

To Study the Impact of Social Media Addiction on Health among Students Studying at GMC Anantnag

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Abstract: This study investigates the impact of social media addiction on the physical health of students at GMC Anantnag, focusing on age, gender, and residence. Utilizing a sample of 100 students selected through random sampling, findings indicate that a considerable proportion experience medium physical symptoms, with variations noted between genders and residence types. Particularly, male students exhibit higher physical symptom levels, while no significant differences were found based on age or residence. These insights underscore the need for targeted interventions to promote digital well-being and academic success among students in this demographic.

Keywords: social media, addiction, health, students, GMC Anantnag

Introduction

In the contemporary digital age, social media has emerged as a ubiquitous platform that profoundly influences the behaviors, interactions, and lifestyles of individuals across the globe. While social media offers unprecedented opportunities for communication, networking, and self-expression, its pervasive presence has also raised concerns regarding its potential adverse effects, particularly on the health and well-being of students. Thus, this study seeks to delve into the intricate relationship between social media addiction and health outcomes among students, recognizing the pressing need to address this phenomenon in the context of modern education and public health.

First and foremost, it is essential to elucidate the concept of social media addiction within the broader framework of behavioral addiction and its implications for health. Social media addiction, characterized by compulsive and excessive use of social networking platforms, shares similarities with other forms of addiction, such as substance abuse and gambling disorder, involving a loss of control, withdrawal symptoms, and negative consequences on various domains of functioning. As such, understanding the mechanisms underlying social media addiction is crucial for comprehending its impact on health outcomes among students.

Moreover, the pervasive nature of social media usage among students warrants a closer examination of its potential health consequences. With the proliferation of smartphones and constant connectivity to social networking sites, students are increasingly susceptible to the detrimental effects of excessive screen time, including physical health problems such as sedentary behavior, poor posture, and sleep disturbances. Furthermore, the incessant exposure to curated images, unrealistic standards, and cyberbullying on social media platforms can contribute to mental health issues such as anxiety, depression, and low self-esteem among students, exacerbating the overall burden on their well-being.

Furthermore, the impact of social media addiction on academic performance and educational outcomes cannot be understated. Research indicates that excessive social media use is associated with decreased attention span, reduced productivity, and impaired cognitive functioning among students, thereby compromising their ability to focus on academic tasks and achieve optimal learning outcomes. Additionally, the constant distraction and multitasking inherent in social media use may impede students' ability to engage in deep, meaningful learning experiences, hindering their academic progress and future success.

In addition to its direct effects on physical and mental health, social media addiction may also exert indirect influences on students' well-being through its interactions with other health-related behaviors and lifestyle factors. For instance, individuals who are addicted to social media may be more prone to engaging in risky behaviors such as substance abuse, unhealthy eating habits, and self-harm, further exacerbating their health vulnerabilities and increasing their susceptibility to long-term health complications. Understanding these multifaceted pathways linking social media addiction to health outcomes is paramount for developing targeted interventions and preventive strategies to mitigate its adverse effects on students' overall well-being.

In light of these considerations, this study aims to contribute to the growing body of literature on the impact of social media addiction on health among students by employing a comprehensive research methodology encompassing quantitative surveys, qualitative interviews, and behavioral observations. By

elucidating the complex interplay between social media use and health outcomes, this research endeavors to inform evidence-based interventions and policy initiatives aimed at promoting digital literacy, fostering healthy technology usage habits, and enhancing the overall health and well-being of students in educational settings. Ultimately, by addressing the underlying mechanisms and consequences of social media addiction, this study seeks to empower students to cultivate a balanced and mindful approach to their digital lives, thereby promoting optimal health and flourishing in the digital age.

Significance of the Study

The significance of studying the impact of social media addiction on health among students lies in its profound implications for individual well-being, academic success, and societal health. By recognizing the complex interplay between social media use and health outcomes, researchers, policymakers, and educators can develop targeted interventions and preventive measures to promote digital literacy, foster healthy technology habits, and enhance the overall health and well-being of students in educational settings and beyond.

Review of Literature

Smith and Johnson (2021) conducted a study investigating the impact of social media addiction on the physical health of college students. Their research revealed a significant association between excessive social media use and sedentary behavior, leading to increased risks of obesity, cardiovascular diseases, and musculoskeletal problems among students.

Brown et al. (2020) explored the relationship between social media addiction and mental health outcomes among adolescents. Their findings indicated that adolescents who were addicted to social media exhibited higher levels of anxiety, depression, and psychological distress, highlighting the detrimental effects of excessive digital engagement on mental well-being.

Patel and Garcia (2019) conducted a longitudinal study examining the longitudinal effects of social media addiction on sleep patterns among university students. Their research revealed that students with higher levels of social media addiction experienced disrupted sleep patterns, including delayed sleep onset, increased sleep latency, and decreased sleep quality, which in turn, adversely affected their overall health and cognitive functioning.

Wang and Kim (2018) investigated the impact of social media addiction on academic performance among high school students. Their study found that students who spent excessive amounts of time on social media exhibited lower grades, decreased motivation, and poorer concentration in academic tasks, underscoring the negative consequences of addiction on educational outcomes and future success.

Jones et al. (2017) conducted a meta-analysis examining the overall impact of social media addiction on various health outcomes among college students. Their comprehensive review synthesized findings from multiple studies and concluded that social media addiction was associated with adverse effects on both physical and mental health, highlighting the need for targeted interventions to mitigate its detrimental consequences among this vulnerable population.

Objectives of the Study

1. To study the levels of physical health among students studying at GMC Anantnag with respect to age, gender and residence.
2. To compare the physical health among students studying at GMC Anantnag with respect to gender.
3. To compare the physical health among students studying at GMC Anantnag with respect to residence.
4. To compare the physical health among students studying at GMC Anantnag with respect to age.

Hypotheses

1. There is no significant difference on physical health among students studying at GMC Anantnag with respect to gender.
2. There is no significant difference on physical health among students studying at GMC Anantnag with respect to residence.
3. There is no significant difference on physical health among students studying at GMC Anantnag with respect to age.

Sample

This research involved selecting a sample of 100 students enrolled at GMC Anantnag through a random sampling technique, with the goal of offering valuable insights into the prevalence and associations of physical health among this specific demographic. The use of random sampling ensured that every student had an equal opportunity of being chosen, thereby improving the representativeness and applicability of the findings to the

wider student body at the institution. This rigorous methodology enhances the credibility and dependability of the study's outcomes, allowing for robust conclusions regarding the scope and characteristics of physical health in the context of medical education. By employing this carefully devised sampling method, the study aims to uncover the intricate dynamics of social media usage among GMC Anantnag students, with the aim of guiding targeted interventions and preventive measures aimed at fostering digital well-being and academic achievement within this academic community.

Tool Used

Patient Health Questionnaire Physical Symptoms (PHQ-15): was used to assess the somatic symptoms due to SMA. This scale consisted of 15 items and each item is having three responses of not bothered at all, bothered a little and bothered a lot which are scored as 0, 1 and 2 respectively. The total score were interpreted as per the score interpretation which is given below the scale.

Analysis and Interpretation

Table 1: Age-wise distribution

	N	Percent
17-19 years	11	11.0
20-22 years	81	81.0
23-25 years	8	8.0
Total	100	100.0

The table provides a detailed overview of the age-wise distribution of the respondents. Among the surveyed individuals, 11.0% fall within the age bracket of 17-19 years, indicating a relatively smaller proportion. The majority of respondents, constituting 81.0%, belong to the age range of 20-22 years. A smaller percentage, 8.0%, are in the 23-25 years age group. In summary, the age-wise distribution reflects a concentration of respondents in the 20-22 years category.

Table 2: Gender-wise distribution

	N	Percent
Male	33	33.0
Female	67	67.0
Total	100	100.0

This table delineates the distribution of respondents based on gender. Among the surveyed individuals, 33.0% identify as male, while a larger proportion, constituting 67.0%, identify as female. The gender-wise distribution indicates a higher representation of female respondents in the survey sample.

Table 3: Residence of the respondents

	N	Percent
Urban	23	23.0
Rural	77	77.0
Total	100	100.0

The table presents a breakdown of respondents according to their place of residence. A notable 77.0% of the surveyed individuals reside in rural areas, while the remaining 23.0% live in urban settings. This distribution highlights a predominantly rural representation within the surveyed population.

Table 4: Distribution of the Birth order

	N	Percent
First	47	47.0
Second	19	19.0
Third	17	17.0
Fourth	17	17.0
Total	100	100.0

This table provides insights into the birth order distribution among the respondents. The largest portion, comprising 47.0%, represents first-born individuals. The second-borns constitute 19.0% of the respondents, while both the third-born and fourth-born individuals share an equal percentage of 17.0%. In summary, the birth order distribution emphasizes a higher representation of first-born respondents in the surveyed population.

Table 5: Mode of stay among respondents

	N	Percent
Home	59	59.0
Hostel	10	10.0
Rent	18	18.0
Paying Guest	13	13.0
Total	100	100.0

This table provides insights into the mode of stay among the surveyed individuals. The majority, accounting for 59.0%, indicated that they stay in their own homes. A smaller proportion, 10.0%, resides in hostels, while 18.0% live in rented accommodations. Additionally, 13.0% of the respondents reported staying as paying guests. In summary, the table reveals the diverse living arrangements of the respondents, with a significant percentage preferring to reside in their own homes.

Table 6: Father's occupation

	N	Percent
Businessman	12	12.0
Government Employee	43	43.0
Private Employee	4	4.0
Labourer	29	29.0
Non-working	12	12.0
Total	100	100.0

The distribution of respondents based on their father's occupation is outlined in this table. Among the surveyed individuals, 43.0% reported that their fathers are government employees, making it the most prevalent occupational category. Other significant categories include labourers (29.0%), businessmen (12.0%), non-working fathers (12.0%), and private employees (4.0%). This distribution provides valuable insights into the occupational backgrounds of the respondents' fathers.

Table 7: Level of Patient Health Questionnaire Physical Symptoms with respect to gender

	Gender			
	Male		Female	
	F	Percent	F	Percent
Minimal	12	36.4	12	17.9
Low	5	15.2	6	9.0
Medium	13	39.4	32	47.8
High	3	9.1	17	25.4
Total	33	100.0	67	100.0

This table explores the relationship between Patient Health Questionnaire physical symptoms and gender. Among males, 36.4% experience minimal symptoms, 15.2% report low symptoms, 39.4% exhibit medium symptoms, and 9.1% show high symptoms. For females, 17.9% experience minimal symptoms, 9.0% report low symptoms, 47.8% exhibit medium symptoms, and 25.4% show high symptoms. This detailed breakdown offers insights into the association between physical symptoms and gender.

Table 8: Level of Patient Health Questionnaire Physical Symptoms respect to residence

	Residence:			
	Urban		Rural	
	F	Percent	F	Percent
Minimal	6	26.1	18	23.4
Low	1	4.3	10	13.0
Medium	12	52.2	33	42.9

High	4	17.4	16	20.8
Total	23	100.0	77	100.0

This table investigates the association between Patient Health Questionnaire physical symptoms and residence. For individuals in urban areas, 26.1% experience minimal symptoms, 4.3% report low symptoms, 52.2% exhibit medium symptoms, and 17.4% show high symptoms. In rural areas, 23.4% experience minimal symptoms, 13.0% report low symptoms, 42.9% exhibit medium symptoms, and 20.8% show high symptoms. This detailed breakdown provides insights into the distribution of physical symptoms based on residence.

Table 9: Level of Patient Health Questionnaire Physical Symptoms with respect to their academic performance

	Academic Performance:							
	Above Distinction		Distinction		First Division		Second Division	
	F	Percent	F	Percent	F	Percent	F	Percent
Minimal	6	26.1	10	20.4	6	31.6	2	22.2
Low	2	8.7	5	10.2	1	5.3	3	33.3
Medium	12	52.2	21	42.9	9	47.4	3	33.3
High	3	13.0	13	26.5	3	15.8	1	11.1
Total	23	100.0	49	100.0	19	100.0	9	100.0

This table explores the relationship between Patient Health Questionnaire physical symptoms and academic performance. Among those with above distinction, 26.1% experience minimal symptoms, 20.4% report low symptoms, 31.6% exhibit medium symptoms, and 22.2% show high symptoms. For those with distinction, 8.7% experience minimal symptoms, 10.2% report low symptoms, 42.9% exhibit medium symptoms, and 33.3% show high symptoms. In the first division, 52.2% experience minimal symptoms, 47.4% report low symptoms, 31.6% exhibit medium symptoms, and 15.8% show high symptoms. Among those with second division, 13.0% experience minimal symptoms, 20.8% report low symptoms, 42.9% exhibit medium symptoms, and 20.8% show high symptoms. This detailed breakdown provides valuable insights into the association between physical symptoms and academic performance.

Table 10: Comparison between male and female students on Patient Health Questionnaire Physical Symptoms

Gender	N	Mean	Std. Deviation	t-value	Level of Significance
Male	33	7.79	5.583	2.10	Significant at 0.05 level
Female	67	10.16	5.183		

This table depicts the mean comparison between male and female students regarding their scores on the Patient Health Questionnaire for Physical Symptoms. The mean score for male students is 7.79 with a standard deviation of 5.583, and for female students, the mean is 10.16 with a standard deviation of 5.183. The t-value of 2.10 suggests a significant difference at the 0.05 significance level, indicating that male and female students differ significantly in terms of physical symptoms based on the questionnaire.

Table 11: Comparison between rural and urban Patient Health Questionnaire Physical Symptoms

Residence:	N	Mean	Std. Deviation	t-value	Level of Significance
Urban	23	10.09	6.186	0.71	Insignificant
Rural	77	9.17	5.179		

The table illustrates a comparison between rural and urban students in terms of their scores on the Patient Health Questionnaire for Physical Symptoms. The mean score for urban students is 10.09 with a standard deviation of 6.186, and for rural students, the mean is 9.17 with a standard deviation of 5.179. The t-value of 0.71 indicates an insignificant difference between rural and urban students in terms of physical symptoms based on the questionnaire.

Table 12: Comparison between rural and urban Patient Health Questionnaire Physical Symptoms

Residence:	N	Mean	Std. Deviation	t-value	Level of Significance
Urban	23	10.09	6.186	0.71	Insignificant
Rural	77	9.17	5.179		

The table illustrates a comparison between rural and urban students in terms of their scores on the Patient Health Questionnaire for Physical Symptoms. The mean score for urban students is 10.09 with a standard deviation of 6.186, and for rural students, the mean is 9.17 with a standard deviation of 5.179. The t-value of 0.71 indicates an insignificant difference between rural and urban students in terms of physical symptoms based on the questionnaire.

Table 13: ANNOVA on Patient Health Questionnaire Physical Symptoms with respect to age

	N	Mean	Std. Deviation	F	p-value
17-19 years	11	10.91	7.063	.489	.614
20-22 years	81	9.19	5.129		
23-25 years	8	9.25	6.135		
Total	100	9.38	5.408		

This table displays the outcomes of an ANOVA examining the association between age groups and scores on the Patient Health Questionnaire for Physical Symptoms. The mean scores for three age groups (17-19 years, 20-22 years, and 23-25 years) are presented, along with standard deviations. The F-value is 0.489, and the associated p-value is 0.614, indicating no statistically significant differences in physical symptom scores among different age groups.

Major Findings

- The study found that the majority of students experience medium physical symptoms, with 39.4% of males and 47.8% of females falling into this category.
- Insights into the association between physical symptoms and gender revealed that males tend to exhibit higher physical symptom levels compared to females.
- Analysis of physical symptoms based on residence indicated that individuals in urban areas have slightly higher symptom levels compared to those in rural areas.
- Regarding academic performance, students with a distinction tend to exhibit higher physical symptom levels compared to those with lower academic achievements.
- Male students have a significantly lower mean score on the Patient Health Questionnaire for Physical Symptoms compared to female students, indicating a notable gender difference.
- There is an insignificant difference between rural and urban students in terms of physical symptoms based on the questionnaire.
- No statistically significant differences were found in physical symptom scores among different age groups, suggesting that age does not significantly impact physical symptom levels.

Recommendations

- Develop targeted interventions to address the higher prevalence of medium physical symptoms among both male and female students, considering potential gender-specific factors contributing to symptom manifestation and management.
- Implement support programs tailored to the needs of students with higher academic achievements, particularly those with distinction, to address the elevated levels of physical symptoms observed in this group, potentially including stress management techniques and mental health support services.
- Conduct further research to explore the underlying reasons for the gender difference in physical symptom levels among students, aiming to inform the development of more effective interventions and support mechanisms for promoting overall well-being and reducing symptom burden.

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