Disconnected: Teens, Tech, & Mental Health

A Research Report from BODA Therapy





Executive Summary

A growing body of evidence links heavy, unstructured screen use with poorer mental health outcomes among adolescents, including anxiety, increased depressive symptoms, and behavioral challenges.

Social feeds compress global crises into a constant, personalized stream, amplifying the sense that danger is everywhere and that everyone else is coping better. For many teens, that drumbeat of comparison and bad news makes offline life feel smaller and riskier, nudging them toward the low-friction refuge of screens and away from the messy, uncomfortable in-person experiences that build confidence and connection.

Recent research from the CDC's Preventing Chronic Disease journal identifies relationships between daily teen screen time and multiple health outcomes (sleep, weight, mental health, perceived support).

The American Psychological Association has **likewise highlighted** bidirectional risks: more screen time can fuel socioemotional problems, which in turn can drive still more screen use. A **2024 analysis** of prospective cohort studies associates increased screen time with higher depression risk in adolescents, reinforcing concerns about dose and context. And **pediatric guidance** increasingly emphasizes balanced, intentional media use rather than "anytime/ anywhere" consumption.

Parents see what's happening, but the ground keeps shifting — new platforms, addictive algorithms, and evolving norms make it difficult to know what's "typical" and what's a warning sign. They're asked to be tech monitors, therapists, and coaches while juggling work and family demands, and the guidance they receive is often fragmented or unrealistic. What kids need, and what parents want to provide, is stability: predictable routines, healthy sleep habits, real-world practice with peers, and clear boundaries around media use.

This report captures how those pressures are showing up at home, and where parents believe practical, hands-on solutions can rebuild resilience and mental well-being.

Key Findings

BODA Therapy surveyed 250 U.S. parents of high-school-aged students (14–17) to understand what families are experiencing right now. Fielded September 10–12, 2025, the study finds:

68%

agree technology has **negatively impacted** their teen's social or emotional well-being (Q6).

After extended screen time, parents most often notice (Q5):

- Increased irritability **(46%)**
- Difficulty sleeping **(29%)**
- Withdrawal from family **(22%)**



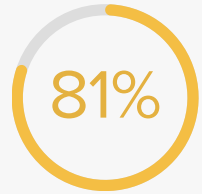
have noticed **increased anxiety/sadness** over the past year (38% say "significant") (Q7).

78%

believe their teen would benefit — or might benefit — from **mental health support** (Q9).



Nearly two-thirds (64%) observe their teen avoiding social situations at least occasionally (Q3).



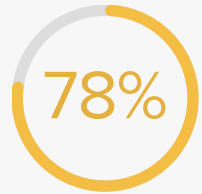
say their teen "very often" or "sometimes" **chooses to spend time alone** rather than with peers (Q1).

89%

agree their teen would **benefit from more outdoor/physical activity** (Q11); 86% say hands-on, real-world experiences would help build life skills (Q13).

3 hrs 42 min

Average daily time teens spend on non-school screen use; 67% report 3+ hours daily (Q4).



are concerned that emerging technologies (e.g., AI) might **undermine critical thinking/ independence** (Q15).

Bottom line: Parents of U.S. high-schoolers are reporting a concerning mix of social isolation, mood changes, and tech-related spillovers (sleep deprivation, irritability) – alongside strong openness to practical, experiential interventions.

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Tech, Isolation and Mood

Parents Connect Tech and Well-being





68%

agree technology has **negatively impacted** their teen's **social/emotional well-being** (Q6).



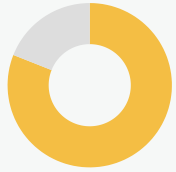
78%

worry that emerging technologies (including AI) could **erode independent thinking/ problem-solving** (Q15).

Even as social media and digital tools can enable learning and connection, pediatric guidance recommends structure and intentionality – focusing on content, co-viewing, communication, and limits aligned with a child's needs.

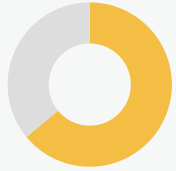
Rising Isolation & Avoidance





81%

report their teen "very often" (39%) or "sometimes" (42%) **prefers being alone rather than with peers** (Q1).



64%

say their teen **avoids social situations** at least occasionally (Q3).

These patterns align with parent-observed mood changes: 68% noticed increased anxiety/sadness in the past year (38% significant; 30% minor) (Q7). This data paints a vivid, human picture: isolation is common, and mood symptoms are mainstream.

Screens, Sleep, Irritability



Average non-school screen time is **3 hours, 42 minutes daily;** two in three (67%) **report 3+ hours** (Q4).

After extended screen time, parents most often notice (Q5):

- Increased irritability **(46%)**
- Difficulty sleeping **(29%)**
- Withdrawal from family **(22%)**

Sleep disruption is a particularly salient lever in adolescent development and mental health, and it's frequently implicated in screen-time research. Recent APA-highlighted research points to vicious cycles between screen time and socioemotional problems that can easily entangle sleep, mood, and family dynamics.

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Gaps in Readiness & Skills



only 48%

say their teen is emotionally prepared for college/work; 42% say “somewhat,” and 8% “no” (Q8).



Parents identify specific deficits: confidence in social settings (53%), motivation (38%), resilience (32%), and focus (25%) (Q12).

These are precisely the “soft skills” that predict success in school, early work experiences, and community engagement, and they are the skills most vulnerable to a lifestyle dominated by solitary, passive, or algorithm-driven digital time.

What Parents Really Want



89%

agree their teen would benefit from more outdoor/physical activity (Q11).



86%

agree hands-on, real-world activities could help build independence, communication, and confidence (Q13).



When asked about support modalities, parents are open to traditional therapy (48%) and family therapy (44%); group formats also appeal to a quarter (26%) (Q10).

This is a striking mandate for “active care” – approaches that blend therapeutic guidance with real-world practice, accountability, and skill-building outside the typical therapeutic office setting.

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Key Takeaways for Parents, Schools and Youth-serving Organizations

01

Swap screen time for active time.

Encourage sports, nature, and movement-based clubs that build accountability and in-person connection. Familiar and enjoyable activities in nature become the setting in which skills are created, used and practiced. When therapy becomes enjoyable, teens are more engaged and more invested in their own growth.

02

Make sleep non-negotiable.

Keep phones and consoles out of bedrooms and set consistent wind-down routines and boundaries to prevent the irritability and sleep issues screens trigger.

03

Loop in families.

High interest in family therapy suggests parents want actionable frameworks they can carry home and that will have significant positive impacts on the family dynamic. Identify and undo unhelpful thought patterns and triggers, while making therapy more engaging and creating a sustainable blueprint for long-term well-being.

04

Build “doing” into mental health care plans.

Therapy that integrates real-world practice (communication, teamwork, leadership, problem-solving skills in physical environments) can accelerate social confidence and resilience. With this, teens learn to tolerate distress, regulate emotions, and manage unhelpful thoughts and feelings.

05

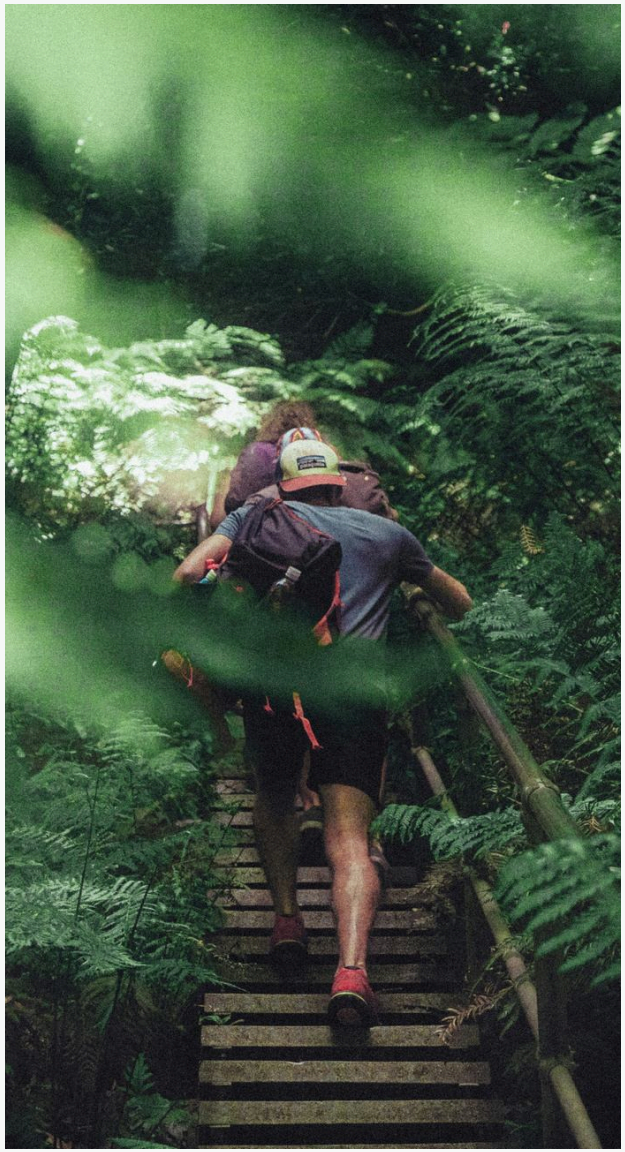
Apply evidence-based modalities.

Explore Dialectical Behavior Therapy (DBT), Cognitive Behavioral Therapy (CBT), In-Action Group Psychotherapy, Motivational Interviewing, and Collaborative Problem Solving, which are all useful therapeutic approaches.

06

Flag compulsive use of technology.

Families and schools should watch for interference with sleep, schoolwork, and relationships; address triggers and patterns, not just raw minutes.



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Conclusion

Taken together, these findings point to a common reality across households: teens are spending more time alone, reporting more anxious or low mood, and showing spillover effects from heavy, unstructured screen use – especially around sleep and irritability. Rather than panic, the solution lies in rebalancing. When families, schools, and youth programs emphasize sleep, movement and in-person connection, they create the conditions where confidence, the right focus, and resilience can grow. Screens aren't the sole cause of distress, but in their current, always-on form they are a powerful accelerant – one that can be tempered by more intentional boundaries.

> The mandate from parents is practical and immediate. They want experiential support – support that fits into daily life and gets teens doing more in the real world, and workable frameworks to manage technology.

By helping teens develop better habits – protecting sleep, elevating movement, and prioritizing real-world connections – parents can quiet the feed, steady the home, and help teens thrive.



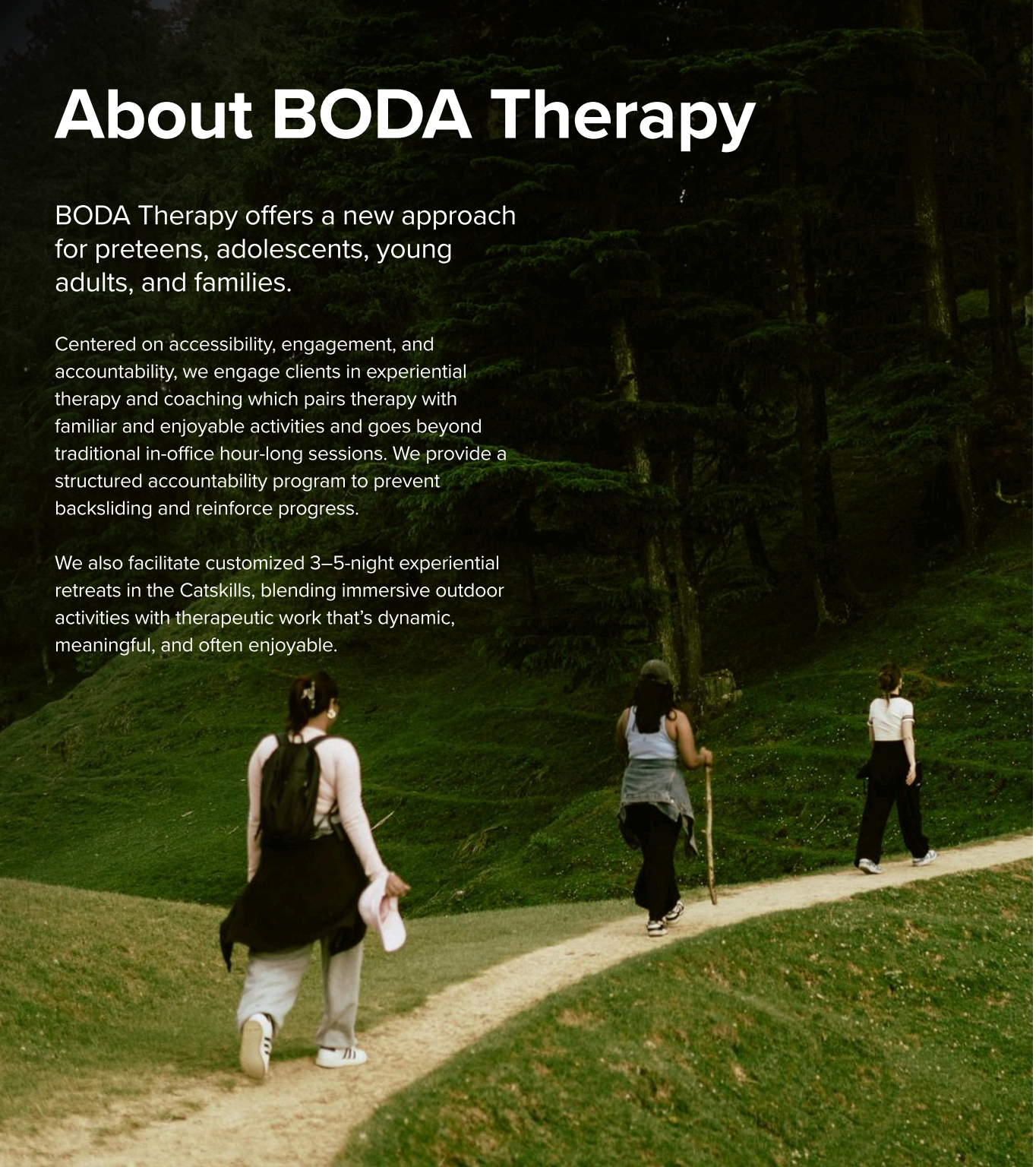
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About BODA Therapy

BODA Therapy offers a new approach for preteens, adolescents, young adults, and families.

Centered on accessibility, engagement, and accountability, we engage clients in experiential therapy and coaching which pairs therapy with familiar and enjoyable activities and goes beyond traditional in-office hour-long sessions. We provide a structured accountability program to prevent backsliding and reinforce progress.

We also facilitate customized 3–5-night experiential retreats in the Catskills, blending immersive outdoor activities with therapeutic work that's dynamic, meaningful, and often enjoyable.



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