# **Teens and Technology in the Age of COVID**

The human spirit must prevail over technology. - Albert Einstein

## Welcome to the Machine

Technology has become, for better and for worse, an integral part of our lives that often is taken for granted. Consider the smartphone, for example. This pocket-sized device contains a million times more computing power than the Apollo 11 supercomputer. Indeed, it is seemingly impossible to imagine a world without smartphones, let alone the internet, computers or social media. With 79% of Americans actively using at least one social media platform, we are more connected with one another than in the *history of humanity*.

There are now multiple generations who have been born into this futuristic era. These *digital natives* have a seemingly innate ability to navigate a dizzying array of apps, gadgets, programs and other tech that many of us find perplexing (to say the least).

In his *Spiderman* comics, Stan Lee (1962) once wrote "With great power comes great responsibility." The modern adolescent is expected to balance after-school activities with homework, socialization, family time, and self-care; in addition to managing the overwhelming responsibility of their personal technology use. It is truly no wonder that:

- 1 in 3 adolescents will meet criteria for an anxiety disorder by age 18,
- 1 in 4 adolescents will have vaped nicotine within the past month by 12th grade,
- The rate of adolescents meeting criteria for Major Depressive Disorder increased
- by 52% between 2005 and 2017. (Coyne et al. 2020)

COVID-19's resulting shelter in place ordinances have essentially created a perfect storm for technology abuse and addiction. With teens forced to stay home and spend their school day online, a diligent student may spend 5 to 8 hours per day in front of a screen *for their studies alone*. Including their fun screen time from gaming, social media, YouTube and TV streaming shows, they might spend a staggering **7 to 15 hours per day** (Antos. 2020). This sedentary lifestyle, combined with a lack of in-person socialization, is indeed a disturbing pattern.

A process or behavioral addiction to technology often is considered within the context of digital gaming (as opposed to board or card games). As treatment providers, we can extrapolate many aspects of assessment and treatment to other related technology addictions, such as social media. For the purpose of simplicity, however, the remainder of this article will focus on gaming.

The longest study ever completed on adolescents and gaming addiction, published in May of this year, had foreboding results. Tracking 385 teens over 6 years, *researchers found that 10% would develop technology addiction by the time they entered adulthood* (Coyne et al. 2020). The single largest predictor of addiction? Levels of prosocial behavior, or behavior that benefits another person or people. Community service, helping a friend study, following household rules and supporting a peer going through a difficult time are all examples of such behavior. Greater amounts of prosocial behavior are protective against a gaming addiction.

Thus, it has never been more important for therapists to have sufficient knowledge and awareness of how such technology use impacts our clients and what might mitigate the high use of technology. Truly, we must prepare ourselves for the developmental and socio-emotional impacts that will result from the *new normal* tech diet consumed during shelter in place.

### **Diagnosis and Assessment**

When considering the concept of technology addiction, it is important to remember that the DSM 5 has yet to establish a definition. Indeed, all we have at this point is Internet Gaming Disorder (IGD) and its delineation as an area of further study. Frustratingly, the name alone demonstrates a gross misunderstanding of different mechanisms of use (e.g. social media, single player gaming and general internet use).

# As Cerniglia et al. (2019) explain, IGD is defined by:

1. Preoccupation with gaming,

2. Withdrawal symptoms when gaming is taken away or not possible (sadness, anxiety, irritability),

3. Tolerance, the need to spend more time gaming to satisfy the urge. Inability to reduce playing, unsuccessful attempts to quit gaming,

4. Giving up other activities, loss of interest in previously enjoyed activities due to gaming,

- 5. Continuing to game despite problems,
- 6. Deceiving family members or others about the amount of time spent on gaming,
- 7. The use of gaming to relieve negative moods, such as guilt or hopelessness,
- 8. Risk, having jeopardized or lost a job or relationship due to gaming

The International Classification of Diseases (ICD-11) recognizes Gaming Disorder as a pattern of gaming behavior (digital-gaming or video-gaming) characterized by:

1. Impaired control over gaming,

2. Increasing priority given to gaming over other activities to the extent that gaming takes precedence over other interests and daily activities,

3. Continuation or escalation of gaming despite the occurrence of negative consequences,

4. The behavior pattern must be of sufficient severity to result in significant impairment in personal, family, social, educational, occupational or other important areas of functioning and would normally have been evident for at least 12 months.

Addiction itself is much like an iceberg protruding from the ocean. We can see only a small portion of it outside the water, yet underneath is a gargantuan, jagged, frozen mass. From low prosocial behavior and frustration tolerance to tantrum behaviors, these tech-addicted teens may sadly have parts of their development frozen as well.

In their review of 24 recent studies on teens with IGD, Choi, et al. (2019) found:

- 92% met criteria for some form of an anxiety disorder,
- 89% met criteria for some form of a depressive disorder,
- 85% met criteria for some form of an ADHD,
- 75% met criteria for some form of an OCD.

In assessing for pathological technology use, therapists have a number of free and thoroughly-validated tools at their disposal (Young, K.S. 2013; Young, K.S. 2007):

1. The Problematic Online Gaming Questionnaire (POGQ) is an excellent tool that measures the six factors of gaming addiction:

- a. Preoccupation,
- b. Overuse,
- c. Immersion,
- d. Social isolation,
- e. Interpersonal conflicts,
- f. Withdrawal.

2. The Internet Addiction Test-Revised is one of the oldest and most validated assessment tools for problematic internet use, *including social media*. Its revised version adds craving and updates the language to reflect current technological changes.

3. Similar to the classic CAGE assessment for alcoholism, the Bergen Social Media Addiction Scale (BSMAS) is not meant as a standalone diagnostic tool but rather a supplemental one:

- a. You spend a lot of time thinking about social media or planning how to use it,
- b. You feel an urge to use social media more and more,
- c. You use social media in order to forget about personal problems,
- d. You have tried to cut down on the use of social media without success,
- e. You become restless or troubled if you are prohibited from using social media,
- f. You use social media so much that it has had a negative impact on your job/ studies.

It is not difficult to imagine why so many children and teens are developing pathological technology use. The outside world has not exactly been a safe place. In 2018 it was literally engulfed in flames and is now being ravaged by a pandemic. As a teen, hours upon hours of gaming can serve to bolster a sense of autonomy (control through achievement), social connection/belonging, and an overall immersive escape. Understanding your client's core motivation(s) for their use can give you a clearer idea of replacement behaviors, a key aspect of treatment.

As therapists, it is our duty to not only diagnose and treat technology addictions, but to empower parents, caregivers and natural supports through psychoeducation as well. Below are a number of wonderful resources to aid you in taking these small steps as individual providers. In doing so, perhaps the current generation of teenagers will one day be able to take a giant leap for us all.

#### Resources

Websites:

RESTART in Seattle: The Top Treatment Program in the U.S. - www.netaddictionrecovery.com

Self-Help & Support Groups for Teens and Adults - www.gamequitters.com

Online & In-Person Anonymous-Style Groups - www.olganon.org

Family Media Plan- The Cornerstone of Effective Intervention in the Home - www.healthychildren.org/English/media/Pages/default.aspx

Children's Screentime Action Network: A coalition of clinicians, educators and advocates offering myriad worksheets, handouts and news in relation to the balanced use of technology in minors. <u>https://screentimenetwork.org/</u>

Books::

Cash, H., & McDaniel, K. (2008). Video games & your kids: How parents stay in control (K. Lucas, Ed.). Grand Rapids, MI: Issues Press.

Young, K. S., & Nabuco de Nabreu, C. (Eds). (2010). Internet addiction: A handbook and guide to evaluation and treatment. Hoboken, NJ: John Wiley & Sons.

Alex Basche, M.A. LMFT 1190 S Bascom Ave, Suite 208 San Jose, CA 95128 Phone: 408-372-6047 www.ResetfromTech.com

### References

Cerniglia, L., Griffiths, M. D., Cimino, S., De Palo, V., Monacis, L., Sinatra, M., & Tambelli, R. (2019). A latent profile approach for the study of internet gaming disorder, social media addiction, and psychopathology in a normative sample of adolescents. *Psychology Research and Behavior Management*, *12*, 651–659. doi:10.2147/PRBM.S211873

Choi, B. Y., Huh, S., Kim, D. J., Suh, S. W., Lee, S. K., & Potenza, M. N. (2019). Transitions in problematic internet use: A one-year longitudinal study of boys. *Psychiatry Investigation*, *16*(6), 433–442. doi:10.30773/pi.2019.04.02.1

Coyne, S.M., Stockdale, L.A., Warburton, W., Gentile, D.A., Yang, C., & Merrill, B. (2020). Pathological video game symptoms from adolescence to emerging adulthood: A 6-year longitudinal study of trajectories, predictors, and outcomes. *Developmental Psychology*,

### doi: 10.1037/dev0000939

Forsans, E. (2011). The video game industry is adding 2–17-year old gamers at a rate higher than that age group's population growth. *Agence Française pour le Jeu Vidéo/The NPD Group*. Retrieved from http://www.afjv.com/

Rideout V.J., Foehr U.G., Roberts D.F. (2010, January). *Generation M2: Media in the lives of* 8- to 18-year-olds. Retrieved from https://kaiserfamilyfoundation/

Young, K.S. (2007). Cognitive behavior therapy with internet addicts: Treatment outcomes and implications. *CyberPsychology & Behavior*. 10(5), 671–679. Retrieved from: https://www.ncbi.nlm.nih.gov/pubmed/

Young, K.S. (2013). Treatment outcomes using CBT-IA with internet-addicted patients. *Journal of Behavioral Addictions*. 2(4), 209–215. doi:<u>10.1556/JBA.2.2013.4.3</u>

Antos, M. (2020, April 15th).*New Data from Circle Shows Parents Depend on Screen Time Management Tools More Than Ever During Shelter-in-Place*. Intrado. https://techaeris.com/2020/04/15/data-shows-parents-heavily-relying-on-screen-management-apps-during-shelter-in-place/