In March 2013, a story appeared in *The Sun* newspaper claiming that one in ten college students say they are ‘addicted’ to their mobile phones (Hope, 2013). They reported the findings of a US survey of 2,000 college students. It also reported that 85% of the students constantly checked their mobile phones for the time, and that 75% slept beside it. The article also interviewed Peter Smith, a counsellor who runs an addiction clinic in Weston-Super-Mare (Somerset). Smith claimed he has seen a significant increase in people seeking help for their mobile phone addiction. He was quoted as saying:

‘Smartphone users feel they’ve got more control to communicate with whoever they want, whenever they want. But ironically, it’s that sense of control that creates the anxiety. It’s made younger people more reliant on maintaining those contacts – which can create issues from bullying, to being marginalised and excluded. People lose track of time, becoming socially isolated and before they know it, can’t stop. Not having your phone raises your heart rate and signs of panic. These symptoms are almost identical to alcoholism or addiction to gambling, food or drugs’ (Hope, 2013).

So is this something of real concern? I have been studying ‘technological addictions’ for over 25 years and I coined the term ‘technological addictions’ in a paper I wrote back in the 1990s (Griffiths, 1995). Although I have published a lot of papers on various technological addictions (e.g., slot machine addiction, video game addiction, internet addiction, etc.), I have only ever published one study on mobile phone addiction with some of my research colleagues from Spain (i.e., Carbonell, Chamarro, Beranuy, Griffiths, Obert, Cladellas & Talarn, 2012).

**Mobile Phone Related Experiences**

Our study was published in 2012, and surveyed almost 1900 pupils and students from Catalanian educational institutions (1,557 secondary school pupils and 322 university students). We surveyed the participants using the 10-item ‘Questionnaire on Cell Phone Related Experiences’ (Cuestionario de Experiencias Relacionadas con el Movil [CERM]) (Beranuy, Chamarro, Graner & Carbonell, 2009). The CERM examines two areas of mobile phone use – conflicts and communicative/emotional use.

Our study found that frequent problems with mobile phone use were reported by 2.8% of the pupils and students. Problematic use was greatest in the youngest age groups. Perhaps unsurprisingly, the most used applications were text-messaging and making calls. We carried out a regression analysis and found that the types of mobile phone use that contributed the most to problematic use were text-messaging and playing games, whereas making calls contributed the least. Our results suggest that very few young people have problems with mobile phones, in contrast with the findings of previous studies in Spain that reported pathological mobile phone rates of approximately 8%-11% (e.g., Jenaro, Flores, Gomez-Vela, Gonzalez-Gil & Caballo, 2007; Labrador & Villadangos, 2010). Our results suggested that females have some difficulties with phone use. Other researchers have also reported that females use mobile phones more than males, and perceive their use as more problematic than boys (Beranuy, Oberst, el al., 2009; Choliz, Villanueva & Choliz, 2010; Labrador & Villadangos, 2010).

We also noted in our study that mobile phones are becoming more varied in their use and new applications such as the playing of games appears to be more attractive to males. Traditionally, the use of mobile phones has been for communication and as such, the risk of problematic use was minimal. However, this
risk of problematic use and/or addiction could be potentially higher for mobile phones that include applications that can facilitate the altering of user identity (e.g., gaming, social networking, etc.).

**Addictive behaviour**

We also argued that some people may confuse habitual use of such technology as an addictive behaviour (when in reality it may not be). For instance, some people may consider themselves mobile phone addicts because they never go out of the house without their mobile phone, do not turn their mobile phone off at night, are always expecting calls from family members or friends, and/or over-utilise mobile phones in their work and/or social life. There is also the importance of economic and/or life costs. The crucial difference between some forms of mobile phone use and pathological mobile phone use is that some applications involve a financial cost. If a person is using the application more and is spending more money, there may be negative consequences as a result of not being able to afford the activity (e.g., negative economic, job-related, and/or family consequences). High expenditure may also be indicative of mobile phone addiction but the phone bills of adolescents are often paid for by parents, therefore the financial problems may not impact on the users themselves.

It is very difficult to determine at what point mobile phone use becomes an addiction. The cautiousness of researchers suggests that we are not yet in a position to confirm the existence of a serious and persistent psychopathological addictive disorder related to mobile phone addiction on the basis of population survey data alone. This cautiousness is supported by other factors including:

(a) absence of any clinical demand in accordance with the percentages of problematic users identified by these investigations

(b) the psychometric instruments used could be measuring ‘concern’ or ‘preoccupation’ rather than ‘addiction’

(c) the normalisation of behaviour and/or absence of any concern as users grow older

(d) the importance of distinguishing between excessive use and addictive use.

All researchers agree in the necessity of longitudinal studies in order to check if perception of the problematic use of mobile phones still exists over time. Many pupils and students claim to have been ‘addicted’ to texting/instant messaging during some period of their adolescence. Our research suggests they are simply describing a period of their development with strong needs of social ties rather than a true addiction. If any of you reading this really want to know if you or an adolescent you know may have a problem with mobile phone use, then you can take this simple test I devised. If a person answers ‘yes’ to six or more of these statements, it may be indicative of a problematic and/or addictive use of a mobile phone:

- “My mobile phone is the most important thing in my life”
- “Conflicts have arisen between me and my family and/or my partner about the amount of time I spend on my mobile phone”
- “My mobile phone use often gets in the way of other important things I should be doing (working, education, etc)”
- “I spend more time on my mobile phone than almost any other activity”
- “I use my mobile phone as a way of changing my mood”
- “Over time I have increased the amount of time I spend on my mobile phone during the day”
- “If I am unable to use my mobile phone I feel moody and irritable”
- “I often have strong urges to use my mobile phone”
- “If I cut down the amount of time I spend on my mobile phone, and then start using it again, I always end up spending as much time on my mobile phone as I did before”
- “I have lied to other people about how much I use my mobile phone”

However, just remember that excessive use does not necessarily mean addiction, and the difference between a healthy enthusiasm and addiction is that healthy enthusiasms add to life, and addictions take away from them (Griffiths, 2005).
References


Hope, L. (2013). Help, we're addicted to our smartphones. The Sun, March 21, p.17.
