

The Effects of Screen Time on Youth

In the modern digital age, screens and social media have become an essential part of childhood, shaping how children learn, communicate, and entertain themselves. However, with the rise in technology use, concerns about excessive screen time and its physical effects on children have grown significantly. On average, children spend 6 to 9 hours each day using some form of device, which exceeds the recommended guidelines set by health organizations and pediatricians (Blacklinko Team, 2025). This overexposure has been linked to various health problems, such as childhood obesity, sleep disturbances, eye strain, and poor posture. As the digital world evolves, it is important to closely watch the long-term effects of screen time on children and find a balance to develop healthier habits.

The Extent of Screen Time Among Children

Historically, children's screen habits have evolved dramatically. In the 1990s and early 2000s, television was the primary form of digital entertainment. However, screen exposure was restricted, as scheduled programming and parental control over TV access naturally limited viewing time. Outside of screen-based entertainment, children often played games outside, read, and found ways to express their creativity. In the last decade, however, children have easier access to smartphones, tablets, and social media, making screen exposure more frequent. By the mid-2000s, the rise of video games and the internet led to more children spending time on digital activities. By 2010, with the introduction of social media platforms like Facebook, Instagram, and YouTube, screen time became an integral part of daily life. Statistics say children aged 5 to 18 now average 8 hours of screen time daily, up from 3 hours in 1995— an increase of approximately 167%. (Blacklinko Team, 2025) Digital learning, particularly following the

COVID-19 pandemic, has only increased screen exposure as schools adopted virtual learning and students relied on digital devices for education. With screen time becoming a dominant part of children's daily lives, it is essential to understand the different ways in which screens are used and how each type affects their well-being.

There are three kinds of screen time to understand: passive, interactive, and educational. Passive screen time involves activities where children consume content without active engagement. Examples include watching TV shows or movies, mindlessly scrolling through social media, binge-watching shows, or videos with autoplay, and playing games without strategic thinking. Interactive screen time refers to activities where you are actively involved with the content on your screen, requiring mental or physical engagement. Examples of this include playing video games, apps that involve problem-solving or quizzes, FaceTime, and video calling, creating content like writing, drawing, or taking photos, browsing the internet, and using social media. Educational screen time involves technology-based learning. These can be educational apps, digital reading, or coding programs.

Childhood Obesity and Inactive Lifestyles

One of the most concerning effects of screen time on children is its contribution to childhood obesity and an inactive lifestyle. In the early 1980s, only about 5% of children were classified as obese. (Ramírez-Coronel, et al., 2023) According to the Centers for Disease Control and Prevention (CDC), however, childhood obesity rates in the United States rose to nearly 20% in 2020, affecting over 14.7 million children and teens. This increase can be attributed to many factors, but one of the most prominent is the shift in how children spend their free time.

Numerous studies have shown a direct correlation between the number of hours children spend in front of screens and higher rates of weight gain. Children often snack without thinking

while engaging in passive screen time, such as watching TV, playing video games, or scrolling through social media. These snacks are typically high in sugar, salt, and fat, leading to a caloric intake that exceeds daily recommendations without the child realizing it. Additionally, excessive passive screen time lowers metabolic rates in comparison to physical activity or even simple movement. When children are sedentary for lengthy periods, their bodies burn fewer calories, which makes it easier for them to gain excess weight. (Jusiené, et al., 2019)

Additionally, advertisements specifically on unhealthy food choices are major contributors to childhood obesity. One trend intensifying this problem is the rise in “mukbang” influencers, who film themselves eating enormous quantities of fast food and sugary snacks. These videos, often watched by children for entertainment, can encourage overeating by portraying binge eating as fun and socially rewarding (Kang, Lee, Kim, & Yun, 2020). Beyond this, junk food advertisements on TV and social media aggressively target young viewers, using bright colors, cartoon mascots, catchy music, and influencer partnerships to make high-calorie, low-nutrient foods appealing (Boyland & Whalen, 2015). Research has shown that repeated exposure to this kind of food marketing significantly increases children’s cravings for unhealthy snacks and contributes to higher consumption rates (Smith, Kelly, Yeatman, & Boyland, 2019). Children not only burn fewer calories in front of the screens but are also bombarded with persuasive ads that steer them toward poor dietary choices, fueling the obesity rates (Robinson, 2017).

Furthermore, research shows that obese children are more likely to remain obese as adults, making them at higher risk for developing type 2 diabetes, heart disease, and other metabolic disorders (Simmons, Llewellyn, Owen, & Woolacott, 2016). When children carry and accumulate too much fat, it causes insulin resistance, clogged arteries, and long-term

inflammation, which raises the risk of heart attacks, strokes, and kidney disease later in life (Biro & Wien, 2010). Beyond its physical effects, obesity can contribute to psychological challenges like low self-esteem and depression, which can continue into adulthood.

Sleep Disturbances and Screen Exposure before Bedtime

In addition to childhood obesity and inactive lifestyles, excessive screen exposure has been associated with poor sleep quality. When children are on screens in the evening or before bedtime, they are highly exposed to blue light— a part of the light spectrum visible to the human eye— which suppresses the production of melatonin, a sleeping hormone. The artificial blue light being emitted from the screens disrupts their circadian rhythms, or sleep-wake cycle, by tricking the brain into not producing melatonin before bed, causing children to feel less tired than they should before bed (Summer, 2023).

Moreover, children are more susceptible to poor sleep quality when excessively on screens rather than children who are not. Research has shown that children with *lower* screen times have better sleep efficiency, more frequent dream recollection, fewer sleep interruptions, and less daytime fatigue (C, H, K, & al., 2024). Additionally, sleep is important for children's growth, learning, and daily mood. It is recommended that children aged two to sixteen reach an average of at least 10 hours of sleep nightly (Gavin, 2021). When they don't meet that recommendation because of excessive screen time, their ability to handle their emotions goes down, academic performance and progress drops, and their cognitive function (the mental processes that allow us to carry out any task) decreases (C, H, K, & al., 2024).

Vision Problems and Digital Eye Strain

Eyes are fundamental for children's daily performance. When children are on screens for prolonged periods, the health of their eyes is at risk, and they are more susceptible to vision problems like myopia (nearsightedness) and digital eye strain ("Computer Vision Syndrome").

In fact, there has been a direct link to extended periods of screen use and myopia in children. JAMA Pediatrics said in their study that each added hour of the daily recommended two hours of screen time was associated with significantly higher odds of myopia. This means that for every hour of screen time added to the daily limit, the risk for developing myopia increases. (Ha, Lee, Lee, Shim, & Kim, 2025)

Moreover, the usage of digital devices for more than the recommended two hours is adequate to the development of digital eye strain conditions causing discomfort and eye-related problems. Studies have shown that when children are staring extensively at a screen, their blink rate can drop from about eighteen blinks per minute to as low as 3-4 blinks per minute. This reduced blinking rate, combined with constant focus on bright, close-up images, often leads to dry eyes, headaches, blurred vision, and eye fatigue (Kaur, et al., 2022).

High screen brightness and blue light exposure intensify these problems by placing more strain on the retina and increasing the potential for long-term vision damage. The blue light penetrates deeper into the eyes than any other wavelengths and can cause oxidative stress in retinal cells, increasing the likelihood of age-related macular degeneration (AMD) (Chakravarthy, Georgyev, Wagen, Hosseini, & Matsubara, 2024). Children are especially vulnerable because their eyes absorb more blue light than adults; this leads them to be more exposed to damage than adults (Eyesafe, 2021).

Posture and Musculoskeletal Problems

Most of the time spent on screens is spent sitting down or in a slouched position. When children are in these positions for excessive periods of time, it detrimentally affects their posture and musculoskeletal system. Spending hours hunched over phones, tablets, or computers often develops “tech neck,” a condition where the head tilts forward, increasing pressure on the cervical spine by up to 60 pounds (Cunningham, 2023). This poor posture contributes to rounded or hunched shoulders, upper back stiffness, and chronic pain, as children often sit in positions that do not support their spines properly. Over time, these poor habits can contribute to long-term musculoskeletal problems, including spinal misalignment and persistent discomfort, which may affect daily activities and physical development (Nanehkeran, Mahlagha, & Nourbakhsh, 2025).

Additionally, the way children hold their devices changes the health of their muscles and joints. The sustained gripping, and repetitive tapping or swiping places continuous stress on their small muscles and tendons in their hands and forearms, resulting in repetitive strain injuries (RSIs). In fact, a surgical review analyzing video game-related injuries found that finger injuries occurred in 23.1% of cases, followed by injuries to the hands (21.3%) and wrists (19.0%) (DalCortivo, Ahn, & Amer, 2025). Children’s developing bones, muscles, and joints make them especially susceptible to such damage, which can impair dexterity, cause numbness, stiffness, and long-term pain, potentially affecting their ability to perform everyday tasks and take part in physical activities. Research has also shown that excessive handheld device use is strongly associated with upper extremity musculoskeletal disorders, with children reporting higher rates of wrist and finger discomfort compared to peers who use devices less frequently (Hakala, Rimpelä, & Salminen, 2006).

Reduced Outdoor Play and Socialization

Opportunities for outdoor play and active movement have steadily declined among today's youth, reducing the chance for healthy physical development. Physical activity, defined as any physical movement that enhances health and fitness, is essential for children's growth and well-being (World Health Organization, 2024). Yet only 24% of U.S. children ages 6–17 meet the daily recommendation of 60 minutes of physical activity (CDC, 2024). Children who spend more than two hours a day on recreational screen time are almost twice as likely to fall short of these activity levels compared to peers with less screen use (Twenge & Campbell, 2018). Less time outdoors not only reduces opportunities for sports and play but also lowers exposure to sunlight, the main source of vitamin D. Around 40% of American children and teens are vitamin D deficient (Kumar, Muntner, Kaskel, Hailpern, & Melamed, 2009).

Likewise, there are also serious social consequences for children, particularly in how they interact with each other. Children who rely heavily on digital devices often struggle to build strong face-to-face relationships, as screen dependency reduces opportunities for in-person communication and meaningful social interaction (Uhls, Ellison, & Subrahmanyam, 2017). A study by Twenge and Campbell (2018) found that teens who spend more than five hours a day on screens are 66% more likely to report feeling socially isolated compared to those with less screen time. Excessive screen use has also been linked to higher rates of social anxiety, as constant engagement with online platforms fosters comparison, fear of missing out (FOMO), and difficulty reading social cues in real-world settings (Marino, Gini, Vieno, & Spada, 2017). In fact, adolescents with problematic internet use report significantly higher levels of loneliness and anxiety symptoms than their peers (Spada, 2014). These findings suggest that while screens provide connection in virtual spaces, overreliance on them may hinder the development of

essential people skills, leaving many children less confident and more anxious in social situations.

Increased Screen Addiction and Dopamine Responses

Social media platforms are deliberately designed to keep children engaged for as long as possible. Features such as autoplay, personalized algorithms, and push notifications are based on “persuasive design” principles to encourage users to stay online (Anderson & Jiang, 2018). Sixty percent of teens report feeling compelled to check their phones at once after receiving a notification, illustrating how these features foster habitual use. On average, adolescents now spend about 3.5 hours per day on social media, with some studies showing usage rates climbing to over seven hours when combined with other forms of screen time (Rideout & Robb, 2019). These design strategies not only increase screen dependency but also heighten the risk of negative outcomes such as disrupted sleep, lower academic performance, and social withdrawal.

One reason children struggle to put down their devices is the way screens exploit the brain’s natural reward system, known as the dopamine effect. Dopamine is a neurotransmitter that plays a key role in pleasure, motivation, and reinforcement learning, and it is released whenever we experience something rewarding, such as praise, food, or success (Kardaras, 2016). Nearly 50% of teens report feeling “addicted” to their mobile devices, and 72% feel compelled to respond to notifications right away (Common Sense Media, 2016). Over time, this dopamine-driven cycle makes screens harder to resist.

Solutions to Reduce the Effects

Though it seems like these effects could seem irreversible, there *are* solutions to reduce their effects. Parents play a crucial role in helping children develop healthy screen habits, and

research shows that home-based strategies are among the most effective ways to reduce the negative effects of excessive screen time. Setting clear and consistent screen time limits, like limiting screen use to 2 hours daily, helps create boundaries that protect children's physical and mental health (AAP, 2016). Families can also set up "screen-free zones" or times, such as during meals or before bedtime, to encourage face-to-face interaction and better sleep hygiene. Co-viewing or engaging with children during media use provides opportunities for guidance and discussion about digital content, which strengthens parent-child relationships while promoting critical thinking. In addition, encouraging alternative activities such as outdoor play, reading, or family board games helps children find joy beyond their devices. Children whose parents actively model balanced screen use and prioritize offline activities are more likely to adopt healthier digital habits themselves (Lauricella & Wartella, 2015).

Counterarguments

While the risks of excessive screen time are well-documented, it is important to recognize that digital devices and media are not inherently harmful. Many experts argue that, when used intentionally and in moderation, screen time can offer educational benefits, foster creativity, and support social connections. For example, interactive apps, educational videos, and online learning platforms can enhance literacy, problem-solving, and critical thinking skills in children and teens (Hirsh-Pasek, et al., 2015). Additionally, video calls and messaging apps can help young people maintain relationships, particularly during times when in-person interaction is limited. These positive uses show that screen time is not universally detrimental, but rather a tool that requires thoughtful guidance and balance to maximize its benefits while minimizing potential harm.

A Christian Perspective

Despite screen time's disadvantages in our modern youth and how it is often perceived, as Christians, we need to evaluate what the Word of God tells us. From a biblical perspective, the impact of screen time on youth underscores the importance of stewardship over both our bodies and our time. Scripture reminds us in 1 Corinthians 6:19,20 that our bodies are temples of the Holy Spirit and that we are called to honor God through how we care for ourselves. When excessive screen use leads to poor health, disrupted sleep, or strained relationships, it neglects this responsibility.

Likewise, Ecclesiastes 3:1 teaches, "to everything there is a season, and a time to every purpose under heaven." This verse challenges us to practice balance, ensuring that time spent on screens does not overshadow time for God, family, friendships, learning, worship, and rest. As Christians, we are called not to reject technology, but to approach it with discernment, self-control, and purpose, using it in ways that glorify God and build up rather than diminish the well-being of today's youth.

Conclusion

In conclusion, as screens become increasingly integrated into children's daily lives, it is crucial to understand the multifaceted impact of screen time on their health and well-being. The significant rise in screen exposure has contributed to higher rates of childhood obesity and more sedentary lifestyles, highlighting the need for parents, educators, and policymakers to prioritize healthier habits. By promoting a balanced approach to screen use, encouraging active participation instead of passive consumption, and integrating educational content, families can help reduce the negative effects of excessive screen time. Creating a culture that values physical

activity and careful technology use will support children's long-term health and development.

Addressing these challenges proactively will help ensure that technology serves as a positive tool rather than a barrier to healthy growth.

References

AAP. (2016, November). *Media and Young Minds*. Retrieved from American Academy of

Pediatrics:

<https://publications.aap.org/pediatrics/article/138/5/e20162591/60503/Media-and-Young-Minds?autologincheck=redirected>

Anderson, M., & Jiang, J. (2018, May 31). *Teens, Social Media and Technology 2018*.

Retrieved from Pew Research Center:

<https://www.pewresearch.org/internet/2018/05/31/teens-social-media-technology-2018/>

Biro, F. M., & Wien, M. (2010, March 24). *Childhood Obesity and Adult Morbidities*.

Retrieved from Science Direct:

<https://www.sciencedirect.com/science/article/pii/S0002916523018452?via%3Dihub>

Blacklinko Team. (2025, January 30). *Revealing Average Screen Time Statistics*. Retrieved

from Blacklinko: <https://backlinko.com/screen-time-statistics>

Boyland, E. J., & Whalen, R. (2015, August 16). *Food advertising to children and its effects*

on diet: review of recent prevalence and impact data. Retrieved from National

Library of Medicine: <https://pubmed.ncbi.nlm.nih.gov/25899654/>

C, G., H, V., K, T., & al., e. (2024, February 29). *The Impact of Screen Time on Sleep Patterns*

in School-Aged Children: A Cross-Sectional Analysis. Retrieved from Cureus:

<https://www.cureus.com/articles/227533-the-impact-of-screen-time-on-sleep-patterns-in-school-aged-children-a-cross-sectional-analysis#!/>

CDC. (2024, May 15). *Keep an Eye on Your Child's Vision*. Retrieved from Centers for Disease Control and Prevention: <https://www.cdc.gov/health/prevention/youth-vision-problems.html>

CDC. (2024, March 26). *Physical Activity Basics and Your Health*. Retrieved from Center for Disease Control and Prevention: <https://www.cdc.gov/physical-activity-basics/about/index.html>

Chakravarthy, H., Georgyev, V., Wagen, C., Hosseini, A., & Matsubara, J. (2024, December 17). *Blue light-induced phototoxicity in retinal cells: implications in age-related macular degeneration*. Retrieved from PubMed Central: <https://pmc.ncbi.nlm.nih.gov/articles/PMC11685196/#sec18>

Common Sense Media. (2016, May 3). *Technology Addiction: Concern, Controversy, and Finding Balance*. Retrieved from Common Sense: <https://www.commonsensemedia.org/research/technology-addiction-concern-controversy-and-finding-balance>

Cunningham, S. (2023, December 7). *Increased use of screen time causing back pain in kids*. Retrieved from UC Health Today: <https://www.uchealth.org/today/increased-use-of-screen-time-causing-back-pain-in-kids/>

DalCortivo , R., Ahn, D., & Amer, K. (2025, March 22). *Incidence of Video Game-Related Upper Extremity Injuries in the United States*. Retrieved from SurgiColl:
<https://surgicoll.scholasticahq.com/article/126711-incidence-of-video-game-related-upper-extremity-injuries-in-the-united-states>

Eyesafe. (2021, June 9). *Children and High-Energy Blue Light: A Cause for Concern*. Retrieved from Eyesafe: <https://eyesafe.com/children-and-high-energy-blue-light-a-cause-for-concern/>

Gavin, M. L. (2021, January). *Kids and Sleep*. Retrieved from Kids Health:
<https://kidshealth.org/en/parents/sleep.html>

Ha, A., Lee, Y. J., Lee, M., Shim, S. R., & Kim, Y. K. (2025, February 21). *Digital Screen Time and Myopia: A Systematic Review and Dose-Response Meta-Analysis*. Retrieved from Jama Net Work:
<https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2830598>

Hakala, P. T., Rimpelä, A. H., & Salminen, J. J. (2006). *Frequent computer-related activities increase the risk of neck–shoulder and low back pain in adolescents*. Retrieved from European Journal of Public Health:
<https://academic.oup.com/eurpub/article/16/5/536/590429>

Hirsh-Pasek, K., Zosh, J. M., Golinkoff, R. M., Gray, J. H., Robb, M. B., & Kaufman, J. (2015). Putting education in “educational” apps: Lessons from the science of learning. *Psychological Science in the Public Interest*, 3-34.

Jensen, M. L., Carpentier, F. D., Camila, C., Popkin, B. M., Evenson, K. R., Adair, L., & Taillie,

L. S. (2023, January 1). *Television viewing and using screens while eating:*

associations with dietary intake in children and adolescents. Retrieved from

PubMed Central:

<https://pmc.ncbi.nlm.nih.gov/articles/PMC8671257/#:~:text=More%20than%20half%20of%20our,day%20while%20using%20a%20screen.>

Jusienė, R., Urbonas, V., Laurinaitytė, I., Rakickienė, L., Breidokienė, R., Kuzminskaitė, M., &

Praninskienė, R. (2019, October 14). *Screen Use During Meals Among Young*

Children: Exploration of Associated Variables. Retrieved from PubMed Central:

<https://pmc.ncbi.nlm.nih.gov/articles/PMC6843261/>

Kang, E., Lee, J., Kim, K. H., & Yun, H. Y. (2020, January 29). *The popularity of eating*

broadcast: Content analysis of “mukbang” YouTube videos, media coverage, and

the health impact of “mukbang” on public. Retrieved from Sage Journals:

<https://journals.sagepub.com/doi/10.1177/1460458220901360>

Kardaras, N. (2016). *Glow Kids: How Screen Addiction Is Hijacking Our Kids—and How to*

Break the Trance. St. Martin's Press.

Kaur, K., Gurnani, B., Nayak, S., Deori, N., Kaur, S., Jethani, J., . . . Mishra, D. (2022, July 9).

Digital Eye Strain- A Comprehensive Review. Retrieved from PubMed Central:

<https://pmc.ncbi.nlm.nih.gov/articles/PMC9434525/#Bib1>

Kumar, J., Muntner, P., Kaskel, F. J., Hailpern, S. M., & Melamed, M. L. (2009, September

1). *Prevalence and Associations of 25-Hydroxyvitamin D Deficiency in US Children:*

NHANES 2001–2004 Available to Purchase. Retrieved from American Academy of Pediatrics: <https://publications.aap.org/pediatrics/article-abstract/124/3/e362/71846/Prevalence-and-Associations-of-25-Hydroxyvitamin-D?redirectedFrom=fulltext>

Lauricella, A. R., & Wartella, E. (2015, February). Young children's screen time: The complex role of parent and child factors. *Journal of Applied Developmental Psychology*, 11-7. Retrieved from *Journal of Applied Developmental Psychology*.

Legner, L. (2024, June 7). *Kids' screen time: How much is too much?* Retrieved from OSF HealthCare: <https://www.osfhealthcare.org/blog/kids-screen-time-how-much-is-too-much/>

Marino, C., Gini, G., Vieno, A., & Spada, M. M. (2017, October 3). *The associations between problematic Facebook use, psychological distress and well-being among adolescents and young adults: A systematic review and meta-analysis*. Retrieved from PubMed: <https://pubmed.ncbi.nlm.nih.gov/29024900/>

Nanehkeran, Mahlagha, & Nourbakhsh. (2025). *Musculoskeletal issues and risks in school children associated with cellphone and backpack use and strategies that parents and teachers can adopt to prevent them*. Retrieved from *Medical Research Archives*: <https://doi.org/10.18103/mra.v13i6.6563>

NHS Team. (2024, October 23). *Physical activity guidelines for children and young people*. Retrieved from NHS: <https://www.nhs.uk/live-well/exercise/physical-activity-guidelines-children-and-young->

people/#:~:text=Children%20and%20young%20people%20aged%205%20to%2018
%20should%3A,movement%20skills%2C%20muscles%20and%20bones

Ramírez-Coronel, A. A., Abdu, W. J., Alshahrani, S. H., Treve, M., Jalil, A. T., Alkhayyat, A. S., & Singer, N. (2023, August 22). *Childhood obesity risk increases with increased screen time: a systematic review and dose–response meta-analysis*. Retrieved from National Library of Medicine: <https://pmc.ncbi.nlm.nih.gov/articles/PMC10464305/>

Rideout, V., & Robb, M. B. (2019, October 28). *The Common Sense Census: Media Use by Tweens and Teens, 2019*. Retrieved from Common Sense: <https://www.commonsensemedia.org/research/the-common-sense-census-media-use-by-tweens-and-teens-2019>

Robinson, N. T. (2017, November 1). *Screen Media Exposure and Obesity in Children and Adolescents*. Retrieved from American Academy of Pediatrics: https://publications.aap.org/pediatrics/article/140/Supplement_2/S97/34162/Screen-Media-Exposure-and-Obesity-in-Children-and?autologincheck=redirected

Simmons, M., Llewellyn, A., Owen, C. G., & Woolacott, N. (2016, Feb 17). *Predicting Adult Obesity from Childhood Obesity: a Systematic Review and Meta-Analysis*. Retrieved from National Library of Medicine: <https://pubmed.ncbi.nlm.nih.gov/26696565/>

Smith, R., Kelly, B., Yeatman, H., & Boyland, E. (2019, April 18). *Food Marketing Influences Children's Attitudes, Preferences and Consumption: A Systematic Critical Review*. Retrieved from National Library of Medicine: <https://pubmed.ncbi.nlm.nih.gov/31003489/>

Spada, M. (2014, January). *An overview of problematic internet use*. Retrieved from PubMed: <https://pubmed.ncbi.nlm.nih.gov/24126206/>

Summer, J. V. (2023, July). *How Blue Light Affects Kids' Sleep*. Retrieved from Sleep Foundation: <https://www.sleepfoundation.org/children-and-sleep/how-blue-light-affects-kids-sleep#how-does-blue-light-affect-children--2>

The Bark Team. (2023, January 19). *Obesity in Children: How Does the Digital Age Affect It?* Retrieved from The Bark Blog: https://www.google.com/search?q=bark+blog&rlz=1C1VDKB_enUS1131US1132&ooq=bark+blog&gs_lcrp=EgZjaHJvbWUyBggAEEUYOTIICAEQABgWGB4yCAgCEAAYFhg eMggIAxAAGBYHjIIICAQQABgWGB4yDQgFEAAyhgMYgAQYigUyBggGEEUYPDIGCAc QRRhB0gEIMTczMWowajeoAgCwAgA&sourceid=chrome&ie=UTF-8

Twenge, J. M., & Campbell, W. K. (2018, December). *Associations between screen time and lower psychological well-being among children and adolescents: Evidence from a population-based study*. Retrieved from Science Direct: <https://www.sciencedirect.com/science/article/pii/S2211335518301827?via%3Dihub>

Twenge, J. M., & Campbell, W. K. (2018, December). *Associations between screen time and lower psychological well-being among children and adolescents: Evidence from a population-based study*. Retrieved from Science Direct: <https://www.sciencedirect.com/science/article/pii/S2211335518301827>

Uhls, Y. T., Ellison, N. B., & Subrahmanyam, K. (2017, November 14). *Benefits and Costs of Social Media in Adolescence*. Retrieved from PubMed:
<https://pubmed.ncbi.nlm.nih.gov/29093035/>

World Health Organization. (2024, June 26). *Physical activity*. Retrieved from World Health Organization: <https://www.who.int/news-room/fact-sheets/detail/physical-activity>