Teens & Tech: use and abuse

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OUR CLIENTS

1. TEENAGERS AND YOUNG ADULTS...
   presenting a basic behavioral disorder profile:
   • Difficulties related to family coexistence.
   • Difficulties in school performance.
   • Consumption, polydrug use, toxic abuse or dependence.
   • Other risk behaviors in food, sexual, social and legal spheres.
   • Abuse of new technologies (ITC) and/or paralyzing leisure in general (TV, mobile, video games, Internet...).
   • ...

2. THEIR FAMILIES,

   who need guidance, counseling and, if required, therapeutic care.

OBJECTIVE

Make changes in both directions, the teenager and their parents.
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• A private organisation with government agreements.

• Start year: 1997

• Open clinical records: > 5,500

• Interdisciplinary team: > 100 professionals (medical doctors, psychologists, psychiatrists, nurses, social workers and educators, teachers, other specialists recreation monitors...).

• Origin of the patients: private and public.

• Therapeutic assistance: comprehensive (bio-psycho-socio-educational and legal).

• Profile of the majority of the users: young people and adolescents who carry out risk behaviors, with diagnoses of behavioral disorder and/or dual disorder, and their families.
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• **Own care network: therapeutic and educative units**

Centres approved and registered in the Registry of health centres, services and establishments of the Department of Health (Generalitat de Catalunya) and in the Registry of entities, services and social establishments of the Department of Labor, Social Affairs and Families (Generalitat de Catalunya), as ambulatory and residential socio-health centers, and support for social reintegration.
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- Own care network: therapeutic and educative units

CSA external consultations - Barcelona

CSA external consultations - Madrid
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• Own care network: therapeutic and educative units

Therapeutic School
“CTE Valldaura” (Berguedà)
45 places

Home with support
“CTE Valldaura Nou” (Berguedà)
10 places
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• Own care network: therapeutic and educative units

Therapeutic School
“CTE Can Ros” (Alt Camp)

82 places

Therapeutic School
“CTE Julià Romea” (Barcelona)

20 places

Number of residential places: 157 simult.
Day center: 25
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• **Private derivation:**
  1. Pacient to pacient
  2. Health centres (hospitals, UCA, health centres, healthcare professionals...)
  3. School centres (public, concerted, private...)
  4. Preventive and teaching actions
  5. Web, media

• **Public derivation:**
  • Directorate General of Attention to Children and Adolescents (DGAIA, Generalitat de Catalunya)
  • Catalan Institute of Reception and Adoption (Generalitat de Catalunya)
  • Ministry of Health, Welfare and Work (Andorra’s Government)
  • Social Services Aragon Institute (Aragon Government)
PERFIL OF THE ADOLESCENT ATTENDED

ROBOT PORTRAIT OF THE ADOLESCENT ATTENDED AT AMALGAMA7 (2018)

Patients arrived to Amalgama7 with previous diagnosis

- Yes 53.1%
- No 46.9%
Patients arrived to Amalgama7 with previous diagnosis:
typology of the primary diagnosis

- Alcohol and other drugs abuse: 12.4%
- Behavioral disorders: 59.7%
- Affective disorders: 11.2%
- Alteration of impulse control: 7.2%
- Alteration of the course of thought: 8.7%
- Intellectual deficit: 0.9%
PERFIL OF THE ADOLESCENT ATTENDED

Which residential assistance requires?

A care that, simultaneously, respond to their emergencies, deficits, symptoms...

This care will be *ambulatory* and/or *residential* depending on the intensity of the symptoms described in these areas.
AMALGAMA7’S CARE RESPONSE
“THREE IN ONE”

**Comprehensive model: bio-psycho-socio-educational and legal**

**Amalgama7 Model**

**TEAM:**
- Clinical staff + Teachers + Educators

- Divers
- Interdisciplinary
- Vocational
- Professionals who know how to work in an interdisciplinary team
- Taking into account the patient-parent-family structure
- Having complicity...
- ...and a sense of humor.
Behavior addictions

CIE-11 (OMS 2019)

• New category: Addiction to videogames
  ▪ “Continuous or recurring” gaming pattern related to three negative situations that bad use of digital games can create:
    1. Lack of control about the beginning, frequency, intensity, length, ending or context where the game takes place.
    2. The game becomes a priority instead of other daily activities or vital interests.
    3. The adolescent keeps on playing games (or even increases it) despite his conscience of the negative consequences that it causes.
For the discussion...

To conclude...

• 31.2% of the youngsters assisted in Amalgama 7 think new technologies can be addictive.

• Several scientists agree new technologies can cause negative consequences in mental Health: depression, sleeplessness, anxiety, isolation...

• Almost 75% of the adolescents assisted in Amalgama 7 are diagnosed with dual pathology (presence of two disorders in a single person: psychopathology and drug abuse).

• Almost a third of Amalgama 7 youngsters diagnosed with drug abuse (specially alcohol and cannabis) also abuse new technologies.
Education and health

Challenge:
How should all we use Technology to make it become a resource for a better educational activity and for a good mental Health in Young people?