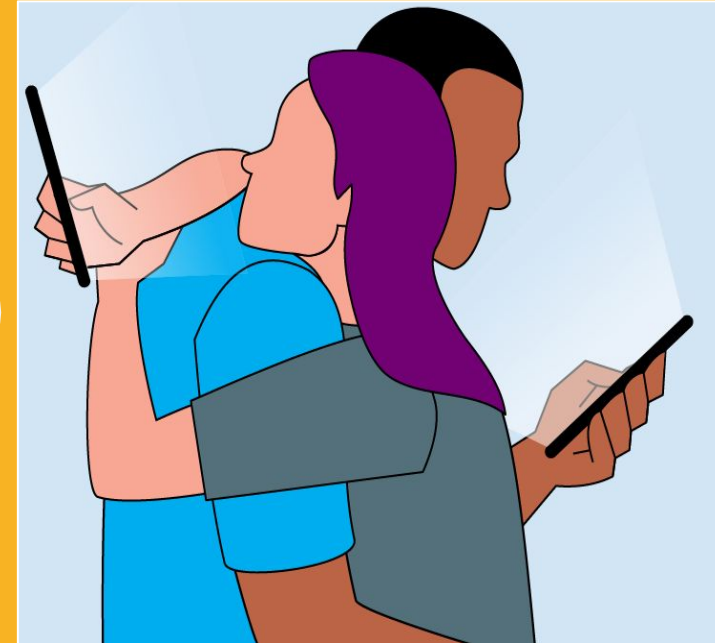




# INTERNET ADDICTION



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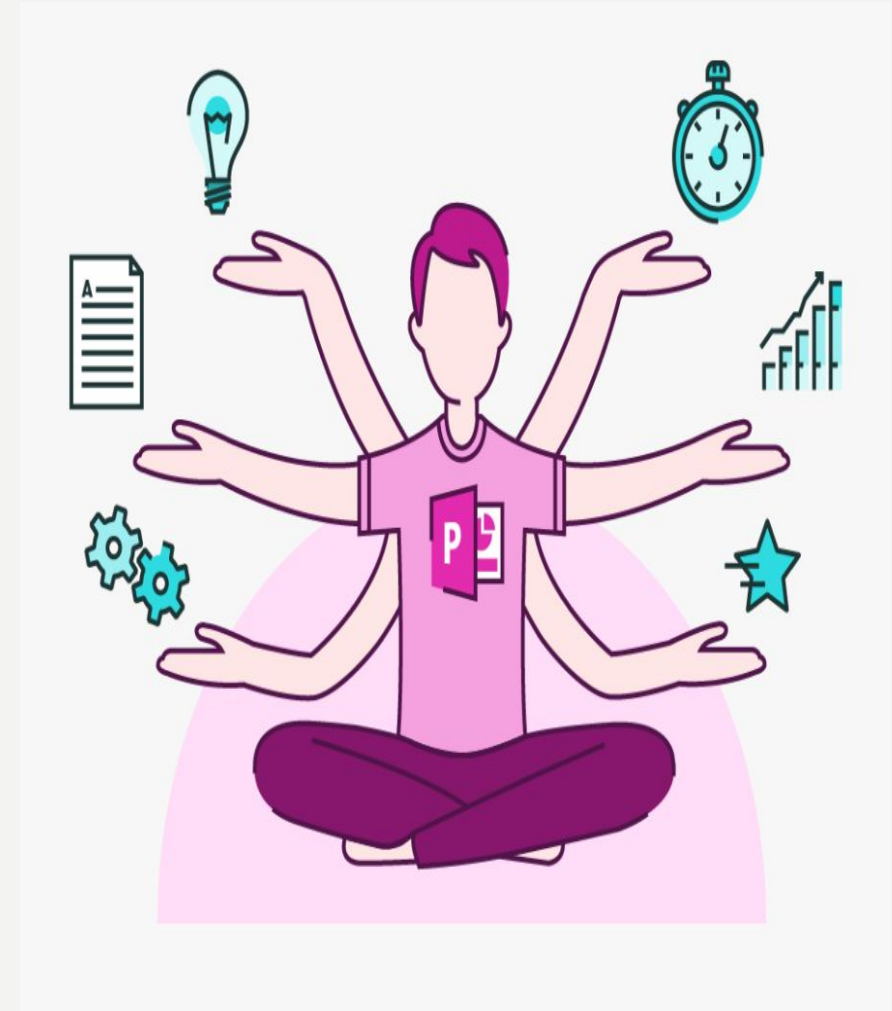
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# PRESENTATION OUTLINE

- **Current Generation**
- **Criteria / Assessment**
- **Types of Addictions**
- **Epidemiology**
- **Intervention**
- **Case Example**



# CURRENT GENERATION

- Boredom
- Inconsistency
- Loneliness
- Addicted to attract things
- Bossy attitude
- Distractions
- High Expectations
- Poor Interpersonal Relationships

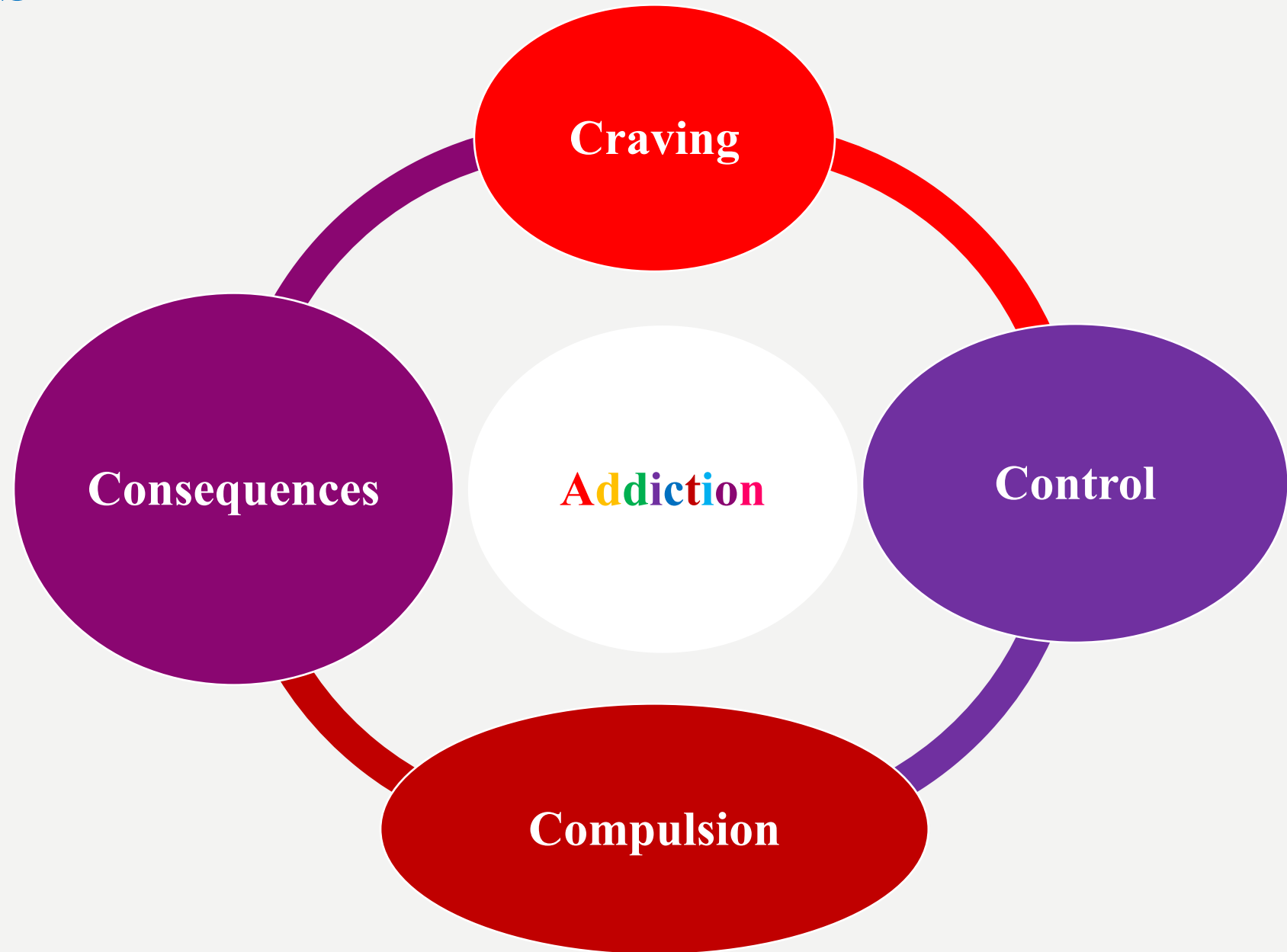




**“It is hard to understand unless you have experienced it”**

**- Kensley**

# 4 C'S



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**Pre-occupation-** Planning or waiting for the next opportunity to use internet

**Conflict-** Interpersonal conflict with near ones

**Decline in occupation-** Low performance in academic or professional life

**Self-care-** Affecting the self-care activities like eating, sleeping, taking bath, keeping one self clean etc

**Withdrawal-** Tendency to be irritated, angry or anxious when denied access to do the particular activity

**Salience-** Need to prioritize using the internet over any other/previously pleasurable activities

**Tolerance-** Tendency to spend more amount of time doing the activity

# CYBERWORLD

O  
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W

WhatsApp

Instagram

Facebook

Selfitis

Tinder

Azar

Tik Tok / Musically.

Mobile

Bigolive

Video Game

Snapchat

Risky Behavior



**PROBLEM BEHAVIOURS IN  
INTERNET OVER-USE**

**Health  
issues**

**Neglect family,  
friends, hobbies**

**Decreased Sleep,  
Appetite**

**Poor  
hygiene**

**Falling grades**

**Increased frequency with time**





## Cell phones : Social Disease



- **10. You've spent more on accessories than on your phone.**
- **9. You have 30 different apps installed. And use them all.**
- **8. You have alarms telling you when to do everything in your life.**
- **7. You read about your phone on your phone.**
- **6. You've cut back on necessities to afford your \$100 a month cell phone bill.**

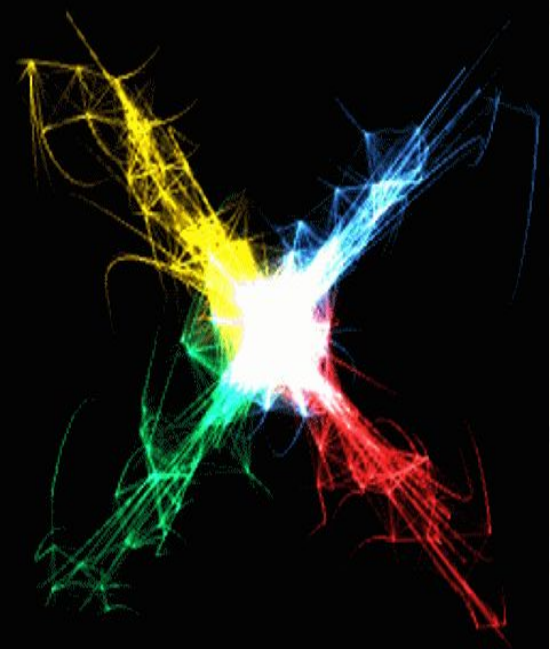


- **5. A full battery charge barely lasts the day.**
- **4. You broke it, and it feels like you lost a friend.**
- **3. When you meet people with the same phone, you can only talk about the phone.**
- **2. You feel a brief moment of panic when you touch your pocket (or grope to the bottom of your purse) and it's gone.**
- **1. You use it in the bathroom.**

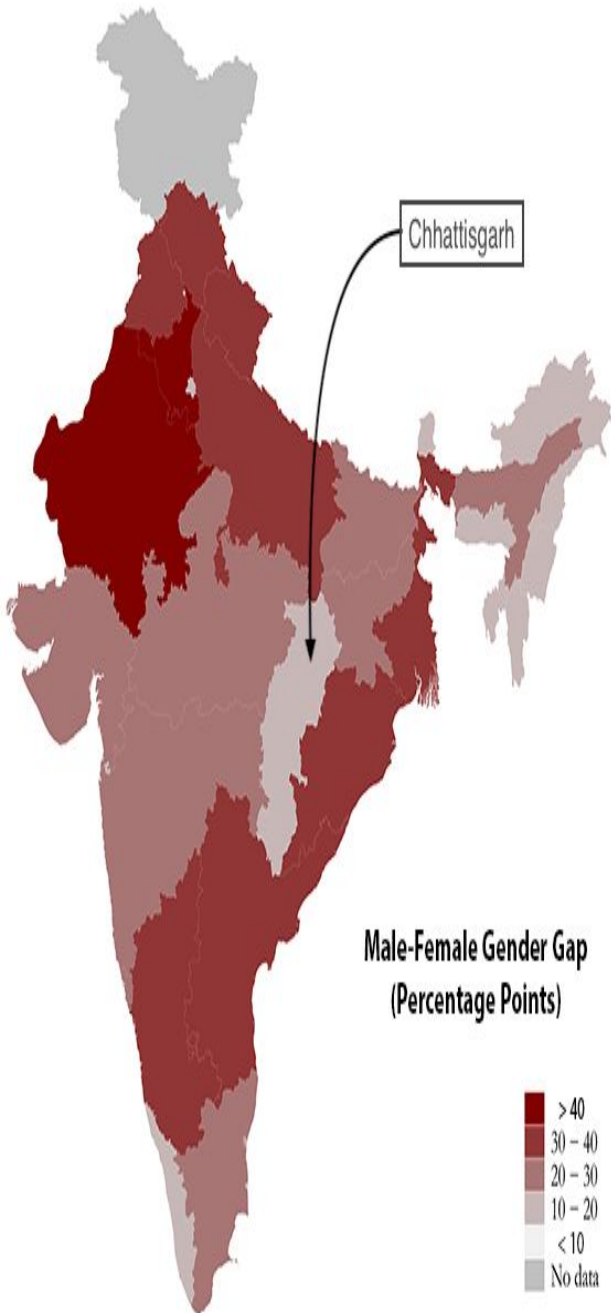
## **MOSTLY SPEAKING WITH MOBILE**

- **Hmmmm**
- **Then**
- **Tell me**
- **Where are you?**
- **What doing? (wt dng?)**
- **Had food?**
- **Why are you doing like this?**
- **Why are you talking like this?**
- **See my status**

VIDEO



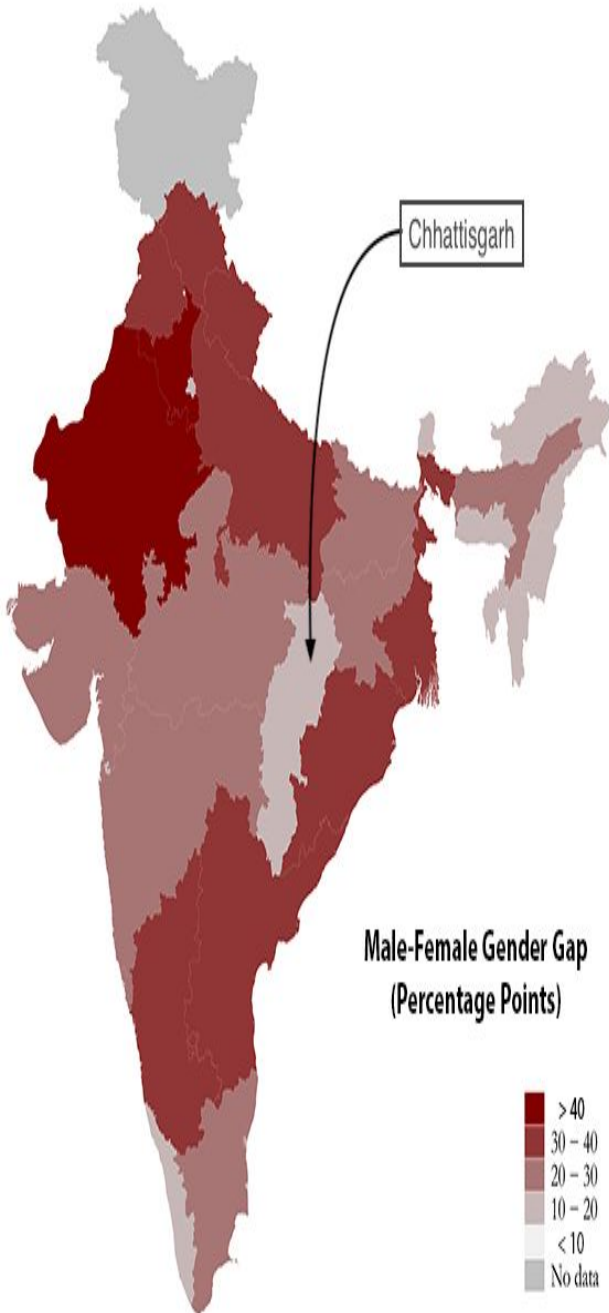
# IN INDIA



- 5% of youth (n=275 males) in the age group 18-25 years has addictive use of social networking sites
- 24% (n=350-200 females and 150 males) have problematic usage of internet.

(Menon & Sharma 2013; Barathkar & Sharma 2011).

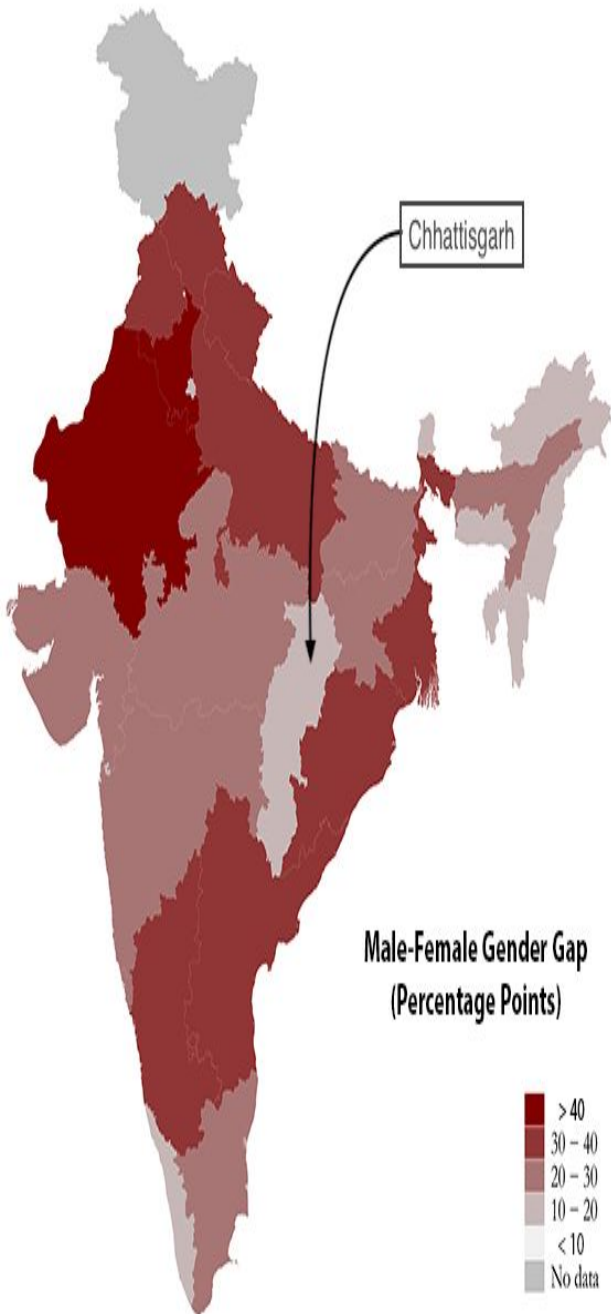
# In India



- 2755 subjects (50.5% males & 49.5% females) - age =18 to 65 - door to door survey - Bangalore.
- 1.3% (2% males & 0.6% females) for internet
- 4.1 % (5% males & 3.1% females) for mobile phones
- 3.5% for social networking sites
- Shopping (4%) (male-3.2% & female-4.8%)
- Sex/online pornography (0.2%)( 0.3% male & 0.1% female)
- 1.2% (offline & online) had gambling addiction

(Sharma, Benegal, Rao & Thennarasu 2013)

## Phone Ownership Across India



– **1. Mumbai - 3.24 million**

– **2. Delhi - 2.66 million**

– **3. Chennai / Bangalore / Calcutta**

• 4.1% have addiction to internet in a survey carried out in Bangalore  
(Sharma et al 2013)

• 24% with problematic internet use have psychiatric distress  
(Bharthakur & Sharma 2011)

• 5% have addictive use of social networking sites  
(Sharma et al 2013)

# PSYCHIATRIC CO-MORBIDITIES

- The most common psychiatric co-morbidities that are found are
  - ✓ Mood disorders (Depression, hypomania & dysthymia) – 33%
  - ✓ Anxiety disorders (GAD & Social Phobia) - 19%
  - ✓ Psychotic symptoms – 14%
  - ✓ Attention deficit/hyperactivity disorder (35%)
  - ✓ Impulse-control disorders (24%)
  - ✓ Eating disorders – 83%
  - ✓ Substance dependence – 38%
  - ✓ Personality disorders (OCPD, BPD & APD)

(Armstrong, 2009)

# CONSEQUENCES

- 40% of kids are exposed to online porn, and 10% of those become very or extremely upset about it

(Schrock & Boyd, 2008, NIMHANS 2014)

- 66% of teens report cyberbullying /sharing of pass words-unawareness of consequences

- Parents shown concern / ignorance about teen online behaviors

(Thomas, 2009 & 2014).



## DYSFUNCTIONS:

- **Physical:** Eye strain & sleep disturbance
- **Psychological:** Restlessness / irritability / psychological distress
- **Nomophobia:** Fear of losing/not having mobile
- Users preferring online interaction in comparison to real relationship
- Lacking support to handle online rejection

# WHAT RESEARCH INDICATES

Internet addictions associated with personality traits of:

- Low emotional stability
- Low agreeableness
- Low extraversion
- Virtual identity versus real identity: blurring of boundaries
- Typically, shyness, sensation-seeking and loneliness are further linked with internet use

*(Kim & Haridakis, 2009)*

**“ I AM A LONER, I AM MOODY AND I DON'T CARE WHAT OTHERS THINK OF ME ”**

## Scales

- ✓ **Diagnostic Questionnaire (DQ) (Young, 1996)**
- ✓ **Internet Addiction Test (IAT) (Young, 1998)**
- ✓ **Generalized Problematic Internet Use Scale (Caplan, 2002)**
- ✓ **Online Cognition Scale (OCS) (Davis et al. 2002)**
- ✓ **Pathological Internet Use Scale (PIUS) (Morahan-Martin & Schumacher 2000)**
- ✓ **Chen Internet Addiction test (Chen et al. 2003)**
- ✓ **Facebook Addiction Scale**
- ✓ **Behavioral Addiction Scale (Sharma MK, 2013).**
- ✓ **Assessment of Internet Use (Thamilselvan & Sharma MK, 2019)**
- ✓ **Mobile game addiction (Varsha, Thamilselvan & Sharma MK 2016)**
- ✓ **Whatsapp Addiction scale (Akilandeswari, Thamilselvan & Sharma MK 2016)**



**The opposite of Addiction is Connection**

**Johann Hari**

**INTERVENTION**

# BUILDING TRUST

- Most difficult though essential first step
- May take multiple sessions
  
- Take a non-judgemental, neutral attitude
- Be empathetic
  
- Understand what got the individual into the online world
- Get into the person's world and talk their language

Rebooting the brain

Put yourself in  
**THEIR**  
shoes



# AFFIRMATIONS: ACKNOWLEDGE ATTEMPTS TO ABSTAIN

“The last week you have been able to move away from different situations where you had the urge to play a game. I am happy that you shared it with me.”

“We have made a good start now that we know how you cope with stress.”

“It is really good to know that you were able to distract your self when ever you felt the urge to surf or game instead of study. Even more so that you found the method of sipping water helpful. I applaud you for your attempts.”

# A PSYCHOLOGICAL PERSPECTIVE OF INTERNET ADDICTION

- Negative views of self and world contribute to internet addiction
  - Self-doubts, negative self-evaluations, low self-esteem

Example,

***“I am worthless offline, but important online”***

***“I am a failure in the real world”***

Associated with overall negative evaluations of the world

Example, ***“The world does not care so I might as well immerse myself ONLINE”***

# PROBLEMATIC THOUGHTS & FEELINGS

**Negative self-  
evaluations,  
Example, “I will be good  
only in the online world”**

**Guilt**

**Self-doubts,  
Example, ‘I am a  
worthless nobody in  
the offline world’**

**Anxiety,  
fear**

**Anger**



# WHAT ARE THE SPECIFIC THOUGHTS?

- **Blaming**

- *“its not the internet, it’s the stress in my life”*
- *“I need the internet to deal with problems in my life”*
- *“My parents/spouse/school drives me to the internet”*

- **Excusing**

- *“Its been a long day and the internet helps me to relax”*
- *“Its ok to use the internet at night since I was studying/working during the day”*

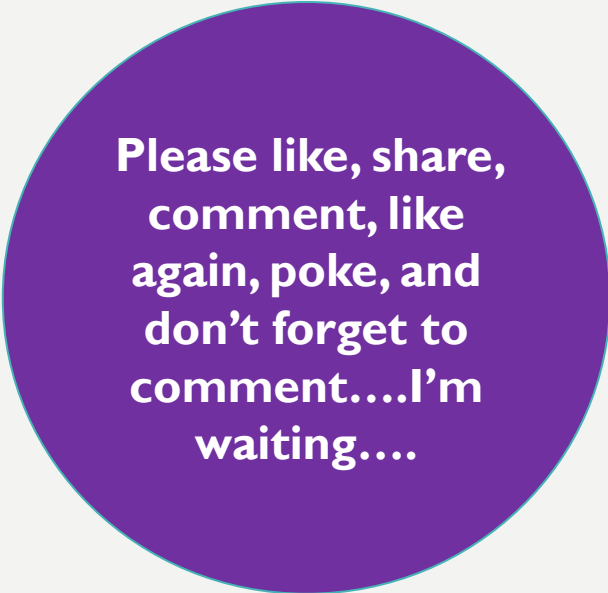
# COMMON THOUGHT ERRORS

- **Rationalizing**

- *“Using the internet is not as bad as having alcohol”*
- *“This is my reward for a hard day of work”*

- **Minimizing**

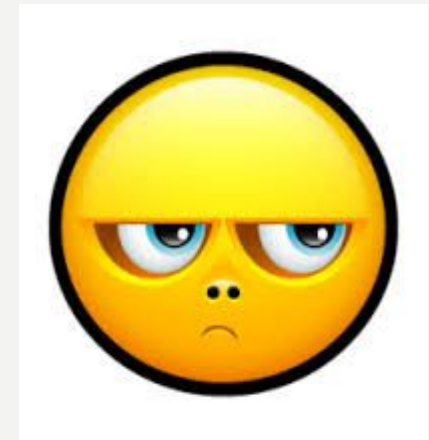
- *“It is just a smartphone/computer- nothing much”*
- *Gaming is not as bad as .....”*



Please like, share,  
comment, like  
again, poke, and  
don't forget to  
comment....I'm  
waiting....

# THESE THOUGHTS CAUSE NEGATIVE EMOTIONS....

- **Sadness**
- **Anxiety**
- **Fear**
- **Anger**
- **Guilt**
- **Boredom**
- **Disgust**



# COGNITIVE BEHAVIOUR THERAPY

- **Monitor thoughts**
- **Identify thoughts that trigger addictive behaviours**
- **Learn new coping skills**
- **3-4 months; approximately 12 weekly sessions**

Youth: *"I am really good at gaming so I am looking at how I will be able to quit."*

Nurse: *"While giving up gaming could be tough for you, we can sit together and work on other aspects of your life that you are good at as well."*

# THREE PHASES

- Phase 1: Behaviour Modification
- Phase 2: Cognitive Restructuring
- Phase 3: Relapse Prevention

# BEHAVIOUR MODIFICATION

- Maintain a daily log of internet usage

Day and Date	Event	Online activity	Duration

- Establish the baseline for treatment
- Pinpoint the situations, triggers, events that contributes to online activities
- For example, when a client spends time gaming to avoid the stress s/he experiences at home/ or school
- Help them to understand the impact of online activities

## Help the patient to:

- Recognize, manage and organize the time spent online
- Use external stoppers such as a particular software
- Stop navigating to specific sites
- Use of reminder keys
- Develop healthy offline activities and hobbies

I finally realized it.  
People are **prisoners**  
of their phones,  
that's why they are  
called **cell** phones.



Spirit Science

# SPECIFIC BEHAVIOURAL TECHNIQUES

- Relaxation training for anxiety in social situations
- Practice mindfulness in daily activities
- Role plays for improved assertiveness
- Cope with urges



# PHASE 2: COGNITIVE RESTRUCTURING

Identify the **maladaptive thoughts** that lead to excessive online behaviours

## **ABC ANALYSIS: Antecedent-belief-consequence**

Example: going to school (antecedent event/situation)



Beliefs “I am a nobody”; “I can never study well”; “No one will ever love me”; “I might as well spend time with online friends”



Consequence: Excessive use of internet, feeling anxious offline

# COMMUNICATION

- **Using an open-ended way of speaking allows for better communication**
- Facilitate greater offline communication with individuals

## Examples:

- *“I hear you say that”*
- *“it sounds like you feel that....”*
- *“You are telling me that....”*



- Provide a platform where person feels acknowledged and validated
- Enhances self-esteem

# PHASE 3: RELAPSE PREVENTION

- Understand what triggers online binges
- Reduce Harm associate with online use
- Are triggers based on moods, a particular time of the day, a particular game or activity, some chat rooms, some online social groups?
- Are the triggers for online activities based on the type of social media (example, a game, online shopping, web surfing, FB/ twitter, chatting, stocks); or some internal trigger or external trigger?
- Help the individual look at co-occurring mood symptoms, biological, familial and social factors associated with internet use to minimize it.
- Focus on client's strengths

# YOUTH SENSITIVE INTERVENTIONS

- Understanding the type of personality and identity of each individual helps develop more sensitive discussions
- Example, individuals high on conscientiousness, use internet time more purposefully
- Youth who are more extraverted tend to have greater social networks that can be utilized outside the social media
- Focus on social and communication skills training that are reduced due to the online activity
- Do face to face communication

# A BRIEF INTERVENTION... THE 5AS

- **A**sk about internet usage in each visit
- **A**dvice them to quit
- **A**ssess readiness to quit
- **A**ssist in creating a quit plan
- **A**rrange for regular follow-ups

# CHANGE PLAN WORKSHEET

## Goals

- The changes I want to make are.....
- The reasons I want to make these changes are.....
  
- My main goals for myself in making these changes are.....
- The first steps I plan to take in changing are.....
  
- Some things that could interfere with my goals are.....
- Some people who could help me with my goals are.....
  
- I hope my plan has these positive results.....

**SHUT  
Digital Detox**

## Coping skills

- 1.** If I run into high risk situations: I will change or leave the situation safe places I can go.....
- 2.** I will put off the decision for 15 mins (awareness and remind oneself of past success)
- 3.** I will distract myself with something I like
- 4.** I' ll call friends/family/doctor
- 5.** Challenging distortions



# LIFESTYLE MODIFICATION

- Jogging, working out at a gym, meditation, yoga or reading, enhanced social activities
- **Positive addictions-** running, meditation, hiking (tour), any activity that increases positive physical and psychological health
- **Involving spouses and significant family members**





# STRUCTURE OF TREATMENT

Sessions	Type of intervention	Components	Stage of motivation
Initial sessions	Rapport building, MI & Psychoeducation	This sessions focuses on bringing down the denial and resistance of the client	Pre contemplation
1 2 3	Clinical intake Assessment Motivational interviewing and Psychoeducation	Brief MET, Clinical data, Internet addiction test, Internet gaming disorder-20, FHS,WHO-QOL, CSI, Outcome rating scale	Contemplation
4 and 5	CBT and BT	Behavior activation and contingency management	Determination and Action
6 and 7	CBT	Cognitive restructuring, internet skills and initiating termination	Action stage
8	Relapse prevention	Consolidation if progress and reviewing the previous sessions	Action stage

## Case Example:1

- Mr.A, 19 yrs, Male, Single, studying B.E., 2<sup>nd</sup> yr belongs to upper middle SES
- Doubts about that he has some psychiatric illness/ he wants to be confirmed
- Taken consultation for many Psychiatrists and Psychologists
- **Diagnosis:** BPAD or Psychosis and treated with antipsychotics
- Movie Name; 3 (Tamil)



1 IN 4 SUFFER FROM  
A MENTAL ILLNESS

- Not mingled with others, Not able to concentrate on studies
- Gets irritated when somebody talks to him
- Used to be waiting for bus without any reason
- Repetitive thoughts
- Wants to be very systematic and perfectionistic

- Later,
  - Excessive internet use – 5 -7 hours per day- used to watch same movies again and again, pornography, listening songs excessively
  - He used to check his problems in the Internet
- Psychological assessment – Anankastic traits and Schizoid personality disorder
- Taken antidepressants
- Individual counseling given
- Maintaining well

MENTAL ILLNESSES  
IS NOT:

## Case Example:2

- Master.P, 16 yrs, single, 10<sup>th</sup> std, higher SES (One month IP care)
- Repetitive thoughts
- No friends / not interested to talk with friends
- Doubts about he has psychosis
- Excessive eating / not able to control it
- Feelings of sadness
- Sleep disturbances
- Not going to school for past 6 months
- Fear about the future
- Watching TV/ Internet excessively (Games, movies, Porn videos) has 2800 friends in his face book



- If mother forced to stop TV / Computer he gets angry on her
- Meanwhile, taken the Mobile and access the Internet
- **Diagnosis:** OCD, Moderate depression and Internet or TV addiction
- Treating by Anti-anxiolytics & Antidepressants with Behavior Therapy
- Started going to school for two days then he refused, again and watching Internet.





