

# Appraise the Upshot Nurses Led Intervention of Nomophobia Among Scholar in Selected College of Indore City

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## ABSTRACT

Nomophobia, or "no mobile phone phobia," is a modern psychological phenomenon characterized by the fear and anxiety experienced when individuals are unable to access their mobile phones. This research abstract explores the prevalence, causes, and psychological effects of nomophobia in contemporary society. The study investigates the relationship between nomophobia and various demographic factors, including age, gender, and socio-economic status, and examines how personality traits and social behaviors contribute to the condition. By utilizing quantitative surveys and qualitative interviews, the research aims to assess the severity of nomophobia among different populations and its impact on mental health, daily functioning, and social interactions. The findings indicate that nomophobia is associated with increased levels of anxiety, stress, and dependency on digital devices, highlighting the pervasive nature of this condition in the digital age. The abstract concludes with a discussion on potential therapeutic interventions and strategies to mitigate the adverse effects of nomophobia, emphasizing the importance of fostering a balanced and mindful approach to technology use.

## 1. BACKGROUND OF STUDY

*"I Fear the Day That Technology Will Surpass Our Human Interaction. The World Will Have a Generation of Idiots"*

*Albert Einstein*

The background of research on nomophobia, or "no mobile phone phobia," delves into the historical and technological contexts that have given rise to this phenomenon. As mobile phones have evolved from simple communication devices to multifunctional tools integral to daily life, their ubiquity has reshaped social interactions, work habits, and leisure activities. This technological advancement has brought convenience and connectivity, but it has also led to new psychological and behavioral concerns.

Nomophobia was first identified in the early 21st century as mobile phones became increasingly sophisticated and widespread. The term was coined from the phrase "no mobile phone phobia" to describe the anxiety and discomfort experienced by individuals when they are without their mobile phones. The advent of smartphones, with their constant access to the internet, social media, and a variety of applications, has intensified the dependence on these devices.

**Several factors contribute to the development of nomophobia, including:**

- 1. Technological Dependency:** As mobile phones become central to communication, entertainment, and information, many individuals develop a reliance on these devices, perceiving them as essential tools for daily life.
- 2. Fear of Missing Out (FOMO):** The constant connectivity provided by mobile phones has exacerbated the fear of missing out on social interactions, news, or important events, leading individuals to feel anxious when disconnected.
- 3. Social and Cultural Factors:** In a society that increasingly values instant communication and digital presence, there is significant social pressure to stay connected, which can contribute to the anxiety associated with being without a mobile phone.
- 4. Psychological Factors:** Personality traits such as neuroticism, extraversion, and anxiety proneness have been linked to higher levels of nomophobia. Additionally, those with existing mental health issues may be more susceptible to this condition.

Research on nomophobia explores its prevalence across different age groups, cultures, and socio-economic backgrounds. Studies have indicated that younger individuals, particularly adolescents and young adults, are more likely to experience nomophobia due to their higher engagement with digital technology and social media.

Understanding nomophobia is critical as it intersects with broader issues related to mental health, digital well-being, and the societal impact of technology. Researchers are increasingly interested in exploring effective interventions and strategies to help individuals manage their relationship with mobile phones, promoting a healthier balance between digital and offline life. This research background sets the stage for further exploration into the causes, consequences, and coping mechanisms associated with nomophobia.

**Keywords:** Nomophobia, FOMO, Technology, Anxiety.

## 2. MATERIAL & METHODS

Research methodology is the particular procedures or method used to identify, select, process, and evaluate knowledge about a topic. In a research paper, the methodology section allows the reader to critically evaluate a study's overall validity and reliability.

**RESEARCH APPROACH:** The approach adopted for the present study was a quantitative research approach adopted to accomplish the objectives of the study that is to assess the levels of nomophobia among scholars.

**RESEARCH DESIGN:** The research design approved for the present study was a Descriptive Non Experimental research design.

**RESEARCH SETTING:** The present study was conducted in Renaissance university school of nursing Indore (M.P).

**POPULATION:** The entire set of individuals having some common characteristics associate the research analysis. In the present study, we selected a population which cover nursing scholars.

**TARGET POPULATION:** In the present study, the target populations were all students who are 18 years – 24 years of age and studying in renaissance university school of nursing Indore (M.P).

**ACCESSIBLE POPULATION:** They were the population who are 18 years – 24 years of age studying in renaissance university school of nursing those were present at the time of data collection.

**SAMPLING TECHNIQUE:** The technique included in the study was non-probability convenient samp-

ling technique.

**SAMPLE:** We adopted a sample of nursing scholar above the age group of 18 years – 24 years.

**SAMPLE SIZE:** In the present study, the sample size is 125.

**INCLUSION CRITERIA:** 1. Scholars the age group of 18 years – 24 years old. 2. Scholars who are present at the time of data collection. 3. Scholars who are willing to participate in the study. 4. Scholars having mobile phones.

**EXCLUSION CRITERIA:** 1. Scholars absent at the time of data collection. 2. Scholars who are not willing to participate in the study.

### 3. TOOL:

Data collection or research tools refer to the devices or instruments used to collect data, such as a paper questionnaire or computer-assisted interviewing system. They are used to measure a variable, or to collect the information needed to answer a research question.

The tool for data collection adopted for the present study was a standardized nomophobia questionnaire.

**TECHNIQUE:** The data was collected by Google forms.

**DESCRIPTION OF THE TOOL:** The NMP-Q is a standardized tool which 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

### 4. DATA ANALYSIS & INTERPRETATION

Data Analysis is a process of inspecting, cleansing, transforming, and modelling data with the goal of discovering useful information, suggesting conclusions, and supporting decision-making. Data analytics allow us to make informed decisions and to stop guessing.

**PLAN FOR DATA INTERPRETATION & ANALYSIS** of data is done in accordance with the objectives. The data analysis had been done by calculating descriptive statistics. The result showed that highest number of nursing students lies in the category “Moderate level” and no single nursing student lies in the category “Absence of Nomophobia”. The findings of the study revealed that the maximum number of students have moderate level of nomophobia which means they spend most of their time with their mobile phones which is an issue that should be taken into the consideration.

**TABLE 1 FREQUENCY AND PERCENTAGE DISTRIBUTION OF NURSING STUDENTS IN TERMS OF LEVELS OF NOMOPHOBIA. (N= 125)**

LEVELS OF NOMOPHOBIA	f (%)
ABSENCE OF NOMOPHOBIA	0 (0)
MILD LEVEL	18(14.4)
MODERATE LEVEL	83(66.4)
SEVERE NOMOPHOBIA	24(24)