Original Resea	Volume-8 Issue-6 June-2018 PRINT ISSN No 2249-555X Nursing THE PROBLEMATIC USE OF MOBILE PHONES AND ITS NEGATIVE CONSEQUENCES AMONG YOUNG ADULTS IN SELECTED AREAS OF COMMUNITY AT GURUGRAM, HARYANA
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India h mobile phone dependency) is a use, the negative consequences mobile phones and negative con moderate level of problematic	ones had started out as a gadget for adults, but they have now become a necessity for the entire family. At present, as 391 million cell phone users. Mobile phone overuse (mobile-phone addiction, problem mobile phone use, or dependence syndrome seen among certain mobile phone users. The present study aimed to assess the problematic among young adults in selected areas of community and to find out the correlation between problematic use of issequences with selected demo graphic variables. The results showed that all the young adults (96%) were having usage of mobile phone (62%) of young adults were having moderate level of negative consequences of mobile ve correlation between problematic use of mobile phone and its negative consequences among young adults.

KEYWORDS: young adults, problematic use, negative consequences.

INTRODUCTION

Mobile phones have many benefits, increased accessibility and social connection, in the workplace, convenience and improved safety. There has been increasing awareness in the negative consequences of mobile phone use 44.4 percent of participants related common health problems such as headache, trouble concentrating, memory loss, hearing loss, and fatigue due to their mobile phone use.⁽¹⁾ The pathological use of technology may exist in the form of 'technodependance These data imply that the cell phone enables behavioral problems and disorders in adolescents. Some new pathologies have come up such as "Nomo phobia" means no mobile phobia. 'FOMO' means fear of missing out . The fear of being without a cell phone, disconnected or off the internet. Textaphrenia and pingxiety the false sensation of having received a text message, call that leads to constantly checking the device. Textiety the anxiety of receiving and responding immediately to text message (2). Mobile or cell phone addiction appears to be a recent common disorder that merits inclusion in new classificatory system - ICD - XI and DSM - V. It fulfills the diagnostic components, excessive use, associated with a loss of sense of time or a neglect of basic drives, withdrawal, including feelings of anger, tension and depression when the phone or network is inaccessible. Symptoms of NOMOPHOBIA or RINGXIETY. tolerance the need for new better cell instrument, more software or more hours of use and "negative percussions", including lying arguments, poor achievement, social isolation and fatigue. Technological addictions (TA) is a non-chemical (behavioral) addictions, which involve human machine interaction. They can either passive (T.V) or active (computer games) and are a subset of behavioral addictions like preoccupation, mood modification, tolerance, withdrawal, conflict and relapse. The terms "mobile phone problematic use (MPPU) "problem, cell phone use (PCPU) and mobile phone use or addiction .MPPU is a form of cyber disorder, cyber addiction or behavioral addiction and is characterized by the repetitive use of mobile phone, to engage in behavior that is known to be counterproductive to health. (4

MATERIALAND METHODS

The objectives of the study were to assess the problematic use, the negative consequences among young adults in selected areas of community and to find out the correlation between problematic use of mobile phones and its negative consequences. Quantitative, Descriptive survey research approach was adopted for the study. The target population for the present study were young adults of 18-25 years of age group with educational status from secondary to postgraduate. Sample for the study consisted of 100 young adults understand Hindi, English language and who were suffering from chronic illness were excluded from the study. The tool consist of part I

socio demographic profile, part II standardized problematic use mobile phone questionnaire (Joel Billeux) with 30 items (11 positive and 19 negative items) and 4 point rating scale with four dimensions (dangerous use, prohibited use and dependence, Financial problem), the rating was range from strongly agree (1), agree (2), disagree (3), strongly disagree (4) and the part III self-structured rating scale to assess negative consequences of mobile phone was 4 point rating scale and the rating anchors were strongly agree(1), strongly agree(2), disagree(3), strongly disagree(4). Reliability of the tool was checked by using Corn Bach's alpha coefficient of correlation. The reliability of the tool for assessing the negative consequences of mobile phone was 0.82 and the reliability of standardised tool was not calculated as it was standardised and permission was taken to use the tool. Hence the tool was considered reliable. Scores were calculated as follows a positive item was scored as 1, 2, 3 and 4 and negative items were scored as 5,4,3,2 and 1. Criterion measure for problematic use of mobile phone ranged from (Minimum score - 30 Maximum score - 120) low 30 - 60 (>50%), moderate 61-90 (50-75%), severe 91 - 120 (>75%) and negative consequences was (Minimum score - 10, Maximum score -40), Low 10-20 (>50%) and Moderate 21-30 (50-75%) Severe 31-40 (>75%).

RESULTS Table 1: Distribution Of Problematic Use Of Mobile Phone In YoungAdults

CRITERIA MEASURE OF PROBLEMATIC USE SCORE			
Category Score	(f)	(%)	
SEVERE(91-120) >75%	3.0	3	
MODERATE(61-90) 50-75%	96.0	96	
LOW(30-60)>50%	1.0	1	
Maximum Score=120 Minimum Score=30			

Table 1 shows that 96% of young adults were having problematic mobile phone usage, other 3% were having severe problematic mobile phone usage, and only 1% of the young adults had low level of problematic mobile phone usage.

Table 2. Frequency And Percentage Distribution Of Negative Consequences Of Mobile Phone In Young Adults N = 100

			1	100
CRITERIA MEASURE OF NEGATIVE CONSEQUENCES SCORE				
Category Score	(f)	(%)		
SEVERE 31 – 40 (>75%)	27.0	27	27	
MODERATE 21 – 30 (50 – 75 %)	62.0	62		
LOW 10 – 20 (>50%)	11.0	11		
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Maximum Score=40	
Minimum Score=10	

Table 4 depicts that 62% of young adults were having negative consequences of mobile phone usage, other 27% were having severe negative consequences mobile phone usage, only 11% of the young adults had low level of negative consequences of mobile phone usage.

Table 3 Corealtion Of Problematic Use And Negative Consequences Of Mobile Phone

			N-100
Correlation	Mean score	Karl Pearson	Р
		Coefficient (r)	
Problematic use	72.41	r=0.66	p=0.004***
Negative	22.63		-
consequences			

***P<0.01, S-Significant at 0.01 level of significance

Table 6 the table value shows that there is a statistically significant correlation between problematic use (r = 0.66) and negative consequences (r = 0.66) of mobile phone usage. The calculated Karl Pearson correlation value of r = 0.66 shows a positive correlation and it was found to be statistically significant at p<0.01 level. This clearly indicates that when the problematic use of mobile phone increases the negative consequences of mobile phone also increase.

DISCUSSION

The discussion of the present study is based on findings obtained from descriptive and inferential statistical analysis of collected data .The first objective of the study was to assess the problematic mobile phone usage among young adults. The present study reveals that in community area, all the young adults (96%) were having moderate level of problematic usage of mobile phone, while (3%) student was having severe level of problematic mobile phone usage and only (1%) were having low level of problematic mobile phone usage. The result of the study was consistent with the Meta analysis that found out that significant smartphone addiction magnitude in India ranged from 39% to 44% as per fixed effects calculated. The age group of 15 to 16 years using smartphone have shown a rapid rise from 5% in 2012 and 25% in early 2014. In 2015 there was around 51 million smartphone users in urban India are 90% in present.(5) The result were contradictory with the findings of the study that was done to explore the behaviour of excessive use of mobile phone as a pathological behaviour. The results of the study indicated that 10 to 25% of the participants exhibited problematic mobile phones usage. (6)

CONCLUSION

From the findings it revealed that the difference has been found in the mean score of problematic mobile phone use and its negative consequences among young adults. . The calculated values shows a positive correlation and it was found to be statistically significant. This clearly indicates that when the problematic use of mobile phone increases the negative consequences of mobile phone also increases.Awareness among the general public and the young adults regarding the problematic use and its negative consequences of mobile phone use needs to be given in community. The awareness programs for the people in the OPD'S regarding the negative effects of using excessive mobile phone can be organized by nursing administrators in CHC, PHC. They can make arrangements for counselling session for the young adults who are having problematic mobile phone usage. The findings of the study could be used to train the nurses to provide guidance and counselling services in the community and in schools to discourage the problematic use of mobile use for the students at school as well as home.

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