33	33.0
Daily use of smart phone in 24 hours		
<2 hours	15	15.0
2 – 4 hours	64	64.0
4 – 6 hours	13	13.0
>6 hours	8	8.0

The table portrays that most of the nursing students, 95(95%) were aged between 17 – 22 years, 95(95%) were female, 89(89%) belonged to nuclear family, 44(44%) had 1 sibling, 48(48%) were residing in urban area, 93(93%) of students had monthly income of <10000, 33(33%) had other hobbies and 64(64%) had used smart phone 2 – 4 hours in 24 hours.

SECTION-II

Table 2: Frequency and percentage distribution of pretest and post-test level of knowledge on Nomophobia among nursing students.

n = 100

Level of Knowledge	pretest		Post Test	
	Frequency	Percentage (%)	Frequency	Percentage (%)

Inadequate ($\leq 50\%$)	23	23.0	-	-
Moderate (51 – 75%)	45	45.0	3	3.0
Adequate ($>75\%$)	32	32.0	97	97.0

The table 2 findings show the frequency and percentage distribution of pretest and post-test level of knowledge on Nomophobia among nursing students.

It shows that in the pretest, 45(4%) had moderate knowledge, 32(32%) had adequate knowledge and 23(23%) had inadequate knowledge on Nomophobia among nursing students.

After the STP, 97(97%) had adequate knowledge and 3(3%) had moderate knowledge on Nomophobia among nursing students.

SECTION -III

Table3: EFFECTIVENESS OF STP ON NOMOPHOBIA PREVENTION AND MANAGEMENT AMONG NURSING STUDENTS.

100

n=

Variables	Mean	SD	Mean Difference	Paired “t” test and p- Value
Pretest	13.24	3.70	4.92	t = 17.558
Post Test	18.16	1.38		p=0.0001, S***

***p<0.001, S – Significant

The table 3 shows that the pre-test mean score of knowledge was 13.24 ± 3.70 and the post-test mean score of knowledge was 18.16 ± 1.38 . The mean difference score was 4.92. The calculated paired “t” test value of value of $t=17.558$ was statistically significant at $p<0.001$ level. This clearly infers that after the administration of STP on Nomophobia prevention and management among Nursing students was found to be effective in improving the level of knowledge in the post test.

Table 4: ASSOCIATION OF PRETEST LEVEL OF KNOWLEDGE ON NOMOPHOBIA PREVENTION AND MANAGEMENT AMONG NURSING STUDENTS WITH THEIR SELECTED DEMOGRAPHIC VARIABLES.

n= 100

Demographic Variables	Inadequate		Moderately Adequate		Adequate		Fisher Exact test p-value
	F	%	f	%	F	%	
Age in years							
17 – 22	23	23.0	43	43.0	29	29.0	p=0.716
23 – 28	0	0	1	1.0	2	2.0	N.S
29 – 35	0	0	1	1.0	1	1.0	
Gender							
Male	2	2.0	2	2.0	1	1.0	p=0.711
Female	21	21.0	43	43.0	31	31.0	N.S
Type of family							
Nuclear	21	21.0	39	39.0	29	29.0	p=0.846
Joint	2	2.0	6	6.0		3.0	N.S
Number of siblings							
1	10	10.0	19	19.0	15	15.0	p=0.971
2	7	7.0	15	15.0	11	11.0	N.S
>2	6	6.0	11	11.0	6	6.0	
Area of residence							
Urban	8	8.0	20	20.0	20	20.0	p=0.008 S**
Rural	9	9.0	23	23.0	12	12.0	
Slum	-	-	-	-	-	-	
Others	6	6.0	2	2.0	0	0	
Monthly income of students							
Rs <10000	23	23.0	40	40.0	30	30.0	p=0.574
Rs 10001 – 15000	0	0	3	3.0	2	2.0	N.S
Rs 15001 – 20000	-	-	-	-	-	-	
Rs >20000	0	0	2	2.0	0	0	
Hobbies of students							
Hobby related to smart phone	5	5.0	6	6.0	5	5.0	p=0.297
Cooking	7	7.0	11	11.0	6	6.0	N.S
Reading a book	6	6.0	7	7.0	12	12.0	
Sports	0	0	1	1.0		1.0	

Others	5	5.0	20	20.0	8	8.0	
Daily use of smart phone in 24 hours							p=0.235 N.S
<2 hours	6	6.0	6	6.0	3	3.0	
2 – 4 hours	16	16.0	27	27.0	21	21.0	
4 – 6 hours	1	1.0	6	6.0	6	6.0	
>6 hours	0	0	6	6.0	2	2.0	

**p<0.01, S – Significant, p>0.05, N.S – Not Significant

The table 4 shows the pretest level of knowledge on Nomophobia prevention and management among Nursing students with their selected demographic variables. It was observed that the demographic variable area of residence (**p=0.008**) had statistically significant association with pretest level of knowledge on Nomophobia prevention and management among Nursing students at p<0.01 level.

Table 5: ASSOCIATION OF POST TEST LEVEL OF KNOWLEDGE ON NOMOPHOBIA PREVENTION AND MANAGEMENT AMONG NURSING STUDENTS WITH THEIR SELECTED DEMOGRAPHIC VARIABLES.

100

n=

Demographic Variables	Moderately Adequate		Adequate		Fisher Exact test p-value
	f	%	F	%	
Age in years					p=1.000 N.S
17 – 22	3	3.0	92	92.0	
23 – 28	0	0	3	3.0	
29 – 35	0	0	2	2.0	
Gender					p=1.000 N.S
Male	0	0	5	5.0	
Female	3	3.0	92	92.0	
Type of family					p=1.000 N.S
Nuclear	3	3.0	86	86.0	
Joint	0	0	11	11.0	
Number of siblings					p=1.000 N.S
1	1	1.0	43	43.0	
2	1	1.0	32	32.0	

Demographic Variables	Moderately Adequate		Adequate		Fisher Exact test p-value
	f	%	F	%	
>2	1	1.0	22	22.0	
Area of residence					
Urban	1	1.0	47	47.0	p=0.305 N.S
Rural	1	1.0	43	43.0	
Slum	-	-	-	-	
Others	1	1.0	7	7.0	
Monthly income of students					
Rs<10000	3	3.0	90	90.0	p=1.000 N.S
Rs 10001 – 15000	0	0	5	5.0	
Rs 15001 – 20000	-	-	-	-	
Rs >20000	0	0	2	2.0	
Hobbies of students					
Hobby related to smart phone	1	1.0	15	15.0	p=0.714 N.S
Cooking	1	1.0	23	23.0	
Reading a book	0	0	25	25.0	
Sports	0	0	2	2.0	
Others	1	1.0	32	32.0	
Daily use of smart phone in 24 hours					
<2 hours	1	1.0	14	14.0	p=0.294 N.S
2 – 4 hours	1	1.0	63	63.0	
4 – 6 hours	1	1.0	12	12.0	
>6 hours	0	0	8	8.0	

N.S – Not Significant

The table 5 shows the post-test level of knowledge on Nomophobia prevention and management among Nursing students with their selected demographic variables. The demographic variables did not show statistically significant association with post-test level of knowledge on Nomophobia prevention and management among Nursing students.

CONCLUSION

An evaluative study was conducted to assess the effectiveness of STP on knowledge regarding prevention and management of nomophobia among nursing students in selected colleges by using structured knowledge questionnaire and STP.

The study reveals that the majority (43%) nursing students had moderate knowledge in the pre- test knowledge. After the STP, majority (97%) had adequate knowledge. In pre-test, mean knowledge score was 13.24(SD 3.70) and whereas in post-test, the mean knowledge score was 18.16(SD1.38). The calculated paired “t” test value of “t” (17.558) was more than the tabulated value (1,64) at 0.05 level of significance which indicated that the STP regarding prevention and management of nomophobia was effective in improving the knowledge of the student.

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