SEVEN MAGIC DAYS TO PREVENT NOMOPHOBIA

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Abstract

Mobile phones have become an essential part of modern human life. They have many attributes which make people very attractive. There has been an increasing trend of use of mobile phones that creates the dependency on the use of mobile phones. This issue is then known as Nomophobia (no-mobile-phobia) which is related to discomfort, anxiety, nervousness or anguish which is usually caused by being out of contact with a mobile phone. Many previous studies proved that nomophobia produces many negative psychological impacts. The impacts are anxiety and panic disorder, withdrawal symptoms, social relationship disorder, sleep disorder, behavioral disorder, low self-esteem and self-efficacy, impulsiveness, and aggression (King, dkk,2014; Nikhita, dkk, 2015; Bianchi & Philip, 2005; Kalaskar, 2015). Furthermore, nomophobia can cause cancer because of radiation that is generated by mobile phones in the long term. Because the impacts are quite severe due to mobile phone dependency, some researchers proposed the nomophobia into *Diagnostic and Statistical Manual of Mental Disorder* (DSM).

Negative impacts caused by nomophobia make the researchers tried to find some solutions. Some solutions have been found to overcome the nomophobia, such as *Cognitive Behavioral Therapy (*CBT), motivational interviewing, internet and tech addiction therapy and pharmacotherapy. In Indonesia, applications of those solutions difficult to find. It has been proved that dependency on mobile phones in Indonesia increased about 2% of the total population in 2016. We believe that this phenomenon will continue to increase as features of mobile phone technology grows. To prevent this, we have to perform an action to overcome the nomophobia, especially in Indonesia. This paper offers a solution called as Seven Magic days (SMD). SMD is a new model of psychological treatment that focuses on changing human behavior and thoughts about the dependency on mobile phones. SMD resembles some psychological therapies that have been done before so it can cover the weaknesses of the therapies because there is a control that will be carried out directly and will be evaluated along with the changes that occur after the therapy within 7x24 hours. Although the literature on treating nomophonia is limited to find in Indonesia, we believe that it points to the implementation of SMD to prevent the increase of nomophobia phenomena.

Keywords: Nomophobia, therapy, psychological therapy, mobile phone dependency, Seven Magic days.

1 INTRODUCTION

Nowadays, technology features grow very fast and no deny that human activities cannot be separated from the needs of technology, for example Mobile Phone (MP). Miserable thing that happened is most of people are now starting to ignore the real life and moved to gadget world. The existence of MP surely provides many positive things, such as human can easily connected with anyone in anyplace as the wish. Other than the positive impact, MP can produce many serious negative impacts. The wrong thing is not in the MP, but the user that uses MP. One example of the negative impact is the dependence on MP. In the fact, dependence of MP keep increases around the world as features of mobile phone technology grows. The result of this phenomenon is there will be a lot of social problems and human behavior changes.

It is not surprising then that this phenomenon led many researchers started to explore more about the dependence of MP and the impacts. "Nomophobia (no mobile-phobia)" is a new term as a result of research that comes from a group of researchers in the UK about a discomfort, fear and anxiety are usually felt when away from the mobile phone. Furthermore, the results of other studies show a lot of variety of psychological problems as a result of dependence on the MP. Psychological problems are anxiety, panic, fear, depression, impaired social relationships of individuals, withdrawal symptoms (feeling angry, tense, and depressed when smartphone battery starts to drop), behavioral disorders (such as arguing, achievement decline, social isolation, lack sleep, conversations false to avoid others, to lie), outlook negative on yourself, low self-esteem and self-efficacy, a dysregulated arousal, impulsive and aggression (King, et al, 2014; Nikhita, et al, 2015; Bianchi & Philip, 2005 ; Kalaskar, 2015). Other studies also show that today people become more anxious when away from the smartphone than away from family or friends

The complexity of the problems brings up a new idea to include nomophobia in the Diagnostic and Statistical Manual of Mental Disorder (DSM), which is a guide to assess psychological disorders. Braggazi, et al (2014) says that it is necessary to remember the number of negative psychological impact of emerging and in this case nomophobia acts as a proxy for other more serious disorders.

This situation is exacerbated by the fact occurs in Indonesia, in particular, data from eMarketer (2015) indicate that the projected 2016 to 2019 MP users in Indonesia will keep grows. In 2016 there will be 65.2 million MP users and in 2017 there will be 74.9 million users. As in 2018 and 2019, increasing from 83.5 million to 92 million users in Indonesia MP. Given to this data, Indonesia becomes the third position are above Japan in this year only to have growth of approximately 51.8 million users (okezone.com). This then indicates that the dependence of the MP in Indonesia will increases, especially in their teens-adults. The fact that happened in the UK, from a survey of 1,000 people in the UK conducted by Secur Envoy, a company specializing in digital password, students today experience nomophobia, where 66% of respondents said he could not live without a cell phone. This percentage swell on respondents aged 18 and 24 years ie 77% of respondents experienced nomophobia (Ngafifi, 2014). In fact, we all know that adults and adolescents are the important part of the regeneration of the development of a country.

Ideally, mobile phone users should be aware that the real world is far more important. It can only be achieved by the continuous monitoring by using therapies to treat nomophobia. For that, we are here to offer solutions to the problems that occurred, ie holding the Magic Seven Days (SMD). SMD is a new model of psychological treatment that focuses on changing behavior and the human mind about the reliance on MP. SMD will provide intense psychological therapy to prevent nomophobia so that individuals can become more appreciative socialization with the environment significantly compare.

2 THEORY

2.1 Nomophobia

2.1.1 Definition

The word "nomophobia" (No Mobile Phobia) originated made in England, that is, the phobia of being without a Mobile Phone (MP). "Nomophobia" is the modern fear that has happen nowdays of being unable to communicate through a mobile phone (MP) or the Internet (King, et al, 2014). It also expressed by Yildirim (2014) that Nomophobia is defined as the fear of being out of mobile phone contact and is considered a modern age phobia introduced to our lives as a byproduct of the interaction between people and mobile information and communication technologies, especially smartphones. According to Hardianti (2016) nomophobia is defined as a fear and anxiety because of being out of mobile phone. So, from all of the definition, we can conclude that Nomophobia is related to inconfenience feeling, fear, and anxiety that happen when being out of mobile phone.

Communication technologies modify people's interaction with the world, their perception of reality and their interactions with time and space (King, et al 2014). Every single one has different intention on using the MP as they wish. The example are individual that use MP to seek existence in the virtual world, to make it as a catharsis media, as indirect media so people can be pretend to be someone else, ect. This condition then cause a dependency because of the comfort feeling in social media and the ease to have communication, so that people are easily ignore the real life and direct communication.

2.1.2 Impacts and Characteristic

Many previous studies of nomophobia showed a lot of variety of physical and psychological problems that occur as a result of dependency of MP. Physical problems that appear are tachycardia, respiratory distress, trembling, sweating, headache, and lethargy (King, et al, 2014; Sharma et al, 2015). Meanwhile, the psychological problems that occur are anxiety, panic, fear, depression, impaired social relationships of individuals, withdrawal symtomps (feeling angry, tense, and depressed when smartphone battery starts to drop), behavioral disorders (such as arguing, achievement decreases, isolation social, lack of sleep, fake conversations to avoid others, lie), outlook negative on self, low self esteem and self efficacy, a dysregulated arousal, impulsive and aggression (King, et al, 2014; Nikhita, et al, 2015; Bianchi & Philip, 2005; Kalaskar, 2015).Masalah fisik yang mucul adalah tachycardia, gangguan pernapasan, gemetar, berkeringat, sakit kepala, dan lesu (King, dkk, 2014; Sharma et al, 2015).

The complexity of the problems that cause many psychological disorders then bring up new ideas to include nomophobia into *Diagnostic and Statistical Manual of Mental Disorder* (DSM), which is a guide to assess psychological disorders. Braggazi, et al (2014) says that it is necessary to do, consider to the psychological impacts that appear that in this case, nomophobia takes place as proxy to more other serious disorders. Braggazi, dkk (2014) mengatakan bahwa hal ini perlu dilakukan mengingat banyaknya dampak negative

Table 1. The research by Wallace	(2014) on	adolescent	generate	multiple	dimensions	as the	effects of
internet addiction as follows							

1 Negative outcomes	Going online has negatively affected my schoolwork or job performance.
.	
2 Compulsive use	I have attempted to spend less time online but have not been able to.
3 Salience	Do you feel preoccupied with the Internet (think about previous online activity or anticipate next online session)?
4 Mood regulation	I have gone online to make myself feel better when I was down or anxious.
5 Social comfort	I feel safer relating to people online rather than face-to-face.
6 Withdrawal symptoms	I feel distressed or down when I stop using the Internet for a certain period of time.
7 Escapism	Do you use the Internet to escape from sorrows or get relief from negative feelings?

Further studies on nomophobia explain several dimensions and characteristics of nomophobia itself. Based on a qualitative study by Yildirim (2014) by conducting in-depth interviews, obtained four dimensions of nomophobia, which are (1) not being able to communication, (2) losing connectedness, (3) not being able to access information and (4) giving up convenience. The first feature explains that participants feel unsafe (insecure) when it can not send messages or call friends or family. The second thing is the participants felt disconnected from their online identity. Furthermore, participants felt helpless because they can not find answers instantly on the search engines for example Google to answer questions. The last is characteristic of participants feel upset because they can not complete the simple task, such as a plan or book a place for dinner. This resentment caused by habits of participants in solving this problem easily if there's any MP. It is also in line with the results of a study of Bragazzi (2014) who also examined about nomophobia. According Braggazi (2014) there are several characteristics of individuals who are already suffering from nomophobia indicated, are as follows.

• the technological device can be used in an impulsive way31 as a protective shell, shield, as a transitional object, or as a means for avoiding social communication (the so-called "new technologies paradox")

• To use regularly a mobile phone and to spend considerable time on it, to have one or more devices, to always carry a charger with oneself;

• To feel anxious and nervous at the thought of losing one's own handset or when the mobile phone is not available nearby or is misplaced or cannot be used because of lack of network coverage, flattened battery, and/or lack of credit, and try to avoid as much as possible the places and the situations in which the use of the device is banned (such as public transit, restaurants, theaters, and airports);

• To look at the phone's screen to see whether messages or calls have been received (a habit referred to by David Laramie as "ringxiety" – a portmanteau for ringer and anxiety);

• To keep the mobile phone always switched on (24 hours a day), to sleep with the mobile device in bed;

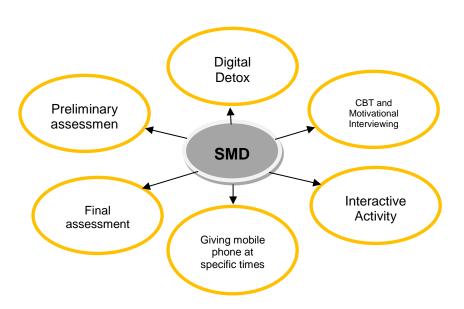
• To have few social face-to-face interactions with humans which would lead to anxiety and stress; to prefer to communicate using the new technologies;

• To incur debts or great expense from using the mobile phone. Ringxiety can assume sometimes intriguing and particular clinical forms of presentation, from the sensation of hearing "phantom ring tones" or "false mobile sounds" or confusing the sound of a cell phone ringing with a sound similar to it to the knee-jerk reaction to search for one's own mobile after hearing or presuming to have heard a ring tone.

2.2 Seven Magic Days

Seven Magic days is a new model in terms of psychological treatment against nomophobia. Handling model in which there will be some activities that will be given to participants. Seven magic days will be made in the form of quarantine for teen or adult participants who want to detached from dependence on the mobile phone (MP). Quarantine will be held for seven days and in which the participants will be devided into several groups. There are many activities undertaken to make participants aware of the impacts of excessive mobile phone use. It aims to modify behavior and changing the way of thinking of participants, so that participants who can be detached from the dependence on mobile phone. With the Seven Magic Days, expected participants who can better understand and appreciate the importance of direct communication with the surrounding environment. It is the aim of the Seven Magic Days to be achived, so the mobile phone that each person will be used according to need without having to excessive.

2.2.1. Indicators in Seven Magic Days



a. Preliminary assessment is to provide a questionnaire to assess the level of each participants nomophobis.

b. Digital Detox is the provision that participants are not allowed to bring mobile phone during the times of Seven Magic Days.

c. CBT and Motivational Interviewing is therapy being done to solve the problems concerning dysfunctional emotions, behavioural and cognition through goal orientation, and systematic procedures. This is also done with the interviews to support the therapy.

d. Interactive Activity, that are done in groups and in which contain of games and discussion so that participants can always interact directly.

e. Giving mobile phone at specific times, it is given when participants really need to contact relatives.

f. Final assessment is giving back the questionnaire to determine the rate of decline against nomophobia.

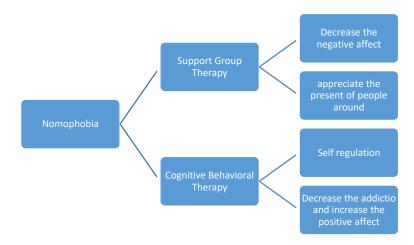
DAY 1	Preliminary assessnebt – questionnaire – CBT – support group therapy – questionnaire for evaluations
DAY 2-4	CBT – social interaction (games and group discussion) – support group therapy – feedback – questionnaire for evaluations
DAY 5-6	CBT – social interaction (games and group discussion) – support group therapy – feedback – planting the values of social interaction – questionnaire for evaluations
DAY 7	CBT – support group therapy – final assessment –Feedback

Table 2. The contents of activities in SMD

Tabel 3. SWOT Analyze

Strength	Weakness						
Can change the way of thinking about the use of mobile phone Can provide insight into the impact of mobile phone Can reduce nomophobia There is many direct evaluations every day	Takes a long time Requires no small cost						
Opportunity	Threat						
Understanding the impact of mobile phone will reduce excessive mobile phone use Individu desire to reduce dependency on mobile phone make their requests to follow Seven Magic Days	The existence of a less precise evaluation The result are less than optimal for participants						

3 THERAPIES



3.1 Support Group Therapy

Group counseling (Wynne, 2008) is a counseling setting is done in a group situation where in a group that each member of the group has the ability, in a comfortable condition and did not intervene. Sweetland, et al (2004) describes support groups as the individual with the same problems and needs can share experiences and help each other through tough times can thus obtain health and better welfare for all members. Support groups also called the "healing place" for people who are in it will equally seek needs and heal themselves and help others to do the same thing (Sweetland, 2004). Therapeutic support groups (Nayak, 2007) is

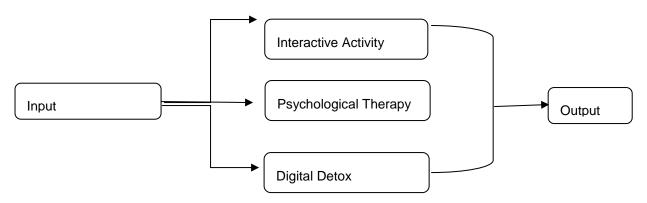
almost the same as the self-help group that focuses on the same issue, the difference is in the handling of a support group where treatment was handled by a professional or legal counseling agency. There are three advantages of group therapy supporter by Townsend (2009), which are openness among group members for members and receive information and opinions of other members, the willingness of the group to put the interests of the group by pressing personal interests in order to achieve the group's goals, and the latter is ability to emotionally disclose the rules and norms that have been agreed upon by the group. Besides the advantages there is also weaknesses, the existing weaknesses namely caused by the time when the therapy which requires time does little to convey the detail, there must be a distance between group members apart to be of quality and quantity (Townsend, 2009).

3.2 Cognitive Behavioral Therapy

According to Beck, CBT is a psychotherapy that is based on the cognitive model is the way that individuals perceive a situation is more closely connected to their reaction than the situation itself. One important part of CBT is helping clients change their unhelpful thinking and behavior that lead to enduring improvement in their mood and functioning (beckinstitute.org, 2016). CBT contain from many psychotherapeutic modalities, that are dialectical behavior therapy, acceptance and commitment therapy, Gestalt therapy, compassion focused therapy, mindfulness, solution focused therapy, motivational interviewing, positive psychology, interpersonal psychotherapy, and when it comes to personality disorders, psychodynamic psychotherapy. CBT has been extensively studied, and is an efficacious psychological treatment for panic disorder (Level 1) (Katzman et al, 2014). In fact, CBT was significantly favored over medications for the treatment of panic disorder in a meta-analysis (Roshanaei-Moghaddam et al, 2011). In meta-analysis to 42 stufents, exposure and exposure combination, cognitive therapy and other CBT technical is the best and consisten evidence fo the treatment of panic disorder (Katzman et al, 2014). Another meta-analysis found that CBT that included enteroceptive exposure was superior than relaxation therapy for panic symptoms (Siev and Chambless, 2007). CBT can be effectively delivered in both individual and group setting (Katzman et al, 2014). We can see that the changes in symptoms are preceded by changes in beliefs during therapy, and change in beliefs and avoidance behaviors are considered key process variables (Katzman et al. 2014)

Braggazi (2014) in the research says that However, cognitive-behavioral psychotherapy has been suggested as an effective treatment for nomophobia, even though randomized trials are currently lacking. Cognitivebehavioral psychotherapy is a brief therapy that includes structured sessions and specific objectives. Its systematic practice is based on explicit goals and tasks; both the patient and the therapist have active roles. The intention is to link catastrophic interpretations of events and to condition the patient's fears, sensory sensations, and avoidance behaviors. Patients are taught distraction strategies and are strongly encouraged to have face-to-face conversations and relationships. Reducing time spent with a mobile phone, online connections, doing some sport and breathing deeply may all be ways of coping. From a behavioral point of view, patients undergo controlled mobile deprivation. A "reality approach" is also highly recommended, asking the patient to focus on his/her own behaviors, also using motivational interviewing. Diaries in which participants can record their mobile phone use each day have also been proposed. There will be also provided pocketbook about CBT so, the therapy can runing according to the plan.

4 DISCUSSION



The activities carried out during the seven days of Magic Seven Days This makes researchers can tell how the development of the participants. The development of the participants will be easily visible because these

activities will always be evaluations directly, both in terms of observations or questions to each individual. Evaluation is intended that every individual who follows will feel a responsibility to be showed him its development, so it will facilitate researchers in observing. Magic Seven Days carried out for 7 days and each day the participants will be given a questionnaire that aims to see its later development.

Each day participants will also follow the interactive activity so that they can forget about dependence on mobile phone and make them aware that directly interact in the real world would be more fun. In this activity, SMD provides two therapies are group therapy and CBT therapy. Both of these therapies are used because they support each other. If one therapy eliminated, the results obtained will be less than optimal.

SMD done 7 days and can be said to be long because it's CBT therapy does take a long time to be able to see the developments for each participant who follow. CBT therapy for the treatment of panic disorder typically involves 12-14 sessions, but short strategy within 6-7 sessions have proven effective (Katzman et al, 2014). Efforts are being made to reduce the impact of mobile phone technologies such as this is to bring awareness to individuals about the importance of understanding the negative impact of these technological advances (Ngafifi, 2014).

The activities provided will give effect to the participants in resuscitation how to be responsible for themselves to others, how to position themselves in situations that should be separated from the mobile phone, and realize that the direct interaction it would be more fun and profitable. Strategies that included exposure were the most effective for panic measures. For measures of agoraphobia, combined strategies were more effective than single techniques, the which did not result in significant improvements. Factors that improved the effectiveness of treatments were the inclusion of homework and a follow-up program (Katzman et al, 2014). To that end, the need for regular follow-up and evaluation, so with the camp for 7 days requirement of CBT can be resolved, so that therapy can be run with the maximum.

The first impact is aware that the need for responsibility for oneself to others. The responsibility here for example is with respect for others who are nearby. Having other people around automatically there will be direct interaction process and in that situation, it will be discussion that makes people exchange ideas with his interlocutor. This is done to determine how the level of emotion when if the individual is gathered and his friends busy with mobile phone respectively. The existing of exchange thoughts by each individual in the activities that follow will aware that in fact if the mobile phone will always give their dependence in yourself, then it will lead to some negative things that would appear. As well, if there is one of the people who overreact to mobile phone there should be an awareness of other people to remind each other (Hanika, 2015). Therefore, people will know and understand that he has his own responsibilities and to others.

The second impact is aware that in life there are positions that make the individual must be detached from the mobile phone. This is supported by the mobile phone at the time of withdrawal SMD activity. This withdrawal is done while intended that participants can gradually forget the mobile phone. It is also to aware the participants that the interaction directly with the closest people will remain and more fun.

Many people aware in this case, but only a few can do it. The point is its dependency, the original problem is that individuals will be busy playing a mobile phone without the need to care for the surrounding environment. Therefore, the activities in the Magic Seven Days this would be the right solution because it contains some of the activities that make people preoccupied with the group while playing or building a cohesive group in it.

This activity will make people forget the mobile phone and think that it is in those moments that individual will be busy interact and do not have time to think about mobile phone. This awareness will change the mindset of each individual that dependence by mobile phone will be reduced when they have activities that keep him busy. It is also important, if we're with other people to discuss a topic that people should ask permission first to the interlocutor so that the other person continues to feel appreciated (Hanika, 2015). This awareness will affect the individual and makes the individual able to differentiate at moment as to what they may played a mobile phone with free or when they should be able to release mobile phonennya while.

The third is aware that direct interaction it would be more fun and profitable. This impact occurs when each individual can feel and enjoy direct interaction with his new friends in the group. Lots of activities and also wrote an explanation in it that is far from the mobile phone will still make people fine without having to think about her fears when away from his mobile phone. These effects appeared because of the many activities provided and very interesting to do in the Seven Magic Days. Group activities and this partnership will aware individuals that interact directly would be more fun, but it also will be more profitable.

Profitable, they mean that every individual who interacts directly will understand how his emotional state so

that it can position itself to interact without having to have a perception in advance as is done when interacting indirectly via the mobile phone. According Ngafifi (2014) each individual must be made aware of the devastating impact of technology such as mobile phone so as not addicted because the technology here is not the highest of an aspect of human life.

This makes the awareness of individuals to be able to interact directly and also believe in the presence of this would help in reducing the use of mobile phone at the time along with everyone else. This occurs because the individual is aware of the direct interaction that would be more fun. To that end, all these goals will be retained by the CBT therapy and SGT in order to change the way of thinking of the car phone and can change the behaviors that show concern when separated with a mobile phone.

All effects happened can be seen because some evaluation directly for Seven Magic Days activities. The impact can be seen when they do activities as well as cooperation among the team. Initially it may be a bit of progress that aesthetically, but after a few days will see the development of every participant who stand to be observed. Because it was originally going to have participants who always asked where his mobile phone, but it is also still there are some of partcipants want to take a mobile phone with a couple of reasons.

This incident does not make them directly to get mobile phone because the provision of these activities may not use a mobile phone. Indeed, many events that occur from participants who may be very difficult to be away from the mobile phone. But this incident began to decrease when in the following days. where, will be given some of the activities that make them be forgotten on his desire to get the mobile phone back. This is what makes the effects of the Magic Seven Days is visible. Be wise, gadget only interaction tools. Do not make the gadget as a substitute for direct interaction and the opportunity to meet and chat with your loved ones, because it will never be replaced.

5 REFERENCES

- Beck Institute. Cognitive Behavior Therapy (CBT) is a time-sensitive, structured, present-oriented psychotherapy directed toward solving current problems and teaching clients skills to modify dysfunctional thinking and behaviour. Available on https://www.beckinstitute.org/get-informed/what-is-cognitive-therapy/ (access on 30 oct, 2016)
- Bianchi, A. & Phillips, JG. 2005. Psychological predictors of problem mobile phone use. *Cyberpsycjoll Behav, 8(1),* 39-51.
- Bragazzi N., & Puente, G. 2014. A proposal for including nomophobia in the new DSM-V. *Psychol Res Behav Manag, 16(7),* 155-60
- Hanika, M.,2015.Phubbing Phenomenon in an Age Milenia (someone on smartphone dependence on the environment). *Journal of Interaction, 4(1)*
- Hardiati, F.2016. Interpersonal Communication Nomophobia Patient In Relationships of Friendship. JOM FISIP, 3(2)
- Kalaskar, P. 2015. A study of awareness of development of NoMoPhobia condition in Smart Phone user Management Students in Pune city. ASM's International E-Journal on Ongoing Research in Management and IT
- Katzman, M, et al. 2014. management of anxiety, posttraumatic stress and obsessive-compulsive disorder. BMC Psychiatry 14(1), 2 – 83
- King, A., et al. 2014. "Nomophobia": Impact of Cell Phone Use Interfering with Symptoms and Emotions of Individuals with Panic Disorder Compared with a Control Group. *Open Access : Clinical Practice & Mental Health, 10,* 28-35
- Nayak, A. 2007. Guidance and Counselling. New Delhi: APH Publishing Corporation
- Ngafifi, M.2014.Advances I Technology and Patterns of Human Life in Socio-cultural Perspective. *Journal of Educational Development : Foundation and Applications, 2(1)*
- Nikhita, C., Jadhav, P., Shaunak, A. 2015. Prevalence of Mobile Phone Dependence in Secondary School Adolescents. *Journal of Clincal and Diagnostic Research*, *9(11)*, 1-6
- Okezone.com.2015. Smartphone Users in Indonesia Reached 55 Million. Available on http://techno.okezone.com/read/2015/09/19/57/1217340/2015-penggunasmartph-one, (access on 10 Oct 2016)

- Roshanaei-Moghaddam, B., Pauly M., Atkins D., Baldwin S., Stein M., Roy-Byrne P. 2011. Relative effects of CBT and pharmacotherapy in depression versus anxiety: is medication somewhat better for depression, and CBT somewhat better for anxiety? *Journal Of Depression and Anxiety*, 28(7), 560-7
- Sharma, N., et al. 2015. Rising concern of nomophobia amongst Indian medical students. *International Journal of Research in Medical Sciences*, *3*(*3*), 705-707
- Siev, J. & Chambless D.2007. Specificity of treatment effects: cognitive therapy and relaxation for generalized anxiety and panic disorders. *J Consult Clin Psychol*, 75(4), 513-22.
- Sweetland, dkk.2004. Mental Health and HIV/AIDS : Psychosocial Support Groups in Antiretroviral (ARV) Therapy Programmes. Johannesburg : WHO Press.
- Townsend, M.2009.Psychiatric Mental Health Nurcing Concept of Care in Envidence-Based Practice. 6th ed. Philadelphia : F.A. Davis Company
- Wallace, P. 2014. Internet addiction disorder and youth. Embo Reports: Science & Society, 15(1), 12-16
- Wynne, S. 2008. FTCE : Guidance and Counseling PK-12. Boston: XAMonine, Inc.
- Yildrim, C. 2014. Exploring the dimensions of nomophobia: Developing and validating a questionnaire using mixed methods research. *Graduate Theses and Dissertations*