

Studies touting China's treatments for Internet overuse may lack validity

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While many Chinese studies of Internet addiction treatments claim that the therapies are effective, an analysis by researchers in the School of Social Work found troubling inconsistencies. The researchers, from left, doctoral student Chennan Liu, professor Doug Smith and doctoral student Mini Liao. Photo by L. Brian Stauffer

(Phys.org) -- Excessive Internet usage has been linked to an array of problems, from structural changes in the brain to depression, poor social skills, violent outbursts and sexual promiscuity. In China, concerns about Internet overuse have spawned hundreds of treatment programs that claim to cure addicted young people using a variety of techniques, ranging from therapy and medication to rigorous physical training in military boot camp environments.

While many Chinese studies claim that the treatments examined have high response rates, an analysis by researchers in the School of <u>Social</u> <u>Work</u> at the University of Illinois found inconsistencies in reporting



standards that raise troubling questions about the studies' scientific rigor.

The Illinois team evaluated outcome reports of 24 studies, which appeared in English and Chinese academic databases January 2000 to May 2010.

The treatments examined included exercise programs, cognitive behavioral therapy, family or group therapy, electroacupuncture, and psychotropic medications. More than half the programs involved multiple therapies, usually CBT in combination with medication. The people being treated, usually in clinical settings, were ages 9-23.

The Illinois research team evaluated the methodological strength of each study based upon 15 characteristics that <u>medical</u>, psychiatric and clinical psychology journals use to assess the design and quality of clinical trials. The characteristics included key information such as statements about the objective and outcome of each study, the sample size, whether objective measures other than client self reports were used and if follow-up data were collected at least 30 days after treatment ended.

In 20 of the studies, researchers reported "very large" treatment effects, but failed to provide quality evidence to support those findings, said Chennan Liu, the lead author of the study, which was published recently in the journal *Research on Social Work Practice*.

"The quality of the methodology is not very high," Liu said. "Only two of the attributes are documented in more than 50 percent of the studies. Another 13 attributes are reported by less than half of the studies. It's difficult for us to determine whether they are promising treatments" when the outcome reports don't provide critical information about the studies' structure, data gathering and analysis.

"What we found was that the least rigorous studies were reporting the



best clinical effects, so we couldn't trust them," said co-author Doug Smith, who is a professor of social work at Illinois and conducts research on addiction and treatment. "There were only a couple of studies that had good methodological rigor, but those showed smaller effect sizes, and that's about what we would expect. That's a pretty typical finding in other areas of medicine and social science that are doing these types of clinical trials."

If the Chinese researchers are adhering to the same rigorous research standards as scientists in the West, documenting that information in the outcome reports would lend credibility to their findings.

"We'd encourage researchers to include as many attributes as possible when they design studies and write their outcome reports so we'll know that they are high quality studies that might provide us with effective treatments," said co-author Mini Liao.

Liao and Liu are graduate students in social work at Illinois.

None of the studies' findings were replicated by other researchers in follow-up studies, considered the gold standard for clinical trials in the West.

However, a lack of high-quality outcome studies is not uncommon in emerging fields, Smith said.

"Historically, that happens in other areas of mental health as well," Smith said. "There was a point in time – perhaps 15 years ago – where if we'd done a paper on adolescent substance abuse outcome studies we probably would have found the same thing. There just were not many high-quality outcome studies in that particular area because it wasn't a mature field."



Studies suggest that as many as 24 million urban young people in China qualify as Internet addicts. While health and governmental officials in China began classifying Internet overuse as an addictive disorder four years ago, the American Psychiatric Association currently does not recognize it as an addiction, Liu said.

Many mental health experts view compulsive Internet use as similar to pathological gambling, currently classified as an impulse control disorder in the APA's Diagnostic and Statistical Manual of Mental Disorders. The DSM, the bible for insurers and practitioners, catalogs the diagnostic criteria for psychiatric disorders that are recognized by the U.S. health care system.

However, the APA plans to elevate problem gambling to the same level as addictive disorders in its next edition of the DSM, to be released in May 2013.

"Placing gambling disorder in a section next to substance use addiction is a huge step in legitimizing it as an addiction, and it will take a while for the same thing to occur for Internet addiction," Smith said.

Frequently, people who use the Internet excessively are diagnosed with and treated for co-occurring mental health problems such as <u>depression</u> or anxiety.

The riddle facing practitioners is determining whether clients' excessive <u>Internet usage</u> is a symptom of a mental health problem or if their emotional problems are triggered by it, Smith said.

Liu and Smith are working on a study in which they are attempting to isolate co-occurring mental health problems from excessive Internet use to determine the order in which the problems occur.



Provided by University of Illinois at Urbana-Champaign

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