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Venu AS

Ph.D. Scholar, Srinivas
Institute of Nursing Sciences,
Srinivas University, Mukka,
Mangalore, Karnataka, India

Dr. Florine Clara Fernandes

Professor, Srinivas Institute of
Nursing Sciences, Srinivas
University, Mukka,
Mangalore, Karnataka, India

Internet addiction: A case study

Venu AS and Dr. Florine Clara Fernandes

Abstract

Children and adolescents are especially vulnerable to developing dependence on the Internet, more than most other segments of the society. Internet addiction has been called Internet reliance and Internet compulsivity. It is a compulsive behavior that completely dominates the addict's life. Internet addicts make the Internet a more significant than family, friends, and work. The Internet becomes the establishing principle of addicts' lives. Prevention is always better than cure. One way to reduce incidence of internet addiction is by increasing children and adolescent's adherence to healthy lifestyle by educating, screening, detecting and modification of risk factors. Lack of knowledge and lack of concern for health may result in poor level of health and many health problems.

Keywords: Internet addiction, children and adolescents, online games, online classes

Introduction

The Internet has become one of the most essential instruments of man for information, job opportunities, and education to entertainment, including social media sites and networking and is gradually becoming a structural part of our day to day life. With the advent of new age smart phones, tablets, and computers, the Internet is readily accessible to the general population or "at the fingertips" ^[1].

The Internet is no longer merely an infrastructure; it has become an unlimited space for information exchange, social networking, and the development of cyber behaviours.² It is a network of networks that consists of private, public, academic, business and government networks of local to global scope that is linked by a broad array of electronic and optical networking technologies. By the advent of the internet, our earth has reduced and has attained the form of a global village ^[3].

Internet addiction has been called Internet reliance and Internet compulsivity. It is a compulsive behavior that completely dominates the addict's life. Internet addicts make the Internet a more significant than family, friends, and work. The Internet becomes the establishing principle of addicts' lives ^[4].

Case study 1

Master Kishan (name changed), a 12-year-old male child studying in the sixth grade, was brought to the psychiatric outpatient department with complaints of self-withdrawal, depressed mood, restlessness, irritation, insomnia, and difficulty concentrating on activities for the past one month. When parents were questioned about his current illness history, it was revealed that he had received a tablet with an internet connection in order to attend his online classes during the Covid 19 pandemic. Initially, he began using the tab for the purpose of attending online classes, but he soon began browsing the internet for games, watching online movies and videos, and started engaging in social media activities. He would use social media, play online games, or surf the internet for answers to subject-related questions. His internet usage increased gradually, eventually reaching 4-6 hours per day, as he used his free time to participate in online activities. According to his parents, he would be unable to control the amount of time spent online and would instead attempt to prolong it by claiming that it was only a matter of a few more minutes. Even after beginning physical education classes at school, he would think about how he could spend his free time online and remained preoccupied with this thought. As a result, he was unable to devote sufficient attention to his studies.

He began to stay awake until the late night for surfing the internet. When his parents questioned him for wasting time, he would become irritated and angry with them, but he would not give up his internet use for the time being. He performed poorly in the examination as a result, as compared to his good performance in the previous examination.

Corresponding Author:

Venu AS

Ph.D. Scholar, Srinivas
Institute of Nursing Sciences,
Srinivas University, Mukka,
Mangalore, Karnataka, India

This pattern persisted for a period of six months. Following that, the patient began to gradually withdraw himself from the surrounding. He gradually stopped interacting with any of the family members. He stopped showing interest in playing with his siblings and other children's. He would not ask food by himself and eat only half of the previous amount when persuaded. His parents also complained that, he is not sleeping for normal duration and awake for late night. On physical examination he found weak and malnourished. His haemoglobin level was low and mildly anaemic.

Following the assessment, the diagnosis of problematic internet use and childhood depression was made. A prescription of anti-depressive drugs, nutritional supplements was written for the patient to treat his depression and malnutrition. Counseling was provided to both the patient and the parents, who were instructed to pay greater attention to and spend more time with their children.

Case study 2

A Mr. Manoj (Name changed) male adolescent with age of 17 years was admitted to male psychiatric ward with complaints of mood swings, depressive mood, irritability, loss of touch with surroundings since many days. He was not had previous history of psychiatric illnesses and present history of illness revealed that, he started playing video games since two years when he got his mobile phone with internet facility. He started playing simple games initially and gradually it went to playing online games. He constantly increased time for playing online games and started playing online games with group of friends, eventually lost control over use. He gradually lost interest in other activities, his studies, social activities, bunking his classes and most of the time he would not leave his room and found online playing video games.

The Internet gave him relief by providing an escape from his life problems. Irritated when his parents took away his mobile phone, he become restless, irritable and sometimes verbally and physical abused them.

Brought to hospital with force, he showed depressed mood, irritable and found himself searching for something. In the hospital diagnosed him as depressive disorder related to overuse of internet. Patient was prescribed with mild antipsychotics, antidepressants and anti-anxiety drugs. His fluid and nutrition was taken care in hospital stay. Individual counseling was done during hospital stay and engaged him in physical activities. Mr. Manoj was discharged after 2 weeks of treatment, showing mood stabilization and partial sense about his problem. Outpatient treatment was indicated.

Discussion

When someone becomes dependent on the use of the Internet, or other online devices, as a maladaptive way of coping with life's stresses, they are said to be suffering from internet addiction, which is a behavioural addiction. Internet addiction is becoming more widely recognized and acknowledged, particularly in countries where it affects large numbers of people, such as South Korea, where it has been designated as a national health problem by the country's health ministry [5]. Much of the current research on the subject of Internet addiction has been conducted in Asia, which is where the majority of the participants are from.

Signs and symptoms

Internet addiction is not officially recognised as an addictive disorder, so getting a proper diagnosis may be difficult. However, several leading experts in the field of behavioural addiction have made significant contributions to the current understanding of the symptoms of Internet addiction, which is summarised below. All forms of Internet addiction have the following four characteristics in common [6].

Excessive Use of the Internet

Despite widespread agreement that excessive Internet use is a significant symptom, no one appears to be able to define precisely how much computer time constitutes excessive use of the Internet. While guidelines recommend no more than two hours of screen time per day for children and adolescents under the age of 18, there are no official recommendations for adults [7]. Furthermore, two hours may be unrealistic for people who use computers for work or school purposes. Some authors include the disclaimer "for non-essential use," but for someone who is addicted to the Internet, any computer use can feel like it is necessary.

Withdrawal

Although withdrawal symptoms were previously thought to be the basis of physical dependence on alcohol or drugs, they are now being recognized as the basis of behavioural addictions, such as Internet addiction.

The most common Internet withdrawal symptoms include feelings of rage, tension, and depression when there is no access to the Internet. When a person is unable to use a computer, they may experience feelings of boredom, joylessness, moodiness, nervousness, and irritability, among other things.

Tolerance

Tolerance is another hallmark of alcohol and drug addiction and seems to be applicable to Internet addiction as well [7]. This can be understood as wanting and from the user's point of view, needing more and more computer-related stimulation. Person might want ever-increasing amounts of time on the computer, so it gradually takes over everything person do. The quest for more is likely a predominant theme on person's thought processes and planning.

Negative Repercussions

If Internet addiction caused no harm, there would be no problem. But when excessive computer use becomes addictive, something starts to suffer.

Internet Addiction in children

Internet addiction is particularly concerning for children and adolescents. Children lack the knowledge and awareness to properly manage their own computer use and have no idea about the potential harms that the Internet can open them up to. The majority of children have access to a computer, and it has become commonplace for children and adolescents to carry mobile phones.

Prevention and management of internet addiction among children and adolescents

Children and adolescents need education about the harm of Internet addiction. These harms include reduced physical exercise and more irregular eating and sleep habits. They

also develop symptoms of inferiority, anxiety, depression, and negative moods. Impaired daily functioning with Internet addiction commonly includes ignoring school study, work, family, social interactions, and life planning. Children and adolescents need to arrange their daily life reasonably in home, work, and rest regularly, eat properly, ensure a certain amount of exercise, and strictly limit time for recreational use of the Internet and avoid excessive use. They can also learn proactively about emotional regulation strategies such as relaxation training, mindfulness meditation, and cognitive therapies. It also helps to set short-term goals and focus on school studies. If children and adolescents find it difficult to control themselves from problematic or compulsive use of the Internet, they need to seek help from parents and experts. Targeted early prevention of Internet addiction is also needed for high-risk groups with preexisting attention deficit and hyperactivity disorder (ADHD), depression, anxiety, and substance use disorders.

Conclusion

Children and adolescents are especially vulnerable to developing dependence on the Internet, more than most other segments of the society. This can be attributed to several factors including the following: Availability of time; ease of use; unlimited access to the Internet; the psychological and developmental characteristics of young adulthood; limited or no parental supervision; an expectation of internet/computer use implicitly if not explicitly, as some courses are Internet-dependent, from assignments and projects to communication with peers and mentors; the Internet offering a route of escape from exam stress, all of which make Internet overuse a significant cause of concern for parents and faculty.

Prevention is always better than cure. One way to reduce incidence of internet addiction is by increasing children and adolescent's adherence to healthy lifestyle by educating, screening, detecting and modification of risk factors. Lack of knowledge and lack of concern for health may result in poor level of health and many health problems.

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