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A Study to Assess the Effect of a Structured Teaching Program on Knowledge Regarding Social Media Addiction among Nursing Students of SGT University, Gurugram, Haryana

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Abstract

Introduction: Social media addiction has emerged as a growing concern among young adults, particularly nursing students who are frequent users of digital platforms. Recognising the need for awareness and preventive strategies, this study aimed to assess the effectiveness of a structured teaching program in improving knowledge regarding social media addiction among nursing students at SGT University, Gurugram, Haryana. **Methodology:** This quantitative pre-experimental study was conducted among 100 undergraduate nursing students selected through a non-probability convenience sampling technique. Data was collected using a structured questionnaire divided into two sections: demographic variables and knowledge-related questions on social media addiction, symptoms, and prevention. Pre-test and post-test scores were compared to measure the effectiveness of the teaching intervention. Descriptive and inferential statistics, including frequency, percentage, mean, standard deviation, paired t-test, and chi-square test, were used for data analysis. **Findings:** Pre-test results indicated that 63% of students had inadequate knowledge, while only 6% had adequate knowledge. After the structured teaching program, adequate knowledge levels increased to 33%, and inadequate knowledge dropped to 7%. The mean score improved significantly from 8.14 (35.39%) in the pre-test to 14.69 (63.87%) in the post-test. A statistically significant improvement was observed ($p < 0.001$). No significant associations were found between demographic variables and knowledge scores, except for the source of information ($p = 0.043$), where internet-based learning showed a positive influence. **Conclusion:** The study confirms that structured teaching programs are effective in enhancing knowledge about social media addiction among nursing students. It highlights the need for integrating digital well-being education into the nursing curriculum and suggests further research on long-term behavioural outcomes and broader student populations.

Major Findings: The structured teaching program boosted nursing students' knowledge of social media addiction from 8.14±3.99 (35%) pre-test to 14.69±3.62 (64%) post-test. No demographic factors were found to be significant with other variables except internet sources (p=0.043).

Keywords: Knowledge, Nursing Students, Social Media Addiction, Structured Teaching Program

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1. Introduction

An online platform known as social media is used by people to build social networks and relationships with others who share similar hobbies, pursuits, backgrounds, or real-world connections. The influence of social networks on youth is substantial. The fact that social networks are now a part of people's lives is becoming more and more obvious. Many teenagers use their smartphones, tablets, and laptops to check their friends'

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and family's status updates and tweets. People are under pressure to adapt alternative lifestyles as a result of technological advancements[1]. Social networking platforms can help youth develop their social skills. Social media is an online platform for sharing information. Users can generate web content, exchange information, and engage in conversations on social media sites. Blogs, microblogs, wikis, social networking sites, photo-sharing websites, instant messaging, video-sharing websites, podcasts, widgets, virtual worlds, and more are examples of social media. Social media is used by billions of people worldwide to communicate and exchange information[2].

By reducing its economic, social, and political borders, the world is becoming more "glocal" rather than "global," providing it with a shared platform for growth. Social media was created as a result of the media's convergence, which increased internet usage. People now have a shared platform to share their news, comments, and views on what's going on in the world, thanks to the concept of social media. In addition, professionals use social media for recruiting and searching, parents and educators use it as a social learning tool, professionals use it for professional work, amateurs use it for internships, and advertisers and businesses use it for promotions[3].

A 2023 global meta-analysis of 51 studies involving 35,520 students reported a pooled prevalence of social media addiction at 18.4%, rising to 22.8% in Asian contexts, underscoring the urgent need for targeted interventions[4]. Similarly, a 2024 study on nursing students at the University of Tabuk found strong links between addiction levels, anxiety symptoms, and reduced academic outcomes, emphasising the vulnerability of health profession trainees[5].

On a personal level, social media gives us the opportunity to interact with friends and family, learn new things, explore our interests, and find entertainment. By establishing connections with other professionals in our business, social media can help us develop our professional network and increase our knowledge in a certain field. Social media allows businesses to interact with their audience, get feedback from them, and build their brand[6].

There are pros and cons of using social media and mobile devices. The main advantages are in terms of accessing course materials, videos, and transferring instructional notes, among other things. In general, students believe that mobile devices and social media are the most affordable and practical ways to find pertinent information. Research conducted in Western nations has shown that using social media for collaborative learning online significantly improves students' academic achievement and satisfaction[7].

With their increased accessibility and acceptance, social media platforms have emerged as the primary means of communication for college and university students[8]. Numerous social media sites exist, including WeChat, WhatsApp, Instagram, Snapchat, Facebook, YouTube, and Twitter. The most popular social media sites among them are Facebook, Instagram, Twitter, and WhatsApp[9].

1.1 Need for the Study

An over-reliance on social media platforms causes Social Media Addiction (SMA), a behavioural addiction that impairs a person's ability to function and live their own life. One may describe it as being engrossed in the virtual world at the expense of going about everyday tasks and meeting social commitments. In recent years, people have become more interested in online life-sharing platforms (such as TikTok, YouTube, and Instagram) as their primary source of entertainment. Spending more time on screens than on physical activities (like playing sports) has become a common occurrence, and there are both obvious benefits and drawbacks[10].

An increasing number of people who use social media are being diagnosed with internet addiction. The measure of Internet addiction was initially devised in 1998 by Dr Kimberly Young, a well-known researcher working in the psychology field of Internet addiction, to reflect one's intensity of Internet reliance. The symptoms vary greatly depending on the severity degree, and include impaired functional capacity, abrupt cessation of offline social engagements, and bad emotions when using social media[11].

Social Networking Services (SNS) have become an essential part of the life of many college students due to their increasing popularity and advantages[12]. Addiction is currently the most significant behavioural issue that can result from excessive usage of these networks. Social media use, particularly excessive use and extended periods of time spent on social media platforms, seems to raise the risk of several mental health issues and poor well-being, particularly in young people[13].

Psychosocial adjustment during early adolescence, with high social media use being the most problematic, social media use seems to have a range of consequences.

According to research, individuals who negatively use social media are more likely to experience anxiety, depression, low self-esteem, social isolation, decreased sleep, and body image dissatisfaction. Additionally, detrimental social media use has been linked to death-threatening behaviours like illegal drug use, excessive alcohol consumption, and unsafe sexual practices, as well as unhealthy lifestyle patterns like not exercising enough or struggling to manage daily responsibilities[14,15].

Approximately 3.77 billion people use computers and smartphones to access the internet worldwide; 81% of individuals in affluent nations and 41% of people in developing countries do so. Young people between the ages of 15 and 24 make up nearly 71% of all internet users worldwide[13]. Sharing and learning new information via work, Google, Gmail, apps, online payments, social media, etc., is the most popular usage of the internet. Among all of these, social media is almost becoming a necessary component of most people's daily lives these days. It demonstrates that people between the ages of 15 and 24 are the most frequent internet users. Therefore, it makes sense to carry out the current investigation within this age group[16].

1.2 Objectives of the Study

1. To assess the knowledge regarding social media addiction among nursing students.
2. To find the effectiveness of a structured teaching programme on the level of knowledge regarding social media among nursing students.
3. To find out the association between the level of knowledge and selected socio-demographic variables.

1.3 Methodology

This study utilised a quantitative approach with a descriptive design to assess the knowledge of social media addiction among nursing students at SGT University, Gurugram, Haryana. A sample of 100 undergraduate nursing students was selected using purposive sampling based on their presence and willingness to participate during data collection. Demographic variables collected included age, gender, education level, time spent on social media, family type, number of social media accounts, and prior knowledge of social media addiction. A self-structured questionnaire was used for data collection, divided into two sections: Section I focused on demographic details, and Section II contained 23 structured questions covering the nature, causes, symptoms, and prevention of social media addiction. The tool's content validity was established by review from five experts, and reliability was assessed via the split-half method and Karl Pearson's "r" correlational technique, indicating high internal consistency.

The collected data were systematically coded and tabulated in MS Excel and SPSS. Descriptive

Table 1. Demographic profile of the subjects **N=100**

Variables	Opts	Percentage	Frequency
Age	17-21 years	83.0%	83
	22-28 years	15.0%	15
	29-35 years	2.0%	2
	Above 35 years	0.0%	0
Gender	Male	0.0%	0
	Female	100.0%	100
	Other	0.0%	0
Education Level	ANM	0.0%	0
	GNM	100.0%	100
	B.Sc and Post Basic B.Sc Nursing	0.0%	0
	M.Sc and NPCC & PhD	0.0%	0
Time Spent on Social Media Daily	Less than 1 hour	1.0%	1
	1–3 hours	12.0%	12
	3–5 hours	82.0%	82
	More than 5 hours	5.0%	5
Type of Family	Nuclear	73.0%	73
	Joint	25.0%	25
	Extended	2.0%	2
How Many Social Media Accounts Do You Have	No Account	2.0%	2
	1-2	82.0%	82
	3-5	16.0%	16
	More than 5	0.0%	0
Previous Information Regarding Social Media Addiction	Yes	94.0%	94
	No	6.0%	6
Source of Information	Friends	21.0%	21
	Family	0.0%	0
	Internet	66.0%	66
	Others	7.0%	7

statistics (frequency, percentage, mean, standard deviation) were applied for demographic and knowledge data, while Chi-square tests were used for analysing associations between knowledge and selected demographic factors.

1.4 Ethical Considerations

Ethical clearance was obtained from the Dean of the Faculty of Nursing and the Ethics Committee of SGT University. Each student participant was provided with an informed consent form detailing the study aims, confidentiality, and anonymity guarantees. Data collection was conducted between 26/02/2025 and 05/03/2025, ensuring that only willing and present students were enrolled.

2. Results

Table 1 depicts socio-demographic variables showing the frequency and percentage distribution of nursing students. The majority of participants in the study were aged between 17 and 21 years (83%), with fewer in the 22–28 years group (15%), and very minimal representation from the 29–35 years (2%) and above 35 years (0%) categories. All participants were female (100%) and held a General Nursing and Midwifery (GNM) qualification. Most participants reported spending 3–5 hours daily on social media (82%), while others spent 1–3 hours (12%), over 5 hours (5%), or less than 1 hour (1%). A large proportion belonged to nuclear families (73%), followed by joint (25%) and extended families (2%). The majority had 1–2 social media accounts (82%), with fewer having 3–5 accounts (16%), and almost none had more than 5 or no accounts. Most participants (94%) had prior information regarding social media addiction, mainly acquired through the internet (66%), followed by friends (21%) and other sources (7%), while family was not a reported source.

Table 2 depicts the frequency and percentage distribution of pretest knowledge scores. Based on the pretest knowledge scores for the group of 100 participants, the majority, 63%, have inadequate knowledge, scoring between 0 and 8. This indicates that a significant portion of the participants have a limited understanding of the subject matter. Meanwhile, 31% of the participants have moderate knowledge, scoring between 9 and 15, showing a better but not thorough understanding. Only 6% of the participants have adequate knowledge, scoring between 16 and 23, indicating a strong grasp of the subject.

Table 3 depicts the frequency and percentage distribution of post-test knowledge scores. Examining the post-test knowledge scores for 100 participants, we see a notable improvement in knowledge levels compared to the pretest. Only 7% of participants have inadequate knowledge, scoring between 0 and 8, a significant decrease from the pretest results. The majority, 60%, now have moderate knowledge, scoring between 9 and 15, which indicates that most participants have improved their understanding. Additionally, 33% of participants have adequate knowledge, scoring between 16 and

Table 2. Frequency and percentage distribution of pre-test level of knowledge **N=100**

Criteria Measure of Pretest Knowledge Score	
Score Level (N= 100)	Pre Test f (%)
Inadequate Knowledge (0-8)	63(63%)
Moderate Knowledge (9-15)	31(31%)
Adequate Knowledge (16-23)	6(6%)
Maximum Score=23 Minimum Score=0	

Table 3. Frequency and percentage distribution of post-test level of knowledge **N=100**

Criteria Measure of Posttest Knowledge Score	
Score Level (N= 100)	POST TEST f (%)
Inadequate Knowledge (0-8)	7(7%)
Moderate Knowledge (9-15)	60(60%)
Adequate Knowledge (16-23)	33(33%)
Maximum Score=23 Minimum Score=0	

Table 4. Comparison of descriptive statistics of pre-test and post-test scores of knowledge

N=100							
Paired T Test	**Mean± S.D.**	**Mean%**	**Range**	**Mean Diff.**	**Paired T Test**	**P value**	**Table Value at 0.05**
Pre-test knowledge	8.14±3.992	35.39	3-21	6.550	20.705 *Sig	<0.001	1.98
Post-test knowledge	14.69±3.62	63.87	7-22				
** Significance Level 0.05, Maximum=23, Minimum=0							

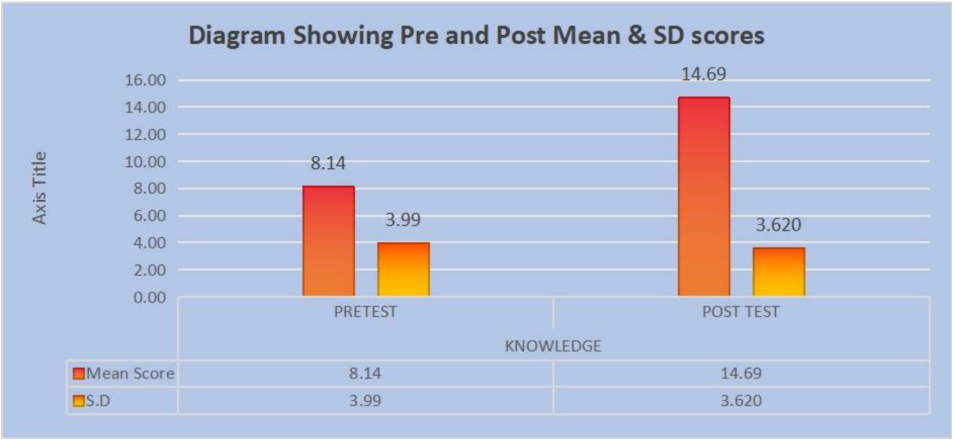


Figure 1. Bar diagram representing the mean and SD of pre-test and post-test knowledge scores.

Table 5. Table showing the association of scores and demographic variables **N=100**

Association of Post Test Knowledge Scores with Selected Socio-Demographic Variables									
Variables	**Opts**	**Adequate knowledge**	**Moderate knowledge**	**Inadequate knowledge**	**Chi Test**	**P Value**	**df**	**Table Value**	**Result**
Age	17-21 years	29	48	6	1.795	0.773	4	9.488	Not Significant
	22-28 years	4	10	1					
	29-35 years	0	2	0					
	Above 35 years	0	0	0					
Gender	Male	0	0	0		N/A			
	Female	33	60	7					
	Other	0	0	0					
Education Level	ANM	0	0	0		N/A			
	GNM	33	60	7					
	B.Sc and Post Basic B.Sc Nursing	0	0	0					
	M.Sc, NPCC and PhD	0	0	0					
Time Spent on Social Media Daily	Less than 1 hour	1	0	0	4.679	0.586	6	12.592	Not Significant
	1–3 hours	5	7	0					
	3–5 hours	26	50	6					
	More than 5 hours	1	3	1					
Type of Family	Nuclear	25	43	5	1.428	0.839	4	9.488	Not Significant
	Joint	8	15	2					
	Extended	0	2	0					
How Many Social Media Accounts Do You Have	No Account	2	0	0	9.471	0.050	4	9.488	Not Significant
	1-2	22	54	6					
	3-5	9	6	1					
	More than 5	0	0	0					
Previous Information Regarding Social Media Addiction	Yes	30	57	7	1.112	0.573	2	5.991	Not Significant
	No	3	3	0					
Source of Information	Friends	6	11	4	9.830	0.043	4	9.488	Significant
	Family	0	0	0					
	Internet	24	39	3					
	Others	0	7	0					

23, reflecting a substantial increase in the number of participants with a strong grasp of the subject matter.

As shown in Table 4 and Figure 1 the mean pretest knowledge score was 8.14 with a Standard Deviation (S.D.) of 3.992, indicating that, on average, participants scored 35.39% of the maximum possible score. The scores ranged from 3 to 21. In contrast, the mean post-test knowledge score was significantly higher at 14.69 with an S.D. of 3.62, corresponding to 63.87% of the maximum possible score, with scores ranging from 7 to 22. The mean difference between the pretest and post-test scores was 6.550, which is substantial. The paired t-test value was 20.705, with a p-value of less than 0.001. Since this p-value is much lower than the significance level of 0.05 and the table value of 1.98, it indicates that the improvement in knowledge scores is statistically significant.

Table 5 describes the findings related to the association between score and selected demographic variables revealed that no association was found except significant association between the source of information and post-test knowledge scores.

3. Discussion

In the present study, the demographic profile represented in Table 1 of the participants showed that a majority of undergraduate nursing students (83%) were between 17 and 21 years of age. All 100% of the respondents were female. Every participant was pursuing GNM. Regarding social media engagement, a striking 82% of students reported spending 3–5 hours daily on social media. Family structure, number of social media accounts, and prior knowledge of social media addiction were also recorded, with 94% of students reporting some prior awareness of the concept.

Despite this high self-reported awareness, analysis of pre-test data revealed a significant knowledge gap, as shown in Table 2. The mean pre-test score was 8.14 with a standard deviation of 3.992, and the mean percentage score was 35.39%. The median score was 7, with scores ranging from 3 to 21. These findings are congruent with the study by S. Rani, A. Singh, and P. Verma, who also found limited baseline knowledge among nursing students, with a pretest mean score of 8.3 (SD = 3.7), reinforcing the need for targeted interventions.

Following the implementation of a structured teaching program, post-test results demonstrated marked improvement. The mean post-test score increased to 14.69 (SD = 3.620), with a mean percentage score of 63.87%. The median post-test score was 15, and scores ranged from 7 to 22, as shown in Table 3. These improvements are in line with findings reported by M. A. Patel, R. Sharma, and V. Gupta, who observed a similar significant gain from pre- to post-intervention (pretest mean of 7.8, SD = 4.0; posttest mean of 14.5), clearly indicating the effectiveness of educational interventions in increasing knowledge about social media addiction.

When assessing associations between demographic variables and knowledge scores, the study found no statistically significant relationship between knowledge improvement and factors such as age, time spent on social media, family type, and number of social media accounts. This supports findings from Sharma and Agarwal (2019), who also noted minimal influence of socio-demographic variables on knowledge levels regarding behavioural health issues. However, a significant association, as shown in Table 5, was observed in relation to the source of information. Students who relied on internet-based learning demonstrated better post-test knowledge ($p = 0.043$), highlighting the importance and effectiveness of digital learning resources in promoting awareness and understanding of social media addiction.

4. Conclusion

This research emphasises the vital need to address social media addiction through robust prevention measures tailored for nursing students, with key insights for advancing nursing scholarship, training, and clinical work. It reveals critical areas of limited understanding and proves the impact of organised educational modules in boosting recognition of digital overuse and encouraging balanced online behaviours. Embedding these results into the nursing syllabus and campus guidelines will cultivate forward-thinking efforts to safeguard digital health. As frontline caregivers, advocates, and educators, nurses hold a unique vantage point to champion anti-addiction campaigns and bolster mental wellness. Adopting data-backed teaching methods and policy reforms will empower academia and healthcare to mitigate social media hazards, nurturing stronger, more adaptable student populations.

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Author Contribution

Conceptualisation, N.T.; methodology, M.D., S.K., N., K.D., A.; software, M.D., S.K., N., K.D., A.; validation, N.T.; formal analysis, N.T; investigation, N.T.; resources, N.T.; data curation, M.D., S.K., N., K.D., A.; writing—original draft preparation, M.D., S.K., N., K.D., A.; writing—review and editing, N.T.; visualisation, N.T.; supervision, N.T. The authors contributed to the planning and conduct of the study. All authors read and approved the final manuscript.

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