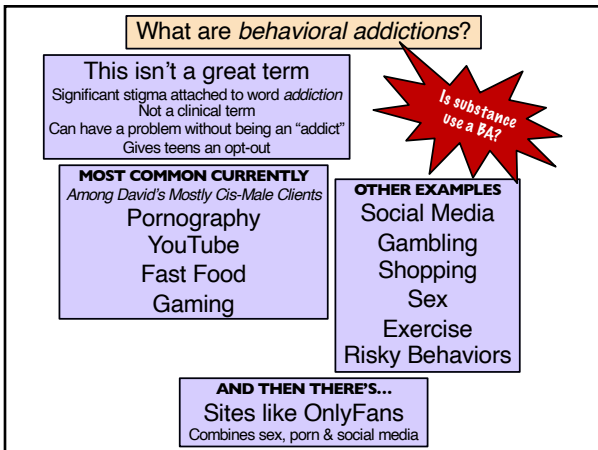




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PREVALENCE

- Lack of clear definition makes it difficult to accurately identify prevalence
- Wildly varying statistics, some clearly biased or intentionally deceptive
- Tech-based BAs are relatively new & quickly evolving
- Tech-based BAs have increased dramatically since COVID Why?

DAVID'S VERY INFORMAL META-ANALYSIS
10-12% of US teens have BAs

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DIAGNOSTIC CODES

Gambling Disorders DSM-5-TR ICD-10 & ICD-11	Various specific diagnoses, all identifying persistent and problematic gambling behavior leading to significant distress or impairment
Compulsive Sexual Behavior Disorder ICD-11	A persistent pattern of failure to control intense, repetitive sexual impulses or urges resulting in repetitive sexual behavior
Gaming Disorder ICD-11	Significantly impaired control over gaming, increasing priority given to gaming, and continuation despite negative consequences
Impulse Control Disorders DSM-5-TR ICD-10 & ICD-11	Various specific diagnoses, all identifying difficulty controlling impulses

US insurance companies
don't pay for ICD-11 codes

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STAGES OF USE

No Use Ever

Experimental Use

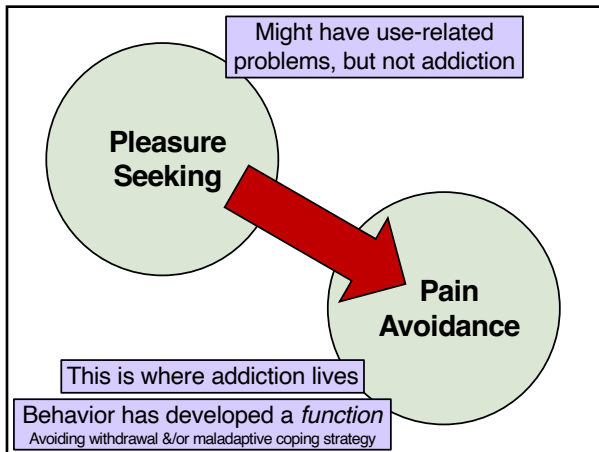
Occasional Use

Regular Use

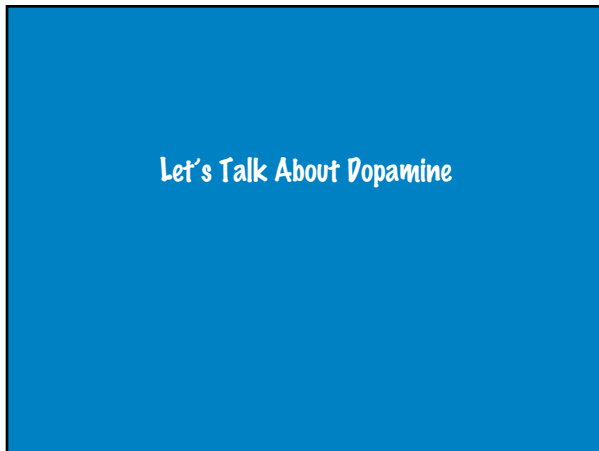
Abuse / Misuse

Addiction

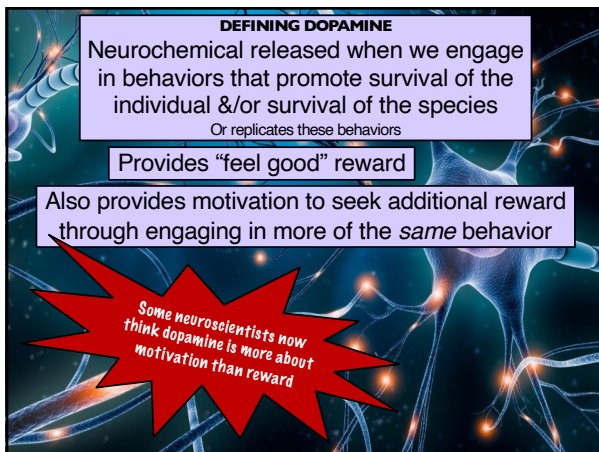
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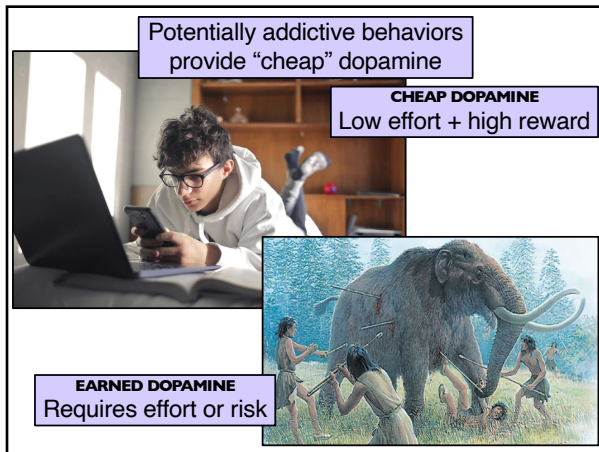
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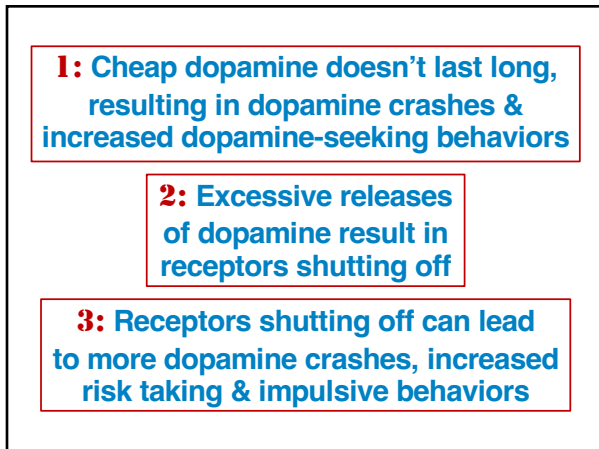
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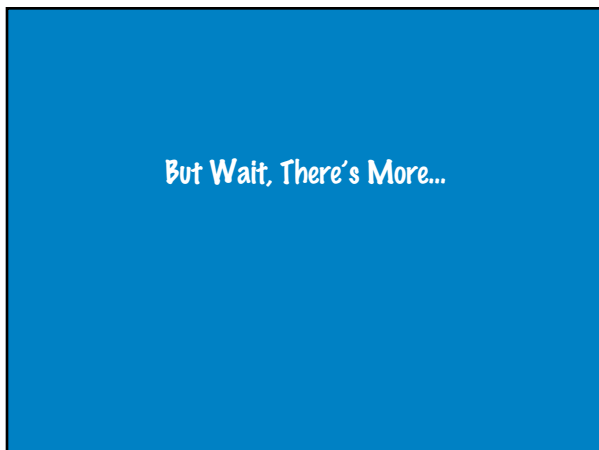
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DESIGNED FOR COMPULSIVITY

Fast food is designed for compulsivity in an entirely different way

EXAMPLES
Videogames
Gambling
Social Media
Pokémon Cards

Variable ratio reinforcement
Trading cards, loot boxes, scratch tickets, slots

A FEW OTHER DESIGN CHOICES
Getting "close" to winning
Multi-sensory, immersive environments
In-game rewards, power ups & likes
Fast paced play

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GENETIC CONSIDERATIONS

There is likely a genetic predisposition for BAs

The Dopamine Double Whammy

Individuals who engage in BAs might produce less dopamine than most people

OTHER POSSIBLE FACTORS
Inheritable personality traits
Epigenetic vulnerabilities

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REPLICATES SURVIVAL NEEDS

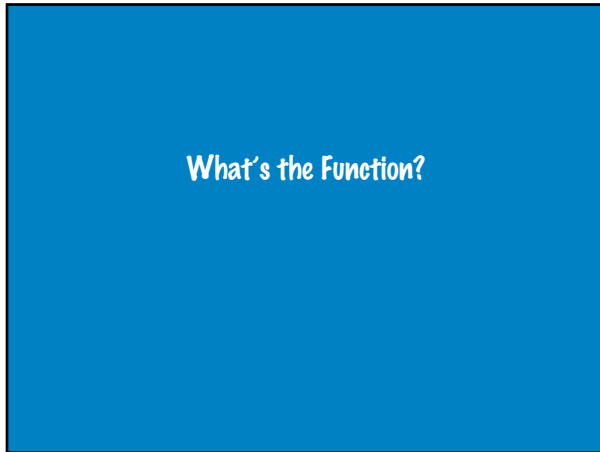
EXAMPLES
Sex
Porn
Food
Fast Food
Shopping

"A zombie apocalypse probably isn't gonna happen, but I'll be ready if it does. And, I guess that makes me feel safer."
Nate, former client

Perceived survival needs can feel as strong as real ones

Behaviors that replicate survival needs lead to especially big dopamine bursts

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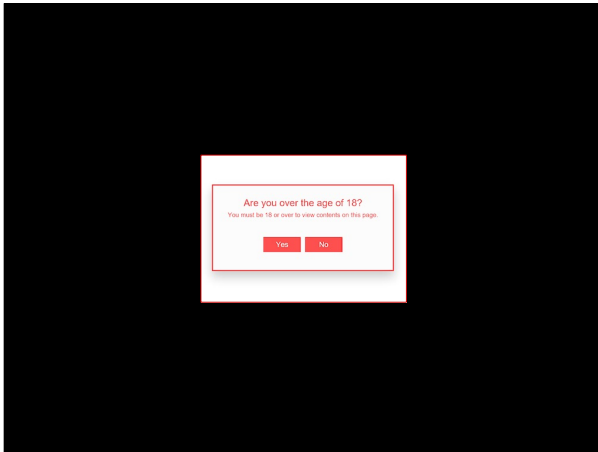


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UNPACKING FUNCTION

- Acknowledging the function isn't the same as endorsing it
- A strong function makes a behavior *seem* like a survival need
- People will *always* defend their perceived survival needs
- If we don't address function, lasting change is unlikely

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BEFORE WE PROCEED

- Teens view porn
- Some people have strong opinions about this... and that's not the focus of this presentation
- We can't talk about porn without acknowledging sex & masturbation
- We can't have clinically useful conversations if policing language
- It's not our job to judge

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A FEW STATISTICS

- About 70% of US teens have been exposed to online porn
- Intentional about 20-40%
- Unintentional about 30-50%
- Male teens more likely to view porn
- Data from one study of online viewing: 66% of male teens, 39% of female teens
- Use increased during COVID

(Jhe, Addison, Lin & Pluhar, 2023)

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Limited scientifically valid data
about effects of porn on teens

Most negative outcomes data is
based on corollaries or biases
(Jhee, et al, 2022)

Example: Adolescents who view
porn become sexually aggressive

SOME LEGITIMATE CONCERNS

 Unrealistic perspectives on sex & body image
 The “numbing of sexuality”
 The ethics of porn
 Exacerbates mental health concerns
 Potential for addiction

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SUD CRITERIA (DSM-5-TR)			
Physical Dependence	Impaired Control	Social Problems	Risky Behaviors
- Withdrawal - Tolerance - Cravings	- Using larger amount or more often than intended - Unable to stop or cut down	- Neglecting responsibilities & relationships - Giving up activities that used to be important - Failure to complete tasks at home, work or school	- Using in risky situations - Continued use despite known problems

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APPLYING SUD CRITERIA	
Withdrawal <i>Dopamine crash; Increase in MH symptoms; Irritability</i>	Impaired Control <i>Viewing longer than intended; Overspending</i>
Tolerance <i>Less vanilla; Viewing & masturbation becomes uncoupled</i>	Social Problems <i>SO doesn't like it; Skipping social activities to view</i>
Cravings <i>Strong urges to view; Decreased ability to resist this urge</i>	Risky Behaviors <i>Viewing in inappropriate settings</i>

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WHAT DOESN'T HELP

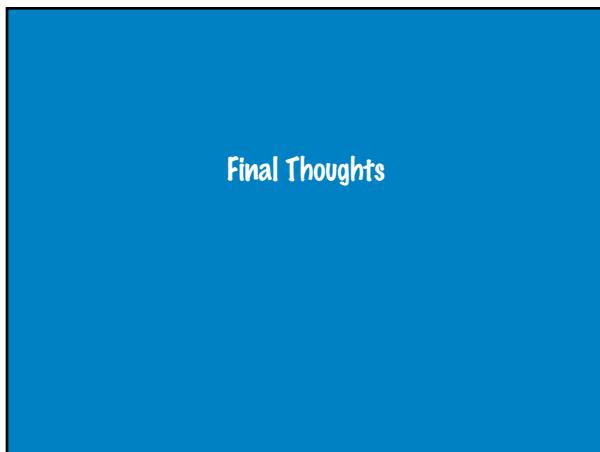
- Telling teens what their doing is "bad"
- Forcing compliance
- Focusing on abstinence
- Rushing to problem solving

WHAT DOES HELP

- Cultivating therapeutic alliance
- Addressing mental health issues
- Honest conversations about real concerns
- Meeting them where they're at

These are essential components for treating all BAs in teens

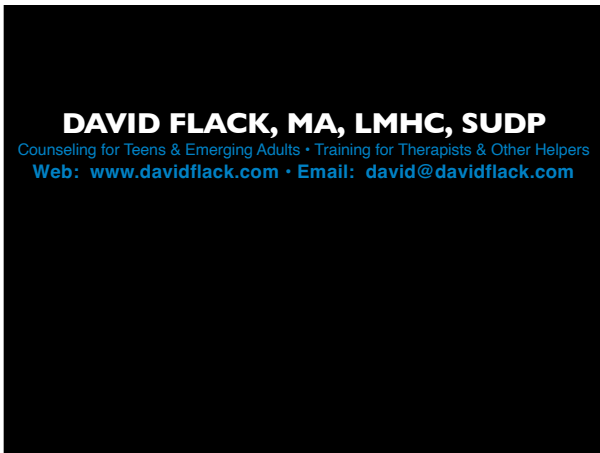
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