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Assess The Effectiveness of Structured Teaching Programme On Overcoming Smartphone Addiction Among I Year B.Sc. Nursing Students at College of Nursing, Chengalpattu Government Medical College, Chengalpattu

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Abstract

Title: Assess The Effectiveness Of Structured Teaching Programme On Overcoming Smart Phone Addiction Among I Year B.Sc. Nursing Students At College Of Nursing, Chengalpattu Government Medical College And Hospital, Chengalpattu. Introduction: Although Smartphone Allowing Individual To Have Unlimited Access To Information And To Connect With Others In A Way Otherwise Thought Possible. There Were Many Harmful And Disturbance Of Smartphones. Today Mobiles Become The Unavoidable Part Of The Human Life. Mobiles Were Used For Internet, Education, Gaming, Shopping Or Video Games, Social Media, Watching Online Videos, Excess Use Of Some Of The Features Of The Mobiles Leads To Social, Mental Problems In One's Life Along With These Smartphones Use Also Have Various Health Problems Including Heart Problems, Eye Problems, Neck Problems And Psychologically Or Mentally Disturbance This Craziness Towards The Cellphone And Its Use Leads To Its Addiction. Method: Convenient Sampling Technique Was Adopted To Select Samples By Convenient Sampling Method, 28 Members In Study Group And 28 Members In Control Group Were Selected. The Research Design Selected For The Study Quasi Experimental Design With Manipulation And Control Group. Interventions For Experimental Group Given As Structured Model Teaching To Overcome Smartphone Addiction. Smartphone Addiction Inventory Questionnaire Were Distributed Among I Year B.Sc. Nursing Students To Conduct A Pretest And Posttest For Smartphone Addiction. **Result:** The Research Study Revealed That From I Year B.Sc. Nursing Students In Pretest 0 (0%) Students Were Non- Addictive, 5 (17.86%) Students Were At Risk, 23 (82.14%) Students Were Addictive. In The Posttest 17 (60.71%) Students Were Non- Addictive, 4 (14.29%) Students Were At Risk And 7 (25%) Students Were Addictive On Overcoming Of Smartphone Addiction. Conclusion:



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The Study Reveals That Decreased Effectiveness On Overcoming Smartphone Addiction In Pretest. The Posttest Reveals That Increase Effectiveness By The Structured Teaching Programme Was Effective On Overcoming Smartphone Addiction Among I Year B.Sc. Nursing Students At College Of Nursing, Chengalpattu Government Medical College, And Chengalpattu

Keywords: Effectiveness, Smartphone Addiction, B.Sc. Nursing Students.

Chapter I

1. Introduction:

"Home Is Where The Heart Is, But Today, The Phone Is Where The Heart Is!

Your Cell Phone Has Already Replaced Your Camera, Your Calendar, Your Alarm Clock; Don't Let It Replace Your Family!

I Finally Realized It. People Were Prisoners Of Their Phones That Were Why They Were Called As 'Cell' Phones!

Put Your Phone Down; Pick Your Life Up, Live Life!"

The Cell Phone Has Become The Adult's Transitional Object, Replacing The Toddler's Teddy Bear For Comfort And A Sense Of Belonging. -Margweret Hefferan

The Mobile Phone Is A Miracle Of Science. Indeed, This Is A Very Popular Item Today. It Is Truly A Mark Of Modern Living, A Part Of Modern Lifestyle. Today It Is Not Only A Communication Device. It Can Be Used For A Number Of Purposes Like Online Ticket Booking, Navigator, Playing Video Games, Taking Pictures, Recording Videos, Web Browsing, Video Calling, Etc. Whereas Young People Which Videos, Express Themselves, Communication With Friends And Search For Information Using Smart Phone, While Older People Use Their Smart Phone For Having Video Calls With Their Children Living Far Away And For Playing Games. The Portability And Accessibility Of A Smart Phone Make It Possible To Use It Anywhere For Any Duration.

In Fact, Now We Can Use Mobile Phone For Taking Online Classes. It Enables An Individual To Access Learning Resources Through A Smart Phone With An Internet Connection. Students Can Learn Through Mobile Anytime And Anywhere, As It Attracts Learners To Exploit Interactive Learning Resources. At The Same Time The Exclusive Craze For This Is Not Desirable And May Even Prove Dangerous. Mobile Phone Is To Be Taken As And Utility Service And Not As A Showpiece.

Mobile Phones Give Us The Liberty To Connect With Anyone Around The World Spontaneously. More Often Than Not, The Ability For True Understanding And In Turn, Empathy Relies On Body Language, Tone Of Voice, And Eye Contact With Smart Phone We Often Lose These Important Aspects Of Communication Such That Empathy May Suffer. They Empower Us To Find Any Information We Require And Were A Great Source Of Entertainment While This Device Was Designed To Empower Us; Sadly It's Turning Out To Subjugate Us. Almost Every Mobile User Was Suffering



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From The Addiction Of Mobile These Days. Everyone These Days Is Pinned To His Or Her Smart Phone.

In Today's World Addiction Is No Longer Restricted To Alcohol Or Substance Use. Behavioral Addiction Among Youth Is An Increasing Trend Noted In The Recent Past. Eye One These Days Is Looked To Their Mobile Phone, Smart Phone Addiction Is The Lack Of Control To Use The Smart Phone Despite Adverse Effects Including Financial, Psychological And Physical, Social Harmful Consequences On Users.

Excessive Device Use Can Have To Feeling Of Being Disconnected When We Spend Time With Friends And Family. Concentration And Learning Issues And Wanting To Check Your Smart Phone All The Time May Affect Concentration And Distract You When You Were In Class Or Work Environment. Through These Children Were More Prone To Effect Of Microwave Radiations Transmitted By A Cell Phone Were Harmful To A Brain Specially Kid's Brain. Having A Mobile Device At Hand Can Also End Up With Insomnia In Children. They Will Feel Tempted To Check It At Night. They Won't Be Able To Sleep Properly Because Of Its Vibration And Beeps.

Specifically, Adult Is A High-Risk Group For Smart Phone Addiction. They Were Strongly Attached To Their Smart Phone And They Regard A Smart Phone As Their Second Self. Developmentally, Adult Experience Severe At Physical And Psychological Changes, While On One Hand They Were Dependent On Their Parents With Reference To Their Life And Identity, On The Other Hand, They Were Trying To Be Independent Of Their Parents, To Establish Their Identity And To Create An Independent Space For Themselves During These Changes, A Smart Phone Becomes Indispensable For Adult. They Were Interested In New Technology And Get Used To The Operation Of Such Devices More Easily, Adult, As Digital Native, Express Their Thought In A Online Space Try To Keep Up With Fashion Use Many Kinds Of Applications (Apps) And Search For Emotional Relationships And Support.

The Acquisition Of Smart Phone Suppressed That Of Landline Phones And Both E-Mails And Text Messages Become Part Of The Preferred Social Communication For People Who Owned A Smart Phone. A Study By Surveying In Which They Discovered Age, Extroversion And Low Self-Esteem Can Be Factors Linked To Use Of Mobile Phones And Ascertained Those Extroverts Showed A Higher Probability Of Risk Taking And Young Drivers Were More Prone To Cause Of Automobile Accidents By Using Their Phones While Driving.

Mobile Phone Addiction Is A Real Problem And A Cause Of Great Concern. It Impacts Our Health, Relationships As Well As Work, One Of The Most Telling Characteristics Is The Fear Of Losing Access To One's Phone Or Not Having Connectivity The Anxiety Is So Widespread That It's Been Named Of 'Nomophobia' Which Is A Fear Of Being Without Or Unable To Use Your Mobile Phone For Some Reason.

Online Relationships Were Not A Healthy Substitute For Real Life Interaction. Compulsive Use Of Internet And Smart Phone Apps Can Cause You To Neglect Other Aspects Of Your Life, From Real World Relationships To Hobbies And Social Pursuits. Heavy Smart Phone Use Can Often Be Symptomatic Of Other Underlying Problems Such As Stress, Anxiety Depression Or Loneliness. While



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You Can Experience Impulse Control Problems With Smart Phone Just Like Use Of Drugs And Alcohol, They Can Trigger The Release Of The Brain Chemical Dopamine And Alter Your Mood. You May Rapidly Build Up Tolerance So That It Takes More And More Time In Front Of These Screens To Derive The Same Pleasurable Reward.

Nowadays People Were Suffering More Of Nomophobia And Global Pooled Prevalence Estimates Were 26.99% For Smart Phone Addiction, The Prevalence Of Mobile Phone Addiction In India Was 33% The Addiction Was Higher Among Boys 33.6%, Then Girls 32.36%. The Prevalence Of Smart Phone Addiction In Medical Students Is 47.9% In This Among Health Sciences College Students Was 85.2% With 21.1% Having Severe Nomophobia And 63.2% Having Mild Nomophobia.

In This Study, We Targeted Adolescents And Adult Of Ages 17-18 Years, To Examine The Characteristics Of Their Smart Phone Addiction And It Is Important To Point Out That Mobile Phone Is Playing A Very Important Role In Every Human Activity; It Constitutes A Tool And Means To Carry Out These Activities. Mobile Addiction Can Ruin Our Life If It Is Not Stopped On Time. Getting Rid Of This Habit May Be Difficult But It Is Not Impossible With Some Effort And Support We Can Overcome Problem Over Time.

1.1 Need For The Study:

Smartphone Addiction Is Characterized By An Excessive And Compulsive Depends On Smartphones. Smartphone Addiction Can Manifest In Various Aspects Of An Individual's Life, Affecting Their Behavior, Mental Well-Being And Relationships. Some Key Aspects Were Excessive Use Like In The Case Of Online Gambling, Withdrawal Symptoms, Preoccupation, Loss Of Control, Interference With Daily Life, Negative Impact On Relationships, Sleep Disturbance, Productivity Decline And Poor Academics.

Research On Smartphone Use Among The College Students Is Extensive. Although Numerous Studies Have Examined The Relationships Between Smartphone Use And Academic Performance, Many Such Studies Have Yielded Mixed Findings. Hence, The Overarching Goal Of This Meta-Analysis Was To Be Comprehensively Synthesizing Existing Research To Investigate The Effects Of Smartphone Addiction On Learning.

While Using Smartphone, People Become Unmindful That Causes Thousands Of Mistakes And Faulty Activities. Its Adverse Effect Is Also Seen In Work Related Tasks, Classroom Learnings [Hiscock, 2004; Selwyn, 2003(1)] And Academic Performance [Kuss; Griffhs, 2011(2)].

The Use Of Smartphones Has A Negative Impact On The Sleep Quality Of Adolescents. Use Of Smartphones As A Substitute For Regular Sleep; Harmful Cognitive, Emotional, Or Physiological Effects Of Using These Technologies; Light Emission From The Screens Of The Aforementioned Devices May Affect Sleep Quality; Use Of Mobile And Generally Internet-Based Technologies In The Bedroom May Interfere With Sleep Quality By Way Of Microwaves And May Also Cause Users To Wake Up When Receiving Messages.

It Has Been Suggested That Using Smartphones May Have An Impact On Physiological Aspects Of Brain Activity, Including Sleep Quality And The Melatonin Rhythm. A Behavior That Affects The Quality Of Sleep Because It Engages Reward Centers Is Checking One's Smartphone Frequently, Which Is Also An Indication Of Addiction.



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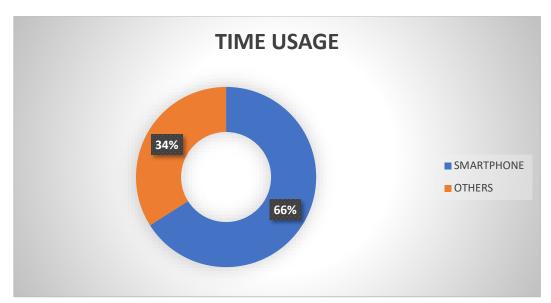


Figure 1: Distribution Of Time Usage On Smartphone And Others.

66.4% Of Adolescents Spent Four Or More Hours Per Day On Their Phones. Globally, The Prevalence Of Smartphone Addiction Is Varying From 2.4% To As High As 60.3% Among Adolescents And School-Going Children.

India Is One Of The Largest And Fastest-Growing Markets For Digital Consumers, With 560 Million Internet Subscribers (Nearly 41%) In 2018, Second Only To China. The Average Indian Social Media User Spends 17 Hours On The Platforms Each Week, More Than Social Media Users In China And The United States.

Half Of India's Entry-Level Users For Smartphones Were Between 15 And 24 Years Old And Mostly Students. Chat, Video Streaming, Browsing, Social Networking, And Image Apps Were The Most Engaging And Account For More Than 50% Of The Total Time Spent On Smartphones. India Has The Highest Number Of Adolescents (253 Million) And They Constitute One-Fifth Of The Indian Population And 22% Of Them Live In Urban Were As.

Like A Disease That Spreads Through The Air, Addiction To Smartphone Is Spreading Across The Globe. 87% Of Smartphone Users Check Their Devices Within An Hour Of Going To Sleep Or Waking Up. Smartphone Addiction Is A Growing Problem Worldwide.

According To A Study By The Pew Research Center, 96% Of Americans Own A Smartphone, And 77% Of Those People Say They Use Their Phone Almost Constantly. This Level Of Use Can Lead To A Number Of Problems, Including Anxiety, Depression, And Sleep Deprivation. The Age Group Of 25-34 Is Found To Have The Highest Smartphone Usage Rate Of 62%. 50% Of Android Smartphone's And 43% Of Apple Iphone Users Were Younger Than 34 Years.

53% Of Smartphone Users Were Male And 47% Were Female. Indian Teens Were Currently Driving Smartphone's Market In India. The Age Groups 16-18 Years Using Smartphone's Have Shown A Rapid Rise From 5% In 2012 And 25% In Early 2014. Recently In 2018, There Were Around "51



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Million" Smartphone Users In Urban India And Rate Of Rise From Year 2015 Was 90%. Worldwide Statistics Of Smartphone Addiction Graphical Representation Shown Below:

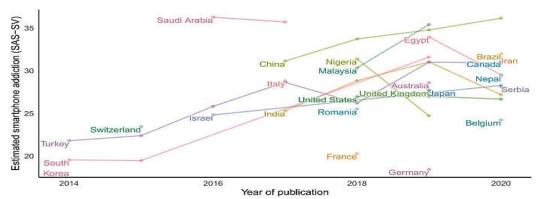


Figure 2: Distribution Of Estimated Smartphone Addiction

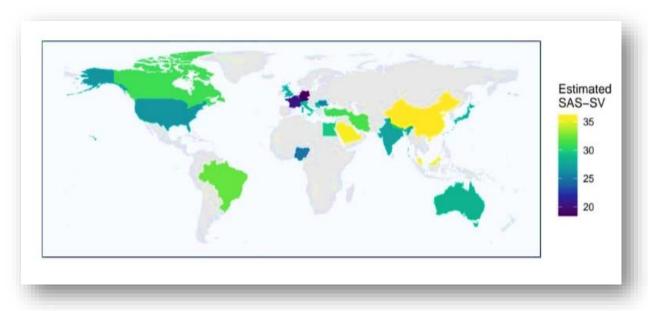


Figure. 3: Distribution Of Worldwide Estimation Of Sas –Sv

In Classroom, Students Engage In Surfing Web, Social Networking, Checking Emails And Text Messages And Consequently Pay Less Attention To Their Lessons. The Use Of Smartphone Is Gradually Becoming A Compelling Learning Tool Used To Enhance Teaching And Learning In Distance Education. Its Usage Ensures Flexible Course Delivery, Makes It Possible For Learners To Access Online Learning Platforms, Access Course Resources And Interact Digitally (According To Raza,2020). But In Youth And Especially In Students, Smartphone Addiction Is Getting Higher Due To Over Dependency On Technology In Every Aspect, Therefore It Is Required To Have Consistent And Complete Research Of Whether Smartphone Addiction Is Beneficial For The Students Or Does It Influence Negatively On Their Academic Performance.

Smartphone Use Has Greatly Increased In Recent Days, And Most Of The Daily Tasks Were Done Through These Devices. As A Result, Long Time Use May Involve Bad Posture That May Result In Musculoskeletal Pain. Therefore, It Is Important To Evaluate The Association Between



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Addiction/Overuse Of Smartphones And Musculoskeletal Pain. Aim: To Determine The Prevalence Of Addictive/Overuse Of Smartphones Among Medical Students And To Investigate If There Is An Association Between Smartphone Addiction And Musculoskeletal Pain. Method: A Cross-Sectional Study Conducted At Qassim University, Medical College. The Smartphone Addiction Scale Short Version (Sas-Sv) Was Used To Measure The Level Of Smartphone Addiction While The Nordic Musculoskeletal Questionnaire (Nmq) Was Utilized To Evaluate The Musculoskeletal Pain. Results: The Prevalence Of Smartphone Addiction Among Medical Students Was Relatively High (60.3%). The Most Frequent Pain Related To Smartphone Addiction Was In The Neck (60.8%), Followed By Lower Back (46.8%), Shoulder (40.0%). The Academic Year Level Was Statistically Associated With The Level Of Smartphone Addiction. Moreover, We Found A Significant Relationship Between Musculoskeletal Pain And Smartphone Addiction At Certain Body Regions, Neck, Wrist/Hand And Knees, Other Musculoskeletal Parameters Included In The Test Were Found To Have No Statistically Significant Association.

As Defined By The American Optometric Association, The Term "Digital Eye Strain" (Des) Refers To A Set Of Vision And Ocular Disorders Caused By Extended Use Of Digital Devices. Des Can Affect Anyone Who Spends A Substantial Amount Of Time Focused On Digital Screens, Whether For Business Or Enjoyment, Due To The Rising Usage Of Digital Screens In Everyday Technology.

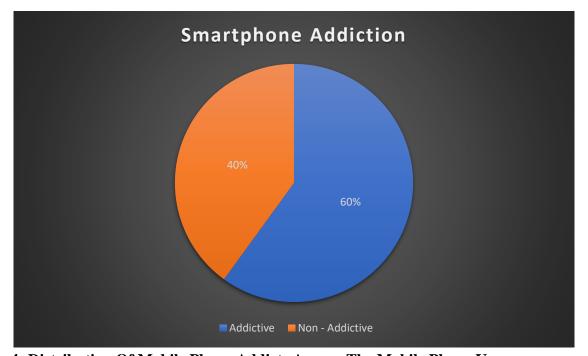


Figure. 4: Distribution Of Mobile Phone Addicts Among The Mobile Phone Users.

Calculation Of Smartphone Addiction Was Based On Smart Addiction Scale (Sas-Sv) Short Form Developed By Kwon. Paul, Baker & Cochran (2012) Examined Academic Performance And Student Characteristics, Time Management And Use Of Social Media. The Results Show Negative Relationship Of Student Characteristics, Time Management And Use Of Social Media On Academic Performance Of The Students.



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Smartphone Addiction Is A Real Problem That Can Have Serious Consequences. People Who Were Addicted To Their Smartphones May Find It Difficult To Focus On Anything Else, And They May Neglect Their Relationships And Other Responsibilities. They May Also Experience Anxiety And Depression When They Were Not Using Their Phones.

Whatever The Problem May Be, Developing A Proper Understanding Of It And Examining Its Current State Will Lead To A Solution.

1.8 Conceptual Framework:

Conceptual Framework Provides The Investigator The Guide Line To Proceed In Attending The Objectives Of The Study On The Theory. It Is Scientific Representation Of The Steps Activities And Outcomes Of The Study.

Conceptual Framework Selected For This Study Is **Roy's Adaption Model** Developed By Callista Roy And Heather A. Andrews.

The Roy's Adaptation Model Has 5 Elements Person, Goal Of Nursing, Nursing Activities, Health And Environment, Persons Were Viewed As Living Adaptive Systems Whose Behavior May Be Classifies As Adaptative Or Ineffective.

The Process Of Developed Structured Teaching Program Includes Preparatory Phase As Input, The Implementory Phase As Through Process And The Evaluation And Feedback Of The System As Output.

Input:

Input Is Considered As Assessment Of Effectiveness Of Structured Teaching On Overcoming Smartphone Addiction.

Through Process:

Through Process Is Providing Information About Smartphone Addiction, Here The Investigator Implements Questions To Students About Smartphone Addiction And Taught About Risk Factors, Cause And Preventive Techniques Of Smartphone Addiction.

Output:

Output From A System Is Energy, Matter Or Information Given Out By The System As A Result Of Its Process. In This Study The Result Gained As Effectiveness Of Structured Teaching By Level Of Smartphone Addiction.



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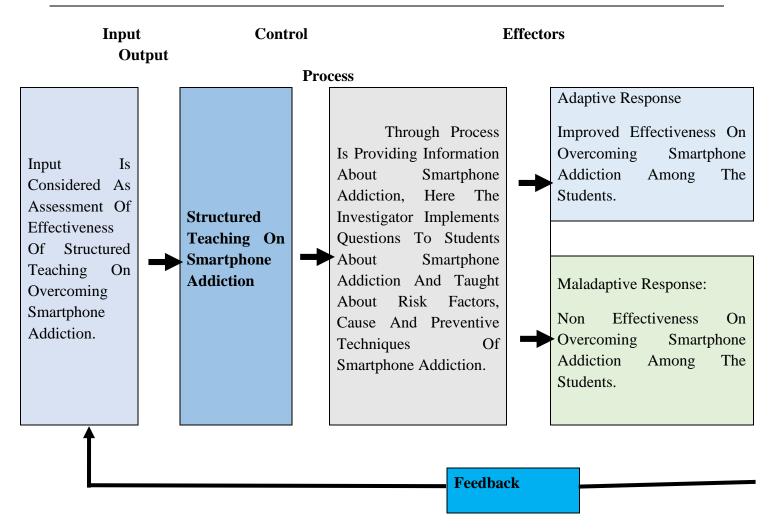


Fig. 5: Conceptual Framework – Roy's Adaptation Model

Chapter – Ii

Aims And Objectives

2.1. Title

Assess The Effectiveness Of Structured Teaching Programme On Overcoming Smartphone Addiction Among I Year B.Sc. Nursing Students At College Of Nursing, Chengalpattu Government Medical College, Chengalpattu

2.2 Statement Of The Problem:

"A Study To Assess The Effectiveness Of Structured Teaching Programme On Overcoming Smartphone Addiction Among I Year B. Sc. Nursing Students At College Of Nursing, Chengalpattu Government Medical College, Chengalpattu"



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2.3 Aim Of The Study

To Determine The Effectiveness Of Video Assisted Teaching Intervention On Level Of Mobile Addiction Among Nursing Students

2.4 Objectives:

- ➤ To Assess The Pre-Test Level Of Smart Phone Addiction Among B.Sc. Nursing 1st Year Students In Study Group And Control Group.
- To Compare The Pretest And Posttest Level Of Smartphone Addiction Among 1st Year B.Sc. (Nursing) Students In The Study Group.
- ➤ To Evaluate The Effectiveness Of Structured Teaching Program (Stp) Intervention Of Experimental Group.
- ➤ To Find Out The Associate Between Level Of Smart Phone Addiction With The Selected Socio Demographic Variable Among 1st Year B.Sc. (Nursing) Students College Of Nursing, Chengalpattu Government Medical College, Chengalpattu.

2.4 Operational Defintion:

Assess: In This Study Assess Refers To Detection Of Smart Phone Addiction Level In 1st Year B.Sc Nursing Students.

Effectiveness: It Refers To Evaluate The Structured Teaching Program (Stp) By Assess The Level Of Addiction In Pretest And Posttest As Experienced By Adult Boys And Girls Were Measured By Using Likert Scale.

Smartphone Addiction: In This Study It Refers To Structured Training Program Developed By The Student Researcher Which Consists Of 5 Sessions Include Introduction, Rapport Establishment, By Applying Likert Scale, Communication And Building Social Relationships Through Group Discussion, Seminar, Coping Strategies Techniques, Evaluation And Conclusion. Each Session Last For 40mints/Day Once Alternative Day For One Week

Adult Boys And Girls: In This Study It Refers To Adult Boys And Girls Of Age 17-18.

College: Adult Girls And Boys Who Were Studying B.Sc. (Nursing) First Year Selected From College Of Nursing. Chengalpattu Government Medical College, Chengalpattu

2.5 Hypothesis:

H1: There Will Be Statistically Significant Difference Between Pre-Test And Post-Test Scores Of Mobile Phone Addiction In Experimental Group.

H2: There Will Be Statistically Significant Association Between Post-Test Levels Of Raising Mobile Phone Addiction And Selected Socio Demographic Variables.



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2.6 Assumptions:

- ➤ Knowledge Of Mobile Phone Addiction Can Effectively Understand By Adolescent Nursing Students.
- ➤ Helps Researchers To Evaluate The Effectiveness Of The Structured Teaching Program (Stp) Interventions.
- ➤ Adolescent Nursing Students Will Gain Adequate Knowledge Regarding Smart Phone Addiction.
- > Provide Valuable Insight Into Addiction Causes.

2.7 Limitations:

- ➤ The Study Is Limited To The Students Of Adolescent Nursing Students In 1st Year.
- ➤ The Study Is Limited To The Students Who Were Not Having Smart Phone.

Chapter Iii

Review Of Literature

A Review Of Literature Is An Account Of What Has Been Already Established Or Published On A Particular Literature Review Research Topic By Accredited Scholars And Researchers.

-University Of Toronto, 2001.

Savita Pardhi' Et Al (2022) Conducted A Quasi-Experimental Study To Assess Effectiveness Of Structural Teaching Programme On Knowledge Regarding The Prevention Of Smartphone Addiction Among Nursing Students. 60 Sample Collected By Using Non-Probability Convenient Sampling Questionaries The Date Was Collected Through Pre-Test And Post-Test And It Was Analyzed By Both Descriptive And Inferential Statistics. The Results Of The Study Reveals That Pretest Mean Score Was 14.60 (24.33%) And Mean Score For Post-Test Was 21.65 (36.08%) Thus Knowledge On Prevention Of Smartphone Addiction Can Be Improved Through Teaching.

Ramuk' Et Al (2019) Conducted A Quasi-Experimental Study To Assess The Effectiveness Of Organized Teaching Programme On Knowledge Regarding Hazards Of Using Mobile Phones Among High School Student 50 Samples Collected By Using Convenient Sampling Questionaries. The Data Was Collected Through Pre-Test And Post-Test And It Was Analyzed By Percentage Was Calculated Both Pretest And Posttest. The Results Of The Study Reveals That The Pretest Mean Knowledge Score Is 70% And Mean Post-Test Knowledge Score Is 72% Thus Knowledge On Hazards Of Mobile Phone Can Be Improved By Structural Teaching Programme.

Ms. Sunita Singh' Et Al (2022) Conducted A Quasi-Experimental Study To Assess The Effectiveness Of Information Booklet On Mobile Phone Addiction, Health Hazards Of Mobile Phone Addiction And Prevention Of Mobile Phone Addiction Among B.Sc. (N) First Year Student's 40 Samples Collected By Using Random Structure Sampling Questionaries. The Date Was Collected Through Pretest And Posttest And It Was Analyzed By Quantitative Approach The Results Of The Study Reveals That The Pretest Knowledge Score Is 10.5 And Posttest Knowledge Score Is 20.7 Thus



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Knowledge Regarding Mobile Phone Addiction, Health Hazards Of Mobile Addiction And Prevention Of Mobile Phone Addiction Can Be Improved Through Structured Teaching.

Vivek Arun Kumar' Et Al (2019) Conducted A Cross-Sectional Study To Assess The Prevalence Of Smart Phone Addiction And Its Effects On Sleep Quality Among Medical Students. 150 Samples Collected By Using Smartphone Addiction Scale-Short Version. The Data Was Collected Through Pittsburgh's Sleep Quality Index. The Results Of The Study Reveals That Poor Sleep Quality In 77(51.3%) Thus The Findings Support Screening For Smartphone Addiction Which Will Be Helpful In Early Identification And Prompt Management.

Anuradha Davey' Et Al (2020) Conducted A Study To Assess Gender Differential For Smart Phone Addiction And Its Predictors Among Adolescents Phone Addiction And Its Effects On Self-Control Via Smartphone Addiction In Cbse Schools Students 400 Samples Collected By 5 Structured Scale I) The Phubbing Scale, Ii) Adapted Mobile Phone Use Habits Scale, Iii) The Facebook Intrusion Questionaries, Iv) Internet Addiction Scale And V) The Brief Self-Control Scale And It Was Analyzed By Compatible Model, The Results Of The Study Reveals That Male Students Were More Phubbed (53%) That Female Students (25%) But The Use Of Internet Addiction Is More Inn Female Students (48%) Than Male (33%) Male Students Have Tendency To Be More Phubbed, And Female Students Were More Internet Addicted. Self-Controlling Behavior Was Less In Females That Their Counterparts' Male Students And So Were More Addicted To Smart Phone.

Neha Bharti' Et Al (2019) Conducted A Pre-Experimental Study To Assess The Effectiveness Of Structural Teaching Programme On Knowledge Regarding Health Hazards Of Using Mobile Phone Among College Students' 60 Samples Collected By Using Self-Structured Knowledge Questionnaire The Data Was Collected And Analyzed By Inferential And Descriptive Statics. The Results Of The Study Reveals That Pretest Knowledge Score Is (21.6%) And Posttest Knowledge Score Is (51.6%) Thus Knowledge Regarding Health Hazards Of Using Mobile Phone Can Be Improve Through The Structured Teacing.

Arturo Garlia- Santillan' Et Al (2020) Conducted A Descriptive Study To Assess The Addition To The Smartphone In High School Students' 184 Samples Collected By Using Smart Phone Addiction Scale-Short Version. The Data Was Collected And Analyzed Using Cronbach's Alpha Index. The Results Of The Study Reveals That The 68% Of Variance Was Addicted To Smartphone.

Mohadesh Khoshgoftar' Et Al (2019) Conducted A Quasi-Experimental Study To Assess The Effect Of Educational Intervention Based On Health Belief Model To Decrease And Prevent Mobile Addiction Among Female High School Students, 112 Samples Collected By Using Randomly Assigned The Data Was Collected By Health Belief Model Construct Were Measured By Self-Respect Questionnaires. The Results Of The Study Reveals That Man Score (56 Students) Mobile Phone Addiction Among The Intervention Group Students Was Decreased And Control Group Students (56) The Score Of Mobile Phone Addiction Was Increase (P<0.05)

Hsien Yuvan Lane' Et Al (2021) Conducted And Descriptive Study To Assess The Smart Phone Addiction Among Adolescents And Associated Psychological Health Outcomes 422 Sample Collected By Sleep Quality Index, Tridimensional Personality Questionnaire, It Was Analyzed By



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Descriptive Statistics. The Results Of The Study Reveals That 60% Of People Psychological Discomfort And Poor Sleep Quality Were Highly Associated With Smart Phone Addiction.

Anna Maria' Et Al (2021) Conducted And Descriptive Study To Assess The Smart Phone Addiction Among Adolescents And Associated Psychological Health Outcomes, 240 Samples Collected By Using Social Anxiety Scale, Self-Developed Questions. The Data Was Collected From The Age Of 18-25 Years Using 12 Items Questionaries And It Was Analyzed By The Cross-Sectional Method. The Results Of The Study Reveals That 50% Male Were Affected With Psychological Health Outcome Due To The Use Of Smartphone.

Nayak [2018] Conducted A Quantitative Research Study To Determine The Addiction Of Mobile Phones On Students' Academic Performance, Impact Of Gender And Student Relationship On Usage Off Mobile Phone Among Students Of Higher Education.429 Sample Was Collected By Using Likert Scale Questionnaire. The Data Was Collected Through The Three Phases (First, Second, And Third Face) And It Was Analyzed By Statistical Softwwere Spss_21. The Results Of The Study Revealed That The Usage Is More In The Case Of Females Than Males. However, Effect On Performance Is Found To Be Severe In Case Of Males, Apart From Behavioral Changes Female Students Were Found To Have Hardly Effect Of Smart Phone Addiction, Unlike The Male Who Neglect Work And Feel Anxious.

Javier Cachon-Zagalaz Et Al [2020] Investigated A Descriptive Study To Assess The Use Of Smartphone And Self-Concept In University Students. According To The Gender Variable Among The Students Of Primary Education. 253 Sample Was Collected (106 Men 147 Women) By Using Questionnaire [A Sociodemographic Questionnaire, Self-Concept Form 5 - Questionnaire (Af-5), Questionnaire On Cell Phone Related Experience (Crem) And It Was Analyzed By Spss 22.0 (Ibm Corps, Armon K, Ny, Usa) Statistical Program. The Result Shows That There Is Existence Of Significant Difference Between Both Gender In Academic, Emotional And Social Dimensions Of Self-Concept With Women Showing High Academic Self-Concept And Men Showing An Emotional And Physica One.

Zeyang, Yang & Asbury Et Al (2019) Conducted A Descriptive Statistic To Know An Exploration Of Problematic Smartphone Use Among The Chinese University Students Associated With Anxiety, Academic Procrastination, Self-Regulation And Subjective Well-Being, Sample Was 475 Undergraduate Students By Using Smartphones Addiction Scale - Short Version, Academic Emotions Questionnaire, And Self-Regulation Scale. Data Analysis Was Adopted Using Amos Version 23. The Results Show That Over All The Data From 475 Participants Were Suitable For Further Analysis.

Han And Jeong (2018) Conducted A Quasi-Experimental Study To Assess The Effect Of Smartphones Use By College Students On Academic Performance Among The College's Students From Top Ranked Universities In South Korea. Sample Was Collected From 2482 Student (1559 Female And 923 Males). Questionnaire Technique Has Been Used To Collect Data. The Result With Respect To College Students Shows That Smartphones Self-Efficacy And Behavioral Intention Have Positive Relationships With Students' Academic Performances.



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Oluwafemi J. Olukala Et Al (2021) Conducted A Study To Assess The Effect Of Smartphone Addiction On Learning Among The College Students. Sample Was 1,47,943 Students From 16 Countries. Meta - Analysis Was Used By Problematic Mobile Phone Usage, Excessive Smart Phone Use And Mobile Phone Dependence. The Results Suggest That Greater The Use Of Phone While Studying, The Greater Negative Impact On Leaning And Academic Achievement, The Skills And Cognitive Abilities Needed For Students' Academic Success And Leaning Were Negatively Impacted.

Beranuy Et Al. (2009) Investigated The Reason Of Excessive Use Of Smart Phone And Internet And Its Relationship With Metal Disorder And Psychological Distress Among 365 Undergraduate Students In Universities Of Spain Through 20-Items, 4 Point-Likert Scale Questionnaires. The Results Show Significant Relationship Between Psychological Distress And Excessive Use Of Mobile Phone And Internet.

May And Eider (2018) Conducted Experimental Research To Determine The Relationship Of Media Multitasking And Academic Capacities Of College Learners. The Dependent Variables Of This Study Were Gpa, Test Performance, Recall, Reading Comprehension, Note- Tasking, Self- Regulation And Efficiency And Independent Variable Is Academic Performance. The Data Was Collected From 361 College Students. Questionnaire Technique Is Used To Analyze To Relationship Between Media Multitasking And Academic Tasks. The Result Shows That Media Multitasking Interferes With Attention And Working Memory, Negative Affecting Gpa, Test Performance, Recall, Reading Comprehension, Note- Taking, Self-Regulation And Efficiency.

Rashid And Ashar (2020) Examined The Qualitative Research To Assess The Path Model With The Use Of Technology, Self-Learning And Academic Performance Among 761 Students' Undergraduate Students Through Online Survey Scales: Media And Technology Usage And Attitude Scale (Mtuas) And Rating Scale Of Self-Directed Learning (Srssdl) And Utrecht's Work Engagement Scale. Data Was Analyzed By Personal Email System Of University. Academic Performance Was Measured Through Self-Reported Grace Points Average (Gpa). The Result Shows That Student Engagement And Self-Directed Learning Has A Positive Relationship With The Use Of Technology While There Is Insignificant Relationship Between Use Of Technology And Academic Performance Of The Students.

Wentworth And Middleton [2018] Analyzed The Effect Of Technology Usage On Academic Performance. Technology Usage Has Been Used As A Dependent Variable And Academic Performance As An Independent Variable. Data Was Collected From 438 Student In Usa. Questionnaire Technique Has Been Used To Analyze The Relationship. The Results Show A Negative Relationship Between Technology Use And Academic Performance. In These Results Most Of The Respondents Were Women.

Hong Et Al [2019] Investigated Hypothetical Model To Determine The Relationship Between Smartphone Use And Subjective Wellbeing Among 495 Undergraduate Students. Samples Were Selected As 266 Males And 229 Females. Data Were Collected By Using Questionnaires [Satisfaction With Life Scale, Irrational Procrastination Scale]. Data Was Analyzed By Descriptive Statistics For Each Scale. The Results Show That 495 Participants Wellbeing Is Related To Smartphone Use.



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Sinsomsack N. And Kulachai W. (2018) Thailand Studied The Impact Of Smartphone Addiction. The Objective Of This Study Was To Examine Smartphone Addiction Among High School Students And Its Impacts. The Data Were Collected From 341 High School Students In The Eastern Region Of Thailand. The Technique Used For Data Collection Was Stratified Random Sampling. The Result Of The Study Shows That Smartphone Addiction Had A Positive Impact On Mood Disorders. It Also Caused A Negative Impact On Health, Family Relationship, Social Relationship And Academic Performance Of The High School Students.

Domoff, Et Al. (2019) Studied Addictive Phone Use And Academic Performance In Adolescents. The Study Was Carried Out On 641 Adolescents. The Study Aimed To Develop A Reliable And Valid Measure To Addictive Phone Use And To Examine The Association Between Addictive Phone Use And Academic Performance In Adolescents. It Was Found That The Measure Of Addictive Phone Use Addictive Patterns Of Use Scale (Apu) Had Strong Psychometric Properties And Associated With Hours Of Social Media Use And Media Multitasking. The Smartphone Dependency May Be A Distinct Risk Factor For Poor Academic Performance.

S. Haripriya 2019/India, Carried Out A Study With A Sample Of 113 People, Two Scales Were Used:" Pittsburg Sleep Quality Index And International Physical Activity Questionnaire". Affected Adolescence Must Be Educated And Warned Properly About The Negative Effects Of Problematic Smartphone Use. The Results Were Ensured That Participants Had Less Physical Activity, Poor Sleep Quality.

Bernary Et Al (2019) Investigated The Reason Of Excessive Use Of Smartphone And Internet And Its Relationship With Mental Disorder And Psychological Distress Among 365 Undergraduate Students Of University Of Spain Through Experimental Method With 20 Items, 4 Point-Likert Scale Questionnaire. The Results Show Significant Relationship Between Psychological Distress And Excessive Use Of Mobile Phone And Internet.

Kawasaki Et Al (2019) Investigated The Depends Of Thai University And High School Students On Smartphone Addiction. A Survey Form (Smartphone Addiction Questionnaire) Was Distributed To 181 Female And 177 Male Thai University Students And 240 Female And 140 Male Thai High School Students. The Factor Analysis Of Female High School And University Students Were Confirmed A Heavy Dependence On Cellular Phones Compwered To The Male Students Of Thai University And High School Students.

Puspita A.R, & Rohedi.D (2018) Studied The Impact Of Internet Use For Students. The Study Reveals That Internet Has A Negative Impact On The Students Because It Becomes An Addiction. The Use Of The Internet Is More Likely To Have Negative And Less Support In Learning Activities. The Data Was Collected From 120 Respondents Who Use The Internet For Social Media, Online Gaming Activity, Watch Youtube. It Has Been Found That Very Few I.E.,34.17% Rwerely Use The Internet To Learn And Seek Information.



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Daoud, Et Al., (2020) Presented A Systematic Review Of Literature That Surveys The Educational Value Of The Internet In The Home For School Aged Children. A Range Of Positive, Negative And Neutral Correlations Or Results Of Home Internet Use Were Found Out Across The Three Functions Of Education-Academic Achievement And Skills, Developing The Individual And Socialization. Overall, There Were Significantly More Positive Correlations Reported. The Study Concluded That There Is Educational Value In Home Internet Use And The Value Is Influenced By The Nature Of Online Activities.

Hou Et Al., (2019) Carried Out A Study On Social Media Addiction, Its Impact, Mediation And Intervention. The Study Examined The Relations Of Social Media Addiction To College Students" Mental Health And Academic Performance; It Also Investigated The Role Of Self-Esteem As A Mediator For The Relations. The Result Of The Study Showed That The Addictive Use Of Social Media Was Common Among College Students And That It Was Negatively Associated With Mental Health And Academic Performance And The Role Of Self-Esteem As An Underlying Mechanism For The Relation Between Social Media Addiction And Mental Health.

Azizi, Et Al., (2019) Carried Out A Cross Sectional Study To Find Out The Relationship Between Social Networking Addiction And Academic Performance In Iranian Students Of Medical Sciences. 360 Students Were Selected As Sample Through Stratified Random Sampling And Personal Information Form And The Bergen Social Media Addiction Scale Was Used To Collect Data From The Students. The Result Of The Study Revealed That The Social Networking Addiction Of The Students Was At Moderate Level And It Was Found That The Male Students Possess A Higher Level Of Addiction As Compwered To The Female Students. There Was A Negative And Significant Relation Between The Overall Use Of Social Networks And Academic Performance Of Students.

Ghosh P. (2020) Studied Smartphone Addiction: New Disorder Or Just A Hype. The Paper Discussed The Consequences Of The Use Of Smartphone. The Paper Also Highlighted The Risk Factors For Developing Smartphone Addiction. Academic Performance, School Satisfaction, Self-Esteem, Family Supports Were All Negatively Associated With Smartphone. The Researcher Also Collected The Literature Review Based On Some Other Related Studies.

Chapter Iv

Research Methodology

This Chapter Deals With The Methodology Adopted For The Study And Includes The Description Of Research Approach, Design, Settings, Population And Sample Size, Sampling Technique, Criteria For Sample Selection Instruments For Data Collection.

4.1 Research Approach:

Quantitative Research Approach



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4.2 Research Design:

The Research Design Selected For The Study Was Experimental Design- Quasi Experimental Design With Manipulation And Control Group. Intervention Given For Experimental Group-Structured Model Teaching To Overcome Smartphone Addiction

4.3 Variables:

- **4.3.1 Independent Variable:** Smartphone Addiction Inventory.
- **4.3.2 Dependent Variable:** Smartphone Addiction.
- **4.3.3 Demographic Variables:** Age, Type Of Family, Sex, Education Of Parents, Occupation Of Parents, Bread Winner Of The Family, Werea Of Residence, Type Of Smartphone.

4.4 Settings Of The Study:

The Study Setting Was Conducted At College Of Nursing, Chengalpattu Government Medical College, Chengalpattu. The Feasibility And Availability Of The Samples Were Reason For Selecting The Samples In This College. Duration Of The Study Is One Week (20/11/2023 To 25/11/2023).

4.5 Study Population:

Target Population: Adolescent Girls And Boys.

Accessible Population: The Accessible Population Of This Study Was Adolescent Girls And Boys Studying In B.Sc. Nursing First Year, College Of Nursing, Chengalpattu Government Medical College, Chengalpattu.

4.6 Sample:

The Samples Were First Year, B.Sc. Nursing From College Of Nursing, Chengalpattu Government Medical College, Chengalpattu Who Met The Inclusion Criteria Of Quasi Experimental Study.

4.7 Sample Size:

56 B.Sc. Nursing First Year Students Of College Of Nursing, Cmc, Chengalpattu Who Were Suitable For Experimental Study

4.8 Sample Technique:

Non- Probability Convenient Sampling Technique Was Adopted To Select The Samples. By Convenient Sampling Method, 28 Members In Study Group And 28 Members In Control Group Were Selected.

4.9 Criteria For Sample Selection:

Inclusion Criteria:



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- ➤ Adolescent Students Who Were Having Smartphones.
- Adolescent Students Who Were Available At The Time Of Study.
- Adolescent Students Who Were Interested To Reduce The Addiction On Smartphone.

Exclusion Criteria:

- ➤ Adolescent Students Who Were Not Having Smartphones.
- Adolescent Students Who Were Suffered From Physical Illness Or Problems.
- Adolescent Students Who Were Not Interested To Participate In This Study.
- > Students Who Were Not In The Age Group Of 17-18.

4.10 Research Tool And Techniques:

The Tool Consists Of Two Sections.

Section A: Sociodemographic Variables

Section B: Structured Questionaries On Smart Phone Addiction Inventory

4.11 Testing Of The Tool

4.11.1 Reliability:

The Reliability Of Measuring Tool Is A Major Criterion For Assessing Its Quality And Accuracy.

The Reliability Of The Tool Was Determined By Cronbach Alpha Coefficient Analysis. The Cronbach's Alpha Value For The Scale Is 0.904. Alpha Coefficient Should Be Greater Than 0.70 And Not Greater Than 0.94 For Perfect Reliability. Hence The Tool Was Found To Be Reliable To Conduct The Study.

4.11.2 Content Validity:

"Validity Is The Degree To Which An Instrument Measures What Is Intended To Measure". The Tool Is Validated By Experts For The Clarity, Relevance, Comprehensive And Appropriateness Of The Content. Based On Their Suggestion Reframing Of The Tool Was Made.

4.12 Data Collection Procedure:

The Entire Data Collection Procedure Was Carried Out For One Week. The Data Collection Was Carried Out In College Of Nursing, Chengalpattu Medical College, Chengalpattu After Getting Permission From The Principal Of College Of Nursing, Chengalpattu Medial College, Chengalpattu. The Study Population Was Adolescent Nursing Students Who Were Studying In 1st Year. The Sample Were Selected By Convenient Sampling Technique. Then 56 Students From 1st Year Were Selected As Samples. In That 28 Were Treated As Study Group And The Other 28 Considered As Control Group.

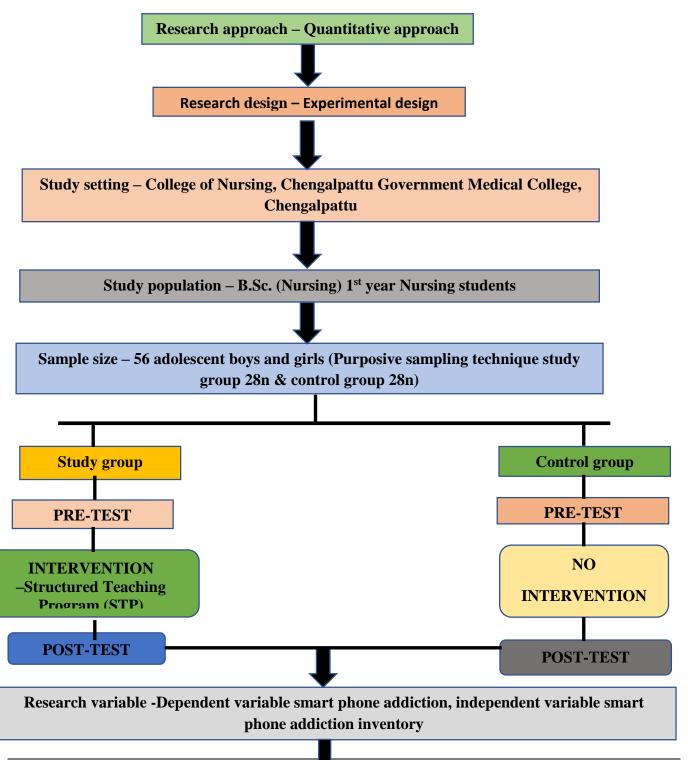
The Investigator Selected 56 Adolescent 1st Year Nursing Students As Per Inclusion Criteria And Exclusion Criteria Introduction Session About The Aim Of The Study, Importance And Purpose Of This Study Was Given To Both Groups. They Were Assured That The Details Will Be Kept Confidentially And Will Be Used For Research Purpose Only. Before The Tool Was Administered Some Informed



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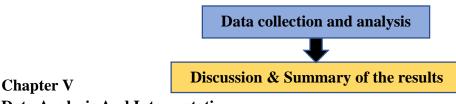
Discussions Were Made With Participation To Establish Rapport And To Discuss The Objectives Of The Day That They Would Be Relaxed And Easily Participate In The Study. Pre-Test Was First Planned For Control Group After Getting Informed Consent From Subjects, Pre-Test Was Conducted As First Day And Posttest Was Conducted After 4 Days Of Structured Teaching Program (Stp) Intervention To The Experiment Group.

Figure. 6: Schematic Representation Of The Study





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Data Analysis And Interpretation

This Chapter Represents The Analysis And Interpretation Of Data Collected From 56 Adolescents' Boys And Girls Studying In College Of Nursing, Chengalpattu Govt. Medical College And Hospital, Chengalpattu -01. Assessment Was Done By Using A Standardized Scale To Assess The Level Of Smartphone Addiction. The Data Was Analyzed According To The Objectives And Hypothesis Formulated For The Purpose Of This Study.

Analysis Is The Process Of Organizing And Synthesizing The Data In Such A Way That Research Questions Can Be Answered And Hypothesis Tested. The Purpose Of Analysis Is To Reduce The Data In An Intelligible And Interpretable Form, So That Relation Of Research Problem Can Be Studied And Tested. Analysis And Interpretation Of Data Collected From 56 Students Is Done Based On The Objectives And Inferential Statistics.

Organisation Of Data:

The Analysis Of The Data Has Been Organized And Presented Under The Following Headings:

- **Section A:** Description Of Frequency And Percentage Distribution Of Demographic Variables Of Study Group And Control Group.
- **Section B**: Assessment Of Pre-Test Level Of Smartphone Addiction In Study Group And Control Group.
- **Section C:** Assessment Of Post Level Of Smartphone Addiction In Study Group And Control Group.
- **Section D:** Assessment Of Effectiveness Of Structured Teaching Program (Stp) Among 1st Year B.Sc.
 - Nursing Students In Study Group And Control Group.
- **Section E:** Assess The Association Between Post-Test Levels Of Smartphone Addiction With Demographic Variables (Experiment).

Section A: Description Of Frequency And Percentage Distribution Of Demographic Variables Of Study Group And Control Group

Table 1: Reveals Distribution Of Demographic Variables Of Adolescent Boys And Girls In Study Group And Control Group.

Demographic Variables	Group	
	Experimental Control	



		N	%	N	%
Age Group	17 – 18	17	60.7%	17	60.7%
	18 – 19	9	32.1%	10	35.7%
	19 – 20	2	7.14%	1	3.57%
Werea Of Residence	Village	21	75%	19	67.8%
	Town	5	17.8%	5	17.8%
	City	2	7.14%	4	14.2%
Educational	No Formal Education	6	21.4%	6	21.4%
Qualification Of Father	Up To Hsc	18	64.2%	18	64.2%
	Under Graduate	3	10.7%	2	7.14%
	Post Graduate	1	3.57%	2	7.14%
Educational	No Formal Education	10	35.7%	8	28.5%
Qualification Of	Up To Hsc	17	60.7%	18	64.2%
Mother	Under Graduate	1	3.57%	1	3.57%
	Post Graduate	0	0%	1	3.57%
Monthly Family	Less Than 10,000	4	14.2%	10	35.7%
Income	10,001 – 25,000	12	42.8%	11	39.2%
	25,001 – 45,000	8	28.57%	2	7.14%
	Above 45,001	4	14.2%	5	17.8%
Father's Occupation	Agriculture And	2	7.14%	7	25%
	Technicians				
	Professionals	23	82.14%	15	71.5%
	Unemployed	2	7.14%	1	3.57%
	Others	1	3.57%	0	0%
Mother's Occupation	Housewife	25	89.2%	20	71.4%
	Daily Wages	1	3.57%	4	14.2%
	Professionals	2	7.14%	3	10.7%
	Others	0	0%	1	3.57%
Have Smartphone	Yes	28	100%	28	100%
	No	0	0%	0	0%
Have Basic Phone	Yes	0	0%	0	0%
	No	28	100%	28	100%
Type Of Recharge Pack	One Day Pack	0	0%	0	0%
	Monthly Pack	23	82.2%	23	82.2%
	Three Month Pack	5	17.8%	5	17.8%
	Annual Pack	0	0%	0	0%
Data Usage Per Day	1 Gb	20	71.4%	23	82.2%
	2 Gb	6	21.4%	5	17.8%
	5 Gb	1	3.57%	0	0%
	Wi-Fi	1	3.57%	0	0%
Hours Spent On	2 – 3 Hours	11	39.3%	20	71.4%
Smartphone Usage Per	4 – 5 Hours	11	39.3%	7	25%



Day	5 – 10 Hours	5	17.8%	1	3.57%
	10 – 12 Hours	1	3.57%	0	0%
Hours Spent On Sleep	4 – 6 Hours	10	35.7%	1	3.57%
Per Day	6 – 8 Hours	16	57.1%	10	35.7%
	8 – 10 Hours	1	3.57%	16	57.1%
	10 – 12 Hours	1	3.57%	1	3.57%
Hours On Smartphone	2 – 3 Hours	22	78.5%	6	21.4%
Usage During Night	3 – 4 Hours	4	14.2%	21	75%
	4 – 6 Hours	1	3.57%	1	3.57%
	More Than 6 Hours	1	3.57%	0	0%
Time Of Initiation Of	8 Pm	17	60.7%	4	14.2%
Smartphone Usage	10 Pm	10	35.7%	18	64.2%
During Night	12am	0	0%	6	21.4%
	1 Am	1	3.57%	0	0%

- In Analyzing Age Group Of The Adolescent Boys And Girls, Majority Of The Subjects 17 (60.7%) Were 17-18 Years, 9 (32%) Were 18-19 Years And 2 (7.14%) Were 19-20 Years In Experimental Groups. In Control Group 17 (60.7%) Were 17-18 Years, 10 (35.7%) Were 18-19 Years, 1 (3.57%) Were 19-20 Years.
- While Considering Residence; Majority Of The Subjects 21(75%) Were From Village,5(17.8%) Was From Town And 2(7.14%) Were From City In Experimental Group. In Control Group 19(67.8%) Were From Village,5(17.8%) Was From Town And 4(14.2%) Were From City.
- While Considering The Father's Education; Majority Of The Subject 18 (64.2%) Studied Up To Hsc, 6(21.4%) Has No Formal Education, 3(10.7%) Were Finished Ug And 1(3.57%) Finished Pg In Experimental Group. In Control Group 17(60.7%) Were Studied Up To Hsc, 6(21.4%) Has No Formal Education, 2(7.14%) Was Finished Ug And 2(7.14%) Were Finished Pg.
- While Considering The Mother's Education; Majority Of The Subject 17(60.7%) Were Studied Up To Hsc, 10(35.7%) Has No Formal Education And 1(3.57%) Was Finished Ug In Experimental Group. In Control Group 18(24.2%) Were Studied Up To Hsc, 8(28.5%) Has No Formal Education, 1(3.57%) Was Finished Ug And 1(3.57%) Were Finished Pg.
- While Considering Income Of The Family; Majority Of The Subjects 12(42.8%) Were Having 10,001-25,000, 8(28.57%) Were Having 25,001-45,000,4(14.2%) Was Having Above 45,001 And 4(14.2%) Were Having Less Than 10,000 In Experimental Group. In Control Group 11(39.2%) Were Having 10,001-25000, 10(35.7%) Were Having Less Than 10,000, 5(17.8%) Were Having Above 45,000 And 2(7.14%) Were Having 25,001-45,000.
- While Considering Father's Occupation; Majority Of The Subjects 23(82.17%) Were Doing Agriculture & Technicians, 2(7.14%) Were Professionals,2(7.14%) Was Unemployed And 1(3.57%) Were Other In Experimental Group. In Control Group 20(71.41%) Were Working As Technician And Agriculture, 7(25%) Were Professionals And 1(3.57%) Were Unemployed.



- While Considering Mother's Occupation; Majority Of The Subject Were 25(89.2%) Were Housewife, 2(7.14%) Were Professionals, 1(3.57%) Were Daily Wages In Experimental Group. In Control Group 20(71.4%) Were Housewife, 4(14.2%) Were Daily Wages, 3(10.7%) Were Professional And 1(3.57%) Was Other.
- While Considering Having Smartphone; Majority Of The Subjects 28(100%) Were Using Smartphone In Experimental Group And Control Group.
- While Considering Having Basic Phone; Majority Of The Subjects 28(100%) Were Not Using Basic Mobile Phone In Experimental And Control Group.
- While Considering Type Of Recharge Pack; Majority Of The Subjects 23(82.1%) Were Using Monthly Pack, 5(17.8%) Were Using 3 Months Pack In Experimental Group. In Control Group 23(82.1%) Were Using Monthly Pack, 5(17.8%) Were Using 3 Months Pack.
- While Considering Usage Of Data; Majority Of The Subject20 (71.4%) Were Use 1gb,6(21.4%) Was Use 2gb,1(3.57%) Was Use 5gb And 1(3.57%) Were Use Wi-Fi In Experimental Group. In Control Group 23(82.1%) Were Use 1gb And 5(17.8%) Use 5gb.
- While Considering Number Of Hours Spend On Phone; Majority Of The Subject 11(39.28%) Were Spent 2-3 Hours, 11(39.28%) Were Spent 4-5 Hours, 5(17.8%) Were Spent 5-10 Hours And 1(3.57%) Were 10-12 Hours In Experimental Group. In Control Group 20(7.14%) Were Spent 2-3 Hours, 7(25%) Were Spent 4-5 Hours And 1(3.17%) Was Spent 5-10 Hours.
- While Considering The Sleeping Hours; Majority Of The Subjects 16(57.1%) Were Sleep 6-8 Hours,10(35.7%) Was Sleep 4-6 Hours,1(3.57%) Was Sleep 8-12 Hours And 1(3.57%) In Experimental Group. In Control Group 16(57.1%) Were Sleep 8-10 Hours, 10(35.7%) Were Sleep 6-8 Hours,1(3.57%) Sleep 4-6 Hours And 1(3.57%) Sleep 10-12 Hours.
- While Considering Hours Spent On Night; Majority Of The Subjects 22(78.5%) Were Spent 2-3 Hours,4(14.2%) Was Spent 3-4 Hours,1(3.57%) Was Spent 4-6 Hours And 1(3.57%) Were Spent More Than 6 Hours In Experimental Group. In Control Group 21(75%) Were Spent 3-4 Hours,6(21.4%) Was Spent 2-3 Hours And 1(3.57%) Were Spent 4-6 Hours.
- While Considering Starting Time; Majority Of The Subjects 17(60.7%) Start At 8pm,10(35.7%) Was Start At 10pm And 1(3.57%) Were Start At 12am In Experimental Group. In Control Group 18(64.2%) Start At 10pm,6(21.4%) Was Start At 12am And 4(14.2%) Were Start At 8pm.

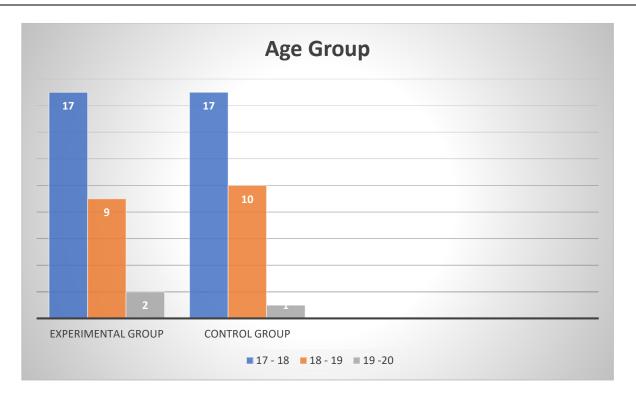


Figure. 7: Distribution Of Age Groups Of The Samples

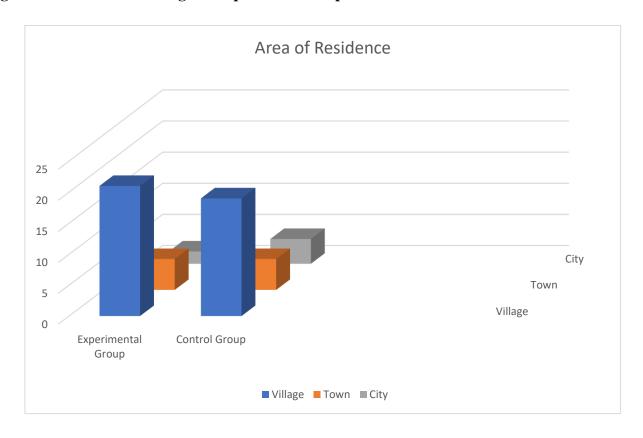
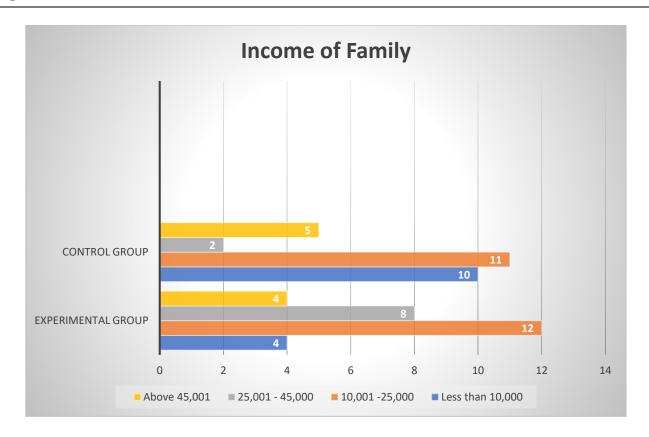


Figure. 8: Distribution of Werea Of Residence Of The Samples



Figur. 9: Distribution Of Family Income Of The Samples

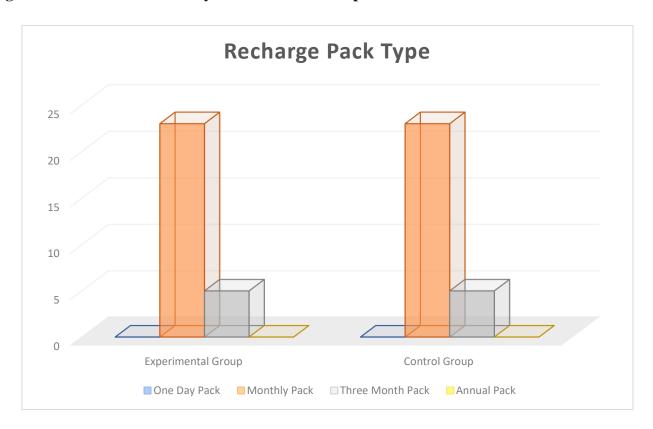


Figure. 10: Distribution Of Type Of Recharge Pack Of The Samples

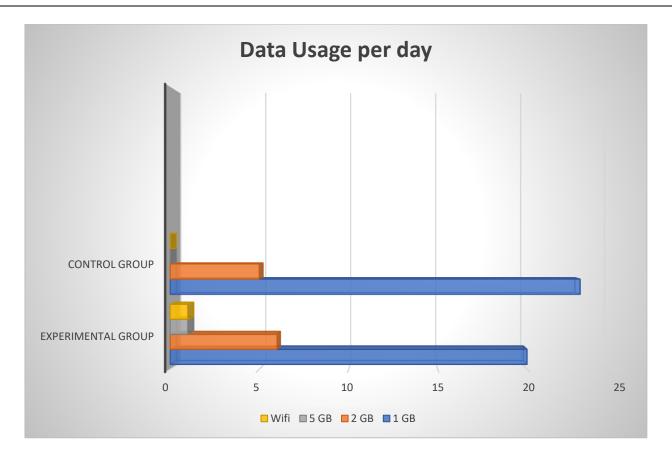


Figure. 11: Distribution Of Data Usage Per Day By The Samples

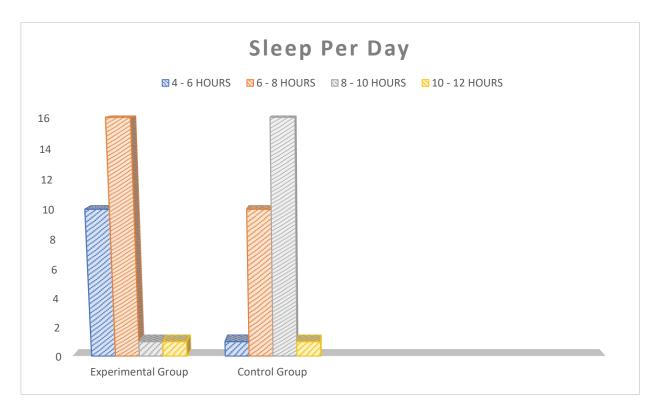


Figure. 12: Distribution Of Hours Of Sleep By The Samples Per Day



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Section B: Assessment Of Pre-Test Level Of Smartphone Addiction In Study Group And Control Group.

Table 2: Pre- Test Level Of Smartphone Addiction In Study Group And Control Group.

Pretest Level Experiment Group		up	Control Group	
Of Addiction	Frequency	Percentage	Frequency	Percentage
Non-Addictive	0	0	10	35.7
At Risk	5	17.8	18	64.28
Addictive	23	82.14	0	0

The Above Table-2 Shows The Pre-Test Level Of Smartphone Addiction Among 1st Year Bsc Nursing In College Of Nursing At Chengalpattu Govt Medical College And Hospital, Chengalpattu-01. Shows That Among 56 Samples The Study Finding Reveal That 0(0%) Students Non- Addictive, 5(17.8%) Students Were That Risk And 23(82.14%) Students Were Addictive To Smartphone In The Selected Samples Of Experiment Group. In Control Group 10(35.7%) Students Were Non-Addictive, 18(64.28%) Students Were At Risk And 0(0%) Students Were Addictive.

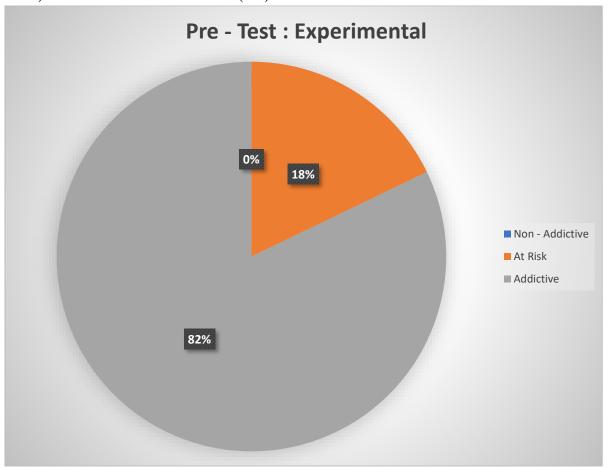


Figure. 13: Distribution Of Pre-Test Assessment Of Level Of Smartphone Addiction On Experimental Group



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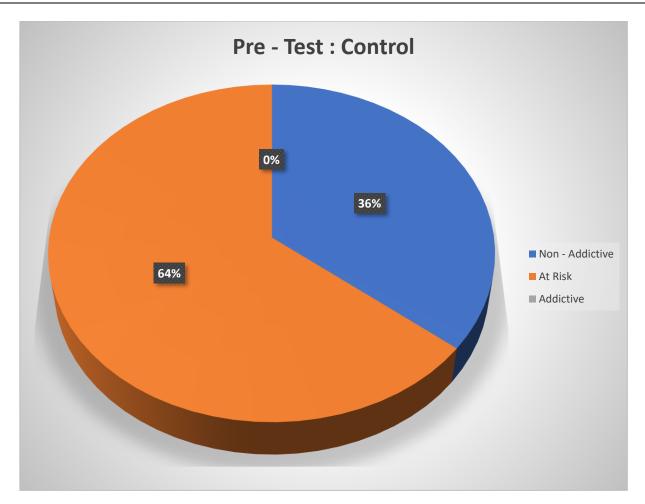


Figure. 14: Distribution Of Pre-Test Assessment Of Level Of Smartphone Addiction On Control Group

Section -C: Assessment Of Post-Test Level Of Smartphone Addiction In Study Group And Control Group.

Table 3: Post- Test Level Of Smartphone Addiction In Study Group And Control Group

Post-Test Level	Experiment Gro	up	Control Group			
Of Addiction	Frequency Percentage		Frequency	Percentage		
Non-Addictive	17	60.7	15	53.57		
At Risk	4	14.2	12	42.85		
Addictive	7	25	1	3.57		

The Above Table-3 Shows The Post-Test Level Of Smartphone Addiction Among 1st Year Bsc Nursing In College Of Nursing At Chengalpattu Govt Medical College And Hospital, Chengalpattu-01. Shows That Among 56 Samples The Study Finding Reveal That 17(60.7%) Students Non-Addictive, 4(14.2%) Students Were That Risk And 7(25%) Students Were Addictive To Smartphone In The Selected Samples Of Experiment Group. In Control Group 15(53.57%) Students Were Non-Addictive, 12(42.85%) Students Were At Risk And 1(3.57%) Student Is Addictive.



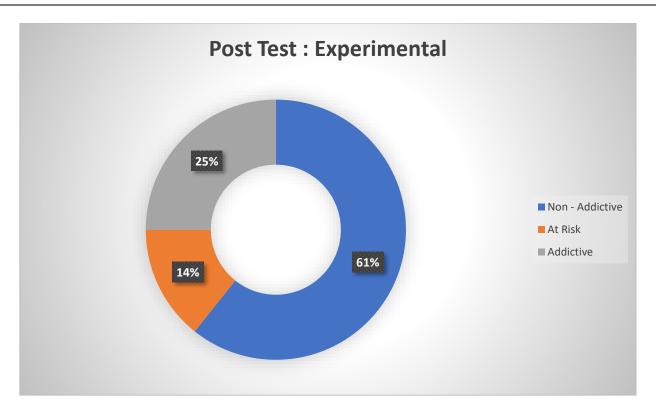


Figure. 15: Distribution Of Post Test Assessment Of Level Of Smartphone Addiction On ExperimentalGroup

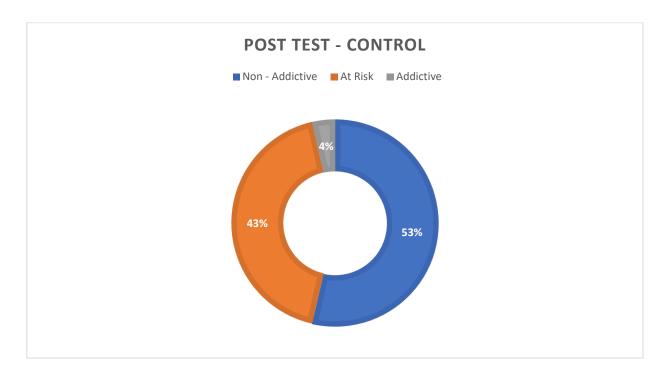


Figure. 16: Distribution Of Post Test Assessment Of Level Of Smartphone Addiction On Control Group



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Section D: Assessment Of Effectiveness Of Level Of Smartphone Addiction Among 1st Year Bsc Nursing Students In Study Group And Control Group.

Table 4: Comparison Of Pre-Test And Post-Test Level Of Smartphone Addiction

Level Of	Pre-Tes	t		Post-Test				
Smatphone Addiction			Control Group		Experiment Group		Control Group	
	N	%	N	%	N	%	N	%
Non-Addictive	0	0	10	35.7	17	60.7	15	53.57
At Risk	5	17.8	18	64.28	4	14.2	12	42.85
Addictive	23	82.14	0	0	7	25	1	3.57

The Above Table-4 Explains The Comparison Of Pre-Test And Post-Test Level Of Smartphone Addiction Among 1st Year Bsc Nursing In College Of Nursing At Chengalpattu Govt Medical College And Hospital, Chengalpattu-01. Shows That Among 56 Samples The Study Finding Reveal That In Experimental Group 0(0%) Students Non-Addictive, 5(17.8%) Students Were At Risk And 23(82.14%) Students Were Addictive To Smartphone In The Selected Samples Of Experiment Group, Experiment Group Results After The Intervention Were 17(60.7%) Students Non- Addictive, 4(14.2%) Students Were That Risk And 7(25%) Students Were Addictive. In Control Group 10(35.7%) Students Were Non-Addictive, 18(64.28%) Students Were At Risk And 0(0%) Students Were Addictive, After The Intervention Class Post-Test Results Were 15(53.57%) Students Were Non-Addictive, 12(42.85%) Students Were At Risk And 1(3.57%) Student Is Addictive.

Table-5: Comparison Of Pre-Test And Post-Test Level Of Smartphone Addiction.

Group	Variables	Pre-Tes	st Score	;	Post-Test Score		Differenc	'T'	Table	
		Mean	Sd	Mea	Mea	Sd	Mea	e In Mean	Valu	Valu
				n %	n		n	%	e	e
							%			
Experimen	Level Of	133.7	19.9	73.47	80.32	38.5	44.13	29.34	7.286	2.05
t	Smartphon	1	1			3				
Group	e Addiction									
Control		77.01	15.7	42.32	71.96	23.4	12.87	29.45	1.64	2.05
Group		4	0			3				

The Above Table-5 Reveals The Pre And Post-Test Score Of Smartphone Addiction. The Pre-Test Score In Experimental Group, Mean Score Was 133.71, Standard Deviation 19.91 And Mean Percentage 514.26%. In Control Group Mean Score Was 77.014, Standard Deviation 15.70 And Mean Percentage 296.20%.

The Post-Test Score In Experiment Group, Mean Score Was 80.32, Standard Deviation 38.53 And Mean Percentage 308.92%. In Control Group Mean Score Was 71.96, Standard Deviation 23.43 And Mean Percentage 276.76%. In Experiment Group, Difference In Mean Was 29.34%. In Control Group, Difference In Mean Was 29.45%.



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In Experiment Group, The Calculated 'T' Value 7.286 Is Greater Than Tabulated Value 2.05 At P< 0.05 (Degree Of Freedom Is 27) Results Shows That There Is Significant Difference Between Pre And Post Test Score. In Control Group, The Calculated 'T' Value 1.64 Is Lesser Than Tabulated Value 2.05 At P< 0.05 (Degree Of Freedom Is 27) Results Shows That There Is Significant Difference Between Pre And Post Test Score.

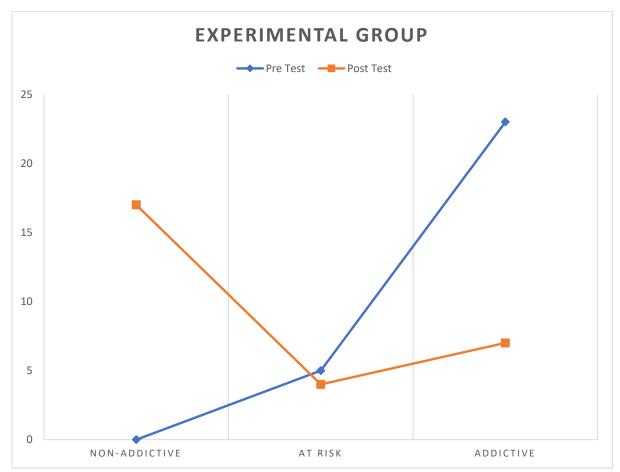


Figure. 17: Distribution Of Comparison Pre-Test And Post Test Assessment Of Level Of Smartphone Addiction On Experimental Group



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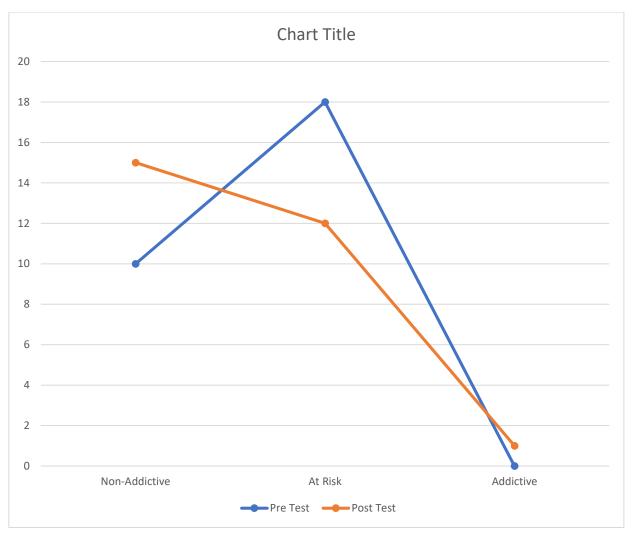


Figure. 18: Distribution Of Comparison Pre-Test And Post Test Assessment Of Level Of Smartphone Addiction On Control Group

Section -E: Assess The Association Betweenpost-Test Level Of Smartphone Addiction With Demographic Variables.

Table-6: Association Between Bsc Nursing Students' Post-Test Level Of Smartphone Addiction And Demographic Variables (Experiment).

			Level Of Smartphone Addiction							
S. No.	Demographic Vari	ables	Non - Addictive			At Risk		lictive		
			F	%	F	%	F	%		
1	Age Group	17 – 18	12	42.85	2	7.14	12	42.85		
		18 – 19	5	17.85	2	7.14	4	14.28		
		19 – 20	1	3.57	0	0	0	0		
2	Age Of Residence	Village	6	21.42	2	7.14	13	46.42		
		Town	1	3.57	2	7.14	2	7.14		
		City	0	0	0	0	2	7.14		



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3	Monthly Family	Less Than 10,000	2	7.14	1	3.57	1	3.57
	Income	10,001 – 25000	1	3.57	1	3.57	10	35.7
		25,001 – 45,000	2	7.14	1	3.57	5	17.85
		Above 45,001	2	7.14	1	3.57	1	3.57
4	Type Of Recharge	One Day Pack	0	0	0	0	0	0
	Pack	Monthly Pack	3	10.71	5	17.85	15	53.57
		Three Month Pack	1	3.57	2	7.14	2	7.14
		Annual Pack	0	0	0	0	0	0
5	Data Usage Per	1 Gb	3	10.71	3	10.71	14	50
	Day	2 Gb	0	0	3	10.71	3	10.71
		5 Gb	1	3.57	0	0	0	0
		Wi-Fi	0	0	1	3.57	0	0
6	Hours Spent On	4 – 6 Hours	2	7.14	4	14.28	4	14.28
	Sleep Per Day	6 – 8 Hours	2	7.14	2	7.14	12	42.85
		8 – 10 Hours	0	0	0	0	1	3.57
		10 – 12 Hours	0	0	1	3.57	0	0

The Level Of Smartphone Addiction In Students Is Associated With The Demographic Variable Such As Village As Area Of Residence, Family With Monthly Income 10,001 To 25,000, Monthly Recharge Pack In Smartphone, 1gb Data Usage Per Day And 6 To 8 Hours Of Sleep.

Chapter Vi

Discussion

This Study Deals With The Discussion Of The Results Of The Data Analyzed Based On The Objectives. The Purpose Of The Study Was "Assess The Effectiveness Of Structured Teaching Program On Smartphone Addiction Among 1st Year B.Sc. (N) Students At College Of Nursing, Cgmc, Chengalpattu".

The Sample Size For This Study Was 56 1st Year B.Sc. (N) Students. Pre-Test Was Conducted In Each Participant By Using Smartphone Addiction Inventory (Spai) Questionnaire. Structured Teaching Given For 30 Minutes, Post-Test Was Given After Intervention. The Samples Of The Study Were Taken As Experimental Group And Control Group By Non-Probability Convenient Sampling.

Experimental Group Was Given Intervention After Pre-Test And Control Group Was Given Only Pre-Test And Post-Test. The Results Of The Study Were Based On The Statistical Analysis.

6.1 Major Findings Of The Demographic Variables

• With The View Of Age Group; Majority Of The Subjects 17 (60.7%) Were 17-18 Years,9 (32%) Were 18-19 Years And 2(7.14%) Were 19-20 Years In Experimental Group. In Control Group 17(60.7%) Were 17-18 Years, 10(35.7%) Were 18-19 Years, 1(3.57%) Were 19-20 Years.



- While Considering Residence; Majority Of The Subjects 21(75%) Were From Village, 5(17.8%) Were From Town And 2(7.14%) Were From City In Experimental Group. In Control Group 19(67.8%) Were From Village, 5(17.8%) Were From Town And 4(14.2%) Were From City.
- With Considering The Father's Education; Majority Of The Subject 18 (64.2%) Studied Up To Hsc, 6(21.4%) Has No Formal Education, 3(10.7%) Were Finished Ug And 1(3.57%) Finished Pg In Experimental Group. In Control Group 17(60.7%) Were Studied Up To Hsc, 6(21.4%) Has No Formal Education, 2(7.14%) Was Finished Ug And 2(7.14%) Were Finished Pg.
- With Considering The Mother's Education; Majority Of The Subject 17(60.7%) Were Studied Up To Hsc, 10(35.7%) Has No Formal Education And 1(3.57%) Was Finished Ug In Experimental Group. In Control Group 18(24.2%) Were Studied Up To Hsc, 8(28.5%) Has No Formal Education, 1(3.57%) Was Finished Ug And 1(3.57%) Were Finished Pg.
- While Considering Income Of The Family; Majority Of The Subjects 12(42.8%) Were Having 10,001-25.000, 8(28.57%) Were Having 25,001-45,000, 4(14.2%) Were Having Above 45,001 And 4(14.2%) Were Having Less Than 10,000 In Experimental Group. In Control Group 11(39.2%) Were Having 10,001-25000, 10(35.7%) Were Having Less Than 10,000, 5(17.8%) Were Having Above 45,000 And 2(7.14%) Were Having 25,001-45,000.
- With Considering Father's Occupation; Majority Of The Subjects 23(82.17%) Were Doing Agriculture & Technicians, 2(7.14%) Were Professionals, 2(7.14%) Were Unemployed And 1(3.57%) Were Other In Experimental Group. In Control Group 20(71.41%) Were Working As Technician And Agriculture, 7(25%) Were Professionals And 1(3.57%) Were Unemployed.
- With Considering Mother's Occupation; Majority Of The Subject Were 25(89.2%) Were Housewife, 2(7.14%) Were Professionals,1(3.57%) Were Daily Wages In Experimental Group. In Control Group 20(71.4%) Were Housewife, 4(14.2%) Were Daily Wages, 3(10.7%) Were Professional And 1(3.57%) Was Other.
- While Considering Having Smartphone; Majority Of The Subjects 28(100%) Were Using Smartphone In Experimental Group And Control Group.
- While Considering Having Basic Phone; Majority Of The Subjects 28(100%) Were Not Using Basic Mobile Phone In Experimental And Control Group.
- While Considering Type Of Recharge Pack; Majority Of The Subjects 23(82.1%) Were Using Monthly Pack, 5(17.8%) Were Using 3 Months Pack In Experimental Group. In Control Group 23(82.1%) Were Using Monthly Pack, 5(17.8%) Were Using 3 Months Pack.
- While Considering Usage Of Data; Majority Of The Subject 20 (71.4%) Were Use 1gb, 6(21.4%) Were Use 2gb, 1(3.57%) Were Use 5gb And 1(3.57%) Were Use Wi-Fi In Experimental Group. In Control Group 23(82.1%) Were Use 1gb And 5(17.8%) Use 5gb.
- With Considering Number Of Hours Spend On Phone; Majority Of The Subject 11(39.28%) Were Spent 2-3 Hours, 11(39.28%) Were Spent 4-5 Hours, 5(17.8%) Were Spent 5-10 Hours And 1(3.57%) Were 10-12 Hours In Experimental Group. In Control Group 20(7.14%) Were Spent 2-3 Hours, 7(25%) Were Spent 4-5 Hours And 1(3.17%) Was Spent 5-10 Hours.
- While Considering The Sleeping Hours; Majority Of The Subjects 16(57.1%) Were Sleep 6-8 Hours,10(35.7%) Were Sleep 4-6 Hours,1(3.57%) Were Sleep 8-12 Hours And 1(3.57%) In



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Experimental Group. In Control Group 16(57.1%) Were Sleep 8-10 Hours, 10(35.7%) Were Sleep 6-8 Hours,1(3.57%) Sleep 4-6 Hours And 1(3.57%) Sleep 10-12 Hours.

- While Considering Hours Spent On Night; Majority Of The Subjects 22(78.5%) Were Spent 2-3 Hours, 4(14.2%) Were Spent 3-4 Hours,1(3.57%) Were Spent 4-6 Hours And 1(3.57%) Were Spent More Than 6 Hours In Experimental Group. In Control Group 21(75%) Were Spent 3-4 Hours, 6(21.4%) Were Spent 2-3 Hours And 1(3.57%) Were Spent 4-6 Hours.
- While Considering Starting Time; Majority Of The Subjects 17(60.7%) Start At 8pm, 10(35.7%) Were Start At 10pm And 1(3.57%) Were Start At 12am In Experimental Group. In Control Group 18(64.2%) Start At 10pm, 6(21.4%) Were Start At 12am And 4(14.2%) Were Start At 8pm.

6.2 Findings Based On Objectives:

Objective 1: To Assess The Pre-Test Level Of Smartphone Addiction Among 1st Year B.Sc (N) Students In Experimental Group And Control Group.

Findings: The Study Finding Reveal That 0 % Students Non-Addicted, 5(17.8%) Students Were At Risk And 23(82.14%) Students Were Addictive To Smartphone In The Selected Samples Of Experimental Group. In Control Group 10(35.7%) Students Were Non-Addictive, 18(64.28%) Students Were In Risk And 0% Of Addictions.

The Findings Of This Study Were Supported By The Following Studies.

Han And Jeong (2018) Conducted A Quasi-Experimental Study To Assess The Effect Of Smartphones Use By College Students On Academic Performance Among The Colleges' Students From Top Ranked Universities In South Korea. Sample Was Collected From 2482 Student (1559 Female And 923 Males). Questionnaire Technique Has Been Used To Collect Data. The Result With Respect To College Students Shows That Smartphones Self-Efficacy And Behavioral Intention Have Positive Relationships With Students' Academic Performances.

Beranuy Et Al. (2009) Investigated The Reason Of Excessive Use Of Smart Phone And Internet And Its Relationship With Metal Disorder And Psychological Distress Among 365 Undergraduate Students In Universities Of Spain Through 20-Items, 4 Point-Likert Scale Questionnaire. The Results Show Significant Relationship Between Psychological Distress And Excessive Use Of Mobile Phone And Internet.

Objectives 2: To Compwere The Pre-Test And Post-Test Level Of Smartphone Addiction Among 1st Year B.Sc. (N) Students In Study Group And Control Group.

Findings: In Experimental Group 0 % Students Non-Addicted, 5(17.8%) Students Were At Risk And 23(82.14%) Students Were Addictive To Smartphone In The Selected Samples Of Experimental Group, Experimental Group Results After The Intervention Were 17(60.7%) Students Became Non-Addictive,4(14.2%) Students Were In Risk And 7(25%) Students Were Addictive. In Control Group 10(35.7%) Students Were Non-Addictive,18(64.28%) Students Were In Risk And 0% Of Addictions,



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After The Introduction Class Post-Test Results Were 15(53.57%) Non-Addictive Students, 12(42.85%) Students Were At Risk And 1(3.57%) Was Addictive.

The Findings Of This Study Were Supported By The Following Studies.

Savita Pardhi' Et Al (2022) Conducted A Quasi-Experimental Study To Assess Effectiveness Of Structural Teaching Programme On Knowledge Regarding The Prevention Of Smartphone Addiction Among Nursing Students. 60 Sample Collected By Using Non-Probability Convenient Sampling Questionnaires The Date Was Collected Through Pre-Test And Post-Test And It Was Analyzed By Both Descriptive And Inferential Statistics. The Results Of The Study Reveals That Pretest Mean Score Was 14.60 (24.33%) And Mean Score For Post-Test Was 21.65 (36.08%) Thus Knowledge On Prevention Of Smartphone Addiction Can Be Improved Through Teaching.

Ramuk' Et Al (2019) Conducted A Quasi-Experimental Study To Assess The Effectiveness Of Organized Teaching Programme On Knowledge Regarding Hazards Of Using Mobile Phones Among High School Student's 50 Samples Collected By Using Convenient Sampling Questionnaires. The Data Was Collected Through Pre-Test And Post-Test And It Was Analyzed By Percentage Was Calculated Both Pretest And Posttest. The Results Of The Study Reveals That The Pretest Mean Knowledge Score Is 70% And Mean Post-Test Knowledge Score Is 72% Thus Knowledge On Hazards Of Mobile Phone Can Be Improved By Structural Teaching Programme.

Ms Sunita Singh' Et Al (2022) Conducted An Quasi Experimental Study To Assess The Effectiveness Of Information Booklet On Mobile Phone Addiction, Health Hazards Of Mobile Phone Addiction And Prevention Of Mobile Phone Addiction Among B.Sc(N) First Year Students 40 Samples Collected By Using Random Structure Sampling Questionaries. The Date Was Collected Through Pretest And Posttest And It Was Analyzed By Quantitative Approach The Results Of The Study Reveals That The Pretest Knowledge Score Is 10.5 And Posttest Knowledge Score Is 20.7 Thus Knowledge Regarding Mobile Phone Addiction, Health Hazards Of Mobile Addiction And Prevention Of Mobile Phone Addiction Can Be Improved Through Structured Teaching.

Objective 3: To Evaluate The Effectiveness Of Interventions In Experimental Group.

Findings: The Study Finding Reveal That 0 % Students Non-Addicted, 5(17.8%) Students Were At Risk And 23(82.14%) Students Were Addictive To Smartphone In The Selected Samples Of Experimental Group, Study Group Results After The Intervention Were 17(60.7%) Students Became Non-Addictive, 4(14.2%) Students Were In Risk And 7(25%) Students Were Addictive.

The Findings Of This Study Were Supported By The Following Studies.

Anna Maria' Et Al (2021) Conducted And Descriptive Study To Assess The Smart Phone Addiction Among Adolescents And Associated Psychological Health Outcomes, 240 Samples Collected By Using Social Anxiety Scale, Self-Developed Questions. The Data Was Collected From The Age Of 18-25 Years Using 12 Items Questionnaire And It Was Analyzed By The Cross Sectional Method. The Result Of The Study Reveals That 50% Male Were Affected With Psychological Health Outcome Due To The Use Of Smartphone.



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Vivek Arun Kumar' Et Al (2019) Conducted A Cross-Sectional Study To Assess The Prevalence Of Smart Phone Addiction And Its Effects On Sleep Quality Among Medical Students. 150 Samples Collected By Using Smartphone Addiction Scale-Short Version. The Data Was Collected Through Pittsburgh's Sleep Quality Index. The Results Of The Study Reveals That Poor Sleep Quality In 77(51.3%) Thus The Findings Support Screening For Smartphone Addiction Which Will Be Helpful In Early Identification And Prompt Management.

Chapter Vii

Summary, Conclusion And Nurisng Implication

7.1 Summary:

The Mobile Phone Is A Miracle Of Science. Indeed, This Is A Very Popular Item Today. It Is Truly, A Mark Of Modern Living, A Part Of The Modern Life-Style. Today It Is Not Only A Communication Device. It Can Be Used For A Number Of Purposes Like Online Ticket Booking, Navigation, Playing Video Games, Taking Pictures, Recording Videos, Web Browsing, Video Calling, Etc. In Fact, Now We Use Mobile Phone For Taking Online Classes. Hence It Is Called A Smart Phone. At The Same Time, The Excessive Craze For This Is Not Desirable And May Even Prove Dangerous. Mobile Phone Is To Be Taken As And Utility Service, And Not As A Show-Piece.

A Review Of Related Literature Enabled The Investigator To Develop Conceptual Frame Work, Methodology For The Study And Plan For Analysis Of Data Were In An Effective And Efficient Way. The Conceptual Framework Adapted For This Study Was Roy's Adaptation Model.

The Research Design Selected For The Study Was Experimental Design- Quasi Experimental Design With Manipulation And Control Group. Structured Teaching Program Conducted As Waitlist Intervention For Control Group To Overcome Smartphone Addiction

The Samples Were First Year (Junior), B.Sc. Nursing From College Of Nursing, Chengalpattu Government Medical College, Chengalpattu Who Met The Inclusion Criteria Of Quasi Experimental Study.

The Gathered Data Were Tabulated; Grouped And Analyzed Descriptive And Inferential Statistics Were Used For Analysis.

7.2 Nursing Implications:

Nurses Have The Responsibility To Overcome Smart Phone Addiction Among B.Sc. (Nursing) First Year Nursing Students. The Present Study Will Help The Nurse To Know The Effectiveness Of Structured Teaching Programme On Smart Phone Addiction.

It Will Help In Creating The Awareness Among B.Sc (Nursing) First Year Nursing Students About Overcome Smartphone Addiction.



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7.3 Nursing Education:

- Nurse Educators Can Encourage Students To Conduct Structured Teaching Programme And Exhibition To B.Sc. (Nursing) First Year Nursing Students.
- ➤ Nurse Educators Can Encourage Creative Insight Of Students' Nurse To Prepare Pamphlets In Various Aspects To Overcome Smartphone Addiction.
- Nurse Educators Can Use The Result Of The Study As Information To The Students.
- ➤ Nurse Educators Can Help In Inculcating Value And Sense Of Responsibility In The Students To Overcome Smartphone Addiction In The Hospital And Community To Bring A Healthy Child To The Nation.
- Findings Of The Study Can Be Used For Updating The Knowledge Of Nursing Personnel Would Provide A Board Framework In Which Further Research Can Be Conducted.

7.4 Nursing Administration:

- Nurse Administrator Can Disseminate The Research Knowledge Into Practice That B.Sc. (Nursing) First Year Nursing Students Can Be Benefited.
- ➤ Nurse Administrator Can Conduct Workshop To Overcome Smartphone Addiction.
- Nurse Administrator Can Encourage Peripheral Nurse To Conduct Health Visit Regularly And Educate Nursing Students On Importance To Overcome Smartphone Addiction.
- Nurse Administrator Can Use Mass Media To Create Awareness About To Overcome Smartphone Addiction.

7.5 Nursing Research:

- ➤ The Study Will Be Valuable Reference For Further Research.
- ➤ The Findings Of The Study Would Help To Expand The Scientific Body Of Professional Knowledge Upon Which Further Research Can Be Conducted.

7.6 Limitation:

The Study Was Limited To:

- Adolescents Who Were Studying In B.Sc. (Nursing) I Year In College Of Nursing.
- ➤ 1 Week Data Collection Period.
- ➤ For Small Number Of Samples.
- For Age Group 17-20 Years.

7.7 Recommendations

- ➤ The Study Can Be Replicated In Large Sample Size.
- A Similar Study Can Be Done In Different Settings And In Different Population.
- ➤ A Comparative Study Can Be Done To Having Two Groups.



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7.8 Conclusion:

Mobile Phones Give Us The Liberty To Connect With Anyone Around The World Spontaneously. They Empower Us To Find Any Information As We Required And Were A Great Source Of Entertainment. While This Structured Teaching Intervention Device Was Designed To Empower The Students, Sadly, It's Turning Out To Subjugate Us. At Most Every Mobile User Is Suffering From The Addiction Of Mobile These Days. Everyone These Days Was Pinned To His Or Her Cell Phone.

In Classroom, Students Engage In Surfing Web, Social Networking, Checking Emails And Text Messages And Consequently Pay Less Attention To Their Lessons. The Use Of Smartphone Was Gradually Becoming A Compelling Learning Tool Used To Enhance Teaching And Learning In Distance Education. Its Usage Ensures Flexible Course Delivery, Makes It Possible For Learners To Access Online Learning Platforms, Access Course Resources And Interact Digitally. But In Youth And Especially In Students, Smartphone Addiction Is Getting Higher Due To Over Dependency On Technology In Every Aspect, Therefore It Is Required To Have Consistent And Complete Research Of Whether Smartphone Addiction Is Beneficial For The Students Or Does It Influence Negatively On Their Academic Performance.

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