

Can ineffective parenting during the treatment course of children and adolescents with

ADHD and screen addiction be an obstacle to treatment outcome?

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ADHD and Screen Addiction Treatment Protocol

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INTRO:

- Several barriers stand in the way of proper treatment of Screen Addiction. Screen Addiction (SA) is currently not recognized as an official diagnosis in the field of behavioral medicine^{1,2}.
- Internet Gaming Disorder is not sufficient and is not covered by medical insurances.
- This study presents an outpatient treatment (OT) protocol intended for children and adolescents diagnosed with screen addiction and ADHD.
- The protocol combines behavioral therapy, family therapy, and digital-based interventions to create a well-rounded approach that addresses three key areas of concern: ADHD management, Screen Addiction, and family dynamics.

METHODS:

- n = 44, patients under the age of 18 with
 ADHD and Screen Addiction
- Data collected over 4 years (2021-2025)
- Parents and patients completed survey questionnaires & cross-referenced with session notes

RESULTS:

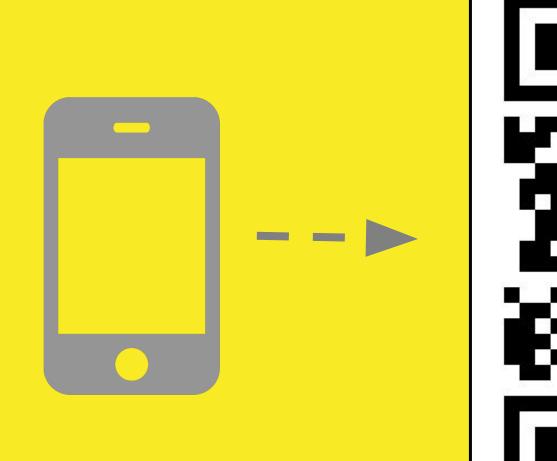
- Patients w/parent participation: 6
- Patients w/o parent participation:
- 16 patients stopped the treatment
- 19 never started treatment
- 3 patients in ongoing treatment.
- Patients who stopped the treated cited reasons relating to parental conflict.

CONCLUSION:

- Main obstacle to the success of this treatment protocol is the lack of parent participation in the treatment.
- Going forward, the protocol will include questionnaires for the parent in order to assess parenting style, parent-child dynamics at intake, during and post treatment.
- Thorough psychoeducational material should be developed and distributed to parents to provide awareness of screen addiction symptoms.
- Future research is warranted to examine this relationship further among patients with strong parental involvement.

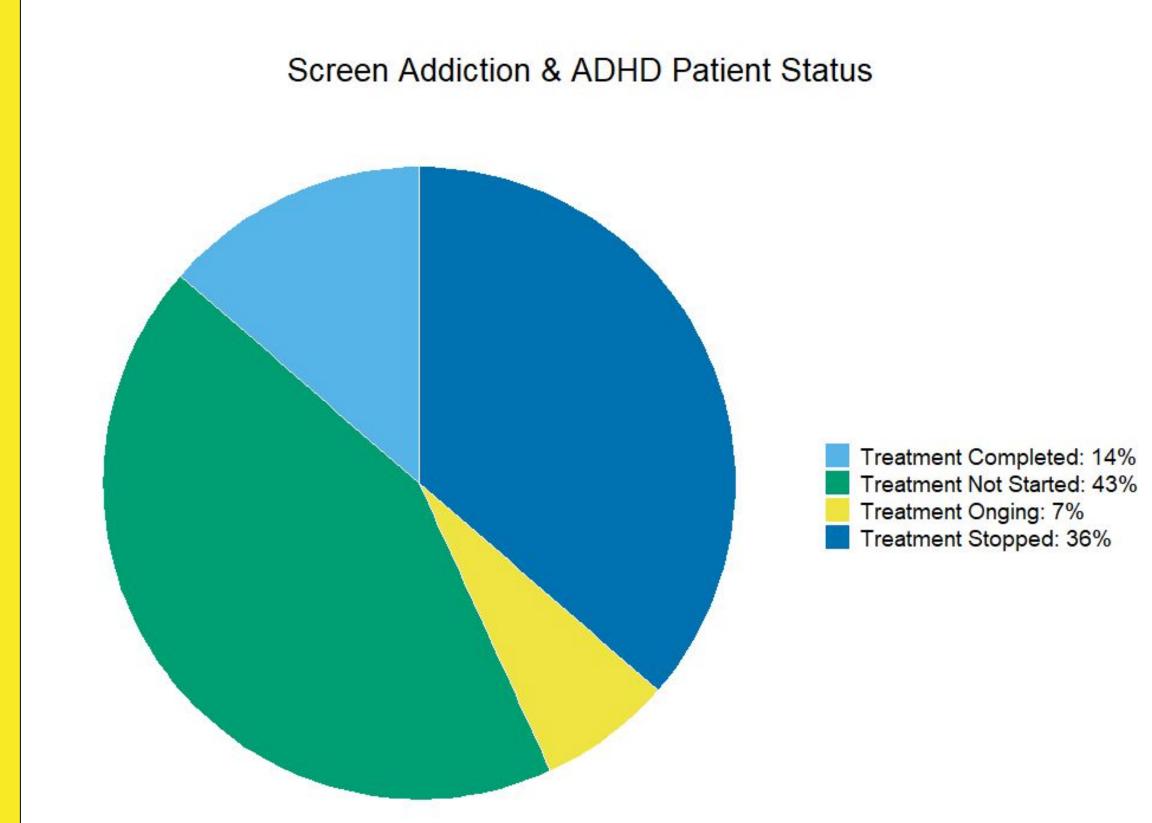
Children and adolescents with ADHD and Screen Addiction who receive effective parental support in outpatient treatment have a higher likelihood of successful clinical outcomes compared to those without parental support.

Take a picture to download the full paper & protocol



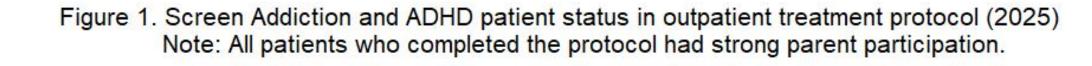


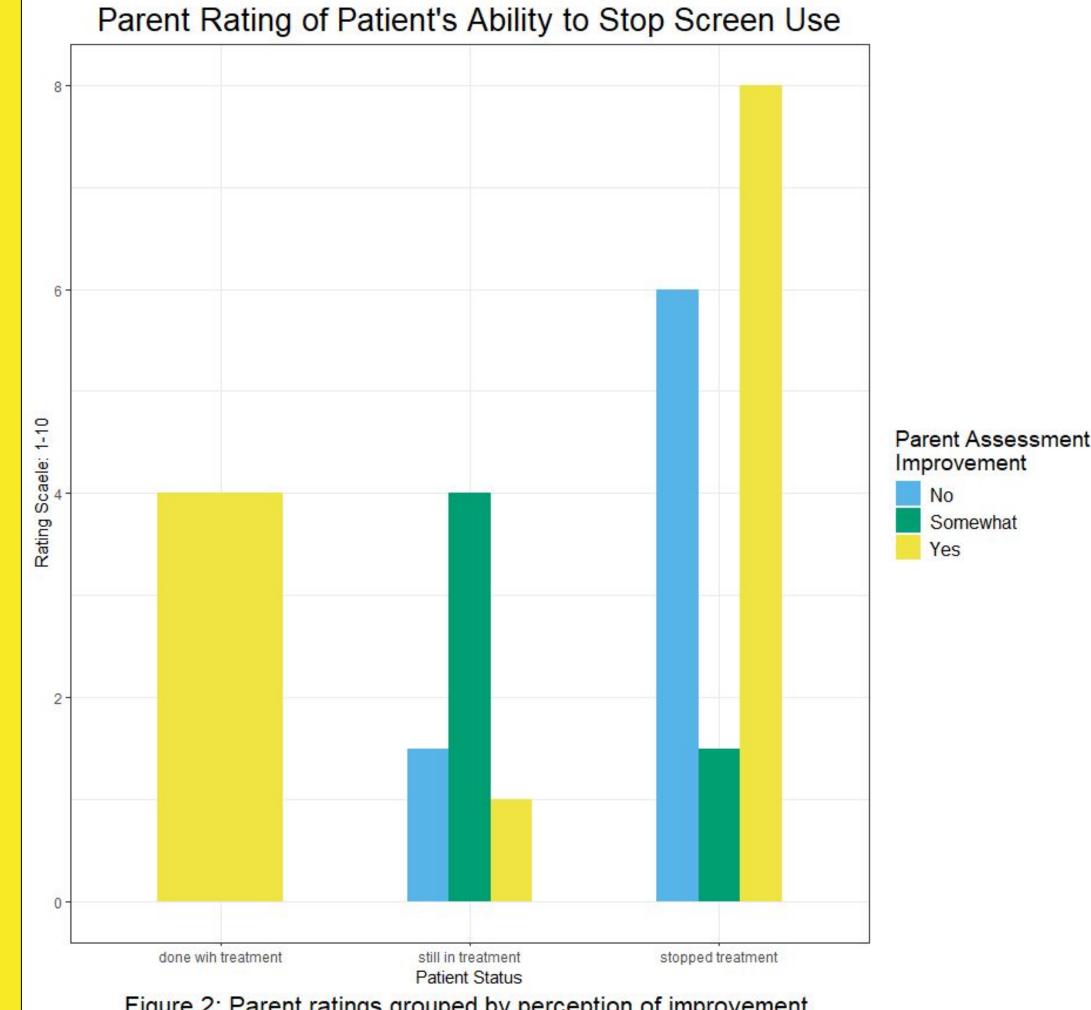
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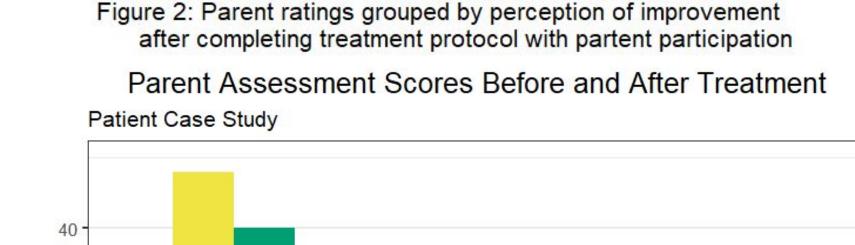


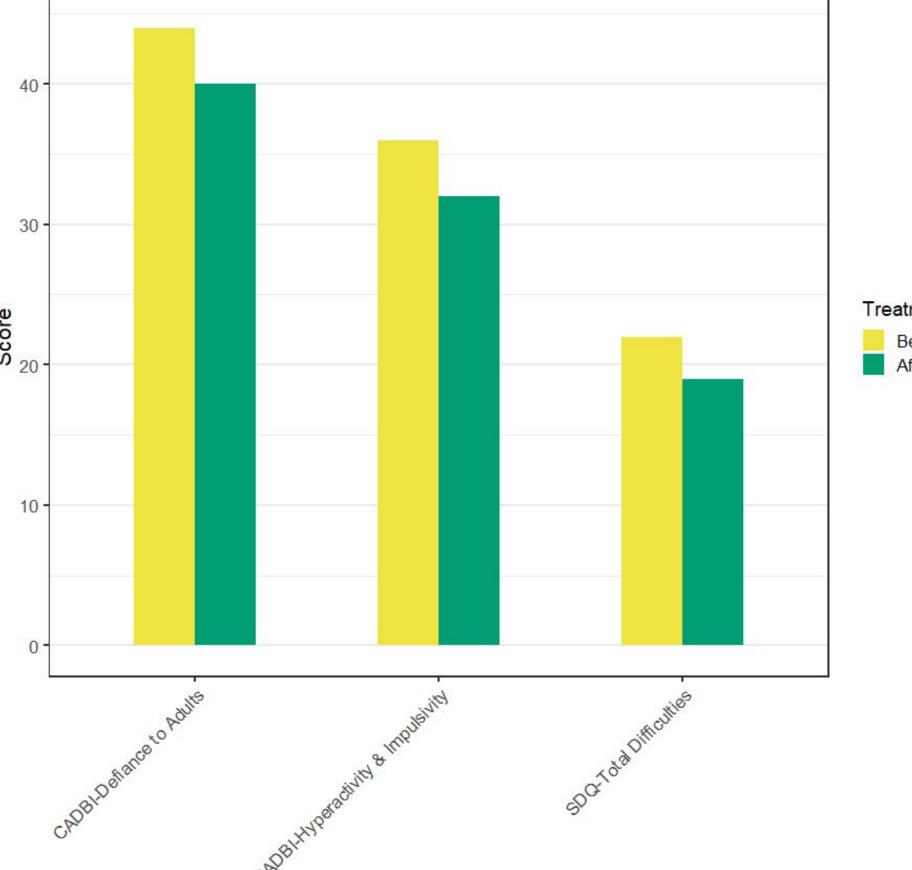
The authors have no conflicts of

interest to disclose









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