Digital failure: An emerging reason of anger expression among adolescents

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Compulsive Internet use can lead to irritability whenever access to the Internet or other digital devices is interrupted. Research in the fields of human-computer interaction and of modern information has shown that typical technological malfunctions such as crashes, crashes, crashes, and other digital glitches can lead to negative mood states, including anger and frustration. Recent studies have highlighted the impact of Internet addiction and abuse on various aspects of an individual’s life, including cognitive, emotional, behavioral, and interpersonal domains. However, there is a growing body of evidence that suggests the need to consider the context in which these issues manifest, particularly when connectivity issues arise.

Network connectivity can often lead to positive as well as negative mood states among regular Internet users. Recently, studies have mainly focused on the impact of Internet abuse/addiction on the various aspects of the individual, in terms of cognitive, emotional, behavioral, and interpersonal domains. However, one of the issues that is not much reported are the issues about what happens to the children who are not able to access the internet due to connectivity issues. Given this, the current article discusses two cases with negative emotional and behavioral manifestations of increased anger and frustration due to reduced Internet connectivity. This can help draw more research and attention to the need for increased cyber-literacy and incorporation of anger management programs into psychological interventions that address Internet Addiction.

ABSTRACT

Network connectivity can often lead to positive as well as negative mood states among regular Internet users. Recently, studies have mainly focused on the impact of Internet abuse/addiction on the various aspects of the individual, in terms of cognitive, emotional, behavioral, and interpersonal domains. However, one of the issues that is not much reported are the issues about what happens to the children who are not able to access the internet due to connectivity issues. Given this, the current article discusses two cases with negative emotional and behavioral manifestations of increased anger and frustration due to reduced Internet connectivity. This can help draw more research and attention to the need for increased cyber-literacy and incorporation of anger management programs into psychological interventions that address Internet Addiction.

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breakdowns, freezes, or slowdowns that are encountered when using a computer can lead to frustration, stress, strain, and somatic symptoms. Poor network, disruption in the speed to access information, browser failures, interruption in the virtual gaming due to popups or technical issues has a large impact on an individual’s emotional functioning. The most-cited causes of frustrating experiences for adolescents, while using Internet were error messages, dropped network connections, long download times, and hard-to-find. This article discusses two cases that sought consultation at tertiary specialty clinic for the management of technology use and behavioral issues.

**CASE REPORTS**

**Case I**
A 17-year-old male, who presented with problems of excessive gaming as well as low frustration tolerance. The user had been playing multiple player online games. He used to spend 8–10 hours/day on gaming. The clinical interview revealed the presence of preoccupation with gaming, loss of control, and the consequences of the same for the last 12 months. The user scored in the ‘severe’ range on Internet Addiction Test, and in the ‘higher degree of gaming disorder’ range on the short form of Internet Gaming Disorder Scale. The usage pattern led to dysfunctions in sleep, academics, outdoor activities, and interpersonal domains. The behavioral change was seen in the form of an increased expression of anger, especially when the Internet connectivity was poor and when speed was slow. There was no history of attention deficit hyperactivity disorder through the client’s life. Though his family had apparently been making the effort to provide him with a stable network connection, his aggressive behaviors had become more frequent, and started exhibiting anger toward self and caregivers. This included verbal and nonverbal expressions of anger, like hitting, breaking objects, and self-harm behaviors (in the form of scratching). Despite the parents changing Internet service providers to increase the speed and consistency of the Internet connectivity, it did not bring much change in the client’s anger and frustration levels as even small disturbance could elicit intense emotional reactions. The adolescent attributed his outbursts to the frustration experienced due to slow Internet speed during crucial moments in the game, like when he was about to defeat another player, or when he was completely involved or enjoying the game. He also highlighted the frustration elicited due to the possibility of digital failure causing an interruption, leading to him losing out on, or scoring less on the game. The clinical interview also revealed the presence of mild depressive features in the client’s parents. Subsequent to the intake and the interview process, the user was imparted detailed psychoeducation about the healthy use of technology. In addition, the therapy sessions involved anger management techniques, such as adaptive methods to express and manage anger. Further, the sessions also revolved around the interpersonal dynamics within the family, and discussions regarding parent management skills. On the whole seven sessions were provided to the adolescent and his parents. However, the subject was lost to follow up.

**Case II**
A 16-year-old female, presented with problems of excessive social media use. She was the only child to working parents. Her mother reported emotional and other difficulties at home with respect of her daughter’s increased Internet usage, due to which she quit her job in the recent past, to address her technology use. Adolescent’s father was reported to be over-involved with her, and had gifted a computer to her a computer at the age of 12 years for her academic accomplishments. Accessibility to the device caused her to develop the habit of reading through applications. This further led to frequent distractions, subsequently causing a drop in her grades, which led to negative family dynamics in terms of altercations among the parents and the adolescent. This negative family dynamics further caused the client to distance herself from her family in order to avoid the discomfort associated with the same. This also led to increased screen time. She began to enjoy the appreciation, she was receiving on various online platforms, causing her to start spending approximately 6–7 hours/day on social media. Her preoccupation with social media gradually spread across to different areas, with her trying to find other areas of interest on the Internet. The client’s academics were severely affected after she stopped going to school and decided to take a year off. At this time she was bought to the SHUT clinic for intervention. She was assessed for addiction to the Internet, and got a high score on the Internet Addiction Test indicating ‘severe addiction’. In addition to Internet addiction, her parents reported behavioral changes like irritability, anger outbursts, and self-harm threats, whenever the devices were taken away or when there was a fluctuation in net connectivity and when the Internet speed was slow. The client attributed these anger outbursts and behavioral changes to the inability to connect with others. Her behavioral changes even prompted her parents to change the network to control and manage her anger. The treatment plan involved educating her about cyber issues, healthy use of technology, and the possible reasons and repercussions associated with excessive Internet and social media use. In addition, there was also a focus on behavioral management of her anger. Further, parents were also educated about parenting skills and counseled to improve the family atmosphere. The client’s sleep and communication styles improved through the course of treatment.
DISCUSSION

The above two cases have helped to throw light on how increased use of gaming platforms, social media, and the Internet can have a huge impact on the individual's psychological and social environment. The cases have also enhanced understanding of how the loss of connectivity, slower speeds and digital failure can lead to increased irritability and aggression among the regular users and who are addicted to Internet. Behavioral changes in users can also lead to a cycle of the unpleasant and unstable family atmosphere, and further avoidance of family members due to the same. This can subsequently lead to increased use of online platforms as a coping mechanism. According to the literature available, adolescent users with Internet addiction have a higher tendency to experience emotional outbursts.[8] This was reinforced through these cases, which threw light on Internet usage patterns among adolescents and emerging young adults. However, it is important to understand that Gaming or Internet Addiction can have various behavioral and psychological implications, and hence, cannot be understood in isolation. This case series has highlighted how among individuals who show addiction, one of the major sources of discomfort revolves around digital failure and Internet connectivity issues. This is a sign as well as a result of addiction, and can be considered the same as “withdrawal symptoms” as seen with other type of addictions. Research on the effects of the short-term withdrawal from substance abuse indicates deficits in cognitive functions with respect to attention and concentration, working memory, response inhibition, and visuospatial deficits.[7–10] These deficits, when faced with digital failure, can influence and worsen the behavioral symptoms of irritability and aggression, which could result in increased conflicts within the family. This increased criticism causes the user to hide behind a screen and distance themselves from interacting with family members, causing them to face general deterioration in lifestyle features.[11] A recent study reported that the risk factors such as physical abuse in childhood, substance abuse such as alcohol and tobacco, negative peer influence, family violence, academic disturbance, psychological problems, attention deficit-hyperactivity disorder, suspiciousness, loneliness, mood disturbance, negative childhood experience, and TV and media could lead to increased aggression among the young adult population.[11]

In addition to the issues listed above, digital failure can have a huge impact on an individual, such as. An increased tendency to experience the “Fear of Missing out”.[3] Research indicates that individuals who exhibit high levels of neuroticism and Internet Addiction experience increased frustration in the face of Digital Failure. On the other hand, when one is more agreeable and conscientious, it leads to reduced negative responses in the face of digital failure. The people who use technology as a critical component of their life, rather than just as a way to pass time, tend to be more dependent on it, leading to excessive frustration during digital failure. This fear of missing out, coupled with their addiction and neurotic tendencies could have amplified their experiences of frustration, causing them to act out aggressively.[12] Since they also use the Internet as a coping mechanism, this could lead to a cycle of maladaptive usage and frustration associated with the same. Inconsistencies and failures in computers and digital applications can also lead to frustration because of the amount of time lost on the same and the inability to fix the situation.[13] However, in the case of individuals who are addicted to the Internet, this can culminate as withdrawal and anxiety too.[12]

There is very limited literature that attempts to understand the impact of digital failure can have on someone who uses the Internet in an addictive manner. This case series helps put the same in perspective and intends to direct more research toward understanding the possible reasons and factors that influence the same. It also highlights the importance of how anger management must be integrated as a significant component within programs that address Internet addiction. The personality traits and risk factors that make an individual more susceptible to developing emotional dyscontrol along with Internet addiction must also be understood in detail. Another important facet of therapeutic interventions that must be explored is life skill training. Various studies have highlighted that life skills training significantly helps enhance an individual’s emotional intelligence.[13] Emotional intelligence, in turn, is an extremely important factor that enables an individual to manage and regulate the way they feel in various environments. For adolescents, it can enhance functioning in various aspects of life. A high level of emotional intelligence is also associated with lesser hostility and aggression.[14] Hence, it is of utmost importance that life skills training be encouraged among adolescents. It can be delivered through modules in educational institutions, or as interventions that help enhance various skills that an individual must possess. It can also provide adolescents with effective coping strategies when faced with anger eliciting events. It can help broaden the individual’s awareness of themselves and their emotions.

CONCLUSIONS

The case reports highlight the role of digital failure in the experience of negative emotions. It has implications for enhancing emotional control through life skill training. Hence, this study also further recommends understanding how much life skills training can help in the case of
addictive behaviors and the accompanying concerns of emotional dysregulation.

**Declaration of patient consent**
The authors certify that they have obtained all appropriate patient consent forms. In the form, the patients have given their consent for their images and other clinical information to be reported in the journal. The patient understands that name and initials will not be published and due efforts will be made to conceal identity, but anonymity cannot be guaranteed.

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There are no conflicts of interest.

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