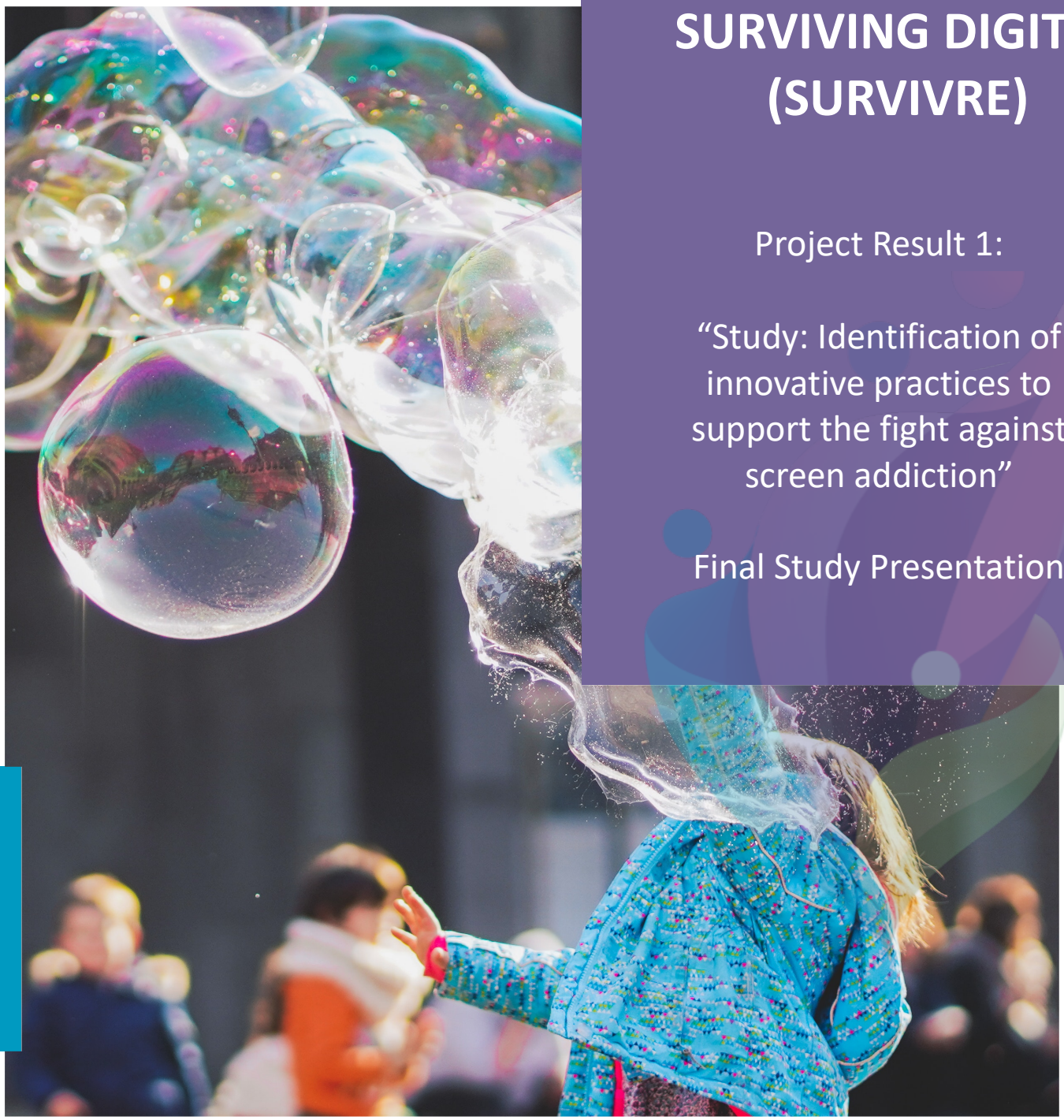
SURVIVING DIGITAL (SURVIVRE)



Project Result 1:

"Study: Identification of innovative practices to support the fight against screen addiction"

Final Study Presentation

surviving digital

Leading Organization:
IASIS NGO
Project Acronym:
SURVIVRE

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1 | PROJECT RESULT 1: “Study: Identification of innovative practices to support the fight against screen addiction”

1.1. Needs and Aims of Project Result 1

In recent years, scientific studies have shown the harmful effects of overexposure to screens of small children. Currently, no practice has been developed which effectively helps adult educators combatting this trend.

Thus, this study aimed to:

- Identify some of the potential obstacles adults might face when trying to minimise screen usage in child rearing.
- Identify practices that can assist the development of new learning materials, which can be appropriated by healthcare professionals who wish to set up their own processes of capacitation against the overexposure to screens.
- Support the acquisition of skills by people with fewer opportunities, based on their knowledge, so that they can become "ambassadors" and accompany the reflection and training of their peers.

1.2. Methodology

Aiming to achieve all the above mentioned and increase knowledge, through the conduction of project result 1, the partners followed the following steps:

- STEP 1:

Conducted a study based on 30 case studies constructed from technical elements and practical, lived experiences focusing on:

- ✓ challenges of adult learning in the fight against screen addictions in general (personally and in the family)
- ✓ levels of competence expected in public or private, small or medium social organizations working in the field of education and health
- ✓ conditions for successful contribution and positive outcomes: social, environmental, cultural, professional, and economic outcomes
- ✓ definition of the results of the contributory approaches with local communities and the impact of these initiatives in terms of public policy

The examples of strategies to fight against screen addiction that will be presented in this document and will also be integrated into local public policies on digital transition.

''WHAT IS CONTRIBUTORY APPROACH?'

The method of contributed research consists of having inhabitants, professionals and university researchers work together in projects designed to offer equal opportunities to each participant to contribute to the dynamics of research, and in this sense become a researcher and actor of their own future.

- STEP 2:

Provided adult educators and professionals with defined learning and support objectives, knowledge for the integration of inhabitants in care as well as with support models, pedagogical strategies, sources of additional information and support, etc., thus enabling the implementation of R2, R3, R4.

- STEP 3:

Developed 10 interviews from which resulted 10 portraits by addressing education, awareness, and learning by fostering input from target audiences, providing resources and models for recognizing the educational contributions of those involved in the process.

- STEP 4:

Identified 10 models of valorisation (concerning citizens and communities), after the conduction of interviews and as a result of the case studies.

2 | PROJECT PHASES IMPLEMENTATION

IASIS as Project Result's 1 leader was responsible for:

- Consolidating all the elements from all the partners.
- Integrating these elements in the Study.
- Detecting the needs and compose the theoretical context, enabling the implementation of R2, R3, R4.

Starting Date: 05/02/2022
Ending Date: 31/09/2022

3 | PRESENTATION OF THE FINDINGS

3.1. Presentation of the 30 Case Studies

FRANCE

- INSTITUT'S DE RECHERCHE ET D'INNOVATION /VILLES SAINT DENIS/LE LABA CONTRIBUTION

COUNTRY / REGIONAL AREA: International with founding members from France and Italy	
CASE STUDY TITLE: **Institutional Psychotherapy**	
DESCRIPTION OF THE CASE STUDY	More of an approach than a singular case study, institutional psychotherapy was developed as a distinct psychiatric practice in the postwar years by a handful of politically engaged practitioners, amongst whom the most wellknown are Catalan psychiatrist François Tosquelles and French psychoanalyst Jean Oury. This group wanted to fundamentally question our understanding of *madness*, considering it as much an expression of social alienation as of individual illness. If it's called *institutional* psychiatry, it is because practitioners of this approach consider the institution to be at once the cause and potential cure of the patients. Influenced by a Marxist tradition, it adds to traditional therapy a permanent critique of the institution and the relations it brings about between patients and carers, between 'sick patients' and so called 'normal people'. The objective is not just to make the illness disappear but also to create the conditions for patients to flourish as human beings. There's an emphasis on resocialization through communal activities, like gardening, sports, music and writing, and rendering patients autonomous by including them in the decisions concerning their own course of treatment. Today, only a few institutions practice institutional psychotherapy in France. The most well-known example is the Borde Clinic, founded by Jean Oury, which welcomes up to 100 patients in full hospitalization and 30 day patients, with additional patients coming in for punctual appointments and activities. Implementing the ethos of institutional psychotherapy, the hospital operates by a principle of free circulation and consent, which means that no one is made to stay somewhere or do something against their will. Patients take care of both the place and each other by undertaking daily maintenance tasks and participating in the analysis of their peers. All aspects of clinic-life are conceived of collectively, including the institutional framework, which is co-constructed with the caregivers, deemed better equipped for this task than a managerial group.

TARGET GROUP OF THE CASE STUDY	Patients and practitioners in the psychiatric health care system. Historically, psychiatrists have also mobilized people outside of the hospital, such as artists, farmers and prostitutes.

ADULT LEARNING CHALLENGES: What are the challenges that are faced by the professionals and caregivers in the fight of (screen) **addiction phenomena**?	– Practicing institutional critique to combat addiction is not a quick fix or solution, it requires a continuous and longterm interaction with the addicted person. It can therefore be costly in terms of human and monetary resources. As such, it goes against dominant trends in public health policies today, which aims to render the healthcare system as cheap and as efficient as possible, working, for example, to transfer even very sick patients away from institutions to private homes where they'll only be monitored occasionally. – Cuts in funding. The Borde Clinic is a private institution that relies on public funding to welcome patients from all classes of society. Without public support, offers such as The Borde, which favours a holistic and long-term approach, can only be offered to wealthy segments of the population. – The intellectual dogma of neuroscience, which tends to discredit a philosophical approach to illness instead of considering treatments derived from the natural and human sciences as complementary.
COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	Conducting institutional psychiatry requires both theoretical and interpersonal know-how. The team at the Borde Clinic is polyvalent, made up of social assistants, educators, and caregivers with qualifications from the fields of psychology and psychiatry. Still, rather than searching for particular qualifications, the Bord Clinic looks to hire staff with certain dispositions, and especially an openness in the meeting with 'the Other'. Working at the Borde Clinic requires a high level of implication, vigilance and rigour, and a flexibility of mind, as staff frequently have to adapt their mode of practicing to new ideas emerging from the group of caregivers and patients. Such natural dispositions are nourished through the practice of Institutional psychotherapy and continuous training, organised by and for the clinic's staff.
CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and positive outcomes?	The creation of a shared healthcare project. Institutional psychotherapy depends on a period of introspection where certain concepts and ideas are defined. It is especially important to consider the role of the patient and the caregiver, as well as terms such as 'madness' and 'healing', a work that's essentially philosophical. In the case of overexposure to screens, a group would have to ask questions like, 'what does it mean to be addicted to screens?', 'how do current private and public institutions create the conditions for unreasoned screen usage?', and 'how might we change these for the better?'. There's also a history to understand: the conditions under which institutional psychotherapy came into being and the system it hoped to challenge. Time. There needs to be the time for patients to, step by step, lay out their own personal path to healing.

IMPACT OF THE INVOLVED PEOPLE OF CONTRIBUTORY APPROACHES: What is the impact of such approaches?	Institutional psychoanalysis does not just *treat* the person in question. Put otherwise, it doesn't just make the addiction 'go away'. Instead, it works to replace mental suffering with meaningful social relationships, by giving the patient the tools and knowledge to keep the illness at bay after the formal treatment has ended. Even when patients are moved to apartments outside of the hospital, they are still given access to follow-up care, to avoid having patients alternating between psychiatric hospitals (crisis) and their reintegration into society. The movement can be said to have long-lasting effects on psychiatry in fighting the dehumanizing treatment of patients which had been normalised by the mid-twentieth century. Institutional psychotherapy also continues to counter an academic current of biological essentialism, which reduces mental illness to malfunctionings in the brain. Because of these qualities, the Borde Clinic is to this day attracting health care workers and researchers from all over the world.
RESOURCES / SERVICES / LINKS	https://www.clubdelaborde.com/

CASE STUDY TITLE: **The Collective Overexposure to Screens** (FRE: Collectif Surexposition aux écrans (COSE))
PARTNER ORGANIZATION:

ADULT LEARNING CHALLENGES: What are the challenges that are faced by the professionals and caregivers in the fight of (screen) **addiction phenomena**?	– Generally, there's little awareness about the problem (this is changing slightly, especially amongst healthcare professionals who observe the consequences of overexposure first-hand) – Those who are conscious of the problem often ignore the different effects screens have on different age groups. – Some are aware of the problem but minimize it or don't create adequate policies to counter it (sometimes due to the lobbying of tech-companies) – The relatively small number of members in the collective makes it difficult to respond to all the requests for public interventions, and to adequately guide the many young scholars who are currently writing their thesis on the consequences of overexposure to screens.
COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	– Specialised knowledge about the development of children. – Profound knowledge about the effects of screens, both empirical and theoretical.

CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and positive outcomes?	– Access to platforms with a large audience (presenting on TV emissions and in radio- shows has a big impact. This is also true for co-eds when these are published in big newspapers) – On the contrary, the censoring of content, which sometimes happens due to pressure from groups with opposing interests, has an adverse effect on the activities of the collective.
IMPACT OF THE INVOLVED PEOPLE OF CONTRIBUTORY APPROACHES: What is the impact of such approaches?	– Making the '4 nos' advice well known and used (no screens in the morning, no screens during meals, no screens before sleeping, no screens in the room of the child) – Introducing a more nuanced, 'pharmacological' reflection on the usage of screens to a wider public (technologies are not good or bad, the nature of technologies is determined by how they're integrated into a social context)
RESOURCES/SERVICES/LINKS	http://www.surexpositionecrans.org/

CASE STUDY TITLE: **10 days without screens with the collective 'Children Television Danger'** (10 jours sans écrans avec le collectif Enfants Télé Danger)

DESCRIPTION OF THE CASE STUDY	The collective **Children Television Danger** was founded in 1994 to address the dangerous consequences of television on children's behavior. Teacher and president of the collective Janine Busson quickly initiated the challenge 'one week without television', which through local social centres encouraged families to commit to doing one week without television. In 2009, now faced with the omnipresence of computers, smartphones and tablets, the challenge was extended to *all* screens. It moved from social centres inside of the schools, where students, with the support of teachers and parents, agreeing to stop using screens (of any kind) for ten days. The 10 day challenge is structured around three class-interventions. During the first interventions, Janine Busson talks about the harmful consequences screens have on the student's cognitive development, behavior and physical and social wellbeing. She also gives them a calendar in which the children can monitor their usage of screens and which, for each day of the week, proposes a new activity the child can do instead of watching television or using tablets (like board games, reading, looking at photo-albums, doing sports, making crepes etc). During this first meeting, the children are also asked to fill out a questionnaire documenting their current screen habits.

DESCRIPTION OF THE CASE STUDY	Towards the end of the challenge, Janine Busson returns to the class to see how the students have done. Their achievement is summed up in a point system – for every day spent without screens they score 2 points, making a maximum score of 20 points for the ten days. During this second intervention, the students also spend time discussing the challenge, the new activities they've discovered, the difficulties they've faced, and the effect the absence of screens, or reduction of screen time, has had on their life. From this meeting, a report is put together to show how the class did as a whole. At the last and third intervention, this report is presented to the class.
TARGET GROUP OF THE CASE STUDY	Children in primary and secondary school and their families.
ADULT LEARNING CHALLENGES: What are the challenges that are faced by the professionals and caregivers in the fight of (screen) **addiction phenomena**?	Finding institutions that are willing to participate in the 10 day challenge can pose an initial difficulty. Janine Busson reports that, when first 'inside' of the institutions, the teachers are excited to participate. They often ask her to come back and run the challenge with different classes ("*The ten day challenge becomes an event, something that children and teachers look forward to.*").
COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	Extensive knowledge about screens. It is important, as the instructor needs to be able to present the children with *arguments* as to why they should change their screen habits. Other versions of this challenge use gifts as a way of motivating the children, but this strategy is short-sighted. If the students don't understand why they're being asked to cut down on screens and see the value in it themselves, the challenge isn't likely to have lasting effects.
CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and positive outcomes?	– Making the students partners of the project. It is essential that the students feel a sense of co-responsibility before going into the challenge. This is brought about by giving children the information necessary for them to define their own objectives prior to the challenge and by trusting them during. No one else monitors how much time they spend using screens per day. The message conveyed is the following: if they're cheating, they're only cheating themselves. – A good support system from the school and municipality, which are in charge of the logistics of the action, like reserving time in the school schedule for discussing and evaluating the projects with students, putting students in touch with local organisations and relaying information about the challenge to parents.

IMPACT OF THE INVOLVED PEOPLE OF CONTRIBUTORY APPROACHES: What is the impact of such approaches?	The challenge reduces the time spent in front of screens, strengthens parent-child communication through the rediscovery of shared activities at home and outside, and broadens social skills by discovering, aided by local organisations, educational activities that leads to the growth of essential capacities such as citizenship, the environment, and non-violent conflict resolution. According to the reports conducted following the challenge, the children picked up new activities during the 10 day period. In 2015, the time spent on board games went up with 76% and the time spent on reading with 80%. The children were generally better at getting school work done. 96% of the children who participated met the challenge, meaning that, for 10 days, they didn't ressort to the screen once. The children who succeeded, expressed pride and a new feeling of responsibility.
RESOURCES/SERVICES/LINKS	http://enfanceteledanger.fr/page7429.html?id=15

COUNTRY / REGIONAL AREA: France	
CASE STUDY TITLE: **Conference cafés with Sabrina Reffad** (FRE: Café conférences avec Sabrina Reffad)	
DESCRIPTION OF THE CASE STUDY	The conference-cafés is a *preventive* action. Its objective is to inform parents about the negative consequences of screen usage as early on in parenthood as possible. This is achieved by seeking out parents instead of waiting for them to look for information on overexposure themselves, at which point screens have often had negative effects on the development of the child. The conference-cafes initiative is a reaction to the staggering number of children showing signs of overexposure who school psychologist Sabrina Reffad meets daily through her work. Together with a network of school administrators, healthcare workers and parent class representatives, she decided to take action. In spring 2022, she invited new parents from her school district to come and learn more about the overexposure of children to screens, in what she wanted to be an informal and friendly environment.

DESCRIPTION OF THE CASE STUDY	Adapted to the constraints of the parents in the neighborhood, the conference-cafés are held in the morning after dropping off the children at school. In order to reach a wider audience, a conference was organized in the evening too, over an aperitif-dinner at the Maison des Parents located in the center of Saint-Denis. A childcare system is put in place for parents who need it. In one and a half hours, Sabrina and her team composed of psychologists, nurses and territorial actors present the main effects of overexposure on the development of the child, covering the delays of cognitive, emotional and social development, the effects on psychomotricity, on sight and on hearing. During each meeting, parents can intervene and ask questions, relating hereby the new information to their own lived experience. Afterwards, the presentation-slides are shared with the school administration, who makes them accessible to parents unable to participate in the meeting. Sabrina also addresses the teachers from preschool directly, who, while often more informed on the topic than parents, still hold certain misconceptions about the causes and effects of the misuse of screens. The cafés conferences are articulated with other actions that can help parents change the way they use screens once they've become aware of the problem. With certain classes in preschool, Sabrine has initiated workshops on playing. In the 45 minutes prior to the morning class, parents are invited to explore different games with their children and reflect on the positive effects such interactions might have on the child. The aim is to eventually make parents feel at ease inventing games by themselves. Recognizing that many parents in Saint-Denis have few means to buy expensive new educational toys, S. Reffad will lead a workshop with parents at the neighborhood center or in the schools, where they will design and make their own games together, which they can take home and use with their children afterwards. Eventually, the parents who've been trained on the issue of overexposure to screens will make their own prevention-poster that will be distributed in the neighborhood.
TARGET GROUP OF THE CASE STUDY	Parents of young children (approximately 3-11 years old). The organisers are hoping to intervene at an even earlier age, by extending their offer to parents in kindergartens.

ADULT LEARNING CHALLENGES: What are the challenges that are faced by the professionals and caregivers in the fight of (screen) **addiction phenomena**?	As with other social offers seeking to aid vulnerable populations, one of the challenges is to reach those who are the most in need. A major challenge when it comes to the dissemination of information about screens is to pass it on to parents who normally refrain from seeking help due to social, economic or cultural barriers. Finding the budget to conduct the events poses another potential challenge. The schools in the area agreed to set aside a budget for children with particular difficulties or disabilities, which can be used for preventive actions, particularly with regards to the risks linked to digital technologies, a model that might serve as an inspiration for other territories.
COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	It is important to have a project leader, who can mobilise a network of territorial actors. This type of action is especially adapted for school psychologists who because of their training are perceived to have a certain legitimacy on the topic. School psychologists also naturally enter in contact with the different demographics needed for this type of action: parents, teachers, researchers, health care professionals. It is essential to have the backing of school administrators who can manage the logistics of the interventions. It is important too, to have a group of mobilized parents who function as ambassadors of the project, especially to relay information to parents who might feel alienated from institutional structures.
CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and positive outcomes?	A key to the successful implementation of this type of initiative is a large territorial network that can help spread the message about the meetings. Continuity is essential too. The success of this kind of initiative relies on having the time to follow parents over a period of time, guiding them through the often difficult process of weaning their children off screens. Finally, it is important to tie together different types of initiatives, thinking the awareness-raising activities together with the promotion of new screen practices. In this particular case, different associations from the area have been associated with the actions, to help point parents to concrete activities that might replace screen time.
IMPACT OF THE INVOLVED PEOPLE OF CONTRIBUTORY APPROACHES: What is the impact of such approaches?	This approach, which is integrated in a local ecology of initiatives and spaces (from the school to local community houses), has made it possible to reach parents who are unlikely to seek help themselves. For certain families, significant changes can already be observed: children who were unable to speak or perform even simple physical exercises like sitting down, have, within less than half a year, showed improvements in terms of communication, motor skills and social interactions.
RESOURCES/SERVICES /LINKS	-

COUNTRY / REGIONAL AREA: France /
CASE STUDY TITLE: **Goose game** conceived by (FRE: eu de l'oie)

DESCRIPTION OF THE CASE STUDY	When alerted by a growing number of children with symptoms suggesting they'd been overexposed to screens, the communication team of the child protection center in Aulney, Saint-Denis, decided to produce a series of flyers and posters advising parents on the dangers of overexposing their children to screens. To their regret, this work proved largely ineffective: parents paid little attention to the posters and no real change could be perceived in their attitudes and screen habits. The board game is conceived as a way of overcoming the inefficiencies of traditional communication strategies. Helene Vielhescazes, the inventor of the game, used the knowledge acquired by the communication team to develop a new format, more likely to engage parents and *actually* make them reflect on how to use screens with their children. The game as such is simple: players throw a dice in turns and move the number of fields it indicates. The player who first gets to the final field wins the game. Of course, the game isn't really about winning – the goal is to learn on the way to the end-field. This is achieved by letting parents move through four different types of fields: an attention-field, which brings the player's attention to one of the dangers of overexposure; a challenge field, which 'challenges' the parent to try a new activity or reduce the time spent using digital technologies; a workshop field, where parents invent rules for a workshop to be conducted after the game; and a question field, where parents get to test their knowledge on a particular aspect of screens and children.

TARGET GROUP OF THE CASE STUDY	While the objective is primarily to reach parents with very young children to prevent overexposure as early as possible, parents with children of all ages can participate.
ADULT LEARNING CHALLENGES: What are the challenges that are faced by the professionals and caregivers in the fight of (screen) **addiction phenomena**?	Making parents come to the workshops can be complicated and the game becomes less dynamic if only a couple of parents participate. Language can be a barrier. Many of the parents in Saint-Denis do not master French and the game is primarily language based.
COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	– Knowledge about screens and their effects on children – Knowledge about the development of the child – Experience in animating a group

CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and positive outcomes?	Having the right amount of time and the right number of participants. The game can be played in one and a half hours, but ideally it would take place over an afternoon to give parents the time to realize some of the workshops that have been suggested during the game. Ten or so participants is a good number. Ideally, there would be an equal number of parents and health care professionals.
IMPACT OF THE INVOLVED PEOPLE OF CONTRIBUTORY APPROACHES: What is the impact of such approaches?	– The game makes parents consider information often lost in traditional communication strategies. – Playing through the topic allows for healthcare professionals to relay information otherwise perceived as very complex, and to advice parents on how to use screens without making them feel guilty for their current screen habits.
RESOURCES/SERVICES /LINKS	

- COMMUNE DE ST DENIS CONTRIBUTION

CASE STUDY TITLE: **Cities mobilizing on the issue of screens and children**	
DESCRIPTION OF THE CASE STUDY	ask the WHO Health Cities network for feedback on projects implemented by other cities on the issue of screens and young children • Pau Béarn Pyrénnées urban community: “My child and thescreens: the guide” - direction of solidarity and health Based on meetings with parents, drafting of a resource guide on screens Since 2015 -> Co-facilitation of numerous “cafes des parents” in nursery schools 2018: proposes to build a guide for parents – 6 working groups with early childhood professionals (PMI, nurseries, city services) - Challenge: allow parents to have clear information on the priority needs of the child for his/her development and understand that screens can harm their development Quiz: to become aware of the presence of screens at home, including their own use as adults- Guide submitted to the Working Group - Dissemination: nursery schools, PMI, nurseries, social centers and services, therapists and pediatricians, pediatrics hospital In the city: 10 days program without screens, use of the guide

DESCRIPTION OF THE CASE STUDY	• City of Roubaix Interventions in schools, nurseries, childcare centers on screens and young children via coffee/debates: Importance of the welcome, the conviviality, presentation of the group – on average between 5 to 10 people Groups of parents and presence of professionals (except in schools so as not to limitate parents' voice) Media used: PowerPoint and videos entry on sleep and the impact of screens – use of interactive tools such as a quiz – agree / disagree challenge: essential to make them talk and focus on the needs for the development of the child These interventions initially allow parents to raise awareness and then according to their family situation, their environment: the discussions relate to small challenges to be carried out on a daily basis (reducing the time spent in front of the screens by proposing another activity : playing with your child, manual activities, going to the park, meeting other children, etc.).

TARGET GROUP OF THE CASE STUDY	Cities of the WHO Health Cities Network
ADULT LEARNING CHALLENGES: What are the challenges that are faced by the professionals and caregivers in the fight of (screen) **addiction phenomena**?	Lots of feedback from cities on projects aimed at pupils (6/12 years old) and teenagers on the risks linked in particular with social networks: cyber harassment, E-reputation, addiction to screens and dropping out of school… but very little on young children Many questions from early childhood professionals about the position to adopt: it seems difficult for them to spontaneously broach the subject of screens with families, which refers to intimacy and the risk of judgment of the family's lifestyle Need to equip them on these subjects and help them open spaces for dialogue, through games or times of conviviality **Families :** - Parents are 90% of the time not or very little informed about the consequences of screens for 0-3 year olds - Families in a precarious situation manage many problems, and the question of screens is not a priority for them - Difficult for families to come to these meetings while they are afraid of being criticized and judged -1st step: start from real uses Need to help them question the place of screens in everyday life and their own use – fun tools: quizzes, questionnaires. Sometimes very high consumption over all times of daily and family life: young people fall asleep with screens, navigate from the age of 3, and parents say that they have few information on those topics

ADULT LEARNING CHALLENGES: What are the challenges that are faced by the professionals and caregivers in the fight of (screen) **addiction phenomena**?	Families in a precarious situation: Many see screens as a help in their daily lives (especially single women with several children) to help them and occupy the children, calm them down, put them to sleep, help them discover things, teach them French... In cramped spaces (hotel room...) with children of different ages: TV on for everyone regardless of age Challenge of not making them feel guilty and being in injunctive forms of full cessation of screens For older children, also refers to the parents' ability to hold a frame, to say no to the child and therefore to subjects around parenthood - whereas for the very young: it is the parent who decides with the use - can be easier to propose behavior modifications because only relies on parents co-construct proposals with parents so that they are realistic and feasible: small challenges such as reducing screen time or playing a family game, organizing a play area, putting the child's back to the TV to divert him from the TV find alternatives without guilt or injunctions impossible to make real
COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	experience in the field of childhood, early childhood animation of discussion groups for parents or discussion spaces involving parents ability to lead professional networks
CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and positive outcomes?	very complex or too brief documents that show the dangers, do not explain them and are very preachy – do not demonize the screen to establish a real dialogue Use existing spaces to offer discussions on the screens by integrating a lot of conviviality: **for example 'Cafés des parents":** less uninhibited relationship of parents (in their relationship to institutions and professionals) - makes it possible to change the postures of professionals (who question their own relationships with screens) generates sharing of experiences and support between parents – sharing tips, advice

CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and positive outcomes?	Do not build spaces for dialogue only with the parents: Professionals from the different places of intervention must participate. Their presence is essential in order to continue the work undertaken and the follow-up of the families. Important to work very early on digital education by targeting parents – provide support - parents lack "benchmarks"
IMPACT OF THE INVOLVED PEOPLE OF CONTRIBUTORY APPROACHES: What is the impact of such approaches?	
RESOURCES/SERVICES/LINKS	

PARTNER ORGANIZATION: Ville de Saint-Denis	
COUNTRY / REGIONAL AREA: France	
CASE STUDY TITLE: **Supporting professionals in an educational program:** example of the Saint Denis cyberbase	
DESCRIPTION OF THE CASE STUDY	The Cyber base: digital space of the city – network created by the Caisse des Dépôts in 1998 – its initial objective: to fight against the digital divide – has gradually evolved towards proposals on innovation, the development of multimedia tools and the support for digital projects. Today: team of 5 animators with common skills and specificities: audiovisual, photo, development (codes), graphics, digital art Educational success program: children and teenagers from 2 to 16 years old, and their parents. It allows families to be supported when they encounter difficulties representing an obstacle to success: personalized course, accompaniment, orientations (around schooling, socialization, cultural openness, parenthood, etc.). The team worked upstream with the young people on social networks (use of the image, harassment, etc.) and the creation of small filmed sketches. Link with the coordinator to propose an intervention aimed at the professionals of the system (7) to equip them on the question of screens: facilitate the link between certain behaviors of young people and possible overexposure to screens. Explanations on the impact of screens on the brain: stimulation methods (exogenous "paradoxical" attention, external stimuli, immediate retribution, etc.) and potential risks (concentration, learning abilities, sleep, social isolation, etc.)

TARGET GROUP OF THE CASE STUDY	Child and youth professionals
ADULT LEARNING CHALLENGES: What are the challenges that are faced by the professionals and caregivers in the fight Of (screen) **addiction phenomena**?	**Stakeholder roles:** Transmit documented information. Professionals may have a somewhat global vision but do not have documented knowledge of the potential impacts of overconsumption of screens. The intervention also leads them to question their own lives and their personal practices. **Challenges** : -> alert them WITHOUT falling into the opposite excess of a systematic link between a child's problem and his/her screen consumption. -> Make them think about their role with the children: Not judgmental or injunctive, being alert to potential problems; Take the time to question the young person and to accompany him individually -> be able to discuss with parents on the use of screens (eg Cose questionnaire) **Difficulties**: -> not all parents are ready to recognize a problem and discuss the subject. -> No official speech that counterbalances the overmediatization of the screens. Unequal fight with very strong advertising presence of companies that promote uses (games, networks, etc.)
COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	Technical skills in the use of screens and their different modalities (social networks, games, etc.) Knowledge of the impacts of screens (development, learning, social ties, etc.) Knowledge of the public, especially young people – who come to the cyberbase

CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and positive outcomes?	- Interest in leaning on a general public campaign (to be built) to pass on information, help raise questions between a child's behavior and his screen consumption for professionals and families -Do not be judgmental and take the time to understand individual situations -To talk to children – essential to target adults to make them think about their own relationship to the screen; then the interest of continuing with setting up projects with young people - Importance of proposing projects led by people who are truly trained in these subjects
IMPACT OF THE INVOLVED PEOPLE OF CONTRIBUTORY APPROACHES: What is the impact of such approaches?	
RESOURCES/SERVICES/LINKS	https://ville-saint-denis.fr/espaces-multim%C3%A9dia

PARTNER ORGANIZATION: Ville de St Denis	
COUNTRY / REGIONAL AREA: France	
CASE STUDY TITLE: **Jeux de carte**	
DESCRIPTION OF THE CASE STUDY	mpedia.fr and AFPA (French Association of Pediatrics) The site www.mpedia.fr is the general public site of the AFPA for parents and early childhood professionals, for 0/5 year olds, with advice from volunteer experts - 1 million visits per month – A focus on the issue of screens – with a specific focus on 0/3 year olds Discussions with Arielle Le Masne, Nadine Frery (Public Health France), François-Marie Caron (AFPA pediatrician Amiens), Sandrine Hannecart (IREPS new Aquitaine), Marianne Massaloux (media cited), Virginie Perrot and Claire Dolard (mpedia) -> Round table in 2019 with 1,000 professionals card game and educational kit (tested with parents and childminders to build it): “you are the best application for your children!” Tool to open the discussion on the subject: card game produced by mpedia, to animate workshops / discussion groups for parents of children from 0 to 6 years old around the use of screens. Discussions around 10 everyday situations with the proposal of small challenges to parents on behavioral changes. The “Less screens, more interactions” project is rolling out awareness workshops on the use of screens nationwide. It benefits from the financial support of Santé Publique France. It is included in the “childhood and youth professionals” toolbox associated with the national action plan for the rational use of screens by children and young people

COMMUNE DE ST DENIS CONTRIBUTION

TARGET GROUP OF THE CASE STUDY	Parents of children 0 to 3 years old
ADULT LEARNING CHALLENGES: What are the challenges that are faced by the professionals and caregivers in the fight of (screen) **addiction phenomena**?	Very few programs focusing specifically on parents of young children and early childhood professionals Ususlly, tools integrate the smallest into more global proposals (eg a board game from IRESP NA) Training of professionals in the use of the card game: monthly workshop program (game training over 2 hours) – 25 workshops (2,000 professionals trained in 2/3 years) Evaluation of the program from trained pros (1,000 feedback) 3 to 6 months after training: PMI, early childhood, liberal health professionals: difficulties in setting up workshops related to the health situation – time available – On workshops set up: positive feedback from parents on the awareness of the importance of interactions – This notion of the importance of interactions is taken up in the recommendations of the High Council for Public Health
COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	health professionals
CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and positive outcomes?	Importance of clarifying the positioning of the proposal holders in relation to the screens - To launch their project: Survey on a well-known program in France “3/6/9/12” by Tisseron; they believe that the principle of “no screen before 3 years” is not tenable for them, cause and effect should not be confused: the danger is not the screen itself (the only physical effects demonstrated are on sleep, they also evoke overweight, language or attention – but not on autism) but what it induces in loss of interactions - Specifically for 0/3 year olds: no interest in being in front of a screen if it is not mediated by the parents, therefore no useful use but not a danger either Central issue at this age: that of interactions with others (particularly the parent) Focus more on non-health/early childhood professionals and expand: around parenting professionals, digital specialists
IMPACT OF THE INVOLVED PEOPLE OF CONTRIBUTORY APPROACHES: What is the impact of such approaches?	

RESOURCES / SERVICES / LINKS	Reminder of the ministerial plan https://solidarites-sante.gouv.fr/affaires-sociales/familles-enfance/protection-de-l-enfance-10740/proteger-les-enfants-face-aux-dangers-du-numerique/article/plan-d-actions-pour- un-usage-raisonne-des-ecrans-par-les-jeunes-et-les-enfants Site pour les parents "je protège mon enfant" https://jeprotegemonenfant.gouv.fr/ Recommendations du Haut conseil de la santé publique Effets de l'exposition des enfants et des jeunes aux écrans https://www.hcsp.fr/explore.cgi/avisrapportsdomaine?clefr=759

DENMARK

- EUROPEAN'S E-LEARNING INSTITUTE CONTRIBUTION

PARTNER ORGANIZATION: EUEI	
COUNTRY / REGIONAL AREA: Slovenia	
CASE STUDY TITLE: **Logout**	
DESCRIPTION OF THE CASE STUDY	Boris Veler, CEO and Co-founder of Logout Logout is the first specialized help center for various risky online behaviors, established in 2011. Our mission is to improve well-being in the digital environment for all, especially children and adolescents, by providing treatment, support, assistance, information, education and awareness of balanced and healthy use of digital media and screen technology. We offer a wide range of seminars, lectures and workshops for different target groups. We also enable an interactive experience of the entire catalog of presented content remotely.
TARGET GROUP OF THE CASE STUDY	Young people ages 18- 25+ and families and teachers struggling to cope with screen addiction in any format and technology overuse.

ADULT LEARNING CHALLENGES: What are the challenges that are faced by the professionals and caregivers in the fight of (screen) **addiction phenomena**?	It is important to highlight that screen addiction is a fairly new topic of concern and so many parents and caregivers may be unaware of the symptoms or signs to watch out for. Parents are the first to feel helpless and distressed in the event of negative changes in children's behavior while playing video games. But screen addiction can also take many formats, some of the biggest challenges faced by parents, caregivers and professionals seeking to help teens can show up in the following ways: • People who become addicted to monitoring social networks often start to shut themselves in and lose touch with themselves and their loved ones, and constant connection to networks prevents them from quality work and relaxation. • People addicted to social networks often also suffer from a form of social anxiety , fear of missed opportunities (Fear of Missing Out - FOMO) . • Video game addiction can lead to endless opportunities for feelings of satisfaction, success or belonging, and on the other hand, perhaps failure in various areas of real life, are a good basis for the development of addiction. • General addiction to the web means time spent online increases and the individual can rarely explain the usefulness, length and content of the activity. This indicates a distorted perception of time. Due to the preoccupation with the Internet, an individual's satisfaction and activity in "offline" life decreases, and the consequences are visible in the field of relationships, family, leisure activities, work or school, etc.
COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	Logout's team members come from various professional backgrounds, their varying expertise makes a very dynamic team. They are predominantly made of educators, psychologists, councellors and youth workers. Co-founder and expert leader of Logout has a background in socio-psychological aspects of Internet communications along with many years of experience in the field of psychodiagnostics and counselling for young people and their parents. Logout's Psychologist's, consultants and counsellors have many years of experience in the field of mental health, addiction, antisocial behavior. Experience with individual counseling and psychosocial help and guidance. The have strong expertise in conducting counseling interviews, experiential workshops, camps and projects for young people.

CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and positive outcomes?	We provide targeted educational material and workshops to help combat screen addiction and technology overuse, programmes about the following topics: • Logout & Restart - digital addiction A comprehensive program designed for individuals who are addicted to digital content. • Digital diet - digital congestion The program is designed for individuals who overuse technology. • Logout & SpeakOut! - cyberbullying Assistance program for child victims of cyberbullying. • Preventive assistance to individuals and families / family e-rules The program is intended for informing and advising individuals and creating family agreements / contracts on the use of digital technologies. • Recharge & Connect - advice for parents • For better family relationships. Support for parents of children with difficulties growing up in the field of digital devices. • Group meetings - parents Supporting and educational group meetings for parents and partners. • Group meetings - children and adolescents • Logout Week - summer camp Summer camp for children and teenagers or how to spend a week without technology. • Reformed For responsible online communication with individuals and the community and for dealing with stress and pressures in various online environments • Profile & Game For players who see the potential for professional video game play.
IMPACT OF THE INVOLVED PEOPLE OF CONTRIBUTORY APPROACHES: What is the impact of such approaches?	

INNOVATIVE APPROACHES: Do you have any further innovative interventions that you may know or want to suggest for being implemented in your working or everyday conditions?	Logout provide various seminars on very niche and specific issues which can be viewed as rather innovative as no educational material currently deals with the vat array of technology addiction topics as our organisation. This can be seen through our services via webinars: • Home alone Concrete assistance to parents in the face of remote school challenges . • Youth and sexuality online Workshop on sexuality, online pornography and e-abuse related to sexuality, with the aim of developing critical thinking towards online content. • Youth and cyberbullying Workshop on various forms of cyberbullying , what cyberbullying brings and how to recognize and address it. • Virtual communities In the lecture, we break down myths about current virtual communities, present their risk and look at the reasons why they are important to young people. • Family E - rules Education in digital with guidelines for parents of children and adolescents. • Angry birds Identifying risky online behaviors and protection for primary school children • Who's in charge, you or the machine? Preventive workshops for high school and university students. • Curious quick fingers Safe use of screens and the web and digital education for parents of preschool and primary school children. • Healthy lifestyle of employees Preventive seminar for companies, organizations and their employees. • Lectures / workshops tailored to you Prevention workshops designed exclusively according to your needs • Dizzying e-bets Workshop on Gambling or Addiction to Online Sports Betting, Gambling and Virtual Currency Speculation
RESOURCES / SERVICES / LINKS	https://www.logout.org/sl/poslanstvo/

PARTNER ORGANIZATION: EUEI	
COUNTRY / REGIONAL AREA: Washington,United States	
CASE STUDY TITLE: **reStart**	
DESCRIPTION OF THE CASE STUDY	Twenty-thousand calls and counting, we clearly understand the problem individuals, families, and communities, are facing when it comes to smartphone addiction, Internet video game addiction, and other screen distractions. In fact, we are the original leaders and founders of Internet and Videogame addiction treatment in the United States. Our pioneering work has paved the way for people world-wide to find resources and support when it matters most. We believe that people thrive when given opportunities to explore life in healthy sustainable ways. Our innovative and progressive treatment assists the digitally distracted to discover their passion and purpose in life using the most innovative care possible. We offer residential care for youth aged 13-18 experiencing school problems, depression, anxiety, ADD/ADHD, learning differences, family conflict. People seeking video game addiction treatment, help with Internet gaming disorder, social media addiction, and help with screen-time use and dependence find hope and healing at Serenity Mountain. We also offer a Summer Intensive programme. Our clinically based therapeutic program offers summer camp fun while addressing core issues leading to unhealthy digital use. Our intensive retreat center and residential care program offers troubled teens and emerging adults a safe, inspiring place to join like-minded people seeking a healthier, happier, balanced digital lifestyle.
TARGET GROUP OF THE CASE STUDY	reSTART is appropriate for teens 13-18 years of age (18 if they are still enrolled in school). We have capacity for 16 teens, with rolling admissions who may be dealing with any of the following problems: • Unmanageable screen use • Family problems • Anxiety • Attention Deficit (ADHD) • Depression • Isolation and lack of friendships

TARGET GROUP OF THE CASE STUDY	• De-conditioned, lack of exercise • Poor diet, unhealthy eating • Strained family relationships • Unhealthy sleeping habits (up at night online) • Decline in academic performance • Low motivation • School refusal • Trauma related issues • High-functioning autism spectrum (possible virtual autism) In order to create a strong, safe & supportive community, we are unsuited for teens with significant substance use, aggression outside the home, eloping behaviors, those who are actively suicidal, and lower funcitioning ASD teens. We are happy to provide referrals to help your child get the appropriate care needed if we are not the best fit. People experience a variety of problems with all types of screen use. We work with individuals seeking video game addiction treatment, excessive smartphone use, in-game gambling, Internet addiction, binge viewing, chronic surfing, posting, and social media influencing. Basically, anything you do online that you begin to use compulsively, excessively or problematically, is addressed during each reSTART experience.

ADULT LEARNING CHALLENGES: What are the challenges that are faced by the professionals and caregivers in the fight of (screen) **addiction phenomena**?	Teens simply want to fit in and do what feels good, leaving parents at a loss in knowing what to do and how to help. Over time, family conflicts arise as parents grow weary of policing their child's devices,and keeping their academic futures intact. This can be a very challenging aspect to deal with for caregivers and is something our therapists are specially trained in dealing with. In addition to parent-child conflicts over use, parents notice an increase in depressive symptoms, anxiety, attention problems, and academic difficulties. As mental health providers, we understand the behavioral changes associated with screen use, and the ways excessive use impairs mental wellness.
COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	1.RESIDENTIAL TREATMENT FOR TEENS What is reSTART Leadership Academy? The reSTART Leadership Academy offers a private school education for our all our teens in residential care who meet enrollment criteria. We seek to re-engage distracted learners and keep them on track with their peers while learning to manage their digital media use.

COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	Our private school is staffed at a 4:1 student: teacher ratio. Your student will get the help needed to succeed while building confidence and competence in his/her academic abilities. The reSTART Leadership Academy is a private school approved by the Office of Public Instruction (OSPI) in the State of Washington. We have a certificated, dedicated staff ready to restore your student's academic future. We understand that a student may have been struggling with school as tech use became unbalanced. At reSTART Leadership Academy, we provide a compassionate, positive learning environment in the classroom, so students can learn and advance. Our certificated, dedicated staff has been trained in Love & Logic® techniques and treat students with kindness and respect. The low student-to-teacher ratio ensures no one is overlooked. Our classroom design reflects the diverse needs of students, too. You'll see learners working at large desks with room to spread out. One student may be pedalling on a stationary bike while reading a novel for English; another will be receiving individualized tutoring in Algebra with a staff member. Look around the room, and you'll see all students working at their own pace on individualized academics. During breaks, students have quick access to the basketball court or the music room, ensuring they come back to class ready to learn. Frequent coaching in all subjects is the norm, not the exception. Healthy snacks and meals are a part of our program, too. We are tech-limited, teaching responsible tech use. At reSTART, our students are taught using text-based course offerings designed to meet individual needs, with options for a slow transition to online coursework as your student progresses in ability to connect with tech in a healthier way. This works well for many families whose students return home prior to all reSTART classes being completed; students can catch up to their peers and return to school on schedule. While attending Washington State Office of the Superintendent of Public Instruction (OSPI) approved reSTART Leadership Academy, students has the opportunity to earn credit through nationally-recognized Alta Independent, an AdvancEd-certified school curriculum organization which is recognized by school districts and colleges across the United States

COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	2. SUMMER INTENSIVES AT RESTART The benefit of the reSTART summer program is that you get a shortened version of our propriety, state of the art, experiential program. This program includes in depth assessments, parent coaching, individual and group therapy, family therapy and our unique program design. This design has been developed over 10 years and has been shown to greatly improve the lifestyle and wellbeing of adolescents and young adults struggling with internet and video game problems and co-occurring mental health issues. reSTART is in favor of encouraging any activity or behavior that focuses on getting our students outside, active, and away from screens for a certain period of time, but for those students that are looking for specific support around Internet and gaming struggles, it is essential that you know the difference between these two options when considering treatment for video game addiction, screen dependence and mental health concerns. WHAT IS THE AVERAGE LENGTH OF STAY? Each person is takes their own path to greatness. Some teens come in 8 semesters behind in school, some only 2. Others enroll to learn how to deal with feelings of depression or anxiety. Others just want to get back on track through credit recovery. Most leave doing significantly better in key areas than when they arrived. We offer year round academic support and credit recovery. Enrollment is usually by the semester. Our summer intensive runs about 8-12 weeks but fills up quickly.

CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and positive outcomes?	We see love, connection and belonging as the strongest motivator of change. We heavily emphasize group interactions because we want to see teens connecting, interacting and building healthy and strong relationships with each other, as well as with our talented, well-qualified staff, and their families.
IMPACT OF THE INVOLVED PEOPLE OF CONTRIBUTORY APPROACHES: What is the impact of such approaches?	

INNOVATIVE APPROACHES: Do you have any further innovative interventions that you may know or want to suggest for being implemented in your working or everyday conditions?	WHAT SERVICES DO YOU OFFER FOR TEENS? reSTART offers a family focused outcome-based therapeutic Residential Program for teens which provides: • Safe home-like environment on a beautiful park-like campus • Comprehensive assessments upon arrival • Academic coaching 4:1 (or better), often 1:1 • Enrollment in our private school which offers Academic coaching 4:1 (often 1:1 ratios); with accredited coursework • Daily groups, covering a broad range of relevant topics related to screen use • Weekly individual sessions, with daily check-ins • Weekly family focused phone calls • Weekly parent coaching • Campus filled with amenities such as basketball court, summer indoor pool, fitness center, music room, art center, yoga studio, horticulture center • Connection with the outdoors on our 32-acre campus and conservation land properties • Service and volunteer opportunities
RESOURCES / SERVICES / LINKS	https://www.restartlife.com/

PARTNER ORGANIZATION: EUEI	
COUNTRY / REGIONAL AREA: New York, United States	
CASE STUDY TITLE: **The Dorm**	
DESCRIPTION OF THE CASE STUDY	John McGeehan, Founder/CEO Amanda Fialk, Partner & Chief of Clinical Services Since 2009, our mission at The Dorm has been to guide young adults towards independence through evidence-based clinical therapies, community support and practical skill-building. Our new Digital Age Group is a therapeutic group designed to address the ever-growing issue of "screen addiction", which includes addiction to various technologies such as smartphones, laptops, PCs, dating apps and video game consoles. The group is both a psychoeducational and process group, where the results of harmful overuse, over-reliance and abuse of technology are examined in a safe therapeutic environment.

TARGET GROUP OF THE CASE STUDY	Young people aged between 13-18 struggling with addictions (including technology) and other mental health disorders. At The Dorm, helping young adults launch independent lives means doing things a little differently. We know that success for our clients means being flexible and truly meeting them where they are right now. That can be literal – with services that extend outside of a traditional office setting with real-time support wherever and whenever they need it. It's also conceptual, and based on where our clients are on their way to independence.
ADULT LEARNING CHALLENGES: What are the challenges that are faced by the professionals and caregivers in the fight of (screen) **addiction phenomena**?	We're still learning about how to navigate the full spectrum of what "screen addiction" can and does look like. We try to use every tool at our disposal to assess our young clients and also keep them part of the discussion, which includes client-led presentations and group dialogue. That being said, our process also incorporates evidence-based monitoring and oversight. We use apps to track clients' daily social media usage in order to help set weekly goals around regulating smartphone usage. We also apply various testing instruments, which can measure a client's level of virtual addiction and help them accept whether or not their lives have become unmanageable due to their technology use/abuse. The problem is growing faster than researchers and scholars can label and document. For example, the fact that "Internet Gaming Disorder" is labeled as a "Condition for Further Study" meaning that the American Psychiatric Association has requested additional research into this growing problem. There is much we still expect to learn and discover about the impact of digital exposure and "screen addiction". What is clear is that there has been a rapid decrease in real-life social and interpersonal interactions and skill building in many adolescents and young adults that seek treatment and an increase in compulsive and maladaptive behaviors. We have seen a correlation between those adolescents and young adults who are spending more time online with a lack of social skills, anxiety and depression. The good news is that The Dorm's treatment model is uniquely designed to help our clients develop a real-life community where they can work on acquiring social skills through practice; skills that may have been lacking due to prolonged cybernetic isolation. In short, we see that true-life community, interaction and experience can be a powerful counterbalance to the digital world and an important one.

COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	As we offer a comprehensive range of Treatment Modalities, we have accredited and licensed therapists in each of theses areas. This includes cognitive behavioral therapy (CBT), dialectical behavior therapy (DBT), EMDR, motivational interviewing, exposure response prevention therapy and conventional psychotherapy/psychoanalysis. Our skills therapists have years of experience working with young adults who are paving a road to independence. Each client is paired with a skills therapist who is a licensed/credentialed member of our team and is not the same as the primary therapist leading individual therapy sessions. Each role is fulfilled by a different clinician at The Dorm so that our clients get the most dedicated care at every touch point during their treatment plan.
CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and positive outcomes?	At The Dorm, helping young adults launch independent lives means doing things a little differently. We know that success for our clients means being flexible and truly meeting them where they are right now. That can be literal – with services that extend outside of a traditional office setting with real-time support wherever and whenever they need it. It's also conceptual, and based on where our clients are on their way to independence. Where we saw one-size-fits-all approaches, we envisioned creative, forward-thinking, client-centered treatment plans, plans tailored to the evolving needs of a young adult. We saw integrated services that would pair evidence-based clinical therapies with skill-building, academic, vocational, and health and wellness supports. We pictured an incredibly dedicated, licensed team that would meet clients wherever they needed support on their road to recovery; at home, at school and out in the community.
IMPACT OF THE INVOLVED PEOPLE OF CONTRIBUTORY APPROACHES: What is the impact of such approaches?	

INNOVATIVE APPROACHES: Do you have any further innovative interventions that you may know or want to suggest for being implemented in your working or everyday conditions?	Our Clubhouse is a young adult community space at the heart of The Dorm's culture that allows for socializing, mentoring and learning. Open during weekdays, the Clubhouse creates a relaxed and supportive environment for our clients to connect with peers, study, attend one of our community events or just kick back and read a book. As we like to say, our strength is our community! We believe that our shared, open community environment promotes socialization, allows clients to exchange ideas with like-minded peers and fosters healthy discussion among peer groups experiencing the same social, academic and vocational challenges. By learning how to engage and maintain healthy, sustainable social interactions day-in and day-out within The Dorm community, our clients develop the skill sets that lead to healthy social interactions and connections in the larger community of family, school, work and friends. Volunteering is another unique aspect of the Dorm. At The Dorm, we offer a community service group that meets weekly and assists in placing our clients in local volunteer opportunities. This can include everything from revitalizing public spaces to assisting in soup kitchens and helping less fortunate populations. Clients who are not engaged in full-time or part-time class, internships, work, or other volunteer engagements will need to participate in at least 3 or more volunteer sessions per week. The Dorm closely vets local volunteer programs and associations to make sure they are a good fit for our community. Volunteering during outpatient treatment helps clients develop a sense of social responsibility, purpose and awareness of the greater community. By giving back, clients receive personal satisfaction by helping to improve their community and feeling more connected to its wellbeing.
RESOURCES / SERVICES / LINKS	https://thedorm.com/

PARTNER ORGANIZATION: EUEI	
COUNTRY / REGIONAL AREA: World wide organisation: UK, Ireland, Austrialia	
CASE STUDY TITLE: **Thrive programme**	
DESCRIPTION OF THE CASE STUDY	The Thrive Programme Explained - The Thrive Programme is a life-changing course that empowers you with the skills, insights and resources in order to take control of your life, bring out the very best in yourself and enjoy everything that you do. The Thrive Programme® is a totally fresh approach to achieving lasting happiness, health and success. The programme teaches you how to manage your thoughts, emotions and beliefs so you can be in control of your life. The Thrive programme has trained Thrive programme consultants based all across the UK, Ireland, Australia, United States, Israel and many more, who train 1000s of clients a year on how to Thrive and overcome mental health struggles. This unique programme is suitable if you are already suffering from depression or other symptoms (e.g. addictions, phobias, anxiety, stress, eating disorders, confidence issues, weight problems, social anxiety), or if you just want to improve confidence, manage life better and prevent issues arising. The Thrive Programme® brings together scientific research and years of clinical experience in a unique and dynamic manner that is easily accessible to all. Although many other training courses and techniques do focus upon some similar concepts to Thrive, most don't go into the same in-depth detail of the underlying fundamentals nor integrate the knowledge in such a comprehensive manner. It is because clients of the programme are helped to attain a very high degree of self-awareness, that they are able to clearly see what they need to do in order to 'get better', and why they are then also willing to put in as much effort as is required. Unlike some other courses The Thrive Programme® is empowering because it is understandable and accessible. It is not based upon 'magical', disempowering beliefs. The Thrive Programme® is not therapy or a treatment programme where something is 'done to' a person. It is all about empowering people to make the necessary changes for themselves.

TARGET GROUP OF THE CASE STUDY	Any person (children will have to be accompanied by guardians) struggling with mental health disorders and seeking help. In particular, Thrive runs a programme specifically for "Smokers" called "Thrive as a non-smoker"

ADULT LEARNING CHALLENGES: What are the challenges that are faced by the professionals and caregivers in the fight of (screen) **addiction phenomena**?	The Thrive Programme looks at addiction in a different way and aims to challenge the "challenges" of addiction. For example, Thrive teaches that the 'medical model' of smoking cessation is unreliable and is based on an addiction theory. This addiction theory is widely promoted by the political agenda, and peddled by nicotine companies, but it is not supported by research. This is why you never crave cigarettes in your sleep, and pregnant women find it comparatively easy to give up smoking. If the addiction theory were true, this would not be the case. 'Thrive as a Non-Smoker' addresses the root causes of your smoking habit by helping you to better understand your thinking styles. Our "Thrive as a Non-smoker" programme shows you why so much that you've been led to believe about smoking cessation is just not true (and any other addiction for that matter). The programme de-bunks addiction theories, removes fear of withdrawal symptoms and cravings, and makes it so easy for you to become a non-smoker.
COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	The Thrive Programme® is not therapy – it is a training course – a clients relationship with their Thrive consultant will be very much like a relationship with, say, a personal trainer. In therapy, therapists 'do stuff' to you in order that they may: elicit changes in you, 'release' some sort of 'block' from inside you. This programme couldn't be more different… clients will be taught everything they need to know in order to: let go of the past, supercharge your self-esteem and self-confidence, overcome any social anxiety or fear and optimize your thinking skills, emotions and beliefs… these are the steps clients need to take in order to feel powerful and take control of their life. A Thrive coach will guide clients through the programme and demonstrate how to apply all the techniques and insights. In addition to coaching sessions clients will be required to put in some time and effort each day in order to put their learning into practice, hone their new skills and ultimately learn to thrive. All Thrive Programme Coaches have completed our unique Training Course, and receive on-going training, mentoring and supervision. They are the only professionals, with a strict code of practice, trained to deliver our unique programme.

CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and positive outcomes?	Through extensive research and refining, we have landed on the right mix of knowledge and action that can transform your life in six weeks. We teach clients how to be powerful, confident and calm in ANY situation in life, giving them the freedom to really make the most of it. Self help books often just give some hints and tips and ideas, whereas many therapies and treatments are something that is 'done' to a person. Our programme is different because it shows you how YOU can fully understand yourself. Clients will recognise the cause of their problems and how to change them, and therefore become a specialist in their own mental health. "This is about YOU, not us." This is why the programme has life-long benefits: once clients have gained self-insight and learned to thrive, they never lose that knowledge and can prevent mental health problems from arising in the future. (In relation to a specific addiction): At the Thrive Programme we want clients to optimise all aspects of their lives: becoming a non-smoker is just one step in the process. As clients work through the Thrive as a Non-Smoker manual or 6-8 week course (with a trained Thrive Programme Consultant) they will also gain insight into how to can regain power and control in all areas of their life: relationships, health and fitness, work and leisure.

IMPACT OF THE INVOLVED PEOPLE OF CONTRIBUTORY APPROACHES: What is the impact of such approaches?	
INNOVATIVE APPROACHES: Do you have any further innovative interventions that you may know or want to suggest for being implemented in your working or everyday conditions?	The whole approach of the Thrive programme is innovative in its concept and delivery, empowering each client to take back control of their mental health. Is it also suitable for children and we even have our 'Bounce' programme, working in education to help children thrive.

	The Thrive Programme can help children to overcome difficulties such as: school-related issues, mental health problems, anxiety; social problems such as low confidence;

INNOVATIVE APPROACHES: Do you have any further innovative interventions that you may know or want to suggest for being implemented in your working or everyday conditions?	bed-wetting; nightmares; eating disorders; OCD and much more. All coaches are fully trained in how best to tailor their approach for the individual. TCs explain things really clearly and have a knack for keeping things 'light'; using memorable analogies, pictures and metaphors to ensure that the message really stays in your child's mind. All children under the age of sixteen must have a parent/guardian present at their appointment; it is also possible to work through as a family.
RESOURCES / SERVICES / LINKS	https://www.thriveprogramme.org/ https://www.thriveprogramme.org/stop-smoking-with-the-thrive-programme/#:~:text=The%20Thrive%20Programme%20is%20a,problems%20you%20have%2C%20and%20thrive!

PARTNER ORGANIZATION: EUEI
COUNTRY / REGIONAL AREA: Copenhagen, Denmark
CASE STUDY TITLE: **Phoenix addiction centre**

DESCRIPTION OF THE CASE STUDY	We are a small treatment place and we value it highly. We are located in incredibly beautiful and cozy rooms in the inner city of Copenhagen, Nybrogade 20 on the 2nd and 3rd floor. It is not our goal to grow up and "produce" sober and drug-free people in a gentle stream. On the other hand, it is our clear goal that those who undergo treatment at Føniks, receive a treatment with quality impact. We have our finger on the pulse and feel what is happening in the house. The fact that we are a smaller place means that there is time for the individual and that no one is overlooked. At Føniks, we work with the individual's total needs, in addition to sobriety and drug freedom. With this holistic treatment philosophy, we identify the client's personal strengths and needs, and help our clients create changes for a healthier and better life. We do individual treatment. We adapt the treatment to the individual.

TARGET GROUP OF THE CASE STUDY	Any person struggling to combat a substance addiction can avail of our services.

ADULT LEARNING CHALLENGES: What are the challenges that are faced by the professionals and caregivers in the fight of (screen) **addiction phenomena**?	At Phoenix, we recognise a long list of challenges when it comes to addiction, especially for next of Kin and caregivers. The harmful effects of addiction range from the individual to the whole family. A major consequence of drug and alcohol abuse is the destruction of healthy family relationships. It is often the case that the addict and the family no longer understand each other. The values that should form the basis for what the family should be built around crumble, communication is reduced and alienation sets in. The family becomes frustrated and stressed. The addict loses an important source of support needed to fight addiction. At Phoenix we also are specialists in dealing with addiction among the elderly population. More people are living longer and more are becoming drug and alcohol addicts. Many people mistakenly assume that older adults cannot be treated successfully. The family may also apologize for the abuse of an elderly relative as a result of grief or loss, or a reaction to boredom. Family members avoid confronting the elderly for fear of making them angry or more upset. Some may think it's worth it, and do you have any right to interfere at all? "That's all they have left." But it will always be worth choosing togetherness over loneliness. Choosing dignity over a life of shame. Choosing love over indifference.
COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	The employees at Føniks Misbrugsbehandling are all competent and dedicated, and they all receive supervision and further training. Our team also consists of psychiatrists, doctors and other highly educated people who we use as a partner, all specialists in alcohol and drug abuse. In each phase of treatment, our team provides encouragement and support to our clients. Each client is guided through a comprehensive diagnosis, individualized substance abuse treatment, and post-treatment options.

CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and positive outcomes?	We offer treatment takes place as day treatment. Experience shows that an outpatient offer is the best solution for the vast majority of people. Studies show that more than 80% are successful in a treatment that allows them to stay at home in their familiar environment. It allows you to meet the challenges that may come while you are in treatment. You have the opportunity to take care of your work, and above all you are in contact with your family and friends while you undergo your treatment, so that you get support and backing for your venture. Traditional forms of treatment play a significant role in the treatment of Phoenix addiction. In each counseling session, we apply a range of treatment methods including Cognitive Behavior Therapy, Mindfulness and Grounding Techniques, as well as motivational interviews to help clients better understand substance abuse and alcohol dependence, they discover their inner selves, and learn positive coping and prevention skills. relapse. We offer basic courses on the following topics; • Alcohol 6-8 weeks • Cocaine 10 weeks • Hash 12 weeks • Treatment Themes un through lectures and group therapy Family treatment As part of Fønik's drug and alcohol treatment, we offer a family program that helps families and other relatives to understand addiction as a disease. The family learns constructive problem solving, and is given tools to build effective support systems. The family treatment sheds light on real challenges and needs, and works in parallel with a client's treatment (not in the same group). Our family program helps to promote healthy family relationships. Our family program includes 5 theme evenings: • Addiction: Theme on the disease addiction and the concept of co-dependence. • Communication: We look at how communication changes while the abuse is going on and show how we get back to a respectful communication again. • Needs: The needs we have are not being met while the abuse is going on, the need for security, financial security, stability, security at work, the need to realize oneself and have some of one's dreams come true. • Adult children of addicts: Growing up with addiction leaves its mark, we look at what significance it can have when a child grows up under these conditions, both in the short and long term. • Values: It is important to learn more about how addiction has affected the individual's function in the family, and to learn new skills to improve their own self-care and restore a healthy balance in the family.

IMPACT OF THE INVOLVED PEOPLE OF CONTRIBUTORY APPROACHES: What is the impact of such approaches?	
INNOVATIVE APPROACHES: Do you have any further innovative interventions that you may know or want to suggest for being implemented in your working or everyday conditions?	Meditation and Mindfulness is one of our innovative approaches to helping our clients deal with addiction. "Consciousness is the best medicine" There are significant reasons why we at Føniks use Mindfulness and Meditation. There is evidence that it can be used in addiction treatment with clear benefits and there are many of them. **The physical benefits** • It lowers our heart rate and blood pressure and thus the stress in our body. • It is associated with rest. We sleep better, so we wake up more recovered. • Activates digestion and rebuilds our bodies. **The cognitive benefits** • It gives more peace to see new perspectives / angles on our problems, it gives others, preferably deeper solutions and more holistic solutions. • Meditation creates brain changes that give less tendency to stress (Meditation activates the parasympathetic nervous system). • Meditation provides better ability to concentrate and strengthens the selective ability to distinguish between what is significant and not particularly important. **Mental capacity and clarity** • Greater satisfaction. • Greater ability to empathize with others (And ourselves). • Greater calm **The brain and meditation** When we meditate, we redirect the flow of blood in the brain, thus changing which parts are active and which parts are less active. After 8 weeks of 12 minutes of meditation, the area of the amygdala decreases in size. The amygdala is called the fear center of the brain. Anger and anxiety

INNOVATIVE APPROACHES: Do you have any further innovative interventions that you may know or want to suggest for being implemented in your working or everyday conditions?	are among the emotions that belong here. Great anxiety is associated with an overactive Amygdala. Underneath all stress lies the feeling of fear or anxiety in all its manifold guises. With the Amygdala as our inner guide, we rarely make intelligent decisions. We react instead of observing, we enter into internal dialogue or ponder the problem. The power of thought The power of thought is very powerful. According to the researchers, you can feel healthy or you can feel sick. You are and will be what you think What many of us did not learn when we were children is that the most important interlocutor we have in our lives is our brain. The brain responds to the thoughts and signals that we send it. Since the brain cannot see, it blinds itself to our thoughts and senses. Are we in a stressful situation, what addiction is! Then we are caught in reacting from the "hamster wheel", and less and less often we reflect. This creates additional stress. When the internal stress is unbearable, we medicate ourselves with our drug/addiction. Meditation and Mindfulness will give us the peace and quiet needed to start a more life-affirming and constructive dialogue with our brain. Through Meditation and Mindfulness, we create a stronger foundation for our sobriety. This will make us "captains" in our own lives. And that life is not so much what is being done to us, but something we are definitely actively involved in.
RESOURCES / SERVICES / LINKS	http://foeniksbehandling.dk/

IRELAND

- MOMENTUM MARKETING SERVICES LIMITED CONTRIBUTION

PARTNER ORGANIZATION:	
COUNTRY / REGIONAL AREA:	
CASE STUDY TITLE: **Warrior Camps** Develop children in the healthy outdoors	
DESCRIPTION OF THE CASE STUDY	Warrior Camp is designed to act as a digital detox and provide counter-balance in our modern world, where the average child spends less time outdoors than an adult in prison! It's about helping children reconnect with nature and with each other
TARGET GROUP OF THE CASE STUDY	Young children/ Parents and carers
ADULT LEARNING CHALLENGES: What are the challenges that are faced by the professionals and caregivers in the fight of (screen) **addiction phenomena**?	To instill a change, reintroduce the child to the wild excitement that comes from tackling the outdoors and having friendly rivalry from the other tribes that are present at the camps. With recent studies showing that Kids these days are spending less time outdoors than Prisoners, the message of the Importance of Outdoor Play has become vital.
COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	Even a dedicated individual with some support can start an initiative similar to this one. Health dn safety should be adhered to. It is ideal when the person in charge of the initiative has knowledge and skills in pedagogy and navigating play in nature. Here is the profile of the Warrior Camp founder: Oliver O'Donoghue, has been working as a Psychotherapist & Mediation Instructor, for many years & teaching Martial Arts to Children for over 20 years. He previously worked in Dublin in private psychotherapy practice, before returning to Dundalk to practice. He has a Bachelors Degree in Business, is a fully qualified Psychotherapist and formerly worked as an underground Minor. He sees that children nowadays are exposed to an environment of extreme digital technology and fast ways of interacting with an unnatural medium which is shaping all types of psychological, physical and emotional issues.

COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	This doubled with a lack of exposure to nature, exercise & accessing their own Imagination. Oliver developed & designed these camps specifically to balance these lifestyles that are very much out of sync with the way nature intended.
CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and positive outcomes?	Parents' collaboration is crucial. There are some rules that must be established so each child has all the needed equipment. Once children have quality outdoor time and develop important skills, screen time has less chance to take over. **01 Get Outdoors:** It's about giving our children the kind of childhood we enjoyed and took for granted before excessive screen-time threatens to take it away forever. **02 Teamwork:** It's about helping children reconnect with nature and with each other, working and playing together as part of a tribe and developing their social skills. **03 Self-confidence:** Warrior Camp helps children to grow and promotes their confidence and self-belief and gives them the happiness that comes from feeling part of a community. **04 Healthy Play:** It's about getting outdoors, playing with other kids, being creative, losing fears and having fun!
IMPACT OF THE INVOLVED PEOPLE OF CONTRIBUTORY APPROACHES: What is the impact of such approaches?	Warrior Camp is TRUSTED BY OVER 1,636 PARENTS. Here are some of the parents' testimonials: «Well done on a very fun week guys! The kids had so much fun at the camp with their Dundalk cousins and can't wait to tell their friends in Tipperary all about it! I can see the bows and arrows getting lots of use» «Oisin was quiet this evening when I asked him what was wrong he replied that there is no Warrior Camp tomorrow !! He had a wonderful week, he came home so dirty each day all I could see was a white smile beaming out at me! (he brought the culprit home»today the burnt stick his "club" lol!) he chattered away happily anout the days adventures and new friends each evening! thanks guys he had a super time!!»

RESOURCES / SERVICES / LINKS	WATCH THE VIDEO TO SEE THIS IN ACTION: https://www.youtube.com/watch?v=3zH64QjNHaU FIND OUT WHAT GAMES CAN BE PLAYED OUTDOORS: https://www.warriorcamp.ie/games-activites/

PARTNER ORGANIZATION:	
COUNTRY / REGIONAL AREA:	
CASE STUDY TITLE: **Digital Wellness Institute -** Skills for Digital Flourishing	
DESCRIPTION OF THE CASE STUDY	The Digital Wellness Institute exists to equip leaders and changemakers with tools to assess and address digital wellness in order to foster a more positive digital culture around the world. The team is also responsible for organizing DWI's nonprofit arm, Digital Wellness Day, an annual holiday campaign that has reached over 7 million globally in 26 countries. Digital Wellness Day provides a year-round free resource hub for all ages to improve their relationship with screens and features expert panels highlighting some of the leading voices in digital wellness education. It has been running for 3 years and counting.
TARGET GROUP OF THE CASE STUDY	Businesses/employees/ Individuals, especially with their quick course and a free ebook: https://www.digitalwellnessinstitute.com/e-book
ADULT LEARNING CHALLENGES: What are the challenges that are faced by the professionals and caregivers in the fight of (screen) **addiction phenomena**?	Professionals and individuals, especially parents of young children, commonly face three main challenges in the fight against screen overuse. First, they lack a common definition of what constitutes problematic use. Second, they face stigma and feelings of shame and negativity that accompany the issue of digital overuse. Finally, parents lack the guidelines for how much screentime is "too much"
COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	Professionals working with children and/or parents with children at high risk of screen education should be well-versed in digital well-being and hold a record of training completion from a certifying body. DWI implements a programme that empowers parents and educators alike to speak on the topic of Digital Wellness and Digital Flourishing® and intervene for those at a high risk of screen time overuse.

COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	The curriculum is designed with the learning flow and competencies: 1. Knowledge • Understand key terminology of digital wellness and the attention economy • Identify the warning signs of technology addiction, technology dependency, and digital distress • Understand current technology trends and their impact on human behavior • Understand the impact of mainstream technologies on mindfulness in society • Discuss the design and regulation of technology for digital health 2. Embodiment skills • Speak authoritatively about the eight components of Digital Flourishing® • Discover practices aimed specifically at improving our relationship with technology • Model the prevention of and recovery from digital burnout and sensory overload 3. Empowerment skills • Coach for effective digital boundaries and intentional technology practices • Assess and track digital wellness over time using research-based methodologies
CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and positive outcomes?	At The Digital Wellness Institute, they believe that parents must model healthy screen use and related behavior in order for the intended changes to be seen in children. Further conditions for successful changes in screentime overuse are a strong community of others engaging in the same habit-changing behaviors. It's also important that employers take the lead on incorporating the "right to disconnect" within their workforce. Doing so allows parents the opportunity to dedicate time away from screen to enjoying activities with their children

IMPACT OF THE INVOLVED PEOPLE OF CONTRIBUTORY APPROACHES: What is the impact of such approaches?	The Digital Wellness Institute has had an incredible impact to date. The Institute was born out of collaboration and contributions among key educational leaders in the digital wellness field. The Digital Wellness Collective grew to become an international collaboration of over 120 companies worldwide. Out of that initiative came the explicit need for standardized education and a training body dedicated to equipping leaders with a common definition of digital wellness and a set of research-based metrics and skills for achieving a more positive digital culture. In March 2020, just as the global pandemic was emerging, the Collective formally reorganized as the Digital Wellness Institute and launched its flagship certificate program for those looking to become Certified Digital Wellness Educators. Since March 2020, the Digital Wellness Institute has taught over 254 students from 36 countries.
RESOURCES / SERVICES / LINKS	The Digital Wellness Institute has created programming to address the lack of digital wellbeing through an empowerment-oriented approach through our Digital Wellness 101 course, our 15 minute micro-learnings on each dimension of the Digital Flourishing® wheel, as well as their 10-week on-demand certification for aspiring digital wellness advocates and experts.

CASE STUDY TITLE: **Let's Play Ireland**, an annual government-led campaign	
DESCRIPTION OF THE CASE STUDY	Let's Play Ireland, is an annual government-led campaign designed to remind everyone, young and old, of the fundamental importance of play. Let's Play Ireland is part of a suite of initiatives for parents created by Department of Children, Equality, Disability, Integration and Youth.
TARGET GROUP OF THE CASE STUDY	Children and Young people/parents and careers The Department of Children and Youth Affairs has worked with key experts across various sectors, Early Years, Education, Health, Local Authorities, Academic Partners in UCC and Mary Immaculate College, Creative Ireland, Tusla and others, in order to develop this resource.

ADULT LEARNING CHALLENGES: What are the challenges that are faced by the professionals and caregivers in the fight of (screen) **addiction phenomena**?	As well as activities for parents to enjoy with their children, the online resources also give tips on supporting children with their feelings, and ideas and activities for learning through play. The Department of Children and Youth Affairs hope the ideas on the website will encourage parents to support their children to use their imagination and own experiences to explore and make new discoveries – from role play, to creative arts, to light play, to malleable materials and many more. The website also includes ideas for how to use resources that can be found at home.
COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	To create a national campaign that is implemented throughout many different government agencies and organisations, the government needed to be involved from the start. In this case the Department of Children, Equality, Disability, Integration and Youth created the campaign. The campaign is supported by a web page on Gov.ie https://www.gov.ie/en/campaigns/lets-play-ireland/ and by the twitter hashtag #letsplayireland and in that sense technical and marketing competences are being utilised.
CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and positive outcomes?	To create a national campaign that is implemented throughout many different government agencies and organisations, the government needed to be involved from the start. In this case the Department of Children, Equality, Disability, Integration and Youth created the campaign. The campaign is supported by a web page on Gov.ie https://www.gov.ie/en/campaigns/lets-play-ireland/ and by the twitter hashtag #letsplayireland and in that sense technical and marketing competences are being utilised.
IMPACT OF THE INVOLVED PEOPLE OF CONTRIBUTORY APPROACHES: What is the impact of such approaches?	The campaign focusses on different themes including Early Years; Storytelling; Play for Play's Sake; Playful Learning; Play and Families; Play and Creativity and Play to Support Well-Being. Let's Play Ireland website provides information on playing in a time of crisis, the right to play, ideas for play, playful families, screen time during the crisis and useful links and resources. https://www.gov.ie/en/campaigns/lets-play-ireland/ Across Ireland these resources have been collaboratively updated and shared and promoted, across communities. They even supported parents during COVID, explaining the best ways to facilitate play during the lockdowns.

RESOURCES / SERVICES / LINKS	• COOKING WITH CHILDREN • SENSORY • LET'S PLAY IDEAS

PARTNER ORGANIZATION:	
COUNTRY / REGIONAL AREA:	
CASE STUDY TITLE: **Fairplay is standing up for kids**	
DESCRIPTION OF THE CASE STUDY	Fairplay is the leading nonprofit organization committed to helping children thrive in an increasingly commercialized, screen-obsessed culture, and they are dedicated to ending marketing to children. Their advocacy is grounded in the overwhelming evidence that child-targeted marketing – and the excessive screen time it encourages – undermines kids' healthy development
TARGET GROUP OF THE CASE STUDY	Kids, families, caregivers, parents and communities/ Educators, administrators, and school systems/ Advocacy towards the general public and policymakers
ADULT LEARNING CHALLENGES: What are the challenges that are faced by the professionals and caregivers in the fight of (screen) **addiction phenomena**?	**- Kids Need Caring, Secure, Face-To-Face Relationships** These relationships are the cornerstone of healthy development, and they're why things like bedtime stories are so great – it's not the story itself (although that's also very good!), but the experience of being cared for, read to, and secure. Despite what Amazon may say, being read a bedtime story by Alexa is just not the same. (And neither are things like online pre-school, virtual charter schools, or hanging out with friends in a Fortnite game instead of IRL.)
COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	Fairplay is a nonprofit organisation and in its team, there are experts on screen time, family and education managers, communication experts, policy advisors, and campaigning experts. The most important competence-related trait is more motivation than competence in this case. It is evident that advocacy at any level is possible as long there is a desire to advocate and understand the harmfulness of screen addiction and media influence on children. What we should take from the Fairplay example is that no matter what competencies and expertise are at current disposal, a positive, change-making initiative can grow in that sense. If people network and come together to advocate and act for the better quality of children and families, advocacy is possible at any local level. Important thing is to start.

COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	Founded in 2000 by Dr. Susan Linn and a group of educators, health care professionals, and parents, Fairplay has built a powerful movement to end exploitive marketing to children and promote a modern childhood shaped by what's best for kids, not corporate profits. You can read the Written Testimony of Josh Golin, the Executive Director of Fairplay before the House Energy and Commerce Subcommittee on Consumer Protection (USA), on the Hearing on "Holding Big Tech Accountable: Legislation to Build a Safer Internet": https://energycommerce.house.gov/sites/democrats.energycommerce.house.gov/files/documents/Witness%20Testimony_Golin_CPC_2021.12.09.pdf That is the level of advocacy possible when motivation is the number one motivator, and the competencies are continuously built around that.
CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and positive outcomes?	Screen-Free Week is our annual invitation to play, explore, and rediscover the joys of life beyond ad-supported screens! Celebrated every spring by thousands of families, schools, and communities across the world, Screen-Free Week is an opportunity to experience what commercial-free time and space feel like Participants pledge to replace screen-based entertainment with offline activities and downtime. It's a chance to see that a different way of interacting with technology isn't just possible – it's also restorative, fun, and even life-changing! Screen-Free Week isn't about what you give up. It's about what you get! An hour once dedicated to YouTube becomes an hour spent outside; ten minutes wiled away on social media turn into ten minutes spent doodling; a video game on a rainy afternoon is transformed into hours reading, chatting, or playing pretend. Screen-Free Week 2022 takes place from May 2-8! Plus, you can join us weekly for Screen-Free Saturdays. Learn more here!

IMPACT OF THE INVOLVED PEOPLE OF CONTRIBUTORY APPROACHES: What is the impact of such approaches?	Working closely with policymakers, health and child development experts, and nearly 40,000 members, they are bringing to life a new vision of childhood — one shaped by what's best for kids, not what's best for profits. 1000+ Action Network Members 10k+ Educational Resources Delivered 150k+ Screen-Free Week Participants
RESOURCES/SERVICES/LINKS	LEARN: https://fairplayforkids.org/resources/ 100 AWESOME IDEAS FOR SCREEN-FREE, READING-RELATED FUN!

PARTNER ORGANIZATION:	
COUNTRY / REGIONAL AREA: GREECE	
CASE STUDY TITLE: **Webwise:** Internet safety education includes screen time management	
DESCRIPTION OF THE CASE STUDY	Webwise is the Irish Internet Safety Awareness Centre which is co-funded by the Department of Education and Skills and is co-financed by the European Union's Connecting Europe Facility. Webwise promotes the autonomous, effective, and safer use of the internet by young people through a sustained information and awareness strategy targeting parents, teachers, and children themselves with consistent and relevant messages.
TARGET GROUP OF THE CASE STUDY	Parents/teachers/youth
ADULT LEARNING CHALLENGES: What are the challenges that are faced by the professionals and caregivers in the fight of (screen) addiction phenomena?	- Webwise is tackling the challange of supporting and educating parents, teachers on ensuring the time children spend online is quality time. They are on a mission to help carers have meaningful and informed conversations with children about online safety.
COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	Webwise draws expertise and competences from it's elaborate network and memberships, as well as experienced staff. They are members of the Insafe network and the SaferInternetIE (SII) project. This is a consortium of industry, education, child welfare and government partners that provide awareness, hotline and helpline functions and activities in the Republic of Ireland. The programme partners include: • Awareness and Education: Webwise (PDST Technology in Education) • Helplines: ISPCC Childline and the National Parents Council Primary • Hotline: The Internet Service Providers Association of Ireland (ISPAI) Hotline.ie The project, coordinated by the Department of Justice and Equality. More information can be found here: webwise.ie/news/the-safer-internet-ireland-awareness-centre-2/ Webwise is also member of the National Advisory Council for Online Safety (NACOS) and is a key educational resource identified in the Government Action Plan for Online Safety. COMPETENCES RESULTING FROM THE ACTION - Carers are building competences to understand how much screen time is too much screen time for children and how to implement gradual decrease

CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and positive outcomes?	Webwise, the internet safety initiative of the Professional Development Service for Teachers (PDST), a support service of the Department of Education and Skills. As such, it has a large scope and reaches. However, the individual programmes within this initiative could be replicated with less scope. For example, organising the internet safety day locally, or recording videos and initiating dialogues about how to have conversations with children about screen time is possible on any scale.
IMPACT OF THE INVOLVED PEOPLE OF CONTRIBUTORY APPROACHES: What is the impact of such approaches?	The number of students engaged in Safer Internet Day has grown by almost 40,000 to 140,000 nationwide since last year. 130 young people have become Webwise Ambassadors and took part in the Safer Internet Day Ambassador Training Programme to learn new skills and ideas for running their own internet safety campaigns in their school, clubs or organisations. The Be in Ctrl back to school campaign created by Webwise, to raise awareness among young people about online grooming hit more than 1 million views in one week. In 2019 Webwise reported they have seen a 25% rise in the use of its resources and supports since publication of the Action Plan for Online Safety by Government. SOURCE: https://www.gov.ie/en/press-release/36f5b9-webwise-reports-25-increase-in-use-of-its-resources-by-schools-and-p/
RESOURCES / SERVICES / LINKS	FOR PARENTS: https://www.webwise.ie/guides-parents/ FOR TEACHERS: https://www.webwise.ie/teachers/resources/ FOR YOUTH: https://www.webwise.ie/youth/

CASE STUDY TITLE: **Barnados** - Online safety programme	
DESCRIPTION OF THE CASE STUDY	Barnardos is Ireland's children's charity. Each year they work directly with over 12,000 children and families throughout Ireland. Barnardos also raises issues through our advocacy programme to make Ireland the best place in the world for all children in Ireland. Barnardos responds to the real difficulties of families. They meet children's needs, providing services that challenge disadvantage, and offer new hope for children's futures. In lighn with this Barnados have recognised that now, more than ever, it is important for children to be aware of how to be safe and resilient online. As a response they created online safety workshops either face to face or virtually.

TARGET GROUP OF THE CASE STUDY	Schools/Parents and carers
ADULT LEARNING CHALLENGES: What are the challenges that are faced by the professionals and caregivers in the fight of (screen) addiction phenomena?	
COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	Barnardos have 30 experienced trainers who deliver the workshops nationwide and they hold regular focus groups with children to ensure our content is up to date and relevant. To ensure our online safety messages are getting home, they also hold parent workshops and webinars. These 45-minute webinars are free to register for on their website: www.barnardos.ie/osp and they generally have two webinars a month during the school year.
CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and positive outcomes?	Since September 2019, with support from Google.org, Barnardos are rolling out a 5 year online safety programme across the country, with the aim of reaching 1,000 schools and 82,000 students overall. They deliver workshops about online safety to primary aged students (3rd-6th class), as well as lesson plans for teachers and workshops for parents. Their student workshops take a positive approach to online safety and we want to empower children to make good choices online, to think critically and to be kind online.
IMPACT OF THE INVOLVED PEOPLE OF CONTRIBUTORY APPROACHES: What is the impact of Such approaches?	Parents and teachers leave these webinars and education feeling empowered; they have an awareness of the risks online for children and practical tips that will help them keep their children safe and resilient online. After completing a webinar on online safety, parents are able to: • outline the key risks for children being online • implement practical solutions and tips to help their children stay safe online • reflect on how they might help their children if they were cyberbullied or cyberbullying • identify helpful websites and signpost them to others
RESOURCES / SERVICES / LINKS	✓ Plugged In Switched Off – a webinar about Digital Wellbeing and Screen time, organised by the Barnardos Online Safety Programme supported by Google.org: https://www.barnardos.ie/media/11534/pluggedin-switchedoff-summary-report-2021.pdf

CASE STUDY TITLE: **UnPlug**: Building a positive relationship with technology	
DESCRIPTION OF THE CASE STUDY	UnPlug is a behaviour change consultancy committed to supporting individuals' and organisations' work smarter in an always-on world. They empower people to build a positive relationship with technology, through the lens of psychology and neuroscience
TARGET GROUP OF THE CASE STUDY	+80 organisations (mostly in Ireland & UK) on helping staff to have a healthier relationship with tech/individuals and their digital habits

ADULT LEARNING CHALLENGES: What are the challenges that are faced by the professionals and caregivers in the fight of (screen) **addiction phenomena**?	People should take control of their technology instead of their technology controlling them. As a result, they should be able to have better attention management, increased productivity and higher quality downtime.

COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	Competencies and skills being developed through Unplug work are Digital Resilience in an Always-on World, Switching Off and Recharging in a Distracted World, and Meaningful Connection in a Hyperconnected World. The UnPlug team includes senior professionals with expertise in business change, psychology, neuroscience, leadership, technology and wellbeing. To achieve this, UnPlug uses its expertise to deliver: • **Keynotes** To raise awareness and inspire people to take action to start to develop improved digital habits and raise awareness of digital culture. • **Masterclasses** 'Solution-orientated' focus groups, with a mixture of presentation slides, interactive sessions for participants, discussion of case studies and the exploration of potential solutions to develop a bespoke solution for groups. • **Advisory** Advisory services to develop a set of bespoke principles of how technology should be used in an organisation. For example, understanding why and how a communications charter can ensure teams use digital technology effectively and encourage a culture of focus within a hybrid model.

CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and positive outcomes?	UnPlug is not anti-technology. If used mindfully, technology has extraordinary benefits. It is the way in which people engage with it that makes the difference. To succeed in this mission, a mixture of keynotes, masterclasses, advisory services and advocacy becomes available to those who are aware and accept that they need these services.
IMPACT OF THE INVOLVED PEOPLE OF CONTRIBUTORY APPROACHES: What is the impact of such approaches?	UnPlug delivers positive change in the following areas: • **Digital Resilience in an Always-on World:** Introduction to Digital Wellbeing with key techniques to work smarter in an always-on world. • **Switching Off and Recharging in a Distracted World:** Taking effective breaks both inside and outside the office. • **Meaningful Connection in a Hyperconnected World**: How to manage social isolation, improve communication and trust when hybrid working. • **Work Design Digital Culture to Enhance Engagement:** With potential "Right to Disconnect" legislation, this programme gives an introduction as to the organisation can review and develop "Digital Culture" (how we work collectively with technology). • **Managing Family Screen Time:** How to manage the blurred boundaries between work and family when remote working.
RESOURCES / SERVICES / LINKS	https://unplughq.com/solutions/ https://unplughq.com/wp-content/uploads/2022/02/UnPlug-introduction-2022.pdf

ITALY

- MATERHUB CONTRIBUTION

CASE STUDY TITLE: **Digital addiction? Sport helps avoiding the risk!**	
DESCRIPTION OF THE CASE STUDY	Sport plays an important role in the growth process in an era characterized by hyper-connectivity and projects such as Beach&Volley School, which are aimed at a particularly sensitive age groups, help children and teenagers to experience real emotions, to intertwine real relationships. Through physical activity, they learn how to get to know each others in real life and as a team and understand deeper themselves, growing their self-esteem and skills.

TARGET GROUP OF THE CASE STUDY	Kids 6-10 years old/ Teens 10-19 years old
ADULT LEARNING CHALLENGES: What are the challenges that are faced by the professionals and caregivers in the fight of (screen) **addiction phenomena**?	To bridge the gap by understanding the digital world of youngsters and learn how to transform the use of devices from passive to active instilling in them sport mindset by making them realize how important sport activities can be for their body but also for their mind.
COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	Competencies and skills that will be developed through Beach&Volley School include tenacity.: ability to fail and learn from the setback and move forward is a vital life skill. Learning that failure is not the end, but part of the learning experience has far-reaching implications, affecting our self-esteem, our resilience, and our mental agility. Teamwork and discipline. Even if motivation is finite, our capacity for motivation can be bolstered. If from a young age we are taught the benefits of sports and hone the ability to work towards a greater reward, evidence show s that people are more likely to experience greater life satisfaction. THE AIM OF BEACH&VOLLEY SCHOOL IS TO: • To improve the autonomy of the participants by educating them in living as a group. Sharing the same space and cooperate in keeping the living spaces clean and tidy will foster the autonomy and responsible growth of the children/teenagers. • To foster respect for common rules, collaboration and mutual commitment, prerequisites fundamental for the development of positive human relations. • To let them play freely outdoor without any digital devices, only Nature, fun and other youngsters.
CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and positive outcomes?	Flexibility: Do not completely prohibit or demonize the use of the digital devices. Create alternatives: Support sports activities, hobbies, passions, relationships.

IMPACT OF THE INVOLVED PEOPLE OF CONTRIBUTORY APPROACHES: What is the impact of such approaches?	• Experience "real" emotions during sport activities to learn how to build "real" relationship in "real" life. • Bring kids / teens outdoor again after those years of "forced home schooling" where they met their teachers and peers in a screen, can help them developing a sense of belonging important that will be beneficial for the rest of their life and that will help them to detach from digital tools. • Sport for sure helps staying fit, having fun, and forming friendships, a good recreational endeavour, but it has also a myriad of other advantages when it comes to instilling skills that will prove essential in their education, employment, and daily life.
RESOURCES/SERVICES/LINKS	BEACH&VOLLEY VIAGGIO DI ISTRUZIONE SCHOOL

CASE STUDY TITLE: **HIKKIKAMORI ITALIA**	
DESCRIPTION OF THE CASE STUDY	Hikikomori association is to have hikikomori recognized as a discomfort of social origin that can potentially affect all economically developed countries on the planet, including Italy. They want to raise awareness among professionals, schools, institutions and public opinion in general, with the express purpose of obtaining greater consideration, support and services. This social isolation is not directly caused by new technologies, the possible abuse of which is often a consequence of the state of isolation. Forcibly depriving the subject of such means is not advisable, especially if they are used as a socialization tool. It is not directly caused by a psychopathology, and it is not static, but manifests itself gradually and can develop on increasing levels of severity. It is not a transitory phase and should concerns the whole family and not just the isolated subject.
TARGET GROUP OF THE CASE STUDY	Parents/educators/psychologists/youngsters
ADULT LEARNING CHALLENGES: What are the challenges that are faced by the professionals and caregivers in the fight of (screen) **addiction phenomena**?	Recognizing that it is the entire family that has a problem, not just the hikikomori. A change of approach is required by the parents. They need to understand that it is a real problem and not just a whim, and they cannot solve it just by asking a psychologist to take care of them.

COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	The main objective of the "Hikikomori Italia" association is to inform, raise awareness and attempt to ignite critical thinking about the phenomenon. The aim is to understand, not cure. To address the problem without stigmatizing it and without judging. Internet addiction in this case is more a consequences than the cause, considering that the youngsters decide by themselves to enter in a state of isolation from the "real world", and being isolated in their room, they start to use and be overexposed to screen. They become serial gamers, create a parallel reality in the virtual world and do not want to be distracted by their parents or any other acquaintances that is around. In this case parents, together with carers, psychologists etc need to identify as soon as possible the problem and try to solve it before it becomes cronicle. They need to improve their reletionships with children and with technology in general, in order to recover from Hikkikamori state and burnout due to extreme use of digital devices during their isolation.
CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and positive outcomes?	Welcome parents to the national online mutual aid group, so that they can begin to engage with others who have had similar experiences to theirs and thus understand which attitudes are positive and which are negative. Calm down and stop blaming each other, because anxiety, panic and guilt only make the situation worse, instead than help.
IMPACT OF THE INVOLVED PEOPLE OF CONTRIBUTORY APPROACHES: What is the impact of such approaches?	• Self-training is a fundamental step because parents are the first "co-therapists" so the impact is firstly on them and then on children that isolate themselves. • Implement a conscious use aimed at enhancing the positive aspects of digital devices.
RESOURCES/SERVICES/LINKS	https://www.hikikomoriitalia.it/

CASE STUDY TITLE: **How your smartphones affect your brain?**	
DESCRIPTION OF THE CASE STUDY	The brains of young people who use smartphones or the Internet excessively could be affected by neurotransmitter changes. These results were presented by a group of South Korean researchers at the latest annual congress of the Radiological Society of Northern America held in Chicago on November 30, 2017. Paolo Amami, neuropsychologist and Daniela Calandrella, neurologist analyzed those results. It involved 19 teenagers with an average age of 15 and a half and all with smartphone or internet addiction. Addiction was diagnosed by evaluating the amount of time they spent using internet or smartphones, and the negative impact this use had on daily habits, social life, productivity, sleep and behavior. A group of 19 youngsters (same age) who did not have addictive symptoms was used to confront the brain results. For the investigation, spectroscopy with magnetic resonance technique was used, a non-invasive neuroradiological study method that allows to obtain metabolic and histological information of the tissues from an MRI scan of the brain. Scientists were particularly interested in a neurotransmitter, GABA or gamma aminobutyric acid, which has an inhibitory function, and two amino acids, glutamate and glutamine, which interact with GABA. GABA is involved in the control of functions such as vision, movement, mood and sleep. The researchers observed that adolescents with smartphone or internet addiction problems had higher levels of GABA than those of glutamate and glutamine in the anterior portion of the cortex that is a portion of the brain where the integration of cognitive, emotional and motivational processes takes place. However, the alteration of GABA would be reversible: in fact, in twelve of the young people with the addiction disorder who took part in a cognitive-behavioral therapy program lasting 9 months, it was observed that the level of GABA "normalized“.
TARGET GROUP OF THE CASE STUDY	Parents/psychologists/educators
ADULT LEARNING CHALLENGES: What are the challenges that are faced by the professionals and caregivers in the fight of (screen) **addiction phenomena**?	The fact that parents, majority of the time try to underestimate the time the children are connected online, and they see that for toddler is easy to make them calm when they are outside, so it is a big challenge for them to try to keep the baby occupied in a different way that does not have anything to do with digital devices. The major challenge is let them understand that be over exposition to screen can bring some damages to children’s brains. In addition to its negative effects on cognition, excess internet use has been associated with a higher risk for depression and anxiety and can make us feel isolated and/or overwhelmed

COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	The parents need to be more proactive and always ready to listen to their children. Good listener and good mentor to avoid the "sharenting" effects of smartphones. Parents needs to build competences to understand how much screen time is "too much" for children and when it is time to say stop and ask to reduce the time spent online and use that time to do some outdoor activities. "To grow up healthy, children need to sit less and play more" as specified in World Health Organization's guidelines on children's physical activity in 2018.
CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and Positive outcomes?	• Organization of campaigns aiming to educate the broader public—and particularly parents—on how to stop cyberbullying. • Development of a National Strategy for combating cyber bullying, including child pornography.
IMPACT OF THE INVOLVED PEOPLE OF CONTRIBUTORY APPROACHES: What is the impact of such approaches?	Parents need to provide him with that "lobe" of prefrontal cortex that he is biologically deficient to help him reflect, think, plan behaviors, weigh pros and cons, and identify the best strategies to achieve the set goal and guide him to activities, alternative to technology, that create the dopamine rush he needs, such as sports, volunteer experiences, wellness activities, expressive activities. Improve the relationship parents – children asking for some help to psychologists and experts of the issues related with internet overexposure.
RESOURCES / SERVICES / LINKS	https://digiovannisimona.it/2021/03/06/la-dipendenza-dalle-nuove-tecnologie/ https://www.frontiersin.org/articles/10.3389/fpsyg.2021.763759/full https://www.who.int/news-room/detail/24-04-2019-to-grow-up-healthy-children-need-to-sit-less-and-play-more https://www.parentcircle.com/the-negative-effects-of-internet-addiction-in-children/article https://www.centrosalem.it/mioli-chiung-psicologa-milano/

CASE STUDY TITLE: **LOG OUT LIVE NOW**	
DESCRIPTION OF THE CASE STUDY	Log Out Live Now organizes Digital Detox experiences and retreats where participants abandon their digital devices. It is addressed to people of all ages, from kids to elders, companies and employees. Unplug and gain wellbeing, time and productivity. Activities offered are trekking, kayaking, yoga, boat trips, experiential workshops and seminars on digital wellbeing. The goal of Digital Detox is not to eliminate technology from our lives but disconnect for a period and learn how to use it more consciously daily.
TARGET GROUP OF THE CASE STUDY	Companies/workers/ Adults, teens, children
ADULT LEARNING CHALLENGES: What are the challenges that are faced by the professionals and caregivers in the fight of (screen) **addiction phenomena**?	Know the psychological levers used by tech companies to let us become addicted to those devices. Awareness of the severity of the negative effects of addiction.
COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	• Make technology an added value by enhancing the positives and eliminating the negatives with specialized trainer Gavino Puggioni. Acquire new digital habits that will make you use digital in a moderate and conscious way, improving many aspects of your life. • Logoout Livenow carries out digital wellbeing interventions for: companies, training schools, conferences, schools (primary, secondary, high schools) and individuals. • Topics depending on the target audience: time management, stress, increased productivity, how social attracts us and how to defend ourselves, the effects of social networks on work and study, digital device management for children and families. • Learn how to create useful and productive limits on digital devices. • Assess and track digital wellness over time spent on those devices. • Find out a better way to improve our time on screens.
CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and positive outcomes?	Log out Live Now is part of a consortium of 40 operators who are strongly driven by shared values and with passion cooperate to promote the values of sustainability, reducing the impact on the environment, offering authentic experiences, enhancing their land and at the same time preserving the heritage, guaranteeing environmental, social and economical sustainability. They also create alternatives: sports activities, clay modelling, cooking classes etc. The one activity that is done in all digital detoxes is the digital wellbeing seminar. The seminar aims to create awareness about the use of digital devices by learning how they attract us and how to manage them gaining: wellbeing, time and productivity.

IMPACT OF THE INVOLVED PEOPLE OF CONTRIBUTORY APPROACHES: What is the impact of such approaches?	We want to create a community of people who are constantly confronting and helping each other, learning to educate to digital, especially the little ones. We want to make thousands of people experience the emotions and benefits of Digital Detoxes. We want to have a positive impact on people's lives by achieving a balance between real and digital life that we have now lost. At the same time, we take the opportunity to enhance our wonderful land, the perfect place to live this type of experience. Having a positive impact on people's lives by creating awareness on the use of digital devices and making them live unforgettable experiences, enhancing our beloved Sardinia. Sharing special experiences, creating human relationships living a unique "journey" inside yourself aiming at enriching the spirit.
RESOURCES / SERVICES / LINKS	https://www.logoutlivenow.com/en/daily-digital-detox

CASE STUDY TITLE: **UPPA & BILL** «Online» and «offline» books	
DESCRIPTION OF THE CASE STUDY	The Library of Legality (BILL) is a national project conceived and promoted by Associazione Fattoria della Legalità, Libera, ANM subsection of Pesaro, AIB Marche, Ibby Italia, Municipality of Isola del Piano, ISIA Urbino and Forum del Libro. BILL was born from the observation that in our country we still read too little. On the contrary, the statistical percentages on teens crime (cyberbullying, bullying, drugs etc) are dramatically high. Two emergencies that act in crucial areas for the construction of citizens aware of an advanced country: culture and civic spirit. New technologies have changed the interest of young people, the dimension of reading, storytelling and the use of books. Uppa instead is the publishing house specializing in parenting and childhood issues. Media Education column, experts and specialists, delve into how to bring children closer to the new digital tools and how best to handle computers, tablets and smartphones with young children. The expression Media Education refers to the educational and didactic activity aimed at helping young people understand how to use new media correctly. Proper use allows not only children and young people to make the best use of the communication tools at their disposal, but also to promote a better quality of media that points to a more constructive approach. Both Bill and Uppa's aim is to encourage kids and teens to read more and use devices in an efficient way, starting training parents and carers on how instill love for culture and knowledge in children starting from an early age.

TARGET GROUP OF THE CASE STUDY	Kids and teens/parents and carers
ADULT LEARNING CHALLENGES: What are the challenges that are faced by the professionals and caregivers in the fight of (screen) **addiction phenomena**?	
COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	Uppa magazine, is written by pediatricians, pedagogists, psychologists and other specialists who care for children. It is distributed in outpatient clinics of the National Health System, as well as in many counseling centers, libraries, and other maternity and childcare facilities. The catalog of books includes illustrated manuals, essays and albums devoted to children. For the International Board on Books for Young People (IBBY) is represented by an international network of people from all over the world who are committed to bringing books and children together and train the adults that are taking care of them.
CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and positive outcomes?	In Uppa's Media Education column there are different articles with great suggestions for all parents, teachers and educators to take a positive approach and teach to their children how to use properly the digital devices and tools. Using the right tools at the right moment for school tasks or for anything related with children/teens daily life and then push them also to go back to a proper book to help them understand the differences and maybe realize that sometimes the brain focus more on words written on a piece of paper than on a tablet or a smartphone.

IMPACT OF THE INVOLVED PEOPLE OF CONTRIBUTORY APPROACHES: What is the impact of such approaches?	From Uppa's Media Education section parents, teachers and educators can get all the information they need to understand the risks their children face while exposed to a screen and find all practical tips that will help them keep their children safe from cyberbullying , identifying for each age which kind of programs / videos etc the children can watch and amount of time that they can spend connected on digital devices. Correct use not only allows children and young people to make the most of the communication tools available to them, but also to promote better media quality, which points to a more constructive approach. From Bill "Library of Legality" youngsters will realize that books are means of mediation, cultural and social inclusion. Today's children and young people are growing up in a reality that constantly opens up spaces of connection between the real and virtual world, and while this can certainly be a risk, it can instead be a great opportunity to help them read the complexity of the era in which they find themselves growing up and living according to new semantics that are different from the traditional reading, involving the emotional, cognitive and relational spheres.

RESOURCES / SERVICES / LINKS	https://www.ibbyitalia.it/cose-ibby/obiettivi/ https://www.uppa.it/educazione/media-education

CASE STUDY TITLE: SOCIAL WARNING: ETHICAL DIGITAL MOVEMENT	
DESCRIPTION OF THE CASE STUDY	Non-profit project to make children and parents aware of potential risks of the web through a network of trainers-volunteers throughout Italy. The target is to bring digital culture to schools with information activities and ethical actions that improve society thanks to a conscious use of the network. Fundamental meetings to educate children on important topics such as: online reputation, cyberbullying, hate speech, fake news, world of business
TARGET GROUP OF THE CASE STUDY	Children/teenagers/ Adults (parents, coaches, teachers, psychologists etc)
ADULT LEARNING CHALLENGES: What are the challenges that are faced by the professionals and caregivers in the fight of (screen) addiction phenomena?	Bridging the generation gap by studying the digital world that young people attend learning from "inside". Restore the balance of private life / work. Know the psychological levers used by tech companies to make us use more and more those devices. Awareness of the severity of the negative effects of addiction.

COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	Competencies and skills that will be developed through Social Warning include listening skills, leadership skills and competences cause the coaches/ parents / adults in general will need to drive addicted people to improve their routine listening to their problems and trying to lead them towards a better use of those divices. The Social Warning team including social Media Coaches, Digital Lawyer, Ethical Tech Entrepreneurs, Counselors etc. THE AIM OF SOCIAL WARING IS TO: • Offer students and parents a complete and comprehensive picture of the situation, making them aware of the risks, without alarmism or panic, while also highlighting the areas of openness and expansion, technological and informative, that the Net offers to those who know how to use it discerningly.

CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and positive outcomes?	• Flexibility: Do not completely prohibit or demonize the use of the digital devices. • Training: Training on digital education and digital wellbeing by parents / teachers / coaches / HR managers. • Create alternatives: Support sports activities, hobbies, passions, relationships.
IMPACT OF THE INVOLVED PEOPLE OF CONTRIBUTORY APPROACHES: What is the impact of such approaches?	• Conscious use: moderate and conscious use aimed at enhancing the positive aspects of digital devices. • Sharing: Social impact by teaching what you have learned to loved ones or to people close to you • Improve many aspects of your life and earn well-being, time and productivity • Using technology as an empowering tool to improve as a person and professional.
RESOURCES / SERVICES / LINKS	https://socialwarning.it/

GREECE

- IASIS CONTRIBUTION - First Case Study

PARTNER ORGANIZATION: IASIS NGO

COUNTRY / REGIONAL AREA: GREECE	
CASE STUDY TITLE: **Evolution of Internet addiction in Greek adolescent students over a two-year period:** The impact of parental bonding	
DESCRIPTION OF THE CASE STUDY	The study provides findings from a cross-sectional study on Internet abuse, parental bonding, and parental online security practices of the entire Kos Island adolescent student population (12–18 years old) and their parents. It also compares the teens' level of excessive computer use with the corresponding parental estimates.
TARGET GROUP OF THE CASE STUDY	Adolescent student population aged 12-18 living in Kos Island and their parents.
ADULT LEARNING CHALLENGES: What are the challenges that are faced by the professionals and caregivers in the fight of (screen) **addiction phenomena**?	• Internet availability has expanded alongside Internet addiction, which is more prevalent in a population when no proactive measures to address the condition have been taken. • Parents frequently underestimate the extent of a child's computer use. • Parental controls over Internet use play little to no preventive role and cannot shield children from developing Internet addiction.

COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	Parents who have a strong sense of affection, care and concern for their kids and who also recognize their need for uniqueness and self-expression will become more active in their supervision to a level that does not compromise personal autonomy but rather respects boundaries. Based on their participation in our study, it was assumed that these parents will be more receptive to prevention initiatives in the area of electronic addictions.
CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and positive outcomes?	- Parents should be offered with a proper education on online security and safe browsing habits when using a personal computer. - A prevention program should ideally be taken for kids whose parents exhibit poor parenting skills and don't even know how to implement the most basic forms of online supervision and protection.
IMPACT OF THE INVOLVED PEOPLE OF CONTRIBUTORY APPROACHES: What is the impact Of Such approaches?	Prevention programs for both parents and children and balance between privacy and need to protect adolescents whose parents will not or cannot step up to their parental obligations for the digital era
RESOURCES / SERVICES / LINKS	https://www.researchgate.net/publication/221811535_Evolution_of_Internet_addiction_in_Greek_adolescent_students_over_a_two-year_period_The_impact_of_parental_bonding

- Second Case Study

PARTNER ORGANIZATION: IASIS NGO	
COUNTRY / REGIONAL AREA: GREECE	
CASE STUDY TITLE: **A situation analysis of children and youth** – Greece-Online exploitation and bullying	
DESCRIPTION OF THE CASE STUDY	One study presented at the Hellenic Conference on Secure Internet Browsing showed 18.2% of the children participating reported issues linked to Internet addiction while 4.2% reported having experienced cyber-bullying.(4th Conference on Secure Internet Browsing, 2015, organized by the Hellenic Police and the Department of Cyber Crime Division)
TARGET GROUP OF THE CASE STUDY	Children

ADULT LEARNING CHALLENGES: What are the challenges that are faced by the professionals and caregivers in the fight of (screen) **addiction phenomena**?	• While the majority of social welfare and mental health experts lack knowledge and rules on how to deal with cyberbullying, only one of Athens' Youngsters' Hospitals consistently treats internet addiction in children. • Only a few, infrequent campaigns have attempted to educate the broader public—and particularly parents—on how to stop cyberbullying. • A National Strategy for combating cyber bullying, including child pornography has not been developed, and it should as online abuse and exploitation is one of the most rapidly growing forms of violence against children.
COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	In case such attempts will be put into practice, the competences of the relevant organizations will be increased.
CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and positive outcomes?	• Organization of campaigns aiming to educate the broader public—and particularly parents—on how to stop cyberbullying. • Development of a National Strategy for combating cyber bullying, including child pornography.
IMPACT OF THE INVOLVED PEOPLE OF CONTRIBUTORY APPROACHES: What is the impact of such approaches?	• The social welfare and mental health experts will increase their knowledge and rules on how to deal with cyberbullying, • The broader public and parents will be educated on how to stop cyberbullying
RESOURCES/SERVICES/LINKS	https://www.unicef.org/greece/media/1371/file/%CE%91%20situation%20analysis%20of%20children%20and%20youth%20-%20Greece.pdf

- Third Case Study

PARTNER ORGANIZATION: IASIS NGO	
COUNTRY / REGIONAL AREA: GREECE	
CASE STUDY TITLE: **KETHEA ANADYSI**	
DESCRIPTION OF THE CASE STUDY	KETHEA ANADYSI has been operating in Thessaloniki since 2001. The specialized programme it runs for teenagers and young adults covers the needs of Northern Greece. It provides services to adolescents and young people aged 13–25 whose Internet use is problematic, as well as to their family. The support is personalized and depends on the degree of dependency, the educational or occupational activities, and the family situation of the young people the programme caters for. Provided on an outpatient basis, the treatment can be short-term and less intensive or long-term and intensive, depending on individual needs.
TARGET GROUP OF THE CASE STUDY	Adolescents and young people aged 13–25
ADULT LEARNING CHALLENGES: What are the challenges that are faced by the professionals and caregivers in the fight of (screen) **addiction phenomena**?	• Beneficiaries intolerance • Burnout risk • Risk of recurrence
COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	KETHEA ANADYSI's services include awareness raising, counselling, individual and group therapy, educational and vocational guidance, and family sessions. In the broader community, it stages interventions to convey information, raise awareness, train professionals, and network with agencies and services -including schools, sports and cultural associations, medical and social services - that can make an active contribution to combatting addiction.
CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and positive outcomes?	Raising awareness activities could be held in squares or parks or open areas, aiming to inform general public as well as network with agencies and services -including schools, sports and cultural associations, medical and social services- that can make an active contribution to combatting addiction.

IMPACT OF THE INVOLVED PEOPLE OF CONTRIBUTORY APPROACHES: What is the impact of such approaches?	In the broader community, it stages interventions to convey information, raise awareness, train professionals, and network with agencies and services -including schools, sports and cultural associations, medical and social services- that can make an active contribution to combatting addiction.
RESOURCES/SERVICES/LINKS	https://www.kethea.gr/en/kethea/therapeutic-programmes/kethea-anadysi/

- Fourth Study Case

PARTNER ORGANIZATION: IASIS NGO	
COUNTRY / REGIONAL AREA: GREECE	
CASE STUDY TITLE: **KETHEA EPIRUS**	
DESCRIPTION OF THE CASE STUDY	KETHEA EPIRUS was created in 2007 at the request of public bodies in the city of Ioannina. It currently provides a comprehensive network of therapeutic services for the treatment of dependence on drugs, alcohol, gambling and the Internet. The network is accessible in Ioannina, Igoumenitsa, Arta and Corfu, where Counselling Centres operate as points of first contact with the programme. The Centres assess the severity of the individual's problems and needs and are able to offer counselling, information about treatment options, educational and recreational activities, and physical health care.
TARGET GROUP OF THE CASE STUDY	Children, adolescents, young people and all kind of ages.
ADULT LEARNING CHALLENGES: What are the challenges that are faced by the professionals and caregivers in the fight of (screen) **addiction phenomena**?	• Beneficiaries intolerance • Burnout risk • Risk of recurrence
COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	Depending on their needs, and given that they have been prepared at the Counselling Centres and that they want to, participants can join the Outpatient Therapeutic Community which operates in Ioannina and is equipped with a Hostel for members from other regions. If they are in work or education, they can join the Evening Programme. The Social Reintegration Centre supports the smooth transition into

COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	society of those who complete the main phases of their treatment. It provides optional accommodation, counselling, education and training, career guidance and help finding a job through the Programme's network of partner schools and employers, the resolution of pending legal matters, support for improved relations within the family, and relapse prevention. Members of all KETHEA EPIRUS units who left school early can complete their education by attending the Transitional School which the therapeutic program has set up with the help of volunteer teachers. Reconnecting with the educational process is an integral part of the treatment. The Family Support Centre supports users' families, regardless of whether the users themselves want to embark on treatment or have already done so. Family members are given information, emotional support and care. They are also educated in how to increase a drug user's motivation to seek treatment and how to support them during their treatment. KETHEA EPIRUS also provides services to people who have problems with alcohol, gambling and the Internet, through flexible outpatient programmes which include both individual and group support. KETHEA EPIRUS also engages with school communities, providing information and actions aimed at addiction prevention.

CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and positive outcomes?	All the above-mentioned competences could be also integrated into the educational system through the proper training and education of educators and teachers and people working at schools and universities.
IMPACT OF THE INVOLVED PEOPLE OF CONTRIBUTORY APPROACHES: What is the impact of such approaches?	• Prevention • Education • Raising awareness
RESOURCES/SERVICES/LINKS	https://www.kethea.gr/en/kethea/therapeutic-programmes/kethea-epirus/

- Fifth Study Case

PARTNER ORGANIZATION: IASIS NGO	
COUNTRY / REGIONAL AREA: GREECE	
CASE STUDY TITLE: **KETHEA NOSTOS**	
DESCRIPTION OF THE CASE STUDY	KETHEA NOSTOS was founded in 1993 and now provides a comprehensive service network covering the Municipality of Piraeus, neighbouring municipalities, the southern suburbs of Athens, parts of Western Attica, and the islands of the north-eastern Aegean. It provides counselling, treatment and social reintegration for adult drug users -workers and students whose substance abuse ranges from the casual through the experimental to the systematic. It also supports the families of individuals faced addiction problems. KETHEA NOSTOS runs Counselling Centres and Family Support Centres in Piraeus, Eleusina, Mytilene and Chios.
TARGET GROUP OF THE CASE STUDY	Children, adolescents, young people and all kind of ages.
ADULT LEARNING CHALLENGES: What are the challenges that are faced by the professionals and caregivers in the fight of (screen) **addiction phenomena**?	• Beneficiaries intolerance • Burnout risk • Risk of recurrence
COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	Treatment is either in an intensive residential Therapeutic Community (6 months duration) or in the Outpatient Treatment Unit, which provides personalized support suited to the individual's needs and their specific type of dependency. Both facilities are situated in Piraeus. The Outpatient Treatment Unit also helps therapeutic programme graduates to maintain their abstinence, helps prevent relapses, and also provides support to people who have a problematic relationship with the Internet. Treatment is completed at the Social Reintegration Center in Piraeus, which also has a hostel. The Counselling Centres on Mytilene (KETHEA MYTILINIS) and Chios (KETHEA CHIOU) mobilize and prepare drug users to join the residential NOSTOS Therapeutic Community in Piraeus, support users' families, and cover the wide-ranging addiction-related needs of local communities. The Centres also provide early intervention services for people who misuse drugs experimentally, occasionally or systematically, as well as supporting their families.

COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	The aim of the interventions is to deal with the users' problems effectively and to prevent their drug use becoming more serious. In addition, the Centres provide therapeutic support for people who are dependent on alcohol, gambling and the Internet. KETHEA NOSTOS gives everyone involved in one of its units the opportunity to participate in educational activities, vocational training and vocational guidance. At the same time, its Liaison Office in Piraeus promotes and support its members in the labour market.
CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and positive outcomes?	• Proper training of the program's personnel • Supervision meetings • Group discussions and problem solving groups
IMPACT OF THE INVOLVED PEOPLE OF CONTRIBUTORY APPROACHES: What is the impact of such approaches?	• Proper services • Healthy and willing to help personnel • Qualitive services
RESOURCES/SERVICES/LINKS	https://www.kethea.gr/en/kethea/therapeutic-programmes/kethea-epirus/

- Sixth Study Case

PARTNER ORGANIZATION: IASIS NGO	
COUNTRY / REGIONAL AREA: GREECE	
CASE STUDY TITLE: **Hellenic Study Society** Internet Addiction Disorder - Ελληνική Εταιρεία Μελέτης της Διαταραχής Εθισμού στο Διαδίκτυο	
DESCRIPTION OF THE CASE STUDY	(Siomos et al. 2012.) Evolution of Internet addiction in Greek adolescent students over a two-year period; the impact of parental bonding. European child and adolescent Psychiatry. **Epidemiology:** •Thessaly 8.2% (Siomos et al. 2008) • Larissa from 6% in 2006 to 12% in 2011 (Siomos et al.2013) • Kos 2-year inventory from 11.7% to 16.3% (Siomos et al. 2012), • Pancyprian research in adolescents 8% (Siomos et al. 2013), • Hellenic Army 7% (Siomos & Floros 2014), • Fourth year medical students 11% (Floros et al. 2014)

DESCRIPTION OF THE CASE STUDY	[RESEARCH / TREATMENT] in Greece • Ιπποκράτειο ΓΝΘ (Child and Adolescent Psychiatric Service) • ΜΕΥ Ν. ΠΑΙΔΩΝ ΑΓΛΑΙΑ ΚΥΡΙΑΚΟΥ (Pediatric Service) • Μ. απεξάρτησης 18 άνω Ψ.Ν.Α (Psychiatric Clinic) • Συμβουλευτικός σταθμός για φοιτητές στο ΑΠΘ από την Β Πανεπιστημιακή Ψυχιατρική κλινική του ΑΠΘ. (Psychiatric Clinic)
TARGET GROUP OF THE CASE STUDY	All different target groups (medical students, adolescents,Hellenic Army).
ADULT LEARNING CHALLENGES: What are the challenges that are faced by the professionals and caregivers in the fight of (screen) addiction phenomena?	• The disorder is not taught in universities • The disorder is not officially recognized • Lack of theoretical and clinical training majority of mental health professionals. • Clinical experiments with questionable results that reduce the reliability of therapists • Minimal literature on their effectiveness treatment protocols.
COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	Correct clinical evaluation Decision on who will be responsible for the clinical evaluation Evaluation of the degree of internet use through certified scales Evaluation of the following criteria: • the existence or not of comorbidity • the extent to which the problem affects the normal • functions of the individual • the current social support • the dynamics of the family
CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributionsand positive outcomes?	• Commonly accepted IGD criteria among researchers • Development of effective therapy protocols
IMPACT OF THE INVOLVED PEOPLE OF CONTRIBUTORY APPROACHES: What is the impact of such approaches?	- Correct clinical evaluation - Effective therapy protocols - Correct diagnose criteria - Certified scales

RESOURCES / SERVICES / LINKS	https://www.ispatras.gr/wp-content/uploads/2016/10/%CE%A3%CE%B9%CF%8E%CE%BC%CE%BF%CF%82-%CE%9A%CF%89%CE%BD%CF%83%CF%84%CE%B1%CE%BD%CF%84%CE%AF%CE%BD%CE%BF%CF%82-%CE%97%CE%9C%CE%95%CE%A1%CE%99%CE%94%CE%91-%CE%99%CE%A3-%CE%A0%CE%91%CE%A4%CE%A1%CE%91%CE%A3.pdf

3.2. | PRESENTATION OF THE 10 INTERVIEWS

FRANCE

- COMMUNE DE ST DENIS CONTRIBUTION

INTERVIER BACKGROUND
Sonia Ould Yahia is a health mediator. She works in the 6 PMI (prevention and protection structures for pregnant women and children aged 0/6) in the city of Saint-Denis.

She accompanies pregnant women, in precarious and vulnerable situations who do not have health rights and have no access to health care. She helps them understand their pregnancy and medical monitoring. She accompanies them in their requests for health rights. She makes the connection with health and social professionals and health insurance.

We asked her to conduct an interview with one of the women she accompanies in order to make the question of screens in the daily life of a woman in a precarious situation more concrete and to illustrate the challenges of addressing this question without judgment.

Interview: June 2022
Interview: MARIAM, Mother of 2 children aged almost 7 and 2 years old
Age: 33 years old - in France since 2013 of Ivorian origin - Lives in cohabitation – 2 rooms apartment in St Denis
This interview tries to highlight issues that fall under 3 questions of the questionnaire
(quotes from Mariam are *italicized*)

ADULT LEARNING CHALLENGES:
What are the challenges that are faced by the professionals and caregivers in the fight of screen addiction phenomena?

CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES:
What are the appropriate conditions for successful contributions and positive outcomes of implementing such interventions in the working or everyday environment?

IMPACT OF CONTRIBUTORY APPROACHES:
What is the impact of such approaches?

- 1st challenge identifies the place of screens in everyday life within the family
  - ✓ *I have a TV in the living room, common room, 2 cell phones (us parents), 1 tablet for my 7 year-old daughter (which is currently broken), 1 laptop (which no longer works either).*
  - ✓ *Use of television by the whole family, mobile phones only by parents. We only use screens at home, sometimes nursery rhymes on the phone for the little one when he is fidgety and to help him wait when I do my administrative procedures; or when I am followed for my health.*

- Do not neglect passive uses which are often ignored by the family
  - ✓ *There is often the television on in a room without it being intended for the child - When we parents watch TV, the children play in the room because they are not at all interested. When it comes to cartoons, they watch TV.*
  - ✓ *There is sometimes the TV on to liven up the room (bring it to life) without anyone really watching. This is especially so as not to leave a great silence in the house.*
  - ✓ Do not judge; accept that, at the start of discussions, parents can see screens as a positive aspect or a resource in their daily lives

✓ *Screens can be useful to get information for us parents (tv) or in case of stress it allows us to relax.*
✓ *Screens are useful for learning for the 7 year old, my daughter learned things that I could not have*
✓ *taught her*
✓ *It also allows you to have fun; music channels for example to sing and dance.*
✓ *It also helps to create a link with their origins (nursery rhymes from the country, we have the Ivorin*
✓ *channel too).*
✓ *Screens can improve knowledge and arouse curiosity.*
✓ *Also to calm the anger and whims of the 2-year-old child, with the music on the screens.*

- Specify the practices and the dangers according to the ages of the children
  - ✓ *My 7-year old child is interested because she understands what she is watching (the story of the cartoon for example);*
  - ✓ *My 2-year-old is interested for a few seconds just long enough to change focus. Then he goes to play.*

- rely on the family proposals to propose change behaviors

✓ *I have precautions: I have a watch on the acronyms of the CSA to authorize to look at certain things.*
✓ *I have a personal strategy which is to put on uninteresting things so that they go play in the bedroom*
✓ *There is a mastery of the time of use, the broken tablet I do not plan to repair for the moment.*

- Starting from the words of families and co-constructing responses that adapt to daily life seems to be the only way to change behavior over time
  - ✓ *We spent 2 months without TV, boredom set in and I saw no change between the period with the use of screens and the period without. I prefer to find different strategies.*

- INSTITUT DE RECHERCHE ET D'INNOVATION CONTRIBUTION

Interview: the team of the PMI Pierre Semard

We wanted to use this interview to hear the perspective of professionals who practice the method of contributory research. Contributory research challenges the individualistic approach characteristic of modern therapy and research by focusing on the *individuation* – the transformation and coming into being – of a group. In a process of contributory research, it is the group that learns, knows and gets better together. That is also why we, for this exercise, have privileged a group interview. Instead of singling out one person to answer on behalf of everyone else, we invited six members of theresearch group working in SaintDenis to participate in a conversation structured around the questionnaire provided as part of PR1. The below is a condensed version of this discussion, which took place during one of the bi-weekly meetings of the Contributory Clinic. The answers have been edited so that they read *as one voice* – the voice, you might say, of the group's collective intelligence.

INTERVIER BACKGROUND

Studies, professional-life experience

A group made up of researchers, professionals, and parents. Amongst the professionals you find child nurses, childcare assistants, educators of young children and child psychologists. Present during this discussion were one child psychiatrist, one biologist, one child psychologist, one director of a child protection and health care centre and two health care assistants.

ADULT LEARNING CHALLENGES:

What are the challenges that are faced by the professionals and caregivers in the fight of screen addiction phenomena?

There's a lack of awareness on the topic. Or rather, you might say that there exist two groups of parents: those who are aware of the problem, and who would like to learn more about it, and those who don't know about the dangers of screen exposure. You'll have to adapt your approach to the type of parent you're working with. Naturally, the latter group will be more challenging to mobilise in an activity against overexposure. There's some irony to this, as it is often the group that 'needs it the most'. Another challenge is to find ways of speaking about overexposure without sounding judgemental. It is easy to tell parents not to use screens but it quickly comes to sound as if you are

telling them off. Often this produces feelings of guilt. Only rarely, it helps them actually change the way they use screens. In the worst case, you might end up isolating parents further, making them feel too embarrassed to raise the topic again. It's important to realise that if parents rely on screens it's because the screen *is doing something for them*.

Often it's fulfilling certain functions usually performed by the parent, freeing up time for rest. You could say that one challenge of the healthcare professional is diagnosing overexposure, while another is diagnosing *why* this overexposure is taking place in the first place. An overreliance on screens is a symptom of an underlying problem.

Generally speaking, prevention is difficult. The current healthcare system in France is geared to intervene only when clear symptoms can be observed – not *before* the symptoms become manifest. This is true for overexposure too, which is most commonly diagnosed when the child starts in school, where, surrounded by peers, delays in language, motor skills and social capacities become flagrant. There are ways of spotting the problems much earlier which child doctors should be made aware of. Still, even if trying to diagnose the condition at an earlier stage, it might be difficult to convince the parents, who will often deny that they've caused (unintentional) harm to their child without being presented with incontestable proof.

COMPETENCES EXPECTED IN RELEVANT ENTERPRISES:
What are the relevant competencies expected for professionals that work with children of being at high risk of screen addiction?

We might begin by critiquing the notion of 'competences' by opposing it to another term we use a lot, that of 'knowledge'. Knowledge goes further than competences. It entails a critical reflection on what you're doing and a more profound understanding of the topic, which allows you to improvise when faced with new and unexpected situations.
In terms of specific knowledge, it's important to know about the development of the child and how the digital interferes with this development. That is also what allows you to speak from a position of non-judgment. Rather than telling the parent what they ought to do and not to do, the healthcare professional should *explain* what's at play in overexposure, giving the necessary information for parents to develop their own position on the topic and a real desire to change and take responsibility for their screen habits.

ADDRESSING EDUCATIONAL RESOURCES:
Do you know any relevant educational material, methodology or pedagogical interventions for preventing and detecting screen addiction? Can you please describe them?

There's one health care center in Saint-Denis where parents leave from their first consultation with a prescription telling them not to use screens with their children. Giving this kind of information the same status as other types of medical advice has a certain effect.

Videos are usually effectful. Lately, a number of videos have been produced by doctors who warn about the negative consequences of the early overexposure to screens. There are also a number of videos showing babies' reactions to their environment, the relations they form with their parents and the consequences of these being interrupted by digital technologies. Seeing the reactions of children – destress, seclusion or early symptoms of addiction – has an immediate effect on the viewer. Videos are also particularly good when working together as a group. As opposed to texts, they can be viewed together and commented on immediately by a wide spectrum of people from many different backgrounds.

CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES:
What are the appropriate conditions for successful contributions and positive outcomes of implementing such interventions in the working or everyday environment?

To conduct contributory research, two basic conditions have to be met: you need a physical place to work and a structure that can sustain the process over time. Contributory research *takes time*. In the case of the Contributory Clinic, almost one year was spent creating a shared foundation and vision before welcoming new parents to participate. Another important requirement has to do with the attitude of those who take part. This is true for researchers, professionals and parents alike. The academics cannot think of themselves as beholders of knowledge that trumps other ways of knowing. They have to consider themselves as a member of the group, working on equal terms with everyone else. For all members of the group, it's important to stay open-minded to new ideas and not give up in face of content that's intuitively difficult to grasp. Because contributory research is intentionally kept open, it's important too not to despair in face of unexpected turns of events. Rather, one should see them as occasions to learn and grow together as a group. More generally, you might say that discussions around screen usage are more likely to have a significant effect when introduced *as early on* as possible and addressed *as frequently* as possible.

IMPACT OF CONTRIBUTORY APPROACHES
What is the impact of such approaches?

As professionals, the method of contributory research has brought us a lot. We feel much more equipped in the meeting with parents. Before starting this process, many of us would confuse symptoms of overexposure with symptoms of autism. Today, when receiving a child with certain problems, questioning parents on their use of technology has become part of our standard procedure. We've been nourished by theory. While intimidating in the beginning, some of the texts we've read together, on transitional objects and the capacity to be alone, have marked us profoundly. You might say that the process has *transforme*d us, our way of seeing and being in the world, in a way that quite naturally changes how we meet and work with parents. The process instills confidence in people. This is true for everyone involved. As opposed to moralising discourses on screens, the idea is to augment people's self-worth and make them *feel capable* enough to come up with new practices on their own terms. The parents aren't seen as patients but as partners of the project. This goes against many other trends in today's society, which make us believe that we aren't good enough, that we aren't smart

enough, that we're not doing well enough. Contributory research validates people's knowledge, and forms a setting where participants can put this knowledge to use to create new social-technic *milieux.*

INNOVATIVE APPOACHES:
Do you have any further innovative interventions that you may know or want to suggest for being implemented in your working or everyday conditions?

No.

DENMARK

- European E-learning Institute CONTRIBUTION

INTERVIER BACKGROUND
Studies, professional-life experience
Boris Veler, CEO and Co-founder of Logout

Specialising in some key areas: Managing events, projects & production teams, getting things done, agile, flash, mobile, OOP, html, css, web standards, usability, open source, music, video, animation. Logout, center for modern addictions, was founded in 2011. Center offers a holistic aspect to curing addiction with modern technologies and especially with internet. Fields of interest are: CIU - compulsive internet use, online role-playing games addiction or overuse, online gambling addiction or overuse, online shopping addiction or overuse, online pornography addiction or overuse. We offer a range of educational materials, seminars and workshops for different target groups on the aforementioned topics.

ADULT LEARNING CHALLENGES:
What are the challenges that are faced by the professionals and caregivers in the fight of screen addiction phenomena?

Parents are the first to feel helpless and distressed in the event of negative changes in children's behavior while playing video games.

Various challenges are faced by educators, caregivers and psychologist when helping with screen addiction. To name a few challenges found in those facing screen addiction:

- People who become addicted to monitoring social networks often start to shut themselves in and lose touch with themselves and their loved ones, and constant connection to networks prevents them from quality work and relaxation. People addicted to social networks often also suffer from a form of social anxiety , fear of missed opportunities (Fear of Missing Out - FOMO).

- Video game addiction can lead to endless opportunities for feelings ofsatisfaction, success or belonging, and on the other hand, perhaps failure in various areas of real life, are a good basis for the development of addiction.
- General addiction to the web means time spent online increases and the individual can rarely explain the usefulness, length and content of the activity. This indicates a distorted perception of time. Due to the preoccupation with the Internet, an individual's satisfaction and activity in "offline" life decreases, and the consequences are visible in the field of relationships, family, leisure activities, work or school, etc.
- Addiction to online pornography is particularly detrimental to Adolescents as they are more vulnerable, common use of adult content can cause emotional changes and influence the formation of misconceptions about sexuality.
- Online shopping can become a problem when shopping replaces something else, when shopping means moving away from problems and triggering positive emotions. The feeling of something becoming ours is exciting for some people, comparable to the feeling of victory, and can lead us into compulsive shopping. Over time, the individual experiences less and less comfort and more and more restlessness, which forces him to shop again.

At logout we assist by proving educational programs on:

- Well-being and mental health of parents and children
- Identifying and preventing recurring stressful situations
- A holistic understanding of video gaming, which is an important element of the change process
- Strengthening effective communication approaches and skills

COMPETENCES EXPECTED IN RELEVANT ENTERPRISES:

What are the relevant competencies expected for professionals that work with children of being at high risk of screen addiction?

Logout's team members come from various professional backgrounds, their varying expertise makes a very dynamic team. Co-founder and expert leader of Logout has a background in sociopsychological aspects of Internet communications along with many years of experience in the field of psychodiagnostics and counselling for young people and their parents. Logout's Psychologist's, consultants and counsellors have many years of experience in the field of mental health, addiction, antisocial behavior. Experience with individual counseling and psychosocial help and guidance. The have strong expertise in conducting counseling interviews, experiential workshops, camps and projects for young people.

ADDRESSING EDUCATIONAL RESOURCES:

Do you know any relevant educational material, methodology or pedagogical interventions for preventing and detecting screen addiction? Can you please describe them?

We provide targeted educational material and workshops to help combat screen addiction and technology overuse, programmes about the following topics:

- Logout & Restart - digital addiction
  A comprehensive program designed for individuals who are addicted to digital content.
- Digital diet - digital congestion
  The program is designed for individuals who overuse technology.
- Logout & SpeakOut! - cyberbullying
  Assistance program for child victims of cyberbullying.
- Preventive assistance to individuals and families / family e-rules
  The program is intended for informing and advising individuals and creating family agreements/contracts on the use of digital technologies.
- Recharge & Connect - advice for parents
  For better family relationships. Support for parents of children with difficulties growing up in the field of digital devices.
- Group meetings - parents
  Supporting and educational group meetings for parents and partners.
- Group meetings - children and adolescents
- Logout Week - summer camp
  Summer camp for children and teenagers or how to spend a week without technology.
- Reformed
  For responsible online communication with individuals and the community and for dealing with stress and pressures in various online environments
- Profile & Game
  For players who see the potential for professional video game play.

CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES:

What are the appropriate conditions for successful contributions and positive outcomes of implementing such interventions in the working or everyday environment?

I would consider there is more than one method to successfully combat screen addition and to help families strike a healthy balance in their digital usage. We run various programmes and initiatves to help families in the struggle they face with technology reliance and over use. For example, we have a

programme to deal with various issues. For digital / screen addiction, we developed the "Logout&Restart" which is in depth counselling program for individuals with signs of screen addiction.

For Digital Detoxing families, we designed the "Digital detox program" for individuals who overuse digital technologies.

Regarding Online Violence, we offer the "Logout&Speakout" support program for children and young people who experience all forms of online violence, bullying or abuse.

To help families manage screen time with a selfdeveloped free interactive tools in the form of Family Media Plans.

We undertake a lot of research studies on the topic of digital addiction. We have developed different psychological instruments for the experts, not just parents and teachers.

And lastly we also offer the "LogOut Week" which is essentially a summer camp without screens but full of joy, full of green, psychical activities and new social skills experiences.

IMPACT OF CONTRIBUTORY APPROACHES:
What is the impact of such approaches?

INNOVATIVE APPOACHES:
Do you have any further innovative interventions that you may know or want to suggest for being implemented in your working or everyday conditions?

We offer various programmes and webinars on very niche topics, as far as we know, no other organisation deals with the vast array of digital addiction issues which we educate and train upon.

As the topic of digital addiction is so broad and new to the world, for us to be able to innovate and educate, it is important for us to work with various stakeholders interested and concerned with this issue. For example, Logout have recently concluded a partnership agreement with the ESports Federation of Slovenia. The main focus of the collaboration between Logout and the ESports Federation is on raising awareness of healthy lifestyles and responsible video game play, reducing the risk of addiction and helping players with excessive gaming or addiction. We believe that through mutual cooperation we will effectively and directly reach the target group, which we address with programs and activities. We also signed an agreement on mutual cooperation in the implementation of practical training of University of Ljubljana the Faculcy of Sports students in the academic year 2021/2022, which will enable students of the kinesiology study program to practice, and our users to get prepared and implement individual diet and exercise plans as part of the activity "More Green, Less Screen".

INTERVIER BACKGROUND

Studies, professional-life experience

John McGeehan, Founder/CEO

Amanda Fialk, Partner & Chief of Clinical Services

Since 2009, our mission at The Dorm has been to guide young adults towardsindependence through evidence-based clinical therapies, community support and practical skill-building.

ADULT LEARNING CHALLENGES:

What are the challenges that are faced by the professionals and caregivers in the fight of screen addiction phenomena?

At The Dorm, we are determined to provide our clients with the best support and continually evolve to address changing clinical needs. It is clear that in this digital age, navigating screen addiction is becoming one of the most pressing issues today. Parents and caregivers may struggle to cope or recognise symptoms of screen addiction. It can impact young people in various forms, from depression, low selfesteem, low selfconfidence, and high anxiety levels and this can in turn result in a negative cycle of unhealthy technology reliance to avoid problems. As the problem is so vast and complex, it can be difficult for parents to know what help to seek and where to seek it. “One size doesn’t fit all”, what I mean by that is our therapists use specific therapeutic interventions based on the unique needs of the individual. As an example, some clients who suffer from severe technological abuse (i.e. they are unable to sustain daily acts of living (ADLs) due to their overuse of technology or they experience mood shifts/changes when technology is taken away). These individuals may require a more direct and intense intervention to counteract their level of Internet and smartphone addiction. It’s important to remember that treating “screen addiction” can be akin to treating a substance use disorder – they are very similar compulsions – the ping of a text message, an email alert or a ‘like’ on your Instagram picture can all trigger a dopamine response.

In less severe cases, we may use a practical “harm reduction” model, as it would be nearly impossible to sustain the complete elimination of technology from their everyday lives. Instead, with the proper education and insight, we help our clients create a balance between online and realworld interactions and promote more
healthy interpersonal skills.

COMPETENCES EXPECTED IN RELEVANT ENTERPRISES:

What are the relevant competencies expected for professionals that work with children of being at high risk of screen addiction?

As we offer a comprehensive range of Treatment Modalities, we have accredited and licensed therapists in each of theses areas. This includes cognitive behavioral therapy (CBT), dialectical behavior therapy (DBT), EMDR, motivational interviewing, exposure response prevention therapy and conventional psychotherapy/psychoanalysis. Our skills therapists have years of experience working

with young adults who are paving a road to independence. Each client is paired with a skills therapist who is a licensed/credentialed member of our team and is not the same as the primary therapist leading individual therapy sessions. Each role is fulfilled by a different clinician at The Dorm so that our clients get the most dedicated care at every touch point during their treatment plan.

ADDRESSING EDUCATIONAL RESOURCES:
Do you know any relevant educational material, methodology or pedagogical interventions for preventing and detecting screen addiction? Can you please describe them?

In terms of interventions for preventing screen addiction, we would offer skills development in a vast number of areas for our clients. Helping our clients build awareness and learn essential life skills is a key pillar of our treatment approach. Tangible skillbuilding is very often missed in therapeutic environments but is one of the most critical factors in fostering sustainable change.

Technology breaks down normal relationships, social cues, interactions and structures. The goal is not to overly rely on one tool for expression and interaction with the world. Without balance, the digital world can become the predominant way young adults express themselves and form interpersonal relationships which can cause many long-term issues and vital communication and interpersonal skills can be diminished. At The Dorm, our skills therapists are focused on helping our clients 'build a life outside of treatment.' Skill-building areas include (but are not limited to) inhome wakeup support, medication oversight, cooking, cleaning, grocery shopping, budgeting, social skills, exposures, dialectical behavioural therapy (DBT) and vocational support. In addition to tangible life skills, our skills therapy can include selecting a college course, preparing for a job interview and/or supporting activities of daily living.

CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES:
What are the appropriate conditions for successful contributions and positive outcomes of implementing such interventions in the working or everyday environment?

Group therapy and Family therapy are two effective ways to foster positive outputs in a contributory manner.

FAMILY THERAPY:
We believe that healthy engagement and family support during this transitional time enriches and strengthens our clients' journeys. A central focus in family therapy is helping families communicate and interact with effective and healthy boundaries. Over time they can learn how to better relate to one another, support one another and hold one another accountable. Overall, sessions can promote healthier dialogue between parents and their child. We offer onetoone sessions that accommodate all family schedules. Sessions can be regular (weekly or monthly) or scheduled on an 'asneeded' basis, depending on the family and client's needs. Generally, our family therapy does focus on the interactions and relations between the entire family unit, however, we also work individually with

parents to develop specialized parenting and communication skills that will benefit their young adult where they are today. Multifamily support groups are also available and include both family members and their child in weekly group sessions located at our main offices.

GROUP THERAPY:
Group therapy is one of the cornerstones of life at The Dorm. We believe that engaging in therapeutic support in a group environment reinforces that we are not alone and that by working together as a community we can achieve new goals.

All of our group therapy sessions are designed for young adults and allow clients to meet peers within the community and foster new camaraderie and healthy peer-based socialization.

IMPACT OF CONTRIBUTORY APPROACHES:
What is the impact of such approaches?

INNOVATIVE APPOACHES:
Do you have any further innovative interventions that you may know or want to suggest for being implemented in your working or everyday conditions?

Our Clubhouse is a young adult community space at the heart of The Dorm's culture that allows for socializing, mentoring and learning. Open during weekdays, the Clubhouse creates a relaxed and supportive environment for our clients to connect with peers, study, attend one of our community events or just kick back and read a book.

As we like to say, our strength is our community! We believe that our shared, open community environment promotes socialization, allows clients to exchange ideas with likeminded peers and fosters healthy discussion among peer groups experiencing the same social, academic and vocational challenges. By learning how to engage and maintain healthy, sustainable social interactions day-in and day out within The Dorm community, our clients develop the skill sets that lead to healthy social interactions and connections in the larger community of family, school, work and friends.

Volunteering is another unique aspect of the Dorm.
At The Dorm, we offer a community service group that meets weekly and assists in placing our clients in local volunteer opportunities. This can include everything from revitalizing public spaces to assisting in soup kitchens and helping less fortunate populations. Clients who are not engaged in full-time or part-time class, internships, work, or other volunteer engagements will need to participate in at least 3 or more volunteer sessions per week. The Dorm closely vets local volunteer programs and associations to make sure they are a good fit for our community.

Volunteering during outpatient treatment helps clients develop a sense of social responsibility, purpose and awareness of the greater community. By giving back, clients receive personal satisfaction by helping to improve their community and feeling more connected to its wellbeing.

IRELAND

- MOMENTUM MARKETING SERVICES LIMITED CONTRIBUTION

INTERVIEWER BACKGROUND
Studies, professional-life experience

ANSWER:
Relevant studies.

- MSc Organizational & Work Behaviour
- BA (Hons) European Economic

Relevant work experience.

- ✓ Seven years working in organizational behavior change with UnPlug. Leading programmes on digital wellbeing and digital culture in organizations including The United Nations, Google and Hubspot. Since 2020 I've also been a lead instructor at the Digital Wellness Institute.
- ✓ Three years working in not for profits with a focus on fundraising and change management in organizations including WaterAid and Barnardos.
- ✓ Ten years working in senior consulting roles in technology services companies with a focus on analytics and big data in companies including Capgemini and SPSS (IBM). This gave me early exposure to an alwayson culture and also an understanding of the positive value of data analytics (which I now promote as part of how we can manage our technology).

Relevant personal.

- ✓ Yoga, Meditation and Breathwork coach since 2012 – Helping me appreciate the benefits of more reflective practice and looking at behavior change through different lenses
- ✓ I have lived in seven countries across four continents, which has help me bring cultural intelligence to the work I do
- ✓ Mentored by Margaret Considine since 2016. Mentor to a number of amazing young adults in Europe, Asia and the US via the Digital Wellness Institute and The Fairplay for Kids NextGen networks.

ADULT LEARNING CHALLENGES:
In your experience, especially through your Keynotes, Masterclasses, and your Advisory and content creation and distribution, what are the challenges that are faced by the professionals and individuals, especially parents of young children in the fight of screen addiction phenomena?

ANSWER:
The main challenge is that, as humans, we are wired to be connected; if not managed well, digital technology can take advantage of that. Historically this need for connection would have been to keep us safe and part of a collective society.
However, as various media / communication forms evolved, we have had to develop personal responsibility to ensure we manage any unintended consequences relating to the impact of these new tools. This is a lot harder with digital technology. For our early years when we are coregulating, we need a lot of help with this.Even as adults, despite thinking we are in control, we often struggle with selfcontrol, especially when we are tired/vulnerable (when our resources are low).

The impact of this is that typically our brain is slowly rewiring to have an expectation of a reward, whether through email, social media or another tool. If our personal resources are in good shape, we can cope with this in small amounts. However, even the most resilient people are developing the habit of selfinterruption. This is essentiallywhen our micro habits become macro and why so many people check their phones when driving or at work for no reason. This rewiring can also impact people's ability to be empathetic. Evidence suggests that when wecommunicate via screens, it's harder for us to have an emotional connection and develop empathy. In ourcurrent world, especially when considering work elements such as hybrid design, we must encourage in person communications to help us maintain our social skills and develop empathy.

The culture of performance, which encourages organizations to be effectively married with alwayson technology, hasfostered a culture of reciprocity (inc. urgency bias). As a result, for many, we have further ingrained our habit of selfinterruption and so making it harder for us to focus, disconnect and connect with others. This became even harder during lockdowns as the boundaries between work and home became blurred, so the idea of psychological detachment became near impossible.

COMPETENCES EXPECTED IN RELEVANT ENTERPRISES:

In your opinion, if you can draw conclusions from your work, what are the relevant competencies expected of professionals that work with children and/or parents, when children are at high risk of screen addiction?

ANSWER:
I cannot answer this as it's not something I've had direct exposure to in a professional setting. However, in general, I think there is an expectation for professionals / parents to have expertise on subjects such as screen time. Yet it's a very new subject; they are essentially pioneers. In the ideal world, understanding the basics of how digital technology is influencing our behaviour, such as encouraging task switching, is a valuable tool. However, again it's a subjective answer.

ADDRESSING EDUCATIONAL RESOURCES:

Do you know any relevant educational material, methodology or pedagogical interventions for preventing and detecting screen addiction? Can you please describe them?

ANSWER:
I typically focus more on positive psychology within behaviour change, so try not using words like "addiction". Digital Technology, despite some of its unintended consequences, can be a very powerful and useful tool. However, it is just that, a tool, and we must be in control.

No methodology suits all, as we all use tech differently. Leading examples of effective programmes would be theDigital Wellness Institute who offer courses for different types of technology use. For organisations, we would recommend our programmes to help staff improve focus, their ability to disconnect after work, and meaningful connections with colleagues.

Related psychology constructs (including but not limited to); Psychological detachment, Task Switching, User Gratification Theory, Boundary Theory, Ego Depletion, Urgency Bias, Work Design, and Motivational Theories.

[1] Dabbish, Laura & Mark, Gloria & Gonzalez, Victor. (2011). Why Do I Keep Interrupting Myself?: Environment, Habit and Self-Interruption. Conference on Human Factors in Computing Systems - Proceedings. 3127-3130. 10.1145/1978942.1979405.

Self-reporting tools Apple Screen Time, Google Digital Wellbeing, Microsoft Viva Insights, Rescue Time
Clinical Tools (Evidencebased scales) – PRIUSS (Problematic and Risky Internet Use Screening), Internet Addiction Scale, Gaming Addiction Scale, Nomophobia Scale, Fear of Missing Out Scale, Social Media Disorder Scale, Smartphone Addiction Scale, Digital Flourishing Scale.

CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES:
What are the appropriate conditions for successful contributions and positive outcomes of implementing such interventions in the working or everyday environment?

ANSWER:
For any personal changes, we need supporting guardrails. Ideally, this would come through legislation such as.

- ✓ That which encourages tech to be easier to manage. For example, The Children's Code in the UK whIch stopped Autoplay on YouTube for teen users.[2]
- ✓ That which encourages the always on culture to be easier to manage. For example, The Right to Disconnect (encouraging out of office hours emails to be the exception rather than the norm), which has come into playing several jurisdictions[3].

Within organizations, there needs to be work design on Digital Culture to ensure positive digital habits are sustained. For example, the Right to Disconnect is of little use until people understand why (what

the impact is), it is rolled out with an agile rollout (can be flexible for different working types) and is led by example (the SLT must be seen to be adopting).

IMPACT OF CONTRIBUTORY APPROACHES:

What is the impact of such approaches?

ANSWER:

Our expertise is in organizational change, and as in all areas, the impact of change is subjective. However, we have seen three key challenges;

1) Ability to focus
2) Ability to switch off and recharge
3) Ability to have meaningful connections with others

[2] https://www.theguardian.com/media/2021/sep/05/social-media-giants-increase-global-child-safety-after-uk-regulations-introduced

[3] https://en.wikipedia.org/wiki/Right_to_disconnect

As such we would expect to see improvements in areas related to those such as improved ability to for clear and critical thinking and improved ability to communicate with others.

INNOVATIVE APPROACHES:

Do you have any further innovative interventions that you may know or want to suggest for being implemented in your working or everyday conditions?

ANSWER:

As we now live in a world of instant gratification, we typically seek quick fixes. Although there are benefits in most solutions, unless we first understand the challenge, it's unlikely our new habits will stick. So, as behaviour change consultants, we would always encourage understanding the "why" we have this relationship with tech which is different for us all and then adding an element of shared learning/peer motivation.

INTERVIEWER BACKGROUND

Studies, professional-life experience

ANSWER:

Nina Hersher is Chief Education Officer of the Digital Wellness Institute, author of the bestseller, Your Playbook for Thriving in the Remote Work Era, and an internationally renowned speaker. A leading expert in Digital Wellness, Hersher holds a specialized MSW from Washington University in St. Louis in Digital Culture and Program Development. She also runs Evolving in the Digital Age™, a speaking and consulting firm dedicated to best practices in mental health in a fast-paced world. She holds additional credentials as an Oasis in the Overwhelm Facilitator, Teen Outreach Program Facilitator, and Meditation Teacher. Hersher is also the Co-founder of Digital Wellness Day, reaching over 7.5 million people across the globe. Most recently, Hersher's work was featured at Spotify, The King Abdulaziz

Center, Dolby, and in publications including The Stanford Social Innovation Review, Al Jazeera, and Voice of America.

Tyler Rice is Co-founder and VP of Business Development at the Digital Wellness Institute. An experienced social entrepreneur, Tyler's eyes were opened to the importance of Digital Wellness during his years spent in healthcare and corporate consulting where he saw the first-hand effects of digital overuse leading to burnout, attrition, and skyrocketing mental health costs. Motivated to address the growing need for Digital Wellness in the workplace, Tyler pursued coursework through Stanford's School of Engineering and a Master's Degree in Public Administration and social innovation at NYU to solve for the "always on" screen-connectivity, both at work and at home.

Dr. Sophie Janicke-Bowles is an Assistant Professor at the School of Communication at Chapman University.Her interdisciplinary research and teaching experiences are in the field of positive psychology, mindful communication, new technologies, and happiness. Specifically, she is researching what type of technology usage and media content can increase well-being, connectedness and prosociality (i.e., social media, smartphone use, films, music, TV). She spearheaded the first scientifically validated Digital Flourishing Scale for adults and adolescents, has co-authored the very first book on Positive Media Psychology and has published dozens of peer reviewed academic articles and book chapters.

The three interviewers, along with CEO Amy Blankson, have led the Digital Wellness Institute from its inception in 2018 to today. Additionally, the team is also responsible for organizing DWI's nonprofit arm, Digital Wellness Day, an annual holiday campaign that has reached over 7 million globally in 26 countries. Digital Wellness Day provides a year-round free resource hub for all ages to improve their relationship with screens and features expert panels highlighting some of the leading voices in digital wellness education. It has been running for 3 years and counting.

ADULT LEARNING CHALLENGES:

In your experience, especially through your DIGITAL WELLNESS 101 COURSE, and your EBOOK creation and distribution, what are the challenges that are faced by the professionals and individuals, especially parents of young children in the fight of screen addiction phenomena?

ANSWER:

Professionals and individuals, especially parents of young children, commonly face three main challenges in the fight against screen overuse. First, they lack a common definition of what constitutes problematic use. In fact, the term "screen addiction" isn't officially recognized in the United States. This is perhaps the most salient example of the challenges professionals, individuals, and parents of young children face in solving the problem. Given the lack of a clinical definition of "screen addiction," the Digital Wellness Institute uses the term "screen time overuse" to describe the issue to a broader audience. Without a clinical definition of screen "addiction," professionals, individuals, and parents are left to wonder: does the action my client or loved one exhibit fall under the category of "addiction?" If so, what are the steps one can take to address the issue? If it doesn't fall under the

"addiction" category, does the person's usage habits constitute "problematic use" that should be remedied?

To help eliminate confusion the Digital Wellness Institute created a scientific model called the Digital Flourishing Model® to create the framework and roadmap for behavioral change. The model involves the intersecting dimensions of productivity, environment, communication, relationships, mental health, physical health, the quantified self, and digital citizenship. In its entirety, it provides a roadmap to what we term Digital Flourishing: optimal state of health and well-being that a person using technology is capable of achieving. This research has been packaged in a 90-minute interactive e-learning course called Digital Wellness 101, which institutions like McGill University believe can address screen time overuse in students and adults alike.

Second, they face stigma and feelings of shame and negativity that accompany the issue of digital overuse. We strongly believe that the answer to technology overuse is not tech-abandonment. As an Institute rooted in the practice of positive psychology, we believe an empowerment-oriented approach is best suited to address the issue by helping individuals engender a flourishing mindset: defining for themselves how much tech use is too much, and re-aligning their intentions to promote healthier digital habits. There needs to be a middle ground - a state of digital flourishing where a person is enjoying the benefits of digital usage while protecting their time and energy from excessive overuse. That's what we advocate for.

Finally, we find that parents lack the guidelines for how much screen time is "too much," and how much time leads to detrimental consequences for them or their children. In general, parents lack skills to monitor their children's screen time, which is where our Digital Wellness Certificate course becomes a helpful resource for them. Furthermore, in order to change screen time habits long term, parents often forget the most important impetus for change for their children: their own screen time habits. Allowing parents to realize that hands-on experiential exercises can be highly beneficial to overcome screen time overuse by teaching them to demonstrate positive digital usage behavior themselves.

The Digital Flourishing Model

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COMPETENCES EXPECTED IN RELEVANT ENTERPRISES:

What are the relevant competencies expected of professionals that work with children and/or parents,
when children are at high risk of screen addiction?

ANSWER:

We recommend that professionals working with children and / or parents with children at high risk of

screen education should be well-versed in digital well-being and hold a record of training completion from a certifying body. For individuals that fall into this category, DWI created the Certified Digital Wellness Educator Program. This program empowers parents and educators alike to speak on the topic of Digital Wellness and Digital Flourishing®, and intervene for those at a high risk of screen time overuse.

The curriculum is designed with the learning flow and competencies:

1. Knowledge
- Understand key terminology of digital wellness and the attention economy
- Identify the warning signs of technology addiction, technology dependency, and digital distress
- Understand current technology trends and their impact on human behavior
- Understand the impact of mainstream technologies on mindfulness in society
- Discuss the design and regulation of technology for digital health

2. Embodiment skills
- Speak authoritatively about the eight components of Digital Flourishing®
- Discover practices aimed specifically at improving our relationship with technology
- Model the prevention of and recovery from digital burnout and sensory overload

3. Empowerment skills
- Coach for effective digital boundaries and intentional technology practices
- Assess and track digital wellness over time using research-based methodologies

Additional Objectives
- Learn key Digital Wellness terminology and industry trends
- Optimize breaks and understand the impact of digital distress on the body
- Assess the impact of digital and social media on emotional health
- Create effective digital boundaries for positive and connected relationships
- Learn about written inflection and linguistics to communicate efficiently and effectively online and offline
- Utilize techniques to overcome distraction in the age of the attention economy
- Uncover and reshape your digital footprint both personally and professionally
- Harness data for introspection and positive growth by understanding tech enabled health
- Rework physical spaces at work and home to achieve maximum wellness
- Implement course knowledge to your professional to evolve with the digital landscape

ADDRESSING EDUCATIONAL RESOURCES:
Do you know any relevant educational material, methodology or pedagogical interventions for preventing and detecting screen addiction? Can you please describe them?

ANSWER:

Methodology and Pedagogy: The already described Digital Flourishing® model and Digital Flourishing Survey® are our methodological and pedagogical offerings created in partnership with leading academic researchers across North America. The Flourishing Survey creates a framework from which individuals can measure their own state of digital wellness in just a few minutes. The approach involves the dimensions of productivity, environment, communication, relationships, mental health, physical health, the quantified self, and digital citizenship.

And for researchers looking for scientifically validated ways to measure change and intervention related to screen time overuse, The Digital Flourishing Scale was developed to specifically focus on measuring positive perceptions of an individual's experiences and behaviors in mediated social interactions. The scale encompasses five dimensions of digital flourishing including connectedness, civil participation, positive social comparison, authentic self-disclosure, and self-control, whereas the latter is specifically concerned with screen time overuse.

High digital flourishing captures users' multi-facetted perceptions of benefits from digital communication technologies: feeling closely connected to and supported by their online community, experiencing considerate and reflected interactions with others and consistent and authentic presentation in digital arenas, feeling inspired when comparing with others, and in control about when to start and when to stop interacting online. The scale has also been adapted to specifically measure positive digital communication in adolescents as well. Both scales are currently under review at peer reviewed scientific journals.

1 2 Educational Material:
The Digital Wellness Institute has created programming to address the lack of digital wellbeing through an empowerment-oriented approach through our Digital Wellness 101 course, our 15 minute micro-learnings on each dimension of the Digital Flourishing® wheel, as well as our 10-week on-demand certification for aspiring digital wellness advocates and experts.

For each area covered in our Digital Flourishing Model we provide specific exercises for students to learn about the determinants and benefits of their technology use. Related to screen time overuse, one valuable exercise we promote is having students reflect on their values and then investigate how much their specific phone use is matching or violating those values. Here is the example Handout. Please note the handout linked is the intellectual property of the Digital Wellness Institute. Any reposting or reproduction of this handout in public materials must be accompanied by proper citation and written permission.

2 Rosič, J., Janicke-Bowles, S.H., Carbone, L., Vandenbosch, L., & Lobe, B. (under review 06/2022). Positive Digital Communication among Youth: The Development and Validation of a Digital Flourishing Scale in Adolescence. The study is pre-registered: https://doi.org/10.17605/OSF.IO/WXR3K Under Review at Frontiers in Digital Health.
1 Additional Journal Resources and Citation: Janicke-Bowles, S.H., Buckley, T.M., Rey, R., Wozniak, T., Lomanowska, A., Meier, A. (2021). Conceptualizing and Assessing Digital Flourishing. Presented at the International Communication Association, May 2021 (virtual conference).

Click for PDF 10 Interventions for Preventing and Detecting Screen Addiction: As described in the

answer to Question 1, “screen addiction” isn't officially recognized in the United States. However, problematic media use can be measured via the Problematic Media Use Measure (PMUM).

To prevent the overuse and misuse of screens through proactive education, The Digital Wellness Institute also features 2 partners: Lookup. Live featuring youth led solutions for Digital Wellness, and Fair play (formerly The Screen Time Action Network) featuring resources for parents and a new youth leadership board. Students at the Digital Wellness Institute are introduced to these organizations and related resources as Directors of both partner organizations, Susan Reynolds and Jean Rogers are featured as instructors in our signature, immersive, Certified Digital Wellness Educator program. This program is accredited to offer continuing education credits to a variety of mental health and health promotion professionals in the U.S., and is an official impact party of the Emmy award-winning Social Dilemma documentary.

CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES:

What are the appropriate conditions for successful contributions and positive outcomes of implementing
such interventions in the working or everyday environment?

ANSWER:

At The Digital Wellness Institute we believe that parents must model healthy screen use and related behavior in order for the intended changes to be seen in children. Further conditions for successful changes in screentime overuse are a strong community of others engaging in the same habit changing behaviors. Students who take our courses are automatically added to a community of alumni in a slack channel so they can support each other in the new habits they have formed and practices they have learned throughout the course.

We know from research that specifically for children and young adults, it is important that their peers engage in similar screen habits or implement change together. Thus, in addition to parents supporting each other, creating an environment where children can practice new habits together is an important condition for success. It’s also important that employers take the lead on incorporating the “right to disconnect” within their workforce. Doing so allows parents the opportunity to dedicate time away from screen to enjoying activities with their children.

IMPACT OF CONTRIBUTORY APPROACHES:

What is the impact of such approaches?

ANSWER:

The Digital Wellness Institute has had an incredible impact to date. The Institute was born out of collaboration and contributions among key educational leaders in the digital wellness field. In 2018, Apple launched its first digital wellness tool, now known as ScreenTime. While this product was incredible and much-needed, its launch unfortunately led to the overnight removal of several other amazing wellness apps in the App Store. Thanks to the swift and brave action of a group of grassroots

developers, a petition was circulated to garner more than two thousand signatures which led to the successful reinstatement of these well-being apps.

After this incredible victory, there was a groundswell of interest in organizing the world's first trade association for digital wellness, dubbed the Digital Wellness Collective. The Digital Wellness Collective grew to become an international collaboration of over 120 companies worldwide. Out of that initiative came the explicit need for standardized education and a training body dedicated to equipping leaders with a common definition of digital wellness and a set of research-based metrics and skills for achieving a more positive digital culture. In March 2020, just as the global pandemic was emerging, the Collective formally reorganized as the Digital Wellness Institute and launched its flagship certificate program for those looking to become Certified Digital Wellness Educators.

Since March 2020, the Digital Wellness Institute has taught over 254 students from 36 countries. Of those who graduated our course, at least 185 leaders have brought the materials they learned to their companies further spreading digital wellness to thousands of others.

INNOVATIVE APPROACHES:
Do you have any further innovative interventions that you may know or want to suggest for being implemented in your working or everyday conditions?

ANSWER:
We believe that to tackle screen time overuse, simple technology tools or apps of time restraint are not enough. Instead, we need to give children, young adults, and parents tools to guide their tech usage in ways that benefit them. To do so, we need curriculums as early as kindergarten and elementary school to teach children about how technology works and what they have to do to reap the benefits of it while mitigating its associated harms.

Furthermore, Parents need education on how apps are designed and impact specifically the brains of their children to make the best decisions that fits with their lifestyle in terms of how they want to use technology in their homes. Technology has developed so fast that we are behind in creating appropriate guidelines for their use. Scientifically validated curriculums on digital wellness for children, adolescents and parents is an intervention that would help bring the next generations up to speed to today's digitally saturated world.

Finally, we believe that the companies have a particularly strong responsibility to make remote and hybrid work more humane and protect workers from the significant health risks stemming from over-connection, a blurring of the lines between work and private life, higher work intensity and technostress. More information about the 501 members of the European Parliament who signed on to this agreement can be found here. In order to address this, the Digital Wellness Institute deploys courses, consulting, and certification to help companies create a culture of Digital Wellbeing, so that it may be passed down to parents and children alike.

MOMENTUM MARKETING SERVICES LIMITED CONTRIBUTION

ITALY

- MATEHAB CONTRIBUTION

INTERVIER BACKGROUND:
Studies, professional-life
Gavino Puggioni: Volunteer Trainer for Social Warning - Digital Ethical Movement. Digital wellness trainer and coach. Co-founder of Logout Livenow, Europe's first Digital Detox tour operator.

ADULT LEARNING CHALLENGES:
What are the challenges that are faced by the professionals and caregivers in the fight of screen addiction phenomena?

Surely, we have to consider separately the challenges that need to be faced by parents / teachers towards the youngest and those that concern anyone without distinction of age and role.

From point 1 to 4: especially concerns parents / teachers;
From point 5 onwards: it concerns everyone

1) Bridging the generation gap by studying the digital world that young people attend. Often parents, teachers, and other caregivers are unfamiliar with the sites and apps that guys attend. They don't know what it is, what they do and who they are with relate, what are the consequences and risks. It is essential to inform themselves continuously to discuss with the child / pupil / patient and recommend the most appropriate use.

2) Establish usage's rules They can refer to "time": a maximum of one hour of PlayStation per day, no smartphone after 10pm or to " some forbidden areas": no-digital devices where they are not allowed (for example the bedroom). It is essential that those rules are shared and respected by both parents and children. The parents always lead by example. It is a question of trust and credibility.

3) Avoid using the "pacifier smartphone" Never hand your smartphone to children when they are: bored, angry or to reassure them. The child will develop a need to use the tool whenever he experiences these sensations and does not have to manage his own emotions.

4) Talk to the kids and sign a pact We often overuse the smartphone because this solves it situations of severe discomfort. To name a few: boredom, not wanting to make the effort to overcome difficulties, obtain the approval of others. Confront with the kids to understand how they feel and make them think is of fundamental importance. This must be followed by an agreement on use. Orders such as "Put that smartphone away!" they do not produce good results. We need a deal parent-child agreed and approved by both parties.

5) Restore the balance of private life / work - With smartphones and digital technology, we bring work into private life and vice versa. We never disconnect and are always distracted. The pandemic has

highlighted this problem. The fundamental challenge is to re-establish this balance and divide private life from work, carving out time for oneself themselves, for loved ones and to rest.

6) Know the psychological levers used by tech companies to make us use them devices more and more often. Because we use social media so often, we check e-mail and children react hysterically when it is removed smartphone? These tools were studied and designed by neuroscientists, based on persuasive design techniques and science notions behavioral. The goal is to make us use more time and more often the devices. Knowing the psychological levers that push us to do it, we can act to prevent the habit from becoming addictive.

7) Balance online and offline activities Do not exceed on one side or the other. Now digital is an aspect fundamental of our life, it is therefore necessary to use it in a way aware. After each online activity there must be a break or an activity offline. Some idea? Nature outing, physical activity, theme evening, talk with other people. The ideal would be to carry out these actions in a group, both in family who at work or between friends.

8) Create alternatives Often we become addicted to devices because there are no alternatives for us gratify. It is vital to value your time offline, to pursue passions, hobbies, value relationships and family. All activities that gratify us and make us feel good. As a family we can: organize themed evenings, weekends surrounded by nature, games in company to do in the evening.

9) Use monitoring and parental control tools Many tools help us track how much time we spend on smartphones and allow us to place limits on certain apps. The most important are: "Usage time" on IOS and "Digital Wellbeing" on Android. The Parental Control features, essential for parents, allow you to control the activities of the children on the devices and to limit some functionality of the app. For example: Google and YouTube search filters, chat with strangers, unsuitable videos, in-app purchases, use of certain apps, etc.

COMPETENCES EXPECTED IN RELEVANT ENTERPRISES:

What are the relevant competencies expected for professionals that work with children of being at high risk of screen addiction?

1. Recognize addiction symptoms: (I list some symptoms and follow deepening in the third question with tests to detect addiction)
   a. It takes up most of the time of the day
   b. Inability to control
   c. Mood alterations
   d. Progressive abandonment of previous tasks and interests
   e. Phenomena of withdrawal from social life

2. Recognize the psychological levers used by tech companies and "break" the mechanism. (As explained in the previous question in point 6).

3. Don't use it so often, especially in front of them. Children are great imitators; therefore, they will want to use it too. Often it also becomes an excuse: “if you can use it, I can use it too”.

4. Learn about educational apps, try them out and use them with them. Before the age of 8, children should only use educational apps and quality in the presence of an adult. The solitary and passive use is absolutely to be avoided.

5. Direct them towards a positive and empowering use of technology. Technology can be an excellent tool to discover new passions, meet people who can have a positive impact, discuss, help those most in need. It is essential to guide young people in this process.

ADDRESSING EDUCATIONAL RESOURCES:

Do you know any relevant educational material, methodology or pedagogical interventions for preventing and detecting screen addiction? Can you please describe them?

The test helps us assess whether our internet use is excessive and unsafe "dependence". Here below are the questions: The following questions should be answered about your use of the internet for private purposes. Answers can be given on a 5-point scale: (0) Never, (1) Seldom, (2) Sometimes, (3) Often, (4) Very often.

1. How often do you find it difficult to stop using the internet when you are online?
2. How often do you continue to use the internet despite your intention to stop?
3. How often do others (e.g. partner, children, parents, friends) say you should use the internet less?
4. How often do you prefer to use the internet instead of spending time with others (e.g. partner, children, parents, friends)?
5. How often are you short of sleep because of the internet?
6. How often do you think about the internet, even when not online?
7. How often do you look forward to your next internet session?
8. How often do you think you should use the internet less often?
9. How often have you unsuccessfully tried to spend less time on the internet?
10. How often do you rush through your (home) work in order to go on the internet?
11. How often do you neglect your daily obligations (work, school or family life) because you prefer to go on the internet?
12. How often do you go on the internet when you are feeling down?
13. How often do you use the internet to escape from your sorrows or get relief from negative feelings?
14. How often do you feel restless, frustrated, or irritated when you cannot use the internet?

Maximum: 56 pts
Indicator of internet addiction: 28 pts. or more

A2. IAT (Internet Addiction Test) - [2]

This questionnaire consists of 20 statements. After reading each statement carefully, based upon the 5-point Likert scale, please select the response (0, 1, 2, 3, 4 or 5) which best describes you. If two choices seem to apply equally well, circle the choice that best represents how you are most of the time during the past month. Be sure to read all the statements carefully before making your choice. The statements refer to offline situations or actions unless otherwise specified.

0 = Not Applicable
1 = Rarely
2 = Occasionally
3 = Frequently
4 = Often
5 = Always

1.How often do you find that you stay online longer than you intended?
2.How often do you neglect household chores to spend more time online?
3.How often do you prefer the excitement of the Internet to intimacy with your partner?
4.How often do you form new relationships with fellow online users?
5.How often do others in your life complain to you about the amount of time you spend online?
6.How often do your grades or schoolwork suffer because of the amount of time you spend online?
7.How often do you check your email before something else that you need to do?
8.How often does your job performance or productivity suffer because of the Internet?
9. How often do you become defensive or secretive when anyone asks you what you do online?
10.How often do you block out disturbing thoughts about your life with soothing thoughts of the Internet?
11. How often do you find yourself anticipating when you will go online again?
12. How often do you fear that life without the Internet would be boring, empty, and joyless?
13. How often do you snap, yell, or act annoyed if someone bothers you while you are online?
14. How often do you lose sleep due to being online?
15. How often do you feel preoccupied with the Internet when off-line or fantasize about being online?
16. How often do you find yourself saying "just a few more minutes" when online?
17. How often do you try to cut down the amount of time you spend online and fail?
18. How often do you try to hide how long you've been online?
19. How often do you choose to spend more time online over going out with others?
20. How often do you feel depressed, moody, or nervous when you are off- line, which goes away once you are back online

B. Prevent digital addiction

B1. Guidelines for children under 8 – SIP (società italiana di pediatria).

According to the American Academy of Pediatrics and with the Australian guidelines we suggest that the media device exposure in childhood should be modulated based on the clinical evidence.

In details:
a) we recommend no media devices use:
- in children under 2 years of age
- during meals
- at least for 1 h before bedtime
- in case of fast-paced programs, apps with distracting or violent content
- as a limit pacifier, to keep children quiet in public places.

b) we suggest to limit media exposure:
- to less than 1 h per day in children aged 2–5 years,
- to less than 2 h per day in children aged 5–8 years
- to high-quality programming
- just in presence of an adult. Children should share
- the use of media devices with caregiver in order to promote child's learning and interactions. In a world where children are "growing up digital", parents play an important role in teaching them how to use technology safely. Families should monitor children's media content and apps used or downloaded.
- to apps tested by a caregiver before the child usage. More than 80,000 apps are labeled as educational, but few researches have demonstrated their actual quality. Parents should check age-appropriate apps, games and programs to make the best choices for their children. To make sure of the quality of media used, parents can consult with pediatricians on what kids are viewing and about any issues associated with media.

B2. Digital education interventions in schools

I point out an important reality such as Social Warning - Digital Ethical Movement of which I am part as a volunteer-trainer. Non-profit project to make children and parents aware of potential and risks of the web through a capillary network of trainers-volunteers throughout Italy. The target is to bring digital culture to schools with information activities and ethical actions that improve society thanks to a conscious use of the network.

Fundamental meetings to educate children on important topics such as: online reputation, cyberbullying, hate speech, fake news, world of work. Every year, thanks to the questionnaires delivered to all schools, Il Movimento publishes data from the Digital Scientific Observatory on the use of devices by young people and very young.

B3. Digital wellness coaching

I, personally, carry out this activity. Coaching takes place individually, is personalized and aims to develop the potential of the single individual.
The digital wellness coach guides the client to a conscious use of social media and of the smartphone that will allow him to enhance the positive sides and eliminate those negative to make digital an added value in his life and not a obstacle. The coach does not behave like a consultant by telling the client which is the solution but, through questions, guides him to become aware of his negative habits, recognize the consequences, change habits and be in able to self- regulate in the future.

B4. Right to disconnect
Many companies adopt internal regulations governing the “right to disconnection "to promote work / life balance and avoid cases of Burnout (condition of extreme work stress). It often consists of bands hours in which the company can absolutely not contact its employees or in which the employee is not required to answer. In recent years, the Parliament too French and Italian have passed laws in this regard.

B5. Tech-free methodology used by the Waldorf School of San Francisco in a private school in Silicon Valley, the Waldorf School of San Francisco, the children cannot use technological tools up to the age of 14. Below the explanation of the methodology on their site:
https://www.sfwaldorf.org/education/grade-school/digital-literacy

Early Childhood Young children learn through imitation, imagination, movement, play.

Teachers tell beautiful stories with complex vocabulary and sentence structure. Children are unencumbered by the passive consumption of fixed media images, which scientific research confirms are difficult to process and can hinder learning. Grade School Media-free classrooms are places of human connection and experiential, creative lessons. Middle schoolers are introduced to digital literacy, exploring questions of online behavior, information resources, and social citizenship. Families agree upon class community guidelines for the introduction of technology.

High School
Students use technological tools for learning and creation, and teachers cultivate critical thinking through discussion-based seminars and inquiry- based exploration. There is a media center, rotating laptop carts, and cloud-based resources. Phones are turned off to create a space for learning and social connection.

CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES:
What are the appropriate conditions for successful contributions and positive outcomes of implementing such interventions in the working or everyday environment?

- Awareness of severity of the negative effects of addiction.
- Flexibility: Do not completely ban or demonize the use of digital devices.
- Training: Training on digital education and digital wellbeing by parents/ teachers / coaches / HR managers.
- Create alternatives: Support sports, hobbies, passions, relationships.

IMPACT OF CONTRIBUTORY APPROACHES:
What is the impact of such approaches?

INNOVATIVE APPROACHES:

Do you have any further innovative interventions that you may know or want to suggest for being implemented in your working or everyday conditions?

- Conscious use: moderate and conscious use aimed at enhancing the positives aspects of digital devices.
- Sharing: Social impact by teaching what you have learned to loved ones or to people close to you.
- Improve many aspects of your life and earn: well-being, time and productivity.
- Using technology as an empowering tool to improve as a person and professional.

Further Innovative interventions:

1. Digital Detox method.

Carry out a healthy Digital Detox at least once a year. Digital Detox is: "a period of time of one or more days in which a person voluntarily renounces to use digital devices such as mobile phones or computers, in order to reduce stress and focus on social interactions in the real world. "

The benefits are different:

- Unplug
- Feel relaxed
- Eliminate stress
- Give your mind a break that needs to rest
- Resume more productive, creative and focused work
- Reflect on your digital habits and change them
- Dedicate time to take care of yourself and loved ones.

I am co-founder of Logout Livenow, the first Digital Detox tour operator of Europe: we organize daily experiences and retreats in which the participants they abandon digital devices to disconnect from the internet and from life hectic, reconnecting with oneself, nature and other people. Undertaking thus a real digital wellbeing path, followed by a coach specialized. We organize Digital Detox for children, adults and companies. It is also very important to carve out at least an hour of Digital Detox in your own daily routine.

2. Online and offline business balancing

Dutch company desks. A Dutch company has added removable desks to its office which at 18 are automatically moved towards the ceiling. Every day they come organize activities such as gymnastics classes, yoga, company parties. This helps to promote the balance of private life / work and encourage disconnection, increasing employee well-being.

https://www.researchgate.net/publication/23652985_The_Compulsive_Internet_Use_Scale_CIUS_Some_psychometric_properties

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3480687

INTERVIER BACKGROUND:
Studies, professional-life experience
Marina Regina
Psychologist - Psychotherapist - Educator and Counselor

After a first degree in Education and Training Sciences, I completed a three-year master's degree in Individual and Group Counseling. During this training period, I discovered my passion for psychology, so I took a master's degree in Clinical Psychology and later a specialization in Gestalt Psychotherapy. In the meantime, I earned several masters, including one in Ericksonian Hypnosis and another in Specific Learning Disorders. I devote most of my time to clinical work within my private practice.

ADULT LEARNING CHALLENGES:
What are the challenges that are faced by the professionals and caregivers in the fight of screen addiction phenomena?

There are many challenges that professionals are facing, but the basis to start is definitely being able to create a dialogue between teachers, parents, teens and the Psychologist- Psychotherapist who eventually enter in contact with the patient. Collaboration and teamwork are necessary conditions for the intervention on the boy with addiction to have a positive outcome. It would be unthinkable for a helping relationship professional to be able to help the patient without the collaboration of the entire system in which the young person is embedded. Each person is embedded within multiple systems (family system, school system, etc.) and often, the individual's "illness" is only the external manifestation of a dysfunctional system, which is precisely why the greatest challenge involves the intervention succeeding in involving the system in which the young person is embedded.

To do this it is required extensive information and awareness-raising work at multiple levels, starting with schools and families. Train and inform adults about the digital world, the positive and the negative implications it brings. In the majority of cases, adults do not know their children's virtual world, what apps they use, what sites they visit or who they interact with on the web. They do not imagine that digital devices can conceal so many dangers and above all, many are unaware that prolonged exposure to these devices, can create a real addiction. That is why information, in these cases, is vital. But then, should we ban young people from using digital devices? The answer is NO! This is where further challenges arise, as in the age we are living in, it is necessary to recognize that smartphones, tablets, PCs and various consoles, are part of our lives. The real core of the issue lies in educating young and old in their proper and healthy use. Many professionals agree that in the early years of a child's life it is necessary to avoid the use of smartphones and other devices. As the child grows, he or she will get closer to such devices, but exposure times should be very limited and, in any case, it is not recommended to give one away before the age of ten. It is important to establish firm rules of use regarding the times, places, and circumstances under which such devices can be used. They should also never be used by parents with secondary purposes, such as using the smartphone to calm the child, as this will prevent him from learning to express emotions in a healthy way, or to make

him eat, as this would prevent the child from establishing a good and conscious relationship with food. In addition, it is essential to avoid solitary and passive use, especially before the age of 10. It is important that there is always a guide to supervise what the child watches and does, so that he or she can intervene and explain, so that it still becomes an educational moment. These are just a few examples, of course, the issue should be dealt with in a broader and more detailed manner.

COMPETENCES EXPECTED IN RELEVANT ENTERPRISES:

What are the relevant competencies expected for professionals that work with children of being at high risk of screen addiction?

1) First, to set a good example because adults primarily educate by their own behavior that is imitated by younger people. Bandura said that personality is formed, in large part, by modeling.

2) Know the topic of screen addiction and what the possible risks are.

3) Recognize that it is a true form of pathological addiction and not just a pastime.

4) Know how to identify the warning signs in children/youth behaviors, such as aggressive reactions when the device they are using is taken away from them, or poor socialization with peers, low school performance, poor commitment to homework, etc.

5) Recognize the psychological levers used by tech companies, i.e., why these tools are so persuasive to the human mind.

6) Know how to offer viable alternatives, to encourage children to use time in healthier and more constructive ways.

7) Explaining to them it is good to use technology for good purposes.

8) Helping children recognize and manage their emotions, especially the anger and frustration that arise at the very moment they are prohibited from using the devices in question.

ADDRESSING EDUCATIONAL RESOURCES:

Do you know any relevant educational material, methodology or pedagogical interventions for preventing and detecting screen addiction? Can you please describe them?

Please see the tests of Gavoni.

CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES:
What are the appropriate conditions for successful contributions and positive outcomes of implementing such interventions in the working or everyday environment?

The basic condition from which to start is information and training on these issues. They should involve the child/youth, the family and the school. To create, around the young person, an informed and knowledgeable environment that does not judge but is supportive in order to overcome a condition of extreme difficulty.

IMPACT OF CONTRIBUTORY APPROACHES:
What is the impact of such approaches?

The impact of these contributions can definitely help the person directly affected to feel better, through a more conscious use of technologies and through a healthy expression and management of their emotions. In addition, it will have an impact on the whole family system that will find a new balance given by situational awareness and not being left alone in managing such a complicated situation, this will improve the quality of life of all members.

INNOVATIVE APPROACHES:
Do you have any further innovative interventions that you may know or want to suggest for being implemented in your working or everyday conditions?

I do not know of any innovative methods in this sense, but I do know of one method that has been returning excellent results forever and in all forms of addiction or distress, in general. I am talking about psychotherapy; it is based on the human relationship. It is the relationship that arises between therapist and patient that heals. The purpose of psychotherapy is to promote change such that certain forms of emotional suffering are permanently alleviated. Specifically, I specialize in Gestalt Psychotherapy, a post-analytic psychotherapeutic method that integrates body, experiential, depth, group and family models into a unique synthesis. It originated in the United States in the 1950s, thanks to the insights of German psychoanalyst Frederick Perls, his wife Laura Posner and a group of U.S. intellectuals, including Paul Goodman and Isadore From. All experience can only take place at the boundary of contact between "a human animal organism" and its environment. And it is precisely what takes place at this boundary that is available to our observation and therapeutic intervention. According to Gestalt psychotherapy, what heals is not the rational understanding and thus control of the disorder, but rather the feeling of recognition in the intentionality of contact toward the significant other. This approach brings aesthetic values, respect for individual creativity, and recognition of the beauty inherent in human relatedness into the realm of the clinic and the person/society relationship. The art of Gestalt psychotherapy includes improvisation, creativity, and poetry as the essential word arising from the body. Gestalt psychotherapy applies to the individual, couple, family, group, and organizations. For Gestalt Psychotherapy, any disorder or pathology is a creative act of our mind in response to a situation of suffering. Precisely because of this, the symptom is received as a "message" that comes when the person is very ill. From this perspective, we can look at addiction just as a symptom and then use it to help the person "heal" from his or her inner suffering.

GREECE

- IASIS CONTRIBUTION

INTERVIER BACKGROUND

Psychology Research Assistant in Neurophysiological Lab Research Erasmus University of Rotterdam, School of Social and Behavioural Sciences, Netherlands, also psychologist at «Fenix» Humanitarian Legal Aid, Mytilene and Psychologist at «Pyxida» Centre for the Prevention of Addictions and the Promotion of Psychosocial Health, Thessaloniki (Greece) with Internship at Psychological interventions and information events on addictions and bullying in secondary education structures.

ADULT LEARNING CHALLENGES:

What are the challenges that are faced by the professionals and caregivers in the fight of screen addiction phenomena?

Lack of material and tools and diagnostic criteria, as this is a new type of addiction. People also have mistaken associated it with young people, but it does not only concern young people and adolescents as it is generally thought by the public. We cannot also diagnose it in all age groups.

COMPETENCES EXPECTED IN RELEVANT ENTERPRISES:

What are the relevant competencies expected for professionals that work with children of being at high risk of screen addiction?

Firstly, to have diagnostic criteria, to have instruction and education in the field of internet and screen use and to know where the safe use and the dependence is.

ADDRESSING EDUCATIONAL RESOURCES:

Do you know any relevant educational material, methodology orpedagogical interventions for preventing and detecting screen addiction? Can you please describe them?

I don't know any tools targeting to screen addiction. I know some tools concerning teenagers and internet use, meaning internet questionnaires about the hours spent on the screens and the type of activities (game, activities) they prefer, the control and whether the parents limit the use, how much the use is controlled on a personal and family level.

CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES:

What are the appropriate conditions for successful contributions and positive outcomes of implementing such interventions in the working or everyday environment?

Acceptance of the phenomenon and recognition of the condition, willingness to be treated and to cooperate.

IMPACT OF CONTRIBUTORY APPROACHES:
What is the impact of such approaches?

Enhancing the correct and controlled use by all groups, interventions to help the scientific community in order to more accurately and timely diagnose the phenomenon, more material and information, useful tools for parents who do not have a scientific background to detect and treat the phenomenon.

INNOVATIVE APPOACHES:
Do you have any further innovative interventions that you may know or want to suggest for being implemented in your working or everyday conditions?

Informational and educational activities on the effects of addiction, to define work environment breaks away from screens based on scientific material to rest our eyes and to increase our efficiency at work.

INTERVIER BACKGROUND
Psychologist, project manager and Adult Educator in the Research and Development department of AMKE IASIS. She has a degree in Psychology (Panteion University of Athens) and a Master's Degree in Person-Centered Counseling and Psychotherapy (Keele University, United Kingdom). At the same time, he has training in Positive Psychology (Hellenic Society of Positive Psychology), as well as in Clinical Psychopathology (First Psychiatric Clinic of the University of Athens & EPIPSY). She has participated in many European Programs, both as a participant and as an Adult Researcher and Educator. She also has experience in Counseling and Adult Psychotherapy, which she gained as a result of her employment at the "IASIS Day Center", the "North Staffs Mind" Counseling Center and the "One Recovery" Detox Center (United Kingdom).

ADULT LEARNING CHALLENGES
What are the challenges that are faced by the professionals and caregiversin the fight of screen addiction phenomena?

Resistance of the patients as they don’t consider it as an addiction. Morespecifically, they think that it does not have immediate consequences in their body as they do not detect the symptoms. As a consequence, they don’t seek for help, but their families do so.

COMPETENCES EXPECTED IN RELEVANT ENTERPRISES
What are the relevant competencies expected for professionals that work with children of being at high risk of screen addiction?

Empathy because they need to understand the others, acceptance, active listening skills, patience, and creativity as once the people enter a therapeutic framework, they have to invest in their self help and self- care skills, as well as their group working skills.

ADDRESSING EDUCATIONAL RESOURCES:

Do you know any relevant educational material, methodology or pedagogical interventions for preventing and detecting screen addiction? Can you please describe them?

I do not know something that is used in a wide field, maybe it exists, and it is used in closed detoxification units, a tool in the general public or known to all health professionals.

CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES

What are the appropriate conditions for successful contributions and positive outcomes of implementing such interventions in the working or everyday environment?

Willpower on behalf of people who are addicted or who perform such symptoms of addiction, as well as an inclusive environment, including peer support group.

IMPACT OF CONTRIBUTORY APPROACHES:

What is the impact of such approaches?

In the psychological personal aspect, the impact of such approaches is the empowerment of mental health and personal development. In the social aspect, the individuals are empowered as they are socialized again and finally concerning the professional aspect, people have the chance to rejoin professional frameworks, and therefore also have a financial benefit.

INNOVATIVE APPOACHES:

Do you have any further innovative interventions that you may know or want to suggest for being implemented in your working or everyday conditions?

No, unfortunately I don't.

3.3. | Presentation of the 10 Main Key Findings

From the case studies conducted by each partner during the first implementation phase of the project, are identified the **10 main key findings** of the involvement of the target publics (citizens& public/patient communities) in the care models (the prevention and care systems related to addictions).

More specifically, at the end of this study, the following aims should be reached:

- ✓ Examples of strategies to fight against screen addiction should be integrated into local public policies on digital transition.
- ✓ The learning and support objectives, knowledge, and skills for professional and continuing education organizations for the integration of inhabitants in care and support models, pedagogical strategies, sources of additional information and support, etc. should be defined, enabling this way the implementation of R2, R3, R4.

This approach aims to:

- ✓ address education, awareness, and learning by fostering input from target audiences,
- ✓ provide resources and models for recognizing the educational contributions of those involved in the process,
- ✓provide concrete examples of innovative inclusive training or models in the medical and social support field, which are not top-down but horizontal and which value the know-how and learning of the target publics.

| WHAT ARE THE MAIN KEY FINDINGS?

The main key findings aim to validate the common training needs allocated by the target group, as they are addressed during the first research phase conducted at the initial stages of the Project Result 1.

Through these allocated needs the main key findings will be finalized in terms of common eligibility criteria:

- ✓ Common needs by all partner countries.
- ✓ Common training gaps addressed by the different target groups.
- ✓ Research data that proofs the emerged need for the creation of training interventions.
- ✓ Recognition of the need for finding alternative training ways of empowering and strengthening the competencies of the target groups.

10 KEY FINDINGS:

KEY FINDING 1. Parenting Experiential Training

in terms of:
✓good use, balanced and healthy use of digital media and screen technology,
✓the risks, dangers of screen use and dependence.
Target Group: Parents

Parents should be trained and educated on what good and healthy use of digital media and screen technology means and what is the difference between healthy, problematic use and addiction. They should also be educated on the risks and dangers of screen use and dependence.

Common points detected by the project's consortium:
✓education, training of parents,
✓training about good use and dependence
✓education on balanced and healthy use of digital media and screen technology
✓lack of knowledge of the impact
✓fear of judgment in the side of parents
✓sometimes parents consider screens a positive thing
✓parents sometimes underestimate the extent of a child's computer use
✓difference between casual use, experimental use, systematic use

KEY FINDING 2. Professionals' Experiential Training: Theoretical and clinical training

in terms of empowering children on the following:
✓good use, balanced and healthy use of digital media and screen technology,
✓the risks, dangers of screen use and dependence.
Target Group: professionals, teachers, health professionals, mental health professionals.

Professionals working with children (teachers, health professionals, mental health professionals etc.) should be theoretically and clinically trained in order to act as role models, empower and transfer their knowledge to children about the good, balanced and healthy use of digital media and screen technology, as well as the risks, dangers of screen use and dependence.

Common points detected by the project's consortium:
✓training about good use and dependence
✓be a role model for children
✓education on balanced and healthy use of digital media and screen technology
✓lack of knowledge of the impact
✓empowerment from the side of professionals
✓proper education of educators and teachers
✓difference between casual use, experimental use, systematic use
✓lack of theoretical and clinical training in the majority of mental health professionals
✓reaching parents who might not seek of help due to social economic and social barriers

KEY FINDING 3. Children's' Experiential Training

in terms of:
✓good use, balanced and healthy use of digital media and screen technology,
✓the risks, dangers of screen use and dependence.

Target Group: Children

Children should be trained and educated both by their parents and their teachers on the good use, balanced and healthy use of digital media and screen technology, as well as the risks, dangers of screen use and dependence.

Common points detected by the project's consortium:
✓training about good use and dependence
✓education on balanced and healthy use of digital media and screen technology
✓train parents how to play with the child

KEY FINDING 4. Raising awareness campaigns and activities

in terms of:
✓informing all the target groups (children, parents, professionals, wider public) on the good and healthy use of digital media and screen technology, the difference between healthy, problematic use and addiction, as well as the risks and dangers of screen use and dependence.
✓organizing and implementing raising awareness activities within their organizations (step by step procedures on how to organize a raise awareness activity, etc.)
✓lack of knowledge of the impact

Target Group: Organizations, relevant stakeholders, children, parents, professionals, wider public

Common points detected by the project's consortium:
✓raise awareness
✓understand of the dangers of the internet, conscious
✓raising awareness of the consequences
✓awareness of balanced and healthy use of digital media and screen technology
✓campaigns aiming to educate the broader public

KEY FINDING 5. Alternative activities

In terms of:
✓finding creative activities, in order to detach the child's attention from the screen, such as sports, art, outdoor activities etc.

Target Group: Professionals, children, parents

Common points detected by the project's consortium:
✓outdoor activities
✓art & play
✓interact with people without screens

KEY FINDING 6. Individual or group support - guidance

in terms of:
✓supporting children and families in the fight again screen addiction.

Target Group: Children, families that will be supported, professionals responsible for providing to children or families individual or group educational support

Common points detected by the project's consortium:
✓active listening skills
✓group support
✓individual and group support, guidance

I suppose you have enough case studies for each category (model)..? And if you do, you might find, perhaps, that some case studies fall in more than one category. If these kind of dilemmas occur often, may I suggest (also for the ease of use), instead of just presenting these case studies in one BIG document, to take the approach of creating the categories (clickable index) on the website, and each case study can be assigned to one or more categories. If you like that and if that's technically possible (@Aine Hamill?). This is an example of what I'm saying:
https://www.foodinnovation.how/good-practice-healthy-food-service-compendium-for-vet/

KEY FINDING 7. Prevention Programs for Screen Addiction

in terms of:
✓preventing screen addiction.

Target Group: Professionals that will be the main staff of the prevention programs, children that will attend the prevention programs, parents that will be trained and supported in the framework of the prevention programs

Common points detected by the project's consortium:
✓Parental controls over Internet use play little to no preventive role
✓Prevention program

KEY FINDING 8. Damage Reduction Programs for Screen Addiction

In terms of:
✓reducing the consequences of screen addictive behaviors.

Target Group: Professionals that will be the main staff of the programs, children that will attend the programs, parents that will be trained and supported in the framework of the Damage Reduction programs

Common points detected by the project's consortium:
✓risk of relapse
✓internet use is problematic
✓reducing risks

KEY FINDING 9. Assessment tools & Methodologies

in terms of:
✓detecting the phenomenon of screen-addiction.
✓assessing the phenomenon of screen-addiction.

Target Group: Professionals

Common points detected by the project's consortium:
✓assessment tools
✓the disorder is not officially recognized

✓clinical experiments with questionable results that reduce the reliability of therapists
✓minimal literature on their effectiveness treatment protocols
✓avoiding instilling feelings of guilt or shame
✓experience in animating a group network or collective

KEY FINDING 10. Media Education / Media Literacy

Through the conducting of the case studies' research, it was detected the need of proper use of social media, and other relevant media resources utilized by the target group.

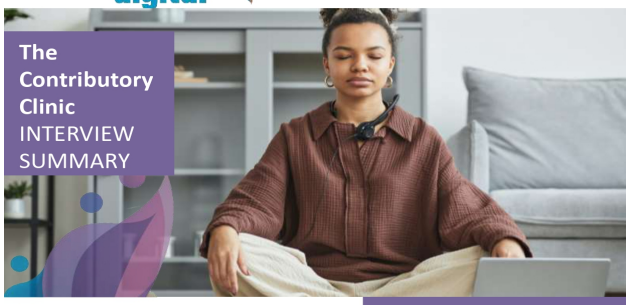
Target Group: professionals, parents

Common points detected by the project's consortium:
✓proper education on online security and safe browsing

10 portraits

- FRANCE PORTRAIT

surviving digital



The Contributory Clinic INTERVIEW SUMMARY

In your experience, what are the challenges that are faced by the professionals and caregivers in the fight of screen addiction phenomena?

A big challenge is to find ways of speaking about overexposure without sounding judgmental. It is easy to tell parents not to use screens but it quickly comes to sound as if you are telling them off. Often this produces feelings of guilt. Only rarely, it helps them actually change the way they use screens. In the worst case, you might end up isolating parents further, making them feel too embarrassed to raise the topic again. It's important to realise that if parents rely on screens it's because the screen *is doing something for them*. Often it's fulfilling certain functions usually performed by the parent, freeing up time for rest. You could say that one challenge of the healthcare professional is diagnosing overexposure, while another is diagnosing *why* this overexposure is taking place in the first place. An overreliance on screens is a symptom of an underlying problem.

Contributory research challenges the individualistic approach characteristic of modern therapy and research by focusing on the *individuation* – the transformation and coming into being – of a group. In a process of contributory research, it is the group that learns, knows and gets better together. That is also why we, for this exercise, have privileged a group interview. Instead of singling out one person to answer on behalf of everyone else, we invited six members of the contributory research group working in Saint-Denis to participate in a conversation around the challenge they face and the solutions they propose. The below is a condensed version of this discussion, which took place during one of the bi-weekly meetings of the Contributory Clinic.

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COMPETENCES

What are the relevant competencies expected of professionals that work on overexposure of children?

We might begin by critiquing the notion of 'competences' by opposing it to another term we use a lot, that of 'knowledge'. Knowledge goes further than competences. It entails a critical reflection on what you're doing and a more profound understanding of the topic, which allows you to improvise when faced with new and unexpected situations.

In terms of specific knowledge, it's important to know about the development of the child and how the digital interferes with this development. That is also what allows you to speak from a position of non-judgment. Rather than telling the parent what they ought to do and not to do, the healthcare professional should *explain* what's at play in overexposure, giving the necessary information for parents to develop their own position on the topic and a real desire to change and take responsibility for their screen habits.

What are the appropriate conditions for successful contributions and positive outcomes of implementing such interventions in the working or everyday environment?

- You need a physical place to work and a structure that can sustain the process over time. Contributory research *takes time*. In the case of the Contributory Clinic, almost one year was spent creating a shared foundation and vision before welcoming new parents to participate.
- Another important requirement has to do with the attitude of those who take part. This is true for researchers, professionals and parents alike. The academics cannot think of themselves as beholders of knowledge that trumps other ways of knowing. They have to consider themselves as a member of the group, working on equal terms with everyone else. For all members of the group, it's important to stay open-minded to new ideas and not give up in face of content that's intuitively difficult to grasp. Because contributory research is intentionally kept open, it's important too not to despair in face of unexpected turns of events. Rather, one should see them as occasions to learn and grow together as a group.

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- ITALY PORTRAIT

surviving digital

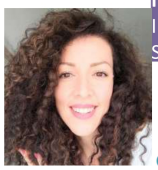
MARINA REGINA: Psychologist - Psychotherapist - Educator and Counselor

After a first degree in Education and Training Sciences, I completed a three-year master's degree in Individual and Group Counseling. During this training period, I discovered my passion for psychology, so I took a master's degree in Clinical Psychology and later a specialization in Gestalt Psychotherapy. In the meantime, I earned several masters, including one in Ericksonian Hypnosis and another in Specific Learning Disorders. I devote most of my time to clinical work within my private practice. During this training period, I discovered my passion for psychology, so I took a master's degree in Clinical Psychology and later a specialization in Gestalt Psychotherapy. In the meantime, I earned several masters, including one in Ericksonian Hypnosis and another in Specific Learning Disorders. I devote most of my time to clinical work within my private practice.

MARINA REGINA: Psychologist - Psychotherapist - Educator and Counselor

COMPETENCES EXPECTED IN RELEVANT ENTERPRISES: What are the relevant competencies expected of the professionals that work with children of concern at high risk of screen addiction?

1) Know how to establish boundaries in the childrens's screen time, without creating tension, hostility and/or frustration.
2) Know how to establish boundaries in the childrens's screen time, without creating tension, hostility and/or frustration.
3) Know how to establish boundaries in the childrens's screen time, without creating tension, hostility and/or frustration.
4) Recognize the psychological levers used by tech companies, i.e., why these tools are so persuasive to the human mind.
5) Know how to offer viable alternatives, to encourage children to use time in healthier and more constructive ways.
6) Knowledge of good use of technology for good purposes.
7) Helping children recognize and manage their emotions, especially the anger and frustration that arise at the very moment they are prohibited from using the devices in question.



Digital Intervention INTERVIEW SUMMARY

What is the impact of such approaches?

A more conscious use of technologies and healthy expression of their emotions the person can definitely feel better and be affected but the impact of this contribution. It will also have an impact on the whole family system that will find a new balance given by situational awareness and not be left alone in managing such a complicated situation. This will improve the quality of live of the whole family members.

CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and positive outcomes of implementing such interventions in the working or everyday environment?

The basic condition from which to start is information and training on these issues. They should involve the child/youth, the family and the school. To create, around the young person, an informed and knowledgeable environment that does not judge but is supportive in order to overcome a condition of extreme difficulty.

Do you have any further innovative interventions that you may know or want to suggest for being implemented in your working or everyday conditions?

I do not know of any innovative methods in this sense, but I do know of one method that has been returning excellent results forever and in all forms of addiction or distress: psychotherapy. I specialize in Gestalt Psychotherapy, a post-analytic psychotherapeutic method that integrates body, experiential, depth, group and family models into a unique synthesis. The art of Gestalt psychotherapy includes improvisation, creativity, and poetry as the essential word arising from the body. Gestalt psychotherapy applies to the individual, couple, family, group, and organizations. For Gestalt Psychotherapy, any disorder or pathology is a creative act of our mind in response to a situation of suffering. Precisely because of this, the symptom is received as a "message" that comes when the person is very ill. From this perspective, we can look at addiction just as a symptom and then use it to help the person "heal" from his or her inner suffering.

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SOURCE: www.logoutlivenow.com

GAVINO PUGGIONI: Volunteer Trainer for Social Warning - Digital Ethical Movement. Digital wellness trainer and coach. Co-founder of Logout Livenow, Europe's first Digital Detox tour operator. I studied Economic Science and Management (Tourism Management Bicocca University - Milan) and then completed a Master in Management in Tourism (Russian International Academy for Tourism).

LOG OUT, LIVE NOW INTERVIEW

What are the challenges that are faced by the professionals and individuals, especially parents of young children in the fight of screen addiction phenomena?

Professionals and caregivers are often adults that need to bridge generation gap. Often parents, teachers etc are unfamiliar with sites and app that their children are using. They don't know the risk and the consequences and for this reason it is essential to inform continuously. Adults needs to establish use's rules to avoid screen's overexposure. Smartphone should not be used as pacifier to avoid discussion and need to talk to them and show them by example (using less the phones). They should restore the balance between private and work life. With the pandemic is even more underlined this issue, because adults bring work at home so it is almost impossible to disconnect completely. They also need to know the psychological levers used by tech companies to make us addicted. Adults are compulsory checking emails, social media etc because neuroscientists use persuasive design to push people to be addicted to the mobile etc. Knowing this, adults can start to be more detached and will avoid an addicting behavior. Adults should balance online and off-line activities with their children and create alternatives, remembering always to use parental control to check on the the time spent online and track also the site and app visited.

Quote: "Bridging Generation Gap - adults VS youngsters digital Universe!"

Adults should understand more and cope with all the tricks of the "digital world" in which young people are born in, to help them recognize the "net threats" and use the devices for the right purposes".

By Materahub, Italy

IMPACT OF CONTRIBUTORY APPROACHES: What is the impact of such approaches?

-Consciousness: there will be a more conscious use aimed at enhancing the positive aspects of digital devices.

-Sharing: Social Impact because people will share what they have learned by sharing it with their loved ones and people close to them.

-Improvement: People will improve in many aspects of their lives and will gain well-being, time and productivity.

- Empowerment: Technology will be seen finally for what it is meant: empowering tool to improve as person and professional.

LOGOUT LIVENOW

CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and positive outcomes of implementing such interventions in the working or everyday environment?

- Awareness of severity of the negative effects of addiction.
- Flexibility in not completely ban or demonize the use of digital device because they are also really useful and important in our daily life.
- Training on digital education and digital wellbeing by parents / teachers / coaches / HR managers.
- Create always alternatives supporting outdoor activities, sport, hobbies, relationships.

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- DENMARK PORTRAITS

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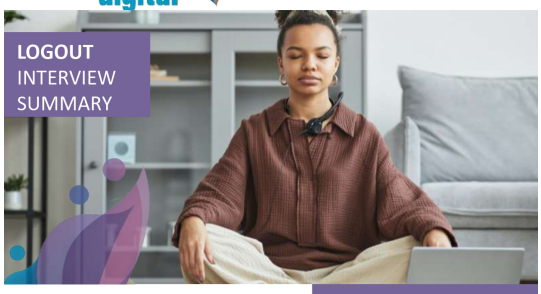

LOGOUT INTERVIEW SUMMARY

What are the challenges that are faced by the professionals and individuals, especially parents of young children in the fight of screen addiction phenomena?

It is important to highlight that screen addiction is a fairly new topic of concern and so many parents and caregivers may be unaware of the symptoms or signs to watch out for. Parents are the first to feel helpless and distressed in the event of negative changes in children's behavior while playing video games. Parents should look out for these common symptoms:

- People who become addicted to monitoring social networks often start to shut themselves in and lose touch with themselves and their loved ones
- Video game addiction can lead to endless opportunities for feelings of satisfaction, success or belonging, and on the other hand, perhaps failure in various areas of real life, are a good basis for the development of addiction.
- General addiction to the web means time spent online increases and the individual can rarely explain the usefulness, length and content of the activity. This indicates a distorted perception of time

LOGOUT services

Logout is the first specialized help center for various risky online behaviors, established in 2011. Our mission is to improve well-being in the digital environment for all, especially children and adolescents, by providing treatment, support, assistance, information, education and awareness of balanced and healthy use of digital media and screen technology.

We offer a wide range of seminars, lectures and workshops for different target groups. We also enable an interactive experience of the entire catalog of presented content remotely.

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Do you know any relevant educational material, methodology or pedagogical interventions for preventing and detecting screen addiction? Can you please describe them?

Because there are so many issues related to technology addiction, it is difficult to pinpoint just one topic or approach. Thus, we try to provide targeted educational material and workshops to our three main target groups: **The player, The parent, The Teacher.** Each of our programmes come in a variety of formats so that it will suit the learning needs of more people, e.g. webinars, workshops, group meeting, summer camp weeks, and lectures. Each target group has different issues, and we tailor our training programmes accordingly. For example:

- Logout & Restart - digital addiction
A comprehensive program designed for individuals who are addicted to digital content.

-Digital diet - digital congestion
The program is designed for individuals who overuse technology.

-Group meetings - parents
Supporting and educational group meetings for parents and partners.

-Logout Week - summer camp
Summer camp for children and teenagers or how to spend a week without technology.

https://www.logout.org/sl/

What are the appropriate conditions for successful contributions and positive outcomes of implementing such interventions in the working or everyday environment?

Mutual cooperation with other stakeholders who are interested in tackling the growing problem of screen addiction and whos mission aligns with our own, we believe this is an effective way to directly reach the target group:

- Logout have recently concluded a partnership agreement with the E-Sports Federation of Slovenia. The main focus of the collaboration between Logout and the E-Sports Federation is on raising awareness of healthy lifestyles and responsible video game play, reducing the risk of addiction and helping players with excessive gaming or addiction.
- We also signed an agreement on mutual cooperation in the implementation of practical training of University of Ljubljana the Faculty of Sports students in the academic year 2021/2022, which will enable students of the kinesiology study program to practice, and our users to get prepared and implement individual diet and exercise plans as part of the activity "More Green, Less Screen".

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surviving digital

SOURCE:
https://thedorm.com/

What are the challenges that are faced by the professionals and individuals, especially parents of young children in the fight of screen addiction phenomena?

We're still learning about how to navigate the full spectrum of what "screen addiction" can and does look like.
We try to use every tool at our disposal to assess our young clients and also keep them part of the discussion, which includes client-led presentations and group dialogue.

That being said, our process also incorporates evidence-based monitoring and oversight. We use apps to track clients' daily social media usage in order to help set weekly goals around regulating smartphone usage. We also apply various testing instruments, which can measure a client's level of virtual addiction and help them accept whether or not their lives have become unmanageable due to their technology use/abuse.

The Dorm's misison

Since 2009, our mission at The Dorm has been to guide young adults towards independence through evidence-based clinical therapies, community support and practical skill-building.

By EUEI

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Do you know any relevant educational material, methodology or pedagogical interventions for preventing and detecting screen addiction?

In terms of interventions for preventing screen addiction, we would offer skills development in a vast number of areas for our clients. Helping our clients build awareness and learn essential life skills is a key pillar of our treatment approach. Tangible skill-building is very often missed in therapeutic environments but is one of the most critical factors in fostering sustainable change.

Technology breaks down normal relationships, social cues, interactions and structures. The goal is not to overly rely on one tool for expression and interaction with the world. Without balance, the digital world can become the predominant way young adults express themselves and form interpersonal relationships which can cause many long-term issues and vital communication and interpersonal skills can be diminished.

At The Dorm, our skills therapists are focused on helping our clients 'build a life outside of treatment.' Skill-building areas include (but are not limited to) in-home wake-up support, medication oversight, cooking, cleaning, grocery shopping, budgeting, social skills, exposures, dialectical behavioural therapy (DBT) and vocational support. In addition to tangible life skills, our skills therapy can include selecting a college course, preparing for a job interview and/or supporting activities of daily living.

What are the relevant competencies expected of professionals that work with children and/or parents, when children are at high risk of screen addiction?

- As we offer a comprehensive range of Treatment Modalities, we have accredited and licensed therapists in each of theses areas. This includes cognitive behavioral therapy (CBT), dialectical behavior therapy (DBT), EMDR, motivational interviewing, exposure response prevention therapy and conventional psychotherapy/psychoanalysis.

- Our skills therapists have years of experience working with young adults who are paving a road to independence. Each client is paired with a skills therapist who is a licensed/credentialed member of our team and is not the same as the primary therapist leading individual therapy sessions. Each role is fulfilled by a different clinician at The Dorm so that our clients get the most dedicated care at every touch point during their treatment plan.

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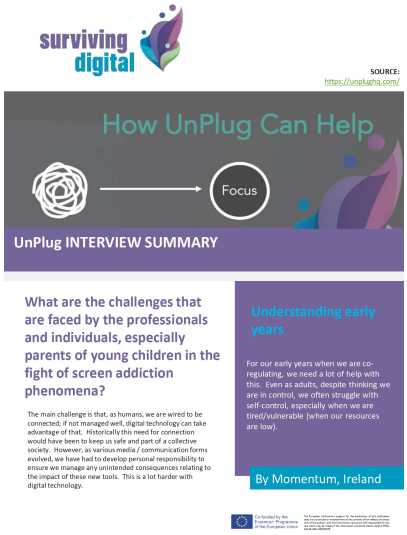
- MOMENTUM PORTRAITS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SOURCE:
https://unplughq.com/

How UnPlug Can Help

Focus

UnPlug INTERVIEW SUMMARY

What are the challenges that are faced by the professionals and individuals, especially parents of young children in the fight of screen addiction phenomena?

The main challenge is that, as humans, we are wired to be connected; if not managed well, digital technology can take advantage of that. Historically this need for connection would have been to keep us safe and part of a collective society. However, as various media / communication forms evolved, we have had to develop personal responsibility to ensure we manage any unintended consequences relating to the impact of these new tools. This is a lot harder with digital technology.

Understanding early years

For our early years when we are co-regulating, we need a lot of help with this. Even as adults, despite thinking we are in control, we often struggle with self-control, especially when we are tired/vulnerable (when our resources are low).

By Momentum, Ireland

Co-funded by the Erasmus+ Programme of the European Union

Do you know any relevant educational material, methodology or pedagogical interventions for preventing and detecting screen addiction?

No methodology suits all, as we all use tech differently. Leading examples of effective programmes would be the Digital Wellness Institute who offer courses for different types of technology use. For organisations, we would recommend our programmes to help staff improve focus, their ability to disconnect after work, and meaningful connections with colleagues.

Related psychology constructs (including but not limited to): Psychological detachment, Task Switching, User Gratification Theory, Boundary Theory, Ego Depletion, Urgency Bias, Work Design, and Motivational Theories.

Self-reporting tools – Apple Screen Time, Google Digital Wellbeing, Microsoft Viva Insights, Rescue Time

Clinical Tools (Evidence-based scales) – PRIUSS (Problematic and Risky Internet Use Screening), Internet Addiction Scale, Gaming Addiction Scale, Nomophobia Scale, Fear of Missing Out Scale, Social Media Disorder Scale, Smartphone Addiction Scale, Digital Flourishing Scale.

UnPlug

What are the relevant competencies expected of professionals that work with children and/or parents, when children are at high risk of screen addiction?

- There is an expectation for professionals / parents to have expertise on subjects such as screen time.
- Yet it's a very new subject; they are essentially pioneers.
- In the ideal world, understanding the basics of how digital technology is influencing our behaviour, such as encouraging task switching, is a valuable tool

Co-funded by the Erasmus+ Programme of the European Union

surviving digital

SOURCE:
https://www.thriveprogramme.org/

What are the challenges that are faced by the professionals and individuals, especially parents of young children in the fight of screen addiction phenomena?

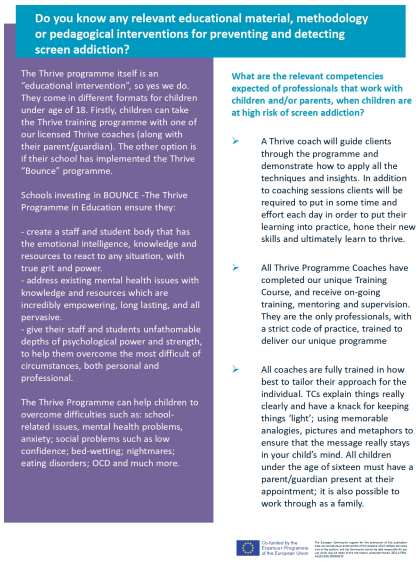
Our consultants have seen first hand the struggle parents, caregivers, employers and teachers face when coping with those suffering with mental health disorders. For children under the age of 16, it is beneficial if one or both parents be present in some or all of the sessions. This will help you to gain the understanding of why your child has the issues they have, enabling you to help and support them outside of the sessions. Very often, frustrated parents come to our coaches not knowing how to best respond to their children's behaviour – unfortunately some parenting styles and decisions (despite parents best efforts and intentions) can actually lead to symptoms and anxieties escalating in children.

What is the Thrive Programme?

The Thrive Programme® is a totally fresh approach to achieving lasting happiness, health and success. The programme teaches you how to manage your thoughts, emotions and beliefs so you can be in control of your life.

By EUEI

Co-funded by the Erasmus+ Programme of the European Union


Do you know any relevant educational material, methodology or pedagogical interventions for preventing and detecting screen addiction?

The Thrive programme itself is an "educational intervention", so yes we do. They come in different formats for children under age of 18. Firstly, children can take the Thrive training programme with one of our licensed Thrive coaches (along with their parent/guardian). The other option is if their school has implemented the Thrive "Bounce" programme.

Schools investing in BOUNCE -The Thrive Programme in Education ensure they:

- create a staff and student body that has the emotional intelligence, knowledge and resources to react to any situation, with true grit and power.
- address existing mental health issues with knowledge and resources which are incredibly empowering, long lasting, and all pervasive.
- give their staff and students unfathomable depths of psychological power and strength, to help them overcome the most difficult of circumstances, both personal and professional.

The Thrive Programme can help children to overcome difficulties such as: school-related issues, mental health problems, anxiety; social problems such as low confidence; bed-wetting; nightmares; eating disorders; OCD and much more.

What are the relevant competencies expected of professionals that work with children and/or parents, when children are at high risk of screen addiction?

- A Thrive coach will guide clients through the programme and demonstrate how to apply all the techniques and insights. In addition to coaching sessions clients will be required to put in some time and effort each day in order to put their learning into practice, hone their new skills and ultimately learn to thrive.
- All Thrive Programme Coaches have completed our unique Training Course, and receive on-going training, mentoring and supervision. They are the only professionals, with a strict code of practice, trained to deliver our unique programme
- All coaches are fully trained in how best to tailor their approach for the individual. TCs explain things really clearly and have a knack for keeping things 'light'; using memorable analogies, pictures and metaphors to ensure that the message really stays in your child's mind. All children under the age of sixteen must have a parent/guardian present at their appointment; it is also possible to work through as a family.

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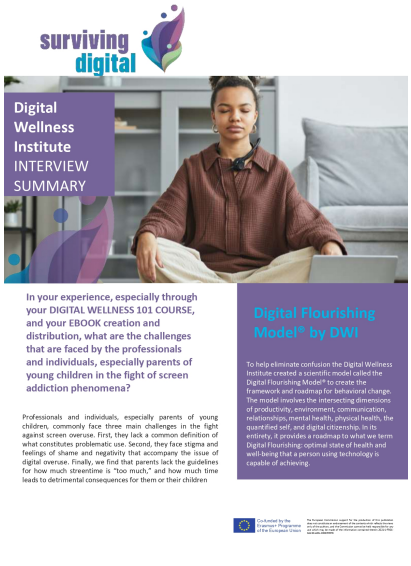
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Digital Wellness Institute INTERVIEW SUMMARY

In your experience, especially through your DIGITAL WELLNESS 101 COURSE, and your EBOOK creation and distribution, what are the challenges that are faced by the professionals and individuals, especially parents of young children in the fight of screen addiction phenomena?

Professionals and individuals, especially parents of young children, commonly face three main challenges in the fight against screen overuse. First, they lack a common definition of what constitutes problematic use. Second, they face stigma and feelings of shame and negativity that accompany the issue of digital overuse. Finally, we find that parents lack the guidelines for how much streantime is "too much," and how much time leads to detrimental consequences for them or their children

Digital Flourishing Model® by DWI

To help eliminate confusion the Digital Wellness Institute created a scientific model called the Digital Flourishing Model® to create the framework and roadmap for behavioral change. The model involves the intersecting dimensions of productivity, environment, communication, relationships, mental health, physical health, the quantified self, and digital citizenship. In its entirety, it provides a roadmap to what we term Digital Flourishing: optimal state of health and well-being that a person using technology is capable of achieving.

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COMPETENCES

What are the relevant competencies expected of professionals that work with children and/or parents, when children are at high risk of screen addiction?

We recommend that professionals working with children and/or parents with children at high risk of screen education should be well-versed in digital well-being and hold a record of training completion from a certifying body

At The Digital Wellness Institute we believe that parents must model healthy screen use and related behavior in order for the intended changes to be seen in children. Further conditions for successful changes in screentime overuse are a strong community of others engaging in the same habit changing behaviors.

www.digitalwellnessinstitute.com

- Students who take our courses are automatically added to a community of alumni in a slack channel so they can support each other in the new habits they have formed and practices they have learned throughout the course.
- We know from research that specifically for children and young adults, it is important that their peers engage in similar screen habits or implement change together.
- Thus, in addition to parents supporting each other, creating an environment where children can practice new habits together is an important condition for success.

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- GREECE CONTRIBUITION

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IASIS NGO

Surviving Digital:PR1:Study: Identification of innovative practices to support the fight against screen addiction

Interviewer's Portrait

www.website.eu

Co-funded by the Erasmus+ Programme of the European Union

"Resistance of the patients is one of the challenges in the fight of screen addiction phenomena, as they don't consider it as an addiction."

Marianna Anagnostopoulou

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What are the relevant competencies expected for professionals that work with children of being at high risk of screen addiction?

"Firstly, to have diagnostic criteria, to have instruction and education in the field of internet and screen use and to know where the safe use and the dependence is."

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What are the appropriate conditions for successful contributions and positive outcomes of implementing such interventions in the working or everyday environment?

"Acceptance of the phenomenon and recognition of the condition, willingness to be treated and to cooperate."

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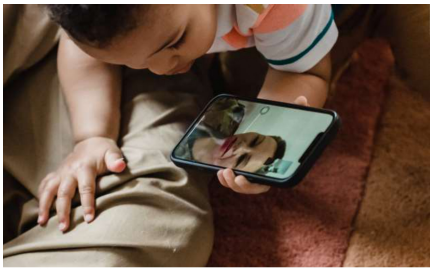

Do you have any further innovative interventions that you may know or want to suggest for being implemented in your working or everyday conditions?

"Informational and educational activities on the effects of addiction, to define work environment breaks away from screens based on scientific material to rest our eyes and to increase our efficiency at work."

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IASIS NGO

Surviving Digital:PR1:Study: Identification of innovative practices to support the fight against screen addiction

Interviewer's Portrait

www.website.eu

Co-funded by the Erasmus+ Programme of the European Union

"Acceptance of the phenomenon and recognition of the condition, willingness to be treated and to cooperate are the appropriate conditions for successful contributions and positive outcomes in the fight of screen addiction phenomena."

Eleni Georgara

surviving digital

What are the challenges that are faced by the professionals and caregivers in the fight of screen addiction phenomena?

"Resistance of the patients as they don't consider it as an addiction . More specifically, they think that it does not have immediate consequences in the body as they do not detect the symptoms. As a consequence, they don't seek for help, but their families do so."

surviving digital

What are the appropriate conditions for successful contributions and positive outcomes of implementing such interventions in the working or everyday environment?

"Willpower on behalf of people who are addicted or who perform such symptoms of addiction , as well as an inclusive environment, including peer support group."

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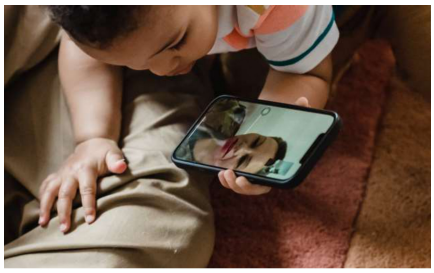

What is the impact of such approaches?

"In the psychological -personal aspect, the impact of such approaches is the empowerment of mental health and personal development. In the social aspect, the individuals are empowered as they are socialized again and finally concerning the professional aspect, people have the chance to re-join professional frameworks, and therefore also have a financial benefit."

surviving digital

4 | Implementation area / Templates

TEMPLATE FOR STUDY CASES

(**6 per country**) - Page limitations: 2 pages per case study

PARTNER ORGANIZATION:	
COUNTRY / REGIONAL AREA:	
CASE STUDY TITLE:	
DESCRIPTION OF THE CASE STUDY	
TARGET GROUP OF THE CASE STUDY	
ADULT LEARNING CHALLENGES: What are the challenges that are faced by the professionals and caregivers in the fight of (screen) **addiction phenomena**?	
COMPETENCES IN THE RELEVANT ORGANIZATIONS: knowledge, skills, abilities	
CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES: What are the appropriate conditions for successful contributions and positive outcomes?	
IMPACT OF THE INVOLVED PEOPLE OF CONTRIBUTORY APPROACHES: What is the impact of such approaches?	
RESOURCES/SERVICES/LINKS	

TEMPLATE FOR THE 10 INTERVIEWS

For the implementation of the Interviews you can do it via voice recording or Google Forms.

INTERVIER BACKGROUND

Studies, professional-life experience

ADULT LEARNING CHALLENGES:

What are the challenges that are faced by the professionals and caregivers in the fight of screen addiction phenomena?

COMPETENCES EXPECTED IN RELEVANT ENTERPRISES:

What are the relevant competencies expected for professionals that work with children of being at high risk of screen addiction?

ADDRESSING EDUCATIONAL RESOURCES:

Do you know any relevant educational material, methodology or pedagogical interventions for preventing and detecting screen addiction? Can you please describe them?

CONDITIONS FOR SUCCESSFUL CONTRIBUTION AND POSITIVE OUTCOMES:

What are the appropriate conditions for successful contributions and positive outcomes of implementing such interventions in the working or everyday environment?

IMPACT OF CONTRIBUTORY APPROACHES:

What is the impact of such approaches?

INNOVATIVE APPOACHES:

Do you have any further innovative interventions that you may know or want to suggest for being implemented in your working or everyday conditions?

The interviews' objectives are:

(a) addressing education, awareness, and learning by fostering input from target audiences.

b) providing resources and models for recognizing the educational contributions of those involved in the process.

c) promoting innovation in teaching.