

Internet addiction among adolescents — The enfaced reality

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This paper deals with the research findings on Internet pornography addictive behaviours among adolescent Internet users. The base of the study is the Ph.D Research titled — Internet pornography — Access and Effects on Children — A study among English medium school children in Delhi.

Introduction

Originally psychiatrists used the term ‘addiction’ with reference to the use of alcohol or other substances. Addiction refers to the presence of tolerance and withdrawal^{1*} that hinder affective or psychological functioning.^{1**} Internet addiction or Internet addiction disorder (IAD) is excessive computer use that interferes with daily life or results in certain problem to its users. It is proposed as a disorder² in a satirical³ hoax⁴ (Ivan Golberg, M.D, 1995).

Like any other chemical addiction, Internet addiction disorders describe various types of successive and interdependent stages through which the individual progresses into an addiction to Internet. The addictive behaviours may not be limited to a single cause, namely, media use, but there is a clear relationship with the use of internet.

The referred case for this study is not dealt as isolated problem of Internet addiction by the

psychiatrists, but referred to the particular place of treatment as students with poor performances in studies and having other behavioural problems. While exploring the case, it was found that the boy was indulging in excessive use of Internet and had reached the stage of addictive behaviours.

Internet addiction - Internet addiction is described as an ‘impulsive control problem’ (Dr. Kimberly Young, IAT). It is defined in four subtypes:

1. Cyber sexual⁵ addiction -- They typically engage in viewing, downloading and trading online pornography or involved in adult fantasy role-play chat rooms.
2. Cyber- Relational addiction — They suffer from an addiction to chat rooms, Internet Message or social net work sites — over involved in online relationships or may engage in adultery. Online friends become more important to them at the expense of real life relationships.
3. Net compulsions -- Addictions to online gaming, online gambling, and eBay, which may disrupt other job or education related duties or significant relations
4. Information overload — Excessive web surfing and data base searches as enormous amount of

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information available on Internet, individual will spend greater amount of time searching and collecting data.

The term “pornography” specifies the causative agent who regularly logs in to sites which provide pornographic pictures. Such images viewed online are imbedded into the memory, affect brain function and never completely leave the memory where they are stored. Porn on the internet is plentiful, also private. This creates a perfect formula for an addiction to it. Moreover, an internet porn addiction progresses at an exponentially faster rate than any other.

Internet addiction – world scenario

Studies from the United States have estimated that anywhere from three percent to six percent of Internet users have a problem. According to the Stanford University School of Medicine Study, 1 out of 8 Americans suffer from Internet Addiction, 14% of respondents found it hard to abstain from Internet use for several days; 5.9% said excessive Internet use affected their relationships; 8.2% said the Internet was a means of escape from the real world. Studies have found that anywhere from 2.4 percent to 15 percent have a problematic Internet addiction (Dr. Cheng-Hua Tian, professor of psychiatry, Peking University Institute of Mental Health). German estimates suggest that close to 1 million people are addicted to the Internet (about 3 percent of the German online population). According to the Chinese Government, approximately 13 % of Chinese teenagers suffer from Internet addiction(2007). Data from mental health hospital Delhi, reveals that ‘during the last 10 years there is a three fold increase in children who are taking higher risk behavior from technology driven entertainment. I

get six to seven cases a month and one of it is Internet pornography’ (Dr.J Nagpal)

Mental health experts are of the opinion that “an addiction can form just as with gambling when people keep seeking that intermittently, it results as the unpredictable reward. The fact that it is unpredictable, that what compels the brain to keep checking over and over and over,” (Dr. David Greenfield, assistant clinical professor of psychiatry, University of Connecticut School of Medicine).

Around the world, however, experts say they are just starting to measure the effects. Dr. Cheng-Hua Tian and other senior psychiatrists are developing diagnostic criteria to more accurately measure addiction, which affects teen-agers more than adults. The nation’s first inpatient “detox” center focusing on Internet and video-game addiction opened in Fall City, Wash., in July (Dr.Greenfield). In 2003, the German social security services instituted the first camp in the seaside town of Boltenhagen, Northern Germany. It is the first camp of its kind in Europe and aims to wean children off computers. In Amsterdam, the first Detoxification Center to treat video game addiction opened in 2006.

The Indian Institute of Technology (IIT) in Mumbai adopted a measure to cut the students’ use of Internet in the school dormitories after the suicide of an IIT student in October 2005 due to Internet abuse. Life skill educational school developed by Vimhance hospital for mental health ,New Delhi, for 100 schools for the children affected with media. In China, which has almost 300 million Internet users, the government has declared Internet and video-game addiction a public health problem.

There are no sufficient research reports available from India about children's or adolescent's addiction to Internet pornography. Though the symptoms of excessive exposure reflect addictive behaviour, it is not recognized and treated as media related problem or as Internet addictive behaviour.

Objectives of the study

- To compare the observed behaviour disorders after a prolonged exposure to Internet pornography with that of chemical addictive behaviour.
- To determine the use of Internet programme for developing addictive behaviour.

Methodology

Exploratory Funnel method (Thomas R.Lindl of) is used for the study and to analyze the case. Primary data was collected through standardized (formal) and unstandardized (informal) interviews, with psychiatrists, psychologists, school principals and counselors. For an analysis of the case, Internet Addictive Disorder (IAD) Diagnostic Criteria, developed by Dr. Kimberly Young, is applied.

The study started on a wide platform for the academic research to identify the possible places of children and adolescents referred for behaviour disorder, which has relationship with the use of Internet or exposure to Internet pornography, in New Delhi. The researcher personally contacted possible hospitals, school principals, psychiatrists and physiologists, counselors directly for the data collection. One of the extreme cases of Internet pornographic addiction was chosen after conducting face to face standardized interviews with four psychiatrists, 11 unstandardized

face to face interviews with psychiatrists, one psychologist, three school principals, and two counselors. The case is referred to the researcher from specified hospitals by the psychiatrist.⁶

Fifteen and half year old boy- Amit⁷ was going on to obscene websites. He was constantly declining in the studies, completely becoming irresponsible, found angry, undergoing defame, isolation and secluded from his peer circle.

At the beginning : Amit was even interested to view hard copies of sexual behaviour and some of his classmates told him that there are websites about it which he can explore. He started to see porn sites on internet in his family friend's house with his peers, later in his own home by himself. Soon Amit got into lot of risky type of watching websites and got obsessed with it. He started constantly watching it and began to spend his personal time, exercise time etc. for it. At home, he did not allow the parents to come into his room. Parents thought it was part of growing up and gave him lot of space, but found that he was misusing the time, energy and investments, spending three to four hours every day late night, to watch these things.

The boy also became little vulgar in his temperament in school. He started to take even his porn literature with him in his school bag. The principal, had to call him after the teacher's complaint. Initially Amit and the teacher thought that there was nothing abnormal about it. It was part of growing to be explorative. Amit did not have any exposure to regular classroom discussion and parents talking about sex or adolescents growth process. Later, Amit started becoming dangerous, becoming violent and aggressive to his own parents. He felt that his sister in 5th std is

intruding into his privacy. Parents decided to cut him off from using computers and the boy threatened them that he would run away from home if they did that.

He was masturbating regularly and had strong feelings toward a girl in the next colony; started to explore simply some outwardly boy - girl friendship which turned to be a little awkward boy - girl relationship. It was not taken well and there was complaint against him which was rejected by peer group feeling that he is obscene and threatening. He became isolated, depressed, more engaged in porn sites. One week, he did not go to school after going in to net in the late hours, within 15 to 20 days he was found completely lost on computer- impulsive behaviour where he was experimenting more. The boy had gone into depression, helpless, obsessive, compulsive disorder only thinking about sexuality and sexual behaviour.

Observations and opinions of psychiatrists

‘The pornographic material would be shocking in the beginning, I myself have gone into it to know what is there. It is very gripping in nature and once

you get into, it creates lot of curiosity to know what is happening ‘next’. The feelings of those who get into it may be of disgust, upset and wanting to go back to it. It grips the brain” (Dr. Smita N. Deshpande).

“In certain cases there are also health hazards related to children and adolescents exposure to Internet pornography because they do not take food on time or go with insufficient food. Just like any other substance addiction, it is found that there is a pleasure experienced by the person going into it. There is a clear-cut craving for and very anxious situation when the patient was deprived of it. There is a very close relationship between the time spent on Internet and addiction to Internet pornography. Logging to pornographic sites is a behaviour. First, they get excited and want to go into it again and again.” Dr. Vijay Pathak MD (Psychiatry)

‘Individuals who suffer from Cybersex/Internet pornography addiction are typically engaged in viewing, downloading, and trading online pornography or involved in adult fantasy role-play chat rooms. Obsessive compulsive tendencies and reduced work productivity are typically associated with this behavior’ (Dr. Kimberly Young)

| SL No. | Symptoms | Exposure to Internet pornography | Manifestation of symptoms |
|---------|--|---|----------------------------|
| 1 | Adaptive time | 15-20 days | Within the limit—12 months |
| I (a) | Markedly increased amounts of time usage and need longer time for satisfaction | Initial 1-2 hours—later- 4-5 hours and when ever possible went online | Experience of tolerance |
| II-A(1) | Cessation of (or reduction) in Internet use | Heavy, prolonged | Withdrawal symptom-1 |

| | | | |
|----------|--|---------------------------|--|
| II-A(2) | Obsessive thinking about what is happening on the Internet | Observed in the behaviour | Withdrawal symptom-2 |
| II-A(2)b | Fantasies or dreams about the Internet | do | Withdrawal symptom-3 |
| II-A(2)c | Anxiety | do | Withdrawal symptom-3 & distress or impairment |
| III | Often accessed more often or for longer periods of time than was intended | do | Continuous exploration & progress to habituation |
| IV | Persistent desire or unsuccessful efforts to cut down or control Internet use | do | Compulsion and Craving |
| V | A great deal of time is spent in activities related to Internet use | do | Exploration and habituation |
| VI | Important family, social, occupational, or recreational activities are given up for the use | do | Addictive behaviour |
| VII | Persistent or recurrent physical, family, social, occupational or psychological problem that is likely to have caused or exacerbated by Internet use | do | Addictive behaviour |

Findings

Seven step Internet Addictive Disorder (IAD) Diagnostic Criteria ⁸

According to this tool, a maladaptive pattern of Internet use, leading to clinically significant impairment or distress as manifested by three (or more) of the following, occurring at any time in the same 12-month period.

The observed effects :

The analysis explains the stages of changes through which the person goes through after discovering the programmes and starting to engage in it. The symptoms of addictive behaviour follow the stages of:- discovery of the programme- continuous exploration- habituation - compulsion - hopelessness.

In order to conceal the extent of the involvement with their particular internet activity, the persons were

found deceiving family members and their friends. This becomes a means of avoiding the personal responsibility or to forget the problems or both. Restlessness or irritability was observed while attempting to abstain from this activity. It was found that strong will power was needed to stop this activity of addiction.

Based on the information available, out of the seven criteria, all the seven criteria of maladaptive pattern of behaviour is evident in Internet pornography user. There is clear evidence of progress to addictive behaviour manifested in the case—discovery of the programme—continuous exploration—habituation—compulsion—hopelessness.

Conclusion

From the above study, it is very clear that continuous exposure and excessive use of Internet pornography by the adolescents leads to particular

behaviour disorders, namely, addictive behaviors and compulsions. It has been observed that the persons went through the stages of Internet addictive behaviour- discovery of the programme- continuous exploration – habituation - compulsion – hopelessness. It is also found that there was need for markedly increased amounts of time on Internet to achieve satisfaction. Manifestation of withdrawal symptoms such as heavy and prolonged internet use, anxiety, obsessive thinking about what is happening on the Internet, fantasies and dreams about the Internet and its contents are vivid in this case. Habituation was found with frequent and heavy use of internet. A sort of compulsion to go back to the same or similar programmes is observable and were unable to cut down the prolonged use of Internet. Finally the person had reached a stage of hopelessness experiencing social isolation, continued use of internet despite the knowledge of sleep deprivation, neglect of study, feelings of abandonment by friends and significant persons, arrogant and violent behaviour towards own sister and the parents were observed in the case of pornography addiction.

Effect of exposure to internet pornography varies according to individual strengths and vulnerabilities which an adolescent possess, the content and the duration of exposure they have, the guidance and knowledge they get about it and the specific familial and social situation in which they are in. The problems related to internet use, specifically Internet addiction need to be identified and recognized as the effect of media use (Internet).In the context of the growth and the spread of Internet use, this is to be addressed as a serious concern among the children and adolescents.

Thus there is an urgent need to identify the problem of internet addiction and to treat it on time. On the other hand, information and education on this also is to be considered as an urgent need such as educating the parents, teachers and the public at large. This again calls for the need to have more strategic approach by the industry, families, government and others in the public and private sectors to work effectively together to help keep young generation safe.

Appendices I

1. 1* ,1** Sr. Marysia Weber, R.S.M., D.O, The term tolerance and withdrawal as explained by Weber—Tolerance is present when the same amount of a substance elicits less of a response. For example, a person who drinks three glasses of wine becomes intoxicated. When tolerance is present, a person needs more than three glasses of wine to produce the same physiological reaction. Withdrawal refers to the physiological reactions elicited when the amount of a substance is less present or absent in the body. Withdrawal symptoms include tremors, anxiety, elevated blood pressure and increased pulse rate and respirations. Affective or emotional disturbances may include depression, irritability, impulsivity, impaired concentration, disrupted sleep or aggressive behavior. These symptoms often diminish relationships either in quantity or in quality.
2. Disorder—In June 2007, the American Medical Associations declined to recommend to the American Psychiatric Associations that they include IAD as a formal diagnosis in DSM-V, and recommended further study of “video game

overuse'. Some members of the American Society of Addiction Medicine opposed identifying Internet overuse and video game overuse as disorders

3. Satire - Any literary genre or form.
4. Hoax is a deliberate attempt to deceive or trick an audience into believing or accepting that something is real, when the hoaxer (the person or group creating the hoax) knows it is false.
5. Cyber sex, computer sex, internet sex or net sex is a virtual sex encounter in which two or more persons connected remotely via a computer network send one another sexually explicit messages describing a sexual experience. It is a form of role-playing in which the participants pretend they are having actual sexual relations. In one interaction, this fantasy sex is accomplished by the participants describing their actions and responding to their chat partners in mostly written form designed to stimulate their own sexual feelings and fantasies.
6. The details of the hospital are kept confidential for the safety of the client. This case is referred by Dr. J Nagpal (MD-Psychiatrist) Date of Interview- 31-07-2009 (Referred to the doctor two years back)
7. Amit—another name used for the safety of the person

Appendices II

8. Internet Addictive Disorder (IAD) Diagnostic Criteria Used:
 - (I) Tolerance, as defined by either of the following:
 - (A) A need for markedly increased amounts of time

on Internet to achieve satisfaction.

- (B) Markedly diminished effect with continued use of the same amount of time on Internet.
- (II) Withdrawal, as manifested by either A or B below
 - (A) The characteristic withdrawal syndrome, 1, 2 and 3 below
 - (1) Cessation of (or reduction) in Internet use that has been heavy and prolonged.
 - (2) Two (or more) of the following, developing within several days to a month after Criterion 1:
 - (a) psychomotor agitation (b) anxiety (c) obsessive thinking about what is happening on the Internet (d) fantasies or dreams about the Internet (e) voluntary or involuntary typing movements of the fingers.
 - (3) The symptoms in Criterion 2 cause distress or impairment in social, occupational or another important area of functioning.
 - (B) Use of Internet or a similar on-line service is engaged in to relieve or avoid withdrawal symptoms
 - (III) Internet is often accessed more often or for longer periods of time than was intended
 - (IV) There is a persistent desire or unsuccessful effort to cut down or control Internet use
 - (V) A great deal of time is spent in activities related to Internet use (e.g., buying Internet books, trying out new WWW browsers, researching Internet vendors, organizing files of downloaded materials.)

(VI) Important family, social, occupational, or recreational activities are given up or reduced in duration and/or frequency because of Internet use (VII) Internet use is continued despite knowledge of having a persistent or recurrent physical, family, social, occupational, or psychological problem that is likely to have been caused or exacerbated by Internet use (e.g., sleep deprivation, marital difficulties, lateness for early morning appointments, neglect of occupational duties or feelings of abandonment).

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Seeing a murder on television can help wark off one's antagonisms. And if you haven't any antagonisms, the commercials will give you some.

Alfred Hitchcock