

Addressing Problematic Technology Use in Children and Youth

LCDR Nathan R. Moon, Psy.D., A.B.P.P.
Psychologist
Marine Corp Base Camp Smedley D. Butler
Okinawa, Japan

1620-1720 ET April 04, 2024

Presenter

LCDR Nathan R. Moon, Psy.D., A.B.P.P.

Psychologist

Marine Corp Base Camp Smedley D. Butler
Okinawa, Japan





LCDR Nathan R. Moon, Psy.D., A.B.P.P.



- LCDR Nathan R. Moon joined the United States Army National Guard (USANG) in 2000 and transferred to the Active-Duty United States Navy in 2015. His 15 years in the USANG included training in diesel mechanics, human intelligence, and the mandarin language. He deployed with OEF-III from 2004-2005 and served as an information analyst for the 1/211th AVN in Bagram, Air Force.
- LCDR Moon also completed a bachelor's degree in psychology, and his master's and doctorate degrees in Clinical Psychology at Pepperdine University while serving in the US Army National Guard. Prior to transitioning to active-duty service, LCDR Moon worked as a clinical psychologist for a Veteran's Affairs (VA) Outpatient Health Clinic in Mobile, Alabama after completing a one-year post-doctoral residency at the Raymond G. Murphy VA Medical Center in Albuquerque, NM and a one-year internship at The VA Salt Lake Health Care System.





Disclosures

- LCDR Nathan Moon has no relevant financial or non-financial relationships to disclose relating to the content of this activity.
- The views expressed in this presentation are those of the author and do not necessarily reflect the official policy or position of the Department of Defense, nor the U.S. Government.
- This continuing education activity is managed and accredited by the Defense Health Agency, J-7, Continuing Education Program Office (DHA, J-7, CEPO). DHA, J-7, CEPO and all accrediting organizations do not support or endorse any product or service mentioned in this activity.
- DHA, J-7, CEPO staff, as well as activity planners and reviewers have no relevant financial or non-financial interest to disclose.
- Commercial support was not received for this activity.





Learning Objectives

At the conclusion of this activity, participants will be able to:

- Explore the research regarding the relationship between social media and mental health outcomes in youth including pros and cons of childhood social media access.
- 2. Describe the psychological impact of technology use on youth, including effects on attention, social development, and emotional well-being.
- 3. Identify strategies to promote healthy technology habits among youth, including the role of parental involvement.

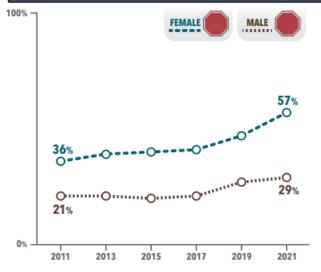




Children and Adolescent Mental Health Trends

 While some risky activities are decreasing, mental health needs continue to increase in the adolescent and young adult population.

Rate of Persistent Sadness or Hopelessness in the Past Year



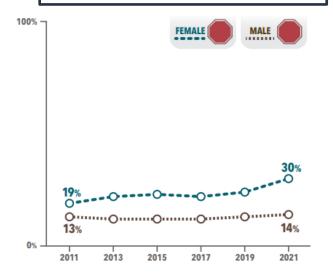
(CDC, 2021)



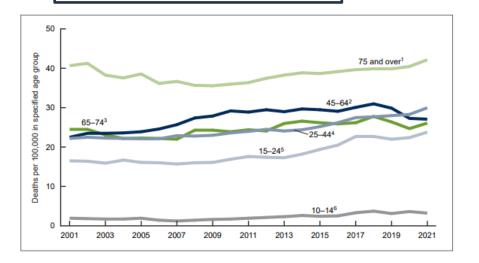


Adolescent Mental Health Trends - Continued-

Seriously Considered Attempting Suicide in the Past Year



Suicide Rates in the United States (US) by Age



(CDC, 2021) (NCHS Data Brief, 2023)





Surgeon General Report 2021

 Between 2011 and 2015, youth psychiatric visits to emergency departments for depression, anxiety, and behavioral challenges increased by 28%

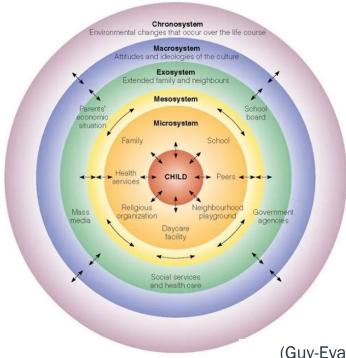
 Between 2007 and 2018, suicide rates among youth ages 10-24 in the US increased by 57%





Influential Factors on Mental Health

- Openness to Discuss
- Increased Use
- Academic Requirements
- Limited Mental Health Access
- Increase High Risk Behavior
- Community-Global Stressors









Teens and Young Adults with Technology



(Microsoft PowerPoint 2019 Stock Images)





Smart Phone Ownership

 Average age in the US to have a smart phone is 10.3

 100% Increase in smart phone ownership over the past eight years with minimal change in the last two years. Smartphone Ownership by age, 2015-2021



(Rideout et. al, 2022)

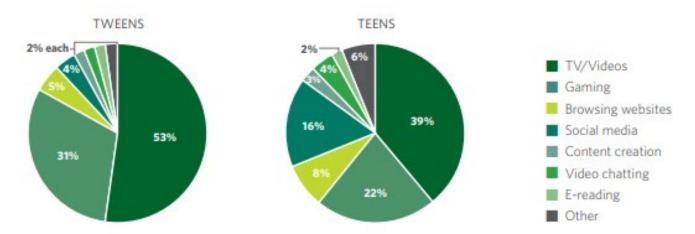




What are We/They Doing Online?

Music and Videos are the two most popular activities online, followed by gaming.

Content creation, video chatting, and reading make up between 6-9% of time online.



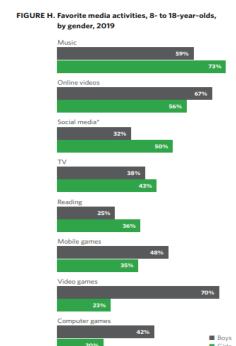
(Rideout and Robb, 2019)





Usage Difference by Race and Gender

- Boys favored gaming
- Girls favored listening to music and social media
- African American Adolescents
 - 51% reported enjoying it "A lot"
 - Average Use: 2:15 hours (hrs)/day
- Hispanic/Latino Adolescents
 - 43% reported enjoying it "A lot"
 - Average : 2:23 hrs./day)
- White American Adolescents
 - 37% reported enjoying it "A lot"
 - Average : 1:35 hrs./day



*Among 13- to 18-year-olds

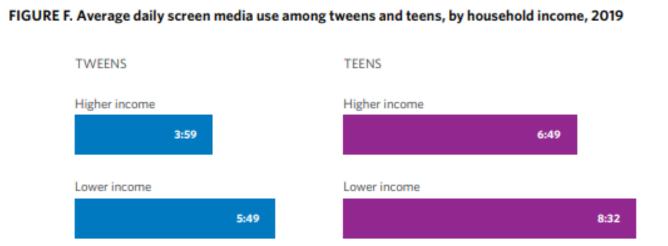






Screen Time and Social Economic Status

 Tweens and Teens in highincome homes use 103-110 minutes less screen media/day.



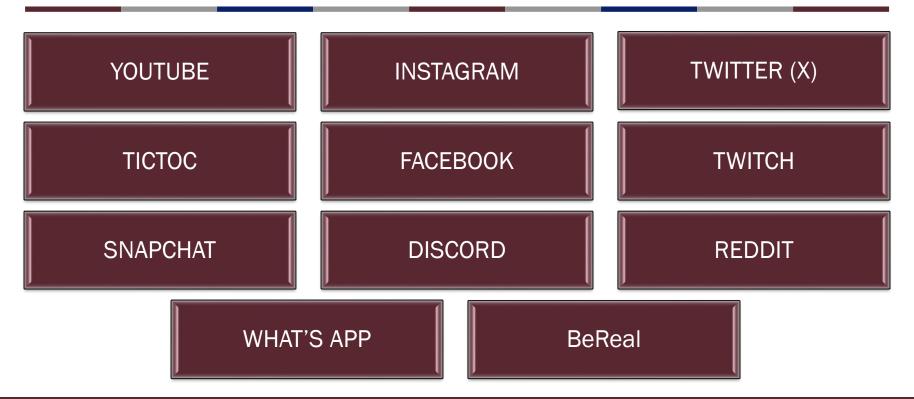
Note: "Lower income" is <\$35,000; "higher income" is \$100,000+ per year.

(Rideout and Robb, 2019)





What Apps are Pre-Teens and Teens Using?







Average App Use

8–12-Year-olds: 4:44 hrs./day

Teens: 7:22 hrs./day

Category	Use time, mean (SD)
Streaming	1 h 57 min (1 h 32 min)
YouTube	1 h 18 min (1 h 23 min)
Communication	48 min (1 h 17 min)
Gaming	41 min (41 min)
Social media	36 min (1 h 7 min)
SMS messages	6 min (11 min)
Reading	3 min (10 min)
Music ^b	2 min (5 min)
News	1 min (2 min)

(Rideout and Robb, 2019)





Youth vs. Adult

- More open-minded
- More social-oriented
- Less agreeable
- Less conscientious
- More impulsive
- Less capable of inhibiting behavior
- Media use increases and reaches a first peak in late adolescence

- More risk-taking
- More sensation seeking
- Derive larger parts of their wellbeing and life satisfaction from other peers
- General levels of life satisfaction and self-esteem drop and are often at their all-time lowest
- Less fixed sense of self
- Less mature prefrontal cortex





What are the Effects?

- US adolescents asked directly:
 - 31% say it is mostly positive
 - 45% estimate the effects to be neither positive nor negative
 - 24% believe effects are mostly negative



Microsoft PowerPoint 2019 Stock Images





Qualitative Themes

- Self-expression/validation: Encourage self-expression.
 Importance of others' opinions and cycles of modifying self-presentation. Need for validation and comparison of "likes" with peers. Self-esteem and anxiety were negatively impacted.
- Appearance comparison and body ideals





Overall Meta-Analyses findings

- Best et. al: Most studies reported mixed or no effect of online social technologies on wellbeing.
- McCrae et. al: Small positive relationship between social media use and depressive symptoms.
- Priftis et. al: Excessive passive screen time correlated with increased risk of obesity, cardiometabolic risk, sleep, physical activity, eyesight, headaches, musculoskeletal issues, mental health, unhealthy dietary habits eating disorders and problems in development and child-parent relationships.
- Lissak: Positive relationship between excessive screen time and less sleep, stress, mind wandering, ADHD-type behavior, negative thinking, less life satisfaction and increased health risks in adulthood.
- Wu et. al: Use of internet leads to increased connectedness, increase anxiety, and loneliness.





Risks

Physical Health

Mental Health

Development

Cognition/Attention





Development

- Excessive Short Term (ST) negative impact on development
 - Language
 - Vocabulary
 - Number knowledge
 - Classroom engagement
 - Locomotion
 - Risk of being victim of crime
 - Communication
 - Daily living skills
 - Academic performance
 - In-class attention
 - Physical strength
 - Cardiorespiratory endurance





Mental Health

- A 7-year study of found a small negative between-person relationship between social media use and life satisfaction in a large sample of adolescents.
- >3 hrs. per week on electronic media correlated negatively with happiness, life satisfaction and self-esteem
- 2 hrs. a day on social networking sites and personal electronic devices with high rates of suicidality and depressive symptoms among adolescent girls
- Increased time of in-person social interactions, correlated positively with well-being, among adolescents and high levels of face-to-face socializing protected against negative consequences
- Two abstinence studies found small and mixed effects on wellbeing.



(Microsoft PowerPoint 2019 Stock Images)





Depression

- Longitudinal Study of 500 US teens found positive correlation between anxiety, depression and social media between people.
- A 2022 study found
 - Mood symptoms had a dose-dependent correlation with screen time
 - Girls had 1.5 times higher probability of displaying depressive behaviors for each hour of screen time
- Female participants reported more negative mood after just ten minutes of browsing their social media account compared with those who browsed an appearance-neutral control website.
- Active use was negatively linked to anxiety and depressive symptoms.





Depression -Continued-

- Web-browsing and gaming had low relationship between screen time and depressive symptoms.
- Passive social media use positively linked to anxiety and depressive symptoms





Anxiety

- More than 4 hrs. daily of television (TV) was found associated to panic disorder symptoms
- More than 4 hrs. daily of computer or video games associated with anxiety and social phobia symptoms
- Pre-existing panic or anxiety symptoms did not predict computer, video or TV use.





Eating

Increase use of social media by males and females associated with high risk of eating disorder, even when factors of sleep and cybervictimization were accounted for.



(Freepik, 2024)





Social Media and FOMO

- In 2018 of 143 undergraduate students from University of Pennsylvania.
- Randomly assigned two a group with tenminute limits on three major social media platforms or the control group directed to use as usual for three weeks.
- Restricted group reported significant decreases in loneliness and depression I
- Both reported decreases in anxiety, and fear of missing out (FOMO) from baseline.



(Microsoft PowerPoint 2019 Stock Images)





Self-Harm

- Normalization of self-harm behavior, discussion of practical issues regarding suicidality, live depictions of self harm acts
- Social media can teach the actual behavior via modeling
- Contagion of behavior among groups
- Escalation of behavior via competition, desire to belong to a group and be understood





Attention and Working Memory

- Multitasking is associated with negative effects on cognitive control, academic performance and socioemotional functioning in youth
- High-frequency digital media use was positively associated with emergence of symptoms meeting criteria for attention deficits hyperactivity disorder (ADHD) over a 2-year follow-up period, even after adjusting for known confounders



(Microsoft PowerPoint 2019 Stock Images)





Social Media and Sleep

- Presence of screen-based media device in bedroom shown to disrupt sleep.
- Two longitudinal studies, mounting to over 3300 participants across two continents found that poor sleep mediated the relationship between nighttime cell phone use and subsequent depressed mood, externalizing behavior and decline in self-esteem and coping.





Cyberbullying

- Intentional use of information and communication technologies to support deliberate, repeated, and hostile behaviors against a victim who cannot easily defend him or herself.
- 34% of kids in the US have experienced cyberbullying at least once
- 38% of cyberbullying victims are willing to admit it to their parents
- 42% of US teens experienced offensive name-calling
- High school girls with darker skin color are disproportionately targeted





Cyberbullying -Continued-

Most common reported effects from cyberbullying:

- Annoyance
- Suspicion
- Fear of Safety
- Frustration/Anger



Victims are 1.9 times more likely to die by suicide

Cyberbullying associated with increased: Anxiety, Depression, Suicidal Ideation, Suicide Attempts, and Sleep Problems





Cyber Bullying and Suicide

- Cyberbullying in youth under 25 has been linked with:
 - Suicidal ideation
 - Suicidal behavior
 - Suicide attempts
 - Self-harm
- A school-aged-children-only sub-analysis established equivalent results in young adolescents.
- Victims have a 2.5 times higher chance of presenting all four.
- Perpetrators have a higher chance of presenting Suicidal Ideations and Behaviors



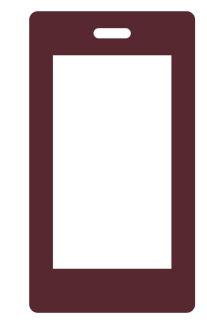






Cyber Additions

- Youth classified with Internet Addiction had significantly increased risk of newly emerged self-harm or suicidal behavior within one year
- Adolescents estimated to have a gaming disorder up from 1.5% to 9.9% estimated in 2019 to 7.8 percent of girls and 19 percent of boys between 7-25 yrs. old.
- Some research reported rates as high as 25%
- Internet Addiction estimates range from 1.5% to 8.2%



(Microsoft PowerPoint 2019 Stock Images)





Benefits of Social Media Use

Most benefits fall into the following categories:

Socialization and Communication

Enhanced Learning Opportunities

Accessing Health Information









Tools for Health Providers

Assessment

Diagnosis

Intervention



(Freepik, 2024)





Internet Addiction Measures

- Internet Addiction Test (IAT)
- Diagnostic Classification Test for Internet Addiction (DCT-IA)
- Addiction Diagnostic Questionnaire (DCT)
- Compulsive Internet Use Scale (CIUS)
- *Sample of several measures with varying, but generally low investigative study





DSM-V (2013) Internet Gaming Disorder

- 1. Preoccupation with Internet games.
- 2. Withdrawal symptoms when Internet gaming is taken away
- 3. Tolerance-need to spend increased amounts of time
- 4. Unsuccessful attempts to control participation in Internet games.
- 5. Low of interests in previous hobbies and entertainment.
- 6. Continued excessive use despite knowledge of psychosocial problems.
- 7. Deceived family members, therapists, or others about use.
- 8. Use Internet games to escape or relieve a negative mood.
- 9. Jeopardized or lost significant relationship, job, or educational or career opportunity due to use.





International Classification of Diseases, 11th Revision (2019) Internet gaming disorder

- Criteria
 - Impaired control over gaming
 - Increasing priority given to gaming over other activities to the extent that gaming takes
 precedence over other interests and daily activities,
 - Continuation or escalation of gaming despite the occurrence of negative consequences.
 - Pattern of behavior sufficiently severe to result in significant impairment in personal, family, social, educational, occupational or other important areas of functioning and
 - Evident for at least 12 months
- Associated Findings
 - Enhanced reactivity to gaming cues
 - Aberrant reward-based learning
 - Changes in brain regions associated with addiction, rewards, and emotional processing
 - ✓ Increased activation in nucleus accumbens, amygdala, anterior cingulate, dorsolateral prefrontal cortex, and insula.
 - Decreased gray matter volumes in the cerebellum, orbitofrontal cortex, anterior cingulate cortex, and supplementary motor area





Treatment Recommendations

- Cognitive-Behavioral Therapy for Internet Addiction (CBT-IA)
 - Patients trained to recognize and respond to triggers and relapse antecedents
 - Alter thoughts and behaviors to promote abstinence
- Motivational Interviewing and Motivational Enhancement
 - Resolve ambivalence about internet use
 - Increase likelihood of change by fostering increased motivation
 - Focus on personal negative sequelae
- Harm Reduction
- Multidimensional Family Therapy





CBT-IA (1 of 4)

- Phase I: Behavioral Modification
 - Assess the Behavior: ABC's of Screen Use

CBT-IA: Treating Internet Addiction 307

Date and Time	Event	Online Activity	Duration	Outcome

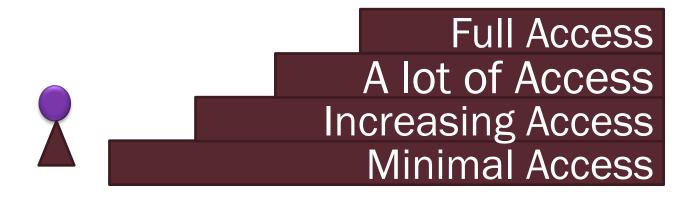
FIGURE 1. Daily Internet Log.





CBT-IA (2 of 4)

- Phase I: Behavioral Modification
 - Antecedent Control: Media restructuring, reorganization, change routines, restrict access







CBT-IA (3 of 4)

- Phase II: Cognitive Restructuring
 - Address maladaptive cognitions
 - ✓ I will lose out
 - ✓ People won't want to be my friend
 - ✓ It doesn't matter if I can't post it
 - ✓ What happens online can't really hurt me



(Microsoft PowerPoint 2019 Stock Images)





CBT-IA (4 of 4)

Phase III: Harm Reduction Therapy

Address co-existing factors associated with problematic use.

 Develop plan to respond early to warning signs of problematic use and recover from relapse/lapse.





For Parents





(Microsoft PowerPoint 2019 Stock Images)





When Should My Child Get a Phone?

- Starting Young
 - More likely to report doing things in secret
 - More fixated on the phone
 - More likely to be part of a supportive social online community
 - More likely to experience harassment and drama
- Starting late (around 14)
 - More likely to feel left out
 - Less likely to jump in and find support
 - Slower to grow some online behaviors



(Microsoft PowerPoint 2019 Stock Images)





Media Centric Parents (~11 hrs/day)

- More likely to:
 - Use media to connect with their children
 - Use media to keep their children busy
 - Use media to settle children before bedtime
 - Be in a lower socioeconomic strata
 - Have lower educational attainment
 - Have depressed parents
 - Be in a single-parent household
 - Have fewer developmental resources





Parental Mediation

- Restrictive and Active mediation can reduce digital learning of:
 - Aggressive behavior
 - Substance use
 - Sexual behavior
- Co-viewing (without discussion) enhances media effects
- Parents talk to young children less when the television is on



(Microsoft PowerPoint 2019 Stock Images)





Aim for Balance

- Individual and Family Differences
- Pay Attention to Types of Media Being Used
- Set Limits
- Watch for warning signs of unhealthy use:
 - Complaining of being bored or unhappy when not using
 - Tantrum or harsh resistance with limits
 - Interference on sleep, school, faceto-face communication

- Talk about It again and again
- Kid-proof your devices:
 - Use passwords
 - Review privacy settings
 - Review Content Ratings





Getting Control Back from Producers

- Turn off Notifications
- Delete Toxic Apps (Use Safer Alternatives)
 - √ Facebook -> Signal
 - √ TikTok -> MarcoPolo
- Download Helpful Tools
 - ✓ Mindfulness Apps
 - ✓ Organization Apps
- Eliminate Outrage from your Diet

- Follow Voices you Disagree With
- Practice Compassion
- Set Boundaries
- Disconnect Fully One Day each Week
- Be Intentional and Focus on the Positive
- Support Local Journalism





Model Healthy Use

- Give Example of Healthy Balance
- Set personal boundaries
- Especially limit use when:
 - Pick up and Drop-off
 - Return Home
 - Meals
 - Family Outings/Activities



(Microsoft PowerPoint 2019 Stock Images)





Tools/Resources

- Logoffmovement.org
- Your Hour App
- Lock my phone App
- Humanetech.com
- The Social Dilemma



(Microsoft PowerPoint 2019 Stock Images)





Key Takeaways

- Many researchers argue that digital technologies can expose children to bullying, contribute to sleep problems, negatively comparisons, depressive symptoms, anxiety, and self-harm.
- Meanwhile, others have cast doubt on the idea that technology or social media use is a major factor in youth wellbeing.
- Mediating factors include the type of media, the way the media is being used, and parental involvement.
- There are things clinicians can for children and parents to support healthy use and address problematic use.
- There are great resources available to support parents and children.





References (1 of 10)

Abi-Jaoude, E., Naylor, K. T. & Pignatiello, A. (2020). Smartphones, social media use and youth mental health. Canadian Medical Association Journal, 192(6), 136-141. https://doi.org/10.1503/cmaj.190434

Abrams, Z. (2022) Why Young Brains are Especially Vulnerable to Social Media. https://www.apa.org/news/apa/2022/social-media-children-teens

Academy, N. (2021). The Latest Research on Teenage Video Game Addiction. Available at: https://www.newportacademy.com/resources/treatment/teenage-video-game-addiction/

Anderson, M., Faverio, M., & Gottfried, J. (2023, December 11). Teens, social media and technology report. Pew Research Center. https://www.pewresearch.org/internet/2023/12/11/teens-social-media-and-technology-2023/

Barthorpe, A. Winstoneb, L. Marsc, B., & Moran. P. (2020). *Is social media screen time really associated with poor adolescent mental health?* A time use diary study. Journal of Affective Disorders. 274(2020) 864-870. https://doi.org/10.1016/j.jad.2020.05.106





References (2 of 10)

- Best, P., Manktelow, R., & Taylor, B. (2014). Online communication, social media and adolescent wellbeing: A systematic narrative review. Children and Youth Services Review, 41, 27-36. https://doi.org/10.1016/j.childyouth.2014.03.001
- Boak A, Hamilton HA, Adlaf EM, et al. The mental health and well-being of Ontario students, 1991–2017: detailed findings from the Ontario Student Drug Use and Health Survey (OSDUHS). CAMH Research Document Series No. 47. Toronto:

 Centre for Addiction and Mental Health; 2018.
- Charmaraman, L. (2021). Speaking of Psychology: How social media affects teens' mental health and well-being, Episode 166.Retrieved from www.apa.org/news/podcasts/speaking-of-psychology/social-media-teens
- Cataldo, I., Lepri, B., Neoh, M. J. Y., Esposito, G. (2021). Social Media Usage and Development of Psychiatric Disorders in Childhood and Adolescence: A Review. Front. Psychiatry 11:508595. https://doi.org/10.3389/fpsyt.2020.508595





References (3 of 10)

Černja, I., Vejmelka, L. & Rajter, M. (2019). *Internet addiction test: Croatian preliminary study. BMC Psychiatry* **19,** 388. https://doi.org/10.1186/s12888-019-2366-2

Centers for Disease Control and Prevention. (2021). Youth risk behavior survey: Data summary & trends report 2011-2021.

https://www.cdc.gov/healthyyouth/data/yrbs/pdf/YRBSDataSummaryTrendsReport 2019-508.pdf

Coyne, S.M., Rogers, A.A., Zurcher, J.D., Stockdale, L., & Booth, M. (2019). Does time spent using social media impact mental health?: An eight year longitudinal study. *Computers in Human Behavior*, 104, 106160. https://doi.org/10.1016/j.chb.2019.106160

Coyne, S.M., Radesky, J., Collier, K.M., Gentile, D.A., Linder, J.R., Nathanson, A.I., Rasmussen, E.E., Reich, S.M., & Rogers, J. (2017). *Parenting and Digital Media*. Pediatrics, 140(Suppl 2), S112–S116. https://doi.org/10.1542/peds.2016-1758N

Dienlin, T., & Johannes, N. (2020). The impact of digital technology use on adolescent well-being. Dialogues in Clinical Neuroscience. 22(2) 135-142 https://doi.org/10.31887/DCNS.2020.22.2/tdienlin





References (4 of 10)

Gliske, K. Ballard, J., Berry, K., Killian, M., Droll, E., & Fenkel, C. (2023). Reduction of mental health-related emergency department admissions for youth and young adults following a remote intensive ouptaptient program: Quality improvement analysis. JMIR Form Res. Nov 9 (7). https://doi.org/10.2196/47895

Greenfield, D. N. (2018). *Treatment Considerations in Internet and Video Game Addiction: A Qualitative Discussion*. Child Adolescent Psychiatric Clinics of North America 27 (2018) 327–344 https://doi.org/10.1016/j.chc.2017.11.007

Guy-Evans, O. (2020). Bronfenbrenner's Ecological Systems Theory. https://www.simplypsychology.org/Bronfenbrenner.html

Hunt, M. G., Marx, R., Lipson, C. & Young, J. (2018). No More FOMO: Limiting Social Media Decreases Loneliness and Depression.

Journal of Social and Clinical Psychology, 37(10) 751-768. https://doi.org/10.1521/jscp.2018.37.10.751





References (5 of 10)

- Keresteš, G. & Štulhofer, A. (2020). Adolescents' online social network use and life satisfaction: a latent growth curve modeling approach.

 Computers in Human Behavior, 104:106187. https://doi.org/10.1016/j.chb.2019. 106187
- Kerr, S. & Kingsbury, M. (2023). Online digital media use and adolescent mental health. Health reports, Statistics Canada Catelogue 34 (2), 17-28, https://doi.org/10.25318/82-003-x202300200002-eng
- Liebherr, M.; Kohler, M., Brailovskaia, J.; Brand, M.; Antons, S. (2022). Screen Time and Attention Subdomains in Children Aged 6 to 10 Years. Children 9, 1393. DOI: 10.3390/children9091393
- Lin, L.Y.; Cherng, R.J.; Chen, Y.J.; Yang, H.M. (2015). Effects of television exposure on developmental skills among young children. Infant Behav. Dev. 38, 20–26.
- Lissak, G. (2018). Adverse physiological and psychological effects of screen time on children and adolescents: Literature review and case study. Environmental Research, 164, 149-157. https://doi.org/10.1016/j.envres.2018.01.015





References (6 of 10)

- Madigan, S.; Eirich, R.; Pador, P.; McArthur, B.A.; Neville, R.D. (2022). Assessment of Changes in Child and Adolescent Screen Time During the COVID-19 Pandemic: A Systematic Review and Meta-analysis. JAMA Pediatr., 176, 1188–1198.
- Madigan, S.; McArthur, B.A.; Anhorn, C.; Eirich, R.; Christakis, D.A. (2020). Associations Between Screen Use and Child Language Skills: A Systematic Review and Meta-analysis. JAMA Pediatr.174, 665–675.
- McCrae, N. Gettings, S., & Purssell, E. (2017). Social Media and Depressive Symptoms in Childhood and Adolescence: A Systematic Review. Adolescent Research Review, 2, 3150-330.
- Marchant A, Hawton K, Stewart A, Montgomery P, Singaravelu V, Lloyd K, et al. (2017). A systematic review of the relationship between internet use, self-harm and suicidal behaviour in young people: the good, the bad and the unknown. PLoS ONE. 12:e0181722. https://doi.org/10.1371/journal.pone.0181722





References (7 of 10)

- Moon, J.H.; Cho, S.Y.; Lim, S.M.; Roh, J.H.; Koh, M.S.; Kim, Y.J.; Nam, E. (2019). Smart device usage in early childhood is differentially associated with fine motor and language development. Acta Paediatr. 108, 903–910.
- Murthy, V. H., (2021). Protecting Youth Mental Health: The U.S. Surgeon General's Advisory.
- Pagani, L.S.; Fitzpatrick, C.; Barnett, T.A. (2013). Early childhood television viewing and kindergarten entry readiness. Pediatr. Res. 74, 350–355.
- Pan P-Y, Yeh C-B. (2018). Internet addiction among adolescents may predict self-harm /suicidal behavior: a prospective study. J Pediatr 2018;197:262-7.
- Priftis, N.; Panagiotakos, D. (2023). Screen Time and Its Health Consequences in Children and Adolescents.

 Children 10, 1665., https://doi.org/10.3390/children10101665





References (8 of 10)

- Ra CK, Cho J, Stone MD, et al. (2018) Association of digital media use with subsequent symptoms of attention-deficit/hyperactivity disorder among adolescents. JAMA 320:255-63.
- Rideout, V., & Robb, M. B. (2019). *The Common Sense census: Media use by tweens and teens,* 2019. San Francisco, CA: Common Sense Media.
- Rideout, V., Peebles, A., Mann, S., & Robb, M. B. (2022). *The Common Sense census: Media use by tweens and teens, 2022.* San Francisco, CA: Common Sense Media.
- Rosendo-Rios, V., Trott, T. & Shukla, P. (2022). Systematic literature review online gaming addiction among children and young adults: A framework and research agenda. Addictive Behaviors, 129, 1-11. DOI: 10.1016/j.addbeh.2022.107238
- Seltzer, L. et al. Instant messages vs. speech: Hormones and why we still need to hear each other. Evolution and Human Behavior. doi:10.1016/j.evolhumbehav.2011.05.004





References (9 of 10)

- Sugiyama, M.; Tsuchiya, K.J.; Okubo, Y.; Rahman, M.S.; Uchiyama, S.; Harada, T.; Iwabuchi, T.; Okumura, A.; Nakayasu, C.; Amma, Y.; et al. (2023). Outdoor Play as a Mitigating Factor in the Association Between Screen Time for Young Children and Neurodevelopmental Outcomes. JAMA Pediatr. 177, 303–310.
- Twenge JM, Martin GN, Campbell WK. (2018). Decreases in psychological well-being among American adolescents after 2012 and links to screen time during the rise of smartphone technology. Emotion 18:765-80
- Twenge, J. M., Joiner, T. E., Rogers, M. L., & Martin, G. N. (2017). Increases in depressive symptoms, suicide-related outcomes, and suicide rates among U.S. adolescents after 2010 and links to increased new media screen time. Clinical Psychological Science, 6, 3–17.
- Wölfling, K. et al. (2019). Efficacy of Short-term Treatment of Internet and Computer Game Addiction A Randomized Clinical Trial. JAMA Psychiatry. 76(10):1018-1025. https://doi.org/10.1001/jamapsychiatry.2019.1676





References (10 of 10)

World Health Organization. (2018). *International classification of diseases for mortality and morbidity statistics* (11th Revision). https://icd.who.int/browse11/l-m/en

Zink, J.; Belcher, B.R.; Kechter, A.; Stone, M.D.; Leventhal, A.M. Reciprocal associations between screen time and emotional disorder symptoms during adolescence. Prev. Med. Rep. **2019**, 13, 281–288.





Questions?





How to Obtain CE/CME Credits

2024 APR CCSS: Evidence-Based and Promising Practices in Pediatric Care for Military Children and Youth

Complete the course evaluation and posttest for the session(s) you attended by **11:59 PM ET on Thursday**, **April 18**, **2024**, to receive CE/CME credit or a certificate of attendance.

- 1. Log in to your account.
- 2. Go to the main event page and select the session you want to complete under the TAKE COURSE tab.
- 3. On the session page, click TAKE COURSE under the TAKE COURSE tab.
- 4. Progress through the required course items by clicking START under the Course Progress menu tabs located on the left of the screen or by clicking Start Course at the bottom of the page.
- 5. Complete the evaluation and pass the posttest with a score of 80% or above to select your credits and download your certificate.

All completed courses and certificates are available in <u>your account</u>. Refer to your <u>Pending Activities</u> for sessions you have yet to complete. You must complete the required course items by **Thursday**, **April 18**, to receive credit.

Questions? Email DHA J7, CEPO at dha.ncr.j7.mbx.cepo-cms-support@health.mil.



