

DISCONNECTED

How to Protect Your Kids from the Harmful
Effects of Device Dependency

THOMAS KERSTING



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I would like to thank my beautiful wife
and two wonderful children for all their support
and encouragement in everything I do.

CONTENTS

Introduction 9

PART ONE: The Impact of Electronic Devices on Kids' Brains 13

1. Our Changing Reality: Acquired ADHD, Anxiety, and Neuroplasticity 15
2. Cyberspace Children: A Full-Time Job 37
3. Social Media and the Development of Self-Esteem 57
4. The Multitasking Brains of Kids 77

PART TWO: Technology's Effect on Social, Emotional, and Family Growth 91

5. Gamer Kids: The Great Human Disconnect 93
6. Parenting from a Distance 111
7. How Handheld Devices Impact Emotional Development 131
8. The Digital Classroom: How Tech Impacts Learning 145

PART THREE: What Parents Can Do: Tips, Techniques, and Solutions 155

9. Raising Our Children to Be Leaders Instead of Followers 157

8 Contents

- 10. Fragile Kids: The Media's Impact and What We Can Do about It 171
- 11. Using Mindfulness and Meditation to Reconnect Our Disconnected Kids 181

- Acknowledgments 196
- Notes 197

INTRODUCTION

I was a helmetless, Big Wheel–riding child of the 1980s. I walked a half mile in the dark to the bus stop each morning, faced the occasional bully, threw eggs at other kids on Halloween, and rode my Huffly all around town when I was ten. I played tackle football with no pads and baseball without a heart protector. I sat in the back seat of my mom’s Ford Granada without wearing a seat belt. I was outside all day long in the summer along with the other kids in my neighborhood. Nothing was planned out for us, and the only thing we cared about was adventure. We had Ataris and Nintendos but spent much less time playing them than we did playing outside with each other. Handheld devices did not exist, so my friends and I were never distracted from the fun we had together. When it was time for dinner, we were home on time and ate with our families—every night. We had few worries and were just, well, kids. And we all survived.

Today, my greatest source of pride is fatherhood. It is the most rewarding thing in the world but also the most frightening. The world I once lived in as a child is much different

from the one my children live in today. In many ways this is a good thing. My kids always wear their seatbelts, never get on their bikes without a helmet, and do not throw eggs at other kids on Halloween. Yet the dangers you and I faced as children pale in comparison to the one our kids are facing. This danger is changing the very meaning of what it means to be a kid and even what it means to be a human—and this danger is wounding our children’s mental, emotional, and social health like nothing we’ve seen before.

Several years ago my family and I enjoyed a wonderful trip out West. We visited a number of national parks including Yellowstone, Bryce Canyon, and Zion. It was the vacation of a lifetime. The flight back home to LaGuardia Airport in New York was long, and I remember feeling eager to exit the plane, get through baggage claim, and arrive home. When we finally disembarked and started making our way through the terminal, I stopped in my tracks. I felt like I had just entered the Twilight Zone. Screens were everywhere, and not just in the palms of the people I passed. Flashing tablets loaded with social media apps and games were perfectly positioned in front of every barstool and restaurant seat. I’ve spent a fair amount of my life in airports, and I’d met people from all around the world and learned so much while sipping a beer from one of those stools. The airport had replaced these experiences with machines. At the time of our trip, I had been speaking for several years to parent groups about the negative effect that too much technology was having on our children’s well-being, so I was ahead of the curve, but this experience was different—this was technology on steroids.

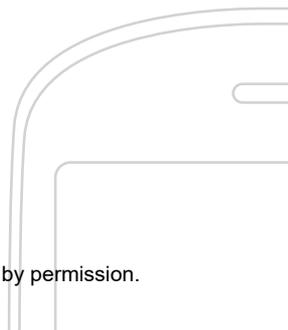
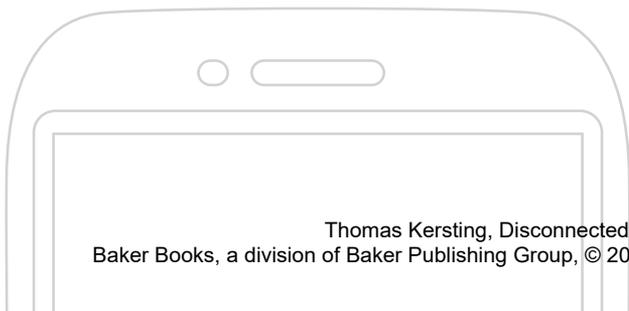
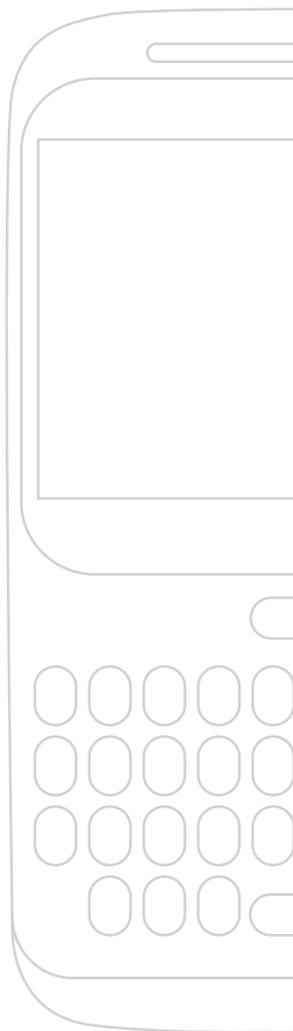
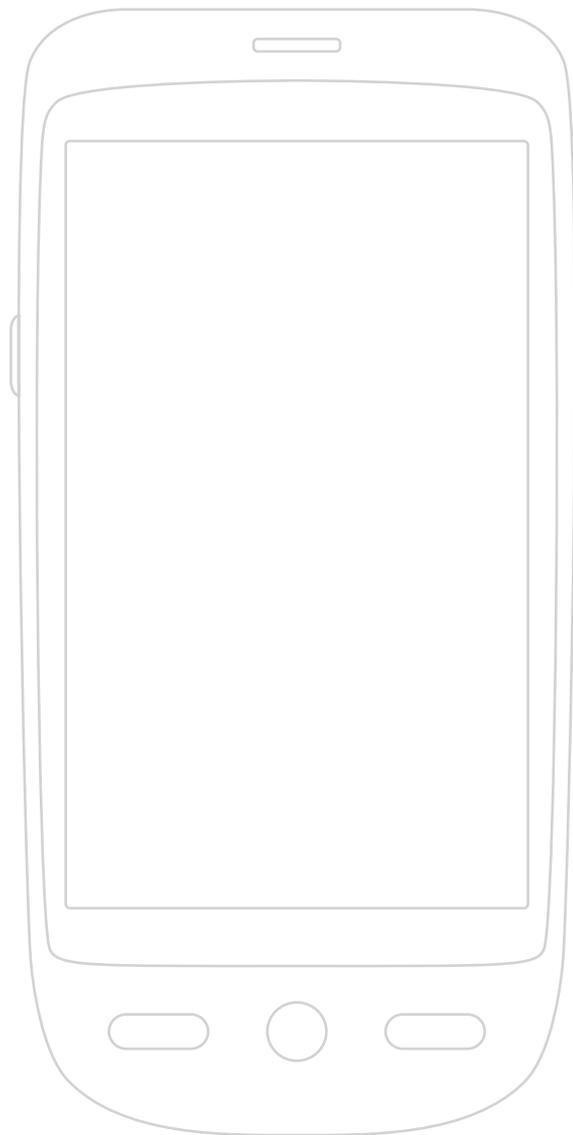
As our family continued our long walk to the baggage claim area, I felt helpless. I hoped that what I witnessed was

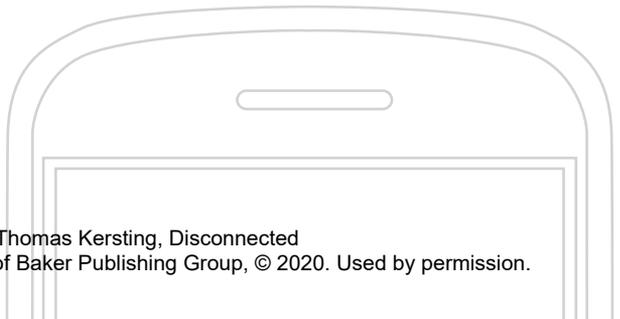
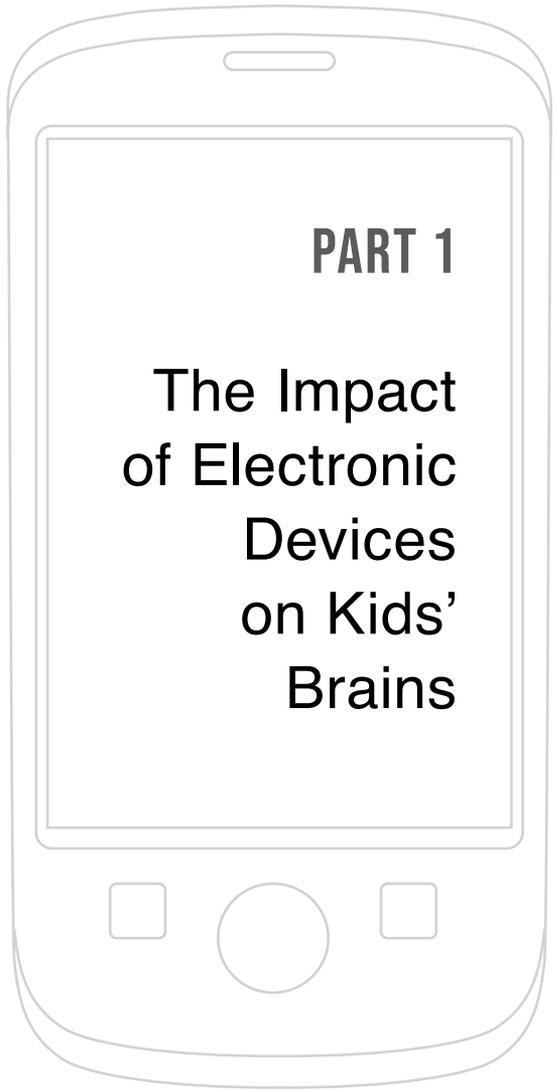
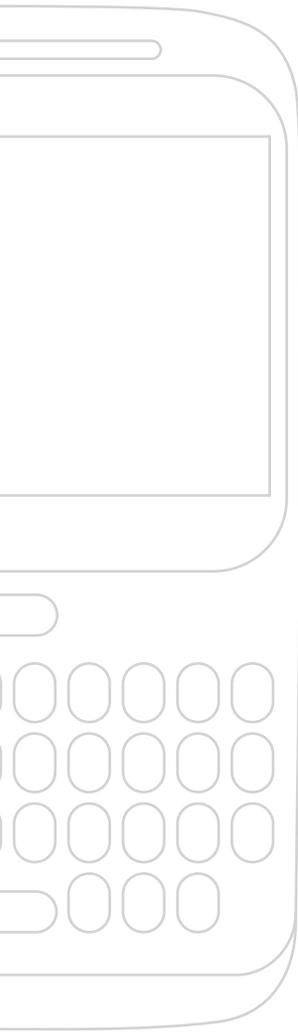
an isolated case, limited to the terminal we had flown into, but it wasn't. As we walked past more restaurants, bars, and waiting areas, the scene was the same—nearly everyone was connected to a screen and disconnected from each other. Strangers remained strangers.

Although I was reaching a lot of people through lectures, counseling sessions, and television appearances, I knew I had to do more to help parents understand the challenges their children will face in our hyperconnected world. That is why I wrote this book. It is a call to action.

The cold hard fact is this: *our children do not have control over electronic devices and screens; electronic devices and screens have control over them.* Much of what you will read in the coming pages is fascinating and also frightening, but if you stick with me you will see the light at the end of the tunnel. I'll share with you real-life stories from my experiences as a private practice therapist and public school counselor. I've also included scientific evidence and research-based studies to support my claims, along with valuable tips at the end of each chapter.

Screens are the cause of many of our children's problems, ranging from anxiety disorders to family problems to school and social problems. Unplugging our children and ourselves will not be easy, but it is possible. And in the final section of the book I provide a host of strategies you can utilize to help pull your family away from the screens and closer to each other.





CHAPTER 1

Our Changing Reality

Acquired ADHD, Anxiety, and Neuroplasticity

Since 2002 I've been a member of the Intervention & Referral Services (I&RS) committee at a local high school where I work as a counselor. The role of the committee is to provide academic accommodations to students with temporary or permanent disabilities when there is evidence that the disability is affecting the student's learning. Some common disabilities the committee has reviewed over the years include concussions, diabetes, Crohn's disease, and specific learning issues.

During the 2009 school year, I noticed the types of disabilities referred to I&RS had started to change. We began receiving countless referrals for teenage students diagnosed with Attention Deficit Hyperactivity Disorder (ADHD). ADHD is a neurological condition that causes a combination of the

following symptoms: inattention, disorganization and lack of focus, and sometimes impulsivity and hyperactivity. These symptoms are very noticeable by age five, and the average age at diagnosis is eight years old. Strangely, these referrals were for fourteen- and fifteen-year-olds newly diagnosed with the disorder.

As a school counselor by day and private practice therapist by night, I had twenty-plus years of experience working with ADHD children and their families. This sudden influx of attention deficit teenagers didn't make sense to me. Was it possible that this many parents and teachers had missed all the symptoms when these kids were in elementary or middle school? How could this many kids possibly have slipped through the cracks?

I started to aggressively research this new ADHD phenomenon and even consulted with neighboring school districts. My colleagues were also seeing precisely what I was—an exorbitant number of teenagers being diagnosed with the disorder. My research led me to the work of Dr. Gary Small, professor of psychiatry and director of the UCLA Longevity Center at the Semel Institute for Neuroscience and Human Behavior. Dr. Small is one of the world's top innovators in science and technology. In 2007 Small began researching technology's impact on the brain and discovered that when research subjects spent as little as an hour a day online, the activity patterns in their brains changed dramatically. According to Small, "The human brain is malleable, always changing in response to its environment."¹ He explains how sensitive the brain actually is. The many pieces of information the brain takes in, in the form of sights, sounds, feelings, and other experiences, causes a complex cascade of

neurochemical electrical consequences. With repeated stimuli the neural circuits in the brain become excited, and if other neural circuits are neglected they will be weakened. A young person's brain, which is still developing, is particularly sensitive to the stimulations offered by modern technology.

Dr. Small discovered that kids' time on powerful electronic devices was actually changing their brains, something known as *neuroplasticity*. Neuroplasticity is the brain's ability to reorganize itself by forming new neural connections, leaving behind past traits and developing new ones. Could all of this screen time, in changing kids' brains, cause older children to display inattentiveness, lack of focus, and disorganization—all symptoms of ADHD? Yes. According to Dr. Elias Aboujaoude, director of Stanford University's Impulse Control Disorders Clinic, "The more we become used to just sound bites and tweets, the less patient we will become with more complex, more meaningful information. And I do think we might lose the ability to analyze things with any depth and nuance. Like any skill, if you don't use it you lose it."²

Dr. John Ratey, Clinical Professor of Psychiatry at Harvard Medical School, has coined the term *acquired attention deficit disorder*, describing how screen time was rewiring kids' brains.³ The word *acquired* fascinated me because it meant that potentially thousands of teenagers were being misdiagnosed with a disorder they might not have and were often being prescribed powerful medication for. I decided to dig a little deeper with my caseload of recently diagnosed ADHD students at the high school. I gathered records and notes from their elementary and middle school counselors and teachers and, as I had suspected, I couldn't find any evidence of ADHD symptoms at earlier stages in their education.

Although Dr. Small's research is too new to be conclusive, he believes that in addition to attention deficit symptoms, too much time online might cause a host of other issues ranging from trouble maintaining eye contact to difficulty interacting with others. And in the decade since Dr. Small's groundbreaking research, many other studies have come out that link excessive screen time to anxiety, depression, and behavioral issues. One such study, conducted by Dr. Michael Van Ameringen, evaluated 254 freshmen at McMaster University in Ontario, Canada. Thirty-three of the students met criteria for internet addiction while 107 met the criteria for problematic internet use. The students' mental health was also assessed during the study, and those who met the criteria for internet addiction showed higher rates of inattention, impulsivity, anxiety, and depression.⁴

The implications of this research have lined up with my experiences working with teens as I have seen an incredible increase in attention problems and mental health issues. Recently I spoke to the freshman health classes at my high school about mental health. There were a total of nine classes, and the teachers were doing a lesson on teen depression and suicide. The lesson started with a short video followed by a twenty-minute class discussion led by me. As an experienced public speaker, I was looking forward to this. In each of the nine classes, I delivered a high-energy message about mindfulness, personal power, motivation, and success. I believed if any of my nine class lectures was made into a TEDx talk it would have gone viral; that's how good I felt about each one. Unfortunately, the students' demeanors told a different story. Few of the students paid attention to my lecture—and it had nothing to do with me. My energy was

off the charts and my message was spot-on. If you saw the body language and facial expressions of these kids while I was talking, you would have thought I was dangling a pocket watch in front of them and swinging it back and forth. They looked like they were in a hypnotic trance. Many of them had their heads down and the majority looked like they hadn't slept in a week.

I went back to my office feeling a bit defeated. What was wrong with all of these kids? It's not like I hadn't done this before. I'd spoken to many classes over the years, and nothing had resembled this. Is this what teachers have to deal with every day? Then it hit me. The ninth graders I'd just spoken to were the "new" generation—the generation that received their first smartphones at earlier ages than those students just a couple of years ahead of them. These freshmen already had several years of smartphone addiction, social media dependency, and mental hijacking under their belts. And it showed. They were different. Their brains were different.

If you've ever seen an image of the human brain, you've likely noticed those electrical impulses that resemble tree branches extending from the outer wall of the brain. These tree branches are known as *neuropathways*, and they play an important role in human functionality. Each neuropathway influences how we communicate, cope, focus, concentrate, and socialize, just to name a few crucial functions. For example, if you've ever taken away your child's video game console or smartphone, the way they cope with this punishment has a lot to do with the development of their neuropathways. A child with healthy coping and emotional skills will naturally get a bit upset or be disappointed by the punishment, but a child with unhealthy coping and emotional skills might go

into an uncontrolled fit of rage. And it seems that more and more children are displaying the latter.

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It takes a lot for a brain to change its wiring—typically three or more hours per day of consistent stimulating activity. Three hours per day might sound like a lot of stimulation, and it is. But according to a 2015 survey conducted by CNN, the typical thirteen-year-old spends a lot more than three hours per day engaged in highly stimulating brain activities.⁵ Try eight or more hours per day, on average, seven days a week, spent staring at the bright lights of smartphones, tablets, and computer screens. The result: a new brain. A brain that is lit up like a Christmas tree; a brain that has literally grown new branches in order to adapt to the environment of cyberspace; a brain that is hyperfocused on tweets, snaps, and likes and not very focused on Mrs. Smith's classroom lectures or mine; a brain that is brilliant at communicating through texts and snaps but struggles with face-to-face communication. Those neuropathways have languished. Frightening!

A December 2015 study in the *Journal of Clinical Psychiatry* found that ADHD diagnoses have soared 43 percent in the United States in the first decade of this century, with more than one in ten youths now diagnosed with the disorder. The number of teenagers diagnosed with ADHD rose 52 percent between 2003 and 2015. And while ADHD is traditionally more common in boys than girls, the study also found a 55 percent increase in girls being diagnosed with the disorder.⁶ This particular study was not designed to look for the underlying reasons for the changes, but it referred to past studies and suggested that the rise may be attributed to

changing special education policy or increased public awareness. I disagree. I believe the increase in ADHD diagnoses has everything to do with the amount of time children are spending staring at screens.

A more recent study published in the *Journal of the American Medical Association* in July 2018 sought to determine whether the frequency of using digital media among fifteen- and sixteen-year-olds without significant ADHD symptoms was associated with subsequent occurrence of ADHD symptoms during a twenty-four-month follow-up. Among the 2,587 adolescents followed over this two-year period, there was a statistically significant but modest association between higher frequency of digital media use and subsequent symptoms of ADHD.⁷

CHANGING LANDSCAPES

When I first discovered this research into ADHD and neuroplasticity in 2009, I felt the need to educate parents, so I began lecturing. I called my lecture “Digitally Distracted: Parenting in the Age of Technology.” While the bulk of my discussions involved brain neuroplasticity and ADHD symptoms, I also talked about how chronic video game playing, internet surfing, and television watching were affecting children in other ways. I included a lot of statistics that I’ll discuss in the next chapter and warned parents that if they did not get a grip on their children’s and their own media diets, we would see a surge in mental and emotional health disorders in the near future. Although the parents in attendance were fascinated by my lecture and told their friends about it, few took the necessary steps to change their children’s

media habits or their own. Looking back, I don't think they were ready for this groundbreaking information. After about two years of lecturing, I stopped. I became occupied with a television series I was hosting and focused on raising my own children. But I could not stop thinking about the problems that digital media was creating, problems that worsened as the next several years unfolded.

Around 2014 I felt the need to get out there and start speaking again. I couldn't sit on the sidelines anymore. I had to help parents and their children. It was my calling. So I began lecturing again locally. I'm glad I did, because now I speak all over the country at schools, parent groups, churches, and professional organizations. There is still a lot of work to be done, and I'm on a mission to do it.

The future problems that I predicted during my earlier lectures are now squarely upon us. More kids than ever before are emotionally fragile and lack critical coping skills because they are not spending enough time engaged in the real world, person to person. No matter where you go, whether it's the beach or a ball game, nearly everyone is disconnected from one another and connected to a handheld device instead. Our heads are buried in cyberspace, and face-to-face communication is slowly becoming a thing of the past. This lack of face-to-face interaction, particularly for children, reduces social and communication skills, making it difficult for them to handle the everyday bumps in the road of life. The end result: a substantial increase in stress, anxiety, and self-esteem issues, things I'm dealing with in record numbers.

Although my I&RS committee still receives referrals for students who are misdiagnosed with ADHD, over the last few years the pendulum has swung again. A whole new set

of disabilities has emerged: anxiety disorders. Anxiety is now the number-one type of disability we deal with. And at my private counseling practice, I now receive more referrals for middle school children with major anxiety disorders over a one-year period than I used to receive in a ten-year period. At my high school I receive more calls from the nurse's office each week to help students who are having anxiety or panic issues than I used to receive in an entire school year. Do I think this has something to do with the amount of screen time these kids are immersed in? You better believe I do.

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I want you to imagine the life of a typical sixteen-year-old girl for a moment. Let's call her Sarah. Sarah's mom enters her room each morning to wake her for school, because Sarah somehow slept through the buzz of her alarm clock even though it woke up the neighbors. Sarah didn't sleep much the night before because she couldn't pull herself away from the endless group chat she was a part of. After her mom's third or fourth attempt to wake her, Sarah finally emerges from her deep sleep. Her first instinct, before she has even realized she's awake, is to reach for her phone, which is on her nightstand within arm's reach. After she checks it, she yells at her mom and reluctantly gets on her feet. She proceeds to brush her teeth, change into her clothing, and eat breakfast as she catches up on the text messages and social media gossip left over from the night before. Finally, Sarah's mother is able to hurry her into the car in an effort to prevent her from being late to school. During the short commute, Sarah moves her thumbs vigorously across the screen of her smartphone, completely oblivious to the world around her,

including her mom. By the time her mom has reached the drop-off point, Sarah has already sent and received dozens of text messages and snaps. As Sarah exits the car and walks toward the entrance of her school, her head is down, her eyes are fixated on her smartphone, and her thumbs are texting away. She never says thank you or goodbye to her mom. She is too distracted.

Unfortunately, this is an accurate portrayal of many modern-day kids. Because all of this has happened so quickly we struggle with ways to handle this behavior. We just don't know any better. For millions of boys and girls like Sarah around the world, this type of inappropriate behavior isn't just an occasional thing; it's an everyday thing. Most kids spend nearly every waking second of every day, seven days a week, glued to a screen, completely oblivious to life on earth. Their brains are disconnected from the world around them, making it difficult for them to handle real-life events and adversities. And it is starting earlier and earlier. The average age of first smartphone issuance is now 10.3 years old. This is crazy. It's way too young; there are too many risks. Let me illustrate.

You have a daughter who has just started middle school and you just bought her first smartphone. She is excited, but you have a few knots in your stomach. You set the ground rules, and everything is fine for the first couple of months. Your daughter is enjoying her device, and there aren't any hiccups except for having to tell her more than once that her time is up. But then things start to change rapidly; your daughter isn't the same. She's constantly staring into her phone, hypnotized by the glowing light. She's giving you an attitude all the time and seems addicted to the bright little box.

Then the problems start. As the months roll on you find yourself constantly having to tell her to get off of her phone, which always leads to an argument. Once an avid reader, your daughter rarely opens a book, and homework takes a back seat to everything else. Then the report card comes in and voila!—her grades have dropped. Once again an argument erupts, and you wonder what has happened to your wonderful, happy child. Your daughter is stressed all the time, and so are you. The tension in your home is unbearable, and you just don't know what to do. You want your life back.

Snapchat, Tiktok, and Instagram enter her life. Soon they become her life. She spends hours every day posting pictures, checking for likes and follows, trying to keep up with it all. Every time you bring up your concerns she lashes out at you. You also notice that your daughter seems sad and often anxious. You wonder if it's just hormones. That might be part of it; after all, adolescence can be a difficult stage of development for many kids. Your child is changing biologically and emotionally. There is nothing easy about this developmental stage. Children are trying to figure out who they are, where they fit in, why they look weird, and what friend group they are a part of. But social media complicates this.

Social media adds another layer to the insecurity equation—a big layer. Your already insecure daughter now has a platform whereby she has constant access to all of her peers' perfect lives, a platform for comparing herself to others, a platform that provides an avalanche of shallow feedback in the form of likes and streaks. All of this, combined with adolescence, creates the perfect storm. Severe anxiety, insecurity, and even depression can start to surface. It is at this

point when parents contact me at my private practice for help. The road ahead will be a long one.

In March 2018 Dr. Jean Twenge and I were invited to speak to a group of mental health professionals in Bend, Oregon. We gave separate lectures based on our research and experience about how screens and devices were impacting society. Dr. Twenge is a renowned research psychologist and professor at San Diego State University. She has conducted some of the most compelling studies so far about how screen time affects mental health. According to a 2017 study she led,

Adolescents who spend more time on new media (including social media and electronic devices such as smartphones) were more likely to report mental health issues, while adolescents who spent more time on non screen activities (in-person social interaction, sports/exercise, homework, print media, and attending religious services) were less likely. Since 2010, IGen adolescents have spent more time on new media screen activities and less time on non screen activities, which may account for the increase in depression and suicide.⁸

Twenge also wrote an op-ed in March 2019 entitled, “The Mental Health Crisis among America’s Youth Is Real—and It’s Staggering.” In it she says, “The first signs of a problem started to emerge around 2014: More young people said they felt overwhelmed and depressed. College counseling centers reported sharp increases in the number of students seeking treatment for mental health issues.”⁹ The article explains that although studies as far back as 2010 were showing increases in symptoms of depression and in suicide among adolescents, some researchers denied it. They felt it was overblown and that the data was insufficient. Those opinions have now

been debunked. A 2017 study about mental health conducted by the US Department of Health and Human Services used a representative sample of the general population, not just those who sought help for mental health issues. Overall they surveyed over 600,000 Americans, and the study's results are indeed staggering. Here are some of the highlights:

- From 2009 to 2017, major depression among twenty- to twenty-one-year-olds more than doubled, rising from 7 percent to 15 percent.
- Depression surged 69 percent among sixteen- to seventeen-year-olds.
- Feelings of anxiety and hopelessness jumped 71 percent among eighteen- to twenty-five-year-olds from 2008 to 2017.
- Twice as many twenty-two- to twenty-three-year-olds attempted suicide in 2017 compared to 2008, and 55 percent more had suicidal thoughts.¹⁰

What changed? Could it be that smartphones started to become mainstream right around 2008? That would mean that the twenty-two- and twenty-three-year-olds mentioned in the study were thirteen or fourteen in 2008, and most likely had gotten their first smartphone and started using social media.

The study also found that by 2017, one out of five twelve- to seventeen-year-old girls had experienced major depression the previous year, and that the suicide rate among eighteen- to nineteen-year-olds climbed 56 percent from 2008 to 2017. Because suicide is at a fifty-year peak, the average US life expectancy has gone down. The significant changes found

in the study are almost exclusively among teens and young adults, with very little change among people over the age of twenty-six.

Does that sound fatalistic? Let me assure you, I believe that many of the mental health issues I'm seeing are preventable. If parents could simply delay the age that they give their children smartphones and allow them to use social media, we would see different statistics. Many parents I meet around the country tell me that the biggest mistake they made was getting their child a smartphone. I've never had one parent come up to me after a lecture or email me to tell me that getting their child a smartphone was the smartest or best thing they ever did for their child.

We all know it's a bad idea to hand an eleven- or twelve-year-old a smartphone—but we do it. We give in to the pressure. We fear that our child will be isolated or left out if he or she is the only one without a phone. I get it! In fact, I'm living it! My daughter is a sixth grader and is one of only a few children in her grade without a phone. She pleads with me every day to get her one, and I say no. Call me a bad dad; that's ok. If I were to get her a phone I would be the world's biggest hypocrite. All we have to do is delay the age at which our children get these digital weapons of mass destruction or ensure they don't have any social media, and we wouldn't be having this conversation about the mental health and suicide crisis ripping through our society.

NEURAL PRUNING

Earlier in the chapter I talked about neuroplasticity, which is the brain's way of reorganizing itself and creating new

connections. Although it can have negative consequences, something else called *neural pruning* is even more concerning. Neural pruning is a natural and normal occurrence during adolescence; it's the brain's way of weeding out pathways that are used less often. If you've seen the movie *Inside Out* you'll recognize neural pruning as the process that occurs as eleven-year-old Riley tries to assimilate her family's move to a new city. Joy and the other emotions inside her brain fight against this neural pruning but finally accept it as part of the maturing process. But these changes in the brain aren't always positive. For example, if young folks spend more time communicating through a smartphone than they do face-to-face, the brain will weed out the neural pathways that are necessary for becoming good face-to-face communicators.

Although more research needs to be done about neural pruning, it might explain why a lot of young adults are struggling with simple skills like having a conversation with a stranger or interviewing for a job. A lot of my friends and colleagues in management positions often interview folks fresh out of college. They tell me that many of these job candidates are missing something. On paper they look great but in person they lack oomph and have poor communication skills. Sitting through a face-to-face interview seems unnatural to them. I also experience this at my private counseling practice. Many of the teens I counsel have a hard time making eye contact or seem a little bit more anxious than usual. A lot of my jokes seem to go right over their heads too. More parents than ever tell me that their children struggle to form friendships and are rarely invited to friends' homes or have friends over at their home. Could this growing crop of social and communication problems be the result of

neural pruning? Maybe! Ask yourself this question: If the neuropathways that are responsible for producing strong social and communication skills have been compromised, how is it possible to be, well, social?

Another issue I'm dealing with more regularly is poor coping skills. Over the last several years there have been an unprecedented number of meltdowns in my office from students who have received a low grade on a test or experienced a mean comment on social media. Could this have something to do with neural pruning too? I think so. The bottom line is this: more kids than ever before are struggling to communicate, socialize, or cope effectively with real-life matters because they are not living in the real world. I believe a short-circuiting effect has occurred in their brains, sending their emotions into a tailspin and creating a host of different mental and emotional disorders.

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When I was a graduate student in the late 1990s, I took a course called "The Biopsychosocial Perspectives of Drugs." The professor, Dr. Hamaerle, told us the following story about how addiction can change brain functionality.

One night a forty-five-year-old man was pulled over by a police officer for having a broken taillight. When he rolled down the window and handed the officer his license and registration, the officer noticed an overwhelming smell of alcohol coming from his car and asked him if he had been drinking. The man responded that he had not. Although the man wasn't slurring his words and showed no signs of intoxication, the officer asked him to step out of the car because he couldn't get past the strong smell of alcohol. The

officer conducted the appropriate field sobriety tests, which the man passed with flying colors. He showed no signs of intoxication whatsoever. The officer still could not dismiss the smell of alcohol permeating the air, so he brought the man to the station to conduct a Breathalyzer exam just to be certain.

At the time, the legal blood alcohol content (BAC) was .10 and anyone with a .10 or higher would be charged with a DWI. Keep in mind that for an average person a BAC of .20 would render them extremely intoxicated, a .30 would likely result in a coma, and a .40 would usually mean death.

This man's BAC reading was .62. Astounding!

How is it that this man was even alive, let alone showing no signs of intoxication? The following day, when the man was sober, he was released from his jail cell; it was then that he started displaying the classic signs of intoxication, including slurred speech, body tremors, and an inability to walk straight.

This story demonstrates the power of the human brain. Since the man was a seasoned alcoholic who drank excessively every day, his brain adapted to its new normal—being intoxicated. Sobriety was foreign to his brain and intoxication was normal. The story of the alcoholic is similar to my experiences with a lot of the children and teenagers I counsel. Because cyberspace is where they spend most of their time, the real world is a foreign place. Unfortunately when some of these youngsters reach adulthood they will end up like a former client of mine, whom I'll call Jan.¹¹

Jan was a twenty-four-year-old millennial I began seeing at my private counseling practice to help her with anxiety. I could feel her anxiety the moment I met her, before she even

said a word. She was an emotional wreck. Jan told me that she was always anxious and could not figure out how to get rid of this constant, uncomfortable feeling. She needed help. Although she was a college graduate, she worked part-time in a non-challenging job because it was safe for her; her anxiety prevented her from going out into the world and pursuing the kind of career her college degree would allow. As I got to know Jan I started to explore her screen time. I asked her to describe for me her normal routine when she got home from work each evening. She said that she would typically log on to her computer, scroll around on her smartphone, and watch television. I gave her a two-part daily assignment that I wanted her to try between sessions. First, I asked her to track her feelings when she was using an electronic device to see if she felt any anxiety during those times. Next, I asked her to sit in total silence every day for fifteen minutes, without any distractions getting in the way, including electronic devices. She explained to me that she had never done anything like this before but agreed to give it a try.

When Jan returned the following week she told me that she did not experience any anxiety while using her electronic devices, which is what I had expected. During her fifteen-minute meditations, however, while she was disconnected from electronics, she experienced extreme panic and anxiety and was only able to do the assignment twice. I concluded that because Jan was constantly connected to the cyberworld, the real world had turned into a frightening, foreign place for her. Look at it like this: What would happen to a lion if it were released into the wild after having lived its entire life in a cage? The lion would not survive because its natural habitat would now be the cage, not the wilderness.

The wilderness would seem foreign to the lion. Jan was no different. She functioned just fine in her cyberworld but not in her real world. It would take a lot of work to get her brain to readapt to the real world.

UNNATURAL HABITAT

Many of the younger people I counsel are future Jans. As I mentioned earlier, not a day goes by that I'm not calming down a high school student having an emotional breakdown over something trivial. Later we'll discuss what it takes for children to strengthen their emotional intelligence and how we can help them. But for now I will leave you with a few examples of some teenagers I counseled in the days just before writing this chapter.

One day I received a phone call from a distressed parent whose teenage son needed to be assessed for suicidal ideation before he could return to school. Luckily, I was able to get the family in for an appointment that night. They seemed like a very well-rounded family, yet the boy was emotionally distraught. Here is what transpired: the boy's father found inappropriate content on the boy's phone and took it away from him as a punishment. The next morning, the parents found a lengthy note from the boy that resembled a suicide note. The boy felt that he could not go on living without his phone as he would "have no life" and no friends. That night, they were in my office.

The next day, I received a call from a very concerned mom about her daughter, who'd had an emotional breakdown because she discovered on social media that her best friend was getting together with another girl; she was afraid her best

friend was going to drop her. As my conversation progressed with the mother, she told me she had read some material her daughter had secretly written. The girl expressed that she felt unpopular, ugly, and uncomfortable around people and that she wished she would die. When I asked the mom about her daughter's social media use, the mom told me that her daughter was on social media and her smartphone 24/7.

Then a coach friend of mine told me a story about something that had happened to her over the weekend. Her team had taken an overnight trip to Connecticut, and the owner of the facility where they stayed and played their games had a rule: no cell phones allowed during the entire trip. The owner felt that they were a distraction to the players and affected team camaraderie. A parent of one of the players threatened to sue the owner because he felt his rights were violated—he couldn't contact his daughter on her phone in the event of an emergency. I wonder if this man's daughter struggles with fear and worry.

I want to make one thing clear: I do not think an hour or two of screen time each day is bad. But eight hours per day is. Look at it like this: if you exercised for an hour or two every day that would be a good thing; if you worked out hard for eight or nine hours a day that wouldn't be.

Before we move on to the next chapter, I want to share one last story. Four years ago I accompanied my nine-year-old daughter's class on a field trip to a raptor hospital. The instructor showed the class a beautiful barn owl that had been injured when it was young. The barn owl had lived at the facility for a number of years and was very accustomed to humans. The children loved it. One of the children asked the facilitator why the owl had not been released back into

the wild. The facilitator explained that although the owl's injury had healed, the owl would die if it were released into the wild because it would not know how to hunt for prey and would therefore starve. Essentially, the owl would not know how to survive in its natural habitat.

Our children aren't much different from that barn owl. No, their electronic devices aren't going to kill them, but they have the capacity to inhibit them greatly. We need to make sure that our children are developing in their natural habitat, the physical world around them, not the cyberworld. Children are meant to be playing outside with other children, getting dirty, and scraping their knees. Their imaginations beg them to look up at the sky and make shapes out of clouds. That is what they were born to do. So let's make sure they spend less time indoors staring at screens and more time outdoors staring at the sky.

CHAPTER TIPS

1. The American Association of Pediatrics recommends no more than two hours per day of total screen time for entertainment purposes for children over age eight. Stick to this recommendation and many of the scary things I explained in this chapter will likely never occur.
2. Delay the age at which you purchase a smartphone for your child to at least late adolescence. The longer you wait, the better off you and your child will be. Don't worry about what other families are allowing. This is your family; play by your rules, not theirs.

3. If your child already has a smartphone and seems immersed in it, it's not too late to make some changes. Chapter 3 starts off with a great example.
4. If your child is suffering from anxiety or depression, get them help immediately.