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Effects of Excessive Use of Mobile Phone and Psychological Hazards among Staff Nurses

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Abstract: ***Background: In the modern era of the 21st century, mobile phones have been part of our life and it has revolutionized our lifestyle. We all communicate with one another; retrieve information for education, and also using for entertainment purpose. Mobile phone with its own demerits such as it causes various health hazards ranging from insomnia, numbness of fingers, and irritability to headache, anxiety, and dreadful addiction.1 Material & Methods: Quantitative Research Approach use for this study. Quasi experimental design (Nonequivalent control group design) was use in this study. Study conducted at Imperial Hospital, Jaipur on 40 staff nurses. For the collection of data Convenient Sampling Techniques were used. Result: Severity of mobile phone uses in control group in excessive user in pre test was 20% (100%) and in post test of control group is 14%, 4% were moderate user, 2% were mild users. in the case group data present to excessive user in pre test was 20 (100%) and in Post group of case group excessive users is 0%, Moderate users is 0% mild user is 16 (100%) and normal user was 04 (100%). Discussion: The study concluded an urgent to develop a policy regarding use of mobile phone during working hours. Urgent need to update the information regarding effective use of mobile phone during working hours and also decrease the psychological hazards after training programme among staff nurses.***

Keywords: Effects, Excessive, Use, Mobile phone, Psychological hazards

1. Introduction

Cell phones are a comparatively novel and evolving technology. Possible benefits of this technology still emerge, so do the potential psychosocial risks. For example, one psychosocial risk is user stress, which appears to be associated with feeling compelled to promptly answer cell-phone activity so as to take care of spontaneity and access with others. Potential psychosocial risks also include disruptions in sleep; the user's risk of exposure to cyber bullying, particularly the unwanted exposure of photographs and/or videos of the victim; and overuse, particularly among adolescents. With reference to the latter phenomenon, the boundaries among overuse, misuse, dependence, and addiction are not scientifically clear. Therefore, while cell phones are a convenient and expedient technology, they're not without their potential psychosocial hazards.2

Young people using mobile phones excessively constitute a risk group in terms of addiction. A survey on this issue reported that young people are overly dependent to their mobile phones, and show some signs of addiction. People use their mobile phones to send and receive short messages, and spend more than 5 hours on their mobile phones daily. The young people who can't limit their mobile phone use may experience serious academic, financial, behavioural, and psychological problems. Academic performance is one of the important areas effective on life satisfaction of college students. Although an improvement in face to-face communication skills of nurses has a positive contribution to their professional lives, their extensive use of mobile phones can lead to some problems.3

The prevalence of mobile phone usage was 70%. Calling facility (94.2%) was used more than the SMS (67.6%). Health problems like headache, earache, tinnitus, painful fingers and restlessness etc., were found to be positively associated with mobile phone usage.4

A survey study conducted in March 2014.30 questions were emailed to the 10978 of medical surgical nurses. Out of 10978 825 were respondent who select in inclusion criteria. The use of mobile phone while working in the hospital was reported by 78.1 of respondents. This study found that nurses frequently use mobile phone for non-work related activities during the working hours.5

2. Methodology of the Proposed Research

Research Approach: The research approach will be used in this study is Quantitative Research Approach

Research Design: The research design will be used in this study is Quasi Experimental Research Design-Nonequivalent control group design**.**

Research Setting: Imperial Hospital for the pilot study.

Population: Target population **(**Staff Nurse of Imperial Hospital of Jaipur)
Accessible population: (Staff Nurses Available during data collection)

Sample: Staff Nurses in a Imperial Hospital at Jaipur

Criteria for the selection of sample (Inclusion & Exclusion):

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Inclusion criteria

1) Staff nurses working in selected hospital of Jaipur& who are Available during time of data collection.
2) Staff nurses who are willing to participate & given consent.
3) Staff nurses who are using the mobile phone during duty hours.

Exclusion criteria

1) Staff nurses who are not willing to participate in this study.
2) Staff nurses who are not using the mobile phone
3) Staff nurses who are not available during data collection, long leave & sick leave

Sampling Technique: Convenient sampling

3. Result

Table 1: Comparing treatment effect of PMPUQ-svin both groups

Groups	Pre	Post	Paired t-test	P-Value	Significance
Control Group	69.4 ± 2.06	62.8 ± 8.38	3.78	0.00064	Highly significant
Case Group	71 ± 2.214	28.75 ± 3.88	38.2	0.000001	

Table 2: Comparing treatment effect of mobile phone addiction in both groups

Groups	Pre	Post	Paired t-test	P-Value	Significance
Control Group	55.25 ± 1.97	51.85 ± 8.58	1.701	0.0527	Not significant
Case Group	55.2 ± 1.69	18.05 ± 3.87	33.53	0.000001	Highly significant

Table 3: Comparing change in score between control and case group

Variables	Control Group	Case Group	t-test	P-Value	Significance
PMPUQ	6.6 ± 7.62	42.25 ± 4.83	-17.23	0.000001	Highly significant
Smart phone addiction	3.4 ± 8.7	37.15 ± 4.83	-14.77	0.000001	

Table 4: Severity of mobile phone uses

Characteristics	Control group		Case group	
	Pre	Post	Pre	Post
Excessive uses	20 (100%)	14 (70%)	20 (100%)	0
Moderate uses	0	4 (20%)	0	0
Mild uses	0	2 (10%	0	16 (80%)
Normal uses	0	0	0	4 (20%)

Table 5: Knowing knowledge of negative impact of mobile phone uses

Characteristics	Control group		Case group	
	Pre	Post	Pre	Post
Severe addiction	20 (100%)	18 (90%)	20 (100%)	0
Moderate addiction	0	1 (05%)	0	0
Mild addiction	0	0	0	0
Normal Addiction	0	1 (05%)	0	20 (100%)

Frequencies and percentage for the analysis of demographic variables, the Impact of mobile phone training session on staff nurses before and after administering the training programme was analyzed by using mean and standard deviation. The effectiveness of structured teaching programme/training programme was analyzed by using paired‘t’ test. The association between selected demographic variables and impact of mobile phone training session scores was determined by paired t test test. The results obtained were considered statistically significant at 5 percent level of significance ($p \leq 0.05$). Data was presented in the form of tables, graphs and diagrams.

4. Discussion

The study concluded an urgent to develop a policy regarding use of mobile phone during working hours. The prevalence of mobile phone usage was used more than the SMS. Health problems like headache, earache, tinnitus, painful fingers and restlessness etc., were found to be positively associated with mobile phone usage. therefore an urgent need to update the information regarding effective use of mobile phone during working hours and also decrease the psychological hazards. minimizes the usability of mobile phone during emergency and critical work also minimize the addiction of mobile phone by the nurses can able to provide effective nursing care to the patient.

5. Conclusion

The study concluded an urgent to develop a policy regarding use of mobile phone during working hours. The prevalence of mobile phone usage was used more than the SMS. Minimizes the usability of mobile phone during emergency and critical work also minimize the addiction of mobile phone by the nurses can able to provide effective nursing care to the patient.

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