

## Editorial

# Coming of Age Online: Challenges of Treating the Internet Generation

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### INTRODUCTION

Ten years ago, it was not uncommon for me to spend an entire day seeing adolescent patients without interacting with a single computer. Meetings with patients and their families took place without seeing a single screen or hearing single “beep.” These days, computers are everywhere. My child and adolescent patients are typically unable to sit through our hour-long evaluation without pleading to play video games on their mobile device or their parents’ phones, and their parents’ can’t make it through the meeting before sheepishly acquiescing. Teenaged patients are frequently distracted during our meetings by receiving and responding to numerous text messages on their phones, and often seem genuinely surprised when confronted about the disruption this behavior causes. I too have occasionally failed to resist the urge to check an incoming text when my own phone chirps during such meetings. Even when phones do not intrude on our conversations, I worry that my computerized note-taking subtly detracts from my connection with patients and their families. However, it’s easy to see how computers have also enriched my practice. Electronic prescribing means fewer lost scripts or pharmacy errors, and the electronic medical record and email have vastly improved communication between providers. For better and for worse, computers have irrevocably changed the way I care for patients in only a few short years.

However, electronic media hasn’t just changed the practice of psychiatry; it has also transformed the very landscape of childhood and adolescence. A recent survey by the Kaiser Family Foundation (Rideout, Foehr, & Roberts, 2010) indicates that the average American between ages 8 and 18 spends seven and a half hours per day engaging in various forms of electronic media for entertainment, more than ever before. This means that over the course of a year, youth are spending twice as much time interacting with screens as they are in school. Another study (Madden, Lenhart, Duggan, Cortesi, & Gasser, 2010) shows that over three-quarters of adolescents own a cellphone, and an equal proportion regularly access the Internet from a mobile device. There are clear advantages to this pastime: kids enjoy their time online, have access to health information, find outlets to share with peers and explore their developing identity, and learn to adopt new technology quickly, typically becoming more computer-savvy than their parents. However, all of the

time with screens comes with a significant price. Left unsupervised, online children and teens risk exposure to inappropriate, negative, and even traumatic experiences in the form of graphic violent or pornographic content, online communities that endorse unhealthy and dangerous behaviors, or online bullying or sexual exploitation. Overuse of digital media can interfere with adequate sleep, and risks becoming an addictive habit. The lives of today’s adolescents are quite different from those of only a decade ago, and mental health practitioners must understand and prepare to appropriately respond to these changes.

This month’s issue of *Adolescent Psychiatry* provides a wealth of information regarding the ways computer technology has changed the adolescents we treat, the ways they access information and share experiences about their mental health, risks to their well-being, and even the ways we interact with them.

### ETHICAL CONSIDERATIONS IN CLINICIANS’ SOCIAL MEDIA USE

Although teenagers may be the most voracious users of social media, they aren’t the only ones socializing via computers. More and more of the clinicians who treat them are using texts, emails, and sites like Facebook on a daily basis. As our own use of computer technologies becomes more common, adhering to professional, ethical, and legal principals of professional behavior becomes more complex. Sandra Dejong, author of the book “Blogs and Tweets, Texting and Friending: Social Media and Online Professionalism in Health Care” (2014, Elsevier), has taught ethics and professionalism to physicians for several years. In her article in this issue, “Professionalism in the Digital Age” (p. 64-72), she illustrates eight core issues regarding professionalism and digital technology using clinical vignettes, and discusses how practitioners can prevent damaging breeches in professionalism before they occur.

### TEENS ON SOCIAL MEDIA

Adolescent engagement in social media websites has exploded in recent years. From Facebook and Tumblr to Pinterest and Ask.fm, teens are flocking to these sites so they can easily chat with each other outside of the reach of adult supervision. This habit has both great promise for teens to connect and experiment with self-presentation, but also carry significant but hidden hazards in the form of cyberbullying, sexting, and communities that enable harmful behaviors including eating disorders, self-injury, and suicide. In “Social Media Use among Adolescents: Benefits and Risks,” (p. 73-

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80) Dana Reid and I describe positive and negative aspects of social media use that directly affect adolescent mental health and are of major interest to mental health professionals who treat adolescents.

### **ADDICTION TO VIDEO GAMES AND THE INTERNET**

Next, the article "Internet and Video Game Addiction: Evidence & Controversy" (p. 81-91) presents an extensive review on the phenomenon, recently recognized in the DSM-V under the name "Internet Gaming Disorder" as a condition requiring further study. Although these addictions are not yet official diagnoses in Western nations, there is a wealth of evidence to support the supposition that young people can and often do become addicted to excessive computer use, with significant mental health consequences. Research investigating the symptoms, epidemiology, pathology, and even treatment of these addictions is summarized.

### **ADVISING PARENTS ON THEIR TEEN'S COMPUTER USE**

Although children and teens frequently suffer adverse effects of their media habits, they often have poor insight into these issues given the seductive lure of computer screens. Therefore, youth are typically unable to assert appropriate and healthy control over their computer habits even when their use is problematic, regardless of the advice of parents and health care providers. Children and adolescents frequently require their parents to educate them on the risks of computer habits, set limits on their use and effectively enforce these limits. As a parent myself, I can attest that this is often easier said than done. In "Helping Parents Promote Safe and Healthy Computer Habits" (p. 92-97), Dana Reid and I review how practitioners can best advise our patients' parents to protect them from computer-related mental health threats, encouraging safe and enjoyable computer use.

### **HELPING VICTIMS OF ONLINE HARASSMENT**

Cyberbullying is an unfortunately common occurrence among adolescents, and can have devastating consequences in their lives. Adolescents who are victimized online are likely to also be victims of traditional bullying as well, and those who experience both are four times more likely to suffer depression and five times more likely to attempt suicide (Schneider, O'Donnell, Stueve, & Coulter 2012). The rash of tragic recent stories in the news media linking teen suicides to cyberbullying underlies this point. Clinicians who treat adolescents frequently encounter depressed or anxious teens who are significantly stressed or even traumatized by online harassment. In "Reconsidering the Scenario of Cyberbullying: Promoting the Internalization of the Locus of Control in Adolescents through Cognitive Restructuring" (p. 98-103), José María Ariso and David Reyeró present an analysis of cognitive methods victims use to cope with the problem. They go on to propose the use of a simple cognitive technique to empower these patients to feel in control of the cyberbullying situation and regain a healthier sense of self.

### **VIDEO GAMES AFFECT SLEEP**

Even youth whose computer habits are not addictive often suffer from unhealthy media habits. Many adolescents engage in regular video game play in their bedrooms at night, and many of these present to mental health providers with consequences of inadequate sleep and insomnia. These teens and their parents often lack insight into the relationship between their video game habits and their sleep problems. In "Video Games and Sleep: An Overlooked Challenge in a Child's Room" (p. 104-108), T. Atilla Ceranoglu presents a summary of the available body of research examining the links between electronic game play and insomnia, and provides practical advice for clinicians who treat youth.

### **CLINICAL PERSPECTIVES ON YOUTH SUFFERING FROM PATHOLOGICAL COMPUTER HABITS**

In the Clinical Perspectives section, Erin Belfort (p. 109-111), and Sandra Dejong (p. 112-115), each present a clinical example of individual adolescents impaired by their excessive, problematic internet habits. These types of issues are unfortunately quite commonly seen by mental health providers who treat teens, but there are no established guidelines regarding how to help teens with these problems, so the case discussions should prove thought provoking and helpful.

### **ADOLESCENTS DISCUSS MENTAL HEALTH ISSUES ONLINE**

In this new research study "Using Digital and Social Media Metrics to Develop Mental Health Approaches for Youth" (p. 116-121), Christina Carew and colleagues investigate the way adolescents and adults use the Internet to access mental health information and share their personal stories. The mental health topics adolescents are searching for and the methods adolescents use to initiate discussions about these topics are distinct from those of adults. Although both adolescents and adults frequently initiate conversations about depression, anxiety, and suicide, adolescents are more likely to converse about alcohol, cannabis, and sexting than about doctors or treatments. Teens are more likely to share their personal experiences with these topics than pursue information about them.

### **INTERNET ADDICTION IN TUNISIA**

An important contribution to international literature on this topic is "Risk Factors for Youth Problematic Internet Use: A Cross-sectional Study" (p. 122-129), the first published study of internet addiction (referred to here as Problematic Internet Use or PIU) in youth in the country of Tunisia. Leila Chérif and colleagues present the results of a survey investigating PIU among over 600 students aged 14 to 20. Consistent with numerous studies of the phenomenon in other nations, a significant minority of students was found to meet criteria for PIU. Problematic use was associated with social isolation, anxiety, and video game addiction, as well as excessive use of tobacco and alcohol. Importantly, parental rules regarding internet use emerged as a significant protective factor.

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**DISCLOSURE**

Dr. Weigle confirms that this article content has no conflict of interest.

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