

Child Addictions – What happens when they grow up?

By Cris Rowan

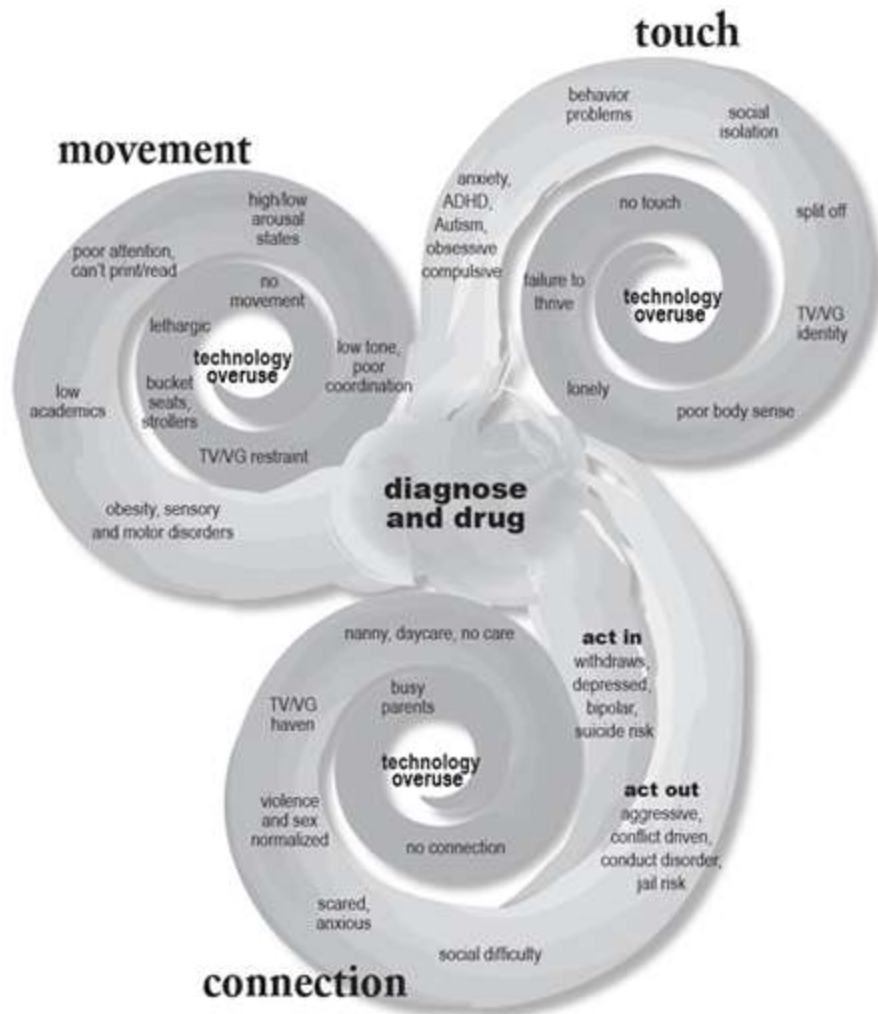
The youngest child I've seen thus far with technology addiction was 3 years of age, although I've corresponded with parents who have concerns about children as young as age two. It appeared that this child had an invisible cord connecting him to the television, and he would rarely venture more than ten feet away from it at any time. Toilet training was an issue, and required a transportable gaming device. All family meals happened in front of the TV. Bedtime involved switching on the TV in the bedroom prior to this child leaving the family room. Community outings involved handing the child an iPod with movie cued up, and then quickly bundling the child into his car seat. Upon arrival at their destination, he was transferred back onto a TV. The Mom said she wasn't even sure the child knew that he was not in his home, so fixated was he on technology. The TV was required to be on at all times day and night, or the child wouldn't eat or sleep. He would immediately start to scream if the TV was turned off. Mom reported the child's body was in a constant state of rigid attention and fixation on the TV, and she was worried that her child would not be able to attend upcoming pre-school in the fall. Evidently the preschool allowed some 'educational' TV time, but there were also times when the TV was turned off and the children were expected to play. The Mom stated her children didn't know how to 'play'.

A frequent question asked by reporters and workshop participants is "Why, when we know that technology isn't good for our children, do we continue to allow them unrestricted and in many cases, escalating access?" We are presently bearing witness to a vast and pervasive problem which has now reached epidemic proportion. *Technology addiction* has swept through every corner of the globe, leaving not one man, woman or child untouched. While addictions have plagued societies for hundreds of years, historically addictions affected primarily the adult population, leaving the children to suffer only the secondary effects. Whether the addiction was alcohol, drugs, cigarettes, gambling, food, or sex, it was generally established during the young teen and adult years. Rarely was addiction the experience of young children. While horrendous in impact, addictions used to affect only a small percentage of our population, leaving the majority able to function in their respective home and work environments. Today addictions affect the majority of our populations world-wide, and affect even our vulnerable infant and toddlers whose neurological systems are undergoing rapid development.

While most addictions are generally 'frowned upon' by society, technology addictions are normalized. As we are all aware, adult addictions create havoc on work productivity and home relationships. We know very little about child addiction, yet are handing children highly addictive technological devices at an alarming rate. Even our health and education systems appear blind to the utter disorder and chaos that is resulting from unrestricted and escalating use of technology by young children. With rising incidence of developmental delay and attachment disorders, child behaviour diagnosis and medication has been described as "manic" by Paul Kershaw, child development researcher with UBC's Healthy Early Intervention Partnership program. This diagnosis and medication path is dangerous, as these drugs are considered 'neurotoxins' and may be threatening the very sustainability of our children.

Connection to technology is disconnecting human relationships. *Preferring devices* over time spent in *human connection*, reflects a society that has lost the significance of the “pack”. For hundreds of years humans hunted, gathered and farmed in groups. Work was highly physical, and isolation from the tribe meant certain death. Survival required members rely on each other, resulting in the formation of close relationships and attachments. Now – socialization is minimal. The family dining room table has been replaced by the big screen and vibrating cell phones. Classrooms are rapidly becoming virtual as playgrounds disappear, and workplace cubicles become a haven to increasingly depressed, anxious and compulsive employees. The actual values we used to build the foundations and structures for home, school and work systems are disappearing before our very eyes. Communication, discipline, caring, playfulness, independence, and exploring nature don’t seem to be important constructs anymore – we simply just don’t have time. While technology may appear to be making life easy, processing multiple incoming stimuli is overloading the brain and actually reducing overall productivity. Have we evolved to accommodate this sedentary, yet chaotic existence? With brains moving faster and faster, and bodies moving slower and slower, the sustainability of the human species is truly in peril.

Every minute spent in front of technology is detrimental to child health and academic performance. ‘Growing’ children is like building a house, it’s all about the foundation. If the foundation isn’t constructed properly, the house will have life-long problems, it might even fall down. If children don’t engage in critical activities during development, their growth and success at school will be impaired. To optimize development, children need stimulation to their sensory, motor and attachment systems. Children need to move...a lot, touch and be touched, and connect in meaningful ways with other human beings. Our children need adults in their lives (parents, education and health professionals) to manage *balance* between critical activities children need to grow and succeed (movement, touch, human connection) with technology use. Below graphic shows the correlation between lack of these essential activities, and the growing propensity to diagnose and drug children.



Technology usage patterns of the child follow that of the parent. When treating child addictions, education and health professionals need to start with the parents. The underlying factor for addictions is poor attachment formation between parent and child. Research indicates that addictions are the result of a failed attachment formation with the primary parent (Flores P, 2004). As parents attach more and more to technology, they are detaching from their children. In the absence of parental attachment, children are creating attachments to technology, resulting in an escalation of child addictions.

What can you do?

Prior to treating a child for behavioural issues, health and education professionals first need to have parents complete a [technology screen](#) to determine if the child's technology usage falls within the expert guidelines of 1-2 hours per day. If the child's technology usage is excessive, then measures should be taken with the family to reduce technology use. The [Ten Steps to Unplug Your Children from Technology](#) is a good place to start. Below noted addiction indicators are a guideline for addiction status.

Addiction Criteria – Need to meet 3 or more of the following (DSM IV) to meet criteria for addiction.

1. **Tolerance** – use same amount, but it's not as much fun anymore
2. **Withdrawal** – can't go without
3. **Unintended Use** – use more than intended
4. **Persistent Desire** – tried to stop but can't; think about all the time
5. **Time Spent** – technology use takes up most of free time
6. **Displacement of Other Activities** – limited participation in other activities
7. **Continued Use** – keep using even though know it isn't healthy

Forming local [Balanced Technology Management Foundation Teams](#) comprised of parents, education and health professionals, government, researchers and technology production corporations, will promote global initiatives to address this growing concern of child technology addictions. My book [“Virtual Child – The terrifying truth about what technology is doing to children”](#) is an awesome resource for every parent, education and health professional. May 12-14, 2011 we're offering our Foundation Series Workshops for parents, education and health professionals in Vancouver, BC, and May 11-15, 2011 is our [Occupational Therapy Training Certification course](#).

We can turn this 'technology train' around and ensure sustainable futures for all our children. Act now.

Cris Rowan, OT (Reg), BScOT, BScBi, SIPT
CEO Zone'in Programs Inc. and Sunshine Coast Occupational Therapy Inc.
6840 Seaview Rd. Sechelt BC V0N3A4
604-885-0986 O, 604-740-2264 C, 604-885-0389 F
crowan@zonein.ca
websites: www.zonein.ca, www.suncoastot.com