Youth Risky Behavior and Thrill-Seeking Games



Compared to adults, adolescents are more prone to take risks. While we often associate negative behavior with risk taking, it can be a healthy part of growing up within limits. Healthy risks, such as engaging in a behavior or activity that challenges one physically, socially, personally or academically, can help adolescents find their identity and even be a source of stress relief. Engaging in discussions with youth and educating them on the consequences of unhealthy risk taking should be part of ongoing conversations both at home and at school. Some of the more obvious risk-taking behaviors that we make efforts to educate our youth on include the use of drugs and alcohol, social media safety, safe driving practices and engaging in healthy and safe relationships.

Over the past decade, we have seen an ongoing need to educate kids and teens on risk-taking behavior which includes thrill seeking challenges or sensationalized "stunts" that go viral on YouTube or other social media sites. These challenges can vary, but one of the more highlighted challenges that continues to be a concern amongst school age children and teens includes the Choking Challenge. Also referred to as the Pass Out Challenge, Blackout, Scarf Game or Fainting Game, the Choking Challenge has been attributed to accidental deaths all over the country. The purpose of this challenge is to intentionally cut off oxygen to the brain with the goal of inducing temporary loss of consciousness and euphoria. Euphoria occurs when pressure is applied, causing a lightheaded dizzy sensation, and when pressure is released, causing a rush sensation. The rush is brief so kids continue to do it, not realizing the potential for brain damage, injury or death. The method of practice that has resulted in most of the reported fatalities across the country involves strangulation, either with use of a ligature or hands or arm pressure on the neck. This method is extremely dangerous, especially if practiced alone. Head trauma, unconsciousness and death as a result of accidental asphyxiation can occur. While the potential intoxicating effects may motivate some youth to engage in this thrill-seeking game, other motives may include: curiosity, peer pressure, the mistaken belief that there is no danger involved because of a dare or because of the easy access to how-to-play videos that give off the misperception that the game is fun and safe. The CDC encourages parents, educators and healthcare providers to be aware of the signs of the game which may include:

- Any discussion of the game by youth
- Bloodshot eyes
- Marks on the neck
- Severe headaches
- Disorientation after spending time alone
- Ropes, scarves and belts tied to bedroom furniture or doorknobs or found knotted on the floor
- Any questions about effects, sensations or dangers of strangulation
- Internet use history relating to the game or any aspects of the game

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SCIP is funded in part by: Lincoln Public Schools, United Way of Lincoln/Lancaster County, Region V Systems, Nebraska DHHS: Division of Behavioral Health and Region 4 Behavioral Health System While the choking game is one of the more dangerous thrill-seeking games, other challenges that have gone viral on YouTube and social media include:

- **The Cinnamon Challenge** an attempt to swallow a tablespoon of cinnamon within 60 seconds without taking a drink of water. Cinnamon can have a drying effect and prevent saliva from producing, resulting in a choking effect. Choking can also aspirate the powder into the upper airways and lungs and cause an inflammatory reaction.
- Salt and Ice Challenge- involves wetting a piece of skin with water and then covering with salt and holding a piece of ice over the salt for as long as possible. The combination creates a chemical reaction and burns skin.
- **The Eraser Challenge** involves rubbing skin with an eraser as hard as possible while reciting the ABC's or other phrases. This results in burns and skin abrasions which can become infected.
- **Snorting Pixie Sticks or Crushed Smarties** mimics snorting cocaine or other substances but without the high. Can cause bloody noses and other irritations within the nose. More serious complications include the potential for maggot infestation inside the nasal cavity if the sugary substance isn't cleaned out.

Being aware of how the teenage brain functions and develops can help parents and educators better understand, anticipate and manage adolescent risky behavior. The brain continues to develop until around the age of 24-25. Compared to adults, adolescents are more likely to act on impulse and less likely to think before they act or pause to consider consequences. Because the area of our brain (prefrontal cortex) that controls reasoning and decision making is one of the last to develop, teenagers tend to engage in actions that are more guided by emotion as compared to logic. During adolescence there is also an increased interest in peer relationships and susceptibility to peer influence increases during the early teen years, peaking at about age 14. Research tells us that several areas of the brain make adolescents more sensitive to the rewards of peer relationships compared to adults. Despite this, parents still play an extremely important role in the lives of their kids. Brain differences don't mean that young people can't make good decisions or tell the difference between right or wrong, but it does mean they need guidance and support from caregivers. Below are some conversation points for parents to help educate youth on the dangers of thrill-seeking games and challenges:

- Do your research- learn what you can and teach youth about the dangers of engaging in various types of thrill-seeking games/challenges.
- Talk to youth about logical consequences to dangerous risky behavior
- Have conversations about peer relationships and help youth identify and develop strategies for navigating peer situations that may involve risky activity.
- Talk about peer pressure (both positive and negative)
- Provide youth with alternatives for healthy risk taking, rather than attempting to eliminate risk taking entirely.

References: American Academy of Pediatrics; American Academy of Child and Adolescent Psychiatry; CDC; <u>www.erikscause.org</u>; NASPA-Student Affairs Administrators in Higher Education.

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