



The Panic Over ‘Social Media Addiction’ Threatens Free Speech

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April 23, 2019

It has been more than 10 years since China's health ministry officially recognized "Internet Addiction Disorder" as a disease. And although the evidence for such a designation remains far from solid, the consequences of that designation have been startlingly clear.

The Chinese government has, among other things, restricted new internet cafes from opening, requiring them to be closed during certain times of the day, and limiting time adolescents may spend at internet cafes. Meanwhile, a network of boot camps, many of which are government run, have sprung up across the country in which many of the government-estimated 23 million young "internet addicts" are enrolled to receive treatment for what has been dubbed "electronic heroin." These facilities employ military-style discipline and often brutal corporal punishment. In 2017, BBC News reported the death of an 18-year-old registered in one of those camps, sparking Chinese newspaper editorials calling for tighter regulation of these centers.

China's experience is a warning about the perils of medicalizing heavy internet use. Yet other countries are following its lead by recognizing social media or internet addiction as a behavioral disorder, often in conjunction with public funding for counseling and addiction treatment centers. Japan's Ministry of Health, for example, pays for "internet fasting camps" in which young addicts receive help in a tech-free environment. And in 2011, despite objections from parents that it infringes on their autonomy, South Korea placed a curfew on teen internet gaming, blocking gaming sites after midnight for people ages 16 and younger.

Fear of the internet's addictive potential isn't confined to Asian countries. The year China made its designation official, an editorial by a leading U.S. psychiatrist appeared in the *American Journal of Psychiatry* applauding the decision. Since then, an internet addiction rehab industry has sprung up in the States. And a growing number of media reports in the West have stoked concerns about a looming crisis of social media addiction, sometimes loosely coined "internet addiction."

Lawmakers in Washington, meanwhile, have begun to express similar concerns. Last September, during a Senate Select Committee on Intelligence hearing on "Foreign Influence Operations' Use of Social Media," Sen. Richard Burr (R–N.C.), Sen. Mark Warner (D–Va.), and others raised the subject of "social media addiction." They were worried that media users, compelled by their addiction to face repeated exposure to propaganda and misinformation, might be increasingly vulnerable to manipulation. Several senators asked both witnesses what steps they were taking to combat "social media addiction."

Yet despite the growing public panic, the underlying science is far from settled. Researchers have not yet approached a consensus as to whether perceived excessive time spent on the internet and engaged with social media is an addictive behavioral disorder. The American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders (DSM-5) does not designate "internet addiction" or "social media addiction" as a mental disorder, but rather a "condition for further study," which is notable in light of economic incentives for the psychiatry profession to medicalize problem behaviors.

Given the widespread fearmongering, and the growing chorus of criticism from both the left and right against social media, it's all too easy to imagine this issue gaining traction with politicians and medical policymakers. As with other issues driven by sensational media reports, there's a real risk that lawmakers and medical professionals will rush to implement policies that aren't supported by the evidence. Those sorts of policies can result in unintended social harms, not the least of which are potential infringements on freedom of the press, freedom of expression, and freedom of association—especially if social media platform providers are demonized as purveyors of addictive, and thus dangerous, content. Classifying heavy internet use as medical addiction isn't just a risk to patients and public health budgets, but to the foundations of free speech and a free society.

Addiction Defined

People talk colloquially about being "addicted" to things—from take-out pizza to TV shows—all the time. But the common understanding of addiction is only loosely related to the clinical definition, which is something far more powerful than a strong preference.

The American Society of Addiction Medicine describes addiction as a "chronic disease of brain reward, motivation, memory and related circuitry ... characterized by the inability to consistently abstain, impairment in behavioral control, craving" that continues despite resulting destruction of relationships, economic conditions, and health.

A major feature of clinical addiction is compulsiveness. That is why alcoholics or other drug addicts will return to their substance of abuse even after they have been "detoxed" and despite the fact that they know it will further damage their lives.

So far, the evidence that this sort of clinical compulsion exists for internet usage simply isn't there. In 2009, a team of researchers from Kwangwoon University in South Korea, the University of New Haven, Purdue, Notre Dame, and Auburn Universities analyzed 61 empirical studies on internet addiction published in peer-reviewed journals from 1996 to 2006. They found the studies used "inconsistent criteria to define internet addicts, applied recruiting methods that may cause serious sampling bias, and examined data using primarily exploratory rather than confirmatory data analysis techniques to investigate the degree of association rather than causal relationships among variables."

A 2011 review of the empirical literature by Daria Kuss and Mark Griffiths at Nottingham Trent University did find that heavy internet use met many criteria for addiction, "such as neglect of personal life, mental preoccupation, escapism, mood modifying experiences, tolerance and concealing the addictive behavior, appear to be present in some people who use networks

extensively." However, their study only was only able to identify 43 empirical studies, many of which included small samples with teenagers and university students as participants, "severely limiting the generalizability of findings." Their analysis noted the need for studies with larger samples that are representative of a broader population, and they cited the absence of studies "to assess the phenomenon from a biological perspective"—the neurochemical, rather than behavioral and mental effects. The authors also criticized the existing literature for using too few criteria for assessing addiction, and concluded that "the latent health consequences of excessive and addictive use are yet to be explored using the most rigorous scientific methods."

Some research has found a correlation between social media use and depression in adolescent girls, but not boys. But it's extremely small. In 2017, Jean Twenge of San Diego State University calculated that social media exposure could explain 0.36 percent of the covariance for depressive symptoms in adolescent girls. This means that 99.64 percent of the girls' depressive symptoms did not correlate with social media use.

Part of the problem is definitional. In a 2017 follow-up to their original paper, Kuss and Griffiths noted methodological limitations of research into the matter persisted, including matters pertaining to inconsistent usage of terminology. For example, the authors pointed out, "Social networking and social media use have often been used interchangeably in the scientific literature. However, they are not the same."

Eventually, researchers might conclude that social media addiction is indeed a mental disorder, but they aren't there yet. If (or when) that occurs, it is likely the diagnostic criteria will be detailed and nuanced, covering a narrow segment of the population—and not suggesting anything resembling an epidemic.

Why It Matters

Whether social media addiction exists—and how pervasive it may be—does not just have implications for government intrusions on personal autonomy and control over behavioral choices in the purported interest of "public health." There are also major ramifications for public policy.

Right now, health insurance does not cover the expenses of programs designed to help people with problematic use of the internet or social media. If social media addiction attains official status as a disease, legislation or regulations may mandate health plans to cover rehabilitation for this condition along with substance abuse disorders. This could increase the cost of health insurance, and drive up public spending on programs like Medicaid and Medicare.

Following the lead of other countries where internet addiction has been declared an illness, lawmakers might be motivated to grant funding for the proliferation and expansion of social media treatment programs. The burgeoning new industry could become yet another special interest in search of a steady stream of government funds.

But there can be even more disturbing repercussions if social media addiction is dubbed a mental disorder. A political consensus that social media addiction poses a potential public health "crisis" can cause collateral damage to freedom of speech, freedom of the press, and freedom of association.

The influence of the so-called "legacy media" has waned since the advent of the internet and social media platforms. Their traditional role as information gatekeepers has fallen victim to creative destruction as social media platforms provide outlets for news, information, and opinion content that might not otherwise attain public exposure.

As an example of privilege-seeking through government action, media companies in the U.K. are urging the government to intervene to "counteract all potential online harms, many of which are exacerbated by social media." Politicians have their own incentives to control internet and social media content. They purportedly seek to "protect the integrity of the democratic process" yet are also concerned that their political positions are presented in what they consider a proper light, free from misrepresentation, and that their views are given equal and balanced exposure to those of the opposition. Members of the Senate Intelligence Committee are having their staffs work on proposals to regulate social media platforms.

As government becomes more enmeshed in internet and social media activity, threats to freedom of speech, freedom of the press, and freedom of association become increasingly real.

Some governments already access social media data to affect social conditioning. In Berlin, German police recently raided the homes of 36 people accused of "hateful postings" on social media. German law prohibits a range of postings with punishments of up to five years in prison for inciting racial hatred. The experience in China, where internet access is already controlled by the state, shows what happens when heavy use of online services is given a medical designation.

In America, fortunately, the Constitution stands in the way of many laws like those enacted in other countries that enmesh the government in social media operations. So do American sensibilities. The general public is not supportive of such interventions—at least not yet. Those cultural sensibilities might be changing as younger people appear more open to limitations on speech deemed "hateful." Fear over the "scourge" of social media addiction could tip the scales even further.

It is no exaggeration to warn that the anxieties over social media addiction might reach the level of today's "opioid epidemic" panic. Social media platforms like Twitter and Facebook might be demonized as purveyors of addictive content, making them as unsympathetic as the opioid pharmaceutical companies or "Big Tobacco." The names "Zuckerberg" and "Dorsey" could join the name "Sackler" on the list of the shunned. Public attitudes are affected by fear, and resistance to government intrusion into internet activity and content can erode.

Addiction is seen as a disease that prevents individual choice about using the internet (or alcohol, or other drugs). When a policy is framed as the individual having no choice, policy oversight of that activity becomes more publicly acceptable.

And yet, when it comes to internet use and social media, it's clear that people do have a choice. A 2018 Pew survey found the majority of users stated it would not be difficult to give up visiting social media sites (although 51 percent of those under age 24 stated it would be difficult). Forty-two percent of Facebook users surveyed said they have taken a break from the platform for several weeks or more, and 26 percent have deleted the Facebook cell phone app altogether.

Today, much of the conversation regarding internet and social media activity takes place in the public square, in the lay media and on pop culture platforms. There are no policy proposals beyond the level of conjecture. There is still time to prevent the public discourse from evolving into a public panic.

Journalists, commentators, and lawmakers must be more accurate and precise with their terminology. They must resist the temptation to confer legitimacy on an unproven "addiction," and they should be called out when they do so. This is not nitpicking. And it is more than healthy skepticism. Many of our freedoms are at risk.

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