

Conceptualizing a New Domain of Client Wellness:

Social Media & Technology Health

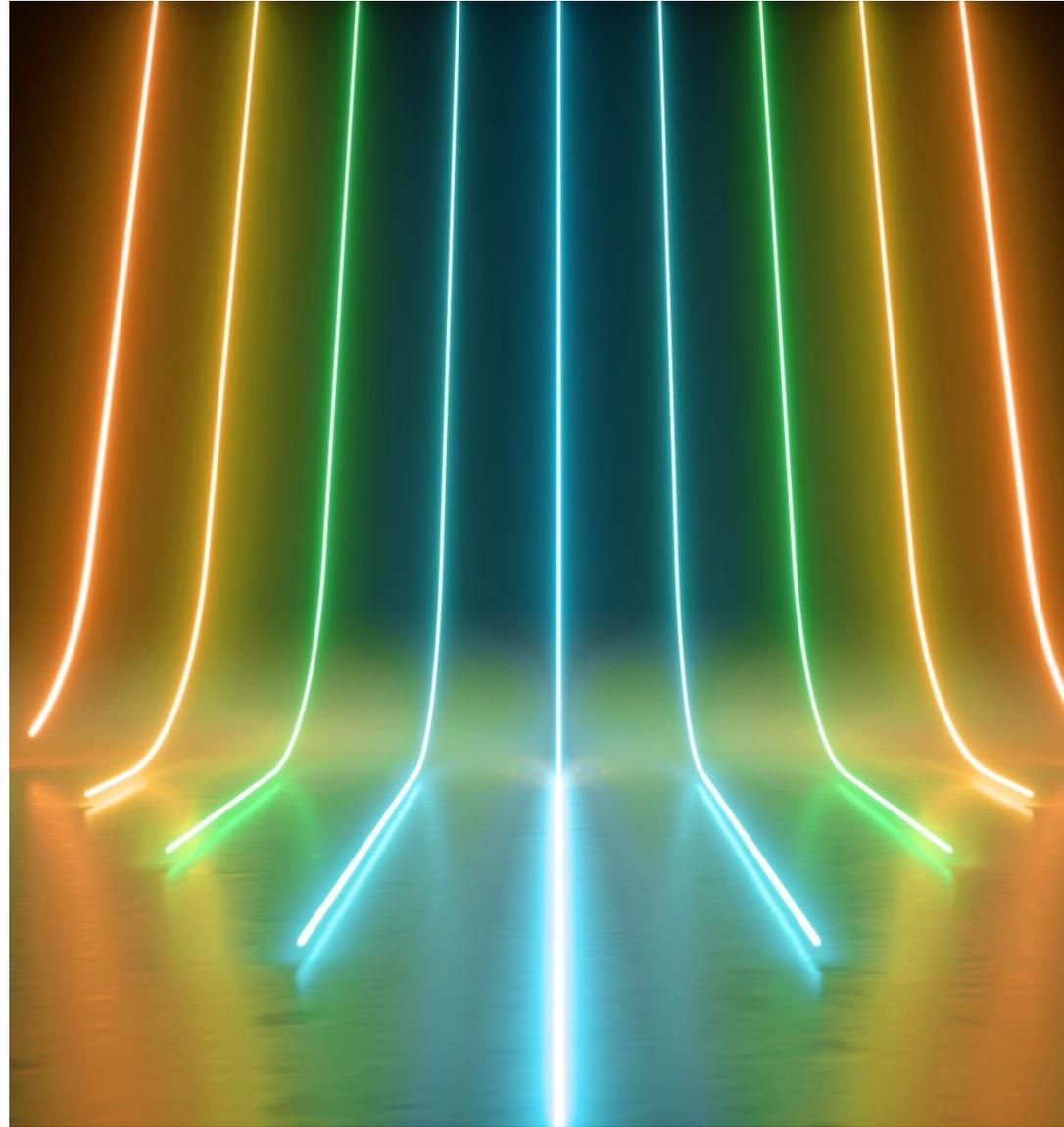
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Learning Objectives

1

Following this presentation, participants will be able to conceptualize client presenting issues using a technology-inclusive developmental mental health framework.

2

Following this presentation, participants will be able to create practice protocols appropriate for specific technology/media-influenced client populations.

3

Following this presentation, participants will be able to locate helpful resources related to mitigating client problems related to technology/media usage.

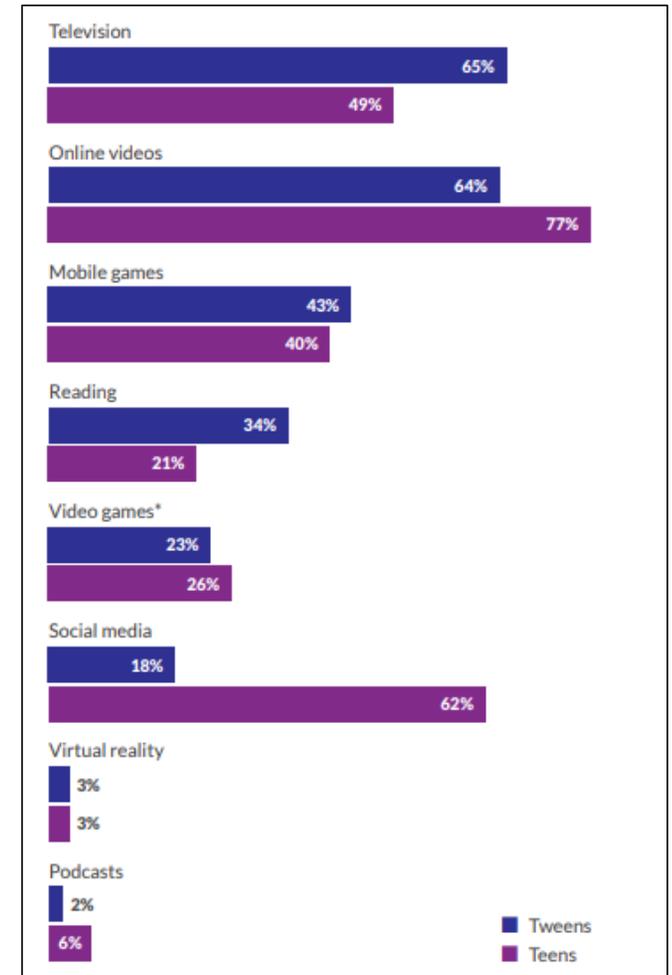


By the Numbers

(Common Sense, 2021; Common Sense, 2025)



- Children aged 2 – 4 spend just over 1hr daily on screens
- Children aged 5 – 8 spend about 3.5hrs daily on screens
- TV and gaming are dominant use until tween and teen stage where usage shifts to social media



Technology and Real People: Why should helping professionals care?

- High usage can: (Petrillo, 2021)
 - Change brain structure
 - Wear out pleasure center
 - Hinder memories
 - Reduce sleep quality and quantity
- Screens provide impoverished stimulation, acting as a kind of intellectual candy with little to no substance (Petrillo, 2021)
- The lack of boredom can stifle creation even when tech is used for healthy activities like reading and studying a language

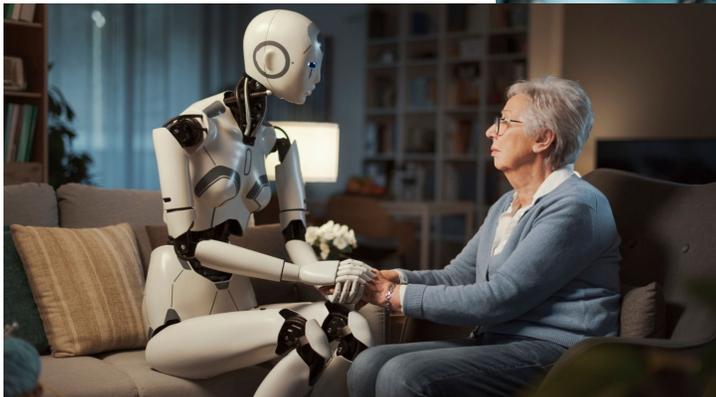


Technology and Real People: A Growing Trend

- Screen/technology usage is up across the board, particularly with younger people
 - Studies by the World Health Organization report (World Health Organization, 2024):
 - 11% of adolescents show signs of problematic social media behavior
 - 36% of young people maintain constant contact with friends online
 - 34% play games daily with 22% of that number playing 4+ hours
 - 12% are at risk of problematic gaming reaching a clinical level
- Other studies indicate that more than one hour of daily use has been shown to increase prevalence of depression, loneliness, and anxiety (Petrillo, 2021)
- According to the non-profit reviewing platform, common sense media, the typical teen spends approximately 9 hours per day using various forms of technology (Common Sense, 2025)

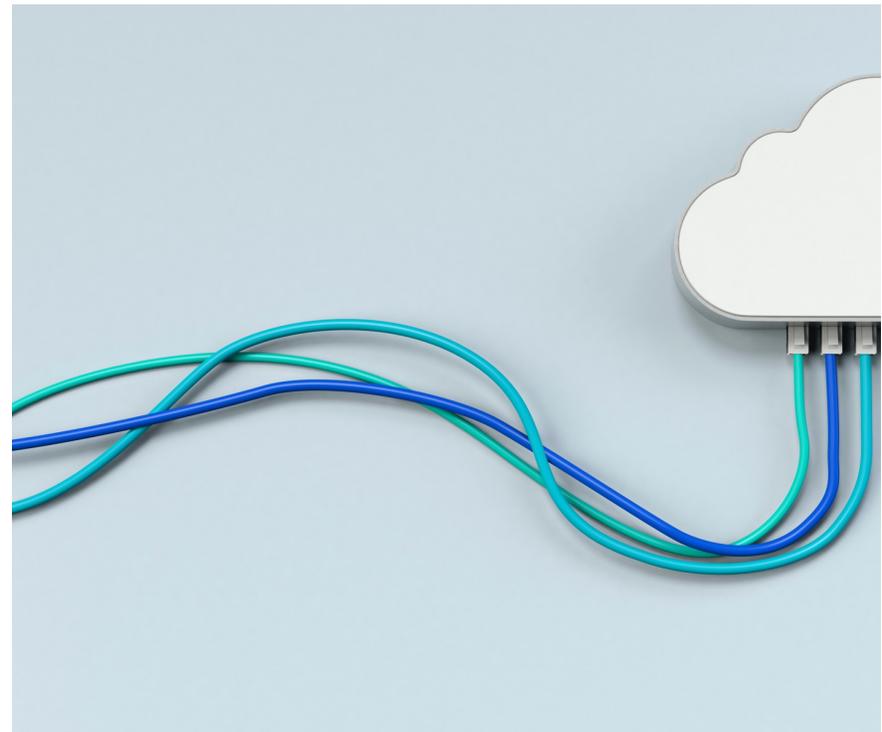
Diagnostic Categories Lagging Behind?

- The DSM-5-TR continues the trend of non-inclusion for non-substance related addiction with one exception being gambling disorder
- The ICD-11 has made some progress with the inclusion of: (World Health Organization, 2022)
 - Gaming disorder (6C51)
 - Specified online or offline
 - Hazardous Gaming (QE22)
- Additional areas of focus
 - Relationships with AI
 - Dependence on social media
 - Algorithm influenced behaviors
 - Vicarious living



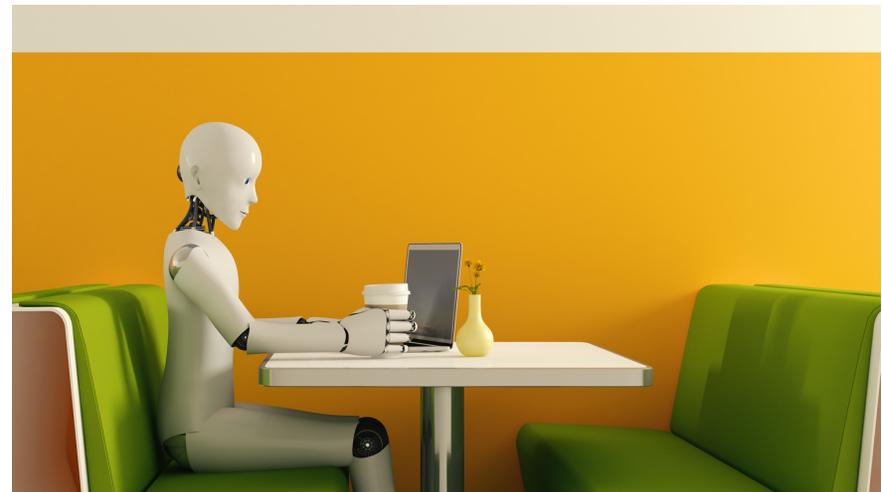
No Doubt About It: Technology is Changing Our Field

- Counselors are using technologies like AI to streamline notetaking and administrative tasks (Whitcomb, 2025).
- The Counseling Compact is continuing to progress.
- The American Association of Marriage and Family Therapists has reported an increase in states signing portability bills toward Access MFT Bills (AAMFT, 2025).



ACA's AI Recommendations for Counselors and Clients

"Artificial intelligence (AI) shows promise as a valuable support tool for delivery of mental health services, educational guidance and career counseling. But the American Counseling Association (ACA), the leading organization representing counseling professionals, warns that consumers should not use AI as a substitute for a human counselor" (ACA AI Working Group, 2024).



Some Ethics of Technology

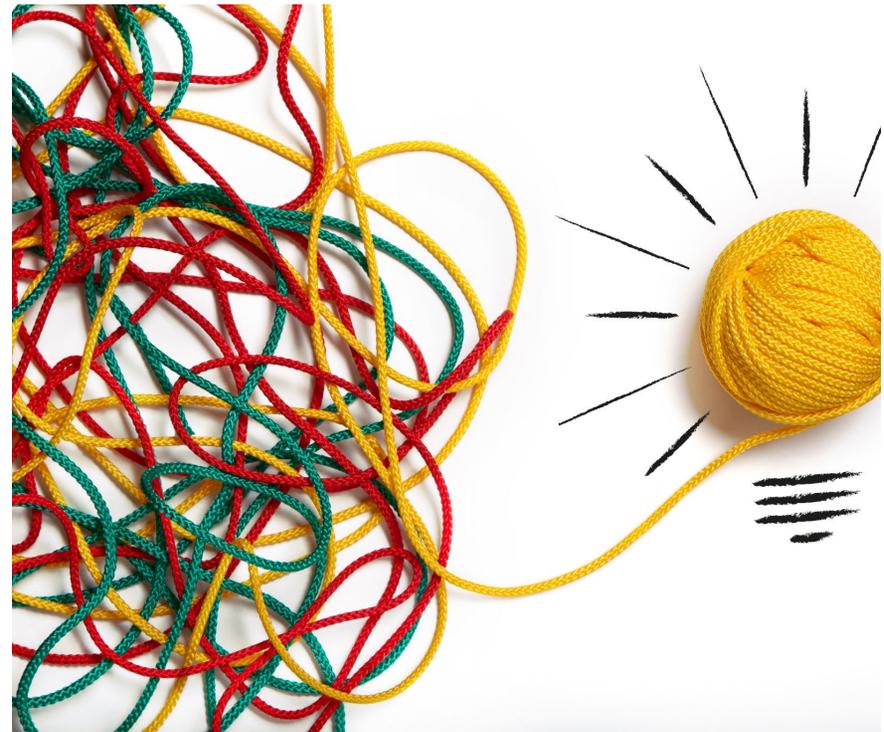
- ACA Code of Ethics (2014) Section H: Distance Counseling, Technology, and Social Media
 - Standard C.2.f
 - "Counselors recognize the need for continuing education to acquire and maintain a reasonable level of awareness of current scientific and professional information in their fields of activity. Counselors maintain their competence in the skills they use, are open to new procedures, and remain informed regarding best practices for working with diverse populations."
- AAMFT Code of Ethics (2015) Standard VI: Technology-Assisted Professional Services
 - 6.6
 - "Marriage and family therapists ensure that they are well trained and competent in the use of all chosen technology-assisted professional services. Careful choices of audio, video, and other options are made in order to optimize quality and security of services, and to adhere to standards of best practices for technology-assisted services, Furthermore, such choices of technology are to be suitably advanced and current so as to best serve the professional needs of clients and supervisees."

Case Conceptualization

Successful case conceptualization includes:

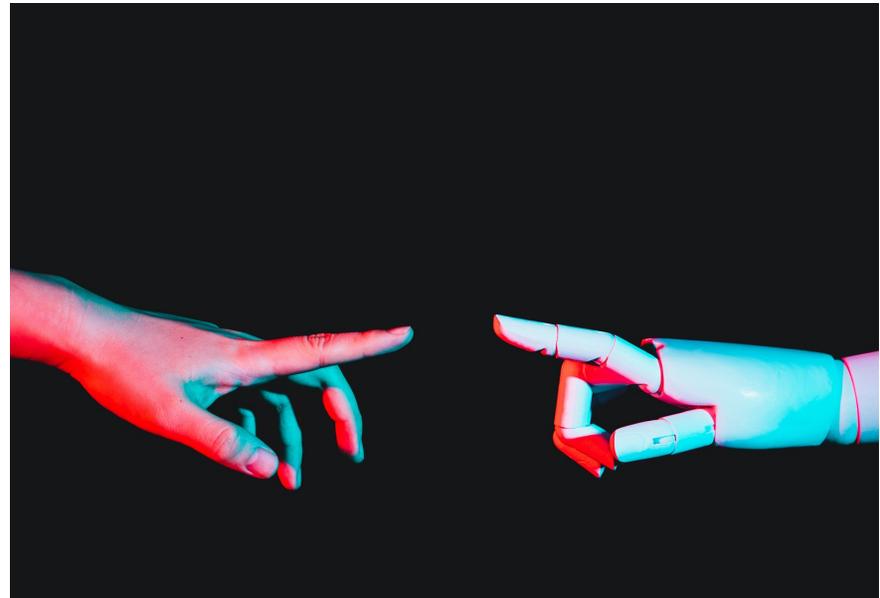
1. "A dynamic, context-sensitive, yet parsimonious model of the client's functioning"
2. "Relevant treatment targets and associated assessment procedures"
3. "A treatment plan including intervention phases and potential obstacles"

(Gilboa-Schechtman & Lutz, 2024, p. 1)



Technology as a Domain of Life

- Consider:
 - What type of device does your client use?
 - What is their relationship to their devices?
 - What role is technology/device use playing in your client's life in general? In their presenting problem?
 - Is your client in a developmentally sensitive period?
 - (American Academy of Pediatrics, 2025)



Technology-inclusive Case Conceptualization

Consider how technology use might be affecting your client's experience and functioning in domains spanning theoretical orientation and modality.

- Biological: Any detrimental effects on quality or duration of sleep? (Hartstein et al., 2024)
- Cognitive: Enhancement or overload? (Clemente-Suárez et al., 2024).



Technology-inclusive Case Conceptualization

Consider how technology use might be affecting your client's experience and functioning in domains spanning theoretical orientation and modality.

Affective: Cravings or emotional withdrawal when unable to use? (ACA, 2023)

Behavioral: Spending excessive time on technology? Physical concerns – headaches, back aches, carpal tunnel syndrome, etc.? (ACA, 2023)

Sociocultural: Limited interaction with those outside of digital community?



Technology-inclusive Case Conceptualization

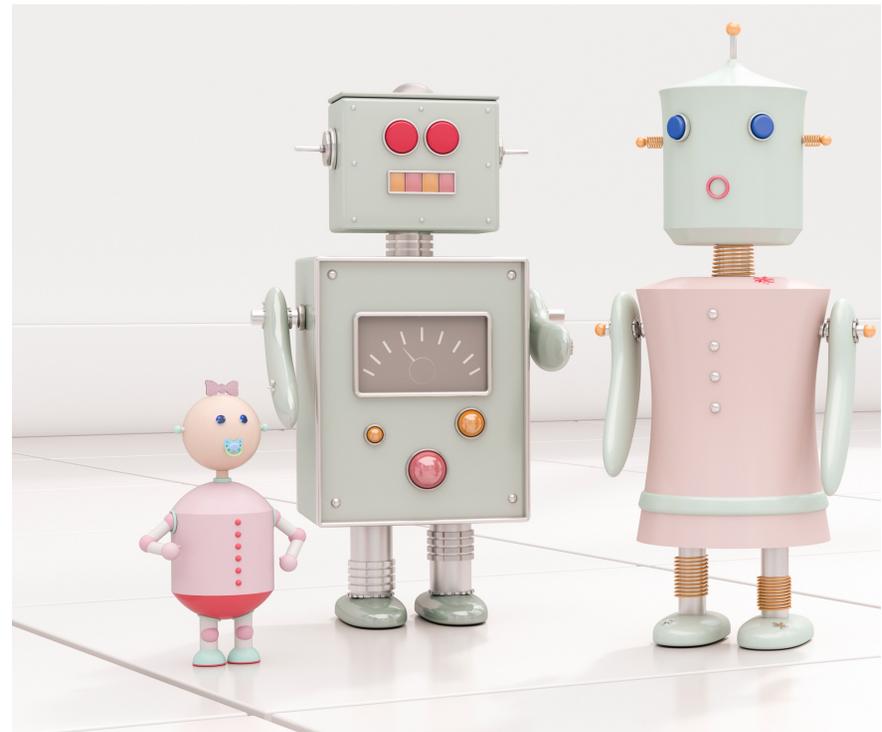
Parenting: What are the family rules around technology use?

Sense of community: Frequency of real-world interactions in community?

Friendships: Limiting friendships to digital relationships/social media/gaming?

Romantic relationships: Making unsafe/unwise relational decisions?

Catfishing? (ACA, 2023)

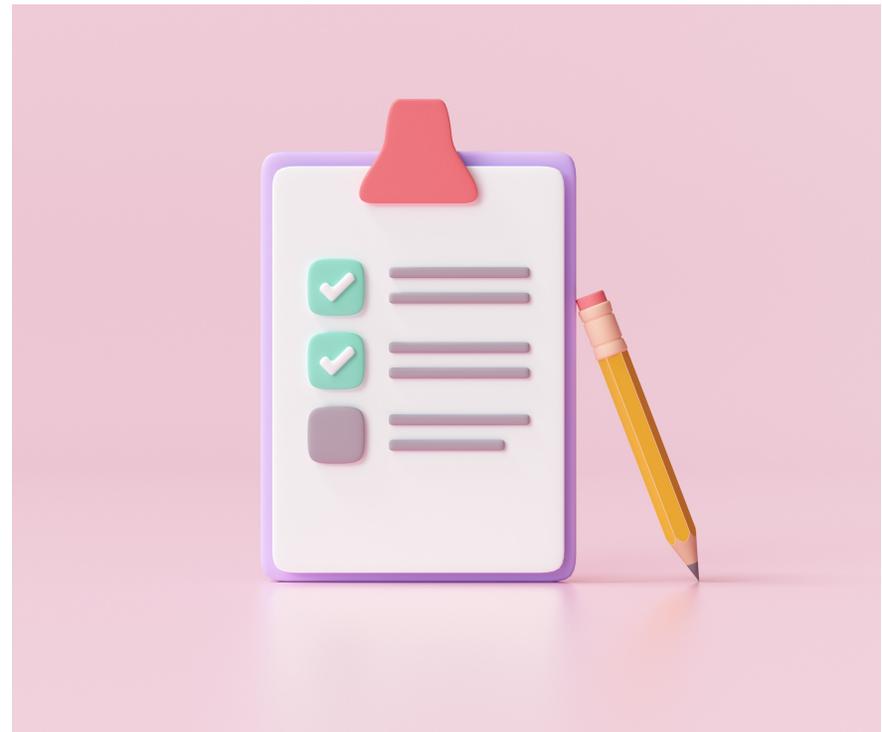


Practice Protocol: Technology-inclusive Intake

Beginning with intake as intervention:
building rapport and collecting data
(Pashak & Heron, 2021).

Does your intake ask about the client's
use of and relationship to:

- social media?
- online gaming?
- apps?
- AI?



Intake: Where does your client turn?



- Channel switching: Clients moving from human, in-person support to digital support (Bond et al., 2025)
- Does your client move to a human first or to technology, social media, gaming, etc?
- Using digital therapy tools may be "helpful but not enough," (Bragesjö et al., 2025).

Clinical Resource: American Academy of Pediatrics Screen Time Guidelines

- Links to info on:
 - Periods of developmental sensitivity
 - Type of device used
 - Demographic and contextual factors
 - Research
 - Practical recommendations

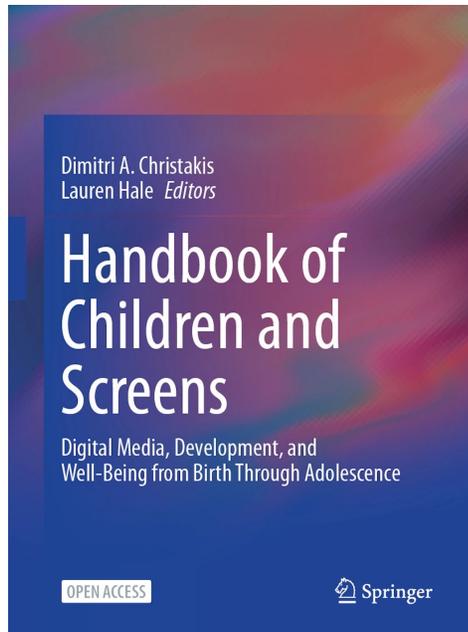


Clinical Resource: Client-accessible Article

- "What Excessive Screen Time Does to the Adult Brain"
- Descourouez, 2024
- Published in Stanford Lifestyle Medicine



Clinical Resource: Handbook of Children and Screens (Christakis & Hale, 2025)



- No cost, open-source PDF book.
- Published by Springer.



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