

The fire challenge involves teens rubbing themselves with flammable liquids and then setting themselves on fire.
PICTURES: YOUTUBE.COM



Dangerous online challenges

Attempting hazardous social media dares sounds silly, but there could be a scientific reason why teens are up for the challenge, writes **Marchelle Abrahams**

DURING the five-minute drive to her local hospital, thoughts raced through Brandi Owens' mind: What had the girls been doing? What had happened?

Just 15 minutes earlier, her daughter Timiyah Landers, 12, had had a group of friends over for a chilled Friday afternoon.

Only things started to hot up.

She "looked like a fireball", Owens said. "She was yelling, 'Help me!'" she told the Washington Post.

"I was reaching through the fire," she said, adding that she didn't realise she had burnt her hands. "It was like a reflex... I didn't even feel the fire, I was just saving my daughter."

Now the Detroit mother watches as Timiyah lies in intensive care at a children's hospital with her body covered in severe burns.

Little by little Owens managed to piece the story together and learnt that Timiyah had poured rubbing alcohol on her skin, set herself on fire and filmed it for the express purpose of an online dare called the "fire challenge".



Timiyah Landers, 12, is fighting for her life after setting herself alight in the fire challenge.



Dr Kristy Goodwin says the adolescent brain is vulnerable to the pitfalls of social media. She is the author of *Raising Your Child in a Digital World*.

Over the years, teenagers have attempted some crazy and downright dangerous challenges on social media for their 10 minutes of fame and thousands of "likes".

One might argue that stupidity knows no bounds. But besides the obvious

reasons, there could be a more dangerous one as to why teens are more susceptible to these challenges.

Teen brains are still developing. According to the American Academy of Paediatrics, the part of the brain that handles rational thought (the prefrontal cortex) is not fully developed until your mid-20s.

In short, teens tend to be more impulsive and act before thinking of the effects.

Jelle Jones is a professor of neuropsychology and an expert when it comes to the teenage brain. He believes that teenagers simply don't see the dangers – their brains aren't wired to consider consequences, he told the Belgium newspaper AD.

The adolescent brain is vulnerable to the pitfalls of social media, says leading child researcher Dr Kristy Goodwin.

During an 2017 interview with Newscom.au, she agreed that a sense of "peer acceptance" was what compels some teens to take up these challenges, no matter how harmful or risky they may be.

"Social media caters to so

many of our basic needs to feel connected and competent.

"Because we're humans and we want to feel like we're connected, there's almost a sense of allegiance. If I emulate what others are doing, I'm fitting in," she said.

The dopamine effect

US blogger Amy Williams first alluded to the dopamine effect when blogging for thirdparent.com.

She backed up her theory by quoting recent research by Danielle Baribeau and Evdokia Anagnostou, published in *Frontiers in Neuroscience*.

What they found is that receptors from oestrogen and testosterone allow other hormones like oxytocin and dopamine to influence brain development.

Dopamine is known to have effects similar to a drug high and feeds the pleasure centre of the brain. Its levels in the teen brain are constantly evolving.

Underestimating risk

Williams says the dark side effects of this could lead to addiction, hence teens are always on the lookout for the next "high".

Williams also mentions that teens sometimes don't consider the risks involved. Instead, they get lost in the details and tend to focus on the reward.

"Whether it is the satisfaction of completing a goal, garnering more likes, or comparing oneself to their peers, the reward is only magnified when social media is the primary mode of communication," she wrote.

Affleck's addiction affliction is common

Sometimes you have to practice tough love to achieve the required results, writes **Marchelle Abrahams**

IT'S never easy telling someone you love that they have a problem – and even more so when something that started as a harmless pastime manifests itself as a full-blown addiction.

Staging an intervention is even harder: When is it the right time? How do we know they've hit rock bottom? Do we even have to wait till they reach the point of no return before finding them help?

All of these questions must have been going through Jennifer Garner's mind this weekend when she was forced to take matters into her own hands and confront her ex, actor Ben Affleck, about his out-of-control drinking habits.

After seeing paparazzi pics of the dishevelled star taking delivery of a box of alcohol at his home, Garner literally dropped him at the gates of a rehabilitation facility in Malibu.

It's a sad state of affairs, compounded by the fact that it's being played out in the public eye.

The *Batman* actor, 46, is no stranger to alcohol addiction and checked himself into rehab on two separate occasions – in 2001 and 2017.

Addiction doesn't discriminate when it comes to race, culture or socio-economic background. And yet certain people are more at risk when it comes to substance abuse.

"There are many factors that may make people vulnerable, including genetics, family background, mental health issues, work stress, financial pressure and relationship problems," says Marna Acker, an occupational therapist at Akeso Clinic Nelspruit.

"These factors can make the person at risk value substance abuse as a coping mechanism, even though it is against their interest in the long term," she says.

Acker also alludes to other factors such as depression, anxiety and lack of control. Alcohol and painkillers (codeine) are listed among the



Most people tend to drink at social functions, but it's the number of units consumed that most should be aware of.



It's Ben Affleck's third stint in rehab for alcohol addiction.

worst substance offenders.

Alcohol abuse is costing the country as much as R37.9-billion annually. This is according to a 2014 study in the *South African Medical Journal*.

The numbers paint a grim picture, and yet, when it comes to alcohol abuse, it seems to be more socially accepted – the drug of choice for many South Africans.

"Alcohol is a freely available, licit, part of culture, traditions and events," says Acker. "We are conditioned through advertising that says alcohol forms part of a certain kind of lifestyle and class."

She refers to a recent study on the social aspects of alcohol abuse in South Africa. It noted that drinking is associated with being "a man" and is a social activity expected from certain groups like students.

This could be the reason why it takes longer for people to get help and go into treatment when compared to illicit drugs.

According to the US National Library of Medicine, men drink more than five standard glasses of alcohol a day, or more than 15 drinks a week on average.

Females consume more than four standard drinks a day or more than eight a week.

The medical complications of going over the required safe drinking measures (males: less than 14 units a week; females: less than eight a week) could result in a number of health risks, including liver diseases, pancreatic diseases, cardiovascular diseases, gastrointestinal problems, neurological disorders and seizures.

Then there are the psychological risks: mood disorders, anxiety disorders, hallucinosis, psychosis, pathological jealousy (Othello Syndrome), sexual disorders, sleep disorders and dementia.

Acker stresses the need for family to be there for the addict – emotionally and

physically. "It is important for family members to get a professional to help with this process," says.

It's not easy to stage an intervention. She warns that many people are resistant because of denial, but during the treatment this might change. Persevere, don't ignore the problem, and get professional help.

"Try not to enable the problem like giving them money or access to a substance. Try to avoid conflict about the problem, especially when they are intoxicated. But make sure that the member knows that their habit is unacceptable."

If a family member has a long-standing history of severe substance abuse and refuses treatment, a court order can be issued to get them placed in involuntary treatment. This process, however, can be traumatic for the user and the family. A social worker can be contacted to help with this process.

"Lastly, have boundaries, be consistent, don't let them manipulate you and know that sometimes it is necessary to practise tough love to protect you and your family," she says.

Psychiatrist Dr Eugene Allers says experts should look at addiction as a medical condition requiring multi-disciplinary interventions.

"Sobriety is no longer the only measure of success, rather the ability of the patient to be free of illicit drugs, and functional."

SPECIAL SUBSCRIPTION OFFER

SUBSCRIBE TO THE MERCURY

GET 25% OFF THE COVER

and we'll throw in a free magazine for the duration of your subscription up to a maximum of 12 months. To take advantage of this offer, SMS the word "MAGDEAL" followed by your name to 33258



THE MERCURY
GET A HEAD START

Terms and conditions apply. SMSes charged at R1.50

AUGMENTED REALITY THE FUTURE OF STORYTELLING IS HERE

BRING YOUR BRAND TO LIFE

SCAN HERE TO EXPERIENCE AR

- 1 DOWNLOAD the free IOL NEWS app
- 2 OPEN app and CLICK
- 3 SCAN the image where you see
- 4 PLAY the video

Email: studio.kzn@inl.co.za

studio INDEPENDENT

Safe drinking limits

- Men: less than 14 units a week.
- Women: less than 8 units a week.
- Not daily. At least two alcohol free days per week.
- Not all in one day.
- Men under 60 years no more than 4 units a day.
- Women and men above 60 no more than 3 units per day.
- Never before or during driving, active sport, use of machinery, electrical equipment, ladders or potential dangerous situations.

Charity does begin at home, study reveals

Colin Fernandez

IT may earn you widespread admiration but helping the poor or doing good works for charity can be a turn-off when it comes to romance.

Asked to choose between "do-gooders" and those who put family and friends first, we'd rather spend time with the latter, a study found.

This seems to contradict previous research that showed women and men are attracted to people who say they help others. But it seems while people find altruism attractive in theory, they are not so keen if it comes at the expense of family or friends.

By way of a fictional example, the study authors from Oxford University and Yale cite Mrs Jellyby in Dickens's *Bleak House*, who readers will "judge harshly" because she "spends most of her time setting up a charity for a far-off tribal community while ignoring the needs of her own family".

Molly Crockett, Yale assistant psychology professor, said: "When helping strangers conflicts with helping family, people prefer those who show favouritism, even if that results in doing less good overall."

The researchers, whose findings



Asked to choose between 'do-gooders' and those who put family and friends first, we would rather spend time with the latter, a study has found.

are published in the *Journal of Experimental Social Psychology*, created two scenarios to test the moral dilemma. They asked whether a grandmother who wins \$500 (R7 087) in the lottery should give it to her grandson to fix his car or to a charity dedicated to combating malaria.

In the other, a woman has to decide whether to spend the day with her mom or building homes for the poor. Participants perceived both equally moral, but when it came to a spouse or a friend they preferred those who helped relatives. – Daily Mail