ONLINE GAME ADDICTION AMONG ADOLESCENTS IN A SELECTED SCHOOL OF DANG



\mathbf{BY}

MUNA OLI

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A Research Report Submitted for Partial Fulfillment of the

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Purbanchal University, Nepal

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DECLARATION

To the best of the knowledge I declare that this research report entitled "Online Game

Addiction Among Adolescents in a Selected School of Dang" is the result of my

own research and contains no material previously published by any other person

expect where the acknowledgment has been made. This report contains no material,

which has been accepted for the award of any other degree or diploma in any

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I also declare that Yeti Health Science Academy, Maharajgung, Kathmandu, shall

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format for academic or research purpose.

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Name: Muna Oli

Date: 2077/ /

APPROVAL SHEET

This is to certify that Ms. Muna Oli has conducted this research entitled "Online Game Addiction Among Adolescents in a Selected School of Dang" under guidance and supervision.

This research report is submitted for partial fulfillment of the requirement for Bachelor of Science in Nursing from Yeti Health Science Academy, Purbanchal University, Nepal. This research has been accepted and recommended for final approval.

Research Approved By:	
	Date
Ms. Prapti Pokharel	
Research supervisor	
	Date
Ms. Sagun Bhandari	
Member of Research Committee	
	Date
Mr. Ramesh Bhatta	
Principal	

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ABSTRACT

Introduction:

An online game is a video game that is either partially or primarily played through

the Internet or any other computer network available. The design of online games can

range from simple text-based environments to the incorporation of complex

graphics and virtual worlds.

Objective: To assess the online game addiction among adolescents.

Method: A descriptive cross-sectional study was used to assess the online game

addiction among adolescents. Total 91 respondents were selected from Tulsi Boarding

Higher Secondary school of Dang .Data were collected using questionnaire method

Non-probability snowball sampling technique was used for this study. Data were

analyzed using descriptive statistics for level of online game addiction; chi-square for

association between the levels of online game addiction with selected variables.

Results:

The study revealed that 52.7% of respondents had high level of online game addiction

and 47.3% had low level of online game addiction. Education level of father (0.046) playing device computer (0.030), duration of playing games (0.006) and relationship changed between parents and respondents(0.041) were statically significant with level

of online game addiction.

Conclusion:

The study concludes that about half of the respondents had high level and half had

low level of online game addiction . Most of the users are adolescents between 13 and

19 years old and spend about 2 until 4 hours in a day. This condition becomes worse

if there is no treatment for adolescents. Hence, there is a need of parents' control and

awareness toward children's activity in playing online games since it renders negative

impacts particularly on children's learning activity and motor development.

Keywords: Online game addiction, Adolescents, School

ABBREBIATION

APA: American Psychological Association

BSN :Bachelor of Science in Nursing

CII : Confederation of India Industry Report

IGD :Internet Gaming Disorder

N:Sample size

PUBG: Players Unknown's Battlegrounds

PAT: PUBG Addiction Test

SPSS: Statistical Package for the Social Sciences version

UNICEF: United Nations International Children's Emergency Fund

WHO: World Health Organization

YHSA: Yeti Health Science Academy

TABLE OF CONTENTS

CONTENTS	PAGE
TITLE PAGE	i
DECLARATION	ii
LETTER OF APPROVAL	iii
ACKNOWLEDGEMENT	iv
ABSTRACT	v
LIST OF ABBREVIATIONS	vi
TABLE OF CONTENT	vii
LIST OF TABLE	viii
LIST OF FIGURE	ix
CHAPTER I:INTRODUCTION	
1.1. Background of the Study	1
1.2. Statement of the Problem	2
1.3. Rational of the Study	3
1.4. Research Questions	4
1.5. Objectives of the Study	4
1.5.1. General Objective	4
1.5.2. Specific Objectives	4
1.6. Variable of the Study	4
1.6.1. Dependent Variables	5
1.6.2. Independent Variables	6
1.7. Conceptual Framework	7
1.8. Operational Definition	8

CHAPTER II: LITERATURE REVIEW

2.1. Introduction	9
2.2. Review of Related Literature	9
2.3. Summary of Literature	15
CHAPTER III: RESEARCH METHODOLOGY	
3.1. Study Design	16
3.2. Study Area and Population	16
3.3. Sampling	16
3.3.1. Sampling Technique	16
3.3.2. Sampling Frame	16
3.3.3. Sampling Size	16
3.4.Method of Data Collection	17
3.5.Instrumentation for data collection	18
3.6. Validity and Reliability	18
3.7.Inclusioncriteria	18
3.8.Datacollection procedure and ethical consideration	19
3.9. Data Processing, Analysis and Presentation	19
3.10 Delimitation of the study	19

CHAPTER IV:DATA ANALYSIS AND INTERPRETION CHAPTERV:DISCUSSION,CONCLUSION,RECOMMENDATION

5.1 Discussion	20	
5.2Conclusion	47	
5.3.Limitation of Study	47	
5.4.Recommendation	48	
5.5.Implication of the Study	48	
5.6.Plans for Dissemination	48	
6. WORK PLAN	49	
7. BUDGET PLAN	50	
8. REFERENCE	51	

APPENDICES

APPENDIX A - INFORMED CONSENT	53
APPENDIX B- RESEARCH INSTRUMENTA	ATION 54
APPENDIX C -OFFICIAL LETTER	71

LIST OF TABLE

TABLES	PAGE
Table 1: Socio Demographic Information of the Respondent	21
Table 4: Internet and device used variable	25
Table 6:Family Factor variables	27
Table 13: Respondent level of Internet Addiction Table 14: Association between Respondents	36
with level of Online Game addiction	36

LIST OF FIGURE

Fig 1: Conceptual Framework on Online Game Addiction Among Adolescents in a Selected school of Dang

CHAPTER I

INTRODUCTION

1.1.Background of Study

Gaming disorder (both online and offline) in the eleventh revision of the International Classification of Diseases (ICD-11) as a disorder that threatens public health and well-being (World Health Organization[WHO], 2018).

A 2018 market research survey conducted among 1047 Indian gamers reported that PUBG was the most popular game (62%) followed by the games Free Fire (21%) and Fortnite (8%) (Bhattacharya & Singh, 2018).

Over two billion people play video games worldwide, including 150 million in the United States .And 83% of teenage girls ,92% of teenage boys playing video games regularly (World Health Organization [WHO] ,2018).

India had 198 million mobile gamers in 2015, and this it is expected to grow to 628 million gamers on multiple portable devices by 2020 (Confederation of India Industry report [CII], 2018).

A research survey conducted among 1047 Indian gamers reported that PUBG was the most popular game (62%) followed by the games Free Fire (21%) and Fortnite (8%) (Bhattacharya & Singh, 2018).

In the last few years, gaming addiction among teenagers and young adults has risen significantly. The addiction to online gaming is mostly seen in the age group of 12 to 25 years (Malhotra, 2018).

The prevalence of Internet gaming 8.5% among American youth 8 to 18 years,5% among Australian youth. 1.2% (2.0% for boys, 0.3% for girls) among German ninth graders, 5.5% among Netherlands adolescents 13 to 20 years of age (Markle , Griffiths, Rehbein , & Gentile, 2017).

Adolescents is a development phase ranging from the ages 10-19 years, when youth go through psychological, social, physical, and neurobiological alterations (United Nations International Children's Emergency Fund [UNICEF]2016).

The prevalence of internet gaming, 8.7% among Singaporean youth, 9.9% among Spanish adolescents, 8.0% among American youth aged 8 to 18 years, 1.7% German adolescents, 3.3% among adolescents in the Netherlands (Wang, Chan, Mak, & Wong, 2014).

A digital game is an electronic and dynamic system, "a state of machine" & also include elements such as moving images, vibrant colors, sophisticated graphics & sound stimulus (Adams & Dorman, 2012).

A game is a system in which players engage in an artificial conflict, defined by rules, that results in a quantifiable outcome (Salen & Zimmerman, 2004).

1.2.Statement of the problem

Games can negatively affect the brain, memory, and vision. They can cause stress, anxiety, and even isolation if the addiction gets severe enough .It can even kill brain cells and interrupt a person's sleep (Kim, 2019).

Children who play such game might have aggressive thoughts, emotion and behavior that will lead them to a worst situation in their future (Kc,2019).

The largest youth population in the world, India is embracing the new generation's interests in digital sports and entertainment. Approximately 55 % of causal gamers and 66% of heavy gamers across India were seen to be below 24 years old in 2016. And the heavy gamers mostly preferred to use their mobile phones as gaming devices instead of the traditional desktops or even laptops (Statistics Research Department, 2019).

The number of active gamers worldwide will rise to more than 2.7 billion people in 2021, up from 1.8 billion in 2014 and 2.3 billion in 2018 (Statistic Research Department ,2018).

Excessive gaming may lead to avoiding negative moods and neglecting 'normal' relationships, school or work-related duties, and even basic physical needs," (Paulus, 2018).

Aggressive behavior, loner, wrong values, impact on health & bad academic performance are some of the negative effects of the online gaming (Ali, 2018).

Gaming disorder has been recognized as a disorder and treatment programs have been established including South Korea and China (World Health Organization [WHO], 2017).

The prevalence of IGD varies worldwide and is estimated to be between 0.2% and 8.5%. The severity and prevalence of Internet Gaming Disorder are found to be higher in the Asian countries than that of the West countries. Some of the reviews claim that Korea reported to have the highest known prevalence, where up to 50% of the adolescents are presumed to be addicted to online gaming (Naskar, Victor, Nath, & Sengupta, 2016).

About half of all adolescents are gaming for 2 or more hours per day, spending more time at home and less time out socializing. There are well-documented risks to social development, physiology, sleep, mental health and school performance (Taylor & Francis, 2015).

The effects of playing excessive games is associated with reduced sleep time, limited leisure activities, insomnia, attention problems, poor academic performance, anxiety, depressive symptoms, deterioration of interpersonal relationships, family conflicts, youth violence or crimes, lower self-esteem, and lower satisfaction with daily life, serious health problems in adolescents as they are experiencing significant physical and psychosocial changes and lack self-regulation (Wang, Chan, Mak, & Wong, 2014).

Internet gaming disorder (IGD) can have major detrimental effects on individuals including depression, anxiety, stress, psychosocial problems, and lower psychological well-being and consequently deserves recognition and further examination (Kuss & Griffiths, 2012).

1.3. Rational of the study

In India (Lucknow city) among 120 adolescents, nearly half of the respondents (49.02 % boys & 42 % girls) were moderately addicted to online games, while 35% respondents (45.1 % boys & 27.5 % girls) were highly addicted to these games and Few respondents 20 percent (5.9 percent boys & 30.43 percent girls) were not addicted to any online game (Singh & Agarwal, 2018).

In Lebanon among N = 524, 47.9% males participated and it was concluded that sleep disturbances and poor academic achievement in relation to Lebanese adolescents identified with IGD (Nazir, Maya, & Mark, 2018).

In Europe among 827 adolescents aged 14 to 19 years respondents .Result showed that in urban area Adolescent spent more time playing online games, to relieve boredom and experience new sensations, than young people living in the rural area. Major predictors of online gaming addiction included male gender, urban residence, domestic violence, mother's child-raising rules being challenged by the father, and the child's sense of responsibility for his/her parents (Pawłowska, Potembska, & Szymańska, 2018).

Consequences of video game addiction can showcase in a number of ways, including wrist, neck and elbow pain, skin blisters, calluses and sleep disorders. Long-term addiction could lead to obesity, weakness or numbness in the hands (peripheral neuropathy) and even blood clots (Moberg, 2015).

Online game addiction may also be associated with mental illnesses such as depression, nervousness, fear, social anxiety, and social phobias (Griffiths, 2010).

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Excessive online gamers typically sacrifice sleep because of long hours and sitting in front of computers, they are more likely to have elevated frequencies of headaches, backaches, cervical disease, eye strain, seizures, and repetitive stress injury (Chuang, 2006).

Online game addiction is prevalent in many countries, including China, Korea, Vietnam, Japan, U.S., and Canada. In South Korea, 2.4 percent of the population, ages nine to thirty-nine, were believed to be addicted to online games, and over 10 percent could be classified as obsessive gamers (Fayola, 2006).

In China, the first officially licensed clinic for Internet game addiction was established in Beijing. Almost all the patients in this clinic were teenagers who were sent by their parents (Beijing Clinic Ministers, 2005).

There are many study done in other countries like America ,Singapore, Netherland ,Norway, Korea ,Japan , Hong kong ,China ,India etc regarding online game addiction among adolescents. Though Nepal lies in South Asia where the prevalence of online game addiction is high in Asian countries in compare to Western countries. In Nepal very few studies have been done, lots of problem has been found among adolescents in Nepal but still study regarding online game addiction was not been officially published during the entire period of the research . Therefore there is need of more research to assess the level of online game addiction and behavioral problem among adolescents.

1.4. Research Question

What is the level of online game addiction among adolescents?

1.5. Objectives of the Study

1.5.1.GeneralObjective

To assess the online game addiction among adolescents.

1.5.2. Specific Objectives

- To find out the level of online game addiction among adolescents.
- To measure the association between the online game addiction with their demographic variables.

1.6. Variables of the Study

1.6.1. Independent Variable

- a. Socio-demographic Variable
- Age
- Sex
- Ethnicity
- Religion
- Types of Family
- Educational level of father
- Educational level of mother
- Occupation of father
- Occupation of mother
- Family income

Internet related Variables

- Types of playing device: Smartphone, computer, laptop, tablet, ipad
- Types of game: PUBG, Freefire, Call of duty
- Duration of Play

Family factor Variables

Family Environment (Residence with family, Parents time, relationship changed with parents ,parental relationship)

Modes of internet use:

- Wi-Fi
- Data mode

1.6.2. Dependent Variable

Online game addiction among adolescent.

- Lack of control
- Distress
- Disengagement
- Over enthusiasm &impulsive use
- Excessive use
- Escapism
- Obsession

1.7. Conceptual framework:

Socio demographic variables

- Age
- Sex
- Ethnicity
- Religion
- Types of family
- Educational level of father
- Educational level of mother
- Occupation of father
- Occupation of mother
- Type of family
- Family income

Internet variables

- Types of device: Smartphone, computer, laptop, tablet, ipad
- Types of game:
 PUBG, Freefire Clash of Clans
- Duration of play

Family factor:

- Parents-Child relationship
- Family
 Environment
 (Residence with
 family, Parents
 time,
 relationship
 changed with
 parents
 ,parental



Figure 1: Conceptual Framework On Online Game Addiction Among Adolescents

1.8. Operational Definition

- Game: The activities which is performed either alone or in group for the purpose of entertainment who are studying at grade 8,9,10,11 &12 of Tulsi Boarding Higher Secondary School
- Online Game: A hugely popular game which played by the Tulsi Boarding Higher Secondary School students via internet or online .PUBG, Freefire, Call of duty, League of Legends &Defense of the Ancients are some of the examples of online game.
- **Addiction:** The condition of being addicted to online games among the students who are studying at grade 8,9,10,11 & 12 of Tulsi Boarding Higher Secondary School.
- Online Game Addiction: A phenomenon where the students of Tulsi Boarding Higher Secondary School are engaged in game more or less than 30 hours a week (American Psychological Association [APA],2014).
- Adolescents: The physical and psychological changes that occurs between ages 13-19 years among the students of Tulsi Boarding Higher Secondary school.
- Lack of control: Excessive engaging in games, the performance or productivity of the individual seems to be affected, they find it difficult to cut down the usage and spend a lot of time thinking about games even when they are not playing, or planning when they can play next.
- **Distress:** Playing excess causes manifestations of anxiety and sorrow in the individual when not able to play.
- **Disengagement:** When the individual withdraws his/her involvement in a social activity, amidst people or in a group due to usage of online game.
- Over-enthusiasm & Impulsive use: The individual has an excessive involvement and this
 causes unwanted behavior patterns in the individual and also the individual cannot control
 the usage and does not pay concern over the consequences.
- Excessive use: Being secretive about the use and overindulgence of usage causing disturbance to normal routine lifestyle.

- **Escapism:** Using online game as a source to escape from reality, forget about personal problems, or to relieve uncomfortable feelings such as guilt, anxiety, helplessness or depression.
- **Obsession:** Intense passion towards the game and no track of time played, feeling compelled to play more and search more items in the game.

CHAPTER II

REVIEW OF LITERATURE

2.1 Introduction

Literature review is an essential step in the research project. It is a broad, comprehensive, indepth systematic and critical review of scholarly publication, published scholarly printed materials, audio-visual materials and personal communication by the researcher to the related problem under investigation or the proposed study/topic. It provides basis for proposal writing by justifying the need for the study, making future investigation, throws light on the feasibility of the study, reveals constraints of data collection and relates the finding from one study to another that will help to establish a comprehensive study of scientific knowledge in professional discipline, from which valid and pertinent theories may be developed.

It is also called the narrative review. It is both summary and explanation of the complete and current state of knowledge on a limited topic as found in academic books, journal articles and other documents that describes past written state of information, organizes the literature into topics and documents that is needed for proposed study.

2.2 Review of Related Literature

A cross sectional study was conducted in Delhi ,India among 300 students aged 13 years to 16 years. The objective of the research is to see the difference in the levels of internet gaming addiction among male and female Indian adolescents. And the result showed that there is a significant difference in the level of internet gaming addiction among male and female Indian adolescents. With male adolescents being at high risk of developing internet gaming addiction (Kaur, 2020).

A descriptive qualitative study was conducted in Indonesia among 200 Indonesian adolescents as online game users. The study aimed to explain and describe the use of Certainty Factor Method with expert system to diagnose online game addiction on adolescents. Survey method was employed to obtain the data while its instrument in terms of questionnaire was provided in Google forms and distributed to the students. An interactive qualitative approach was deployed to analyze the data combined with certainty factor method to show the level of game online addiction. The result shows from the sample of data which have analyzed addiction level toward online games is relatively moderate. Most of the users are adolescents between 12 and 15 years

old and spend about 4 until 6 hours in a day. This condition becomes worse if there is no treatment for adolescents. Hence, there is a need of parents' control and awareness toward children's activity in playing online games since it renders negative impacts particularly on children's learning activity and motor development (Saddhono, Setyawan, Raharjo, & Devilito, 2020).

A cross sectional study was conducted in Korea among 378 respondents who are high school students. The purpose of this study was to identify the moderating effect of self-control in the relationship between online game addiction and depression among adolescents exposed to the online game environment. The results showed that online game addiction in adolescents had a significant positive effect on depression and self-control had a negative effect on depression, and self-control had a moderating effect on the relationship between online game addiction and depression in adolescents. The higher the online game addiction among adolescents, the higher the depression, and the influence depends on the level of self-control (Kim & Hwang, 2020).

The descriptive cross-sectional study was conducted at seven middle schools in the province of Istanbul The purpose of this study was to investigate the online game addiction (OGA) level and the risk factors involved in online game addiction among middle school students. The data were collected with a questionnaire, the Computer Game Addiction Scale for Children (CGASC) and the Social Anxiety Scale for Children (SASC), 1174 students who played online computer games were included in the study. It was found that 5.7% of the sample group were addictive users, that 44% were problematic users and that an older age, a higher level of social anxiety (SA), having a mother who is employed, having parents who completed high school or a higher level of education, and the time spent on the computer are risk factors for online game addiction (Karaca, Karakoc, Gurkan, Onan, & Barlas, 2020).

A cross sectional study was conducted in Indonesia among 78 nursing students. The purpose of this study was to determine the effect of the duration of playing online games with the level of depression. This study is an analytic survey with a cross-sectional approach. The results showed that there was an influence of the duration of playing online games on the level of depression with a Sig value of 0.01 <0.05 and a correlation coefficient of 0.383. The conclusion that there is a weak influence of the duration of playing online games on the level of depression of the S1 Nursing Study Program students of STIKes Muhammadiyah Ciamis (Noviati, Kurniawan, Herdiana, Sukmawati, & Lismayanti, 2019).

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A Descriptive cross-sectional study was conducted in China among 600 students enrolled in the seventh, eighth, and ninth grades .The objectives of this study was to examine the relationship between mobile game addition and social anxiety, depression, and loneliness among adolescents. Data was collected using mobile game addiction scale, Brief Symptom Inventory (BSI) scale, Social Anxiety Scale & Child Loneliness Scale .The result showed that 10% variance of depression, 6% variance of social anxiety, and 4% variance of loneliness. when they use mobile game addictively. And it was concluded that that mobile game addiction was positively associated with social anxiety, depression, and loneliness (Wang, Sheng, & Wang, 2019).

A cross-sectional study was conducted in India among 455 participants, 392 were males and 63 were females, and their age varied from 13 to 46 years from multiple cities in India .The purpose of the study was to develop a questionnaire which measures the addiction formed in PUBG online game .The result showed that Disengagement, Lack of control, Excessive use, Obsession, Distress, Escapism and Over-enthusiasm & Impulsive use. PAT is highly reliable with the coefficients which varied from 0.501 to 0.912.The test, which measures addiction in 7 components is highly significant ranged from 0.134 to 0.655. All of the obtained correlation coefficients were found to be significant at .001level (Souza1, Manish, & Deeksha, 2019).

A cross sectional study was conducted in Turkey among 987 participants, 567 were male (57.4%) and 420 were female (42.6%). Participants' mean age was 23.65 (Standard deviation=6.37, Minimum=14, Maximum=60) to evaluate the relationship of Internet gaming disorder severity with alexithymia and aggression among university students by using online survey method. Data was collected using internet Gaming Disorder Scale. the relationship of Internet gaming disorder severity with alexithymia and aggression among university students using. Result showed that hierarchical linear regression analysis, both alexithymia (particularly the dimensions "difficulty identifying feelings" [DIF] and "externally-oriented thinking" [EOT]) and aggression (physical aggression) predicted the severity of Internet gaming disorder symptoms, together with severity of depressive symptoms. It was concluded that alexithymia, particularly in its dimensions DDF and EOT, is related with the severity of Internet gaming disorder, together with aggression, particularly physical aggression, and depression (Evren, Evren, Dalbudak, Topcu, & Kutlu, 2019).

A cross-sectional study was conducted in Turkey among 478 Turkish online gamers, aged between 14 and 38 years (Mean age = 20.88, SD = 4.79, 96% male, 39% adolescents). The objective of this study was to investigate the mediating role of loneliness, depression, and online gaming motives and moderating role of age on the relationship between trait emotional intelligence (EI) and Internet gaming disorder (IGD) via the construction of a multiple mediation mode. Data was collected by participated anonymously and voluntarily in an online

survey. Result showed that majority of the participants were male (96%) and adult (61%), 17% of the gamers played videogames for more than 42 h a week, and 11% used gaming less than 7 h a week and association of trait EI on IGD was slightly higher among adolescent gamers and was negatively associated with escape motive, loneliness, and depression. It was concluded that trait EI is inversely associated with IGD and affects gaming for different motives among adolescent and adult gamers (Kircaburun, Demetrovics, Griffiths, Király, Kun, & Tosuntaş, 2019).

A descriptive study was conducted in India (Lucknow city) among 120 adolescents .Data was collected by using questioning and interviewing method. The objective of this was to assess online gaming addiction in adolescents across gender. Result showed that 45% were moderately addicated,35% highly addicted and 20% were not addicted to online games. It was concluded that nearly half of the respondents (49.02% boys & 42% girls) were moderately addicted to online games, while 35% respondents (45.1% boys & 27.5% girls) were highly addicted to these games and Few respondents 20 percent (5.9 percent boys & 30.43 percent girls) were not addicted to any online game .And it was negative correlation between gender and online gaming addiction (Singh & Agarwal, 2018).

A cross-sectional study was conducted in Europe among 827 adolescents aged 14 to 19 years by using Online Gaming Addiction Questionnaire and the Disturbed Family Relations Questionnaire. The objective of this study was to determine the differentiations between girls and boys similarly between adolescents living in urban vs. rural areas in regard to prevalence of playing online games, the amount of time devoted to playing games, the severity of symptoms of online gaming addiction, and preferences for game genres. Result showed that significant differences were found between girls and boys and between adolescent urban and rural dwellers in prevalence of playing online games, severity of online gaming addiction symptoms, preferences for specific game genres, and the amount of time spent playing online games. More boys than girls played online games. Boys spent more time to playing and had more severe symptoms of addiction towards online games (Pawłowska, Potembska, & Szymańska, 2018).

A descriptive study was conducted in Philippines among 139 students who are currently studying in a first semester of the school year 2017-2018 taken as a responded by using questionnaire interview and observation method .The objective of this study was to determine association of playing games towards academic performance .The result that students cannot focus on study(49.61%; n=69) , cannot do assignment (41.7%; n=58) and absent in class(11.5%; n=16) due to addiction on online games . It was concluded that students who played online game has adverse effect on academic performance (Verecio, 2018) .

3000 Online surveys were conducted across North India (Delhi-NCR, Jaipur and Lucknow), South India (Chennai, Bangalore, Hyderabad and Vishakhapatnam), West India (Mumbai, Pune and Ahmedabad) and East India (Kolkata, Bhubaneshwar, Patna, Guwahati, Agartala and Shillong) among 16 years to 45 years of age male and female. It shows that 59% of online gamers are under 24 years of age,22% are between the ages of 25 and 30 years,8% are between the ages of 31% and 35 %,7% are over the age of 40 and 4% between the ages of 36% and 40% (Agarwal, Ajwani, Khaitan, Reddy, & Sinha, 2017).

A descriptive study was conducted in India among 584 adolescents 247(42%) girls,337 boys (58%) and mean age was 16 years Data was collected by using questionnaire method. The objective of this study was to determine the effect of online game addiction on mental and physical health of adolescents. The result showed that less physical activity, sleep disturbances, nervousness, abnormalities in social functioning & depressed mood were significant due to online game addiction. And it was concluded that online game addiction has adverse changes In the way of adolescents communicate and interact (Jayalakshmi, Srikumar, Chidambaram, & kumar, 2017).

A cross-sectional study was conducted in Lebanon among N = 524, 47.9% males participated in a paper survey that included the Internet Gaming Disorder Test and demographic information and average age was 16.2 years (SD = 1.0). The objective of this was to explore the relationships between IGD, sleep habits, and academic achievement in Lebanese adolescents. Results showed that , lesser sleep, and lower academic achievement. Those with IGD slept significantly less hours per night (5 hr) compared with casual online gamers (7 hr). And concluded that sleep disturbances and poor academic achievement in relation to Lebanese adolescents identified with IGD (Nazir, Maya, & Mark, 2018).

A cross-sectional study was conducted in France among 434 adolescents attending school (n =434; age 13.2 years), 383 non-problematic gamers (NPG, 196 males; 187 females) were compared with 37 problematic gamers (PG, 29 males; 8 females). the objectives of this study was to examine the relationships between parental attitudes, adolescent perception of family functioning and Internet gaming disorder (IGD) and explore gender differences. Result showed that for both sex, parental monitoring, conflicts and family poor relationship are associated with IGD .And it was concluded that influence of parental attitudes and family functioning on the occurrence of IGD in adolescents and their gender specificities (Bonnaire & Phan, 2017).

A cross sectional study was conducted in Hongkong among 2021 students aged 12 years to 18 years. The objective of this study is to examine the relationship between internet game addiction and parenting approach and family functionality. The findings revealed that 25.3% of the adolescents had internet game addiction and these adolescents were mainly from divorced families, low-income families, families with conflicts, and majorly destructive families. And it

also showed that restrictive adolescents were at high risk of developing internet game addiction. (Ting, Wong, Fai, Wing, & Man, 2016).

A cross sectional study was conducted in South Korea among of 2024 students (70.3% gamers; 50.6% boys). The objective of this study is the prevalence rates of Internet gaming the dominant symptoms of Internet gaming disorder, and the interrelationships between such disorder and non-psychotic psychological symptoms (i.e., anxiety, depression, and impulsiveness) and with physical aggression. And the results showed that 5.9% of the sample (boys 10.4%, girls 1.2%) was classified as adolescents with gaming disorder. Meanwhile, 8% (boys 14.2%, girls 5.9%) of the sample was found to be at high risk of gaming disorder. Symptoms were mood modification, behavioral salience, conflict, withdrawal, and relapse, in that order. A total of 9.2%, 15.1%, and 10.9% of the adolescents with gaming disorder had non-psychotic psychological anxiety, depression, and impulsiveness symptoms, respectively. Nearly 11% of students with Internet gaming disorder had 2 non-psychotic psychological symptoms or more (H & J, 2016).

A cross sectional study was conducted in Norway among of 1,928 Norwegian adolescents aged 13 to 17 years to assess measures of video game use, video game addiction, depression, heavy episodic drinking, academic achievement, and conduct problems. The result showed that Video game addiction was related to depression, lower academic achievement, and conduct problems, but time spent on video games was not related to any of the studied negative outcomes .Spending time playing video games does not involve negative consequences, but adolescents who experience problems related to video games are likely to also experience problems in other facets of life (Brunborg, Mentzoni, & Frøyland3, Is video gaming, or video game addiction, associated with depression, academic achievement, heavy episodic drinking, or conduct problems?, 2014).

A cross sectional study was conducted in Pakistan among 357 participate male 83.5%, female 16.5% and age range from 11-23 years The objective of the present research is to explore the prevalence of problematic online gaming in adolescents and young adults. Data was collected by using problematic online gaming questionnaire. The result showed that 190 respondents were problematic gamers where as 165 respondent were non problematic gamers. It was concluded that online gamers in Pakistan are addicted to online game and male play more times online games than female (Khan & Muqtadir, 2014).

A qualitative study was conducted in Netherland among (N = 4920) and 2008 (N = 4753) samples of a longitudinal survey study among adolescents were utilized, as well as the 2007-2008 cohort subsample (N = 1421). Compulsive Internet Use was predicted from the time spent on the various internet applications in two cross-sectional multiple linear regression models and one longitudinal regression model in which changes in behavior (i.e. time spend on various applications) were related to changes in Compulsive Internet Use .The results showed both samples, downloading, social networking, MSN use, Habbo Hotel, chatting, blogging, online games, and casual games were shown to be associated with Compulsive Internet Use. Off these, online gaming was shown to have the strongest association with Compulsive Internet Use. Moreover, changes in online gaming were most strongly associated with changes in Compulsive Internet Use over time for the longitudinal cohort. A clear relationship was shown between

online gaming and Compulsive Internet Use. It is further argued that a subgroup of compulsive internet users should be classified as compulsive online gamers (Rooij, Schoenmakers, Eijnden, & Mheen, 2010).

A cross-sectional study was conducted in South Korea among 1471 online game users (males 82.7%, females 17.3%, mean age 21.30+/-4.96) participated in this study to assess the relationship between online game addiction and aggression, self-control, and narcissistic personality traits. The result showed that aggression and narcissistic personality traits are positively correlated with online game addiction, whereas self-control is negatively correlated with online game addiction. It was concluded that certain psychological characteristics such as aggression, self-control, and narcissistic personality traits may predispose some individuals to become addicted to online games (Kim & Namkoog, 2008).

A cross-sectional study was conducted in USA among n = 72 adolescents, 72 was performed to assess daily time spent on the Internet, television, console video games, and Internet video games, and their association with academic and social functioning. The result showed that time spent playing games for more than one hour a day and YIAS (p < 0.001), overall grade point average (p \leq 0.019), and the "Inattention" and "ADHD" components of the CPRS (p \leq 0.001 and p \leq 0.020, respectively).It was concluded that adolescents who play more than one hour of console or Internet video games may have more or more intense symptoms of ADHD or inattention than those who do not play (Chan & Rabinowitz, 2006) .

A cross-sectional study was conducted in Taiwan among 395 junior high school students. The objective of this study was to evaluate the extent to which gender and other factors predict the severity of online gaming addiction among Taiwanese adolescents. The result showed that Gender differences were also found and older age, lower self-esteem, and lower satisfaction with daily life were associated with more severe addiction among males, but not among females. And it was concluded that Internet Gaming Disorder is more prevalent among males than females (Hung Ko, Yen, Chen, Chen, & Yen, 2005).

2.3. Summery of literature

Over view of literature showed that the majority of adolescents were online game addiction and have seen behavioral problem. Some of the research showed that prevalence of online game addition is high in male in compared to female.

CHAPTER III

RESEARCH METHODOLOGY

Research methodology is the systematic, theoretical analysis of the methods applied to a field of study. It is the specific procedures or techniques used to identify, select, process, and analyze information about a topic. In a research paper, the methodology section allows the reader to critically evaluate a study's overall validity and reliability.

This study mainly focuses in online game addiction among adolescents (13years-19 years). The methodology that was adopted for study is presented here with a brief discussion.

3.1.Study Design

A descriptive cross sectional research design was adopted to gather data from online game addiction adolescents (12years-19years). Descriptive research design is a scientific method which involves observing and describing the behavior of a subject without influencing it in any way.

3.2. Study Area and Population

The study area was Tulsi Higher Secondary Boarding School. It is located at Tulsipur Municipality ward no.5 which was established on 1987AD (2044BS). This school is affiliated with the (NEB) National Examinations Board and approved by the ministry of education ,Nepal . The study population was online game addiction adolescents (12years-19 years) students of Tulsi Higher Secondary Boarding School. The total number of students are 858 . In grade 9,10,11 and 12 there are 158,198,84,93 students respectively.

3.3.Sampling

3.3 .1. Sampling Technique:

Non-probability snowball sampling technique was used for this study.

3.3.3.Sampling size

The sample size is calculated by using formula $n=Z^2$ pq/E²

Where,

N=number of population=533

n= total sample size

```
z= standard value=1.96
            p=proportion of success =0.5
            e= permissible error=10%
            q = proportion of failure = (1-p) = 1-0.5 = 0.5
Now,
          n=z^2pq/e^2
            = (1.96)^2 \times 0.5 \times 0.5 / (0.1)^2
            = 3.8416 \times 0.25 / 0.01
            =96.04=96
Again,
       N=97/(1+97/533)
        =97/(1+0.1819)
        =81.34
         =82
Then,
       Non-responsive error,
        =82+10\% of 82
        =82+8.2
        =90.2
```

3.4. Method of data Collection:

=91

Questionnaire method was used for data collection.

3.5. Instrumentation for Data Collection

A semi-structured questionnaire was used to assess the online game addiction among adolescents.

Part I :Semi structured question related to socio demographic variables internet variables.

Part II: Semi structured question related to internet variables and family variables.

Part III :.The test was developed on the basis of standard test construction measures. While formulating the statements, several questionnaires/inventories/checklists related to addiction to various gaming disorders was referred. 5 point Likert scale was used for scoring ranging from Strongly disagree (5), Disagree (4), Can't say (3), Agree (2), Strongly agree (1).To construct the statements, assistance was taken from stakeholders like gamers, students, psychologists, game experts, etc. PUBG Addiction Test, the PAT was administered to respondents from the age group of 12 to 19 years (ADOLESCENTS) from Tulsi Higher Secondary Boarding School including male and female respondents. Few modification was done on the tool and was used for this study.

3.6. Validity and reliability:

The content validity of the instrument was maintained by doing extensive review of related literature, through consultation with research advisor, subject expert ,teacher and peer.

The pretesting was done in 10% respondent i.e. Gyan Jyoti Public Higher secondary, school Tulsipur 5 Dang.

Reliability analysis was done through Cronbach alpha which value was 0.912.

3.7. Inclusion Criteria

Adolescents (12-19) years, who involved in online games of Tulsi Boarding Higher secondary School, Tulsipur 5 Dang. The participants was those who are involved in online games Equal opportunity was provided to both male and female.

3.8. Data Collection Procedure and Ethical Consideration

- The research proposal was approved from YHSA research committee and approval letter was taken.
- Formal permission from Tulsi Boarding Higher Secondary school was taken.
- Purpose and objectives of the study was explained and verbal consent was taken from each respondents.
- Privacy of respondents was maintained by conducting the data collection in separate room.

- Anonymity of the respondent was maintained by not revealing the identity of the respondent.
- Confidentiality was maintained by using the given information of the respondents only for the study purpose.
- No discrimination was made on the basis of age, color, and caste.
- The respondent have right to draw out from study at any time without any justification

3.9. Data Processing and Analysis and presentation:

The collected data was checked, reviewed and organized daily for its accuracy, completeness and consistency. The data was coded and entered in statistical package for social science 20(SPSS) Program for analysis. Data was analyzed by using simple descriptive statistics and inferential statistics. Frequency, percentage, mean, median and standard deviation was used to analysis the data. Chi-square test was used to measure the association between the online game addiction with their demographic variables

3.10. Delimitation of the Study:

The data was collected only in adolescents (12-19) years, who involved in online games of Tulsi Higher secondary school, Tulsipur5 Dang within limited given time period (2weeks) on own financial effort.

CHAPTER IV

DATA ANALYSIS, INTERPRETATION, FINDINGS OF THE STUDY CHAPTER IV

DATA ANALYSIS, INTERPRETATION, FINDINGS OF THE STUDY

This chapter deals with the analysis and interpretation of the study. The study was conducted to assess the level of online game addiction among adolescents . The total number of population/respondents involved in the survey was 91. The data was analyzed according to the objectives and research question of the study by using descriptive statistics and shown in tables. Chi-square test was inferential statistics for the association between variables and level of online game addiction among adolescents . The findings of the study presented in this chapter is characterized in the sub headings.

TABLE 1
Socio-demographic Characteristics of Respondents

Characteristics	Frequency]	Percentage
Age(Years)			
12-15		38	41.8
16-19		53	58.2
Sex			
Male		67	73.6
Female		24	26.4
Ethnicity			
Brahmin/Chhetri		75	82.4
Janajati		10	11
Others*		6	6.6
Religion			
Hinduism		89	97.8
Other**		2	2.2
Types of family			
Nuclear		71	78
Joint		20	22
Marital status of respondents family			
Married		91	100

other*Dalit ,Madhesi ,Muslim

other*Buddhism, Islam

Table 1 shows socio-demographic characteristics of respondents on which 73.6% respondents were male, 58.2% belonged to 16-19 years of age group, 82.4% were Brahmin/Chhetri, likewise 97.8% were Hindus, 78% were living in nuclear family, as well as 100% respondents parents were married.

TABLE 2

Education Level of Father and Mother of Respondents

Characteristics	Frequency	Percentage
Education level of father		
Can just read and write	5	5.5
Primary	10	11
Secondary	16	17.6
Higher secondary	26	28.6
Bachelor and above*	34	37.4
Education level of mother		
Can just read and write	11	12.1
Primary	11	12.1
Secondary	31	34.1
Higher secondary	22	24.2
Bachelor and above*	16	17.6

Table 2 shows the education level of the parents of respondents. Clearly, the results reveal that 37.4% respondents father were completed Bachelor level educations , 34.1% respondents mothers were completed secondary level education .

^{*} Master degree

TABLE 3

Occupation of Father, Mother and Income of Family of Respondents

Characteristics	Frequency	Percentage
Occupation of father		
Business	55	60.4
Others*	36	39.6
Occupation of mother		
Business	39	42.9
House maker	39	42.9
Others*	13	14.3
Income of family		
Sufficient for 6 months	66	72.6
Sufficient for above 6 months	25	27.5

^{*}Service and aboard

Table 3 shows socio-demographic characteristics of respondents on which 60.4% respondents father were involved in business occupation .Similarly 42.9% respondents mother were involved in business occupations .And economic status of 44 % respondents family was sufficient for below 6 months.

TABLE 4

Internet Access, Mode of Internet Use ,Types of Games and Playing Devices of Respondents

Characteristics	Frequency	Percentage
Internet access in home	91	100.0
Mode of internet use		
Wifi	70	76.9
Wifi and data mode	21	23.1
Types of online game		
PUBG		
Yes	60	65.9
No	31	34.1
Freefire		
Yes	45	49.5
No	46	50.5
Call of duty		
Yes	11	12.1
No	80	87.9
Clash of clans		
Yes	9	9.9
No	82	90.1

Table 4 shows internet variables on which 100% respondents were facilitated with internet access in home,76.9% respondents were used wifi mode .Similarly 65.5% respondents were played PUBG (Player Unknown's Battlegrounds) online game .

TABLE 5

Internet Access, Mode of Internet Use ,Types of Games and Playing Devices of Respondents

Characteristics	Frequency	Percentage
Playing devices		
Computer		
Yes	12	13.2
No	79	86.8
Smart phone		
Yes	82	90.1
No	9	9.9
Laptop		
Yes	26	28.6
No	65	71.4
Ipad		
Yes	10	11
No	81	89
Tablets		
Yes	3	3.3
No	88	96.7

Table 5 shows internet variables on which 90.1 % respondents were used smart phone while playing online game .

TABLE 6
Started Playing Game Age and Duration of Playing Games of Respondents

Characteristics	Frequency	Percentage
Started playing game age(years)		
12-15	75	82.4
16-19	16	17.6
Years of playing game(years)		
<1	20	22
1-2	34	37.4
2-5	37	40.7
Duration of playing games(in a day)		
1 hour	26	28.6
2-4 hour	49	53.8
5-7 hour	10	11
8-10 hour	6	6.6

Table 6 shows internet variables on which 82.4% respondents were 12-15 years of age group who had started playing games and duration of playing game was (2-4 hour) 53.8%.

TABLE 7

Residence ,Parents time ,Relationship changed and Parental Relationship of Respondents

Characteristics	Frequency	Percentage
Residence with family		
Yes	86	94.5
No	5	5.5
Parents time		
Yes	79	86.8
No	12	13.2
Relationship changed		
Yes	28	30.8
No	63	69.2
Parental relationship		
Harmonious	82	90.1
Others*	9	9.9

^{*} Quarrelling most of the time, Disrespect with each other

Table no 7 shows that the results of family factor variables, 94.5% were lived with family. Similarly 86.6% respondents parents was gave time, 69.2% respondents relationship with parents was good and harmonious relationship of respondents with parents was 90.1%.

TABLE 8

Lack of Control due to Online Game Addiction

S.N	Statements	Strongly agree	Agree	Can't say	Disagree	eStrongly N disagree	⁄ledian±IQR
1.	My educational performance has been hampered after I started playing game.	(29.7%)	49(53.8%) 15 (16.5%)	0	0 (0%)	2 ±1
2.	I get worried while playing game.		25 (27.5%)	9 (9.9%)	26 (28.6%)	16) (17.6%)	3±2
3.	My sleep has been disturbed, after I began playing game.		30 (33%)	17 (18.7%)	10 (11%)	10 (11%)	2±2
4.	I forget about time when I am playing game.	32 (35.2%)	35 (38.5%)	7 (7.7%)	11 (12.1%)	6 (6.6%)	2±2
5.	I often think of playing game when I am doing other work.	23 (25.3%)	36 (39.6%)	10 (11%)	11 (12.1%)	11 (12.1%)	2±2
6.	I have lied about the use times pended in playing game to my family members.	17 (18.7%)	36 (39.6%)	12 (13.2%)	15 (16.5%)	11 (12.1%)	2±2

Note: *IQR*= Interquartile Range

Table 7 shows that statement I get worried while playing game has highest Median \pm IQR (3 \pm 2) and the statement My educational performance has been hampered after I started playing game has lowest Median \pm IQR (2 \pm 1).

TABLE 8

Distress due to Online Game Addiction

n=91

S.N	. Statements	Strongly agree	Agree	Can't say	Disagree	Strongly disagree	Median±IQR
7.	I get irritated when someone interferes me while playing game.		44 (48.4%)	10 (11%)	3 (3.3%)	1 (1.1%)	2±1
8.	When I survive longer time in the game my hands and body are sweating	17 (18.7%)	32 (35.2%)	14 (15.4%)	17) (18.7%)	11 (12.1%)	2±2
9.	I feel energetic after winning the game which encouragement to play it again.	(51.6%)	29 (31.9%)	7 (7.7%)	4 (4.4%)	4 (4.4%)	1± 1
10.	I get angry/ frustrated when my friends do not cooperate while playing.		38 (41.8%)	9 (9.9%)	6 (6.6%)	9 (9.9%)	2 ± 2

Table 8 shows that statement when I survive longer time in the game my hands and body are sweating and I get angry/ frustrated when my friends do not cooperate while

playing has highest Median \pm IQR (2 \pm 2) and the statement I feel energetic after winning the game which encouragement to play it again has lowest Median \pm IQR (1 \pm 1).

S.N	. Statements	Strongly agree	Agree	Can't say	Disagree	Strongly	Median±IQR
11.	I get irritated / frustrated when I cannot complete the game.		40 (44%)	6 (6.6%)	4 (4.4%)	7 (7.7%)	2±1
12.	I have less time to sleep since I play online game.		41 (45.1%)	7 (7.7%)	14 (15.4%)	12 (13.2%)	2±2
13.	I have ignored work/studies because of online game.		28 (30.8%)	21 (23.1%)	13) (14.3%)	7 (7.7%)	2±1
14.	I am tempted to play more and more game after each game.		47 (51.6%)	10 (11%)	11 (12.1%)	5 (5.5%)	2±1
15.	I become restless, frustrated or irritated when I am unable to play game.	(110/)	49 (53.8%)	19 (20.9%)	7 (7.7%)	6 (6.6%)	2±1
16.	I cannot sleep until I have played game to my satisfaction.	23 (25.3%)	28 (30.8%)	14 (15.4%)	12) (13.2%)	14 (15.4%)	2±3

Table 9 shows that statement I cannot sleep until I have played game to my satisfaction has highest Median \pm IQR (2 \pm 3) and the statement I get irritated / frustrated when I cannot complete the game has lowest Median \pm IQR (2 \pm 1).

TABLE 10
Enthusiasm and Impulsive use due to Online Game Addiction

S.N	. Statements	Strongly agree	Agree	Can't say	Disagree	StronglyN disagree	Iedian±IQR
17.	I feel more connected friends while playing in team match with them rath than playing alone		37 (40.7%)	9 (9.9%)	7 (7.7%)	5 (5.5%)	2±1
18.	I have had dreams relating games.		37 (40.7%)	12 (13.2%)	15) (16.5%)	8 (8.8%)	2±2
19.	I use a lot of tricks who		34 (37.4%)	11 (12.1%)	6 (6.6%)	9 (9.9%)	2±2
20.	I collect and save money buy in-app items of onli game.		37 (40.7%)	8 (8.8)%	15 (16.5%)	12 (13.2%)	2±2
21.	I play game to pass time.	25 (27.5%)	39 (42.9%)	6 (6.6%)	10 (11%)	11 (12.1%)	2± 2
22.	I have uninstalled a reinstalled the game aga and again.	24 nd .in ^(26.4%)	26 (28.6%)	19 (20.9%)	15) (16.5%)	7 (7.7%)	2± 2
23.	My friends/family ha complained about r excessive usage of game.	17 ve ny ^(18.7%)	45 (49.5%)	11 (12.1%)	15) (16.5%)	3 (3.3%)	2± 1

Table 10 shows that statement I collect and save money to buy in-app items of online game has highest Median \pm IQR (2 \pm 2) and the statement My friends/family have complained about my excessive usage of game. has lowest Median \pm IQR (2 \pm 1).

TABLE 11

Excessive use and Escapism due to Online Game Addiction

n=110

S.N	. Statements	Strongly agree	Agree	Can't say	Disagree	Stronglyl disagree	Median±IQR
sive	e use						
24.	I have made friends playing game.	23 by (25.3%)	48 (52.7%)	7) (7.7%)	8 (8.8%)	5 (5.5%)	2 ±1
25.	In-game chatting/discuss for game is important for to have control over the game	me (29.7)	37 (40.7%)	9) (9.9%)	15 (16.5%)	3 (2.3%)	2± 2
26.	I suggested online game friends so that we can progether.		40 (44%)	11 (12.1%)	10) (11%)	4 (4.4%)	2 ±2
Esc	capism						
27.	I play online game to esc from problems	-	30 (33%)	22 (24.2%)	19) (20.9%)	4 (4.4%)	2±2
28.	I play online game to relia a bad mood (e.g., frustrati anxiety, or depression, etc.	on,(23.1%)	38 (41.8%)	15 0(16.5%)	11)(12.1%)	6 (6.6%)	2 ±1

Table 11 shows that statement In-game chatting/discussion for game is important for me to have control over the game has highest Median \pm IQR (2 \pm 2) and the statement I have made friends by playing game has lowest Median \pm IQR (2 \pm 1) whereas the statements I play online game to escape from problems has highest Median \pm IQR (2 \pm 2) and the statement I play online game to relieve a bad mood (e.g., frustration, anxiety, or depression, etc.) has lowest Median \pm IQR (2 \pm 1).

TABLE 12
Obsession due to Online Game Addiction

n=91

S	tatements	Strongl	Agree	Can't	Disagre	Strongly	Median±I
		y agree		say	e	disagree	QR
	part in the onlir		10	9	45	26	4± 1
game c	ompetitions held b	y(1.1%)	(11%)	(9.9%)	(49.5%	(28.6%)	
College)		
compar	nies.						
31. I have	lost friendships du		15	14	24	22	4± 2
to game	2.	(17.6	(16.5%)	(15.4%	(26.4%	(24.2%)	
C		%)))		
32. I have	spent money	21	20	14	22	14	3± 2
	ize my avatar	in (23.1 %)	(22%)	(15.4%)	(24.2%)	(15.4%)	
online g	game.						

Table 12 shows that statement I have lost friendships due to game has highest Median \pm IQR (4 \pm 2) and the statement I tend to spend time customizing my avatar in online game. has lowest Median \pm IQR (2 \pm 0).

TABLE 13

Level of Online Game Addiction

n=91

Level	Frequency	Percentage
Above and Equal Median (High level of Online Game Addiction)	48	52.7
Below Median (Low level of Online Game Addiction)	43	47.3

Table 13 shows that survey was carried among the adolescents of high school at urban place. However high level of online game addiction are 52.7% and low level of online game addiction are 47.3%.

TABLE 14
Association between Socio-demographic Variable and the Level of Online Game
Addiction

		-	Level	Chi-	_
Characteristics		High	Low	square	p value
Age of Respondent	12-15	22(20.02%)	16(14.56%)	0.694	0.523
(years)	16-19	26(23.66%)	27(24.57%)		
Sex of Respondent	Male	32(29.12%)	35(31.85%)	2.534	0.153
	Female	16(14.56%)	8(7.28%)		
Ethnicity of	Brahmin/Chhetri	38(34.58%)	37(33.67%)	2.145	0.709
Respondent	Others*	10(9.1%)	6(5.46%)		
Religion of Respondent	Hinduism	48(43.68%)	41(37.31%)	2.283	0.319
•	Others	1(0.91%)	1(0.91%)		
Types of family	Nuclear	38(34.58%)	33(30.03%)	0.078	0.805
	Joint	10(9.1%)	10(9.1%)		

Table 14 represents the association between the levels of online game addiction with sociodemographic variables were not statistically significant (p>0.05).

TABLE 15
Association between Socio-demographic Variable and the Level of Online Game
Addiction

		Le	vel	Chi-	
Characteristics		High	Low		p value
Educational level of	Can read and write	2(1.82%)	3(2.73%)	9.691	0.046
father	Primary level (1-8)	9(8.19%)	1(0.91%)	J	
	Secondary level(9-10)	11(10.01%)	5(4.55%)		
	Higher secondary level (10+2)	11(10.01%)	15(13.65%)		
	Bachelor level and above	15(13.65%)	19(17.29%)		
	Can read and write	2(1.82%)	3(2.73%)		
Educational level of	Can read and write	6(5.46%)	5(4.55%)	1.675	0.795
mother	Primary level (1-8)	5(4.55%)	6(5.46%)		
	Secondary level(9-10)	19(17.29%)	12(10.92%)		
	Higher secondary level (10+2)	10(9.1%)	12(10.92%)		
	Bachelor level above	8(7.28%)	8(7.28%)		
Occupation of father	Business	28(25.48%)	27(24.57%)	0.545	0.761
	Others*	20(18.2%)	16(14.56%)		
Occupation of	House maker	23(20.93%)	16(14.56%)	3.313	0.346

mother	Others**	25(22.75%)	27(24.75%)		
Economic status of family	Sufficient for 6 months	34(30.94%)	32(29.04%)	1.101	0.777
	Sufficient for above 6 months	14(12.74%)	11(10.01%)		

^{*}Service and abroad

Table 15 represents the association between the levels of online game addiction with internet variables is statistically significant with the grade (0.046) in education level of father. While rest of the variables were not statistically significant (p>0.05).

	Le	evel	Chi-	
	High	Low	square	p value
Wifi	35(31.85%)	35(31.85%)	0.919	0.456
Data mode and Wifi	13(11.83%)	8(7.28%)		l
Yes	30(27.3%)	30(27.3%)	0.533	0.512
No	18(16.3%)	13(11.83%)		
Yes	27(24.57%)	18(16.3%)	1.879	0.210
	Data mode and Wifi Yes	High Wifi 35(31.85%) Data mode and Wifi 13(11.83%) Yes 30(27.3%) No 18(16.3%)	High Low Wifi 35(31.85%) 35(31.85%) Data mode and Wifi 13(11.83%) 8(7.28%) Yes 30(27.3%) 30(27.3%) No 18(16.3%) 13(11.83%)	Wifi 35(31.85%) 35(31.85%) 0.919 Data mode and Wifi 13(11.83%) 8(7.28%) Yes 30(27.3%) 30(27.3%) 0.533 No 18(16.3%) 13(11.83%)

^{**}Business and service

	No	21(19.11%)	25(22.79%)		
Game type (clans of	Yes	7(6.37%)	2(1.82%)	2.511	0.164
clan)	No	41(37.31%)	41(37.31%)		
Game type(Call of duty)	Yes	7(6.37%)	4(3.64%).	0.595	0.530
duty)	No	41(37.31%)	39(35.49%)		
				L	

Table 16 represents the association between the levels of online game addiction with sociodemographic variables were not statistically significant (p>0.05).

TABLE 17	
Association between Internet Variable and the Level of Online Game Addiction	
n=	=91

			Level	Chi-	
Characteristics		High	Low	square	p value
Playing devices	Yes	10(9.1%)	2(1.82%)	5.188	0.030
(Computer)	No	38(34.58%)	41(37.31%)		
Playing devices	Yes	43(39.13%)	39(35.45%)	0.032	1.000
(Smart phone)	No	5(4.55%)	4(3.64%)		
Playing devices (laptop)	Yes	15(13.65%)	11(10.01%)	0.357	0.644
(mptop)	No	33(30.03%)	32(29.12%)		
Playing device (Ipad)	Yes	6(5.46%)	4(3.64%)	0.237	0.744
	No	42(38.22%)	39(35.49%)		
Playing device	Yes	2(1.82%)	1(0.91%)	0.241	1.00

(Tablets)	No	46(41.86%)	42(38.22%)	

Table 17 represents the association between the levels of online game addiction with internet variables is statistically significant with the grade (0.030) in playing device computer .While rest of the variables were not statistically significant (p>0.05).

		TABLE 18			
Association bet	ween Internet	Variable and the Lev	vel of Online Ga	me Addic	tion
					n=91
		Lev	vel	Chi-	
Characteristics		High	Low	square	p value
Started age of playing	13-15	40(36.4%)	35(31.85%)	0.059	1.00
game(Years)	16-19	8(7.28%)	8(7.28%)		
Years of playing game	<1 years	13(11.83%)	7(6.37%)	4.614	0.202
	1-2 years	16(14.56%)	18(16.3%)		
	2-5 years	19(17.29%)	18(16.65%)		
Duration of playing game	1 hour	21(19.11%)	5(4.55%)	126.38	0.006
-	2-4 hour	22(20.02%)	27(24.57%)		
	5-7 hour	3(2.73%)	7(6.37%)		

Table 18 represents the association between the levels of online game addiction with internet variables which revealed that level of online game addiction is statistically significant with the grade (0.006) in duration of playing games .While rest of the variables were not statistically significant (p>0.05).

		TABLE 19			
Association be	etween Family Fac	ctors and the L	evel of Online Ga	me Addicti	i on
					n=91
]	Level	Chi-	
Characteristics		High	Low	square	p value
Residence	Yes	45(40.95%)	41(37.31%)	0.112	1.000
	No	3(2.73%)	2(1.82%)		
Parents time	Yes	44(40.04%)	35(35.85%)	2.090	0.216
	No	4(3.64%)	8(7.28%)		
Relationship changed	Yes	10(9.1%)	18(16.38%)	4.708	0.041
	No	38(34.58%)	25(22.75%)		
Parental relationship	Harmonious	44(40.04%)	38(34.58%)		0.833
	Others*	4(3.64%)	5(4.55%)	0.365	

^{*} Quarreling most of the time and disrespect with eachother

Table 19 represents the association between the levels of online game addiction with family factors which revealed that level of online game addiction is statistically

significant with the grade (0.041) in family relationship changed between respondents and parents whereas other remaining factors is not statistically significant (p>0.05).

CHAPTER V

DISCUSSION, CONCLUSION AND RECOMMENDATION

This chapter deals with the brief discussion, conclusion and recommendation of the findings of the study. Findings were compared with those of other studies identified from literature review. The conclusion are drawn from each of the findings of the study. The recommendation provides suggestion to further study for improvement of the present study and health services.

5.1 Discussion

The present study was conducted to assess the level of online game addiction among adolescents. This chapter deals with the comparison between findings from literature reviews and findings from the research. It mainly focused on similarities and dissimilarities of findings from the literature review and from the past studied research.

Regarding socio-demographic characteristics of respondents from this study it shows that 73.6% respondents was male while (26.6%) respondents were female age range from 13-19; in Pakistan on 2015 more than half (83.5%) were male and 16.5% were female age range from 11-23 years was conducted by Khan and Muqtadir.

Survey was carried among the adolescents of high school at urban place. However, the study revealed that high and low level of online game addiction are 52.7% and 47.3% respectively. In urban area Adolescent spent more time in playing online games than rural area (Pawłowska, Potembska, & Szymańska, 2018).

The present study shows that the education level of father and mother of respondents are 37.4% and 34.1% respectively. Respondents have educated family in majority. As we know level of education directly influence the occupation. Furthermore the result are congruent with the study conducted in Istanbul shows that having a mother who is

employed, having parents who completed high school or a higher level of education, and the time spent on the computer are risk factors for online game addiction (Karaca, Karakoc, Gurkan, Onan, & Barlas, 2020).

In present study the level of online game addiction is more in male is 73.6% than in compare to female is 26.4%. However study conducted in India showed that that there is a significant difference in the level of internet online gaming addiction among male and female Indian adolescents. With male adolescents being at high risk of developing internet gaming addiction (Kaur, 2020).

In present study there is harmonious relationship (90.1%) among respondents parents. The study that conducted in Hong kong shows that of the adolescents had internet game addiction and these adolescents were mainly from divorced families, low-income families, families with conflicts, and majorly destructive families. And it also showed that restrictive adolescents were at high risk of developing internet game addiction. (Ting, Wong, Fai, Wing, & Man, 2016) .

In present study it shows that high and low case of the online game addiction are 52.7% and 47.3% respectively. Similarly duration of playing games 2-4 hours in a day is 53.8 %. The study conducted in Indonesia shows that the sample of data which have analyzed addiction level toward online games is relatively moderate. Adolescents between 12 and 15 years old, spend about 4 until 6 hours in a day. This condition becomes worse if there is no treatment for adolescents. Hence, there is a need of parents' control and awareness toward children's activity in playing online games since it renders negative impacts particularly on children's learning activity and motor development (Saddhono, Setyawan, Raharjo, & Devilito, 2020).

5.2 Conclusion

The findings revealed that half of the respondents had high level of online game addiction (52.7%). Similarly, there was significant association between the level of online game addiction with selected demographic varibles ie education level of father, playing device computer, duration of playing games and parental relationship with respondents.

5.3 Limitation

The study was confined and limited to the students of 13-19 years of age .So, the findings may not be generalized to other population .The study was conducted in limited time duration.

5.4 Recommendation

- Family, community and school should focused on awareness programs to reduce the burden of online game addiction among adolescents in a selected school seems an imperative intervention.
- So the results of this study posed the needs for inclusion of information about online game addiction in student's textbook and parent teacher-student meetings on regular basis to discuss about online game addiction and its effects.

5.5. Implication of the Study

- This study posed the needs for inclusion of information about online game addiction in students textbook and parent teacher student meetings on regular basis to discuss about online game addiction and its adverse effect.
- This study will provide a source of reference or baseline to other further research related to this title and other related studies in future.

5.6. Dissemination

The investigator has intended to disseminate the finding of the study on the following:

- Research Committee of YHSA
- Library of Yeti Health Science Academy
- Researcher Advisor
- Researcher herself

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APPENDIX I

YETI HEALTH SCIENCE ACADEMY

AFFILIATED TO PURBANCHAL UNIVERSITY

KANTIMARGHA, MAHARAJGUNJ, KATHMANDU INFORMED CONSENT FORM

ENGLISH VERSION

Namaste, I am Muna oli , a student of Bachelor of Science in Nursing (BSN) 4th year from Yeti Health Science Academy, Kathmandu. I am doing a research on the topic of "Online Game Addiction among Adolescents in a Selected School of Dang" for the partial fulfillment of BSN curriculum of Purbanchal University.

The purpose of the study is to assess online game addiction among adolescents. The study involves no foreseeable risks or harm to you. Your participation in this study is voluntary and you have full right to withdraw from the study at any time during data collection. All the information provided was kept confidential and only used for the study purpose..

The information was collected by Questionnaire method which will take about 20 minutes. Your information will contribute to the successful completion of this study and was highly appreciated.

APPENDIX II

YETI HEALTH SCIENCE ACADEMY KANTIMARGH, MAHARAJGUNJ KATHMANDU RESEARCH INSTRUMENT

Research Title: Online game addiction among adolescents in a selected school of Dang.

Code no:	Date of Data collection:

Direction:

Please answer each question honestly as possible and to the best of your experience. The questionnaire has three parts .Parts I Semi-structured questionnaire for socio-demographic information. Part II- Semi structured questionnaire for internet and family variables. Part III - PUBG Addiction Test questionnaire to assess the online game addiction among adolescents. Questionnaire method was adopted for data collection.

Semi-Structured questionnaire

PART I- Socio demographic information

Instruction: Read the following statements carefully and please tick($\sqrt{}$) marks in the box which is most appropriate response.

- 1) Age of respondents.....in (years)
- 2) Sex
 - 1.Male
 - 2. Female

3) Ethnicity	
1.Dalit	
2.Janajati	
3.Madhesi	
4.Muslim	
5.Brahmin/Chhetri	
6. Others (Please Specify)	
4) Religion	
1. Hinduism	
2. Buddhism	
3. Christianity	
4.Islam	
5.others	
5) Types of family	
1.Nuclear	
2.Joint	
3.Extended	
6)Marital status of family	
1.Married	
2.Divorced	
3.Widow/ Widower	
7) Education level of father	
1.Can't read and write	
2.Can read and write	
3.Primary level(1-8)	
4.Secondary level(9-10)	
5.Higher secondary level(10+2)	
6.Bachelor level	
7.Masters and above	

2.Can read and write
3.Primary level(1-8)
4.Secondary level(9-10)
5. Higher secondary level(10+2)
6. Bachelor level
7.Masters and above
9) Occupation of father
1.Agriculture
2.Service
3.Business
4.Abroad
5.Daily wages
6.Others
10) Occupation of mother
1.Agriculture
2.Service
3.Business
4.Abroad
5.Daily wages
6.Others
11) Income of family per month
1.Sufficient for below 6 months
2.Sufficient for 6 months

8) Education level of mother

3. Sufficient for 6 to 12 months

4. Sufficient for 12 months and surplus.

1.Can't read and write

PART- II (QUESTION RELATED TO INTERNET VARIABLES AND FAMILY FACTORS VARIABLES) 1) Do you have internet access in your home? 1.Yes 2.No 2) If yes, which modes of internet you use? 1.Wi-Fi 2.Data mode 3.Both 3) Which type of online game do you usually play ?(Please tick all that apply) 1.PUBG 2.Free fire 3.Fortnite 4.Call of duty

4) From which device, do you play online game?(Please tick all that apply)

5.Other specify...

1.Computer

2.Smart phone
3.Laptop
4.I pad
5.Tablet
5) At what age did you started playing games?
6) Could you please indicate how many years have you been playing online game?
1.< 1 years
2.1-2 years
3.2-3 years
4.3-5 years
7) How often do you play online game?
1.Rarely
2.once a month
3.once a week
4.once a day
5.Several times a day
8) How many hours do you play on average?(daily)
1. 1 hour
2. 2-4 hour
3. 5-7 hour
4. 8-10 hour

9) Do you live with your family?
1.Yes
2.No
10) Do your parents spend enough time to you?
1.Yes
2.No
11) Do you think the relationship between you and your parents has changed since you started spending most of your time online playing games?
1.Yes
2.No
12) Parental relationship
1.Harmonious
2.Quarrelling most of the time
3.Disrespect with each other
PART III- QUESTIONS RELATED TO ONLINE GAME ADDICTION
Please read it carefully and choose($$) the one of most appropriate response to each statement.

5:Strongly disagree; 4: Disagree; 3: Can't say; 2:Agree; 1 Strongly agree.

S.N	Statements	SA	A	CS	D	SD	
A. Lack of control							
1.	My educational performance have hampered after I started						
	playing game.						
2.	I get worried while playing game.						

3.	My sleep has been disturbed, after I began playing game.				
4.	I forget about time when I am playing game.				
5.	I often think of playing game when I am doing other work.				
6.	I have lied about the use time spended in playing game to my				
	family members .				
B . I	Distress				
7.	I get irritated when someone interferes me while playing				
	game.				
8.	When I survive longer time in the game my hands and body				
	are sweating				
9.	I feel energetic after winning the game which encourage me to				
	play it again.				
10.	I get angry/ frustrated when my friends do not cooperate while				
	playing.				
C. Di	sengagement		•	•	
11.	I get irritated / frustrated when I cannot complete the game.				
12.	I have less time to sleep since I play online game.				
13.	I have ignored work/studies because of online game.				
14.	I am tempted to play more and more game after each game.				
15.	I become restless, frustrated or irritated when I am unable to				
	play game.				
16.	I cannot sleep until I have played game to my satisfaction.				
D. O	ver enthusiasm &impulsive use				
17.	I feel more connected to friends while playing in a team				
	match with them rather than playing alone				
18.	I have had dreams relating to games.				
19.	I use a lot of tricks while playing game.				
20.	I collect and save money to buy in-app items of online game.				
21.	I play game to pass time.				
22.	I have uninstalled and reinstalled the game again and again.				
		1			

			1			
23.	My friends/family have complained about my excessive usage of					
E. E	E. Excessive use					
24.	I have made friends by playing game.					
25.	In-game chatting/discussion for game is important for me to					
	have control over the game					
26.	I suggested online game to friends so that we can play					
	together.					
F. E	scapism		1		Į.	
27.	I play online game to escape from problems					
28.	I play online game to relieve a bad mood (e.g., frustration,					
	anxiety, or depression, etc.)					
29.	I play game whenever I am frustrated or angry.					
0.0						
G. C	Obsession					
30.	I take part in the online game competitions held by College					
	fests/ online companies.					
31.	I have lost friendships due to game.					
32.	I have spent money to customize my avatar in online game.					
33.	I tend to spend time customizing my avatar in online game.					
34.	My teammates and I have a messenger / viber group to talk					
	about matters/issues of online game.					
				1		

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  $= O:nfd
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  != Psn
  @= ;+o'Qm
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efuM#

cgnfO{g v]nsf] nt ;DalGwt k|Zgx?M s[kofo;nfO{ Wofgk"j{s k9\g'xf]; / k|To]s k|Zgsf] ;a} eGbf plrt k|Itlqmofdf Pp6fdf I7s 5gf}6 ug'{xf];

- ! k"Of{?kdf;xdt
- @;xdt
- # eGg;Sb}g
- \$ c;xdt
- % k"0f{ ?kdf c;xdt

qm=;=	Aofg	!	@	#	\$ %
	lgoGq0f sf] cefa				
!	d}n] v]n v]Ng ;'? u/]kl5 d]/f] z}lOfs k bzlgdf sdhf]/L cfPsf] 5.				
@	d}n] v]n v]Ng yfn]kl5 dnfO{ tgfa nfU5 .				
#	d}n] v]n v]Nbf ;do yfxfkfpFlbg .				
\$	d}n] c? sfdubf{ klgk fo v]Ng] af/]df ;f]Rb5' .				
%	d}n] kl/jf/sf] ;b:ox?df v]n v]Ngdf latfPsf] ;doaf/] e'm6 af]Ng] ub{5' .				
^	d}n] v]n v]Ng yfn]kl5 d]/f] lgGb fdf u8al8 cfPsf] 5.				
	;+s6				
&	v]n v]Nb} u/]sf] a]nf s;}n] x:tOf]k uof]{ eg] l/; p7\5.				
*	d v]ndfnfdf] ;do ;DdafRbf d]/f] xft / zl//af6 kl;gfcfPsf] dxz'; u5{' .				
(v]n lht]kl5 dnfO{ phf{ cfpF5 h;n] ubf{ k]ml/ v]n v]Ng k f]T;fxg u5{ .				
!)	dnfO{ l/; p7\5 ha d]/f ;flyx?n] v]n v]Nn] a]nf ;xof]u ub{}gg\ .				
	ljR5]bg				

	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1	1	
!!	ha d v]n k'/f ug{ kfplbgdnfO{ l/; p7\5 .			
!@	d cgnfO{g v]n v]Ng yfn]kl5 d;Fu ;'Tg]			
	;do sd x'G5.			
!#	d}n] cgnfO{g v]nsfsf/0f sfd / k9fO{nfO{			
	a]jf:tf u/]sf] 5' .			
!\$	dnfO{ k To]s v]nkl5 ce}m v]Ng dg nfU5			
!%	v]n v]Ng gkfpbf d cl:y/, lg/f; / l/;fp5' .			
İΛ	d cfk\mgf] O{ROffcg'zf/ v]Ng gkfP			
	;'Tgklg ;lSbg .			
	clwspT;flx / cfj]uh			
!&	PSn} v]Ng'eGbf ;flyx? ;Fu ;d'xdf v]Ng]			
	qmddfdnfO{ plgx?;Fu al9 glhsePsf]			
	dx;'z x'G5 .			
!*	d}n] v]n;Fu ;DalGwt ;kgfx? klg b]v]sf] 5'			
!(d}n] v]n v]Ng] a]nf w]/} tl/sfx? k of]u			
	u5{' .			
@)	dcgnfO{g v]ndfgofF sk8fx? lsGg k};f art			
	ub{5' .			
@!	d ;dolatfpg v]n v]N5' .			
@@	d k6s k6s v]n x6fpb} /fVg] u5{' .			
@#	d]/f ;fyL tyf kl/jf/n] d]/f] cToflws k of]usf]			
	u'\gf;f] u/]sf 5g\ .			
	cToflwd k of]u			
@\$	d}n] v]n v]Nb} ubf{ w]/} ;fyLx? agfPsf]			
	5' .			
@%	d]/f] nflu v]ndf lgoGq0f /fVg v]nsf] nflu		Ī	
	5nkmn dxTjk"0f{ x'g]5 .			
@^	d}n] ;fyLx?nfO{ cgnfO{g v]n ;'emfa lbP			
	tfls xfdL ;Fu} v]Ng ;sf} .			
	Knfogjfb			
@&	d ;d:ofx? af6aRgcgnfO{g v]n v]N5' .			
@*	d v/fa d'8nfO{ I7s kfg{ cgnfO{g v]nx?			
	v]N5' .			
@(d v]nx? v]Nb5' ha d lg/f; x'G5' jf l/;fp5' .			

	cjnf]sg			
#)	d}n] sn]h pT;jx?df cfof]lht cgnfO{g			
	v]nsf] k lt:kwf{df efu lnPsf] 5' .			
#!	d}n] v]nsf] sf/0f ;fyLx? klgu'dfPsf] 5' .			
#@	d}n] cgnfO{g v]nx?df d]/f] cjtf/ s:6dfOh			
	ug{ ;do vr{ u5'{ .			
##	d}n] cgnfO{g v]nx?df d]/f] cjtf/ s:6dfOh			
	ug{ k};f vr{ u5'{ .			
#\$	d]/f l6dsf ;fyLx? / d;Fu cgnfO{g v]nsf			
	af/]df s'/f u5{' . d];]Gh/ efOa/df .			

WORK PLAN

S.N.	Activities	1 st	2 nd	3 rd	4 th	5 th	6 th	7 th	8 th	
								ļ		

		week							
1.	Literature review								
2.	Topic selection								
3.	Proposal writing and presentation								
4.	Tool development and finalization								
5.	Data collection								
6.	Data analysis and interpretation								
7.	Report writing and presentation								
8.	Submission of final report								

BUDGET PLAN

S.	N.	Items	Price	per	unit	Quantity	Amount (Rs)
			(Rs)				

1.	Stationary:			
	Pen	20.00	2	40
	Pencil	10.00	10	100
	Eraser	10.00	10	100
	Sharpner	5.00	1	5
	Stapler	100.00	1	100
	Stapler pin	30.00	2	60
	Сору	100.00	1	100
2.	Internet	-	-	1500
3.	Transportation	-	-	500
	Lunch	100.00	7	700
4.	Report writing:			
	Printing	5.00	500	2500
	Binding	500.00	4	2000
5.	Final presentation:			
	Printing	5.00	500	2500
6.	Miscellaneous	-	-	3000
7.	Total	-	-	13,195

इतो न २६८३८-०६० १०६९



यती स्वास्थ्य विज्ञान प्रतिष्ठान Yeti Health Science Academy (प्वाञ्चल क्षित्रकालक र रहेक्श) वाट सम्बन्धन प्राप्त) कान्तिमार्ग सहाराज्ञाञ्ज (काठमाडौं, नेपाल

प.सं. ०७६/०७७ च.नं. ४१८

विषय: प्रि-टेप्ट (Pre Test) कार्यमा सहयोग गरिदिनु हुन ।

थामान
उपर्युक्त विषयमा पूर्वाञ्चल विश्वविद्यालय तथा प्राविधिक शिक्षा तथा व्यावसायिक तालीम परिषदबाट सम्बन्धन प्राप्त यस कलेजमा स्नातक तहको Bachelor of Science in Nursing - BSN) - ४ वर्षे, Post Basic Bachelor in Nursing (PBBN) - ३ वर्षे, Bachelor in Public Health (BPH)- ४ वर्षे, PCL तहको Medical Lab Technology (CMLT), Diagnostic Radiography (CDR)- ३ वर्षे तथा TSLC Lab Assistant १८ महिने कार्यक्रम सञ्चालन
भइरहेको व्यहोरा जानकारीको लागि अनुरोध छ ।
यसै सन्दर्भमा यस कलेजमा बि.एस्सी.नर्सिङ्ग (Bachelor of Science in Nursing) चौथो वर्षमा अध्ययनरत
विद्यार्थीहरुले पाठ्यक्रममा व्यवस्था भए अनुसार अनुसन्धान (Research) कार्य गर्नु पर्ने भएको र सोही सिलसिलामा यस
कार्यक्रममा अध्ययनरत पत्रवाहक विद्यार्थीले तपसिलका विषयमा सो कार्य गर्न
गइरहकोले सो कार्य गर्न अगावै गरिने प्रि-टेप्ट (Pre Test) कार्य हेतु तहाँ आउने भएको हुँदा निज विद्यार्थीलाई
आवश्यक सहयोग उपलब्ध गराई दिनु भई अनुसन्धान कार्यमा सहयोग पुऱ्याई दिनु हुन हार्दिक अनुरोध गर्दछु ।
तपसिन:
(राजु गुरुङ्ग) निर्देशक

sat a perte-oco cea



यती स्वास्थ्य विज्ञान प्रतिष्ठान Yeti Health-Science Academy प्याजना विकासक दे हो हुए। बाट सम्बन्धन प्राप्त। कान्तिमान, महाराजनाञ्चा, काठमाडौं, नेपाल

प.स. ०७६/०७७ च.न. ४९९

मिति: २०७६/०९/१६

विषयः तथ्योइ संकलन (Data Collection) कार्यमा सहयोग गरिदिनु हुन ।
श्रीमान
the state of the s
उपर्युक्त विषयमा पूर्वाञ्चल विश्वविद्यालय तथा प्राविधिक शिक्षा तथा व्यावसायिक तालीम परिषदवाट सम्बन्धन
प्राप्त यस कलेजमा स्नातक तहको Bachelor of Science in Nursing - BSN) - ४ वर्षे, Post Basic Bachelor in
Nursing (PBBN) - ३ वर्षे, Bachelor in Public Health (BPH)- ४ वर्षे, PCL तहको Medical Lab Technology
(CMLT), Diagnostic Radiography (CDR)- ३ वर्षे तथा TSLC Lab Assistant १८ महिने कार्यक्रम सञ्चालन
भइरहेको व्यहोरा जानकारीको लागि अनुरोध छ ।
यसै सन्दर्भमा बि.एस्सी.नर्सिङ्ग (Bachelor of Science in Nursing) चौथो वर्षमा अध्ययनरत यस कलेजका
पत्रवाहक विद्यार्थी
गर्न गइरहेको हुँदा आवश्यक तथ्याइ संकलन (Data Collection) गर्ने सिलसिलामा निज विद्यार्थी तहाँ आउने भएकोले
आवश्यक सहयोग उपलब्ध गराई दिनु हुन हार्दिक अनुरोध गर्दछु । आशा छ यहाँको सहयोगवाट विद्यार्थीको अनुसन्धान
कार्य प्रभावकारी हुनेमा यस कलेजले पूर्ण रुपमा विश्वास लिएको छ ।
सहयोगको लागि धन्यवाद ।
مراس ا
तपिसनः (राज गुरुष्ट)
प्रमाणिक के कि

PAN No. : 301302814
राष्ट्रिय परीक्षा बोर्ड, नेपाल **शिका उपा कि अध्यक्तिक विद्यालय GYAN JYO**(National Examinations Books, Nepal)

Date: 2076/09/24

To Whom It May Concern

This is to certify that **Ms. Muna Oli**, a student of Yeti Health Science Academy has successfully completed her pretest for 2 days on 2076/09/23 and 2076/09/24 for a research topic "Online game addiction among adolescents in a selected school of Dang".

We wish every success in her life in the days to come.

Mr. Surendra G.C. (Principal)

PRINCIPAL

School ID: 560400034



Tulsi Boarding Secondary School

Tulsipur-5, Dang Estd.: 2044

Ph No.: 082-520218



Date: 2076/10/10

To Whom It May Concern

This is to certify that Ms. Muna Oli, a student of Yeti Health Science Academy, has successfully completed her Data Collection of 15 days from 2076/09/25 B.S. to 2076/10/10 B.S. for a research topic "Online game addiction among adolescents in a selected school of Dang".

We wish every success in her life in the days to come.

Mr. Bhisma Bahadur K. C.

(Pfandipatyter