Infinite Scroll: Psychologist Adam Omary on Screens, Mental Health, and Moral Panic

By Rikki Schlott

High schools are banning phones from classrooms, college professors say their students can't read whole books, and some countries are barring kids from social media altogether. But is this worldwide panic over the ubiquity of screens outrunning the evidence?

In the interview that follows, two members of Gen Z sit down to try to answer that question. Rikki Schlott is a media fellow at the Cato Institute and columnist for the *New York Post*, where she chronicles her generation's triumphs and discontents. Adam Omary, a psychologist and research fellow at HumanProgress.org and Cato's Center for Global Liberty and Prosperity, studies the relationship between social media use and mental health, the incentives driving overdiagnosis, and the psychological forces shaping his generation. This transcript has been lightly edited for clarity and length.

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Adam Omary, psychologist at HumanProgress.org and research fellow at Cato's Center for Global Liberty and Prosperity.

RIKKI SCHLOTT: Like me, you're an only child and member of Gen Z who grew up online. I'm not sure how many hours I've collectively spent on social media, but I don't think it's been a great thing for me. What was your experience like?

ADAM OMARY: I was on the extreme end of the screen-use spectrum. I was homeschooled. I was addicted to video games. I spent 10,000 hours on my favorite game. My guess is all screen time throughout my upbringing may be upwards of 20,000 hours, so that's quite abnormal. It's not something that I would recommend, but it is interesting and illustrative of the debate around screen time and mental health that we're having. Lots of people talk about it like it's so causally harmful—that if you spend a few hours per day online, let alone most of your waking existence, you're going to experience serious psychological side effects. I don't want to rely on anecdotes, but in my case and in other cases, if anything, the internet was a net positive for us. It allowed us, especially homeschooled individuals, to socialize more than we otherwise would have gotten the opportunity to.

RIKKI: What were the benefits of 10,000 or 20,000 hours online for you?

ADAM: I actually wrote my college application essay on this. I talked about

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how the internet taught me research skills. It taught me to be resourceful. Same thing with video games: time management, coordination, strategic decisionmaking for multiplayer games, cooperation. So I think that worked out for me, but that's not to say there weren't harms. I spent most of my time indoors, had limited physical activity, limited socialization.

When people talk about opportunity costs, the problem is that it's not like you can assume a child automatically has the best-case-scenario alternative. An interesting example from early developmental psychology studies looked at the effect of TV use on educational attainment. TV, in some ways, is even worse than social media because it's passive consumption. Social media is actually more social and more engaging, and there's more real-time involvement, particularly for kids. Same thing with video games—there's more real-time cognitive stress in a way that could be adaptive.

What we find is that for children from high socioeconomic backgrounds—with many books in the home or other extracurricular opportunities—the opportunity cost of TV is giving up on that, so those children do have worse outcomes.

But in the alternative case of children from low socioeconomic backgrounds—who don't have many books in the home and whose parents are out of the house working so they don't have the opportunity to socialize or to learn from them—TV, by contrast, is extremely enriching because the comparison isn't to all these other more enriching things that they could do. The comparison is: Here's information and stimulation that you're getting that you might not otherwise have the opportunity for.

For me personally, it's hard to know the counterfactual. What would my life have been like if I wasn't homeschooled? Still, I'm more introverted by temperament, so it's not like I would have been this popular jock. In fact, I was in public school for a number of years as well and struggled socially. I still looked forward every day after school to the moment that I could get home and play my video games. Not just because I wanted to forget about school, forget about my day, but because my friends—the only friends I had—existed in that box across the country or across the world, some of whom I'd never met in person. I met others years later and kept in touch with them. Even to this day,

I have some old friends from video games, so it was a primary source of socialization for me.

RIKKI: I think one thing that has made this conversation so confusing is that we rolled out all these technologies and social platforms without any sort of understanding of what they would do to kids, and we've been gradually trying to figure out what the consequences have been.

ADAM: Well, I would push back on the claim that we're going into it blind. I mentioned TV, but even for radio before that, people would say that kids are rotting their brains because they're spending all this time indoors listening to the radio instead of reading or going outside. After the printing press, people would say that kids are rotting their brains because they're spending so much time indoors reading instead of going outside and learning from the world. Even Socrates, the ancient Greek philosopher, was opposed to writing. He thought it rotted your brain because true thinking, true philosophy, required real-time engagement, and you were a sloppy thinker if you had to outsource your thoughts onto the page. So, I think a lot of this is generational moral panic, and I don't say that dismissively. I think it's part of our innate psychology that we've evolved to have a certain nostalgia bias, a certain aversion to new change, especially rapid change, and a certain level of concern when kids are growing up in different environments than their parents. The parents are going to project some of that concern, and it's well intentioned, but we see this pattern play out with practically every technology across every generation.

RIKKI: I agree that when we look back on history, there are a bunch of laughable concerns, like women losing their morals because they're riding bicycles or novels decaying all our values. At the same time, I wonder if there is a bit of survivorship bias. Are there not some dangers associated with the internet and social media that might be unprecedented, and that you might be especially concerned about for the safety and psychological well-being of children?

ADAM: There's absolutely some survivorship bias, and I'm equally critical, if not more critical, of those who naively say everything is fine, social media is great, and there are no downsides whatsoever. Everything has trade-offs.

Are there systemic mental health harms corrupting a whole generation of youth? I think that's an overstatement of the evidence.

Are there real harms and challenges we have to navigate, and are there trade-offs in terms of where we are spending our time? Absolutely, and I think that's the conversation we should be having.

RIKKI: Heavy social media use may be correlated with mental health problems, but is there any evidence that the relationship is actually causal?

ADAM: Causal is the key word, and this is why it's such a hard conversation to have. It's true that the kids who spend the most time online, including my younger self, are the most anxious, depressed, and lonely, but it's not as though you take an otherwise healthy child and give them a smartphone and they come out more anxious, depressed, and lonely. In most cases, it's kids who are

already struggling socially who are seeking out connection and validation online. So, there's a robust correlational relationship, but people disagree on what the causal factors are. I look at it like it's a combination of both. I think most of the effect is explained by personality and existing differences that lead some people to seek out social media and others not to, and then on social media, what the causal research does bear out, though it's limited and still very new, is that being on social media or being on a screen is not the same thing. A lot of this research very crudely measures screen time, and you don't see an association. But that makes sense because you could be watching educational videos on YouTube, or you could be catching up with your family or friends who moved away years ago, and experiencing very enriching benefits. Or you could be watching literal brain rot and experiencing the downsides of that, or you could be being cyberbullied. Crude measures like screen time don't capture that.

When you look at the studies that measure what you are actually doing, intuitively we see what you'd expect. We see that if you're doing prosocial activities online or if you're learning, that's beneficial. We especially saw this during lockdowns in the pandemic, when people were using online platforms to engage with preexisting friends and loved ones. That had a very protective effect on mental health. But again, for those who are using it to get in fights on Twitter or consume the brain rot–style slop that really is not educational, and it's coming at the opportunity cost of being able to invest your brainpower into something more enriching, you do see more negative effects there.

RIKKI: In your expert opinion, what is brain rot?

ADAM: I don't think there is such a thing as an expert opinion on brain rot, but I can give you my Gen Z opinion. Brain rot is the type of content that makes you feel worse after you consume it: passive consumption of things you don't even care about out of boredom, "rage bait" that makes you angry, or fighting with people online. That's the type of content and behavior people should avoid.

RIKKI: If it's not social media causing an observable increase in the percentage of kids reporting mental health issues, then what is behind that trend?

ADAM: There is a very real, observable increase in depression and anxiety, particularly in young people, and more mysteriously, it begins right around 2010. So, some critics will say, "Well, that's right around the time that smartphones and social media came onto the scene. What else could be causing it?" As I've written about in my mental health policy research, we also saw the introduction in 2010 of mental health parity laws associated with the Affordable Care Act, which required insurance companies to start covering mental health care at parity with physical health care. Previously, they were able to discriminate or able to choose whether or not to include them. That change created a strong incentive for expanding the market for mental health care. The other thing we saw around the same time is the expansion of psych manuals that are used to define mental illness. It's easier to diagnose most conditions, and we have a greater culture of therapy-speak now.



Rikki Schlott, a media fellow at the Cato Institute and columnist at the *New York Post*, has reported extensively on how Gen Z is navigating a rapidly changing digital world.

Many children are self-identifying online with mental illness. If I think social media has any causal role at all, it's not necessarily that the screens or the online content are directly harming mental health. It's that it's changing the language with which we approach mental health, because there's no objective line between ordinary worry and clinical anxiety, or ordinary sadness and clinical depression. Different experts should be conservative and consistent with the labels, but in practice, you see tremendous diversity. For the same patient with the same symptom presentation, one psychiatrist or therapist might diagnose, and another might say, "This is still a high level of ordinary stress, and I'm not going to go ahead and assign a diagnosis." But in practice, there are incentives to assign the diagnosis because they're necessary for insurance reimbursement—it's what economists call supplier-induced demand.

Even caffeine withdrawal is in the *Diagnostic and Statistical Manual of Mental Disorders* (DSM) as a diagnosable condition. The DSM has expanded to include over 300 forms of psychopathology. Most people would look at that and recognize it as absurd. We shouldn't be pathologizing that. Prolonged grief disorder is another. Now that's not to say that someone experiencing the death of a loved one can't be plunged into major depression or serious psychopathology, but we already have diagnostic codes for that. When you're able to diagnose things like grief or caffeine withdrawal, or gambling or video game addiction, which is another one that's been proposed, or social media addiction—what



Psychologist Adam Omary argues that today's panic over social media and smartphones echoes earlier fears about new technologies: "We see this pattern play out with practically every technology across every generation."

you're really doing is pathologizing ordinary behavior. That's not to defend all this behavior and say everyone should develop these unhealthy habits, but it's to say that I look at it like junk food. We don't pathologize or ban certain junk foods, even though we know that people can develop very unhealthy relationships with them. And even when it comes to minors who perhaps can't consent or plan their lives in the same way, we let the decisions fall onto parents. I think social media is like a type of junk food, and we should entrust parents to make responsible choices for their children, and we should have a responsible conversation about what the upper limit is and where the harms are.

RIKKI: I feel like everyone I know wants to self-diagnose themselves with everything under the sun. But at the same time, I have struggled with the fact that over that same post-2010 period, there actually was a measurable increase in self-harm and suicide, so there's obviously some subset of young people who are especially struggling recently. How do you square that?

ADAM: Self-harm and suicide are some of the most objective indicators we have of psychological suffering that don't shift with the diagnostic labels, and you're right that young girls have been self-harming more, particularly within the last two decades. Although that's only in the United States, and we don't see the same rise in self-harm in parts of Europe that have seen similar increases in depression and anxiety. I think that's one piece of evidence that there are some shared factors, whether it's financial incentives leading to overdiagnosis or cultural factors leading to how we conceptualize the distinction between ordinary stressors and clinical psychopathology. It's unclear why the United States stands out in terms of objective measures of self-harm, but I think if it were to be the screens, we should see that across the developed world, and we don't.

RIKKI: Should we be concentrating so much on the issue of mental health instead of other problems associated with social media use, like decreased socialization, poor sleep, or a worse attention span? Do you think the displacement of some of the wholesome activities young people might have been doing in another generation is having a meaningful negative impact, even if it's not due to social media itself?

ADAM: Right—I think insofar as there are real harmful effects, most of them are not direct harm from what's on the screen, but opportunity costs of not going outside or socializing as much. I think the best research on potential harms is looking at attention span and education outcomes in schools. So, where we don't have causal data in a lot of these social media studies, it's easy to get quasi-causal data looking at schools with quasi-randomized control trials. For example, you take two schools within the same district and control for other environmental confounders—one school has a smartphone ban and one doesn't. If you see reliable changes in either test scores or mental health, or cyberbullying rates or another measure, then you can be reasonably confident that the smartphone ban is having an effect. And when it comes to mental health and even bullying, there's no effect. When it comes to test scores, you do see more noticeable change.

So, even there, people will say phones are harming people's brains and their attention spans. And I think—this is coming more from an evolutionary neuroscience background—the brain is a computer that has a finite amount of processing power, and it's also kind of like a video game. You have different skill trees that you can load points into, and everything is trade-offs. So, while we're seeing decreases in the types of sustained attention necessary to perform on standardized tests, we're also seeing increases in multitasking ability, executive function, and task switching. Kids are really good at that, especially kids who play video games. I'm not here to say one is better and one is worse. But fundamentally, we have the same brains. If anything, from a developmental neuroscience perspective, today's kids have better-performing brains than ever before because nutrition is largely better compared to most of human history.

RIKKI: I think one place we will definitely agree is that the legislation that has been proposed to tackle this problem is not sufficient and not a very good answer to this issue. Obviously, a few countries around the world, including the UK and Australia, have already made sweeping moves to get kids off social media. What have the unforeseen consequences of those laws been?

ADAM: Jennifer Huddleston and Cato's tech policy team have done excellent work on this, but these bans are largely backfiring. Kids are smart. They know how to download VPNs to route their traffic through less regulated platforms—ironically, bypassing a lot of the safety features that major social media companies already have, just due to social pressure and competitive pressure.

And the age gating introduces severe privacy risks for adults because, in principle, if we could just restrict usage for kids, I think a lot of people would be on board with that. But there's no way to do it without verifying the identity of the user, which either means

you have to collect IDs, which introduces unconstitutional privacy risks, or implement facial recognition software, which also has privacy concerns. But kids have also learned how to game the system there, so I think in practice these bans haven't worked.

Kids still report high levels of social media use because of these backdoors, and where they have real harms is by limiting freedom. In the case of the UK ban, even YouTube and educational videos were blocked for minors under 16. I think even the legislators did not intend that. They're concerned about cyberbullying. They're concerned about harmful content that they think minors shouldn't be accessing. We can agree on that, but I think the best way to do it is to encourage this type of serious discussion among parents and among individuals, so we can self-regulate.

RIKKI: One of the biggest concerns I have with these laws is that they impose this imaginary number where social media becomes totally fine and good for you, and you don't actually develop those online literacy skills that are so necessary once you turn 16. But a lot of these bills are also coming from a sense that there is actual addiction to social media, which I know is something you disagree with.

"We just need to have a culture of responsibility and awareness of what the healthy habits are and what the potential harms are, and that conversation doesn't have to be limited to just adults in the room."

ADAM: Addiction has a very specific clinical meaning, and this is part of the same debate that's been happening across behavioral science. Take gambling addiction—many people, including myself, don't think we should call it addiction in the medical sense because medical addiction refers to physiological dependency. That's a unique feature of drugs that you can't have for behavioral addictions, which are really just strong habits. It's true that to some degree, it's the same dopamine system in the brain that's involved in addictive drugs like opiates and in habits that result in the same type of dopamine release and pleasure. But with drug addiction, you experience withdrawal, which again has a technical medical definition of physical symptoms that can be life-threatening. In the case of what we call withdrawal from behavioral addiction, it's very difficult psychologically, but there's no life-threatening withdrawal symptoms because of physiological

dependence. So, I think we should be very careful using that language, and it has legal significance, which I think is why a lot of this legislation is advancing, because they're framing it as a medical issue that we can't simply leave to self-control. You see the same thing in psychiatry with the insanity defense. As soon as you open the door to the idea that there's some class of people who, because of a specific set of psychological characteristics, can't regulate their own decisions and therefore the government has to step in to do it, that's a severe threat to liberty.

RIKKI: So, what would you say to parents who might agree with you that the laws are not adequate, but they feel intuitively that social media is not a good thing for their children, or they're trying to figure out how to develop those boundaries?

ADAM: Again, it's like junk food—everything in moderation. When it comes to social media, it's trickier because there's a bit of a collective action problem. There are many parents who, if no one else had social media, would be completely fine regulating it in their household, but because they're worried about the child's well-being, it's fear of missing out (FOMO). It's FOMO that if their child is the only one who doesn't have a phone or doesn't have social media, then they're going to be bullied and picked on, and maybe that's going to have even worse consequences than social media. That's in a lot of parents' heads, and I can sympathize with that. You don't need government legislation to address that. What you need is a broad cultural shift, and it starts by talking about it more.

RIKKI: For members of Gen Z or Gen Alpha who are trying to find their own way and build their own healthy habits when it comes to social media, what would your advice be as someone who played 10,000 hours of video games?

ADAM: As you mentioned, we can't pretend there's a magical age at which point kids suddenly know everything they need to know to regulate their own behavior. It has to start early, and I have enough respect and belief in today's kids, including Gen Alpha, to say that adults and policymakers shouldn't be having these conversations over the heads of children as though they aren't agents with skin in the game.

You and I both started using these technologies at age nine or younger. Even in middle school, we can acknowledge that some things you do online make you feel good, some things don't. Just like with junk food, some things you eat and then you regret eating them.

We all do it—I'm the psychologist talking about the harms of this and I still do it sometimes. I think we just need to have a culture of responsibility and awareness of what the healthy habits are and what the potential harms are, and that conversation doesn't have to be limited to just adults in the room. ✦

ABOUT THE AUTHOR

Rikki Schlott is a media fellow at the Cato Institute, a columnist at the *New York Post*, coauthor of *The Canceling of the American Mind*, and author of the forthcoming *Nothing Serious: How Modern Love Lost Meaning (and How We Can Restore It)*.