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Research Paper

Assessment of Love Addiction and Its Relationship with Nomophobia

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ABSTRACT

Love addiction and nomophobia are two increasingly prevalent psychological phenomena in today's digital and emotionally connected world. This study examines the correlation between love addiction and nomophobia. It is hypothesized that individuals with higher levels of love addiction are more likely to experience severe nomophobia. A total of 145 respondents from Karnataka, including individuals in love, those experiencing breakups, and those in one-sided love, participated. They completed the Love Addiction Screening Assessment (LASA) and the Nomophobia Scale. Data collection was conducted via offline methods and Google Forms, and statistical analyses included chi-square tests, Pearson's correlation, ANOVA, and t-tests. Results showed that, in the case of love addiction, 42.1% of respondents were addicted and required professional help, 23.4% were prone to addiction, and 34.5% were not addicted. Regarding nomophobia, the majority (56.5%) experienced moderate levels of nomophobia, 30.3% had severe nomophobia, 12.4% reported mild levels, and only 0.6% did not experience nomophobia. No significant relationship was found between love addiction and nomophobia. ANOVA results indicated that individuals with heartbroken individuals exhibited the highest levels of love addiction, followed by individuals experiencing one-sided love and those currently in a relationship. Gender did not significantly influence LASA scores. However, individuals aged 26 and above show the highest levels of love addiction and are followed by those under 18. This study highlights the importance of comprehensive psychological interventions that address both emotional and digital dependencies to foster healthier relationship dynamics and digital habits.

Keywords: *Love addiction, Nomophobia, Emotional dependency, Romantic relationship, Young- adults*

Love addiction is a non-clinical term that refers to a behavioral pattern that is characterized by an abnormal and intense interest in one or more current and/or former romantic partners (Sanches & John, 2019). There are no recognized definitions or diagnostic criteria for "love addiction," but its phenomenology has some similarities to substance dependence: euphoria and unrestrained desire in the presence of the love object or associated stimuli (drug intoxication); negative mood, anhedonia, and sleep disturbance when separated from the love object (drug withdrawal); focused attention on and intrusive thoughts about the love object; and maladaptive or problematic patterns of behavior (love relation)

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leading to clinically significant impairment or distress, with pursuit despite knowledge of adverse consequences (Reynaud, Karila, Blecha, & Benyamina, 2010).

The neurobiology of love addiction has also been examined. Individuals experiencing intense romantic love have been found to exhibit activation in the dopaminergic reward system, which includes the ventral tegmental area and caudate nucleus. These areas are also activated in substance addiction (Fisher, Aron, & Brown, 2005). Studies have shown that love addiction does influence personality and interpersonal functioning (Peele & Brodsky, 1975), significant and positive associations between preoccupied and fearful adult attachment and love addiction and decreased self-esteem among individuals in romantic relationships (Gori, Topino, Russo, & Velotti, 2023), increased negative urgency (NU), anxious attachment, and emotional dysregulation (impulse) all significantly predicted LA (Dineen & Dinc, 2024), and love addicted individuals are in need of psychological intervention especially in emotional regulation and relational domains (Sanches & John, 2019).

Nomophobia is the fear or anxiety experienced when an individual is unable to use their mobile phone or is without it, representing a contemporary form of situational phobia driven by dependency on digital connectivity (Yildirim & Correia, 2015). Common examples of this could be panic when the phone battery dies, anxiety when network coverage is lost, distress when unable to look up information, and discomfort when deprived of apps and utilities (Yildirim & Correia, 2015). A strong association between nomophobia and trait anxiety, low self-esteem, and fear of negative evaluation was observed in these individuals, which could have been influenced by underlying social anxiety and attachment insecurity (King et al., 2014; Bhattacharya, Bashar, Srivastava, & Singh, 2019). But demographic and cultural factors are also believed to have a major role in the levels of nomophobia exhibited by an individual. Studies (Jahrami et al., 2023) reveal that young adults and university students from non-western cultures are significantly more nomophobic and an increased psychological, emotional, social, and physical side effects due to excessive smartphone use. (Notara et al., 2021)

The present study aims to examine the relationship between love addiction and nomophobia as independent constructs, thereby addressing an existing gap in the literature. While prior research has largely explored these variables in relation to attachment theory, evidence suggests that both love addiction and nomophobia share significant associations with dismissing and fearful attachment styles.

METHOD:

Sample:

In the present study, 146 participants (84 female and 61 male) aged 18 and above. The participants are categorized based on their relationship status and different educational background. The sampling method used is simple random sampling.

Tools employed:

Love Addiction Self-Assessment (LASA) (Falango, 2012): This self-reporting love addiction scale consists of 25 items related to various aspects of love addiction. The participants answer each item as Yes (1) or No (0). The items responded with Yes are summed for interpretation. If participant answered “Yes” to 0– 3 questions, it is interpreted as they’re probably not love addicted; “Yes” to 4 – 6 questions – they may have a problem; and

"Yes" to 7 or more questions, they may want seek professional help from someone trained in the treatment of sex and love addiction to understand and overcome your compulsion. The LASA was adapted from the "40 questions for self-diagnosis" (Augustine Fellowship 1985). The LASA obtained a moderate alpha index of $\alpha = .62$.

Nomophobia Questionnaire (Yildirim, C., & Correia, A. P., 2015): This self-reporting nomophobia scale consists of **20 items** distributed across four dimensions of nomophobia, namely, not being able to access information, giving up convenience, not being able to communicate, and losing connectedness. The participants rate each item on a **7-point Likert scale** ranging from 1 (*strongly disagree*) to 7 (*strongly agree*). The minimum score that can be obtained by a participant is **20** and the maximum score is **140**. Scores **20 to 59** indicate mild nomophobia, scores **60 to 99** indicate moderate nomophobia, and scores **100 and above** indicate severe nomophobia. The NMP-Q is highly reliable, with the Cronbach's alpha for the full scale reported at **α = .945**, and for individual subscales ranging from **α = .814 to .939,** indicating excellent internal consistency.

Procedure:

The first author used social media platforms to share the google forms for collection of data from various regions of India. The candidate also collected responses from students of various institutions using google forms. Consent was obtained and the participants were assured that their responses would be kept confidential. A text message was attached with the Google forms, consisting of instructions and contact information to use in case of any confusion in the statements given in the scales. After completing the collection of data, it was transferred to the computer. The data were analyzed using both descriptive and inferential statistics. Descriptive statistics included N, frequency, percentage, mean, and standard deviation. Inferential statistics comprised chi-square tests, Pearson's product-moment correlations, one-way ANOVA (followed by Scheffé's post hoc test), and independent-samples t-tests. Table 1 presents the results of extent of love addiction among the selected sample and Table 2 provides the results of Pearson's product moment correlations between love addiction scores and dimensions of nomophobia including total nomophobia scores. Table 3 depicts influence of relationship status and selected demographic factors on love addiction scores.

RESULTS:

Table 1: Results showing the levels of love addiction.

Levels of LASA	Frequency	Percentage	Test statistics
No love addiction	50	34.5	$X^2 = 7.63$; p= .022
May have a problem	34	23.4	
Love addict and may require professional help	61	42.1	

Results indicate that 42.1% of respondents were love addicted and required professional help, 23.4% were prone to addiction, and 34.5% were not addicted. Chi-square test revealed a significant difference between frequencies of various levels of love addiction ($X^2 = 7.63$; p= .022), confirming that most of the sample selected were Love addicted and may require professional help.

Table 2: Results of product moment correlations between the love addiction and dimensions of Nomophobia

Variable 1	Variable 2 (dimensions of Nomophobia)	Correlation co-efficient	P value
Love addiction	Not being able to access information	-.148	.076
	Giving up convenience	-.102	.220
	Not being able to communicate	-.119	.156
	Losing connectedness	.043	.608
	Total Nomophobia score	-.100	.232

Bivariate correlations revealed no significant associations between love addiction and any dimensions of nomophobia. Specifically, love addiction showed non-significant correlations with not being able to access information (r=-.148; p=.076), giving up convenience (r=-.102; p=.220), and not being able to communicate (r=-.119; p=.156), losing connectedness (r=.043; p=.608), and with the total nomophobia score (r=-.100; p=.232).

Table 3: Mean love addiction scores of the selected sample by relationship status and select demographic factors and results of Test statistics

Variable	Sub variable	Mean	S.D	Test statistics	P value
Relationship status	Currently in relationship	7.23 [b]	5.08	F=7.418	.001
	Single	4.77 [a]	4.16		
	One-sided	10.67 [c]	6.74		
	Heartbroken	11.40 [c]	3.92		
	Longing for one	6.13 [b]	4.55		
Gender	Male	6.01	5.07	t=-.323	.747
	Female	6.28 [ab]	4.69		
Age (in years)	Below 18	7.00 [b]	4.33	F=5.561	.001
	19 to 22	5.16 [a]	4.80		
	23 to 25	5.59 [a]	3.73		
	26 and above	9.80 [c]	5.57		

Note: Mean values with different superscripts are significantly different from each other as indicated by the Scheffe's post hoc test (Alpha=.05)

Relationship Status

One-way ANOVA revealed significant differences in love addiction scores across relationship statuses, (F=7.418; p=.001). Scheffé's post hoc tests indicated that respondents who were heartbroken (M=11.40, SD=3.92) and those in one-sided relationships (M=10.67, SD=6.74) reported significantly higher love addiction than singles (M=4.77, SD=4.16) and those longing for a relationship (M=6.13, SD=4.55). Those currently in relationships (M=7.23, SD=5.08) also scored higher than singles. These findings suggest emotional distress from unrequited or ended relationships heightens love addiction vulnerability among adolescents.

Gender

Independent-samples t-test showed no significant gender differences in love addiction scores, (t=-.323,p=.747). Males (M=6.01,SD=5.07, SD=5.07) and females (M=6.28, SD=4.69)

reported comparable levels. This indicates love addiction manifests similarly across genders in this adolescent sample.

Age

One-way ANOVA revealed significant age-related differences in love addiction, (F=5.561, p=.001). Scheffé's post hoc analysis showed those aged 26 years and above (M=9.80, SD=5.57) had significantly higher scores than the respondents aged 19-22 years (M=5.16, SD=4.80) and 23-25 years (M=5.59, SD=3.73), and with below 18-year-olds (M=7.00, SD=4.33) intermediate. Older adolescents may experience intensified love addiction due to greater romantic exposure or developmental pressures.

DISCUSSION

Major findings of the study

- 42.1% of respondents were love addicted and required professional help, 23.4% were prone to addiction, and 34.5% were not addicted
- Respondents who were heartbroken and those in one-sided relationships reported significantly higher love addiction than singles and those longing for a relationship, and those currently in relationships also scored higher than singles
- Respondents aged 26 years and above had significantly higher scores than the respondents aged 19-22 years and 23-25 years, and with below 18-year-olds intermediate.

The results of the present study revealed that a significant proportion of young-adults experience love addiction, with the majority of the sample scoring in ranges indicating either a potential problem or a need for professional help. This finding is consistent with Gori et al. (2023), who in their study on love addiction among university students found that compulsive relational patterns are considerably prevalent among young adults.

A significant difference in love addiction was observed across relationship status groups, with heartbroken individuals and those in one-sided love reporting the highest levels, while single individuals reported the lowest. This pattern is theoretically consistent with the behavioral addiction framework, as the loss of or inability to attain a romantic partner would intensify withdrawal symptoms, obsessive preoccupation, and fear of abandonment - all hallmarks of love addiction (Costa et al., 2021; Peele & Brodsky, 1975). No significant differences in nomophobia were observed across relationship status groups, suggesting that smartphone-related fear operates independently of one's romantic circumstances in this sample.

No significant gender differences were found in love addiction. Similarly, Gori et al. (2023), in their path analysis study on love addiction among young adults, found that there were no significant gender differences in overall love addiction scores, suggesting that emotional dependency in romantic relationships is equally distributed across both genders in young adults.

Significant age-related differences were found in love addiction, with individuals aged 26 years and above having the highest scores on love addiction, while individuals below 18 years old also had relatively high scores on love addiction. Sanches and John (2019) noted that love addiction tends to become more fixed over time as repeated cycles of unhealthy

relationships reinforce maladaptive relational patterns, which may explain the elevated scores in older individuals.

To conclude, this study underscores the substantial prevalence of love addiction among adolescents and young adults, particularly among those heartbroken, in one-sided relationships, or aged 26 and above, highlighting its independence from nomophobia and gender in this context. These patterns align with behavioral addiction models, emphasizing the role of relational distress and cumulative romantic experiences in fostering compulsive attachments. Interventions should prioritize early screening in educational settings, cognitive-behavioral therapy targeting withdrawal and abandonment fears, and longitudinal tracking of at-risk groups like heartbroken youth. Future research could employ prospective designs to establish causality, incorporate validated nomophobia-love addiction scales across diverse cultural samples (e.g., beyond urban Indian adolescents), and explore mediators like attachment styles or social media use to refine prevention strategies.

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Conflict of Interest
The author(s) declared no conflict of interest.

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