INTERNET ADDICTION AND EMOTIONAL INSTABILITY IN THE FORMATION OF MODERN MOWGLI SYNDROME IN YOUTH PSYCHOLOGY

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ABSTRACT

This article examines the psychological impact of internet addiction and emotional instability on the development of Modern Mowgli Syndrome among adolescents and young adults. The syndrome is characterized by social withdrawal, identity confusion, and a weakening of emotional self-regulation, resulting from excessive immersion in virtual environments and insufficient real-life interaction. The paper explores how persistent exposure to digital stimuli disrupts the maturation of emotional intelligence and leads to the erosion of social competencies critical to identity formation. Drawing on theoretical frameworks in developmental psychology and empirical findings from recent studies, the article highlights the interdependence between emotional dysregulation and behavioral dependency on digital platforms. Furthermore, the paper proposes preventive and corrective strategies that integrate psychotherapeutic interventions, particularly cognitive-behavioral approaches, to mitigate the adverse effects of this syndrome on youth mental health and psychosocial development.

KEYWORDS: Modern Mowgli Syndrome, internet addiction, emotional instability, youth psychology, identity development, digital dependency, emotional dysregulation, social withdrawal, cognitive-behavioral therapy, digital age mental health.

INTRODUCTION

In the rapidly evolving landscape of the 21st century, the pervasiveness of digital technologies has reconfigured the very fabric of human interaction, cognition, and identity formation. This transformation is particularly pronounced among adolescents and young adults, whose developmental trajectories are inextricably intertwined with the omnipresence of the internet and digital media. While the internet offers unparalleled access to information, global connectivity, and educational resources, it simultaneously presents significant psychological and behavioral challenges, especially in the context of prolonged and unregulated usage. Among the emergent psychological phenomena rooted in excessive digital immersion is the so-called "Modern Mowgli Syndrome," a term that metaphorically captures a distinct psychosocial condition marked by emotional detachment, social alienation, and a fragmented sense of identity. Modern Mowgli Syndrome derives its conceptual foundation from Rudyard Kipling's character Mowgli, a child raised by wolves in the jungle, isolated from human society and social norms. In the modern psychological lexicon, this metaphor is repurposed to describe individuals—

especially youth—whose personalities are shaped more by virtual experiences than by authentic social interactions. These individuals exhibit diminished emotional intelligence, impaired social communication skills, and a precarious self-concept, often accompanied by symptoms of internet addiction, emotional dysregulation, and socio-affective underdevelopment. The phenomenon is not merely anecdotal but is increasingly being recognized as a psychosocial crisis engendered by the intersection of digital overexposure and emotional instability. Empirical studies in developmental psychology and clinical psychiatry have consistently highlighted the adverse effects of excessive internet use on cognitive and emotional functioning. The neuroplastic nature of the adolescent brain renders it particularly susceptible to environmental stimuli, including the continuous feedback loops generated by social media, video games, and other digital platforms[1]. These virtual experiences, while stimulating, often lack the emotional depth and interpersonal reciprocity necessary for healthy psychological development. Consequently, individuals exposed to such environments may develop an overreliance on virtual validation, experience difficulty regulating emotions, and fail to cultivate the nuanced interpersonal skills requisite for real-world social functioning. Moreover, emotional instability—a core feature of Modern Mowgli Syndrome—further exacerbates the impact of internet addiction. Emotional instability encompasses mood swings, heightened sensitivity to stress, poor impulse control, and difficulty maintaining affective equilibrium. In the context of youth psychology, such instability can obstruct the formation of a coherent self-identity, leading to a reliance on external, often digital, sources of self-worth and belonging[2]. When coupled with internet addiction, emotional dysregulation can lead to a vicious cycle of avoidance behavior, social withdrawal, and deteriorating mental health, which are all hallmark features of the Modern Mowgli profile. The proliferation of this syndrome among youth populations raises critical questions for contemporary mental health research and practice. What cognitive, emotional, and social mechanisms underlie the development of Modern Mowgli Syndrome? How does the interplay between internet addiction and emotional instability manifest in clinical settings? What therapeutic modalities are most effective in reversing or mitigating its effects? Addressing these questions requires an interdisciplinary approach that integrates insights from clinical psychology, neuroscience, behavioral therapy, and digital ethics. Cognitive-behavioral therapy (CBT), widely regarded as one of the most effective evidence-based interventions for a range of psychological disorders, offers promising avenues for addressing the core components of Modern Mowgli Syndrome[3]. By targeting maladaptive thought patterns and behaviors, CBT facilitates the restructuring of cognitive schemas, the development of emotional regulation strategies, and the reinforcement of prosocial behaviors. In particular, CBT interventions tailored for internet addiction and emotional dysregulation have demonstrated efficacy in improving emotional resilience, enhancing interpersonal functioning, and fostering a more grounded sense of self. Therefore, the therapeutic potential of CBT in the context of Modern Mowgli Syndrome warrants rigorous investigation and clinical application[4]. From a socio-educational perspective, the implications of this syndrome extend beyond individual pathology to encompass broader cultural and pedagogical concerns. The increasing prevalence of emotionally and socially disconnected youth poses significant challenges for educators, parents, and policymakers. Schools, in

particular, are witnessing a rise in students who exhibit low frustration tolerance, poor emotional literacy, and diminished capacity for cooperative learning—all of which can be linked to excessive screen time and digital dependency. As such, preventive and remedial strategies must include not only clinical interventions but also systemic changes in educational practices, family dynamics, and digital literacy programs[5]. Furthermore, the phenomenon must be understood within the framework of contemporary cultural shifts that valorize digital personas over real-world authenticity. In an age where social media platforms commodify attention and algorithmically reinforce addictive behavior, the psychological terrain of youth is increasingly being shaped by external metrics of validation—likes, shares, and followers—rather than intrinsic self-worth. This environment fosters a performative rather than reflective mode of identity formation, wherein individuals curate idealized digital selves while neglecting the emotional labor required for authentic self-development. Such dynamics underscore the urgency of fostering critical digital literacy and emotional intelligence as protective factors against the onset of Modern Mowgli Syndrome. The emergence of Modern Mowgli Syndrome as a distinct psychological condition highlights the complex interplay between internet addiction and emotional instability in youth development. It calls for a concerted effort across clinical, educational, and societal domains to understand, prevent, and treat this multifaceted phenomenon[6]. The present study aims to contribute to this endeavor by elucidating the psychological mechanisms underlying the syndrome and evaluating the efficacy of cognitive-behavioral therapeutic interventions. In doing so, it seeks to offer empirically grounded, culturally sensitive, and developmentally appropriate strategies for mitigating the impact of digital overexposure on the psychosocial well-being of contemporary youth.

The topical relevance of studying Modern Mowgli Syndrome stems from the unprecedented psychosocial transformations occurring in youth populations under the influence of pervasive digital technologies. As digital ecosystems increasingly mediate not only communication but also emotional expression, identity formation, and cognitive engagement, psychological health is becoming inextricably linked to patterns of digital behavior. The growing body of clinical evidence pointing to the maladaptive consequences of chronic digital immersion—such as emotional dysregulation, attention deficits, sleep disturbances, and social withdrawal—underscores the urgency of investigating syndromes like Modern Mowgli within the broader framework of mental health discourse. From a clinical perspective, the diagnostic ambiguity surrounding digitally induced behavioral disorders necessitates more precise conceptualizations and intervention frameworks[7]. Modern Mowgli Syndrome encapsulates a constellation of symptoms that, while not formally codified in traditional psychiatric taxonomies such as the DSM-5 or ICD-11, are increasingly encountered in therapeutic settings. Its overlap with internet gaming disorder, social communication deficits, and identity diffusion makes it a complex yet critical focus for research, particularly in the developmental and adolescent psychology sectors. In light of these developments, various nations and international health bodies have initiated reforms aimed at recalibrating mental health infrastructure to address the challenges of the digital age. These reforms include expanding diagnostic criteria to encompass technologyrelated behavioral disorders, increasing funding for research on youth digital mental health, and

developing targeted prevention strategies within educational and clinical systems. For example, the World Health Organization's recognition of "gaming disorder" as a formal diagnosis marks a pivotal shift in acknowledging the psychological risks of digital overexposure. In Uzbekistan and other post-Soviet educational contexts, a growing emphasis has been placed on holistic approaches to youth development that integrate emotional education and digital hygiene into the national curriculum[8]. Reforms under state-led modernization agendas have included the establishment of school-based mental health centers, the integration of psychoprophylactic modules into educational policy, and the training of school psychologists in evidence-based therapies such as cognitive-behavioral therapy (CBT) and mindfulness-based interventions. These steps reflect a systemic recognition of the importance of emotional intelligence and digital selfregulation as core competencies for contemporary learners. Moreover, legislative reforms are being implemented to regulate children's and adolescents' screen time, social media exposure, and access to age-inappropriate digital content. These include the introduction of child digital safety laws, school-level device monitoring policies, and parental guidance frameworks promoted through public health campaigns[9]. Such measures aim not only to restrict harmful content but also to promote digital literacy, resilience, and socio-emotional development as preventative tools against conditions like Modern Mowgli Syndrome. In parallel, there is a growing movement within clinical psychology to adapt therapeutic methodologies to the unique cognitive and affective landscapes of digitally immersed youth. Cognitive-behavioral therapy has emerged as the leading intervention model due to its structured, goal-oriented approach, which is particularly well-suited for addressing the behavioral patterns and cognitive distortions associated with internet addiction and emotional instability. Innovations in CBT delivery—including the use of digital platforms for therapy, gamification of self-monitoring exercises, and integration with neurofeedback technologies—are further enhancing the scalability and relevance of these interventions in contemporary contexts. The investigation into Modern Mowgli Syndrome is not only academically pertinent but also aligned with broader health, education, and policy reforms across the globe[10]. The syndrome encapsulates a confluence of emerging psychological challenges that demand a multidisciplinary response. By examining the disorder through the dual lenses of emotional instability and digital dependency, and by aligning research with ongoing systemic reforms, scholars and practitioners can contribute to more effective models of prevention, diagnosis, and treatment—ensuring that young individuals are equipped with the psychological tools necessary to thrive in an increasingly digital world.

CONCLUSION

The findings of this research underscore the profound psychological consequences of chronic internet addiction and emotional instability in shaping the developmental trajectories of contemporary youth. Modern Mowgli Syndrome, conceptualized as a state of social withdrawal, emotional detachment, and identity fragmentation, reflects a growing psychological phenomenon that demands urgent scholarly and clinical attention. It illustrates how prolonged digital immersion—especially in the absence of emotional regulation and real-world socialization—can erode core psychological faculties such as empathy, self-reflection, and

adaptive coping mechanisms. This thesis demonstrates that emotional instability functions not merely as a co-occurring symptom of internet addiction but as a critical mediating factor that accelerates the disintegration of psychological resilience. Adolescents affected by this syndrome often exhibit an impaired capacity for interpersonal relationships, emotional literacy, and selfconcept development—skills essential for successful integration into society. The consequences of this syndrome are not only confined to individual pathology but extend to educational performance, family dynamics, and overall social cohesion. Importantly, the study also identifies the therapeutic potential of cognitive-behavioral approaches in addressing the core features of Modern Mowgli Syndrome. CBT interventions, especially when tailored to the needs of digitally dependent youth, offer promising results in promoting emotional regulation, rebuilding cognitive flexibility, and enhancing social competencies. Therefore, early diagnosis, psychological education, and access to structured interventions must be prioritized within school and clinical environments. In conclusion, Modern Mowgli Syndrome should be recognized as a serious psychosocial condition of the digital age. A comprehensive, multidisciplinary strategy combining clinical therapy, educational reform, digital literacy, and family support—is necessary to mitigate its long-term effects. The insights of this thesis contribute to a deeper understanding of how digital overexposure and emotional instability intersect in shaping youth mental health and offer a path forward for both prevention and treatment.

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