Theoretical article

CASE REPORT: PSYCHOLOGICAL APPROACH TO OVERCOME SCREEN ADDICTION IN ADOLESCENTS

Chief Assis. Tsvetelina Hadzhieva, PhD
Department of Psychology, SWU "Neofit Rilski", Blagoevgrad, Bulgaria.
e-mail: cveti_hadjieva@swu.bg

Abstract:
The article presents a case from psychological practice, involving an adolescent of 15 years old who was familiar with the excessive use of digital devices, whose identity remains confidential. The complex psychological approach and methods for dealing with a specific case are described.
Keywords: screen addiction, digital devices, adolescence.

Screen addiction is a condition in which a person experiences a persistent and compulsive need to spend excessive amounts of time in front of various digital devices. This addiction is characterized by an inability to control the time or frequency of use, despite negative consequences on health, social relationships, and cognitive functions (Young, 1998).

Research suggests that screen addiction activates responses in the brain's reward systems similar to those in other types of addictions, such as drug or alcohol use. At the center of this response is the dopamine pathway, which is stimulated when receiving new information, social interactions, or rewards in the virtual environment. Constant stimulation of this system can lead to a decrease in sensitivity and the need for more and more time or more intense content to achieve the same effect (Kuss & Griffiths, 2017).

The inability to disconnect from digital devices can lead to isolation, social isolation, sleep problems, and concentration disorders. Studies show that people with higher levels of screen addiction often exhibit symptoms of anxiety, depression, and low self-esteem, due to social isolation or the constant number of virtual interactions versus real-life social contacts (Keles, McCrae & Grealish, 2020).

Many current treatment models for screen addiction are based on cognitive behavioral therapy, which aims to identify and change automatic thoughts that lead to misuse of digital devices. In addition, establishing clear boundaries, developing real-world social skills, and active alternatives in physical activity and hobbies can help reduce addiction (Young, S., Yue, D., & Ying, L., 007).

CASE STUDY:

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A 15-year-old boy was brought for psychological counseling by his parents with a request that he spend too much time using screen devices, and this hurts his overall functioning. The time he uses technical means is more than 8 hours, during which time his sense of hunger and other physiological needs become dulled, and he loses a real sense of time. The parents report that V. does not communicate physically enough with his peers, and mostly online, mainly in games. Since using screen devices, V. has experienced a sharp academic decline in school, has problems sleeping, often feels irritated and explodes, and is at times anxious or apathetic. He self-isolates, avoids contact and conversations with his parents, and does not want to share anything. Despite their attempts to impose measures to limit V.'s uncontrolled use of screen devices, they do not achieve a serious result, as he ignores the rules and restrictions in his uncontrollable desire to play online with his online friends.

Psychological approach and working methods:

The first step in establishing a trusting relationship with V. turned out to be the most difficult, since in the first three sessions he behaved extremely reserved and suspicious, until he himself felt the safe and calm atmosphere, as well as the confidentiality of communication in the psychological office.

Building a trusting relationship with a client is relative like time and is individual, especially with adolescents. But after V. felt understood, and not "constantly criticized", as he put it, he began to talk more openly about his feelings and experiences.

The problem with uncontrolled use of screens began more than a year ago. Until that moment, V. had been an extremely obedient and meek child, with the highest success rate in the class. He had favorite activities such as riding a bike with friends, a strong interest in geography, and organizing frequent family excursions. V. showed pronounced extroversion and, accordingly, had a wide social circle. The abrupt transformation in his behavior immediately suggests that the possible reason for this is related to psychological stress or experienced trauma.

By applying test research methods, it was found that V. demonstrates high levels of anxiety and at the same time a low level of self-esteem.

Psychoeducational work with V. was aimed at explaining and clarifying the psycho-emotional and physical harm that electronic devices cause when used excessively. Discussions in this regard were aimed not only at the negative impact of screens, but above all at realizing the need for change.

Together with V., several strategies were developed to deal with the current problem. The first of these was to limit the time spent in front of screen devices, with V. once again attempting to return to his hobbies. He was offered to keep a diary in which to describe his thoughts and emotional experiences. Trainings were included for recognizing and naming different emotions and, accordingly, methods for working through them. V.. did not express open verbal or non-verbal aggression, and yet his body language created a feeling of inner anger in him, which he verbalized during one of the trainings related to recognizing emotional states. The mental tension, which turned out to be the main reason for his kind of escape into

the "network", was caused by the excessive demands on the part of his parents, which, according to him, were never enough, no matter how successful he was. V. openly shared: "I'm no good at anything! Maybe that's why my parents are always unhappy with me...." Here, it immediately became clear that V. has formed negative beliefs about himself, which are the reason for his low self-esteem and for his "escape" to the online environment, where he only feels better. Therefore, gradual work began to transform the automatic negative thoughts and beliefs into their positive equivalents. V. was offered techniques for deconstructing the negative techniques, which, together with the provision of a supportive and understanding environment, led to increased self-esteem, reduced anxiety, more effective self-reflection, and more successful attempts at self-assertion and setting boundaries. In parallel with the psychological work with V., the parents were also offered one, in line with the excessive pressure they were putting on him. The goal in this case was to develop self-regulation skills in the parents and to restore balance in the child, enabling him to gain confidence in his own needs and desires, as well as learn to build autonomy despite others' expectations.

After a series of psychological consultations - individual and family, V. He overcame his mental stress, his communication with his parents improved, and he gradually entered social reality. He returned to his favorite activities and improved his academic performance at school.

Conclusion:

Screen addiction is a modern phenomenon with significant short-term and long-term consequences on mental health. What distinguishes this addiction from others is its integrated nature and its impact on neuronal reward systems. Therefore, prevention and therapy require a holistic approach, combining cognitive-behavioral strategies, strengthening social connections, and managing habits (Angelova, N., 2024).

Screen addiction is often expressed in isolation, reducing real interpersonal contacts and closing in the digital world as a form of escape from real problems or social fears. This, in turn, leads to the development of anxiety, depression, low self-esteem, and disorders in cognitive functions such as attention and memory, which affect the overall quality of life of the individual. For these reasons, understanding and timely responding to screen addiction should be a priority for the health system, pedagogical institutions, and the family.

Currently, the most successful intervention models include cognitive behavioral therapy, as well as strategic changes in the environment, such as regulating screen time, developing external supportive habits, and diversifying social and sports activities.

From a public health perspective, it is necessary to develop prevention programs, especially among adolescents, with an emphasis on the development of emotional intelligence and self-regulation skills. To reduce the dangers associated with this addiction, the active role of parents, teachers, and policies in creating a more balanced and supportive digital space is also important. The goal is not only to reduce symptoms, but also to restore harmonious development and mental health.

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