# A Study on Social Media Addiction and Phubbing among Health Trainees

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#### **ABSTRACT**

Background: When an individual looking at his or her mobile phone during a conversation with other individuals and escaping from interpersonal communication, it is called phubbing. Health trainees can be defined as doctors, nursing staffs and other professionals (such as psychologists, psychiatric social workers, physiotherapists, etc.) studying a postgraduate course in the medical field. Methods and Materials: The researcher collected data from 30 health trainees of the Institute of Psychiatry (COE) and Institute of Post-Graduate Medical Education and Research (IPGME& R &SSKM Hospital), Kolkata to assess social media addiction and phubbing among health trainees in the age range of 18 to 35 years who had an active social media account. After screening, the socio-demographic details of the participants were collected and the social media addiction and phubbing scale were administered. Results: Theresults indicated that the levels of social media addiction were more in other health trainees and nursing trainees than others. The level of phubbing was found to be significant among other health trainees. Conclusion: Social media addiction has affected the trainees' lives despite their knowledge about it.

Keywords: Social media addiction, phubbing, health trainees

# INTRODUCTION

In our modern life the preoccupation with our cell phones has irrevocably changed how we interact with others. "The use of internet and social media has increased with time. Social media can be defined as an environment in which a group of people come together to share data, relationships and content, using internet communication channels. The most common social media tools are Facebook, Twitter, Instagram, Snapchat, WhatsApp, Google+, LinkedIn and Reddit" (Aksoy, 2018). Individuals use social media to be aware of what their friends were doing, stay up to date with news and events, evaluate leisure time, find entertaining and funny content, share ideas, share videos and pictures, share information with people and meet new people. It makes it easier to stay connected (Wersm, 2016).

The easy access to the internet and the social media platforms bring about the potential for social media addiction, "specifically the irrational and excessive use of social media to the extent that it interferes with other aspects of daily life" (Griffiths, 2012). "Individuals who have social media addiction are often found to be overly concerned about social media and are driven or forced by an uncontrollable urge to log on to and use social media" (Andreassen & Pallesen, 2014).

"Phubbing can be described as an individual looking at his or her mobile phone during a conversation with other individuals, by dealing with the mobile phone and escaping from interpersonal communication. The word phubbing is derived by merging the words phone and snubbing (which means ignoring or insulting someone). It can be considered as a disrespectful behaviour towards others and can damage real-life social relationships with others" (Karadag et al., 2015). In the Indian scenario, smart phone's addiction and

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problematic internet use among adolescents are on the increase, which indicates the possibility of phubbing among adolescents and youth.

The relation between social media addiction and phubbing explained in a study by Leary (1990), focused on the explanation of the reasons behind people turning to social media, rather than engaging into additional in-person interactions, and in his study, he concluded that it was simply an attention seeking behaviour with a sense of gregariousness.

Health trainees can be defined as the doctors, nursing staff and other professionals (such as psychologists, psychiatric social workers, physiotherapists, etc.) who are studying a postgraduate course in the medical field.

In one of the studies by Meredith E. David and James A. Roberts (2017) it was found that phubbing has a significant indirect effect on social media intensity via feelings of exclusion during time spent in person with others and need for attention. The overall result indicated that being phubbed was associated with individuals feeling excluded during their time spent with others and that those feelings of exclusion created a need for attention from others.

**Aim:** The aim of the present study is to find out the social media addiction and phubbing among health trainees and to see the association between them.

# **METHODS AND MATERIALS**

**Research Design:** Cross sectional institution based study.

**Sampling Method:** Criterion based purposive sampling.

**Inclusion Criteria:** Participants in the age range of 18 to 35 years, spending more than one hour daily at social media sites with a frequency of being active in social media account of at least 6 months and having at least 2 social media accounts; were considered for the research.

**Exclusion Criteria:** Participants with a score of 4 and above in the General Health Questionnaire-28, with any substance abuse except nicotine or tobacco were excluded.

**Ethical Consideration:** Permission was taken from the health trainees' Head of the Departments for data collection, written consent was taken and an information brochure was provided to them. They were free to withdraw their consent during the study and all the queries and clarification were addressed before and after the study. Confidentiality was strictly maintained. Ethical clearance was taken from the Ethical Committee of the Institute prior to conducting the study.

Method of Data Collection: After the permission from the ethical committee of IPGME & R, the data collection process was started. The researcher collected data from 30 health trainees (10doctors, 10nursing trainees and10 other health professionals such as M.Phil. in Psychiatric Social Work, PhD in Microbiology, etc.) of the Institute of Psychiatry (COE), and the Institute of Postgraduate Medical Education and Research (SSKM & IPGME&R Hospital), Kolkata, who had an active social media account. They were selected based on the inclusion and exclusion criteria. The General Heath Questionnaire (GHQ-28) was administered and the socio-demographic details of the participants were collected. The social media addiction and phubbing scale were administered.

**Tools of Data Collection:** Semi-structured socio-demographic details form, General Heath Questionnaire (GHQ-28) (Goldberg & Hillier, 1979), Social Media Addiction Scale - Student Form (Cengiz Şahin, 2018), Phubbing scale (Engin Karadağ, 2015), were utilised as the tools of data collection.

**Statistical Analysis:** Descriptive statistics, mean, standard deviation and percentage has been used. Pearson's correlation has been used to compute the correlation among variables. Collected data has been coded and analysed with the help of Statistical Package for Social Sciences (SPSS) version 25.

#### RESULTS

Data inserted in Table 1 reveals, the comparative picture of the socio-demographic details of the health trainees (doctors, nurses and other health trainees). The below data shows that 23.33% of the health trainees fall in the age range of 18-25 years and the rest of the 76.66% falls in the age range of 25-35 years. The overall mean was found to be 28.47 and the standard deviation was 3.381.

73.3% of all the health trainees were females which is higher than the male trainees which are 26.7% only. Among all the health trainees, maximum of them 83.3% were Hindus, 10% Muslim, 3.3% Christian and 3.3% were of other religion.

86.7% of all the health trainees were Bengali speaking, 6.7% Hindi and 6.7% other languages.66.7% of the health trainees belonged to nuclear family, 23.3% were from joint family and 10% had an extended family.

13.3% of the health trainees were hailing from a rural background, 30% from sub-urban domicile, and 50% from urban and 6.7% were coming from an urban metro domicile. So, it can be said that most of the trainees came from urban background.

Among all the health trainees only 33.3% were not receiving scholarship and the rest of 66.7% were getting scholarship. 90% of all the trainees were using one mobile phone and only 10 of them were using two mobile phones.

The table also shows the details of the social media usage and accounts of the health trainees. The table indicates that 63.33% of the health trainees were using 2-3 accounts and 36.66% were using 4-5 accounts. So, it indicates that more of the trainees have 2-3 accounts. The table shows that 43.3% of the trainees prefer using Facebook, 43.3% WhatsApp, 6.7% Instagram and 6.7% YouTube. It was also observed that 83.33% trainees spend 1-3 hours on social media and only 16.66% spend 4-6 hours. It was also found that 90% of the health trainees were more active on social media as their last update was 1-4 hours before the data collection than the only 10% trainees who had last updated their social media 5-10 hours ago.

The data analysis shows that the mean score for health trainees in terms of social media addiction was 70.60 and the S.D. was found out be 20.612. From the data it can be said that the mean score for social media addiction is higher than the mean score for phubbing. The mean score for phubbing-communication disturbance was found out be 10.17 and the S.D. was 3.239. The mean score for phubbing-phone obsession was 15.50 and S.D. was 4.066. So, it can be said that the mean score for phone obsession is higher than the mean score for communication disturbance. So, it indicated that the health trainees have higher levels of social media addiction than phubbing.

Table 2 shows the correlation between social media addiction and phubbing (communication disturbance and phone obsession) of the health trainees. The data indicates that there is a presence of positive correlation 0.507 at 0.01 level between social media addiction and phone obsession. Positive correlation is also present between the two factors of phubbing-communication disturbance and phone obsession at 0.01 level of 0.619.

**Table1: Socio-demographic Details of the Subjects** 

Socio-demographic	Health Trainees		
	Frequency	Percentage	
Age			
18-25 Years	7	23.33	
25-35 Years	23	76.66	
Total:	<b>Mean -</b> 28.47	<b>S.D.</b> - 3.381	
Gender			
Female	22	73.3	
Male	8	26.7	
Religion			
Hindu	25	83.3	
Muslim	3	10.0	
Christian	1	3.3	
Other Religion	1	3.3	
Mother Tongue			
Bengali	26	86.7	
Hindi	2	6.7	
Others	2	6.7	
Family Type			
Nuclear	20	66.7	
Joint	7	23.3	
Extended	3	10.0	
Domicile		10.0	
Rural	4	13.3	
Sub-Urban	9	30.0	
Urban	15	50.0	
Urban-Metro	2	6.7	
Scholarship	10	22.2	
No	10	33.3	
Yes	20	66.7	
No. Of Phones	27	00.0	
1 2	3	90.0	
	3	10.0	
Accounts 2 to 3	19	63.33	
4 to 5	11	36.66	
Preference	11	30.00	
Facebook	13	43.3	
Instagram	2	6.7	
Whatsapp	13	43.3	
Youtube	2	6.7	
Last Update	<del>-</del>	J.,	
Within 1to 4 hours	27	90	
Between 5 to 10 hours	3	10	
Hours Spent			
Between 1 to 3 hours	25	83.33	
Between 4 to 6 hours	5	16.66	
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	Social Media Addiction	Phubbing	
Correlations		Communication Disturbance	Phone Obsession
Social Media Addiction	1	.287	.507**
Phubbing			
Communication	.287	1	.619**
Disturbance			
Phone Obsession	.507**	.619**	1

Table 2: Correlations between Social Media Addiction and Phubbing

# **DISCUSSION**

Social media addiction is one of the growing concerns in recent times. One of the recent popular social media platforms is the social networking site (SNS). In a study by P. B. Brandtzaeg and J. Heim (2009) the reasons behind use of social media were investigated many motivational reasons were reported behind use of social media platforms. One of the most important reasons was to get in contact with new people (31%), second was to keep in touch with their friends (21%), and the rest (14%) was for general socializing. From this study it can be said that people are using social media more to get in contact with new people and this may be the reason behind the increasing use of it.

In a study by B. K. Sharma et al., (2015), where students perception towards social media — was observed with special reference to management students of Bhopal, Madhya Pradesh concludes that majority of respondents agreed that usage of social sites is not just limited to chatting with friends but also used for business networking, jobs and entertainment purpose. This makes social media important in our day-to-day life.

In favour to the above findings the study perception and attitude towards the use of social media network among Benue State University undergraduates by Patrick Saaondo and James Aondoakula Igbaakaa (2018) recommended that students' use of social media network should not be seen as a crime or social vice. Nevertheless, the use of social media during productive hours like lectures, exams, should be avoided.

The socio-demographic details of the present study shows that more of the trainees belong to the age range of 25 to 35 years and there were more female trainees than male trainees. Facebook and WhatsApp were the most preferred social media platforms to the health trainees and the maximum trainees were found to spending more than 2hours on a regular basis on social media.

Survey data on social media and messaging app use by Aaron Smith and Monica Anderson (2018) indicates that half of social media users' aged 18 to 24 years (51%) find it hard to give up social media than the other half of the age groups.

It can be easily said that social exclusion is present with social media addiction. The study on Social Exclusion, Surveillance Use, and Facebook Addiction: The Moderating Role of Narcissistic Grandiosity found out that social exclusion was positively associated with Facebook addiction. The surveillance use of Facebook was found to be a significant mediator between the risk of social exclusion on Facebook and Facebook addiction.

Sometimes social media addiction may lead to phubbing as studied by Meredith E. David and James A. Roberts (2017), who wanted to find out the relation between phone-snubbing (phubbing), social exclusion and attachment to social media. This was done on 180 US adults.

<sup>\*\*</sup>Correlation is Significant at the 0.01 Level (2-Tailed)

Varoth Chotpitayasunondh and others in 2016 conducted a study to examine the contributing roles of internet addiction, fear of missing out, self-control, and smart phone addiction. They examined how the frequency of phubbing behaviour and of being phubbed may both lead to the perception that phubbing is normative. The result from the first study shows that phubbing had a significant effect on individuals' tendencies to feel excluded during their time spent in person with others. In the same way, the second study results revealed that internet addiction, fear of missing out, and self-control predicted smartphone addiction, which in turn predicted the extent to which people phubb.

The results in the present study indicates a positive correlation between phone obsession (phubbing) and social media addiction at 0.01 level for the health trainees which is supporting the above mentioned studies. The results of the present and the previous studies indicate that there is a positive relation between phubbing and social media addiction. It also reveals that social media addiction is present in health trainees as well, who are aware of the pros and cons of this addiction. Social media addiction and phubbing are positively related for the health trainees who mean that when social media addiction increases the phubbing behaviour of the individual also increases. The present study also reveals that phone obsession has a positive correlation with communication disturbance.

**Limitations:** The time for the study was limited due to which the intergroup correlation and the different types of trainees could not be divided for further statistical analysis. Different platforms of social media could not be separated and different analysis was not done. The gender was not separately taken under consideration and the number of participants was less.

#### **IMPLICATIONS**

The present study can be used to create awareness about the fact that social media addiction is present among the health trainees, among whom some are mental health trainees who are aware about the harmful effects of different addictions. Necessary measures should be taken to avoid the excessive use of social media or mobile phone in the working areas. The use of mobile phones should be restricted during working hours and some serious mental health care wards should have mobile free zones where mobile phones should not be allowed. For broader societies the access of mobile phones in workplaces should be limited. The amount of time spent on social media which is related to phone obsession can be harmful for the quality of work and service provided to the patients. Hence, the study can be used to create awareness amongst the health trainees about their growing social media addiction and phubbing and to take necessary steps against it.

# **FUTURE DIRECTIONS**

In the near future, this study can be performed on a larger scale with a more large population, the trainees can be dived into different groups and further analysis can be done. This study can be used to focus on the gender difference in terms of social media addiction and phubbing. More variables can be analyzed related to social media addiction such as fear of missing out, self-esteem etc. The study can be further aimed at studying the impact of social media addiction and phubbing among the different trainees. It can also aim at assessing the impact of social media addiction on the professional empathy of the trainees. The study may also be extended to assess other professional groups as well.

# **CONCLUSION**

Social media addiction has become a growing concern for not only the teenagers but also amongst the health trainees. The health trainees were found to be addicted to social media and had a high level of phone obsession. Necessary care and steps should be taken for avoiding use of social media at work places for health trainees.

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