



FIGHTING BACK AGAINST CELL-PHONE ADDICTION

psychiatric

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ABSTRACT

The aim of the present study first is to explore the relationship of using cell-phone and adolescence behaviour. Second to find out the effect of cell-phone due to persistent use on psychological health, and third to study the relationship between persistent use of cell- phones and its effect on adolescence attention and concentration. Sample for the study include 208 school going adolescence (110 male, and 98 female) between the age group 6 to 18 years, from Greater Noida and Nagpur. The data were analysed with the help of compared "t" test, an analysis of variance showed a mean of adolescence boys and girls on Anxiety, somatic problem, attention deficit, oppositional defiant problem, and conduct problem are significant. In the view of a current study, "communication, responsibility, educational difficulties and relationships all seem to be negatively influenced by the use of cell-phone in adolescence boys and girls. Frequent Cell- phone use has been associated with stress, sleep disturbances, and symptoms of depression, anxiety, somatic problem, attention deficit, oppositional defiant problem, and conduct problem among adolescence.

KEYWORDS

Child Behavior Checklist for Ages 6–18 (CBCL), counselling and guidance.

INTRODUCTION

There are a wide variety of addictions that adolescents learn over a period of time. One of the most widely spread addictions in adolescence across the world is cell-phone addiction. There is a shocking amount of teens in India that have cell phones, tablets or other mobile devices. Cell phones involving social media and internet access have become a major issue affecting the way adolescence learn and interact with others.

It is reported that the Indian telecommunication is the second largest market in the world. Such is the effect of this revolution that pretty much every single one has a cell-phone. Many electronic devices keep them engaged, which can in fact lower stress levels, but they can also encourage feelings of disengagement or dissociation. In fact, relying on a cell-phone to escape an unpleasant or dull situation may make adolescence more susceptible to stress, due to the lack of mental exercise or physical activity. Although cell-phone usage may give you a sense of instant comfort, the psychological effects of Smartphone addiction can't be ignored. According to DSM-5, Internet gaming disorder has significant public health importance, and additional research may eventually lead to evidence that Internet gaming disorder (also commonly referred to as Internet use disorder, Internet addiction, or gaming addiction) has merit as an independent disorder.

Due to heavy work load many parents don't spend quality time with children and children always see parents busy with their work on cell phones, computer or any other place. It's one of the reasons where Parents often given cell-phone to children to keep them busy, and there are many reasons why adolescence spending more time with cell-phone because they didn't get the positive support from the parents, poor guidance by others, negative peer influence, low hobbies, less numbers of friends, play ground is far way to home, heavy educational burden, high exaptation from parents, negative child, showing off, social status, lack of the proper guidance and support they didn't get the current line where they can spend time.

It may still serve a purpose when it is used in short spurts of time, as when done consciously many parents who says, 'I am going to be on a call you uncle for , or I am going to cook foods for you till than you can play with mobile phone, tablets, computer, television. Now, that is better than something that is unconscious and becomes a habit. Like small children who cannot eat or drink without a gadget because they've been conditioned to do so. Such cell-phone or other electronic devices -dependence is really critical, for infants toddlers and adolescence depend heavily on face-to-face interactions to learn language, expression and behaviour. The absence of such an interaction could hamper healthy physical and mental development in children. In India, use of internet is enormous, especially in the young population. Mobile Internet usage is growing at the rate of nearly 85% per annum-Chandra G et.al. 2012.

Cell-phones have become a central part in students' lives because they are multi-purpose. This multi-function device is now easily available to the hands of children; and at a click it allows them to explore applications which provide new and varied functions. Smartphones have become easily available and affordable today. Many applications are available and are easily downloaded for free like- games, television, music, whatsapp, a likely factor that makes individual dependent on a cell- phone. Cell- phone, mobile watch, tablets, computers and iPhone dependency are killing cognitive thinking and declarative memory. Cell-phone makes ones feel like to respond, which then increases your stress level and harms your cognitive thinking.

Cell-phone is convenient and dependable for putting all types of information in your hands instantly. The danger is that one's would become addicted to constant and instant communication. Excessive Cell-phone usage takes your time away from the people you love, care and can add many stress like- depression, sadness, anxiety, loneliness, somatic complains to your life when this technology is not used in moderation. Mental health disorders may follow.

Psychological Effects of Cell Phones

Increased use of cell phones has both short-term and long-term impacts on your psychological health. Major psychological effects of cell phones can include:

Anxiety and mood disorders – Cell phones, especially cell-phones have an addictive quality which can gradually lead to mental disorders. A study on mobile phone and technology addiction reveals that using your device throughout the whole day is dangerous for your mental health. It can make you feel uneasy and irritable if your phone is not with you, you might lose interest in other functions and can feel alone, Obsessive Compulsive Disorder or anxious when you can't receive or send a message instantly.

Sleep disturbances – Cell-phone addiction is also connected with a rise in fatigue and sleep disorders in users. It may seem like your phone provides a way to de-stress before bed, but the cell-phone light of the screen can actually have the opposite effect. The brain can be activated by the light emitted from the mobile phone, and this can make it harder to fall asleep and more difficult to get good quality sleep.

Relationship issues – It's easy for your cell- phone to become more important than the people around you. Do you or someone you know start checking text messages in the middle of a face-to-face conversation? Romantic relationships, family relationships and friendships can suffer, it harder to give people your undivided attention, most of your daily work you cannot leave you cell-phone as a result of overuse of social media and mobile phones. It can lead to poor communication, rigid boundaries, dishonesty in a relationship, high levels of conflict and negativity, and social isolation.

Physical Effects of Addiction

Frequency usages of cell-phone can result in a number of different physical problems that may cause permanent damage or be difficult to treat, including:

Digital eye strain- The pain and discomfort associated with viewing a digital screen for over 2 to 3 hours.

- Eyes begin to burn and itch or redness.
- Blurred vision.
- Eye fatigue.
- Digital Eye Strain can cause headaches.

Neck problems- Also known as “neck pain,” which refers to neck pain resulting from looking down at cell phone or any electronic devices for too long.

Other problem- Life-threatening infections in bones, joints, surgical wounds, bloodstream, heart valves, and lungs.

THE AIM OF THE PRESENT STUDY

- The aim of the present study is to explore the relationship of using cell-phone and adolescence behaviour.
- To find out the effect of cell-phone due to persistent use on psychological health.
- To study the relationship between persistent use of cell- phones and its effect on adolescence attention and concentration.

MATERIAL & METHODS:

- 1) Place of Study: This study was conducted in Greater Noida and Nagpur.
- 2) Period of Study: June 2017 to March 2018 (10 Months)
- 3) Inclusion Category

- School going adolescence (boys and girls) (Age group 11 to 18 years)
- School going adolescence (boys and girls), parents complain for behaviour problem, low scholastic performance.
- 4) Exclusion
- School going Adolescence (boys and girls), adolescence behaviour problem, and low scholastic performance), at different schools from Greater Noida and Nagpur.
- 5) Sample size: Adolescence (boys and girls) who visited doctors from different school for behaviour difficulties, and low scholastic performance, were included in the study (n=208)
- 6) Study Design: Cross sectional study (Questionnaire based)

TOOLS

CBCL TESTING

Child Behavior Checklist for Ages 6–18 (CBCL/6-18; Achenbach and Rescorla 2001) The 113 items on this measure are rated as Not True (0), somewhat or sometimes True (1), or Very True or Often True (2). Validity and reliability are excellent, and extensive normative data are available for children ranging from 6 to 18.

PROCEDURE OF DATA COLLECTION

For collection of data from Greater Noida and Nagpur was chosen. By keeping age and gender requirements in mind the subjects were selected more than the required then the test of Child behavior checklist 6/18(CBCL) for behaviour difficulties, and low scholastic performance ,N 208 subjects have been selected randomly from different school going adolescence, which consists 208 school going students (boys 110 and 98 girls).

First of all, checklist of trails was administered on the subjects to get their original viewpoint. The subjects were randomly selected sample in Greater Noida and Nagpur, school going adolescence (boys 110 and 98 girls) and done Child behavior checklist 6/18(CBCL) , each subjects took about 40 min to respond on the entire above tools. A period of ten months was devoted for the data collection.

STATISTICAL ANALYSIS

The obtained data was statistically analyzed by applying descriptive (Average, percentile, mean, standard deviation, and paired t-test) of significance of mean differences in term of various variable. We have entered all data and further Statistical Analysis was done with the help of IBM- SPSS-25 software.

RESULT

This study included one sets of participants: school going adolescence

boys and girls. The number of adolescence selected at random who participated in this study were 260 however during the study fifty-two adolescence was withdrawn the sample size to be n = 208 .The average age was 14 years (Table 1). Most of the participants were adolescence boys 110 (53%), and girls 98 (47%).Most of the participants were middle class family .All participants exhibited command over English, Marathi, and Hindi language.

Table no.1: Adolescence Age and gender wise average and percentage.

Areas	Age /Gender	Average	Percentag
Age	12-13 Years	Boys	30
		Girls	28
	14-15 Years	Boys	34
		Girls	25
	16-17 Years	Boys	20
		Girls	30
	17-18 Years	Boys	26
		Girls	15
Gender	Boys	110	53%
	Girls	98	47%

NS- Numbers of students, %- Percentage

Figure no.1: Adolescence Age and gender wise average and percentage.

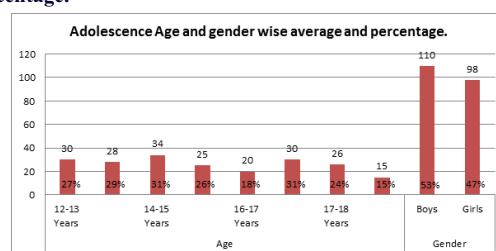


Table no.2: Adolescence boys and girls questionnaire based average and percentage.

Questionnaire	Boys	Girls
1. How Many cell-phone do you have (more than 1)	30 (27%)	10 (10%)
2. You feel nervous without your cell phone (Yes/No)	76 (69%)	84 (86%)
3.The amount of time using my cell phone is day by day increasing (Yes/No)	83 (75%)	86 (88%)
4. Most of you daily work you cannot leave your phone (Yes/No)	80 (73%)	76 (78%)
5.It harder to forget your phone at home/restaurant/ friends home (Yes/No)	100 (99%)	98 (100%)
6. You use your cell-phone or checking messages or updates in the middle of a face –to – face conversation (Yes/No)	60 (55%)	45 (46%)
7. It harder to give people your undivided attention (Yes/No)	70 (64%)	50 (51%)

NS- Numbers of students, %- Percentage

One of the other extracted themes from the data was spending time. Most of the school going adolescence boys and girls participating in this study believed that smart cell-phone can fill up their leisure time well and it is a useful fun instrument for filling up their loneliness through virtual friendship, participation in various social networks, computer games, watching movies and cartoons, and reading stories ,novels and many things. Around 27% adolescence boys having more than 1 cell-phone , and girls 10% having more than one cell-phone, 69% adolescence and 84% girls said they feel nervous without their cell-phone, 75% adolescence boys and 88% girls said yes the amount of time using cell-phone is day-by-day increasing. Most of you daily work they cannot leave their cell-phone 73% adolescence boys and 78% girls said yes , It harder to forget phone at home/restaurant/ friends home 99 % adolescence boys and 98% girls said yes , 55% adolescence boys and 46% girls said yes that they use cell-phone or checking messages or updates in the middle of a face –to – face conversation .It harder to give people your undivided attention 64%

adolescence boys and 51% girls said yes. Nikhita et al. 2015 examined the prevalence of mobile phone addiction among Indian secondary school adolescents. Mobile phone dependence was found in 31.33% in students. Sanchez-Martínez et al. 2009, examined prevalence of cell phone addiction and factors associated with cell phone use in adolescents in the community of Spain. In total, 96.5% of participants in Sánchez-Martínez et al., study had their own cell phone (80.5% had one, and 15.9% had two or more). More than half of them take it to school and 46.1% keep it on during class; 41.7% use it intensively. Rate of cell phone dependence was 20%. See table no.2

Table no. 3: Type of cell-phone and frequency based average and percentage.

Type of cell phone	Android		I -Phone		Non-Android			
	Boys	Girls	Boys	Girls	Boys	Girls		
	72 (65%)	75 (77%)	32 (29%)	22(22 (%)	2 (2%)	1 (1%)		
Frequency used	1-2 Hrs		2-3 Hrs		3-4 Hrs		More than 5 Hrs	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
	3(3%)	8 (8%)	23 (21%)	20(20 (%)	31 (28%)	15 (15%)	53 (48%)	55 (56%)

NS- Numbers of students, %- Percentage

In present study most of the school going adolescence used android cell-phone 65% boys and 77% girls .I-phone users 32% adolescence boys and 22% girls ,and non-android cell-phone 2% boys and 1% girls are using . Even they are use their cell-phone frequently around 3% adolescence boys and 8% girls are using their cell-phone one - two hours, 21% adolescence boys , and 20% girls are using their cell-phone two –three hours , 28% adolescence boys ,and 26% girls are using their cell-phone three - four hours and 48% adolescence boys and 56% girls are using their cell-phone more than five hours. James and Drennan (2005) carried out research on Australian university students' mobile phone use and discovered a large use rate of 1.5-5 hours a day. Their findings showed a range of characteristics associated with addictive use. These were: impulsiveness, mounting tension prior to using the device, failure of control strategies and withdrawal symptoms. See table no. 3

Many school going adolescence slept next to their cell-phone so as not to miss cell, texts message, status, updates and download (movies, music etc.). They also check their cell –phone before going to sleep and after walking up.

Around 75% adolescence boys and 80 % girls have slept with their cell-phone next to their bed because they wanted to make sure they didn't miss any call, texts, status, likes, updates, downloads (movies/Music/etc.)Even they checked their cell-phone immediate after walking up 57% adolescence boys and 82% girls showed or response on it. Cell-phone light affect in your sleep cycle 68% adolescence boys said “yes” and 69% adolescence girls said “yes” on it. In adolescents, sleep is regarded as especially important, as poor or insufficient sleep may cause poor academic performance or negatively impact growth and development -Curcio G, Ferrara M, De Gennaro (2006), Carskadon MA, Acebo C, Jenni OG (2004) , Kwon JA, Lee M, Yoo KB, Park EC(2013) , Kim JH, Park EC, Lee SG, Yoo KB (2015). Nevertheless, sleep problems are increasingly reported in school-aged children and tend to become worse with age -Gradisar M, Gardner G, Dohnt H (2011). It is well known that there is an inverse relationship between sleep duration and age -Dollman J, Ridley K, Olds T, Lowe E (2007), Iglowstein I, Jenni OG, Molinari L, Largo RH (2003). Sahin et al.(2013) studied mobile phone addiction level and sleep quality in 576 university students and found that sleep quality worsens with increasing addiction level. See table no.4

Table no. 4: Adolescence boys and girls questionnaire based on sleep average and percentage

Questionnaire	Boys	Girls
1. Sleep next to phone even no one given miss call, texts, status, updates, and downloads (Movies, Music or etc.)	82 (75%)	78 (80%)
2. Pre- sleep checking of notifications mandatory and also immediately after waking up.	63(57%)	80(82%)
3. Cell-phone light affect in your sleep (Yes/No)	75(68%)	68(69%)

NS- Numbers of students, %- Percentage

In spite of all this time spent using, checking cell-phone or otherwise interacting with their cell-phone 89% adolescence boys and 84% girls get complains by parents and others that they spending too much time with cell-phone, 90% adolescence boys and 87% girls parents reported they didn't responding others when they are using cell-phone, 55% adolescence boys and 54% girls get complains by parents and others that your eyes are redress due to effect of cell-phone light, and 90% adolescence boys and 89% girls parents reported that their educational performance going down because spending too much time with cell-phone. See table no.5

Table no.5: Complains by others questionnaire based on sleep average and percentage average and percentage.

Questionnaire	Boys	Girls
1. Complains by other that you spend too much time with your cell-phone	98 (89%)	82 (84%)
2. Complains other that you didn't responding others when you are using cell-phone.	99 (90%)	85 (87%)
3. Complains others that your eyes are redress	60 (55%)	53 (54%)
4. Complains others that your educational performance going down because of cell-phone.	99 (90%)	87 (89%)

NS- Numbers of students, %- Percentage

Cell-phone user's school going adolescence boys and girls have especially positive attitudes towards cell-phones. Many adolescence agree on it that their cell-phone saves their time because they can access the information they need at all times , 18% adolescence boys and 10% girls like getting updated news, 65% adolescence boys and 69% girls watching online television and games , 89% adolescence boys and 50% girls are playing online games , 57% adolescence boys and 73% girls collecting information about their subjects, 38% adolescence boys and 41% girls are using navigator for direction, 79% adolescence boys and 81% girls are watching online video, music on YouTube, 91% adolescence boys and 94% girls are spending time on online shopping, 73% adolescence boys and 100% girls are taking selfie or uploading photos online, 65% adolescence boys and 69% girls are stay in touch regularly with others, 56% adolescence boys and 13% girls are watching and visiting adult site , 65% adolescence boys and 67% girls are using and checking emails, 32% adolescence boys and 49% girls are using text messages, In social networking site (Instagram 73% adolescence boys and 99% girls, Facebook 100% adolescence boys and 100% girls, Chat room 75% adolescence boys and 46% girls, Twitter 66% adolescence boys and 65% girls, whatsapp 100% adolescence boys and 100% girls, and Ask.in 55% adolescence boys and 43% girls) ,and 65% adolescence boys and 67% girls are using video chat . The applications of the cell phone are data collection, online search, communicate with others, the production of content, organization of data and taking notes- Akanlisikum Akanferi, KwamiAziale, & Asampana,(2014).The cell phone improves the transmission, sharing and exchanging information between individuals and groups. see table no.6

Table no.6- Adolescence boys and girls cell-phone uses average and percentage.

Uses	Boys		Girls	
	n	%	n	%
1. Get news online	20	18%	10	10%
2. Watch online T.V ,Games	72	65%	68	69%
3. Play online Games	98	89%	49	50%
4. Collecting information about subjects.	63	57%	80	73%
5. Navigator for direction	42	38%	40	41%
6. Watching online video, music	87	79%	79	81%
7. Online Shopping	100	91%	92	94%
8. Taking Selfie/uploading photos online	80	73%	98	100%
9. Stay in touch regularly with others	72	65%	68	69%
10. Visit adult site	62	56%	13	13%
11. Checking emails	72	65%	66	67%
12. Send text- messages	35	32%	48	49%
13. Use social networking site.				
• Instagram	80	73%	97	99%
• Facebook	110	100%	98	100%
• Chat room	82	75%	45	46%
• Twitter	73	66%	64	65%
• Whatsup	110	100%	98	100%
• Ask.in	60	55%	42	43%
14. Webcam (Video Chat)	72	65%	66	67%

NS- Numbers of students, %- Percentage

According to a recent study, adolescence boys/girls checked their cell-phones frequently more than 5 hours on a daily basis. Adolescence may check their phones out of habit or compulsion, but habitually checking

may be how to avoid interacting with individuals. Some adolescence can expertise withdrawal symptoms usually associated with misuse, like depression, aggression, insomnia, conduct behaviour, somatic complains, Oppositional Defiant problem and anxiety, when they are not with their cell- phones. See table no.7

Table no.7 Means and SD of adolescence boys and girls behaviour scale along with their statistical significance of difference between means

		Paired Samples Statistics				
		Gender	Mean	N	Std. Deviation	Std. Error Mean
Pair 1	Depressive Problem	Boys	6.22	208	2.559	.177
		Girls	6.43	208	2.746	.190
Pair 2	Anxiety	Boys	10.79	208	5.716	.396
		Girls	7.68	208	4.388	.304
Pair 3	Somatic	Boys	9.86	208	5.034	.349
		Girls	5.75	208	3.792	.263
Pair 4	Attention	Boys	9.94	208	5.587	.387
		Girls	8.10	208	3.657	.254
Pair 5	Oppositional Defiant Problem	Boys	3.67	208	1.461	.101
		Girls	2.64	208	1.451	.101
Pair 6	Conduct Problem	Boys	6.89	208	2.881	.200
		Girls	4.26	208	2.841	.197

		Paired Samples Test							
		Paired Differences							
		Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference		t	df	Sig. (2-tailed)
Lower	Upper								
Pair 1	Depressive Problem – (Boys/Girls)	-.216	3.650	.253	-.715	.283	-.855	207	.394
Pair 2	Anxiety - (Boys/Girls)	3.115	7.284	.505	2.120	4.111	6.168	207	.000
Pair 3	Somatic - (Boys/Girls)	4.106	6.623	.459	3.200	5.011	8.941	207	.000
Pair 4	Attention - (Boys/Girls)	1.841	6.149	.426	1.001	2.682	4.319	207	.000
Pair 5	Oppositional Defiant Problem - (Boys/Girls)	1.029	1.833	.127	.778	1.279	8.093	207	.000
Pair 6	Conduct Problem - (Boys/Girls)	2.625	3.711	.257	2.118	3.132	10.202	207	.000

An Analysis of variance showed on depression subscale, adolescence boys mean 6.22, girls 6.43 and t- value -0.855 is not significant at 0.05 level. Means say that both gender adolescence feel depression. Out of 208 adolescence 44% adolescence boys and 59% girls scored in depression (enjoying little, cries, guilty, sleep less, lack of energy, sad, self- harm). The National Institute of Mental Health has reported statistically significant differences across age and sex in the lifetime prevalence of mood disorders, including depression, for adolescents 13 to 18. According to -Allen, (2015) believes mobile, computer system is changing the ways in which children behave and their views the world. Poor sleep has emerged as a relevant health problem in technologically advanced societies. Because sleep is a biological mechanism related to mood regulation -Thomée, et al., (2011), it is no surprise that adolescents with sleep related issues, caused by problematic internet use, experience symptoms of depression -Cheung & Wong, (2011). Demirci et al, (2015) research showed that depression levels are significantly higher in a high smartphone use group versus a low smartphone use group. 76% adolescence boys and 73% girls low socialization, 38% adolescence boys and 53% girls are sad, 55% adolescence boys and 55% girls are facing relationship problem with father, mother, cousin, and peer group. Although frequent ruminators are more likely to seek support and assurance, which can lead to rejection, they respond with greater reductions in distress upon receiving social support and other demonstrations of social acceptance than non-ruminators -Nolen-Hoeksema & Davis, (1999). Nezelek et al., (2000) showing that people with greater depressive symptoms feel that they experience worse social interactions.

On Anxiety problem subscale, adolescence boys mean 10.79, girls 7.68 and t- value 6.168 is significant at 0.05 level. Means say that adolescence boys present anxiety more than girls. Out of 208 adolescence 77% boys and 55% girls scored in anxiety (dependent, fear, school fear, nervous, nightmares, fearful, self-cones worries). Anxiety can have a negative effect on the information processing system. People with anxiety have difficulty storing and retrieving information -Nelson & Harwood, (2011). The term of anxiety is an instant, transitory emotion which can immediately impact on child cognition in specific condition and made them feeling worry, tightness and nervousness, all of these events can extremely impact on memory and learning process -Bigdeli, (2010); MacIntyre, (1995). 75% adolescence boys and 61% girls language use (abusing), 65% adolescence boys and 85% girls showed aggression behaviour. For many, it is difficult to strike the balance between feeling cut off from

the real world when lost in the online domain and separation anxiety when the phone is not in your hand -Notaro, (2015). Excessive smartphone use can lead to many psychological consequences. These include imbalance of real-life relationships, sleep, education and work; problems with verbal memory and attention; low wellbeing and high loneliness; and increased aggression, hostility and stress -Choi et al., (2014).

On somatic problem subscale, adolescence boys mean 9.86, girls 5.75 and t- value 8.941 is significant at 0.05 level. Means say that adolescence boys complain about somatic (headache/ abdomen pain, feel vomiting), more than girls. Out of 208 children 75% boys, and 83% girls scored high in somatic problem like – aches pain, headaches, skin related issues, stomach aches, vomits. As per score girls are facing more psychological stressor as compared to boys. There are multiple socio-emotional factors associated with reports of somatic symptoms among elementary school-aged children -Garralda (2010), including stress and reduced coping abilities -Walker et al., (2007). Children with chronic disease may have poor coping skills that may be related to somatic symptoms -Stewart et al., (2010). Headache pain in the general paediatric literature has been associated with increased functional impairment, increased somatic complaints, and decreased quality of life -Kernick , Campbell, (2009); Unalp, Dirik, Kurul, (2007); Le Resche, et al., (2005); Nyame et al., (2010). Headache related morbidities inevitably affect the child's and adolescent's daily activities and their ability to function in school and social environments -Eccleston et al., (2008). In Saudi Arabian studies, 44.4% of adolescents to their excessive mobile phone use had common health complaints such as headache, trouble concentrating, memory loss, hearing loss, and fatigue. Khan MM. (2008) , Mc. Cartt AT, Helling LA, Bratiman KA (2006).

On Attention deficit subscale , adolescence boys mean 9.94, girls 8.10 and t- value 4.319 is significant at 0.05 level. Means say that adolescence boys face more problems in attention deficit, more than girls. Out of 208 adolescence 93% boys, and 72% girls scored high in attention deficit like – fails to finish, concentrate, sit still, impulsive, inattention, talk much, and, loud tone. Inattention is one of the most prevalent mental health disorders in adolescents -Van Egmond-Fröhlich AW et al. (2012) . Inattentive symptoms, in particular, were strongly associated with problematic video game use or overuse also with other media -Mazurek MO, Engelhardt CR. (2013). Adolescents with inattention are at a higher risk of other psychiatric illnesses such

as mood and conduct disorders, and substance abuse -Childress AC, Berry SA. 2012; and Breslau J. et.al. (2011).

On Oppositional defiant problem subscale, adolescence boys mean 3.67, girls 2.64 and t-value 8.093 is significant at 0.05 level. Means say that adolescence boys present more problems in oppositional defiant, more than girls. Out of 208 children 72% boys, and 39% girls scored high in Oppositional defiant problem (argues, disobey home/school, stubborn, temper). Involvement in bullying often is a sign that the child is at risk for aggression and violence Olweus D (1994). Other study indicates that some children develop the behavioral symptoms of ODD as a way to manage anxiety or uncertainty-Wilson J, Steiner H (2002). On Conduct problem subscale, adolescence boys mean 6.89, girls 4.26 and t-value 10.202 is significant at 0.05 level. Means say that adolescence boys present more problems in conduct problem, more than girls. Out of 208 children 13% boys, and 2% girls scored high in conduct problem like cruel to animal, breaks rules, run away, swears, threaten, truant, attacks people, fights. The genetic literature on conduct/externalizing problems in children and adolescents is unusual insofar as more than any other behavioral trait, it has shown a significant effect of shared environment -Plomin RDeFries JCMcClearn GERutter M (1997). Many studies have examined the relationship between Mobile phone addiction and adolescent's mental and physical health problems -Ozturan, et al. (2002), Loughran, et al. (2005), Agrawal, et al. (2008), Soderqvist, et al. (2008).

Table no. 9: Adolescence boys' and girls' behaviour difficulties average and percentage

Areas	Boys		Girls	
	n	%	n	%
1. Language use (Abusing)	82	75%	60	61%
2. Anxiety	85	77%	54	55%
3. Stressor	76	69%	80	82%
4. Sadness	42	38%	52	53%
5. Relationship Problem (father/Mother/cousin/peer group)	60	55%	54	55%
6. Low Confidence	40	36%	30	31%
7. Aggression	72	65%	83	85%
8. Attention and concentration	102	93%	71	72%
9. Educational difficulties	98	89%	79	81%
10. Somatic complains	83	75%	81	83%
11. Withdrawn / depression	48	44%	58	59%
12. Rule braking behaviour (Oppositional defiant problem)	79	72%	38	39%
13. Socialization	84	76%	72	73%

NS- Numbers of students, %- Percentage

DISCUSSION

The addictive nature of cell phones has involved psychologists for years. Recently, psychologists have warned that smart phone users are particularly in danger for turning into enthusiastic about their devices.

In the view of a current study, "communication, responsibility, educational difficulties and relationships all seem to be negatively influenced by the use of cell-phone in adolescence boys and girls. Frequent Cell- phone use has been associated with stress, sleep disturbances, and symptoms of depression, anxiety, somatic problem, attention deficit, oppositional defiant problem, and conduct problem among adolescence.

TAKE HOME MESSAGE

Strategies can helpful to your adolescence behaviour, educational and against cell-phone addiction-

- Make rules for you- self concerning your phone usage- Set time periods in which you shouldn't use your phone (i.e., 8p.m. to 7 a.m.). Designate activities in which your phone is forbidden (e.g., Outing, Movies, dinner time).
- Download an application to help cut down on cell phone use.- Notepad (its reminds you), and uninstall the unnecessary application from your cell-phone like- Games , online gaming, chat-room .
- Behavioural strategies- To improve your child's outward behaviour (positive time out, positive contracts, expanding quality of time with adolescence, positive behaviour modification programs, logical consequences)
- Biological strategies- To improve your child's biochemistry

through nutrition (limiting junk food, providing a balanced breakfast, removing allergens and additives from the diet, adding omega-3 fatty acids or contact dietitian)

- Cognitive strategies- To improve the way your child thinks (self-monitoring skills, note making, organizational strategies, emotional self-regulation, and goal setting) Use paper-pencil to make a plan, don't use cell-phone.
- Creative strategies- To expand your child's ability to express in a positive way (expressive arts/ painting, music-playing like guitar, tabla, entrepreneurship, tracing, novel learning experiences)
- Educational strategies- To improve your child's performance at home and school (hands-on learning, home-school communication, study strategies, develop positive home environment)
- Environment base strategies- To enhance your child's ability to succeed at home and school by modifying the environment (time in nature, an animal to care for, limiting junk food, limiting online shopping, eliminating distractions)
- Emotional strategies- To improve your child's ability to manage their feelings (emotional self-regulation, stress management, self-awareness tools, individual and family therapy)
- Familial strategies- To create a positive family climate, within which your child can thrive, not based on cell-phone communication like- family meetings, family exercise and recreation, picnic, outdoor activity, outdoor vacation, success celebrations.
- Physical/ Practical Hobbies strategies- To make use of your child's bodily-kinaesthetic vitality to improve behaviour and attention span at home and school like- gymnastic, aerobics , cycling, gardening, daily exercise, yoga and develop numbers of good and practical hobbies.
- Socialization- To improve the way your child relates to others (social skills training and adjustment , personality development, goal setting ,emotional adjustment ,communication strategies, peer learning, confidence)

Limitations and Scope for future research

- Purposive sampling methods
- Areas based research

Future research is required to further delineate and characterize the prevalence, frequency, and psychosocial correlates related to the cell-phone uses and behaviour difficulties among school going adolescence boys and girls.

Future prospect study should be developed in cooperating large sample size and mass study with appropriate methodology to capture the frequency and prevalence of cell-phone uses and behaviour difficulties among school going adolescence boys and girls.

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Conflict of Interest

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