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# Psychosocial Disruptions in a Digitalized Society

An Academic Study on Digital  
Addiction and Psychosocial Risks

Serap Tepe



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**Serap Tepe**



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# Dedication

To Elif Berra.



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## About the Author

**Serap Tepe** is an Associate Professor of Social Policy at the University of Health Sciences in Istanbul, Turkey, with Ph.D. degrees in Occupational Health and Safety and Industrial Engineering. Her research and professional practice sit at the intersection of risk assessment, psychosocial risks, and evidence-based decision-making in occupational health and safety. In recent work, she has examined prevention needs in the digital age and the implications of digital transformation for a safe and healthy working life, as well as the effects of emerging technologies on OHS practices.

Dr. Tepe also develops and applies multi-criteria decision-making approaches to evaluate psychosocial and operational risk factors across sectors. Dr. Tepe is a certified Class A Occupational Safety Specialist and an Internal Auditor for ISO 9001, ISO 14001, and ISO 45001 integrated management systems, supporting organizations through training and practice-oriented safety management.



# Preface

This monograph was born from my desire to make visible the notion that digitalization is not merely a technical advance but a multi-layered social process that transforms everyday life, relationships, work culture, and the sense of self. Throughout my academic journey, while working in risk assessment, psychosocial risks, and evidence-based decision-making, I observed that the pace of digital transformation generates new vulnerabilities across a broad spectrum, from individual resilience to institutional ethical boundaries. For that reason, this monograph stems from the argument that digitalization should be examined not only as technological change but as a social process that reorganizes everyday routines, relational expectations, work patterns, and experiences of vulnerability. Drawing on my work in risk assessment, psychosocial risks, and evidence-based decision-making, I approached the subject through an integrative narrative review rather than an empirical research design. The literature base was assembled from peer-reviewed studies, policy documents, and foundational theoretical works in psychology, sociology, public health, communication studies, human–technology interaction, and Social work. Relevant material was identified primarily through the databases and search platforms Web of Science, Scopus, PubMed, PsycINFO, and Google Scholar, with the search concentrating on work published approximately between 2010 and 2025 and extending to earlier foundational contributions where these remained conceptually essential. During the review process, priority was given to sources that clarified conceptual definitions, psychosocial risk mechanisms, intervention approaches, and policy responses; themes were then organized around family life, educational settings, adulthood and work, intervention, and digital governance. This design does not claim the exhaustiveness of a systematic review; rather, it aims to produce an analytically coherent and practice-relevant synthesis of a rapidly expanding field. In the practice-oriented chapters, particularly those addressing school-based intervention, motivational interviewing, relapse prevention, online counseling, crisis response, safeguarding, cyberbullying, and data security, an effort has been made to signal the status of each recommendation: statements grounded in empirical research are cited accordingly, statements reflecting established professional guidance are identified as such, and where a suggestion represents the author’s own proposed framework, this is stated explicitly in the text.

The effects of digitalization on family dynamics and educational settings constitute one of the core axes of the book. The blurring of boundaries within the family, the decline in shared time, and parents’ own digital habits directly shape how children relate to screens. In educational environments, divided attention, sleep disruptions, fractures in peer relationships, and digital bullying create a risk field that is often invisible yet powerful. At the same time, these risks do not unfold uniformly across populations. Their intensity is mediated by age, class position, caregiving burden, disability, gendered expectations, migration experience, and the availability of safe and supportive institutional environments. For this reason, the book approaches digital harms neither as universal in a simplistic sense nor as reducible to individual weakness; it examines how psychosocial vulnerability is socially distributed and institutionally managed.

I hope this monograph will provide a shared ground for discussion for social workers, academics, policy makers, educators, and parents. If this book encourages its readers to ask new questions, to reassess existing practices, and to develop solutions

that keep the human at the center, it will have come close to its aims. For me, the most valuable outcome is the strengthening of a collective confidence that, while accepting the inevitability of digitalization, we can transform its effects on human life.

A note on the case material used in this book is also necessary. The case studies and practice scenarios presented in the following chapters are composite and fictionalized illustrations informed by professional practice and the literature; they do not describe any single real client, family, or institution. Where the examples concern minors, domestic violence, or crisis situations, all identifying details have been altered, and the cases are intended solely for educational purposes.

Finally, I would like to acknowledge the support of my family, students, and colleagues in the process of bringing this book to life. Their questions, critiques, and contributions helped the text become clearer and more authentic. I see this preface as a call for shared responsibility for the complex realities of the digital age. If we can develop an approach that protects human dignity, strengthens relationships, and places technology in the service of humanity, digitalization can become not a threat but an opportunity for a more just and healthier society.

**Serap Tepe**  
*Author*

# 1. Introduction

## *Digitalizing Society and Social Work*

The digital age can be defined as a historical period in which communication, production, access to information, and institutional coordination are increasingly organized through digital infrastructures, platform logics, and data-driven systems. This shift has altered not only the speed of everyday life but also the conditions under which attention is managed, relationships are maintained, and work is experienced. Research on social Internet use, social comparison, technoferece, and problematic online behavior shows that constant connectivity may simultaneously expand access and intensify loneliness, emotional strain, and fragmented attention (Nowland et al., 2018; Lin et al., 2016; McDaniel & Radesky, 2018; Kuss & Griffiths, 2017). For this reason, digitalization should be approached not as a neutral technical backdrop but as a multidimensional social environment with psychosocial consequences.

From this perspective, the central question is not whether digital technologies are beneficial or harmful in themselves, but under what conditions they become supportive, demanding, or harmful. Instant access to communication and information may widen participation and convenience; at the same time, the acceleration of feedback cycles, visibility pressures, and notification-driven routines can normalize continuous self-monitoring and persistent availability. In young people, this may intensify approval seeking and Fear of Missing Out (FoMO)-related vigilance, whereas in adults it may deepen work intrusion, attentional fatigue, and the erosion of restorative time (Przybylski et al., 2013; Lin et al., 2016). The psychosocial significance of digitalization therefore lies in the way it reorganizes ordinary life rather than only in extreme or pathological cases.

Social work offers a particularly important lens for understanding this transformation because it reads individual behavior together with relational context, institutional conditions, and structural inequalities. Grounded in ecological and biopsychosocial thinking, the profession asks how digital risks are shaped by family routines, school climate, workplace expectations, economic precarity, and access to support (Bronfenbrenner, 1979; Engel, 1977). Accordingly, this monograph treats digital addiction and related harms not simply as matters of excessive screen time or deficient self-control, but as phenomena emerging at the intersection of vulnerability, social environment, and digital design.

Digital technologies also create important opportunities for Social work practice, including remote psychosocial support, faster information sharing, and improved service reach for geographically or socially disadvantaged groups. Yet these gains are accompanied by ethical and professional tensions involving privacy, data security, boundary management, accessibility, and the risk of reproducing digital inequalities. Although the literature on digital addiction is expanding, it is often fragmented across clinical, educational, technological, and policy discussions. What remains less fully articulated is how these strands can be integrated into a Social work-informed framework that links psychosocial explanation with intervention and governance.

The distinctive contribution of this monograph lies in that integrative effort. It brings together behavioral addiction research, psychosocial risk analysis, family and school dynamics, adult digital burnout, intervention design, and policy debate within a single analytical frame. The argument developed throughout the book is that digital harms should be understood as relational and structural, as well as individual, and that effective responses must therefore operate across micro,

mezzo, and macro levels. For that reason, Chapter 1 establishes the problem and its Social work relevance; Chapter 2 clarifies the main theoretical lenses and conceptual boundaries; Chapter 3 examines family dynamics; Chapter 4 focuses on educational environments; Chapter 5 analyzes adult digital burnout; Chapter 6 translates the analysis into intervention frameworks; Chapter 7 addresses policy and governance; Chapter 8 extends the discussion to ethics, digital counseling, and professional responsibility in technology-integrated Social work practice; and Chapter 9 offers the concluding synthesis and recommendations.

## 2. Theoretical and Psychosocial Framework

### 2.1. *Digital Addiction: Definitions, Types and Indicators*

Digital addiction refers to a pattern of digital engagement in which use becomes difficult to regulate and begins to interfere with functioning, relationships, health, or role performance. In the literature, however, the field is neither conceptually uniform nor diagnostically settled. Terms such as problematic Internet use, smartphone addiction, social media addiction, and gaming disorder are related but not interchangeable. Gaming disorder has received more formal diagnostic recognition, whereas other forms of problematic digital use are still discussed more cautiously in relation to behavioral addiction frameworks, coping patterns, and context-specific impairment (K. S. Young, 1998a; Davis, 2001; Caplan, 2010; World Health Organization, 2019). Maintaining this distinction is important because not every intense use pattern is pathological, and scholarly debate continues around the risk of extending addiction language too broadly to ordinary digital life.

At the same time, caution about pathologization should not obscure the fact that some digital environments are deliberately designed to maximize retention, repetition, and reward expectancy. Personalized feeds, endless scroll, variable reinforcement, and social feedback metrics may increase the salience of cues, sustain anticipatory checking, and amplify existing vulnerabilities such as loneliness, low self-esteem, or emotion regulation difficulty. For this reason, problematic digital use is best understood as the outcome of an interaction among individual predispositions, relational needs, institutional pressures, and platform architecture rather than as a simple failure of willpower. In this book, digital addiction is used as an umbrella term only when functional impairment and psychosocial consequences are evident; digital burnout, FoMO, nomophobia, and problematic use are treated as related but analytically distinguishable experiences that may overlap without being identical. These distinctions are used consistently in the remainder of the book: gaming disorder refers to the clinically framed pattern of gaming-related impairment, digital burnout to exhaustion-type responses observed mainly in adults, FoMO and nomophobia to anxiety-type experiences of missing out and of being unreachable, and problematic digital use to dysregulated but subclinical patterns, while digital addiction is reserved as an umbrella term for patterns involving demonstrable functional impairment.

### 2.2. *Psychosocial Factors and Risk Groups*

Feelings of constant visibility, digital fatigue, cognitive overload, and blurred psychological boundaries are among the less visible but increasingly consequential risks of digitalized life. These risks do not emerge in a uniform way across the population. Their intensity is shaped by developmental stage, class position, gendered care expectations, disability, migration experience, family conflict, school exclusion, and the uneven distribution of safe digital access (J. E. Young, 1999). For that reason, psychosocial risk should be examined not only through individual traits but also through the social locations and institutional arrangements that make some groups more exposed and less protected.

Psychosocial risks are risks that can negatively affect an individual's mental well-being, cognitive functionality and social adaptation, often resulting from the interaction of environmental, organizational and technological factors. These risks arise not only from individual vulnerabilities but also from the imbalance of the

individual–environment–technology interaction. Especially in digitalized living spaces, the individual is constantly exposed to stimuli, and this directly affects behavioral reactions, cognitive evaluations and emotional regulation processes. While behavioral approaches reveal how environmental stimuli and reinforcement mechanisms shape the individual's reactions, cognitive approaches focus on how the individual makes sense of, interprets, and internalizes these stimuli. Every bit of data produced in the digital environment carries traces of the individual's behavioral and emotional patterns. Social media interactions, mobile applications, wearable technologies, and online therapeutic platforms create an ecosystem where psychological data is constantly produced and processed. This situation also brings with it unseen psychosocial risks. Psychosocial individual, familial, and/or social factors have the power to change the levels of being affected positively or negatively by these risks. Digitalization is a multi-layered process that transforms the individual's cognitive, emotional, and social functioning. In particular, social media platforms, online games, and constant connectivity can create addiction risks for individuals with psychosocial vulnerabilities. The impact of individual factors such as low self-esteem, difficulty in emotional regulation, loneliness, anxiety, and depression on digital addiction is very important. This study considers digital addiction not only as a behavioral excess but often as a coping strategy to compensate for psychological needs. The literature shows that low self-esteem strengthens the search for online approval by increasing social comparison sensitivity, difficulty in emotional regulation creates a negative reinforcement cycle in digital environments, loneliness can paradoxically deepen with superficial online connections, and anxiety and depression can turn the digital environment into a place of escape. Digital addiction emerges as a result of the interaction of individual vulnerabilities and algorithmic reinforcement mechanisms, and therefore it is thought that preventive interventions should be based on psychosocial reinforcement. The digital age has created an environment of cognitive and emotional stimulation on a scale never seen before in human history. Smartphones, social media platforms, and constant online presence have restructured the individual's daily life rhythm. This transformation is not only technological but also a psychosocial restructuring. In recent years, concepts such as problematic Internet use, social media addiction and online game addiction have become increasingly prevalent in the literature (Kuss & Griffiths, 2017). In particular, the acceptance of gaming disorder as a diagnostic category by the World Health Organization in 2019 has made the clinical importance of digital behaviors visible at a global level. However, digital addiction is not a phenomenon that can only be explained by increased screen time. The basic question is as follows: why do some individuals focus excessively on digital environments while others maintain balanced use? At the heart of this difference are individual psychosocial factors. How digital addiction intersects with individual vulnerabilities should be analyzed very well. In particular, the question of how low self-esteem, difficulty in emotional regulation, loneliness, anxiety, and depression increase the risk of digital addiction is a topic that the Social work field should examine. The cognitive–behavioral model explaining problematic Internet use suggests that maladaptive cognitive schemas increase orientation towards digital environments (Davis, 2001). Beliefs such as "I am not valued in real life" or "I am only accepted online" lead to continued digital use. According to Deci and Ryan's Self-Determination Theory, individuals have three basic psychological needs: competence, autonomy, and belonging. When these needs are not met, the individual turns to alternative areas of satisfaction (Deci & Ryan, 2000).

Social media platforms can meet these needs quickly and cost-effectively. Individuals with emotion regulation difficulties may turn to avoidance-based strategies to cope with negative emotions (Gross, 1998). Digital environments create a negative reinforcement mechanism because they provide instant distraction and pleasure. When these theoretical approaches are evaluated together, it can be seen that digital addiction is not only caused by technology but also a form of regulation.

Self-esteem refers to the individual's general perception of value towards himself (Rosenberg, 1965). Individuals with low self-esteem expect social rejection and are more sensitive to social comparison. Social media platforms allow for idealized identity presentation. This situation creates a twofold effect for the individual with low self-esteem:

- Temporary empowerment through controlled identity construction;
- Increasing dependence on external approval.

Vogel and colleagues have shown that social comparison negatively affects self-esteem and that social media use intensifies this process. Like counts and follower feedback can connect an individual's sense of self-worth to external criteria. As a result, low self-esteem increases the risk of addiction by increasing the search for approval on digital platforms (Vogel et al., 2014). Difficulty in emotion regulation refers to the individual's inability to manage intense emotions. These individuals use avoidance strategies rather than confronting negative emotions. Caplan (2010) showed that problematic Internet use was significantly associated with difficulty in emotion regulation, especially turning to social media when anxious, staying on video platforms for long periods of time in case of sadness, and escaping to online games during anger. These behaviors create a negative reinforcement cycle. Digital use provides temporary relief; relaxation reinforces addiction. Addiction deepens when emotions are suppressed rather than regulated. Psychological addiction develops when digital media replaces emotional regulation. Loneliness is the subjective experience of social isolation. Research shows that perceived loneliness is a strong predictor of digital addiction (Nowland et al., 2018). Lonely individuals seek a sense of connection online. However, superficial interactions do not meet the need for deep connection. This creates the following paradox: More online → More superficial connection → More loneliness. This cycle is especially evident during adolescence. While social media creates the illusion of connection, it does not always provide emotional closeness.

Anxiety and depression have a bidirectional relationship with digital addiction. Anxious individuals check notifications frequently due to the need for control (Volkow et al., 2016). FoMO (fear of missing out) is constantly triggered in the digital environment. This hyper-alertness increases the frequency of use (Przybylski et al., 2013). Depression is characterized by low energy and social withdrawal. Digital media offers low-effort pleasure. But passive use may increase depressive symptoms (Lin et al., 2016). Digital addiction is often not the cause of psychopathology, but its digital manifestation. Digital addiction can be explained by the following interaction: Psychosocial Vulnerabilities × Algorithmic Reinforcement × Constant Access.

Social media algorithms personalize content by tracking user behavior and optimizing for continued engagement. Existing research strongly suggests that these design choices may intensify preoccupation, cue-reactivity, and repetitive checking, especially in users who already struggle with loneliness, approval seeking, or affect regulation; however, the relationship is not mechanically causal and should

be interpreted within a broader psychosocial context. What matters analytically is that responsibility is distributed. Individual vulnerability matters, but so do the reward structures, interface choices, and institutional expectations that normalize permanent availability. For intervention, this means that reducing screen time alone is rarely sufficient; the stronger response combines self-regulation support, relational repair, environmental restructuring, and critical digital literacy:

- Self-strengthening exercises;
- Emotion regulation skills training;
- Promoting face-to-face social connections;
- Access to psychological support services.

Digital addiction is an interdisciplinary problem and concerns the fields of psychology, Social work, and public health together. Digital addiction reflects unmet psychological needs in the digital age, not of technology. Low self-esteem leads the individual to seek approval, difficulty in emotional regulation leads to escape, loneliness to the illusion of connection, anxiety to the search for control, and depression to passive withdrawal. The real solution is not to turn off the screen, but to strengthen the inner world of the individual. In addition to individual factors, family and social factors are also important in digital addiction. Family is the social system in which people find their first experience of trust and their first sense of belonging. From a sociological perspective, the family is the basic institution that fulfills the functions of biological reproduction, socialization, and cultural transmission (Griffiths, 2005). For example, Talcott Parsons defines the family as the primary socialization area that ensures the continuation of social order (Parsons, 1956). From a psychological perspective, family is the first relational environment in which an individual's self-esteem, attachment style, and emotional regulation capacity are shaped. John Bowlby's attachment theory reveals how early caregiver relationships affect an individual's lifelong relationships (Bowlby, 1969). But beyond all these academic definitions, family is often the place in which you take shelter when you are fragile, the first people you want to share with when you win a victory, the invisible network that holds you when you fall, the intimate environments where you can be yourself. Family is not always perfect. Sometimes it can be a supportive haven, and sometimes it can be an area where the individual struggles. However, no matter what form it takes, family is the basic structure that deeply affects a person's identity, perception of values, and view of the world. Family is often not a concept that can be explained with a single definition; it can be trust, resentment, support, expectation, love, and pressure at the same time. Why are family relationships complicated? Because they are the people we connect to the most, they are the people we are most impressed with, and they are the people we criticize the most. As closeness increases, the effect increases. As the effect increases, the emotion becomes more intense, and intense emotions become "complicated." Complexity is not a bad thing. Rather, it is the natural outcome of deep connections. People have the hardest time where they care most. Family means loving unconditionally and feeling misunderstood, feeling both gratitude and resentment at the same time. Lack of communication between people in such a complex structure makes it easier for a person to fall into the traps of addiction. People want to be understood. The person who thinks that he is not understood within the family, cannot express himself, and feels emotional deprivation creates a virtual world for himself. Now the person is a completely different person in this virtual world; he is strong, happy, can do

whatever he wants, and thinks that everything he feels missing is completed in this virtual world he created. As time goes by, he wants to spend more time in this world because there is no one in the real world who understands him, makes him happy, or cares about him. The person with these feelings first has problems in time management, and this problem is followed by the deterioration of communication within the family. The fact that individuals sharing the same house do not even realize that a member of the family has become digitally addicted is the beginning of the end. Lack of communication within the family is not just a problem of “not being able to talk”. Family is the individual’s first socialization area, first emotional bonding experience, and first value learning environment. In terms of the Social work discipline, family is at the center of the social ecosystem in which the individual exists. Communication patterns within the family directly affect not only interpersonal interaction but also self-development, mental health, and social harmony. In modern society, family structures have diversified, and nuclear, extended, single-parent, and restructured family forms have increased. However, communication problems within the family appear to be an important risk factor in both traditional and modern family structures. Urie Bronfenbrenner’s ecological systems theory explains the development of the individual in the context of multilayered environmental systems. Family, as a microsystem, is the first environment that an individual directly experiences. Lack of communication within the family begins at the microsystem level but can expand its effects at the mesosystem (school-family relationship), exosystem (parental work conditions), and macrosystem (cultural norms) levels (Bronfenbrenner, 1979). The literature shows that family conflict and lack of communication are associated with low academic success, problems in peer relationships, and psychological adjustment problems (Cox & Paley, 2003). Murray Bowen, according to the family systems approach, posits that the family is an emotional whole consisting of interconnected subsystems. A communication gap within the system affects all members. Bowen’s concept of “emotional detachment” suggests that lack of communication can lead to distance and alienation between family members in the long run. In addition, the triangulation process may cause dysfunctional communication patterns to become permanent by reflecting the conflict between parents to the child (Bowen, 1978). John Bowlby’s attachment theory argues that the relationship established with the early caregiver determines the individual’s lifelong relationship patterns. Secure attachment develops in an environment of open and consistent communication (Bowlby, 1969). Research shows that individuals with an insecure attachment style may exhibit avoidant or overreactive patterns in family communication (Mikulincer & Shaver, 2016). This can lead to communication difficulties in romantic relationships and parenting roles in adulthood. Walsh defines family resilience as the capacity to adapt together to crises. According to Walsh, open, empathetic, and flexible communication is a key component of family resilience. Lack of communication weakens the capacity of family members to produce shared meaning during times of crisis. This may lead to deterioration of psychological adaptation after traumatic events (Walsh, 2016). Research shows that the quality of communication within the family is a determinant of children’s self-regulation skills and academic performance (Smetana & Gaines, 1999). In families where there is no open communication, the perception of emotional neglect increases, internalized problems (anxiety, depression) increase, and externalized behaviors (aggression, risky behavior) increase. Especially during adolescence, lack of communication can increase the tendency towards digital environments. Digital platforms offer alternative spaces for unexpressed

emotions. Meta-analytic studies reveal that family conflict and lack of communication are significantly associated with depression and anxiety disorders (Repetti et al., 2002). It can affect mental health through the mechanisms of lack of communication, lack of emotional support, insecure attachment pattern and lack of development of problem-solving skills. In this context, communication within the family is considered a protective factor for mental health. Digitalization has created a new context that transforms family interaction. Family members being in the same place but spending time in different digital areas can reduce face-to-face interaction. Research shows that parents' heavy use of digital devices is associated with attention problems and attachment difficulties in children (McDaniel & Radesky, 2018). Digitalization does not eliminate communication completely, but it can normalize a superficial and intermittent form of communication. The literature reveals that lack of communication within the family is a multidimensional risk factor. However, communication problems often arise not from pathological intentions, but from intergenerational patterns and lack of skills. The Social work approach offers an empowering framework, not an accusatory one. Communication within the family is a skill that can be learned and improved. Unspoken emotions accumulate, unexpressed needs turn into distance, and silence creates alienation over time. However, communication can be re-established. The Social work perspective views the family not as a disintegrating structure but as a system that can be strengthened. A strong family means a strong individual. Therefore, social policies and practices should develop holistic and preventive strategies to strengthen family communication.

Neglect and emotional deprivation are two basic psychosocial risk factors that leave deep and lasting effects on the developmental processes of the individual. These concepts, especially when they emerge during childhood and adolescence, shape attachment patterns, self-development, and emotional regulation capacity. Increasing cases of digital addiction in recent years are associated with early experiences of neglect and emotional deprivation. The concepts of neglect and emotional deprivation should be defined together in the theoretical framework, and their relationship with digital addiction should be examined in the context of attachment theory, schema theory, and emotion regulation models. Research findings show that early emotional deprivation increases orientation to digital environments, and online interactions can serve a compensatory function, but they increase the risk of addiction in the long term. Therefore, digital addiction should be considered not only as a behavioral problem but as the digital manifestation of a developmental gap. The integration of digital technologies into daily life has transformed individuals' forms of social interaction, identity construction, and emotion regulation strategies. Concepts such as problematic Internet use, social media addiction, and online game addiction have become the focus of rapidly increasing academic interest in the last twenty years (Kuss & Griffiths, 2017). However, it is insufficient to explain digital addiction solely through exposure to technology. A growing body of research examines the impact of early developmental risk factors on digital addiction. In particular, childhood neglect and emotional deprivation can increase the psychological fragility of the individual and strengthen the tendency towards digital environments. Neglect is the situation where the child's basic physical, emotional, educational and medical needs are not met by the caregiver. The World Health Organization defines neglect as the systematic failure to provide the necessary care for the healthy development of the child. Types of neglect are defined as physical neglect: failure to meet nutrition, shelter, and security needs; educational neglect: failure to provide educational opportunities; medical

neglect: preventing access to health services; and emotional neglect: lack of love, care, and emotional support. Research shows that neglect is the most common but least noticed type of childhood trauma (Gilbert et al., 2009). Neglect is often invisible, leaving no physical traces, but creating deep gaps in the psychological structure. Emotional deprivation is the feeling of chronic deficiency that develops as a result of the individual's needs for love, empathy, protection, and emotional closeness not being met. This concept is defined as "emotional deprivation schema", especially in Jeffrey Young's schema theory. The emotional deprivation schema includes three core beliefs (J. E. Young, 1999):

- "No one really understands me."
- "My needs are not met."
- "I can't get emotional support."

This schema develops in relationships with early caregivers and affects relational patterns in adulthood. John Bowlby's attachment theory suggests that early caregiving relationships determine an individual's sense of security and capacity to regulate emotion. Insecure attachment styles are more common in children who experience emotional neglect. Insecure attachment may increase social approval seeking and rejection sensitivity in later life. Digital environments become attractive to these individuals because they offer controlled and less threatening social interaction. According to Jeffrey Young, early unmet needs create permanent cognitive-emotional schemas. An emotional deprivation schema causes the individual to be unable to achieve satisfaction in relationships and seek compensation. Digital environments can temporarily compensate for this schema; likes, messages, and online communities can create a false sense of belonging. Emotional neglect weakens the child's capacity to name and regulate his or her emotions. These individuals may turn to avoidance strategies to cope with intense emotions (Gross, 1998). Digital use provides relief through negative reinforcement, creating a cycle of addiction. Several studies show that experiences of childhood neglect are positively associated with problematic Internet use (Schimmenti et al., 2014). Social avoidance, feeling of emotional emptiness, and identity confusion are more common in individuals who experience early trauma. These factors increase the tendency towards digital environments. Research reveals that emotional deprivation schemas are significantly associated with social media addiction (Casale & Fioravanti, 2018). The individual attempts to bridge the emotional gap online through instant feedback, conditional acceptance, and a constant sense of connection. However, this satisfaction is temporary. Trauma and neglect can affect the stress regulation system. Chronic stress exposure can lead to changes in the dopaminergic reward system. Instant reward mechanisms (notification, likes, earnings) offered by digital platforms activate this sensitive system more easily. This may increase the risk of addiction in individuals who have experienced early trauma. Neglect and emotional deprivation can generally affect digital addiction through mechanisms such as compensating for missing emotional needs in the virtual environment, momentary distance from negative emotions, creating the ideal self that cannot be created in real life, and insecure attachment turning to virtual relationships. Although these mechanisms provide relief in the short term, they strengthen the addiction cycle in the long term. Neglect and emotional deprivation increase the individual's feeling of inner emptiness, and digital environments temporarily fill this void. However, digital media cannot replace real emotional intimacy. As compensatory use continues, real relationships weaken, and feelings of deprivation

increase. Thus, a vicious cycle is created. These findings show that limiting screen time alone is insufficient in combating digital addiction. The solution is not just to turn off the device. Understanding and repairing an unmet need can combat neglect and emotional deprivation, and winning this fight will also lead to dealing with digital addiction. This is exactly why intervention strategies should include early trauma and attachment patterns.

Digital addiction is a multidimensional behavioral problem that has increased rapidly on a global scale in recent years and is especially prevalent among adolescents and young adults. Social environmental factors as well as individual psychological variables play a decisive role in explaining this phenomenon. As digital technologies become central to daily life, problematic digital usage behaviors have become an important public health and development problem. The concept of Internet addiction was first defined systematically by Kimberly Young, and, in the following years, subcategories such as social media addiction, online game addiction, and smartphone addiction took their place in the literature (K. S. Young, 1998b). However, it is insufficient to explain digital addiction solely in terms of individual impulse control weakness or neurobiological reward mechanisms. The peer relations factor and social pressure factor are factors with a very high impact and scope that have an important place in digital addiction. The role of social context is decisive, especially during adolescence. Peer relationships are at the center of identity development and the need for social acceptance, and this context is intertwined with digital environments. According to Urie Bronfenbrenner's ecological systems theory, the development of the individual is shaped by intertwined environmental systems. The peer group is a social context that has a direct influence at the microsystem level. Digital platforms have expanded this microsystem, creating a "constantly accessible peer space." This situation causes social norms to have an uninterrupted impact on the individual (Bronfenbrenner, 1977). In other words, the individual who communicates uninterruptedly with his peers through digital spaces is also in a strong interaction process of which he is unaware. As the time spent with peers online increases, the psychological resilience of the individual who is constantly subjected to behaviors such as approval, acceptance, criticism, labeling, liking, ignoring, or making fun of people is negatively affected; their stress level increases, and their well-being is damaged. In Erik Erikson's psychosocial developmental theory, adolescence is defined as the critical phase of identity formation (Erikson, 1968). During this period, peer approval is an important source of self-worth. Social media has become a space where identity is presented performatively. The number of likes and the number of followers can serve as authentication indicators. Determining one's self-worth by peers, taking one's character from the virtual peers with whom one interacts at all times, and behaving differently while trying to realize oneself can become a pathological problem and increase addiction. Henri Tajfel's social identity theory suggests that the individual builds his or her self-esteem through group membership (Tajfel & Turner, 2001). Digital platforms make group belonging visible and measurable. This visibility intensifies social comparison processes and increases social pressure. According to Edward Deci and Richard Ryan, the individual has three basic psychological needs: belonging, competence, and autonomy (Deci & Ryan, 2000). Digital platforms especially meet the needs of belonging and competence very quickly and superficially. Peer pressure paves the way for these needs to be met digitally. Adolescents' level of digital use largely depends on the norms of their peer group. The perception that "everyone uses it" leads to the internalization of use

as a compulsory social behavior. Research shows that high peer norm perception significantly affects social media addiction scores (Nesi & Prinstein, 2015). Digital environments intensify social comparison. Constant visibility of peer achievements, physical appearances, and social activities increases social pressure. This process increases the time spent online, increasing the risk of problematic use. Individuals experiencing peer rejection can create alternative social networks in the digital environment. Although this may seem adaptive at first, it can turn into compulsive use over time. Positive relationships between social exclusion, loneliness, and digital addiction have been frequently reported in the literature. Social pressure operates at three levels: direct manipulation, expectation of conformity to the group, and fear of exclusion. The concept of FoMO (fear of missing out) is one of the mediating variables of social pressure on digital addiction. Social media usage time and problematic use are higher in individuals with high FoMO levels. Peer approval activates the brain's reward system. Especially during adolescence, the dopaminergic system is sensitive to social feedback. Social reinforcers such as likes and comments can strengthen the addiction cycle by creating an intermittent reward mechanism. Situations such as high peer pressure, low self-esteem, dissatisfaction with physical appearance, social comparison tendency, rejection sensitivity, low communication skills, tendency to show off, identity confusion, urge to prove oneself, etc., make it easier for a person to turn to the digital and create a digital world and identity for himself. The temporary pleasures he receives or the discourses he expresses fearlessly make the person happy, and in order to maintain this happiness, the individual continues his actions by sacrificing other areas. It is obvious that digital addiction cannot be considered independently of the social context. Peer relationships are not only a predictor but also a structural determinant of digital behavior. Digital platforms have expanded the peer space and made it constantly accessible. This situation increased the continuity of social pressure. However, supportive peer ties can contribute to stabilizing digital use. Therefore, intervention programs should target not only individual self-control skills but also social environment regulations. The intensity of the need for social approval during adolescence turns digital environments into indispensable social spaces. Digital addiction is often tied not to technology but to the search for social acceptance. This is exactly where Social work comes into play and guides individuals on how to create emotional regulation skills, supportive peer relationships, and high social support perception. This is an attitude that must be maintained with determination in the fight against digital addiction, which harms people at least as much as other types of addiction, even though there is no substance entering the body.

While wars in the individual's inner world, peer pressure, or social pressure play an important role in digital addiction, another issue that should not be forgotten is social factors. For example, does the government have a digitalization policy? What are the sustainable steps taken to protect young people against types of addiction? Basic questions such as what is the role of the media in these policies are the first questions that should be asked to draw attention to the importance of social factors. Among the environmental factors that are effective in the formation of personality, the social and cultural structure in which the individual lives has a central position. The individual lives in a certain social context since birth and is in constant interaction with the values, norms, and behavioral expectations produced by this context. This interaction process directs the development of the individual's personality structure by shaping his interests, value orientations, and behavioral priorities. Current personality and culture research reveal that individual differences are strongly based

not only on biological foundations but also on cultural learning processes. The impact of the social environment on personality occurs largely through learning and internalization mechanisms. Individuals often learn the behavioral patterns that are valid in the society they live in, not as a result of conscious choice, but through social interaction, observation, and reinforcement. In this process, repeated experiences strengthen the individual's cognitive schemas and lead to the perception of certain forms of behavior as "natural" or "normal". Social learning theory offers an approach that considers the individual's behavior, the environment, and the person interactively. Contemporary cultural psychology studies show that such learned behavioral patterns can become permanent components of personality traits. This refers to the impact of social factors on a person's development and habits. Therefore, it is normal that the state approach that holds society together and protects freedoms, rights, and borders produces digitalization policies.

Digitalization represents a structural paradigm shift that transforms the understanding of governance of contemporary states. The state's digitalization policy is a holistic strategic framework that includes the redesign of public services through information and communication technologies, the institutionalization of data-based decision-making processes, and the conduct of citizen-state interaction through digital platforms. The digital age is redefining the role of the state. Traditional bureaucratic structures are increasingly being replaced by data-based, algorithmic, and platform-oriented public administration models. The state's digitalization policy is the strategic plan of this transformation. However, digitalization does not only mean the spread of e-government services, but also the transformation of governance culture, social policy tools, and public-citizen relations. The basic questions in this context are as follows:

- What is the state's digitalization policy?
- How should it be?
- How does it affect individuals and society?
- What is the relationship between the digital state and social welfare?

The state's digitalization policy is a set of strategic, legal, and institutional regulations for the systematic use of digital technologies in the planning, delivery, and supervision of public services. This policy consists of three basic components:

- Infrastructure size (Internet access, data centers, cybersecurity);
- Governance aspect (data sharing, enterprise integration);
- Citizen dimension (access, participation, digital rights).

Digital state is a governance model in which public services are provided in an integrated and data-based manner through digital platforms. In this model, the following occur:

- Physical application processes are reduced;
- Bureaucratic processing time is shortened;
- Inter-institutional data sharing increases;
- Decision-making processes are based on analytical data sets.

But the digital state also introduces new normative issues such as data security, privacy, and algorithmic fairness. Criteria such as effectiveness, efficiency, equity, accountability, and sustainability are often used to evaluate a public policy. In this context, an ideal digitalization policy should not consist of short-term technical

projects. Strategic documents containing a 10–20-year vision and covering areas such as artificial intelligence, big data, and cyber security should be prepared. A human-centered approach, not technology, should be the basis. There should be stages such as accessibility standards for the disabled, digital literacy programs for the elderly population, infrastructure investments in rural areas, and studies for young people. Otherwise, digitalization may deepen inequality. The digital state must be based on a strong normative foundation. On this basis, processes such as protection of personal data, transparency of artificial intelligence decisions, prevention of algorithmic discrimination, and cyber security measures should be well defined. Digitalization without a legal framework can undermine citizen trust. Data standardization should be ensured among public institutions, and duplicate recording and transaction processes should be reduced. Data governance is central to both efficiency and security. Digitalization policy should not be a top–down-imposed reform. Civil society, academia, and the private sector should be included in the process. The effects of digitalization on individuals have both positive and negative dimensions. Citizens can access public services without time and space restrictions. Digital record systems can reduce the risk of corruption. Processing times are shortened, and costs are reduced. However, some negative situations may also occur. Differences in income level, age, and education can create digital inequality. Excessive data collection could risk turning into a surveillance state. When situations such as pressure to be constantly online, digital addiction, and algorithmic exclusion arise, digitalization becomes not only a technical but also a policy area. For example, outreach systems can be deployed more quickly and in a targeted manner through digital databases. The effectiveness of social assistance can be increased by integrating income tests, population records, and health data. However, data-based social policy brings with it the danger of risk profiling and discrimination. Algorithms may misclassify and push vulnerable groups out of the system. The digital state transforms the classical welfare state in three directions:

- Rapid response capacity increases.
- Costs may decrease.
- Data-based policy design is strengthened.

However, the decrease in human contact may lead to a weakening of the empathic relationship in Social work. The state's digitalization policy is not just a technical reform; it is a structural transformation program directly related to social welfare, equality, and human rights. A digitalization strategy that is human-centered, based on legal guarantees, and includes a social welfare dimension will both increase administrative efficiency and strengthen social trust. The relationship between the digital state and social welfare is two-way: digitalization can strengthen welfare services, but when improperly designed, it can produce new inequalities. Therefore, the ideal digitalization policy should realize the following three principles together: Efficiency + Security + Social Justice. When this balance is achieved, the digital state can become not just a technological innovation but a democratic, inclusive, and welfare-oriented governance model. The most important issue that this model should consider is the extent to which digitalization threatens society, because the state's digitalization policies are responsible not only for producing technology but also for regulating the social effects of technology. Smartphones, social media platforms, online games, and constantly connected work systems have reshaped individuals' daily life practices. While states develop digitalization policies that encourage

this transformation, they must also take responsibility for managing the new risks that arise. Digitalization policies are generally discussed in terms of infrastructure investments, e-government services, and artificial intelligence strategies. However, the psychosocial effects of digitalization, especially addictive behaviors caused by long-term and uncontrolled screen use, are an area that needs to be addressed at the public policy level. In this context, the basic question is as follows: what strategy should the state follow in its digitalization policies to prevent digital addiction and protect society? Digital addiction is beyond being an individual behavioral problem; it is a phenomenon that has public consequences. Therefore, it should be evaluated within the framework of public policy. Since excessive digital use causes sleep disturbance, depression, anxiety, attention deficit, and social isolation, these effects create a burden on public health. In addition, due to digital addiction, a decrease in attention span and a decrease in academic performance are observed, especially in adolescents. Remote working and constant connection culture increase digital burnout. Note that these multidimensional effects mentioned above make digital addiction a public issue at the intersection of health, education, and labor policies. While the state promotes digitalization, it is also obliged to regulate risks. In this context, three main policy areas stand out: preventive policy, regulatory policy, and intervention and therapeutic policy. Providing digital literacy education from an early age, which includes not only technical skills but also screen time management and algorithmic awareness, can be given as an example of a protective policy area. Raising parents' awareness about digital risks plays a critical role in protecting children. Family support can also be considered among protective policies. The government may impose regulations on technology companies; for example, establishing default screen time limits on children's accounts, activating automatic usage warnings, limiting addictive designs, and restricting night notifications can be considered as regulatory policies. As an intervention and therapeutic policy, services such as opening digital addiction clinics, providing psychological counseling services by the state, conducting early risk screenings regarding digital addiction in schools, creating community-based rehabilitation programs, and developing social projects together with non-governmental organizations can be provided. It is important to institutionalize these services within the public health system. The understanding of the social state necessitates taking precautions, acting proactively, and producing different solutions in this regard. The importance of these policies increases, especially in times of social ruptures. For example, let us go back a few years and think about the pandemic that affected the whole world. Let us think about our changing lives, different attitudes, and new habits with the pandemic. The whole world went through a difficult test during the pandemic. We lost our loved ones, we faced death, we felt what it means to lose freedom, we experienced a life we had never known before. Humanity has entered a different process with inherited traumas, new technologies, and new ways of doing business after the pandemic. During the pandemic period, education was moved to online platforms, remote working became widespread, social relations shifted to the digital environment, and access to public services became digital. This process led to the acceleration of digitalization policies. For example, at the European level, the European Commission increased its digital transformation investments after the pandemic. In Turkey, e-government and digital public services have expanded under the coordination of the Digital Transformation Office of the Presidency of the Republic of Turkey. Therefore, the increase in screen time has become a necessary and accelerated consequence of digitalization. During

the pandemic, the screen has become a socialization tool, escape area, information source, entertainment platform, and work environment. As a result of this situation, 6–8 h of daily screen use became “normal”. The lines between work, school, and private life have become blurred. Endless online meetings and conversations that continue day and night are considered normal. Social media and digital games have become tools that provide quick rewards during this period of uncertainty. As a result, the pandemic has increased the risk factors of digital addiction. The increase in screen time was not equal in all groups. A higher increase was seen in children and adolescents. Limited alternative social activities in low-income groups increased screen use. Digital burnout has increased among white-collar workers working remotely. Therefore, increased screen time has become associated with social well-being and inequality. Post-pandemic, states faced a two-fold reality: Digital services have become indispensable. Excessive digital exposure has increased the risks of addiction and become a social problem. This has created a policy paradox. How do we reduce dependency while increasing access? For this reason, digitalization policies must now include not only infrastructure investment but also the “digital health” dimension. Even as face-to-face life returned after the pandemic, it is observed that screen time did not decrease to pre-pandemic levels. This means the pandemic was a breaking point. Digital density is here to stay. It is unrealistic to expect a natural decline without policy intervention. The increase in screen time after the pandemic is not just a temporary habit change, but a structural digitalization leap. This increase should be read not only as “excessive phone use” but as restructuring of the digital society. This reading alone shows that much needs to be done to address the risk factor of digital addiction, which is the result of forced digitalization.

### 3. Case-Based and Practice-Oriented Discussions

#### *The Impact of Digital Dependency on Family Dynamics*

The literature reveals many psychosocial risk factors associated with digital addiction. Adolescents and young adults are among the groups at risk due to their sensitivity to identity development and peer approval processes. Loneliness, social anxiety, and depressive symptoms are strong influencing factors of problematic digital use. Family dynamics also play a decisive role in this regard. While low parental supervision, inconsistent boundaries, and family conflict increase the risk of digital overuse, supportive communication patterns serve as protective factors. Family can be defined as one of the areas where we feel most comfortable. Even if the duties, responsibilities, rights, and boundaries of each of the individuals that make up the family are not clearly defined in this area, the quality and type of communication in the family, which is one of the areas where the individual enjoys communicating and realizes social learning, changes with digitalization and with new concepts entering our lives. For example, during interpersonal communication, constantly looking at the smartphone and social media and becoming social through networks is now defined as sociotelism (Oral, 2025). The concept of parental sociotelism (parental phubbing), which emerged in family communication with the digitalization process, refers to a situation where parents are busy with a mobile device instead of interacting with their child. Parental sociotelism is directly considered a new form of communication disruption within the family. In this context, when the parent is interested in the phone, the attention paid to the child decreases, verbal and non-verbal communication weakens, eye contact and emotional contact are interrupted, and the reaction to the child's needs is delayed. This situation puts the development of secure attachment at risk, especially in early childhood. The result of parental sociotelism is the child's feeling of emotional neglect, loss of trust in the parent, and weakening of the parent-child bond. Especially in the 0-5 age period, when the sensitivity of the parent decreases, the child may develop insecure attachment, and emotional regulation skills may weaken. Parental sociotelism can also lead to emotional and behavioral consequences in children. Emotional consequences such as depression, feeling of loneliness, low self-esteem, emotional instability, and suicidal ideation (in adolescents), as well as behaviors such as social withdrawal, excessive anger, aggression, screaming/crying, reaction against authority, and excessive attention-seeking behaviors can be observed. The child may engage in problematic behavior to attract the parent's attention. When the child tries to distract the parent from the phone, some parents may become impatient, angry, authoritarian, or prone to harsh discipline. This increases parent-child conflict and further disrupts communication. According to social learning theory, a child who is exposed to a sociotheistic parent is at risk of exhibiting sociotheistic behavior in the future. This situation can create a cycle of digital addiction within the family. In later years, children experience problems such as problematic media use, frequent phone checking, academic decline, and less time with family. Due to parental sociotelism, parents cannot adequately monitor their children's academic processes, and children study less, read fewer books, spend less time with the family, and sleep less. This situation weakens the functional quality of communication within the family. Parental sociotelism is not just an individual technology problem but a multidimensional communication and attachment problem that affects the family system. Therefore, the solution should be multi-layered in the form of individual awareness, institutional

cooperation, protective–preventive training programs, early detection of risky families and psychosocial support mechanisms.

As one of the main reasons for communication disorders within the family, technology's reduction in face-to-face communication has an important place. Screen addiction and the increase in time spent in the digital environment cause family members to have limited face-to-face communication even if they share the same physical environment. This situation causes a decrease in emotional sharing within the family and communication gaps. In addition, the damage to privacy, feelings of insecurity, and increase in various conflicts that occur when using technology negatively affect communication within the family (Şahin & Aral, 2012). Differences in technology use between generations (digital divide) also pave the way for communication disorders. Young individuals spending more time in the digital world causes their physical and emotional ties with their families to weaken. This can lead to decreased emotional closeness, increased family conflicts, and social isolation (Nisan & Şentürk Kara, 2025). In addition, the constant accessibility of technology sometimes creates stress and tension, causing family members to become distant from each other and the quality of communication to decrease. The proliferation of new communication tools and dependence on these tools has resulted in face-to-face interaction being replaced by virtual communication. This excessive use of technology can result in family members becoming isolated in their own worlds and becoming isolated within society and within the family (Gedik & Yıldız, 2025). According to explanations regarding the relationship of technology to communication disorders within the family in the study titled "Digital Loneliness and Familial Communication Lack: Parent-Child Alienation in the Movie *Eighth Grade*", with the rapid development of technology in the digital age, the transformations experienced by individuals, especially young people in adolescence, in their identity formation and social belonging processes, social media and the constant state of being online, and the increase in the feeling of loneliness in real life while young people create their identities on digital platforms, cause a new form of alienation in parent–child relationships, and therefore the communication gap. Bo Burnham's *Eighth Grade* powerfully represents this theme through cinema. The film shows that digital screens function as a barrier that weakens the emotional bond between family members and evaluates the lack of communication within the family in the context of digital loneliness and parent–child distance, which increases with the influence of digital technologies (Kotan, 2025). The conflict between children's digital identities and their real selves, especially during adolescence, weakens emotional contact within the family. Considering the devastating effects of digitalization on family communication, digital loneliness and constant online presence prevent young people from establishing empathetic and deep communication with their families. Especially in a sensitive period such as adolescence, the weakening of emotional bonds between family members makes communication disorders chronic. The tangible presence of digital devices can function as a "wall" within the family, causing individuals to live disconnected from each other even though they are physically in the same environment (Güz & Yurdakul, 2025).

Problems with the communication parameter in the family, which is an important area where our character begins to form, where we learn concepts such as love, respect, and belonging by observing, and which can shed light on our later ages and lives, will lead to great destruction. Even the issue of language development is worth examining from this perspective. The research project introduced by Deb Roy in her speech titled

"The Birth of a Word" is designed to examine a child's language development journey in detail. Roy recorded all interactions in the home environment for five years, starting from the birth of his son, through the cameras and microphones he placed in his home. This data was analyzed to relate the language learning process, starting from the child's first words, to the social context and environmental interactions. Deb Roy's research project, from a developmental psychology perspective, provides important data for understanding the role of language development and social interactions in children's cognitive development (Roy et al., 2006). One of the fundamental principles of developmental psychology is that children learn through interaction with their environment. In this context, Roy's recording and analysis of his son's language learning process over five years is consistent with Vygotsky's sociocultural theory, which emphasizes the role of social interactions in cognitive development. Roy's research shows how a child's language development responds to the speech patterns of the adults around him and how these patterns change over time. This situation is related to Vygotsky's concept of the "zone of proximal development". The support that parents provide to the child in language learning (e.g., speaking simple words, repeating) reflects the zone of proximal development. The child is in a learning process that he cannot do alone but can achieve with the guidance of an adult. That is, children learn new skills under the guidance of more competent individuals. His son's transition from the word "beak" to the word "water" shows how the speech patterns of the adults around him change over time and how these changes affect the child's language development. Roy's observations reveal that parents and caregivers unconsciously simplify speech patterns and increase complexity over time to accommodate children's language development. From a developmental psychology perspective, this project can be particularly related to Vygotsky's theory of social interaction and Piaget's theory of cognitive development. According to Vygotsky, language is a social tool. According to Vygotsky, language is the cornerstone of cognitive development and develops through social interaction (Atak, 2017). The data Deb Roy obtained from the cameras in her home shows how a baby interacts with the language use of the adults around her (parents) while learning words. What the child says reflects that the parents are providing him/her with appropriate linguistic input. Language development is a product of social interactions and occurs within the child's immediate development area. Roy's project examined how parents' linguistic input (e.g., the frequency and context of a word's repetition) affects a child's language skills. The results showed that the child's vocabulary learning was directly linked to the simplified and contextualized language used by parents. Roy's research shows how the language environment around a child affects the child's language development and how the child learns from that environment. Additionally, the concept of schema in Piaget's theory also has an important place in this project. By processing linguistic input in the environment, the child expands existing cognitive schemas and learns new words. The child expands his mental schemas by making sense of the words around him. For example, learning the word "balloon" is related to the fact that he begins to make connections between objects and words around him. Roy's research has shown that during this process, the child first forms a vague schema of a particular sound or word, and that this schema is strengthened through repeated interactions in a social context. This research clearly demonstrates that language development is not only a biological process, but that social interaction and environmental factors play a critical role. These findings contributed to more concrete support for theories of language development in developmental psychology (Unveren Kapanadze, 2019).

Developmental psychology focuses on how and why a behavior changes over a lifetime. It tries to understand and explain the differences within the individual, as well as the differences between individuals. Consistent with the fundamental principles and theories of developmental psychology, Roy's research highlights the importance of social interactions and environmental factors in children's language development. These findings provide valuable information for understanding and supporting children's language learning processes. It is obvious that a child who needs support during the language development phase will experience difficulties in the rest of his life when he grows up in a family with a lack of communication. For these and similar reasons, the effects of digital addiction on the family structure should not be underestimated and should be carefully considered from the Social work perspective.

## 4. Digital Addiction in Educational Environments

### 4.1. *The New Position of the School in the Digitalizing Society*

In a digitalizing society, school has long ceased to be an institution where only lessons are taught, exams are held, and academic output is measured. School is a place where students establish their social identities, develop belonging, confront the value system, and question “who am I?” It is a playground where they seek answers to the question in different areas. Today, this playing field has become more complex, intertwined with students’ existence in the digital world. When students enter the classroom door, they bring not only themselves with them but also the invisible traces of their social media accounts, their roles in gaming communities, conversations in digital groups, breaks that fit into screenshots, and social tensions experienced in the online world. In this context, “digital addiction” cannot be treated as just a habit, just a “phone addiction” or just a discipline problem in educational environments, because, in the school environment, digital addiction manifests itself with multi-layered consequences such as decreased academic success, inability to maintain attention, disruption of sleep patterns, damage to peer relationships, increased disciplinary processes, and decline in psychological well-being. While these results are symptoms, they also indicate that something is “out of place” in the student’s psychosocial world. “Psychosocial ruptures” become visible at this point. Digital life is not just a tool for some students; it can deepen the ruptures by turning into a way of regulating emotions, a place of escape, a scene of social acceptance, and an identity-testing laboratory.

School is one of the most strategic areas where these ruptures can be both monitored and transformed. Patterns of use that are overlooked within the family become visible as absenteeism at school, reactions called “stubbornness” at home are interpreted as impulsivity and anger at school, and relationships that are thought to involve “friends” may manifest as exclusion and loneliness at school. For this very reason, educational environments are becoming the strongest basis for early warning and early intervention in digital addiction and related risks.

This section discusses digital addiction in educational environments under three main headings. First, Social work interventions in schools, that is, the role of school Social work, intervention steps, school policies, and case management, will be discussed in detail. Secondly, game and social media addiction in adolescence, developmental characteristics, risk and protective factors, effects on school performance, and Social work’s empowering approach will be discussed. Thirdly, digital bullying is addressed as it intersects with school climate, peer relations, and school-based prevention and intervention; its victim, perpetrator, and bystander dynamics are considered at relevant points across this chapter and the wider book rather than in a single dedicated section. The main approach of this chapter is to understand digital addiction not only in terms of “screen time” but in terms of what function the screen serves in the student’s life, because the same screen time may be a tool that makes studying easier for one student, the only way to cope with loneliness for another student, and an escape strategy that suppresses anxiety for another. The Social work view accepts that intervention made without seeing the need behind the behavior will remain on the surface. Therefore, in this section, we will go beyond the “prohibition-punishment” line and discuss school climate, family system, peer relations, student self-regulation skills, and institutional responsibilities in a holistic manner.

#### *4.2. Making Sense of Digital Addiction in the Educational Environment*

While creating the conceptual framework of digital addiction in the educational environment, it is necessary to pay attention to two critical points. First, the phrase “digital addiction” can often become a broad cluster in the field of education, encompassing all types of intensive use. However, there is a difference between heavy use and addiction. Secondly, due to the nature of the school, it is not possible to completely exclude the use of technology; in fact, many teaching methods are considered together with technology today. For this reason, when defining digital addiction in the context of school, it is necessary to proceed through functionality criteria without falling into hostility towards technology. In the school context, digital addiction is recognized when a student loses control of their use of digital tools and this use impairs academic, social, emotional or physical functioning. If the student wants to reduce the time he/she spends in the digital environment but cannot do so, experiences intense uneasiness when he/she is away from the device, puts screen use ahead of basic areas such as lessons, sleep, and family relationships, and related problems arise, it becomes more meaningful to talk about an addiction-like pattern here. The main areas that the school can observe are generally these functionality dimensions.

Digital addiction often appears in three main forms in educational environments. The first form is in-course dysfunction. Symptoms such as the student’s inability to maintain attention, his/her mind constantly shifting to digital content, secret phone checking during class, postponement of homework, and decrease in academic performance fall into this area. The second form is difficulty in emotional and behavioral regulation. The student may show extreme anger when his phone is confiscated, may experience anxiety when he does not receive notifications, and may come to school in an aggressive or dull mood in the morning because his sleep pattern is disrupted. The third form is the rupture in social relations. The student may avoid face-to-face relationships, experience competition in peer groups over digital status, enter cycles of exclusion or bullying, or lose their sense of belonging within the school by becoming overly dependent on online groups. It should not be forgotten that there is another important distinction here. In educational environments, the problem is often summarized with just the sentence “the student uses too much.” However, the Social work approach asks a more fundamental question: “Why do students use it so much?” This question is critical to understanding the function of digital use. For some students, the digital environment becomes a tool for emotional regulation, scrolling behavior to suppress anxiety, gaming to vent anger, and use of social media to compensate for loneliness. For some students, the digital environment is the only stage of social acceptance, the child invisible in the classroom becomes visible in the online group. For some students, the digital environment is a way to escape from the feeling of failure; the adolescent who feels “inadequate” at school feels sufficient by leveling up in the game. This conceptual framework also determines the direction of intervention in the educational environment. If the function of digital use is “escape”, simply reducing screen time leaves the student with the feeling he or she escaped from, and often the problem returns through other channels. If the function of use is “belonging”, simply banning it will sever the student’s social connection and increase loneliness. Therefore, the aim of school Social work should be to fill the gaps and organize difficulties in the student’s life rather than to combat the student’s digital use. Digital addiction is often a consequence, growing as a result of underlying processes such as stress, loneliness, low self-regulation, family conflict, bullying,

and academic pressure. The ecological approach offers a powerful framework for making sense of digital addiction in the school context. The ecological approach considers the student not only with his individual characteristics but also with his family system, peer group, school climate, and social culture. At the individual level, impulsivity, attention difficulties, anxiety, depressive symptoms, and low self-esteem may be risk factors. Factors such as inconsistent boundaries at the family level, poor parental digital literacy, communication problems within the home, and neglect may increase the risk. At the school level, a punitive climate, poor belonging, unclear technology policies, and disconnected teacher–student relationships can pose risks. At the social level, factors such as the norm of “being always online”, the comparison pressure of social media culture, the reward mechanisms of game economies, and the weakening of digital privacy are effective. In this context, protective factors are also multidimensional. Secure bonds, consistent boundaries, school belonging, supportive teacher relationships, digital literacy, regular sports/art activities, and stress coping skills can reduce the risk of digital addiction. Social work cares about making protective factors as well as risk visible, because intervention is not only about reducing problems but also about magnifying resources.

#### *4.3. The Outlook for Digital Addiction in the Educational Environment: Symptoms, Silent Signals, and Breaking Moments*

In educational environments, digital addiction often comes to the fore with a “get-caught” moment. The student is seen taking out his phone during class, it is noticed that he shares inappropriate content in the class group, and it is noticeable that he is always in front of the screen during the break. However, this “visible moment” is often the last link in the process. The process has already started with small signals, and if the school’s early warning system can read these signals, support can be initiated before digital addiction reaches a more severe level. One of the silent signals in the academic field is performance fluctuations. For some students, digital addiction manifests itself in a sudden drop in grades. The student seems to be present in the lesson, but his mind is elsewhere; he cannot process the information given by the teacher and cannot sustain short-term attention. He constantly postpones his homework, studies for the exam on the last night, and then labels himself by saying “I don’t have attention.” This labeling weakens the adolescent’s sense of self-efficacy, and as self-efficacy weakens, escape behavior grows. Thus, academic failure and digital escape turn into a cycle that feeds each other. Behavioral signals are often associated with classroom management. When a student is caught using the phone, they may overreact, insist on not giving up their phone, or skirt the rules. Here teachers often comment on “disrespect”. However, the Social work view thinks that there may be an addiction-like attachment and loss of control behind this overreaction. The phone may have become not only a means of entertainment for the student but also an extension of his identity, relationships, and sense of security. In this case, taking the phone may be perceived as “my self has been intervened” in the student’s world. Of course, this does not legitimize the violation of the rules, but it allows the intervention to be established more consciously. The main emotional signals are irritability and anxiety. A student may become restless when he cannot use his phone during class and may become tense when he cannot access the screen during breaks. For some students, intense comparisons from social media may create feelings of worthlessness and depression. Especially during adolescence, themes such as body

image, popularity, romantic relationships, and peer status are constantly reproduced on social media. As the student compares himself to others' "ideal life" displays, a feeling of inadequacy may arise in his inner world. This feeling can reduce motivation for studying, because the adolescent may make academic efforts meaningless with the belief that "I'm not good anyway." Social signals are often seen during breaks. Some students spend their time leaning against the wall on their phones rather than playing with their friends. Although this image seems to have become normalized today, for some students it can be a mask of loneliness. A student who appears strong online may be shy in face-to-face relationships. Or a student who is excluded in the classroom may be accepted in an online community and become overly attached to that community. In such cases, if the school's intervention is limited to "put down the phone", there is a risk of severing the student's only social connection. Therefore, Social work places the strengthening of social ties at the center of the intervention.

Breaking moments are often marked by three events: increased absenteeism, increased frequency of disciplinary incidents, and bullying incidents. Absenteeism can be one of the strongest indicators of digital addiction, because when sleep is disrupted, the student has difficulty coming to school in the morning, and when he comes to school, he falls asleep in class and becomes disconnected from the learning process. Disciplinary incidents may indicate that a student's impulse control has weakened or that the screen has become indispensable to him/her. Bullying cases show the dark side of the digital world spilling into the classroom; a screenshot can poison the classroom climate, and a disclosure can shake the student's entire life. These breaking moments are also intervention opportunities for the school. Social work sees the crisis not merely as a "negative event" but as a call for system reorganization. The bond that the school establishes with the family and the student is shaped in these breaking moments. If the school takes a position that only punishes and stigmatizes the student, the student will move away from school and become even more isolated from the digital world. If the school provides a safe support area, the student can find a relationship ground to break out of digital addiction.

#### *4.4. Social Work Interventions in Schools: Role, Principles, and Intervention Steps*

The first thing to do when considering Social work interventions in schools is to clarify the function of school Social work. School Social work aims to strengthen the student's right to education and well-being in school. This purpose includes not only individual counseling, but also working with the family, organizing the school climate, and carrying out inter-institutional coordination and advocacy activities. Social work's contribution to a multidimensional issue such as digital addiction is exactly in line with this multidimensionality. The school Social worker should not view digital addiction as a merely individual "weakness of will". For the student, digital addiction is a problem area that is fueled by processes such as the student's inadequate ability to cope with stress, weakening of school belonging, blurring of family boundaries, and fragility of peer relationships. Therefore, the social work intervention targets not only the student but also the student's environment. It is often not possible to permanently transform the student's behavior without organizing the environment.

Interventions for digital addiction in schools can be addressed in three steps, similar to the public health approach: universal prevention, selective prevention, and indicator-based (case) intervention. Universal prevention targets the entire

school community, issues such as digital citizenship, digital well-being, privacy, time management, and cyberbullying awareness are embedded in the school culture. Selective prevention is aimed at at-risk groups; students whose absenteeism increases, whose academic performance decreases, who experience social isolation, and who enter bullying cycles are included in targeted programs. Indicator-based intervention is aimed at students with high addiction levels and seriously impaired functionality, and includes individual planning, family sessions, school arrangements, and referral to health services when necessary. At the level of universal prevention, the first task of the school Social work is to help the school develop a common language regarding the digital domain. In many schools, technology policies are either overly prohibitive or overly vague. An overly restrictive approach may increase students' secret use and truancy behavior. An overly vague approach creates a perception of injustice between classes; for example, one teacher bans phones completely while another allows them, so students do not take the rules seriously. Social work supports the creation of a balanced policy between these two extremes. It is very important to develop a school approach that protects the student's right to learn, respects privacy and security, and, at the same time, realistically accepts digital life. Within the scope of universal prevention, classroom activities with the theme of "digital well-being" can be planned. The aim of these activities is not to blame the students but to clearly discuss the effects of the screen on the brain, sleep, emotional regulation, and attention. Instead of imposing screen time targets on students, ask "what is the benefit and harm of the screen for you?" It is more effective to open a space for thinking with this question. School Social work aims to provide students with self-protection skills in the digital world. Topics such as knowing privacy settings, hiding evidence in cyberbullying, consulting trusted adults, online identity management, digital footprint awareness, and the guiding power of algorithms can be covered in an age-appropriate manner. At the selective prevention level, Social work's role is to ethically identify at-risk students and offer them support packages. Ethical determination should be made without stigmatizing the student. Labeling practices such as "phone addict" are counterproductive. Instead, the school can monitor risk signals with objective data such as absenteeism and academic decline. Guidance service classroom teachers and social worker can work together to hold "early warning meetings". In these meetings, not only the student's problems but also their strengths and social resources are evaluated, because the strength-based approach increases the student's motivation for change.

In indicator-based intervention, case management comes to the fore. In cases of digital addiction, the social worker evaluates the student's usage pattern in detail. This evaluation is not just "how many hours do you use it?" It is not just a question. It should be understood when the student uses the screen, with what emotion, for what content, and in what social context. For example, when a student is anxious before an exam, he or she may scroll on social media, or when there is an argument in the family, he or she may run away to play games. At this point, Social work's functional analysis approach comes into play. Before the behavior (trigger), the behavior itself (use), and after the behavior (relief, acceptance, escape) are analyzed. Thus, intervention can be based on reducing triggers and developing alternative coping methods.

Working with the family is essential in cases of digital addiction because if the arrangements made at school are not supported by the digital order at home, sustainability will be weakened. However, accusatory language should not be used when working with the family. Many parents may find it difficult to set boundaries

due to busy work conditions, financial stresses, and their own digital habits. Instead of labeling the family as “inadequate”, Social work aims to strengthen the parent’s capacities. Tools such as digital boundaries, shared routines, sleep hygiene, a non-screen activity plan at home, and a “digital contract” can be used in family sessions. A digital contract is a practical method to reduce family conflict because the rules are determined together in a calm time, rather than during an argument. In the contract, the hours during which the screen will be used, how lesson and sleep times will be protected, and how joint family time will be planned are written down.

The basic principles of intervention in school must be established in a balance; setting limits, establishing relationships, and building alternatives are the sides of this balance. Setting limits is necessary for controlling digital behavior, but it is not sufficient on its own. Relationship building allows the student to feel reliable adult support at school; without feeling support, the student will have difficulty changing his behavior. Alternative construction, on the other hand, allows the student to experience the reward he receives from the digital environment in off-screen areas because most students are stuck in the “pleasure-escape-reward” mechanism in the digital addiction cycle. Setting limits without constructing alternatives leaves the student in a void.

These intervention principles should also be supported by the institutional arrangements of the school. For example, while there is a completely uncontrolled phone environment during breaks at school, imposing a strict ban in classes makes the student’s behavior contradictory. Instead, the school can increase social activities during breaks and expand the student’s off-screen interaction areas with options such as playgrounds, club activities, short sports activities, art corners, and book clubs. The social worker can take an active role in planning these areas together with the school administration. Such regulations make digital addiction not only an individual’s problem but also a cultural issue of the school.

#### *4.5. Social Work Interventions in Schools: Program Design, Group Work, and Implementation Tools*

School Social work digital addiction interventions should not be limited to individual case studies only because digital addiction is closely related to the general climate of the school and peer norms. If phone use is considered “normal” in a classroom, it becomes much more difficult for a single student to change. Therefore, Social work should develop school-based programs and create a “digital well-being” culture that spreads throughout the school.

The first step in program design is the school’s needs analysis. Every school’s digital risk profile is different. Game addiction may be more dominant in some schools, social media comparison and body image problems may be prominent in some schools, and cyberbullying cases may be intense in some schools. Therefore, a social worker bringing together the school’s data and observations and asking, “which risks are more visible?” should seek an answer to the question. Absence rates, disciplinary records, guidance interview themes, teacher observations, and student feedback can be used in these analyses. Needs analysis clarifies the goal of the program. Is the aim here to reduce students’ screen time, reduce digital bullying, or strengthen sleep and attention patterns? There are often multiple objectives, but the message of the program should be simple and understandable.

The main message that can be conveyed to students in a school-based digital well-being program should not be “technology is bad” but “managing technology is a skill”. Skills-based messages reach adolescents better. Instead of telling them, “leave it”, ask them “how do you manage?” Saying this increases the feeling of control. As the feeling of control increases, the power of addictive behavior decreases. Programs should include skills such as self-regulation, time management, attention management, coping with stress, recognizing emotions, and alternative activity planning.

Group work is an important tool of digital addiction intervention in school. Group work both turns peer influence into a positive one and reduces students’ shame and hiding behavior with the feeling of “I’m not the only one.” The student who suffers from digital addiction is often either blamed or ridiculed. When group work creates a safe sharing area, the student can talk openly about his or her behavior for the first time. Here, the social worker should establish the privacy policy correctly and clarify the group rules. In group sessions, students talk about what digital use provides them, then make plans together to meet that need in non-screen areas. Tools such as “digital diary” can be used in these group studies. A digital diary does not have to be a rigid record where the student writes down screen usage. For a more functional use, the student can be given a short diary containing the following questions: “When did I escape to the screen today?”, “What feeling was I feeling at that moment?”, “What did the screen provide for me?”, and “How did my emotions change while looking at the screen?” These questions bring screen behavior to the level of awareness. Awareness is the first step to change. As the student develops awareness, it becomes possible for the screen to become a conscious choice rather than an automatic reflex.

Teacher training is also a critical component in school Social work programs because teachers are often the first to see signs of digital addiction. However, if the teacher reads the student’s digital behavior only through the lens of discipline, intervention turns into conflict. For this reason, teachers can be informed about topics such as the psychosocial dimensions of digital addiction, the reward system in adolescence, the relationship between sleep and attention, and the dynamics of cyberbullying. The purpose of teacher training is not to make the teacher a therapist but to provide the teacher with early warning and correct guidance skills. Instead of scolding the student to “put down your phone,” the teacher says, “You seem very tired lately, should we talk to you for a while?” can develop a language that establishes relationships.

Family seminars are also an important part of the program. Parents often fall between two extremes, either allowing it completely or forbidding it completely. A laissez-faire attitude increases uncontrolled use, while outright prohibition escalates conflict. Middle-way strategies can be explained to parents in family seminars. For example, methods such as using screens in common areas at home, gathering devices in a common place at night, reducing the screen time close to bedtime, the parent’s own screen modeling, and establishing a “digital routine” instead of “digital bargaining” with the child strengthen the family. In particular, the parent’s own screen behavior creates a strong modeling effect on the child. Expecting the child to put down the screen while the parent is constantly on the phone weakens credibility because the child memorizes what he sees, not what he hears. Social work makes this pattern visible without blaming the family.

The evaluation part of school Social work programs should not be neglected. Programs cannot be sustained with a “just do it” approach. Simple indicators can

be used for evaluation. Indicators such as student absenteeism rate, disciplinary incidents, self-report of student sleep patterns, in-class focus observations, number of bullying reports, and student satisfaction help understand the impact of the program. Social work can strengthen the sustainability of the program by providing feedback to the school administration with these evaluation results.

#### *4.6. Game Addiction in Adolescence: Developmental Basis, Attraction Mechanisms, and Effects on School Life*

Adolescence is a period of rapid developmental changes. The body changes, hormones change, emotions intensify, the search for identity deepens, and peer relationships become primary. Peers are everything, while family is an “old” community that should not interfere in everything. Brain development continues during this period, especially the strong functioning of the reward system and the continued development of areas responsible for impulse control, making adolescents more sensitive to stimuli that give rapid rewards. Games are designed with reward mechanisms that appeal to this sensitivity. Systems such as leveling up, earning points, completing tasks, reward boxes, daily login rewards, and competitive rankings constantly keep the adolescent’s reward sensitivity alive. Adolescents are fast; they like fast things. Game addiction is often reduced to the sentence “he doesn’t study, he plays games” in the educational environment. However, play often fills a gap in the adolescent’s life. A student who feels unsuccessful at school can be successful at play. A student who is shy in class can become a team leader in the game. A student experiencing conflict at home may find peace in play. Therefore, to understand game addiction, it is necessary to evaluate the psychosocial function of the game. Play is an area that provides not only entertainment for the adolescent but also an experience of control, success, acceptance, escape and identity.

Effects on school life often begin with sleep. Game sessions extend into the night, the time gets longer with the logic of “one more hand”, and the student postpones bedtime. As sleep decreases, it becomes more difficult to get up in the morning, and lateness and absenteeism in school increases. Even if the student comes to school, he is tired and angry. Fatigue increases attention problems in class, and as attention problems increase, academic performance decreases. As performance decreases, the student experiences stress and turns to more games to cope with stress. Thus, play and school failure turn into a cycle that feeds each other. While game addiction weakens social relationships in some students, it creates a different social bond in other students. Online games, in particular, give teenagers a sense of community. Structures such as clans, teams, guilds, and Discord groups can meet the adolescent’s need for belonging. The adolescent feels like he belongs to a group in this world, and he is not alone. This belonging is strengthened when face-to-face relationships are weak. If the student is alone at school, his friends in the game become more valuable to him. In this case, stopping the game completely may mean severing the student’s belonging. Social work intervention should therefore focus on a “balancing” approach rather than a “total ban”. Anger reactions can also be common in adolescents who experience game addiction at school. Especially when access to the game is blocked, the student may become unable to control himself. This anger can lead to conflict with the teacher, disciplinary processes, and tension in peer relationships. Reading the anger response merely as “disrespect” narrows the intervention down to punishment. However, anger is often a deprivation reaction arising from severing of the addiction-like bond.

In this case, the school Social work aims to strengthen the student's anger regulation skills, understand triggers, and develop alternative ways to relax. An important strategy for school Social work in gaming addiction intervention is to expand the student's areas of off-screen achievement and belonging. What does the student like? What makes him happy if he is busy with it? Fields such as sports, arts, club activities, project teams, and social responsibility activities enable the student to experience a "sense of success" in real life because, in the cycle of addiction, games are often the only source of success. As the student's non-game resources increase, the attractiveness of the game decreases. In this process, Social work can guide the student to explore their interests. Some students think "I don't have any talent", but they could not try because they could not find the right environment. Social work can take the lead in creating this environment within the school. Every flower has an environment in which it can bloom; the important thing is to position the flower in the right place.

#### *4.7. Social Media Addiction in Adolescence: Approval Economy, Comparison, and Identity Construction*

Social media addiction requires special attention during adolescence because adolescence is a period when identity is formed and self-worth is most open to external feedback. Social media platforms constantly feed this sensitivity of the adolescent with quantitative feedback such as "likes", "comments", and "followers". The teenager can begin to measure the value of the content he shares by the number of likes he receives. This measurement is pleasurable in the short term, but makes self-worth fragile in the long term because when external approval decreases, the adolescent's feeling of worthlessness may increase.

Social media is not only a sharing area for adolescents but also a social comparison area. The adolescent compares his own life with selected moments of others. This comparison is often unfair because social media magnifies success, beauty, happiness, and popularity with filters and selective presentations. Even if the adolescent knows this, he unfortunately cannot easily get rid of the emotional impact. Therefore, social media addiction can be associated with body image issues, anxiety, and depressive symptoms. In the school environment, this can be seen as a student's withdrawal, loss of motivation, withdrawal from social relationships, and a decrease in academic performance. Another dimension of social media addiction is the "fear of missing out". Adolescents may worry about missing conversations in group chats, being behind on following trends, or not seeing their friends' posts. This anxiety may push them to check their phone even during class. Even if some students keep their phones on silent mode during class, they frequently check notifications by turning the screen on and off. This behavior causes divided attention and reduces the quality of learning. As attention is divided, the student does not understand the lesson. The more he does not understand, the more bored he becomes, and the more bored he becomes, the more he goes to the phone. Thus, social media turns into an escape area during class.

In social media addiction, the school's goal is not to completely disconnect the student from social media. The goal is to make students conscious of their use of social media and to save their self-esteem from being dependent on external approval. For this, the student's strengths, real social ties, and school belonging should be supported. As the areas in which the student can be visible and experience success within the school increase, the approval he/she expects from social media decreases.

In addition, through digital literacy studies about topics such as the functioning of algorithms, how “ideal life” presentations do not reflect reality, and the permanence of digital footprints can be explained to adolescents. This explanation should not be made in moralistic language, but in a language of curiosity appropriate to the adolescent’s world.

The family factor is also important in social media addiction. Some families do not understand their children’s use of social media and belittle them, saying “what’s the point, everyone is doing it”. Some families may panic excessively and impose strict prohibitions. Both situations increase conflict. Social work tries to regulate the family’s anxiety while keeping the family informed because, as parental anxiety increases, controlling behaviors increase, and the adolescent’s secret use becomes stronger. The aim of working with the family is to establish trust-based boundaries, strengthen joint family time, and make the adolescent’s digital world a talkable topic.

## 5. Adults and Digital Burnout

### 5.1. *What Is Digital Burnout and Why Does It Become Invisible in Adults?*

Adulthood is a phase of life in which the expectation of “functionality” increases as responsibilities increase. Work, family, economic burden, care responsibilities, social roles, and social pressure to “succeed” can turn into a constant source of stress in the daily life of an adult. This stress environment takes on a new form with digitalization. Now the adult’s work is not only at the workplace but also spreads to all hours of the day with the device carried in his pocket. Endless e-mails after work hours, messages popping up asking “let me check one last time”, notifications arriving at midnight, and online meetings held on the weekend force the adult to be “constantly available”. Over time, this obligation goes beyond a state of fatigue and creates a deeper break that can be called “digital burnout”.

While individuals with high digital awareness and competence, who can use digital tools safely, appropriately, effectively and functionally, are a desired and expected situation as a result of digitalization, we are faced with the danger of digital burnout, which is a digital age disease—a result of digital behavioral addictions created in individuals due to too much attachment, dependency, and intensity created by uncontrolled use (Özdemir & Erten, 2025).

Burnout refers to a state of mental, emotional, and physical exhaustion resulting from chronic stress. Digital burnout is a related but more specific condition in which connectivity demands, notification pressure, information overload, and the collapse of temporal boundaries continuously drain attentional and emotional resources (Özdemir & Erten, 2025). It should not be equated automatically with digital addiction. An individual may be highly dependent on digital stimulation, but digital burnout may also appear in people whose online presence is driven primarily by work requirements, care coordination, or organizational norms rather than by reward seeking. Clarifying this distinction strengthens assessment; addiction foregrounds loss of control and compulsive return, whereas digital burnout foregrounds depletion, cognitive fatigue, and the chronic inability to disengage.

A connection can be established between burnout and information and communication technologies in many ways, such as being constantly accessible and online, constant exposure to stimuli such as digital media, news, advertising, and social media, making efforts to keep up with current technology and use it effectively, grasping complex technologies, and losing heart as a result of failure. The situation that employees fall into with burnout emerges and develops with the stressors that create technostress, and, as a result, technostress gives rise to digital burnout. Technostress and digital burnout affect an individual’s life in psychological, physical, and cognitive dimensions (Yiğit et al., 2022). If we look at the position of decision-making behavior in this relationship, we come across the fact that, contrary to the rational human profile in the traditional model, individuals cannot always make a healthy cost-benefit analysis of current situations and events and can make decisions with different motivations. Some studies even show that people are systematically prone to errors in the same type of problems due to different motivations (Ariely, 2010). These calculation errors that occur due to people’s limited calculation abilities are called cognitive bias (Tversky & Kahneman, 1973). Deciding can be a rational process that requires thinking within the framework of logic and reaching the most beneficial result, but it is also a psychological process. Therefore, a person’s psychological state is directly related to the results when making important decisions

(Çil, 2021). The stress factor, which directly affects a person's psychological structure, can have negative effects on decision-making. As a matter of fact, studies focusing on the relationship between different stress levels and decision-making have shown that people who experience high levels of stress and long-term stress may experience impairment in brain and mental activities (Phelps et al., 2014). Stress and being under pressure can lead to unstable moods and impulsive decision-making behavior. Based on this, it is predicted that, as a result of technostress and digital burnout, employees who are exposed to intense stress are more inclined than normal to make emotional decisions shaped by their habits and prejudices, far from rationality in their decision-making processes. Digital burnout is a new phenomenon that has been identified internationally and occurs primarily in employees (Quill, 2017). Digital burnout in working life is defined as a psychological condition caused by excessive work behavior and constant accessibility through digital devices (Breytenbach, 2015). Being a psychological condition, it has attracted the attention of psychologists, but it has also become the subject of many fields due to its direct connection with working life and its serious effects on the well-being of employees, such as low productivity, inability to cope with stress and routine, and negative participation in the context of its consequences. Stress and tension arising from people working long hours virtually have become one of the causes of traditional burnout (Chang, 2014).

Digital burnout is not simply fatigue that occurs due to increased exposure to technological stimuli. This phenomenon makes the adult's attention constantly fragmented, leaves moments of rest "unfinished", weakens emotional closeness in relationships, keeps stress hormones chronically high, and erodes the individual's self-perception with the feeling of "I can't keep up." More importantly, digital burnout often becomes invisible because the adult appears to be "doing their job." In other words, functionality is perceived as continuing from the outside. However, inside, accumulated fatigue, lack of enjoyment, impatience, loss of motivation, sleep disturbance, anxiety, and "boredom" gradually grow.

An individual's existence in the virtual world and his real existence run simultaneously in two parallel universes. Even while eating, sleeping, or chatting with a person in the real world where physical existence is maintained, existence in the digital world continues at the same time. So much so that the virtual social environment with digital presence is preferred instead of the real social environment, and online and offline lives are intertwined. This constant online state forces the brain to engage in more than one task at the same time, causing a feeling of burnout. The virtual world and the person's virtual existence actually cause him to miss the moment and environment he is in. The concept of mindfulness, which has become popular recently, is also used to create awareness in order to be aware of the current moment and to protect the border between virtual existence and physical existence.

The concepts of FoMO, Netlessphobia, and nomophobia, which can be shown as extensions of digital burnout, as well as digital workaholism (the obligation/habit of constantly working online and staying connected), notification addiction, attention fragmentation, and the psychosocial effects of remote working and hybrid working conditions and how these affect work environments are also topics that fall into the field of work of Social work. Also related to digital burnout is the fact that much productivity at work is not just a "waste of time" but a set of effects on decision-making, creativity, risk of making mistakes, team climate, and job satisfaction. Digital burnout is not an individual "will problem" but a problem often associated with corporate culture, work organization, social policy, and support systems. The social worker

takes on both individual empowerment and institutional-level advocacy roles in this multi-layered field.

### *5.2. Phenomenology of Digital Burnout: What Happens in the Adult's Inner World?*

The adult experiencing digital burnout often describes himself as follows: "I'm always busy, but nothing gets done." There are two basic dynamics in this sentence: a constant state of arousal and a constant feeling of deficiency. The digital environment weakens the sense of "completion" by continuously dividing the adult's attention. A person moves on to another task without finishing it, and even when moving to the next one, the mental load of the first task continues. This mental load is felt over time as "cognitive fatigue". Thinking capacity decreases, decision-making becomes difficult, and even simple tasks seem like mountains. One of the most common internal experiences in digital burnout is the state of being "disturbed by silence." The adult feels that his mind is filled with scattered thoughts when he is idle, and he turns to the screen to suppress this. The screen thus becomes not only a work tool but also an anxiety regulation tool. This regulation mechanism is relaxing in the short term because the person is distracted from the anxiety-provoking thought. But in the long run, it feeds anxiety because the person misses the opportunity to confront and transform anxiety. Keeping the mind constantly in "escape" mode reduces emotional resilience. Another phenomenon is "social comparison fatigue." Social media paves the way for the adult to constantly compare himself to more successful colleagues, happier families, better lives, etc. As the adult compares his own reality with the selected moments of others, the feeling of inadequacy increases. This feeling increases performance pressure, and, as the performance pressure increases, the person works more, stays online more, and gets more tired. The cycle thus amplifies itself.

The physical dimension of digital burnout should not be underestimated. Staying in front of a screen for a long time can increase somatic symptoms such as eye fatigue, neck and back pain, sedentary life, decrease in sleep quality, and headache. Screen exposure, especially at night, makes it difficult to fall asleep. When sleep is disrupted, attention and emotion regulation capacity decrease the next day. This situation affects work performance. When performance decreases, the person experiences guilt and anxiety. When anxiety increases, he again spends the night looking at the screen. Digital burnout thus turns into a cycle that disrupts biological rhythms.

### *5.3. Basic Concepts: Nomophobia, Netlessphobia, FoMO, and Digital Workaholism*

#### *5.3.1. Nomophobia/Netlessphobia: Is the Fear of "Being Without a Phone" More than a Habit?*

Nomophobia can be defined as experiencing intense uneasiness and anxiety in situations not having a phone, the phone running out of battery, not having an Internet connection, or not being able to access the phone. Nomophobia in adults is often normalized "due to work." The person may not see this anxiety as a problem because he says, "my work is on the phone". However, nomophobia can turn into an emotional regulation bond beyond the accessibility required by the job. The phone is not just the place to do business; it becomes an extension of one's identity, social ties, and sense of security. So, the absence of a phone can trigger a kind of feeling of "loneliness" and "loss of control." For nomophobia, its reflection in business life is constant control behavior. The adult checks the phone between meetings, looks

at notifications while walking on the street, and even glances at the screen while driving. This behavior sometimes carries security risks and sometimes damages social relations. Having the phone constantly on the table during time spent with the family creates “half-attention” in the relationship. Half-attention erodes emotional closeness over time. As closeness decreases, the person feels lonelier, and as loneliness increases, the person turns more to the screen.

Nomophobia is a fear that almost everyone today has experienced at least once. The virtual world, which covers a wide range of activities such as sharing photos and videos on social media, blogging, playing games, dating, and arranging meetings, can cause people to fear being deprived of their smartphones. This condition, defined as nomophobia, can also show symptoms such as sleeping with a smartphone in bed and frequently looking at the phone, in addition to the fear of not being able to go online, losing communication, being deprived of a device, and not being able to access information. The tendency to follow developments in technology and social media movements quite frequently increases the number of nomophobic individuals day by day. At the same time, the ability to change emotions and escape from the troubles of daily life, and the frequent arrival of stimuli such as likes, follow requests, notifications, emojis, comments, and event news that feed the reward mechanism, are among the features that make the Internet an attractive leisure activity. Anxiety about being deprived of devices with these features creates new problems for the individual. Netlessphobia is the fear of being without the Internet. When a person spends most of his time in the virtual world, behaviors such as being surprised or angry, exhibiting aggressive attitudes, and being worried about the process being prolonged when faced with a situation without the Internet explain the fear of being without the Internet and the risks it brings.

### 5.3.2. FoMO: How the Fear of Missing Out Captures Adult Daily Life

FoMO is simply the fear of missing out. In the literature, it is expressed as the fear of missing out on what someone else is experiencing. Although it was used in the field of marketing when it first emerged, this concept is now directly associated with social media and is described as a situation where the individual cannot cope with the anxiety caused by being deprived of activities, especially when he sees the things that others experience on online platforms. As the individual’s tendency to compare and the need for social approval increases, the ability to cope with this anxiety decreases. As the individual spends time on social media, he constantly compares his own life with the lives of others and feels inadequate in this process, and then this situation turns into depression; the increase in anxiety symptoms is related to FoMO, which highlights the negative effects of digital transformation. FoMO is not only the fear of missing social events in adults; it is also experienced strongly in the business world. Thoughts such as “If I don’t reply to this e-mail now, I will miss the opportunity”, “The team may be talking about something, I will be left behind”, and “If I don’t see the message, the problem will get worse” keep the adult constantly online. The basis of FoMO is often a feeling of insecurity. The competitive structure of the job market, performance measurements, vague job descriptions, and constantly changing targets foster the feeling of “I must be ready at all times” in the adult. This feeling is the fuel for digital burnout.

Another source of FoMO is visibility pressure on social media. Adults also seek social approval, and the need to appear “successful”, “active”, and “productive”

pushes them to create an identity that can be exhibited on digital platforms. When this identity construction is not sustainable, the person experiences tension between his real self and his digital self. This tension increases internal fatigue.

Adult individuals' inability to remain without the Internet, social media, or phone in their work environments or at home, in their social relationships, or when they spend time alone, and their inability to move away from digital technology even though they are tired of it, are among the biggest problems of our age, and it is important to intervene in these situations, which are both causes and consequences.

### 5.3.3. Digital Workaholism: How Is It Possible to "Rest" in a World Where Work Never Ends?

Digital workaholism is not just about working hard. Digital workaholism is the constant expansion of work with digital tools; the person's mind is constantly at work, and the boundaries of rest are lost. The norm of being "available at any time" is an unwritten rule in some institutions. If an employee does not comply with this norm, he or she may be labeled as "incompetent" or "not engaged." This pushes the employee to stay online more. Over time, a person feels guilty when he/she turns off the phone and perceives the time he/she spends for himself/herself as "in vain". This perception makes even resting stressful. Digital workaholism affects the productivity of the organization, as well as the mental health of the individual because being constantly online creates the illusion of productivity in the first place. However, in the long run, the error rate increases, creativity decreases, tension within the team increases, and burnout and intention to quit increase. Therefore, digital workaholism is not just an individual behavior but a matter of corporate sustainability.

### 5.4. *Loss of Productivity at Work: How Digital Burnout Weakens Organizations*

Loss of productivity is often boiled down to something as simplistic as "employee surfing social media." However, in digital burnout, loss of productivity occurs mostly through attention fragmentation and increased cognitive load. The employee is interrupted by e-mail and text notifications multiple times throughout the day, with each interruption increasing the cost of refocusing the mind. This cost is invisible but real. A person spends more time, consumes more energy, and gets more tired when completing a task. The impact of digital burnout on productivity is not just a waste of time; it reduces decision quality. An adult experiences "decision fatigue" when he or she makes dozens of small decisions throughout a day. This fatigue reduces the quality of critical decisions, especially towards the end of the day. The person either starts procrastinating or makes quick and superficial decisions. This situation affects the quality of the work and paves the way for corporate mistakes. Team relationships can also deteriorate with digital burnout. Constant texting increases short and intermittent forms of communication. Misunderstandings increase when issues that should be discussed face to face are transferred to written messages. Misunderstandings can create conflict within the team. As conflict increases, the working climate deteriorates; as the climate deteriorates, stress increases, and as stress increases, employees turn to more digital escapes. Thus, a vicious cycle is created at the institutional level.

### *5.5. The Role of Social Work: Multi-Level Response to Digital Burnout*

For Social work, digital burnout is an area that requires intervention at both micro (individual), mezzo (family/team), and macro (institution/policy) levels. While the social worker conducts counseling and case management to empower the individual, he also analyzes the structural risks of the institution. This analysis breaks the “responsibility lies solely with the employee” approach, because, in most organizations, digital burnout is the result of corporate design mistakes. Situations such as unclear job descriptions, excessive meeting load, performance pressure, 24/7 accessibility norms, inadequate rest culture, and the ambiguity of boundaries create digital burnout.

#### *5.5.1. Micro Level: Individual Empowerment Work with Adults*

At the individual level, Social work focuses on “reorganizing” the life of an adult experiencing digital burnout. The goal here is not to give up the phone completely but to establish a healthier relationship with digital tools. The adult’s ways of coping with stress are expanded, and skills such as sleep hygiene, attention management, boundary setting, and self-compassion are strengthened. Additionally, the balance between a person’s “work identity” and “life identity” is discussed because digital workaholism is often associated with tying one’s self-worth only to performance.

#### *5.5.2. Mezzo Level: Organizing Family and Team Dynamics*

At the mezzo level, Social work can work on family communication, caregiving burden, screen boundaries at home, and strengthening shared time. A parent experiencing digital burnout may be emotionally “absent” at home. This situation may create a perception of neglect and behavioral problems in children. Without blaming the family, Social work supports shared routines, off-screen bonding practices, and rearranging the division of household labor. At the team level, Social work can develop “digital well-being” programs together with the organization’s human resources or occupational health unit. Communication protocols, meeting rules, messaging hours, and feedback culture can be arranged within the team. These arrangements strengthen the psychosocial well-being of employees.

#### *5.5.3. Macro Level: Corporate Policy and Advocacy*

At the macro level, Social work can influence corporate policy through issues such as the “right to accessibility” and the “right to be heard.” In some countries, discussions of the “right to disconnect” aim to limit the obligation of employees to be online outside of work. A similar approach can be applied at the institutional level. The definition of emergency outside working hours is clarified, e-mail response waiting periods are determined, and weekend meetings are limited. Social workers advocate for this with evidence-based arguments in the formation of these policies.

### *5.6. Measurement and Evaluation: A Practical Framework for Understanding Digital Burnout*

No single metric is sufficient when assessing digital burnout. Social work assessment is based on usage pattern, function, triggers, consequences, and resources. Usage Pattern: At what times of the day is the person most online? How long is screen time outside of work? Is there any screen exposure at night? Function: Why

does the person go to the screen? To escape anxiety? To raise business? To suppress loneliness? Triggers: What situations increase the display? Work conflict, uncertainty, criticism, domestic stress, loneliness? Results: How are sleep, relationships, work performance, physical pain, and mood affected? Resources: What is the person's support system, hobbies, social ties, and strengths? Evaluation with this framework enables the intervention to be tailored to the individual. Digital burnout cannot be solved with a standard recipe, because each adult's relationship with the screen has different functions.

The case studies presented in this and the following chapters are composite and fictionalized examples developed for educational purposes; they are informed by professional practice and the literature, and any identifying details have been altered so that no real individual or institution is depicted.

#### 5.7. Case Study 1: *The Vicious Circle of "If I'm Not Always Online, I'll Lose My Job"*

Case Description: Adam, 34 years old, project manager in the private sector and a hybrid worker, has been having trouble sleeping for the last year, checking his e-mail until 02:00 at night. He wakes up tired in the morning and stays awake even with coffee. His arguments with his wife increased. "Even when I'm playing with my child, my mind is at work," he says. When he turns off his phone, he becomes restless and feels like "I'm missing something." His performance at work began to decline, he made mistakes in meetings, and his forgetfulness increased.

Evaluation (Social Work Formulation):

- Triggers: unclear project goals, upper management pressure, competition within the team.
- Function: phone control reduces anxiety for a short time and gives a feeling of control.
- Reinforcers: Sometimes, when you write an answer at night, you get the experience of "I'm glad I did." This experience strengthens the behavior.
- Results: sleep disruption, decreased attention, increased errors, increased anxiety.
- Sources: His bond with his wife is strong, but communication is frayed. He has a sports background but quit.

Intervention Plan (6 Weeks):

- Psychoeducation: sleep, screen light, notification loop, attention fragmentation.
- Limit Setting Protocol:
  - After-hours e-mail viewing window is limited to 19.00–19.15.
  - After 22.30, the phone is at the "charging station" (in the common area).
- Emergency Definition: call from team leader only.
- Anxiety Regulation: breathing exercise + 10 min "mental decompression writing" (writing down the day's worries).
- Family Session: shared time plan with spouse (screen-free family routine for 30 min, 3 days a week).
- Enterprise-level Mini-advocacy: brief meeting with Adam's manager (with Adam's consent) clarifying "out-of-hours availability expectation", recommendation to establish team communication rules.
- Alternative Build: 30 min walk 2 days a week (no phone).
- Monitoring: sleep diary + tracking work error patterns.

- Intended Outcomes: improvement in sleep patterns, decrease in anxiety, decrease in conflicts with spouse, increase in attention at work, and regression in burnout symptoms.

#### 5.8. Case Study 2: *“Social Media Comparison Fatigue” and the Imploding Adult*

Case Description: Melis, 29 years old, works in a public institution and spends hours on social media after work. “I’m distracting myself,” she says, but then she feels bad: “Everyone is better than me.” In recent months, her enjoyment in things decreased, and she started to avoid meeting up with friends. Her sleep is interrupted. She does not want to go to work in the morning. When she puts the phone down, she feels empty.

- Function: filling the emotional void and suppressing loneliness.
- Trigger: decline in job satisfaction + disintegration of circle of friends.
- Result: comparison, worthlessness, withdrawal, loneliness, more social media.
- Source: she is interested in creative writing and had taken a course in the past.
- Intervention: making the social comparison cycle visible (thought–emotion–behavior chain).
- “Digital design” Instead of “digital diet”: organizing followed accounts, turning off notifications, using at certain hours.
- Coping with Loneliness: 1 social event and 1 course/workshop goal per week.
- Self-compassion Work: recognizing the inner critic and realistic goals.
- Sleep Hygiene: 60 min screen-free routine before bed.

This case shows that digital burnout in adults grows not only through workaholism but also through weakened social ties and fragility of self-worth.

## 6. Intervention and Policy Dimension

### 6.1. Social Work Interventions with Digital Addiction

#### Intervening in Digital Addiction Is More than Just Reducing Screens

Digital addiction interventions today are often reduced to the goal of “reducing screen time.” However, from the perspective of Social work, digital addiction is a pattern that serves a function in an individual’s life, meets a need, and often covers up other problems. Therefore, intervention should include not only reducing the screen, but also determining what will replace the screen, which needs of the individual will be met, and how the environment will be arranged. Social work’s approach to digital addiction should be biopsychosocial and ecologically based. The individual’s psychological characteristics, family system, peer environment, school/work context, social norms, and reward mechanisms obtained through digital platforms are evaluated together. Intervention is structured at the micro–mezzo–macro level; individual counseling, working with the family, group work, school/workplace programs, community-based prevention, and social policy advocacy complement each other.

This part of the study aims to provide the social worker with a “feasible intervention map.” Starting from the evaluation phase, individual interview techniques, group programs, and community-based interventions are presented along with case studies.

### 6.2. Evaluation and Case Formulation: “How Much Does He Use?” Instead of “Why Does He Use It?”

Assessment in digital addiction should be done using ethical and non-stigmatizing language. Definitive labels such as “You’re an addict” can increase defensiveness, especially in adolescents. For this reason, the evaluation should proceed through the “impact of use on life”. Social work evaluation components can begin to be explained by the usage pattern. When, for how long, and involving what content does the person use screens during the day—gaming, social media, video, or messaging? Are weekdays/weekends different? What does the screen provide for the person? Is it escape, relief, a sense of control, belonging, approval, or success? What emotions and events increase usage? Do they include stress, loneliness, conflict, failure, exclusion, and boredom? How are sleep, school/work performance, relationships, physical health, and mood affected? The assessment, which begins with questions, should be supported by strengths, support sources, interests, safe relationships, and meaningful activities. Whether there are signs of digital bullying, blackmail, abuse, risk of self-harm, or severe depression should be investigated. These components enable the intervention to be tailored to the individual. For example, if the function of use is “loneliness,” intervention should focus on strengthening social ties. If the function of use is “escape”, skills to cope with stress should be developed. If the function of use is “success”, areas should be built where the person will experience success in real life. “When do you get most lost in front of the screen?” “What is the most difficult thing when you are away from the screen?” “What does the screen make you feel good?” “What do you think this use makes difficult in your life?” “If you wanted to change something, what would be the smallest change?” Questions like these help the person develop insight. The Social work interview does not impose

the individual's motivation for change from the outside but aims to reveal it from the inside.

### *6.3. Individual Counseling: Motivation, Self-Regulation, and Life Design*

In individual counseling, the social worker treats the person's digital behavior not as a "moral weakness" but as a learned coping strategy. This approach reduces the client's self-blame and creates space for change.

#### *6.3.1. Digital Behavior with a Motivational Interviewing Approach*

A common condition in digital addiction is ambivalence. A person both wants to quit and does not want to quit because the screen both creates problems and provides relief. This dual emotion makes change difficult. The motivational approach helps the person find the reasons for change within himself. When the client says, "I need to put the phone down, but I can't," the social worker proceeds with reflective questions such as "What can the phone do for you?" instead of questioning "why can't you put it down?" "What do you feel like you'll lose when you quit?" "What do you think you will gain if you quit?" The goal is to make the person realize the incompatibility between their values and behavior. For example, if the client says, "I want to spend quality time with my child", the difference between this value is made visible through the screen behavior. This visibility increases intrinsic motivation.

#### *6.3.2. Self-Regulation Skills: Big Transformation with Small Steps*

With digital addiction, "quitting" often fails, and the person feels more inadequate. That is why Social work moves forward with small and sustainable goals, such as the following: 15 min of "no notice" time twice a day; put down the phone 60 min before bed; do not spend the first 30 min of the morning using your phone; and limit social media checking to three "windows" per day. These goals are not "forbidden" but are designed with the logic of "design". The person begins to redesign his own life.

#### *6.3.3. Alternative Construction: What Will Replace the Screen?*

If the screen is a source of reward and relaxation, reducing it creates "space." If this gap is not filled, the person will return. For this reason, an "alternative activity plan" is made in counseling. The alternative is not just a "do sports" suggestion. It should be compatible with the person's values, interests, and life circumstances. For the need for social connection, weekly involvement in a community (course, club, volunteering) is recommended. For the achievement need, small measurable goals (language study, project, certificate) are recommended. For the need for relaxation, activities such as short relaxation practices, walking, meditation, and hobbies are recommended.

### *6.4. Group Therapies and Group Studies: Turning Peer Influence into Healing Power*

Group studies are effective in digital addiction for two reasons. First, it gives the person the feeling of "I am not alone." Second, it transforms peer norms. Within the group, members learn from each other's experiences, shame decreases, and motivation increases.

#### 6.4.1. Case Study 1 (Individual + Family): “Adolescent Gaming Addiction and War at Home”

Alex is 16 years old and plays online games at night. He is late for school in the morning, and absenteeism increases. When his parents confiscate the phone, big fights break out. The father shouts, “No man!” Alex says, “You don’t understand me” and locks himself in his room. In this scenario, for Alex, play = success + control + group of friends, while school = feeling of failure + criticism, and on the other hand, home = conflict + worthlessness. In this picture, gaming was the only “good feeling” area for Alex. What can be done? The following are outlined: motivational interview with Alex; exploring the function of the game; session with family: reducing blame language, with a “routine not rules” approach; digital contract: playtime + bedtime + reward system (off-screen achievements); school collaboration: breaking assignments into micro goals, with a teacher feedback plan; alternative construction: sports club/intramural project team; and monitoring: weekly usage and sleep tracking. When these steps were followed in order, this case progressed not through a “ban” but through “reestablishing life” and thus shows that the conflict decreased.

#### 6.4.2. Case Study 2 (Adult + Workplace): “Digital Workaholism and Burnout”

Maria, 38 years old, is a manager. More than 150 e-mails accumulate in her mailbox per day. She returns team messages after working hours. Conflict with the family has increased. “I can’t rest,” she says, but feels guilty when she hangs up the phone. What can be done? Individual, team, and corporate solutions can be produced. Individual solutions can be produced such as setting limits, working with guilt, sleep hygiene, messaging hours in team-related situations, emergency protocol, meeting reduction, and corporate solutions such as drafting a digital well-being policy and a directing-to-an-employee support program.

#### 6.5. *Community-Based Intervention Logic: Transition from Case to Ecosystem*

Digital addiction is a process that often begins in an individual’s room but spreads to the neighborhood, school, workplace, and social culture. Social work’s community-based intervention approach addresses this process not only as an “individual problem” but also with the weakening of social ties, impoverishment of free time, lack of safe space, economic stress, uncertainty of institutional boundaries, and the reward architecture of digital platforms. Therefore, the aim of community-based interventions is not only to “reduce screen time”, but also to replace the gaps filled by the screen with functional alternatives, strengthen community ties, and make environmental regulations that reduce risks. Community-based intervention becomes particularly critical for two reasons. First, even if digital addictive behavior occurs in a single family or a single student, the culture that fosters it is often in the environment. The normalization of “everyone is like this” makes individual change difficult. Second, addictive behavior is often driven by “emptiness” from a social gap, emotional gap, activity gap, meaning gap, etc. This gap can only be filled with social resources. When approaching digital addiction, community-based Social work sees the prevention-early intervention-rehabilitation line as the responsibility of a multi-stakeholder network, not a single institution. School, family, youth centers, municipality, civil society, health units, psychosocial support lines, and, when necessary, child protection mechanisms are parts of this

network. The social worker stands out with his role as the “connector” who can establish and operate this network.

#### *6.6. Target Groups in Community-Based Intervention: Same “Screen”, Different Needs*

When designing a community-based program, it is necessary to evaluate the target audience correctly because the same screen behavior is based on different needs at different ages and in different social conditions. While the screen is often an attempt at belonging and a means of constructing an identity for an adolescent, for an adult the screen can be a means of regulating performance pressure and anxiety. For the university student, the screen may become a way of coping with loneliness; for the unemployed young person, the screen may be an escape that suppresses despair. For this reason, target groups in community-based interventions can generally be addressed under the following headings:

- (1) Risk group children in primary and secondary school age (poor self-regulation skills, inconsistent family boundaries);
- (2) Adolescents (gaming/social media, bullying, identity, and status pressure);
- (3) University youth (loneliness, academic procrastination, social comparison);
- (4) Adult employees (digital burnout, workaholism, nomophobia);
- (5) Fragile groups (groups where digital escape may increase due to risks such as trauma history, care burden, economic deprivation, disability, migration experience).

What is common to every target group and what needs to be done in the intervention are setting boundaries, establishing relationships, and building alternatives. What differs is the weight each of these will carry. For example, while relationships and alternative construction are often more decisive in adolescents, boundary setting and institutional regulation may become more critical in working adults.

#### *6.7. Community-Based Program Design: “Digital Well-Being” Model*

To establish a community-based “Digital Well-Being” program, a social worker designs the program not only as a training seminar but also as a behavioral-change-and social-bond-strengthening project. The basic components of the program can be addressed via four layers: individual, family, institution, and community.

At the individual layer, the aim is to provide individuals with skills to recognize and manage their digital behavior. This includes not just information but concrete skills such as self-regulation, attention management, coping with stress, sleep hygiene, and a relapse prevention plan. At the family level, the aim is to establish domestic boundaries without creating conflict and to strengthen the relational bond. At the institutional layer, the aim is to create a clear and fair policy and supportive climate within the school/workplace/institution. At the community level, the aim is to increase the accessibility of off-screen alternatives: sports, arts, volunteering, courses, clubs, neighborhood events, and safe meeting spaces. Instead of a “single big goal” in program design, measurable and sustainable micro goals are determined. For example, instead of “quit the screen completely”, the goal of “quit the screen 60 min before bedtime 3 days a week” is more realistic. The program should be designed in a way that does not create a feeling of “failure” because the person experiencing

digital addiction often struggles with the feeling of “inadequacy”, and if the program increases this feeling, the motivation for change decreases.

## *6.8. Community-Based Intervention Tools*

### *6.8.1. Digital Usage Map*

A digital usage map makes a person’s on-screen behavior visible without judgment. The logic of the map is this: screen use is not just “duration”, it is understood through the relationship between time–emotion–need–result. In the tool, the person fills in the following fields: the three time periods during the day when he or she uses the screen the most, the dominant emotion at that moment (boredom, anxiety, anger, loneliness, fatigue), what the screen provides (relaxation, escape, acceptance, success, fun), and what happens afterwards (regret, relief, more slipping, sleep disruption, etc.). This map makes the target of the intervention specific to the individual. For example, if the screen increases during moments of “boredom,” coping with boredom and meaningful activity planning come to the fore. If the screen increases during moments of “anxiety”, anxiety regulation and thought–emotion studies come to the fore.

### *6.8.2. Digital Contract*

The digital contract includes rules that are determined together in calm times, not in times of conflict. The contract includes the following headings: At what hours is the screen free and at what hours is it limited? What is the screen limit before bedtime? What day/time is shared family/team time (screen-free)? What will be done if there is a violation (utilizing the logic of “repair” and “compensation” rather than punishment)? What boundaries does the parent/team leader also set? The power of the contract is that it increases the perception of fairness and predictability. When the rules are unclear, conflict increases; when the rules are clear, conflict becomes manageable.

### *6.8.3. “If-Then” Plan*

Relapse in digital addiction often occurs with certain triggers. For this reason, the sentences “If ..., then I will ...” are made with the client, such as the following: “If I reach for the screen at 11.00 at night, then I will put the phone in the charging station.” “If I’m bored, then I’ll take a 10-min walk.” “If I feel lonely, then I will text/go out with person X.” This plan helps the person break the “auto-pilot” behavior.

## *6.9. Interagency Case Management: Networking in Digital Addiction*

While digital addiction can, in some cases, be resolved only at the school/home level, in other cases coordination with health services, psychiatry, psychological counseling, and child protection mechanisms is required. The social worker manages both the ethical and practical sides of this coordination. The first step in case management is to determine the risk level. Digital addiction alone can be risky, but the level of risk is particularly elevated in the following situations: major depressive symptoms, thoughts of self-harm, intense trauma reactions associated with digital bullying, risks of online blackmail/abuse, serious risk of school dropout or job loss, and increased digital escape combined with domestic violence/neglect. In such cases, the social worker focuses on the principle of “security”. The response plan is not only

to set a screen limit, but also to ensure security, activate the support system, and, if necessary, coordinate with official institutions. The main sensitivity here is to protect the client's privacy and support him without pushing him into accusatory ground.

#### *6.10. Responding to Crisis Situations: Social Work Flow in Digital Risk Incidents*

Digital addiction sometimes becomes apparent with a “crisis event”—exposure at school, online threat, bullying, invasion of privacy, severe conflict, panic attack, risk of self-harm, etc. Social work intervention at the time of crisis has the goal of stabilization before long-term therapy goals. The first principle in crisis intervention is not to underestimate the impact of the event being digital. Digital events are sometimes taken for granted, with the thought that they just happened on the Internet. However, especially in adolescents, digital privacy violations can create intense feelings of shame and helplessness, and these feelings can increase the risk of school avoidance, withdrawal, aggression, or self-harm. Therefore, in times of crisis, the social worker works on safety, emotional regulation, and clarifying concrete steps. Crisis flow can be carried out in practice with the following steps: Security is evaluated. Is there an immediate threat to physical safety or a risk of self-harm? The emotion is stabilized via short breathing/grounding techniques, safe adult support, and not leaving the individual alone. Evidence and privacy protection are provided. Wrong moves made in panic (deleting immediately, responding aggressively) can increase the risk. Proper recording and secure reporting steps are explained. Family and institution information is provided. Appropriate information is given according to the client's age and risk level. If necessary, coordination is established with psychological counseling, health services, legal support, and child protection mechanisms. The first 72 h to 2 weeks after the crisis may be critical; follow-up is done at short intervals. This flow emphasizes that Social work does “people management”, not “event management”. The most important thing in a crisis is that the client does not feel alone and helpless.

#### *6.11. Community-Based Intervention Scenarios: Practical Examples*

Community-based intervention scenarios can help to better understand what can be done in digital addiction. Practical examples show how community-based intervention can be expanded within the school/neighborhood/institutional context.

Scenario 1: “No Off-Screen Life in the Neighborhood”—Leisure Poverty and Adolescent Gaming Addiction. There are limited safe areas in the neighborhood where young people can spend time. There are no sports fields, courses are paid, and families are under economic stress. Adolescents turn to Internet cafes after school or to online games at home. School absences have increased, and nighttime insomnia is common. In this case, the problem is not just individual gaming behavior but the impoverishment of the community's “leisure infrastructure”. Digital gaming has become the only accessible space that offers young people both entertainment and social connection. What should the intervention be in this case? Motivational interviews + usage maps + sleep pattern plans can be made with at-risk students. Workshops centered on setting boundaries, conflict reduction, and the digital contract can be held with families. Negotiations can be made with the municipality, and activities such as free sports/art activities 2 days a week, opening the school hall for club work in the evenings, and a joint “screen-free activity” program with youth centers can be organized. “Digital Well-Being Week”, role model speeches, sports tournaments, and volunteering projects can be implemented in the neighborhood.

As young people's access to non-screen alternatives increases, digital use is no longer the "only option." School absenteeism and nighttime insomnia decrease, and family conflict decreases.

Scenario 2: "Class Group Becoming Poisoned"—Digital Bullying and School Climate. Ostracism and ridicule are common in classroom WhatsApp groups and similar chat groups. Some students humiliate people by spreading screenshots of messages. Victimized students do not want to come to school and are alone during recess. What should the intervention be in this case? The safety and psychological stabilization of the victim can be ensured through a safe adult contact point. Restorative class meetings (responsibility, not blame) and activities that transform the audience role can be organized. The situation can be evaluated through the school's reporting line, group rules, and digital citizenship lessons. Separate meetings should be held with the victim and the bully, and support and boundary studies can be carried out at home. Periodic follow-up for 2 weeks–1 month provides early warnings of the risk of re-bullying. This prevents bullying from becoming a "hidden norm". Rather than remaining passive, followers turn to reporting and support behavior.

Scenario 3: "Enslavement to Corporate Messaging"—Digital Workaholism in the Workplace. In corporate culture, texting at night is normal. Employees are constantly online to avoid falling behind. Burnout increases, and intentions to quit increase. What should the intervention be in this case? Digital workaholism can be fought with activities such as employee support sessions, plans to set limits, sleep hygiene, texting hour protocols, emergency definitions, meeting reductions, draft of a "Digital well-being policy", training for managers, and emphasis on "output quality" instead of "accessibility" in performance criteria. It is important to evaluate burnout indicators and satisfaction every 3 months to monitor the problem. As organizational boundaries become clear, employees can disconnect without feeling "guilt." Productivity and job satisfaction increase.

#### *6.12. Relapse Prevention: Managing Relapse in Digital Addiction*

Relapse in digital addiction is often interpreted as a "lack of will". However, relapse is a natural part of behavioral change processes. Social work treats relapse not as a failure but as feedback where the plan needs to be updated. The most common cause of relapse is that triggers are not well identified and alternatives are weak. Three basic strategies are used in relapse prevention. The first is the trigger map. The client must come to know which events increase use—loneliness, stress, conflict, feelings of failure, boredom, insomnia, etc. The second is "if-then" plans, where an alternative mini-behavior is substituted for the automatic on-screen behavior when the trigger arrives. Third is the social support line. At least two people that the client can reach in cases of crisis are determined, and the way in which to communicate with these people is concretized. In relapse prevention, "high risk times" are also identified. For example, exam periods, the beginnings of holidays, and night hours may be high-risk periods for adolescents. In adults, intense project periods, performance evaluation weeks, and periods of family conflict can be risky. At these times, the goal is reduced, and the goal of "damage reduction" is adopted instead of "complete perfect order". Harm reduction demonstrates the pragmatic power of Social work: Even if it is not possible for the client to quit completely, critical areas such as preserving sleep, preserving learning, and preserving relationships are prioritized.

### *6.13. Measuring Intervention Effectiveness: A Monitoring and Evaluation Framework*

In Social work, measurement is not done to control the client, but to see whether the process is working and to update the plan. Tracking indicators can be considered at three levels: behavior indicators—night screen time, notification checking frequency, screen windows, and time to fall asleep; functioning indicators—school grades/work performance, absenteeism, error rate, and relationship satisfaction; and well-being indicators—stress levels, mood, self-worth, and feelings of loneliness. Evaluation can be done at short intervals (2 weeks, 1 month, 3 months). The first 4–6 weeks in particular are the most fragile period of change; small gains should be made visible during this period because visible gains increase motivation. As motivation grows, behavioral change becomes more sustainable.

### *6.14. Ethical Dimension: Privacy and Power Relations in Digital Intervention*

Ethics in digital addiction intervention are more sensitive for two reasons. First, digital behavior often extends into one's private sphere. If the social worker takes a demanding approach such as "show me your phone", trust from the client is broken. Second, the need to act quickly when risk events (bullying, doxxing, blackmail) occur in the digital environment can challenge the principle of privacy. Therefore, Social work carefully balances both protection and privacy. The main principles of ethical intervention are consent and information (the client should know what information will be shared with whom), minimum necessary information (if sharing is necessary, maximum protection with the least data), and non-stigmatization (need-oriented language instead of dependent, problematic problem labels), as well as power awareness (the adult authority should not put pressure, especially when working with adolescents).

### *6.15. Intervention: A Process Design*

When we examine Social work interventions with digital addiction as a line extending from micro to macro, motivation and self-regulation in individual interviews, peer support and norm transformation in group studies, and alternative construction and ecosystem regulation in community-based interventions come to the fore. Digital addiction is a behavior that often fills a gap in a person's life; Social work's task is to fill this gap with resources, not with a "ban". Permanent change in digital addiction is possible not only by reducing screen time but also by strengthening one's relationships, redesigning one's life, and making one's environment supportive. For this reason, Social work reads digital addiction not as "the individual's fault" but as an area where "individual-environment harmony is disrupted" and plans for the intervention to re-establish this harmony.

## 7. Social Policy and Digital Health

### 7.1. *Why Digital Addiction Is a Social Policy Issue*

While digitalization creates opportunities that increase health and well-being, it also produces new areas of vulnerability. On the one hand, digital tools facilitate access to psychosocial support services, contribute to health literacy, and make social ties sustainable. On the other hand, the norm of “constant connectedness”, attention economy, algorithmic manipulation, and forms of online violence create a risk architecture that strains mental health, especially for children and young people, shakes the family and school order, and increases burnout in business life. At this point, the concept of “digital health” is not limited to the use of technology in health but is also related to whether the individual has safe, rights-based, and well-being-supporting conditions in the digital environment. In other words, digital health is a “living conditions” topic shaped by social and institutional regulations, beyond individual habits.

Digital addiction and related problems (problematic gaming, loss of control in social media use, nomophobia, FoMO, digital bullying, privacy violation, risks of online sexual exploitation, the impact of disinformation on mental health) are often glossed over with individualizing explanations such as a “family discipline problem” or a “young person’s willpower problem”. However, the social policy perspective reminds us that risk does not only arise within the individual; it grows where there are no rules, where protective mechanisms do not work, where access is unequal, and where the organization of school and work conflicts with the rhythm of the person. Therefore, the policy debate in the field of digital addiction and digital harms must carry two axes simultaneously, strengthening the individual/family and the responsibility of platforms, institutions, and the public. Legislation and policy tools regarding digital addiction should be addressed not with a “punishment” lens, but via a protection–prevention–empowerment–rights-based approach. This is because, especially when it comes to children, the main obligation of the state and institutions is not to “keep the child away from digital”, but to establish systems that will ensure protection of the child’s rights, safety, and well-being in the digital environment. This framework is also clearly emphasized in international documents; The General Comment of the United Nations Committee on the Rights of the Child regarding children’s rights in the digital environment explains in detail the obligations of states to respect, protect, and enforce children’s rights in the digital environment.

### 7.2. *Translating Digital Addiction into Policy Language: Diagnosis, Risk, and Social Responsibility*

Digital addiction is not a “uniform” phenomenon; it appears in different forms in different age groups and often coexists with other vulnerabilities. Therefore, when discussing legislation, the medical/psychiatric definition of the word “addiction” should not be confused with the social dimension of problematic use. For example, in cases where gaming behavior reaches the level of a clinical disorder, the diagnosis/treatment framework of the health system comes into play. The inclusion of “Gaming Disorder” in the World Health Organization’s ICD-11 classification creates a common reference ground for diagnosis and monitoring in the health systems of countries. However, in a much larger area, there are patterns of “problem digital use” that do not reach the clinical threshold but reduce school performance, disrupt

sleep patterns, increase family conflict, and reduce productivity at work. Social policy deals directly with this second area, because here it is not just about the treatment of the individual but the social reduction in risk.

When translated into policy language, digital addiction and digital harms can be thought of as content risks (harmful content, age-inappropriate content, pornography, violence, content that leads to suicide), communication risks (digital bullying, hate speech, harassment, blackmail, grooming), and design/operation risks (infinite scrolling, notification addiction, loot boxes, micro-payments, algorithmic addiction loops, manipulative interfaces). The legislation of many countries has focused on content and communication risks for a long time, and, in recent years, regulations addressing design/operation risks and “systemic risk management” obligations of platforms have been strengthened. The European Union’s Digital Services Act (DSA) approach clearly frames the need for platforms to ensure high levels of privacy, security, and safety, especially in the context of children’s safety.

The most critical tension in digital health policies is the freedom–protection balance. An overly protective and prohibitive approach may limit the right of children and young people to exist in the digital world and their learning and participation opportunities, and may also increase secret use and escape to uncontrolled areas. Excessive freedom, on the other hand, can make children vulnerable subjects of the attention economy, as it does not limit the commercial logic of the platforms. The rights-based approach establishes a middle ground here. Children’s right to access digital media is considered together with age-appropriate design, protection of privacy, secure reporting mechanisms, and effective supervision. This approach is supported by the Council of Europe’s children’s rights guides, with the emphasis that digital transformation should be managed based on human rights.

### *7.3. How Do States Combat Digital Addiction and Digital Harms?*

States and institutions often do not use a single tool to combat digital addiction and digital harm because the risk is multi-layered. Effective policy design requires a set of tools that talk to each other—legislation and enforcement, regulatory guidance and standards, education policies and curricula, the public health approach and screening programs, Social work/psychosocial support infrastructure, responsibility sharing with platforms, and data and research infrastructure layers. The legislation and sanctions aspect is mostly based on obligations such as protection of children, privacy, removal of content, limiting access to harmful content, risk assessment of platforms, and establishment of safe reporting channels. In addition, regulatory guidance and standards concretize how the law will be implemented—for example, via age verification approaches to protecting children, strengthening privacy as a default setting, limiting ad targeting, etc. The guidelines published by the European Commission on the protection of children within the scope of the DSA respond to this need for standardization. In the educational policies and curriculum dimension, skills such as digital citizenship, media literacy, privacy, cyberbullying, digital well-being, and attention management are embedded in course contents and school climate. UNESCO’s guidelines for citizenship education in the digital age recommend that education systems consider human rights and security dimensions together to deal with digital risks. At this point, education is not just “transferring information”; it means reorganizing the daily practices of the school (telephone policy, reporting mechanisms, teacher training, family cooperation). The public health approach,

on the other hand, makes visible the distribution of risk, inequalities, vulnerable groups, and early intervention windows, without restricting digital addiction to a narrow question such as the percent that are addicted. OECD policy frameworks on children's well-being in the digital age emphasize the need for governments to provide multi-stakeholder and evidence-based regulation that does not burden parents. In this approach, Social work plays a critical role through screening and referral, family support programs, school-based interventions, and the construction of community-based alternative spaces.

Finally, data and research infrastructure are the backbone of this entire policy set because, in the field of digital risk, misinformation spreads quickly, overgeneralizations for every screen are harmful, and negligent approaches such as "nothing will happen" reduce the quality of the policy. Evidence-based policy requires ethical and secure monitoring of data such as screening data, bullying reports, school absences, mental health indicators, and platforms' transparency reports.

#### *7.4. Digital Addiction from Legislative and Policy Framework in Turkey*

In Turkey, "digital addiction" is handled at the intersection of various legislative areas, rather than being an area directly regulated by a single law. This situation has two consequences in practice. First, while there are strong legal bases in some dimensions of risks (for example, regulations on the protection of personal data or online content), more limited and more indirect tools are in effect in the "design/reward mechanism" dimension of digital addiction. Second, the burden of implementation often falls on schools, families, and local agencies, making Social work's institutional and advocacy role all the more important.

Protection of personal data in Turkey, Personal Data Protection Law No. 6698 (KVKK), is based on basic principles such as processing of personal data, explicit consent, data minimization, limitation of purpose, security measures, and deletion/destruction, and it covers both public- and private-sector data-processing activities (Mevzuat Bilgi Sistemi, 2026a). Considering the critical importance of KVKK in the context of digital addiction, it can be seen that a significant part of the risks that children and young people are exposed to in the digital environment are amplified by the collection of their data, profiling, exposure to targeted advertisements, and violation of their privacy. For the social worker, this is not just a "legal text", but a practical ethical field ranging from digital guidance practices carried out in schools to online counseling platforms and from the storage of student data to evidence management in bullying cases. In short, KVKK is one of the local pillars of the "privacy and trust" digital health policy.

The basic text for the regulation of publications on the Internet and the fight against crimes is law No. 5651. This law regulates obligations and intervention mechanisms regarding Internet broadcasts through concepts such as the content provider, hosting provider, access provider, warning method, and access blocking. In terms of digital addiction, 5651 does not directly target "addictive" behavior, but it is an important tool in risk areas where digital addiction is frequently present (harmful content, privacy violation, dissemination of bullying content, access to criminal content). In a serious case, such as unauthorized sharing of a child's intimate images, the school or family may need not only psychosocial support but also rapid protection steps such as content removal and access blocking. At this point, the social worker acts as a safe bridge that protects the family and the school from making the wrong move

in panic, providing correct guidance and inter-institutional coordination. In Turkey, 5651's obligations regarding platforms have generated robust content moderation discussions in recent years, and the relationship of this field with digital health can be established through the protection of children from harmful content and the strengthening of a rapid intervention capacity. The basic policy question here is as follows: How will the balance between "rapid intervention" and "protection of rights and freedoms" be established? Social work advocacy contributes to establishing this balance based on the best interests of children and rights-based principles.

In the field of child protection, No. 5395, The Child Protection Law, regulates the procedures and principles of protective-supportive measures for children who need protection or are pushed into crime (Mevzuat Bilgi Sistemi, 2026b). Digital addiction alone does not automatically place the child in the category of a "child in need of protection", but, with digital risk events (e.g., online sexual abuse, blackmail, severe bullying, risk of school dropout, domestic neglect/violence), the child's need for protection may become even more evident (Mevzuat Bilgi Sistemi, 2026c). In this case, the social worker establishes coordination between the school, family, guidance service, law enforcement/justice, and health units with case management based on the best interests of the child. The quality of this coordination allows the child not only to recover from the incident but also to regain a sense of trust, return to school, repair social ties, and learn to act more safely in the digital environment.

Institutional policies and circulars play an important role in combating digital risks in the school environment in Turkey. In the circular of the Ministry of National Education for the 2024–2025 academic year, it was stated that "the practice of preventing students from having mobile phones in the classroom, which was initiated the previous year, will continue" and that measures would be taken to prevent the disruptive use of phones in school. Such regulations are meaningful in terms of protecting the attention and learning environment in a school setting, but from the perspective of Social work, they are not sufficient on their own because not having a phone in the classroom does not automatically solve a student's nightly sleep, social media comparison, gaming loop, or bullying trauma. So, if the policy remains at the ban level, it can push the problem into the home and into invisible areas. Therefore, school policy should be designed together with digital citizenship education, reporting mechanisms, family collaboration, and school Social work interventions. The most effective approach is to provide a holistic school model that treats the phone not as a forbidden object but as an area of behavior that needs to be regulated.

### *7.5. World Trends: Digital Addiction, Online Security, and Platform Responsibility*

The six jurisdictions discussed in this section, namely Turkey, the European Union, the United Kingdom, Australia, the United States, and China, were selected because they provide accessible and policy-relevant examples of contemporary responses to digital harms. Accordingly, the comparison is intended as an illustrative and practice-oriented overview rather than as a systematically derived comparative sample.

#### **7.5.1. Health Systems: Gaming Disorder and Diagnostic Frameworks**

The World Health Organization includes gaming disorder within the scope of ICD-11. The fact that it is discussed under the title of "disorders due to addictive

behaviors” has created a common terminology for diagnosis and monitoring in the health systems of countries (World Health Organization, 2019). The meaning of this development in terms of social policy is that “problem play” is no longer just a parent–teacher complaint but also an area that brings to the agenda the capacity and access responsibility of the health system when the clinical threshold is exceeded. However, the point to be considered here from a policy perspective is that the medical framework will not be sufficient to explain all digital risks. Because a significant portion of online harm for children and young people are common risk areas that do not reach the threshold of clinical diagnosis but still impair quality of life, education, Social work, and platform regulations are pivotal in these areas.

#### 7.5.2. European Union: DSA and Child Protection

The European Union’s Digital Services Act (DSA) represents an approach that expands responsibility from the line of individual content removal to the line of systemic risk management (ADF International, 2026). Articles of the DSA, especially on the protection of children, emphasize that online platforms that children can use must provide a high level of privacy, security, and safety for young users. The Commission’s publication of guidance on the protection of children in 2025 shows that the DSA is moving from paper obligations to practical standards. The critical point here for Social work is this: platforms establishing safer design and stronger reporting mechanisms for children increase the impact of school and family interventions because, while Social work teaches the child to protect himself, the responsibility remains one-sided if the platform does not change the risky design. DSA-type regulations attempt to distribute responsibility more fairly.

#### 7.5.3. United Kingdom: Online Safety Act and “Duties of Service Providers”

The Online Safety Act 2023 in the UK was positioned as a new framework that envisages comprehensive duties regarding online security for social media companies and search services, and places responsibility on platforms for the online protection of adults and children (UK Legislation, 2026). Such frameworks aim to ensure that platforms assume more proactive liability for serious risks such as digital bullying, sexual blackmail, and self-harm content. For Social work, this could mean that experts working in the field have clearer recourse for case resolution: standard expectations are established in areas such as victim protection, removal of content, reporting processes, age-appropriate security measures, etc.

#### 7.5.4. Australia: eSafety Model, Online Harms, and Age Regulations

Australia’s Online Safety Act 2021 scheme aims to make platforms more accountable, including for children’s online safety, by providing strong powers and expectations for service providers to tackle online harm through an institutional structure such as the eSafety Commissioner (Commonwealth Consolidated Acts, 2021). In recent years, it has been observed that the age/access debates regarding the online protection of children in Australia have become harsher, and in examples reflected in the media, a regulatory approach to ban the opening of social media accounts under the age of 16 has been discussed. Such age-based solutions are evaluated in two ways from Social work’s perspective: on the one hand, they aim to protect children from risky content and interactions; on the other hand, they may pose

the risk of separating vulnerable groups (lonely youth, LGBTQ+ youth, those with chronic diseases, those living in rural areas) from their support networks. Therefore, rights-based advocacy demands that the balance of protection and participation and support be observed when making age regulations.

#### 7.5.5. USA: Child Data, COPPA, and Updated Rules

The COPPA (Children's Online Privacy Protection Act) framework in the context of children's online privacy in the USA imposes parental consent and data processing obligations on service providers for services aimed at children under the age of 13 or in cases where data is known to be collected from children. The publication of amendments to the COPPA rule in the Federal Register in 2025 demonstrates the need to update child data regulations as online practices and technologies change (Texas Attorney General, 2026). For Social work, the key here is that the digital addiction debate is not just about screen time but is also about the collection of the child's data and the profiling of advertising and content recommendations that feed addiction cycles. Therefore, any regulation that strengthens children's privacy also indirectly supports digital well-being.

#### 7.5.6. China: Play-Time Limitation and Behavioral Regulation Approach

The regulations for minors in China, which restrict online game time, are referred to as one of the harshest examples of behavioral intervention in the world in the field of digital addiction, and the approach of limited game access on certain days and hours has created wide public debate (Xiao, 2021). This approach aims for quick results with a "restrict and reduce" mentality, but from the Social work perspective, the following questions become critical: What psychosocial need was the child's screen meeting? When there is a constraint, where and how will that need be met? If alternatives are not established, restrictions may push children into unregistered/unsupervised areas or increase family conflict. For this reason, Social work's advocacy line calls for community-based alternatives, family support, and school climate interventions in addition to behavioral restrictions.

### 7.6. *The Advocacy Role of the Social Worker: The Triangle of Rights, Protection, and Access in Digital Health*

In the field of digital addiction and digital harm, a social worker is not only a consultancy professional but also an actor who makes visible the gaps in the system and advocates for a more just order. This role should be read at three levels: micro advocacy (ensuring the individual has access to their rights), mezzo advocacy (changing policy and climate at the school/workplace/community level), and macro advocacy (providing an evidence-based contribution to legislation and public policy debates). Advocacy at the micro level is the concretization of the "right" in a case. For example, when a young person who is a victim of digital bullying starts to avoid school, the social worker defends the child's right to a safe education, prevents the school administration from belittling the events as "child's work", provides the necessary guidance, directs the family to the right channels in the content removal/reporting processes if necessary, and ensures that steps are taken to protect the child's privacy. This advocacy, as much as "protecting" the child, also considers the child's right to be a "subject"; that is, it is essential to take the child's opinion, not exclude him from

the process, and empower him. At the mezzo level, advocacy is the creation of digital health policies in institutions such as schools or workplaces. When the phone policy at school is limited to a ban, the social worker may suggest working groups to expand it, in addition to the following: digital citizenship education, a bullying reporting hotline, parent workshops, teacher training, risk screening, referral protocols, etc. If digital burnout is widespread in the workplace, the social worker may advocate clarifying the expectation of “after-hours availability,” intra-team communication protocols, and psychosocial support mechanisms. At this point, the “right to disconnect” discussions in Europe make the need for boundaries in the digitalization of working life clearly visible, and the European Parliament’s decision containing suggestions on this issue is an important example showing the direction of the policy agenda. Advocacy at the macro level is carried out to recognize digital risks as a “social problem”, allocate resources, and strengthen platform responsibility. The social worker cannot act alone here, but forms coalitions with academia, civil society, parent organizations, child rights structures, and regulatory bodies. Advocacy works not with slogans but with evidence, case narratives, cost analyses, and actionable policy recommendations. For example, the themes of increased school absences, sleep disturbance data, bullying reports, and psychological counseling applications can be powerful data that make visible the social cost of digital risks. As the OECD reports on children’s well-being in the digital age emphasize, the responsibility should not fall solely on parents, and the state should establish multi-stakeholder, evidence-based frameworks.

### *7.7. Advocacy Through Case Studies: How to Establish Policy on the Field?*

#### *7.7.1. Case Study 1: “There Is No Telephone at School, but the Problem Is Growing”*

In one high school, the practice of not having phones in the classroom is tightened in accordance with the circular. In the first weeks, classroom attention appears to increase, but soon absenteeism and disciplinary incidents arise. Some students engage in secret phone use during recess and in toilets, some spend uncontrolled after-school hours with screens, and a group of students do not want to come to school because of bullying that continues throughout the night in the class group. The school administration thinks that it has fulfilled its responsibility by enforcing the ban. The social worker advocates here, moving the policy from prohibition to well-being, recommending the establishment of a bullying reporting mechanism, digital citizenship work during classroom guidance hours, digital boundaries and sleep hygiene workshops with families, a group study program for at-risk students, and increasing off-screen activity areas through school–environment collaboration. In this example, advocacy does not mean rejecting the ban decision but tying that decision to a psychosocial intervention architecture.

#### *7.7.2. Case Study 2: “Video Disclosure and Blackmail”*

Private images of a student are shared without permission; the images spread rapidly, and the student is blackmailed. This is one of the most severe forms of digital harm and cannot be managed with guidance alone. The social worker manages the crisis on two lines—first, the child’s safety and psychological stabilization (trauma-sensitive support, not leaving him alone, safe space at school, crisis guidance to the family). The second involves content removal/reporting and guidance in legal processes. An expert who knows the correct recourse in the context of Internet

content regulations and child protection mechanisms protects the family from panic attacks and reduces the child's repeated victimization. This example shows that digital health cannot be protected without the combination of "legislation and psychosocial support".

### 7.7.3. Case Study 3: "The Workplace Digital Burnout Epidemic"

Employees in an organization feel obliged to respond to messages even after 10:00 in the evening. The error rate among employees increases over time, the employee turnover rate increases, and conflict within the team grows. Instead of blaming burnout on the individual, the social worker advocates for organizational regulation—a protocol that clarifies the "emergency" definition of after-hours communication, a workflow that reduces meeting load, digital well-being training for managers, and frameworks that protect employees' right to rest. All of these activities are examples of work that can be done to combat digital addiction, which keeps one's mind at work even after work and disrupts family life. Policy debates on the right to disconnect in Europe provide conceptual underpinnings for this advocacy.

### 7.8. Policy Recommendations: Rights-Based Digital Health Roadmap

It is possible to draw an adaptable roadmap framework in combating digital addiction. The aim here is not to propose a single magic law, but to propose an applicable policy set that makes the existing legislative basis (KVKK, child protection, education policies) more functional, strengthens the capacity of institutions, and makes platform responsibility visible. While KVKK provides the basic framework of privacy and data security, protection laws define intervention and liability mechanisms regarding online content, the child protection system enables the coordination of protective-supportive measures, and educational circulars shape the in-school order. When these pieces are connected to an integrated digital well-being strategy in the area of digital addiction and digital harms, a meaningful policy architecture emerges. This strategy could include strengthening school Social work, implementing digital citizenship and digital well-being curricula, standardizing family support programs, establishing school-based crisis protocols in cases of cyberbullying and privacy violations, and pushing platforms towards stronger transparency and protection standards in their design and advertising practices for children. The DSA approach in Europe provides a reference that can be discussed in other countries, as it sets forth the expectation of a "high level of security and privacy" for platforms that children can use. Similarly, the UN Committee's framework on the Rights of the Child in the digital environment provides strong rights-based language for digital health advocacy. The main purpose here should not only be to determine policy principles. It is important that the views advocated are applicable in the fight against digital addiction. Fancy sentences and plans that seem perfect in theory are of no use to society if they are not translated into practice. When determining policies, the current situation should be analyzed very well, and the needs of the changing social structure should be considered. Rapid changes between generations radically change the social structure, and this change indicates that the proposed solutions or the policies to be implemented lag behind. The Social work field should take this fact into account when evaluating the current table.

## 8. Technology-Integrated Social Work Practice: Challenges and Opportunities

### *8.1. The New Road Map Drawn by Digitalization Social Work*

Social work is a profession that has historically centered on the environment in which the individual lives and the impact of the environment on the individual. Digitalization has radically expanded the boundaries of this environment and charted another road map. School, work, family, and community relationships are no longer established only in physical spaces, but conflicts, exclusions, solidarities, forms of abuse, and help-seeking behaviors also develop within or under the influence of digital platforms. For this reason, technology, beyond being a tool used in Social work, has become a new social ecosystem in which intervention takes place. The social worker no longer only manages the security, confidentiality, and boundaries of face-to-face meetings, but also has to manage the security of the client at times when video calls are interrupted, the data traces of online platforms, the expectation and response times of messaging, the evidence and privacy dimensions of online bullying, the storage of digital records, and the unique power relations of the digital environment.

There is a need to deal with technology and Social work applications in depth through real situations encountered in the field, without restricting them to the dichotomy of “opportunities” and “risks”. Models of online therapy and digital counseling, client suitability, process management, relationship and bonding, crisis and risk management, internal standards, ethical dilemmas, boundary management, and data security should be treated as complementary parts. The basic assumption of the department is this: with technology, Social work can only become sustainable with a rights-based, trauma-sensitive, inequality-aware, and strong data security framework; otherwise, digital service may increase access but also produce new grievances.

### *8.2. Online Therapy and Digital Counseling: They Are Not the Same Thing, nor Do They Stay in the Same Place*

Help services provided in the digital environment are often generalized as “online therapy”, but there is a wider range of Social work applications, and the ethical, technical and clinical requirements of each form are different. Online therapy generally refers to the execution of structured psychotherapy methods in an online environment, while digital counseling includes carrying out components such as psychosocial assessment, empowerment, case management, access to rights, family interviews, social support plan, guidance, and monitoring, which are the unique areas of Social work, with digital tools. Whether creating a teenager’s safety plan after cyberbullying, a family’s plan to share the care burden, or regulating an adult’s digital burnout cycle, a social worker can provide high-impact digital counseling without entering the boundaries of therapy. The practical importance of this distinction should be well understood. If the scope of the service is not clear, both the client’s expectations and the area of professional responsibility become blurred and ethical risks grow.

Digital service models can be basically divided into synchronous (simultaneous) and asynchronous (non-synchronous) formats. Synchronous service proceeds in the

form of video call, voice call, or instant correspondence and is closer to the rhythm of face-to-face meeting, the client and the specialist are connected at the same time, the flow of emotions is managed simultaneously, and the intervention is shaped by instant feedback. In asynchronous service, the client leaves a message, fills out a diary, and sends a form, and the specialist responds within a certain period of time. The asynchronous model can increase access, especially for clients with busy life rhythms, but requires sharper protocols in terms of “response expectation” and “emergency management.” Hybrid (mixed) models are also becoming increasingly common: “Layered” designs, such as two video calls per month + weekly text message check-in + digital self-monitoring diary + crisis line referral when necessary, are well suited to the case management logic of Social work, because the intensity of support can be adjusted according to the client’s needs without being dependent on a single channel. Another form of digital counseling is remote case management. In this model, the social worker coordinates the client’s access processes to institutions such as school/work/health/law with digital tools, keeps track of appointments and applications, manages document preparation and guidance, and activates the client’s social support network. Especially in rural areas, in cases of disability, in families with heavy care burdens, or in situations of high mobility such as immigration, digital case management can reduce physical barriers to accessing services. However, this access advantage is reversed if data security and privacy management are poor, as sensitive information produces a broader digital footprint.

### *8.3. Process Management in Digital Service*

One of the most common mistakes in digital service is the assumption that face-to-face practice can be exactly transferred online. However, the digital environment requires preconditions in terms of the client’s security, privacy, and the impact of the intervention. Therefore, the process begins with eligibility screening before the interview. Eligibility screening is not done to eliminate the client but to provide the right service at the right level. For example, if a client who is at risk of domestic violence lives in the same house with the perpetrator and their conversations can be heard during the interview, digital interviewing may put the client in further danger. Or if a client experiencing severe psychotic symptoms is in a period of intense crisis, digital alone may not be sufficient, and closer coordination with face-to-face/health care system may be required. For this reason, the social worker clarifies the following basic questions before starting the digital interview: Is the client safe in his environment? Can the confidentiality of the conversation be ensured? Are there local support mechanisms that the client can reach in case of emergency? Is the client able to continue the service in terms of access and use of technology? Launching a digital service without answering these questions could compromise security for access.

After eligibility screening, the most critical step of the digital service is the adaptation of informed consent to the digital environment. While verbal explanation is often considered sufficient in face-to-face consent, the scope of consent is expanded in digital service. The name and nature of the platform used, data flow and possible risks, whether the conversation will be recorded, whether the client can take a screenshot or not, response time in the messaging channel, the route to be followed in case of emergency, the location of the client (for intervention in case of crisis), the possibility of third parties being involved in the conversation, and the precautions to

be taken to protect the privacy of the client (such as the use of headphones, closed room, screen lock) should be discussed clearly and understandably. Consent is not a one-time signature but a trust agreement that is updated throughout the process because risks can change in the digital environment; for example, the client changes home, changes device, or starts a new relationship, family dynamics change, and school/work conditions change. Every change requires re-evaluation of privacy.

The third step in digital process management is to clarify communication boundaries. In a face-to-face meeting, the client usually meets with the specialist at certain hours, whereas in a digital environment, the client may assume that the specialist is accessible at any time. This assumption leads to both the client's development of a dependent bond and the specialist's burnout. That is why the social worker re-establishes the framework of the service. At what hours can contact be made? What is the average response time to messages? Should you text or call the crisis line in an emergency? If these boundaries are not clear, digital counseling becomes a constant open line, which is both ethically and clinically unsustainable.

#### *8.4. Building Relationships in the Digital Environment*

The foundation of the Social work relationship is trust and connection. It is possible to establish trust in the digital environment, but the language of connection changes. In face-to-face meetings, body language, silence, eye contact, the atmosphere of the room, sitting style, micro facial expressions, and the container effect of the common space are the invisible carriers of the relationship. In the digital environment, some of these carriers are weakened; camera angle, Internet delays, sound interruption, image freezing, and other notifications appearing on the screen at the same time interrupt the flow of emotion. This division can trigger feelings of detachment, especially in clients with a history of trauma. For this reason, the expert in digital relationships conducts relationship building in a clearer and more descriptive way: "The connection is lost now, are you worried when I cannot hear you?"; "What you are saying is a heavy subject, it may be difficult to convey it on the screen, let's take a breath for a minute if you want." Such sentences make the limitations of the digital environment visible and do not isolate the client's emotions and help control the emotional division.

One of the elements that strengthens the alliance in the digital environment is the ability to use the client's environment as "therapeutic material". A corner of the client's house, his desk, the light of his room, or an object standing next to him carry clues about the client's life world. The social worker approaches this not with a prying curiosity, but with an empowering curiosity: "What does this corner mean to you?", "Where do you feel the safest?" Thus, digital interview touches the client's life more concretely. However, this contact should be balanced with sensitivity to privacy; if the client does not want it, the camera can remain off, only voice calls can be made, or the client can use a virtual background. The basic principle here is that the client has control, because control is the basis of trust in the digital environment.

Another strategy that strengthens relationships in the digital environment is micro-rituals. Rituals that occur naturally in a face-to-face meeting (welcoming, sitting down, leaving the room) are lost in the digital environment. This loss may cause the conversation to start and end "hard". That is why it is valuable to design a short opening and closing ritual in digital meetings: "Wait a minute before we start the meeting today, what was your week like?", "What are we leaving you with today

before we close the meeting?” These micro-rituals place the digital conversation in a safer framework and make it easier for the client to convey his/her emotions.

### *8.5. Opportunities: Real Doors Opened by Technology*

The most fundamental opportunity that technology provides in Social work is access, but access is not just geographical. Digital counseling can be the first point of contact for many people who cannot access face-to-face services due to physical disability, rural residence, care responsibilities, chronic illness, time constraints, or concerns about stigma. Stigma, especially in mental health and family problems, delays help-seeking behavior, and the digital environment can enable the client to receive help with fewer barriers. This strengthens early intervention; support begins before the problem escalates, and the risk of crisis can be reduced.

The second opportunity is continuity. Face-to-face service may be interrupted in life events such as moving, job change, and school change, while digital service reduces the cost of “starting over” for the client by maintaining continuity. This continuity is especially important in post-traumatic support, chronic stress, care burden, addiction cycles, and long-term family problems. When the client does not have to explain it all over again, the healing process becomes less tiring.

The third opportunity is the integration of digital tools that support monitoring and self-regulation. Social work aims to reorganize the client’s life, and digital tools can make this regulation visible, such as a sleep diary, emotion tracking, screen usage map, crisis moment plan, small goal lists, check-in messages, etc. However, these tools should not make the client a monitored person; they should be used with a design that strengthens the client and increases the feeling of control. Otherwise, digital tools reproduce themes of dependency and control.

The fourth opportunity is to strengthen interdisciplinary coordination. Case meetings, school–family–expert meetings, and short inter-institutional coordination periods can be planned more quickly in the digital environment. This speed can make a significant difference, especially in time-sensitive cases such as child protection, cyberbullying crises, acute family conflicts, and workplace burnout.

### *8.6. Risks: Layers of “Unseen Danger” in Digital Social Work*

The risks of digital Social work are often reduced to the rubric of “privacy,” but the layers of risk are broader. The first layer is technical risk. Layers such as the encryption level of the platform, data retention policy, third-party access, security of the device, reliability of the Wi-Fi network, cloud backups, possibility of taking screenshots, and malware risk are among the important technical risks. The second layer is environmental risk. Environmental factors include hearing conversations in the place where the client is having an interview, family members entering the room, the perpetrator watching the client, and the client speaking under pressure. The third layer is relational risk. Situations such as the digital environment blurring the boundaries, the client thinking that he can access the expert 24/7, developing a dependent bond, or the expert–client relationship shifting to the “follow-like” level on social media may cause errors when evaluating emotions. The fourth layer is the clinical/psychosocial risk. Risks such as limited remote intervention in severe crises, dissociative ruptures becoming difficult to notice, emotional intensity not “fitting” on the screen, misunderstandings increasing, events such as digital bullying, and privacy violations negatively affecting the mental health of the client should not be

ignored. These layers of risk lead to the most critical ethical question in Social work: “Is it in the client’s best interest to continue this service digitally?” This question is not to be against technology but to use technology in the right place. In some cases, digital services may be the best option; in others, digital services can only be safe with face-to-face support and strong coordination with local services. The professional maturity of the social worker is an important distinguishing feature in being able to make this distinction. Professional maturity undoubtedly comes through experience and self-improvement. Therefore, finding the path that is better to choose and alternative solutions to achieve the best result, considering the benefit of the client, takes place over time.

### *8.7. Ethical Dilemmas: Boundaries, Power, and Privacy in the Digital Environment*

#### **8.7.1. Boundary Dilemmas: Is a “Friend Request” a Small Thing?**

In the digital age, clients can see the specialist’s social media presence and want to follow them, message them, and leave comments on their posts. This situation is not just annoying; it is an issue of power and boundaries in the relationship. When the client follows the specialist on social media, the specialist–client relationship may spill over into a public space, the client’s privacy is at risk, the specialist may unknowingly reveal personal details, and the client may develop fantasies and expectations in the relationship by watching the specialist’s life. For this reason, the digital social worker must determine a digital border policy from the beginning. Is it possible to add a client on social media? Which channel should be used to respond to the client’s message? What should be done if the client leaves a comment? How should boundaries be maintained if the client finds the specialist’s personal account? This policy is not presented to the client as a harsh barrier; on the contrary, it is explained as a framework established for the security and privacy of the client because setting digital boundaries is not about rejecting the client, but actually protecting the client.

#### **8.7.2. Recording Dilemmas: “Can I Record the Conversation?”**

In digital interviews, the client may sometimes want to record the conversation because he/she thinks he/she might forget it. Although this may seem like an innocent justification, the risk is great. The recording may be accidentally shared, the device may be hacked, it may be obtained by someone in the family, the client himself may try to harm the specialist by using the recording in a moment of anger, or the recording may endanger the privacy and security of the client. The issue of registration is therefore not just permission; it requires risk analysis. It may be safer to produce alternative solutions; a brief written summary and the client’s own notes—for example, a secure homework document—may be given at the end of the interview. Even if a recording is to be taken, the questions of where it will be stored, who will have access to it, when it will be deleted, and the scope of the client’s consent should be clearly written down.

#### **8.7.3. Asynchronous Response Dilemma: “How Fast Should I Spin?”**

In message counseling, the client can send a long message in an emotional moment and expect an immediate response. If the specialist does not respond immediately, the client may feel abandoned; if the specialist responds immediately, the relationship may turn into an instant support line. This dilemma is one of the most difficult

aspects of digital service, and the solution is to establish protocols from the beginning, clarifying response time, emergency separation, and crisis channel. Even technical solutions such as an automatic response can be used to regulate the client's emotion: "I received your message. If there is an urgent risk, call these lines. I call back at these hours." This does not mean leaving the client out in the cold and alone but ensuring that the client turns to the right resource in a crisis.

#### 8.7.4. Ethics with Children and Adolescents: The Balance of Parental Access and Privacy

One of the most complex ethical areas with adolescent clients is the balance between the parent's "right to know" and the adolescent's "right to privacy." The digital environment makes this balance even more difficult, because the parent can control the child's phone, read the messages, and listen to the conversation. While working with adolescents, the social worker chooses safe communication methods to protect privacy, plans for the adolescent to meet in a safe environment, and also clarifies the information and boundaries with the parent. The vital principle here is this: the adolescent's privacy is not "absolute"; if there is a security risk, information sharing may be necessary. However, sharing every post of the adolescent with the parent when there is no security risk undermines the adolescent's help-seeking behavior. Executing this principle in digital service requires both ethical and clinical skills.

#### 8.8. *Data Security: Not a "Technical Issue", Social Work's Duty to Protect*

Data security is often an area that experts shy away from as "IT work," but in Social work, data security is an integral part of client security. The information shared by the client may contain sensitive content such as trauma history, health information, domestic violence details, child protection cases, private image blackmail information, immigration status, and economic fragility. Leakage of this information causes real harm to the client. Therefore, data security is not only legal compliance but also the responsibility of professional ethics and protective intervention. To manage data security in digital Social work, it is useful to think of a "threat model". What types of data are there? Where is this data produced (video call, message, file, form, note)? Where is it stored (device, cloud, enterprise server)? Who is likely to have access (expert, supervisor, enterprise administrator, platform provider, family members, attacker)? In what ways can it be leaked (weak password, public Wi-Fi, lack of screen lock, sending files to the wrong person, phishing, device loss)? When these questions are answered, security measures cease to be abstract and become concrete.

The minimum security standard in digital Social work should consist of the following headings: a strong password and two-factor authentication, screen lock on devices and an up-to-date operating system, encrypted storage, communication channels that provide reliable and end-to-end encryption if possible, not keeping client data scattered on a personal device, secure connections in file sharing, regular backup and access control, data minimization (not collecting unnecessary data), keeping data for a limited time and safe destruction, privacy recommendations to the client (headset, closed room, screen history after the meeting), and an "incident response plan" to be followed in case of a possible data breach (who is notified, what is done, what records are taken, how to ensure the security of the client). The main goal here is not "perfect security" but a realistic and sustainable security culture.

The claim to perfection breaks down in the field because what is planned in theory may not work in practice, while culture reduces error and makes error manageable. Data security also relates to the ethics of record keeping. Even the metadata of conversations in the digital environment is sensitive; who is interviewed and when and how often can carry clues about the client's life. Therefore, institutions should clarify the access rights of digital records, define who can see which data and why, and prevent unnecessary access. The Social work professional should also review his or her own note-taking practice. If notes contain phrases that label the client and could cause harm in the future, security is not only at risk of leakage but also at risk in terms of content. Data security means both protecting data and producing data ethically.

### *8.9. Digital Evidence, Digital Bullying, and Privacy: Social Work's Fine Art of Balancing*

In cases such as cyberbullying, blackmail, exposure, and harassment, the client sometimes asks the social worker for support in collecting evidence. This area is the intersection of Social work's crisis management and data security. Gathering evidence may protect the client, but collecting it incorrectly may further victimize the client. For example, if the client deletes everything in panic, there may be difficulties in the reporting and legal process. If the client writes threats to the other party in anger, the process may be reversed. If the client shares evidence with his or her group of friends, the violation of privacy may escalate. The social worker therefore teaches the client "calm, limited and safe" evidence management, including taking screenshots safely, not sharing them, deciding with whom to share them, using in-platform reporting methods, acting in accordance with school/institutional protocols, and providing legal/institutional guidance if necessary. The client's emotions must also be managed during this process, because gathering evidence can often cause them to re-experience the trauma. The specialist progresses step by step, considering the psychological resilience of the client, and does not confront evidence with recovery, but carries it together.

### *8.10. Artificial Intelligence and Social Work: A New Area of Opportunity or a New Generator of Risk?*

Artificial intelligence (especially generative artificial intelligence) has become a rapidly emerging field in Social work. Facilities such as summarizing interview notes, drafting a case plan, producing psycho-educational material, service mapping, creating question sets for risk screening, and standardizing in-house documentation have been made possible thanks to artificial intelligence. Proper use of these tools can reduce the administrative burden of specialists and increase the "human time" allocated to the client. However, the use of artificial intelligence opens new layers in terms of data security and ethics. Risks such as transferring client data to third-party systems, the possibility of error/fabrication (hallucination) in the model's outputs, reproduction of cultural prejudices, creating a machine decision effect on the client, and unclear expert responsibility are directly related to the rights-based nature of Social work. For this reason, the use of artificial intelligence in Social work should be handled not with the logic of "convenience" but with the logic of "risk management and transparency". The most critical principle is that AI can be, at most, helpful, not a decision maker. The social worker does not implement the AI output as is; he sees it as a draft or suggestion, tests it in real conditions in the field, adapts it to the client's

context, and assumes responsibility. In addition, no content containing the client's data should be transferred to external systems before security and privacy standards are clarified. If institutions leave the use of artificial intelligence to individual initiatives, data security and ethical standards will be fragmented, so an "AI use protocol" is required at the institutional level; questions such as in which jobs it can be used, which data is never to be entered, how data is anonymized, how outputs are verified, how to provide transparency to the client, what to do when there is an error, etc., should be discussed, and a consensus should be reached.

#### *8.11. Enterprise Application: Infrastructure and Culture Dimension of Digital Social Work*

What makes technology and Social work sustainable is not just choosing a video application but establishing a corporate culture. If the organization does not have digital service standards, each specialist develops his own personal method, which creates inequality in service quality and magnifies risks. At a minimum, the following areas should be defined at the institutional level: Which services can be delivered digitally (eligibility criteria)? How should tools such as the informed consent template, crisis protocol (location verification, emergency contact, local service connections), data storage, access authorizations, security of supervision and case meetings, staff training (digital boundaries, ethical dilemmas, security), quality assurance indicators (attendance, drop rate, satisfaction, security incidents), incident response plan (data breach, platform outage, message/file to the wrong person) be used? What is the collective wisdom of the institution? How should we act? This system should be created, and events should be approached with a common institutional strategy instead of the personal initiatives of individuals. When the institution establishes this infrastructure, the social worker will not be alone; the service turns into a corporate standard, not a personal skill.

Institutions must also address the dimension of digital inequality at the policy level. Digital service can increase access, but digital service can create a new and different means of exclusion for people who do not have Internet, do not have a device, have a limited data package, are hearing/visually impaired, use a different language, and cannot provide privacy guarantees at home. Therefore, the digital service policy should also include a plan to reduce digital exclusion. Alternative solutions such as alternative channels (telephone, face-to-face), accessibility arrangements (subtitles, sign language, plain language), data package supports, secure meeting rooms in public areas, confidential areas within a school/institution, and referrals to local services can reduce digital exclusion. Digital service delivery can only be implemented and yield results with awareness of this inequality.

#### *8.12. Case Study 1: Breaking of Privacy in Online Counseling*

Kate, 32 years old, who is a mother of two children, makes an appointment for online counseling. During the first meeting, she often looks at the door while the camera is on and speaks in a low voice. As the conversation progresses, it becomes clear that there is someone else in the house, and Kate suddenly says, "let's talk later" and ends the conversation. The next day she texts: "My husband was listening yesterday." This case shows that privacy in digital consulting is a condition of life, not a technical one. Here, the social worker quickly reframes the process. Kate's safety becomes the first priority, a safe time and place for interviews are planned (e.g., when the children are at school, a safe area outside the home, brief check-in

by phone), Kate is taught “safe conversation codes” (a one-word signal if there is danger), local support mechanisms are determined in case of emergency, and Kate is notified of digital traces (message history, call logs). In this case, technology is not withdrawn; technology is redesigned with a security protocol. Otherwise, the digital service may make Kate more visible and vulnerable rather than empowering her. These factors should be taken into consideration, and plans should be updated to prevent the incident from evolving into another dimension of domestic violence.

#### *8.13. Case Study 2: Asynchronous Messaging with Adolescent—Expectation of Response and Risk of Dependent Attachment*

Andrew, 17, receives counseling over asynchronous messaging. He writes regularly in the first weeks, then starts sending long messages at 02:00 at night: “I’m so bad right now, answer me.” When the specialist responds in the morning, Andrew says, “So no one cares,” and writes angry messages. This case shows that in asynchronous service, when boundaries are not clearly established from the beginning, the relationship can quickly slide into crisis. The social worker re-contracts with Andrew, the response time to messages is clarified, and the channels to be used in case of urgent emotional crises are determined, Andrew’s “if-then” plan is prepared for night hours (breathing exercise, safe person search, short walk, crisis line), Andrew’s night triggers are evaluated (loneliness, family conflict, social media comparison), and a more structured support plan is established during daytime hours. In this way, the asynchronous channel becomes a tool that strengthens Andrew’s “wait–endure–regulate” skill; otherwise, the cycle of dependent bonding and abandonment may grow.

#### *8.14. Case Study 3: Platform Outage and Crisis—“Plan B”*

A client shows signs of panic during the interview, his breathing becomes rapid, and he says, “I can’t stand it.” At that moment, the Internet cuts out. The expert cannot reconnect. The client remains alone. This example illustrates the most critical technical–ethical truth of digital service. Disruption is not a possibility but an inevitable occurrence, and without preparation for it, crisis management is left to chance. Therefore, in digital Social work, a “Plan B” should be determined in advance with each client, addressing the following questions: Who calls whom if the connection is lost? Which number is to be used? Is the client’s address/location information up to date? Who is the client’s emergency contact person? Is there a short grounding list that the client can apply in cases of crisis? Once these questions are clear, an outage becomes a manageable event rather than a disaster.

#### *8.15. Case Study 4: Evidence in Cyberbullying—Not Magnifying the Trauma While Collecting “Evidence”*

Adel, 15 years old, was exposed and ridiculed in her class group, with messages pouring in throughout the night. Adel panicked and deleted all the messages, and then cried, saying, “I wish I hadn’t deleted them.” Here, the social worker does two things at once: he stabilizes Adel’s sense of shame and helplessness and establishes a protective road map for the future. Instead of exaggerating Adel’s “I wish”, he moves on to the question, “What can we do now?” Safe and limited steps are determined for evidence management. Re-triggering of the trauma by repeatedly revisiting the

distressing content is prevented, the school's reporting and restorative intervention protocol is put into action, and a language of support is used instead of blame in the meeting with the family. Digital consultancy is not just "talking" here; it is the work of establishing a post-crisis system.

#### *8.16. Golden Principles of Social Work with Technology*

With technology, Social work, when the right framework is established, increases access, strengthens continuity, and positively supports the client's capacity to reorganize their life, making a positive contribution. However, if the digital service is carried out with the motivation of convenience, without compliance screening, without setting boundaries, and with weak data security, it may endanger the privacy of the client, magnify crises, deepen inequalities, and create professional ethical problems. Therefore, the backbone of this section is based on three golden principles: security and privacy come first, boundaries protect the relationship, and technology does not replace the human relationship but strengthens it if designed correctly.

## 9. Conclusions

### *9.1. Common Patterns of Psychosocial Fractures in a Digitalizing Society*

Throughout this book, we have discussed how digitalization is not only a “technological transformation” but also a means of social restructuring that radically changes the way people establish relationships, the construction of identity, the order of roles within the family, the climate of the school, the boundaries of working life, and the field of intervention of Social work. While the speed, access, and connectivity offered by the digital society can turn into opportunities for some individuals and groups, they can also produce new forms of vulnerability for others. These vulnerabilities become visible in topics such as digital addiction and problematic usage patterns, digital bullying, privacy violation, algorithmic manipulation, social comparison pressure, information pollution, constant accessibility in working life, and digital burnout.

The book covered how Social work is positioned in the digitalizing world in the context of school, family, work and society in Chapter 1; definitions, types, and indicators of digital addiction in Chapter 2, as well as psychosocial factors and risk groups; the effects of digital addiction on family life in Chapter 3; digital addiction in educational environments, game/social media patterns and digital bullying cycles in adolescence in Chapter 4; and digital burnout in adulthood in Chapter 5. We discussed the lines of nomophobia, FoMO and digital workaholism, individual-, group-, and community-based models of Social work interventions in Chapter 6; the social policy and digital health framework in Chapter 7; and the risks and opportunities, ethical dilemmas, and data security dimensions of Social work with technology in Chapter 8. All these lines should be connected in a common map. The psychosocial breaks of the digital age cannot mostly be explained by a singular indicator such as “screen time”; these breaks are the product of a field of interaction clustered around the axis of relationship, belonging, self-regulation, security/privacy, inequality, and institutional boundaries. The most important outcome of this map is this: approaches that attribute digital risks solely to the individual cannot solve the problem and often exacerbate it because the way an individual uses the screen is shaped by the school climate, family communication, the way work is organized, the design of platforms and social norms. Therefore, the solution must be multi-layered. The individual will be strengthened, the family will be supported, the school and workplace climate will be regulated, community ties will be repaired, and the policy framework will distribute responsibility fairly. This concluding chapter offers a “future-looking” roadmap of precisely this multi-layered approach.

### *9.2. Digital Literacy and Conscious Digital Citizenship: The Protective Factor of the New Century*

Digital literacy is often narrowed down to the ability to use technology, but the most critical aspect of literacy in the digital age involves much more than just turning the device on and off. Digital literacy is the development of an individual's existence in a digital environment that is safe and rights-based, where they are able to think critically, manage emotions and attention, protect privacy, improve information verification skills, and observe ethical boundaries in their relationships. Conscious digital citizenship is the social dimension of this literacy. An individual can be a citizen who is not only a consumer in the digital environment but also a responsible

citizen who respects the rights of others, stands up to online violence, fights against disinformation, and cares about the health of the digital public space.

A significant portion of the psychosocial breaks we discuss in this book grow when the ability to navigate the digital environment weakens. If the adolescent does not know the psychology of social media bullying, the feeling of worthlessness deepens; if the adult does not know the impact of notification cycles on attention and stress, digital burnout becomes normal; if the family cannot establish the difference between setting and controlling limits, domestic conflict increases; if the school does not understand the dynamics of digital bullying, the victim cannot be protected, and the audience becomes silent; and if institutions do not establish a data security and ethical framework, digital counseling may produce new grievances. Therefore, digital literacy and conscious citizenship should be considered as a protective immune system, not as an additional course in intervention policy programs.

It is necessary to make the basic components of conscious digital citizenship more concrete. The first is algorithm literacy. The individual should know that the content he sees is not random, that platforms personalize content recommendations to keep his attention, and that this personalization can affect his mood and create a digital tunnel over time. This knowledge breaks the illusion that everyone lives like this, especially for adolescents, and makes it easier to manage cycles of social comparison and news anxiety in adults. The second is privacy literacy. One must know the permanence of a digital footprint, that sharing may be irreversible, the risks of screenshot culture, the consequences of data sharing, and secure ways of reporting. The third is emotion and attention management. The individual must be able to manage his or her own attention in the face of the powerful reward systems of the digital environment. Managing notifications, creating screen windows, maintaining sleep hygiene, and being able to cope with distress and anxiety when not using the phone are all part of this field. The fourth is ethical relationship literacy. Not participating in digital bullying means not only not being a bully but also being able to transform the audience position, not normalizing violence, and developing online kindness and a restorative approach. The fifth is fact-checking and critical media literacy. Disinformation and manipulation increase anxiety and polarization, weakening individual mental health, social trust, and trust in institutions. Therefore, digital citizens should know and use methods to access accurate information.

These components should not remain abstract; they should also have an application area. Digital citizenship at school should be taught not only through presentation but also through in-class practices, case discussions, bullying scenarios, privacy simulations, and roleplays. Digital literacy in families should not be about imposing bans but about co-establishing a digital culture at home: shared off-screen time, at-home digital contracts, parental modeling behavior, open communication, and safe reporting channels. Digital citizenship in workplaces should be supported by corporate protocols that protect employees' right to rest and boundaries. This system works well when digital literacy is part of lifelong learning, not just something applicable to a single age group.

### *9.3. The Place of the Digital Age in the Social Work Curriculum: New Competencies, New Ethical Boundaries, and New Application Areas*

The digital age is not a change that can be glossed over with an additional course in Social work education; it requires rethinking the curriculum in content, skill, and

ethical dimensions because the social worker now not only conducts face-to-face meetings in the field but also has to identify digital risks, manage crises of digital bullying and privacy violations, provide online consultancy, protect data security, discuss the responsibilities of platforms and institutions, and evaluate the impact of new technologies such as artificial intelligence on professional practice. This new reality requires the social worker to not only be familiar with the digital world but also be equipped to manage the digital world in a rights-based and ethical manner.

Levels must be established to determine the place of the digital age in the curriculum. The first is the basic knowledge and awareness level. This level includes digital addiction, problematic use types, risk groups, cyberbullying dynamics, digital burnout, psychosocial effects of algorithms, digital privacy, and data protection principles. This level allows the student to develop a conceptual map. The second level is the practical skills level. This level enables the social worker to know “what to do” in the field, with the stages of conducting interviews in a digital environment, adapting informed consent to the digital environment, making a remote security plan in case of a crisis, designing a school/workplace digital well-being program, conducting group work, maintaining case management and inter-institutional coordination with digital tools, balancing digital evidence and privacy, and working with reporting mechanisms. The third level is the ethical and policy literacy level. This level, which consists of stages such as boundary management in digital service, social media ethics, data security and record keeping, digital inequality and accessibility, platform responsibility, children’s rights and the digital environment, the right to disconnect in business life, and public health approaches and evidence-based policies, helps keep the graduate’s professional identity intact in the digital age.

This curriculum transformation does not happen only with theoretical courses. At this point, digital application laboratories may be valuable in Social work education. Students practice online interviews with controlled simulations, write a crisis protocol in a cyberbullying scenario, design a digital contract, plan a school-based digital well-being program, and create an incident response plan in case of a data breach. Thus, when the graduate goes out into the field, he should not experience the digital application for the first time but rather in a safe training environment. Additionally, internship areas also need to be digitalized. Students can take part in integrated projects with online consultancies or school/university guidance units, design digital citizenship workshops, and observe data security and ethical protocols. The critical point to consider when discussing digital age curriculum is this: the essence of Social work is human connection and empowerment. Technology education should not push Social work towards technicalization; on the contrary, it should protect and strengthen the human core of the profession against the potential of technology to weaken human relations. The graduate must know not only how to use the platform but also how to ensure the client’s safety if issues arise with the platform, how to design a meeting at home where privacy is compromised, how setting digital boundaries protects the client, and how digital inequality shapes access to care.

#### *9.4. Policy Recommendations: A Multi-Layered Roadmap for Digital Health*

Effective policies in the area of digital addiction and digital harms cannot be the responsibility of a single ministry or a single institution. When the fields of education, health, family policies, child protection, working life, and digital regulation do not involve crosstalk, the school does one thing, the family does another, the platform

moves in another direction, and ultimately risk leaks through the gaps. For this reason, policy recommendations should be designed with a multi-stakeholder and life cycle approach.

The first policy recommendation is to turn the topic of digital well-being and child/adolescent digital safety on a national scale into a strategy carried out not only with campaigns but also with measurable targets and inter-institutional coordination. This strategy should include standardization of digital citizenship and digital well-being programs in schools, teacher training, family support workshops, school Social work capacity, bullying reporting and crisis protocols, risk screening, and referral processes. In order for the strategy not to remain at the recommendation level, a monitoring/evaluation mechanism should be established, with indicators such as absenteeism, bullying notifications, psychosocial applications, sleep patterns, and academic performance.

The second policy recommendation is to move school policies from the prohibition axis to the well-being axis. Keeping phones out of the classroom protects the learning environment, but digital risk extends beyond the school. For this reason, the school should design a phone policy, digital citizenship education, activities that strengthen peer relationships, off-screen social areas, guidance and Social work interventions, and family cooperation. When this integrity is not ensured, prohibitions produce secret use, and secret use makes risks invisible.

The third policy recommendation is to strengthen institutional boundaries against the norm of digital burnout and constant accessibility in working life. Emergency definition in workplaces, messaging hours, reducing meeting load, protocols protecting the right to rest, and employee support programs are the most effective structural tools to reduce digital burnout. This is where Social work can make a significant contribution through internal advocacy and program design.

The fourth policy recommendation is to institutionalize ethical, data security and quality standards of digital consultancy and online psychosocial support services. A digital service may be provided, but if there is no standard, the risk increases. Therefore, institutions should secure the digital service with informed consent templates, crisis protocols, data retention policies, staff training, supervision mechanisms, and accessibility regulations. This increases both the spread and reliability of the digital service.

The fifth policy recommendation is to strengthen social support mechanisms that will reduce digital inequality. While digital service increases access for those who have Internet and devices, it can create a new means of exclusion for those who do not. Therefore, safe meeting areas in schools and community centers, free/affordable Internet support, accessible design (subtitles, sign language, plain language), and alternative service channels (telephone, face-to-face) should be planned for access by disadvantaged groups. Digital health can only be managed successfully when acting with sensitivity to inequality.

#### *9.5. Professional Compass in the Digital Age*

The following suggestions translate common needs that arise across all chapters of the book into the language of “professional action.” Each suggestion aims to consider the micro–mezzo–macro levels simultaneously.

Focusing on the question of “function of the screen” instead of “screen time”, how many hours a client spends on the screen may be important, but what is decisive

is what need the screen meets—escape, belonging, success, validation, relief, etc. Intervention without understanding the function often remains on the surface and increases repetition. The questions to be asked in interviews is, “What does the screen provide for you?” This question both reduces stigma and strengthens motivation for change.

Regarding the issue of designing the intervention with the trio of “setting limits + establishing relationships + building alternatives”, only setting limits may increase secret use, only establishing relationships may not bring behavioral change, and only offering alternatives may not touch the need. When all three work together, screen behavior can give way to healthier ways of organizing. It is important to note that each case plan includes a concrete step corresponding to these three headings.

Regarding the issue of using the language of “capacity strengthening” instead of “blame” when working with the family, parents often either over-prohibit or abandon prohibition completely, with both extremes producing conflict. Instead of telling families they are doing something wrong, it would be more effective to teach them methods of setting limits, modeling behavior, and establishing a digital culture at home together. A digital contract, shared off-screen time, and sleep hygiene routines can be used as concrete tools when working with families.

Regarding the issue of putting politics ahead of behavior in institutions such as schools and workplaces, institutional uncertainty magnifies individual conflict. A telephone policy at school, a bullying reporting line, a digital citizenship program and crisis protocol, texting hours at work, the definition of an emergency, and an order protecting the right to rest multiply the impact of individual interventions. When working with institutions, it is important to remember that the goal is not to “fix a single person” but to “regulate the climate”.

Regarding not leaving the victim alone in incidents of digital bullying and transforming the audience, digital bullying often grows with the crowd of viewers. The school climate determines whether audiences remain silent or supportive. Transformation of classroom norms is as important as the safety of the victim. Restorative practices, secure reporting mechanisms, and teacher training are the main tools for this transformation.

On the topic of treating digital burnout as an “institutional boundary problem” rather than an “individual weakness”, digital workaholism and constant accessibility in adults are often the product of corporate culture. When trying to set individual limits with the client, protocol and governance suggestions at the institutional level should also be brought to the agenda. Otherwise, while the client is trying to change, the system will push him back into the old cycle.

On the topic of making eligibility screening and crisis protocols part of the conversation in digital consultancy, privacy, security, and technical interruptions in digital service are possibilities, not exceptions. For this reason, compliance screening (is there a safe place? is there a perpetrator risk? what is the crisis channel?) and plan B (what will happen if the connection is lost?) should be determined from the beginning. This both protects the client and reduces the professional risk of the specialist.

On the topic of seeing data security as a protective intervention, not a technical detail, if the client’s data is leaked, the “damage” will be real. Practices such as a strong password, two-factor verification, a secure platform, data minimization, and safe data storage and destruction are included in Social work’s protection mission.

The language of record keeping also needs to be ethical; stigmatizing notes can harm the client even if the data is not leaked.

On the topic of making digital inequality visible in every case and program, some clients cannot access digital services, some cannot speak confidentially at home, some share devices, and some need accessibility due to disability. A digital service plan is not “rights-based” if it does not include alternative channels and accessibility. When designing programs, the principle of design for the most vulnerable should be adopted.

On the topic of constantly being updated on the ethics and skill areas of the digital age, digital culture changes rapidly. The possibility of encountering innovations such as new platforms, new forms of bullying, new data risks, artificial intelligence tools, and new policy debates is increasing at every moment. The social worker’s strongest protection against this change is continuous learning. Continuous learning through in-service training, supervision, case meetings, current guidelines, and in-house protocols is essential not only for knowledge but also for maintaining professional boundaries.

#### *9.6. Core Message and Call to the Future*

This monograph has argued that psychosocial fractures in a digitalized society should not be read as an inevitable by-product of technological progress. Its central contribution is to reposition digital addiction and related harms within a Social work-informed psychosocial and structural framework. Rather than treating gaming problems, social media overuse, FoMO, nomophobia, digital workaholism, and digital burnout as isolated symptoms, the book has shown how they emerge through the interaction of relational vulnerability, institutional expectations, and platform design. This integrative perspective is the book’s main scholarly claim.

Seen in this way, digital harms are neither purely private failures nor purely technical malfunctions. They are shaped by families, schools, workplaces, welfare systems, regulatory choices, and the commercial logics of digital platforms. At the same time, the evidence base is not equally settled across all settings and populations; some patterns are robust, whereas others remain context-dependent or still emerging. For that reason, the argument advanced here should be read as an integrative and practice-oriented synthesis, one that invites further empirical and cross-cultural inquiry rather than claiming universal closure.

As we look to the future, we must see two truths at the same time. First, digitalization is irreversible; children, teenagers, and adults will exist in the digital world. Secondly, what the digital world will be like will be shaped by our social decisions. Social work is a critical profession at this point, because Social work claims to transform the system while strengthening the life of the individual. In the digital age, when Social work develops a professional stance that increases well-being, not diminishing the screen entirely, psychosocial breaks can be replaced by psychosocial endurance.

This chapter is more of an initial call than a conclusion. Talking about the breaks of the digital age involves not only listing the risks but also assuming the responsibility of establishing new ethics, new solidarity, and a new corporate culture. The social worker is one of the most prominent bearers of this responsibility in the field. It is their motivation to remind people of the need to act in accordance with the essence of the human being by using digitalization despite digitalization, while meeting with

the individual, designing a program at school, supporting the family, defending the institutional policy, and making the digital service secure.

The digitalized society has not only transformed the ways of communication and access to information but also radically reshaped the way people establish belonging, build identity, regulate their emotions, set boundaries, protect their privacy, and feel safe. While this transformation has produced opportunities for some individuals, it has also created a risk architecture that deepens psychosocial fractures, especially for children, adolescents, fragile families, busy working adults, and groups with weak support networks.

The analysis presented throughout the book suggests that digital addiction, problematic use, FoMO, nomophobia, and digital burnout are best understood as overlapping but distinct configurations of distress. They may share common drivers such as loneliness, weakened self-regulation, social comparison, family boundary uncertainty, institutional accessibility pressure, and a reward-oriented platform design, yet they do not carry identical meanings or intervention needs. Conceptual precision matters because prevention and response fail when all forms of digital strain are compressed into a single category.

In educational environments, digital addiction often begins with “silent signals” that leak into the learning and classroom climate—distraction, sleep disruption, absenteeism, loss of motivation, tension in peer relationships, and the invisible effects of digital bullying. The most effective thing a school can do is not just impose bans but create a culture of digital citizenship, digital well-being, and safe reporting. A school climate that transforms peer norms and moves the audience from passivity to responsibility does not leave the victim alone and makes the teacher part of the early warning mechanism, which seriously reduces the impact of digital risks. In family life, digital addiction often grows through conflict, distrust, and disconnection. Uncertainty of the rules regarding technology at home, inconsistent punishments, parents’ modeling behaviors, decrease in shared time, and “turning the screen into the caregiver” deepen the fracture. Therefore, the goal of family interventions should be not only to shorten the screen but also to strengthen communication, make routine and boundaries understandable, and replace the screen with relationships. Protecting children’s rights in the digital environment, strengthening privacy, and effective reporting mechanisms reduce the burden of school and family interventions and strengthen protection.

In practical terms, an effective response requires a multi-level architecture of responsibility—strengthening individuals without moralizing them, supporting families and schools without reducing the problem to discipline, redesigning workplace norms around availability and rest, and holding platforms and policymakers accountable for digital safety and rights. This agenda has relevance well beyond a single national context because constant connectivity, comparison pressure, data insecurity, and attention capture have become internationally recognizable features of contemporary life. The professional task of Social work in this landscape is not to wage war on technology, but to help build a digital environment in which human dignity, relational safety, and social justice remain central.

The main message of this book for Social work is clear: In the digital age, Social work is not only a profession that interviews the individual but also a transformation actor that connects, coordinates, recognizes risks early, designs restorative processes, and carries out rights-based advocacy at the school, family, workplace, and policy levels. Although digital consultancy and online services have the potential to increase

access, they can create new grievances when ethical, privacy, and data security standards are carried out without institutionalization. That is why digital service should be designed with security, boundary management, and inequality sensitivity in mind, not convenience.

Digitalization is irreversible, but the impact of the digital world on individuals and society is not “destiny”. The way to reduce the psychosocial breaks of the digital age is not to turn the screen into an enemy but to establish a digital well-being ecosystem that centers human needs and rights, calls on institutions to take responsibility, and strengthens social ties. Social work is one of the strongest carriers of this ecosystem both in the field and in politics. It can manage the risks of the digital age and transform its opportunities into social benefit with a professional stance that increases life, not reduces the screen.

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Digitalization is transforming not only how societies communicate and work, but also how people experience belonging, vulnerability, care, inequality and well-being. *Psychosocial Disruptions in a Digitalized Society* examines these transformations through a social policy lens. Bringing together interdisciplinary perspectives, the volume explores how digital environments reshape social relationships, labour, welfare, identity, exclusion and access to support across the life course. Attention is given to emerging psychosocial risks, digital inequalities and the challenges faced by children and young people, families, older people and other groups exposed to social vulnerability. Rather than treating digitalization as a purely technological development, this book approaches it as a structural social transformation that requires new forms of protection, inclusion, regulation and solidarity. It offers researchers, policymakers, practitioners and students a critical framework for understanding how welfare systems and social policies can respond to the human consequences of digital change and support more inclusive and resilient societies.

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