




Pornography Addiction in Children and Teenagers Caused by Feelings of Boredom, Loneliness, Anger, Stress, and Tiredness

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ABSTRACT

The pandemic is a dark era during which every aspect of society is disrupted. The pandemic has led to a decline in productivity for people of all ages. Among the working-age population, the pandemic results in reduced work productivity, affecting income levels. As teenagers, the impact of this pandemic diminishes learning productivity due to the implementation of online learning at home using electronic devices. Consequently, essential aspects of life, such as learning and playing, become reliant on gadgets. The erosion of the social system further limits the opportunities for teenagers to have good social relationships within their environment. Specifically regarding adolescents, a case of pornography addiction with accompanying symptoms was diagnosed. No features suggestive of homosexuality, other psychiatric disorders, or paraphilic disorders were noted. The patient had a history of febrile convulsions, and traditional treatments were proposed and accepted. The patient came from a broken home with an alcohol-dependent father and a mother who works in a private company with two side jobs. Through a combination of psychotherapy and pharmacotherapy, significant improvement was observed within a span of 3.5 months. Education regarding BLAST feelings and pornography addiction was also given to the parents to achieve more effective outcomes.

There are several contributing factors influencing pornography addiction in the patient, one of which was the emergence of BLAST feelings (bored, lonely, angry-afraid, stressed, tired). BLAST feeling is a phenomenon reflecting the vulnerable state of children during the pandemic, especially with the lack of presence of the most critical social system in their lives. Boredom refers to a sense of monotony in daily and school routines. Loneliness encompasses feelings of isolation due to a lack of social interactions. Angry-afraid reflects anger triggered by a particular situation, rooted in dissatisfaction and fear of confiding in parents. Stress indicates depression resulting from the current circumstances. Tiredness signifies fatigue caused by accumulated problems. The feelings contained in BLAST are factors that lead teenagers to seek entertainment through gadgets and access pornography, ultimately resulting in addiction.

Keywords: Pornography, Addiction, BLAST, Children, Teenagers

Introduction

The Coronavirus disease 2019 (COVID-19) pandemic, caused by the severe acute respiratory syndrome coronavirus (SARS-CoV) virus, has spread to all parts of the world, including Indonesia. The respiratory virus was first detected in late 2019 in Wuhan, China. Due to the mobility of people between countries, the virus has rapidly spread, especially with the virus being highly transmissible. Since its emergence in Wuhan, the number of COVID-19 infections has increased daily.

In March 2020, Indonesian President Joko Widodo announced the first appearance of the COVID-19 virus in Indonesia. The government swiftly implemented policies to address the COVID-19 virus spread in Indonesia. At that time, the Indonesian government enforced large-scale social restrictions as a preventive measure. These restrictions included public health awareness campaigns emphasizing the importance of personal hygiene and limitations on social interactions, which led to a shift in activities being primarily conducted within the confines of one's home. The enforcement included working from home and a transition from face-to-face (offline) to online learning for students [1].

The large-scale social restrictions implemented by the Indonesian government in response to COVID-19 were perceived as less effective by the public because of the emergence of new problems related to the policies. The government were seen as providing inadequate solutions in implementing large-scale social restrictions. When large-scale social restrictions is implemented, it automatically requires a change in people's daily routines, which takes time to adapt to. If the government is unresponsive to addressing these problems, it can lead to new social issues. However, it is also important to note that addressing COVID-19 is not solely the government's responsibility; the community also plays a crucial role in maintaining awareness of health protocols [2].

Maintaining physical health is undeniably important, but it is equally vital to maintain stable mental health. Mental well-being significantly influences various aspects of life. When individuals have a healthy mental state, it enables them to make wiser choices and be calm in living their lives. According to the World Health Organization (WHO), mental health refers to the conscious ability to process emotions and overcome mental disorders, enabling individuals to live productive lives and actively participate in society [3], [4].

Adolescence is a transition period for individuals where they often experience a lot of anxiety, stress, fear, and mood swings, even without the added challenges of a pandemic. The pandemic has intensified the stress in individuals during the transitional period. A report by the United Nations International Children's Emergency Fund (UNICEF) has warned about the potential long-term effects of COVID-19 on the mental health of children and young people. Even before the pandemic, children and youth were already disproportionately affected by mental health issues. Current estimates indicate that more than 1 in 7 adolescents aged 10-19 years worldwide are diagnosed with mental disorders. Suicide, tragically, remains one of the top five causes of death in this age group, claiming the lives of nearly 46,000 young people annually. However, there is still a large gap between the need for mental health interventions and the available funding. Globally, only 2% of health budgets are allocated to mental health initiatives [5].

The problems related to adolescent health have become increasingly complex, encompassing issues related to nutrition (anaemia, obesity, underweight, stunting), clean and healthy lifestyle (diarrhoea and worms), and non-communicable diseases (heart disease, stroke, cancer, and reproductive health diseases). Concerning healthcare, national data reveals that there are around 2.6% cases involving marriages under the age of 15 and 23.9% cases of marriages between individuals aged 15-19 years. Additionally, the teenage pregnancy rate stands at 48/1000 live births. Surveys conducted in 2015, such as the Global School-based Student Health Survey (GSHS) and Basic Health Research (Riskesdas) 2013, indicated that 1 in 20 teenagers had engaged in sexual intercourse, with 1 in 19 reporting having been forced into it, 3 out of 5 adolescents lack awareness about the risks of pregnancy, even after engaging in sexual activity. The surveys also revealed that 2 out of 3 teens felt that their parents

did not understand them, 1 in 20 teens had suicidal thoughts, and 1 in 2 teens felt lonely and excessively worried [6].

An astonishing finding based on research conducted in South Jakarta and Pandeglang in 2017 reported that as many as 94% of teenagers had been exposed to pornography. This figure increased to 98% in 2018. Additionally, according to a survey by the Ministry of Health in 2017, the internet (57%), comics (43%), and social media (34%) were identified as the three primary sources of pornography. Furthermore, the majority of exposure to pornography occurs at home, accounting for 61% of cases. The potential for children and adolescents to access pornography is influenced by various factors, including lifestyle, parental supervision, and feelings of BLAST, such as boredom, loneliness, anger-afraid, stress, and tiredness.

Mental Problems in Teenagers

Common mental health problems in adolescents include post-traumatic stress disorder (PTSD), attention-deficit/hyperactivity disorder (ADHD), generalized anxiety disorder, eating disorders, schizophrenia, bipolar disorder, and depression. Mental health disorders in adolescents frequently contribute to suicide. Approximately 47% of suicide cases in Indonesia involve adolescents and young adults. Parents must be able to identify the signs of mental disorders in their adolescents. Mental health disorders undoubtedly have a negative impact on today's teenagers [7], [8].

Pornography

Pornography encompasses pictures, sketches, illustrations, photographs, writings, sounds, moving images, animations, cartoons, conversations, gestures, or other forms of messages through various communication media and/or public performances containing obscenity/sexual exploitation that violates moral norms in society. Addiction refers to the condition when our body or mind strongly desires or needs something to function properly despite the negative consequences of those desires or needs [9].

Brain development experiences a golden period during infancy. However, during adolescence, certain parts of the brain undergo rapid development until adulthood. Parts of the brain that develop rapidly starting at the age of adolescence include the cerebellum, responsible for physical coordination; the amygdala, which is involved in emotion control; the nucleus accumbens, regulating motivation into action; and the prefrontal cortex, which plays a crucial role in thinking, planning, decision-making, and emotion and responsibility control. The prefrontal cortex, in particular, undergoes the longest development period and only fully matures around the age of 25 [9], [10].

When a child or an adolescent accesses pornography, the hormone dopamine is produced, leading to the release of serotonin and endorphins, resulting in the feeling of satisfaction. Hence, the desire to keep accessing pornography emerges. Additionally, during the adolescent stage, there is a pruning process where frequently used brain areas will develop, while rarely used areas will not develop or may be eliminated. If this pattern continues, it can cause ongoing neurotransmitter changes, affecting the limbic system and weakening the control system. As a result, brain functions, such as emotions, cognition, concentration, self-perception, behaviour, and organ functions, are altered [11].

Pornography Addiction

Brain damage caused by pornography is comparable to brain damage resulting from accidents. It is even more detrimental than brain damage caused by drugs. Pornography addiction affects five parts of the brain simultaneously. Pornography addiction not only harms oneself but also harms others [7], [8].

Teenagers who are addicted to pornography exhibit symptoms such as decreased achievement, changes in sleep patterns, losing track of time, having many unknown friends, having emotional instability, and having various other problems. These teenagers may be negative influences on their environment and also to themselves.

Family and parental factors play crucial roles in preventing pornography addiction, especially considering 61% of pornography is accessed from home. Here are 10 tips for parents to prevent their children or teens from being exposed to pornography: (1) Provide attention, affection, and appreciation to children; (2) Supervise children when they access the internet; (3) Educate children about healthy internet usage, (4) Be aware of their friends and the surrounding environment for prevention, (5) Place computers in common areas of the house, (6) Establish agreed-upon rules regarding gadget usage, (7) Provide sex education appropriate to children's growth and development, (8) Install security applications on devices, (9) Teach children to say no to invitations to access pornography, and (10) If a child is caught accessing a pornographic site, offer guidance and reminders.

In addition to the role of families and parents, educators play a crucial part. Open and two-way communication about sex and the impact of pornography addiction, as well as exploring the positive potential of teenagers, are essential. Teenagers themselves should also seek self-education and develop the necessary skills.

BLAST (Bored, Lonely, Angry-Afraid, Stressed, Tired)

The feeling of BLAST (bored, lonely, angry-afraid, stressed, tired) significantly impacts children's growth and development processes. If children cannot control themselves and experience the feeling of BLAST, it will undoubtedly have adverse effects on themselves, their peers, and others surrounding them. Generally, children affected by the BLAST phenomenon lack harmonious relationships with their parents, causing a sense of emptiness in their souls. These children do not go through the process of developing strong emotional bonds with their parents [10]. They are also missing out on the attention and love they deserve. Additionally, they do not receive moral and spiritual education, thus lacking guidance in these critical aspects of life [12].

BLAST definition was:

- a. Bored: feeling bored with daily routines and school activities
- b. Lonely: experiencing a sense of loneliness due to lack of closeness with parents in both quantity and quality
- c. Angry-Afraid: feeling of anger because of a particular situation, rooted in dissatisfaction and fear of confiding in parents
- d. stress: feeling depressed because of the situation at hand
- e. Tired: experiencing exhaustion due to accumulated problems

It can be concluded that BLAST occurs due to the absence of parental involvement in children's education. Parents often limit their role to providing material facilities only without participating in the educational process in the family. They may believe that the school is solely responsible for their children's education in terms of cognitive, moral, and overall abilities and development of their children. As a result, children feel neglected and isolated when facing challenges. Children experiencing the BLAST phenomenon have no place to discuss their confusion or troubles. They also lack a sense of protection and security since their parents cannot provide them with a sense of safety and comfort [12].

Case Report

A 14-year-old male arrived with a major complaint of anxiety and difficulty concentrating. The patient has experienced these two disorders in the past year, and has worsened for the past three months. He happened to experience difficulties concentrating during studying and learning, and he seemed to be troublesome in receiving teaching. The patient often gets sleepy during class, and he displayed difficulties in stopping watching adulterous/porn videos. This misbehaviour started during the pandemic when the school was conducted via online classes. He often did private activities in his bedroom and rarely met his classmates. As he displayed boredom, he sought a new activity by watching adulterous/porn videos, as a result; he

often masturbated. He has prevented his desire to watch porn videos in the past three months. Unfortunately, he also watched the videos during class sessions due to boredom with the lesson. Lately, this misbehaviour has been known by his parents and families; therefore, his parents do not allow him to use his gadgets, including his smartphone and laptop.

Consequently, he expressed anger by throwing any items in his bedroom and destroying them. During the psychiatric examination, the patient appeared to suffer from sleeping and anger disorder. He also displayed anxiety due to not being allowed to watch the videos daily. His addiction was because he felt entertained, satisfied, and comfortable watching porn videos. He watched pornographic videos for at least 3 hours a day, primarily Western and Japanese content. Fortunately, over the past two months, he had expressed his intention to stop watching the videos voluntarily; however, anxiety persists. During interviews, the patient exhibited careful behaviour and speech when questioned. The patient also showed dysphoric mood, appropriate affect, and no disturbances in thinking, such as delayed and abstract thoughts, perception and orientation issues, memory loss, or impaired judgment. However, his ability to concentrate was disrupted. Vital signs and physical examination came out normal. Psychiatric assessment using the Cypat test revealed a score of 50. No features suggestive of homosexuality, other psychiatric disorders, or paraphilic disorders were noted. The patient's father was alcohol-dependent, and his mother worked as an employee in a private company and had two side jobs, so she rarely at home. The treatment plan for this patient included Cognitive Behavior Therapy (CBT) and family therapy involving support from his parents, as well as education about BLAST feelings and porn addiction was also given to the parents to achieve more effective results.

Discussion

Criteria for diagnosing pornography addiction are not provided by the International Classification of Diseases (ICD) and the Diagnostic and Statistical Manual of Mental Disorders (DSM). However, symptoms such as craving, withdrawal upon cessation of watching pornography, tolerance, narrowing of interests, neglecting family and school activities, desire for sexual relations and decreased performance due to excessive viewing of pornography allowed a diagnosis for pornography addiction [11] – [13].

Advances in information and communication technology have influenced the number of children exposed to pornographic videos, and usually, pornographic videos can be easily found by children in games, magazines, social media and internet networks. Several factors that cause children to become involved in pornography include: 1) Deliberately viewing pornography that appears when using their parents' gadgets or when accessing the internet; 2) Receiving sexual text messages, photos or videos on social media; 3) High curiosity or curiosity, which makes children try to access sites that contain pornography; 4) Influenced by invitations or persuasion from peers and the surrounding environment; 5) BLAST feelings, namely: Bored, Lonely, Angry, Stressed, Tired; 5) Lack of religious education related to character learning and moral cultivation from schools; 6) Lack of parental awareness of the importance of paying attention and paying attention to children when using gadgets [14], [15].

Several steps can be taken to prevent teenagers from feeling BLAST [2], [15], [16]:

- a. Spend quality time with children and engage in comfortable conversations. Have heart-to-heart talks with children regularly. Seek exciting topics to discuss with children because maintaining consistent communication can reduce stress. When children share their activities on the playground or at school, they will be more likely to forget any problems they may face. They will also feel more open to their parents and be in a better mood.
- b. Show empathy and ask children about their feelings when interacting with children. When children express their feelings, they respond positively and demonstrate empathy. This will make children feel cared for by their parents.

- c. Assisting children in solving their problems is crucial. Children who receive full support from their parents will develop resilience against negative influences from external sources.
- d. Teach children to express anger or disappointment in a healthy manner. Parents should guide their children in expressing their emotions appropriately. Sometimes, children struggle to express their emotions, leading to uncontrolled outbursts. As long as the child's behaviour does not disturb his or her surroundings and well-being, the child can wisely manage his or her emotions. For instance, parents can encourage their children to engage in drawing activities. They can ask the child to draw something that upsets, anger, or disappoints them and then tear up the drawing as a symbolic act of releasing and expressing their anger. This can be done when the child still has unresolved emotions while sharing his or her story.
- e. Set an excellent example as a parent by demonstrating emotional control. Parents must be an example and role model for their children by showing them how to manage their emotions effectively. When parents are positive and compassionate, their children will learn from their behaviour. Children tend to imitate the behaviours they observe, so problems outside their immediate environment can influence them.
- f. Turn home and family into a safe space to manage the feeling of BLAST.

Conclusion

Implement all forms of BLAST prevention within the home. Transform home into a space where parents can teach and practice how to handle the feeling of BLAST effectively. Family, the smallest and most intimate group, plays a crucial role in shaping children's resilience against the feeling of BLAST. The prevention of the feeling of BLAST begins at home, and parents should consistently manage BLAST feelings from an early age to reduce the risk of children experiencing BLAST. By supporting efforts to instil the management of BLAST feeling into practice, we can nurture brave, empathetic, strong, and top (BEST) generations in Indonesia.

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