

**OPEN ACCESS**

SUBMITTED 31 May 2025

ACCEPTED 29 June 2025

PUBLISHED 31 July 2025

VOLUME Vol.05 Issue07 2025

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The Issues of Social Disengagement and Cognitive Regression Related to The Modern Mowgli Syndrome

Polvanov Rasulbek Bakhtiyarovich

Independent Researcher, Tashkent Medical University, Uzbekistan

Abstract: This article explores the psychological and sociocognitive ramifications of Modern Mowgli Syndrome, a condition increasingly observed among youth excessively immersed in virtual environments. Emphasizing the dual pathology of social disengagement and cognitive regression, the study analyzes how chronic digital overexposure and isolation from real-life social interactions contribute to the erosion of social competencies, emotional empathy, and identity consolidation. Drawing upon clinical psychology, cognitive science, and digital psychiatry, the paper investigates the progressive decline in executive functioning, linguistic skills, and empathic responsiveness commonly associated with this syndrome. Additionally, the research addresses the breakdown of normative developmental trajectories and highlights the necessity of early diagnostic intervention, psychosocial rehabilitation, and digital behavioral therapy. The article advocates for a multidimensional approach integrating psychoeducation, emotional regulation techniques, and structured social reintegration programs to mitigate the syndrome's long-term impact on youth mental health.

Keywords: Modern Mowgli Syndrome, social disengagement, cognitive regression, digital addiction, identity diffusion, empathic dysfunction, neurocognitive development, virtual isolation, psychosocial rehabilitation, youth mental health, behavioral intervention.

INTRODUCTION: In the rapidly transforming digital era, the ubiquitous presence of the internet and digital

communication technologies has significantly altered the structure of human interaction, cognition, and identity formation. Among the most pressing psychosocial phenomena emerging from this digital transformation is what contemporary psychological literature increasingly refers to as the "Modern Mowgli Syndrome" (MMS)—a complex constellation of behavioral, cognitive, and socio-emotional deviations that primarily manifest among adolescents and young adults experiencing extensive virtual immersion and social isolation. The metaphor of the "Mowgli" figure, traditionally symbolizing a human raised outside conventional societal structures, here finds its contemporary analogue in individuals raised or predominantly socialized through digital platforms, detached from embodied and interactive social environments. This syndrome, while not yet fully codified in major diagnostic manuals such as the DSM-5 or ICD-11, is drawing scholarly attention due to its multidimensional implications for developmental psychology, neurocognition, and digital psychiatry. The term encapsulates the degenerative psycho-behavioral patterns observed in youth whose primary engagements are mediated through virtual realities, thus experiencing disruptions in normative cognitive maturation, social skill acquisition, and emotional regulation. At its core, Modern Mowgli Syndrome is not merely a symptomatic expression of internet addiction but represents a broader regression into pre-social or socially detached behavioral states, accompanied by diminished executive functioning, empathy deficits, impaired identity consolidation, and a marked disengagement from real-world interpersonal dynamics. Contemporary societies, particularly those with high digital penetration and urban density, are witnessing an unprecedented shift in developmental trajectories among youth. A growing body of empirical evidence indicates that early, excessive, and unsupervised exposure to digital technologies alters the architecture of social cognition. Instead of fostering broader access to knowledge and connectivity, such exposure—when unregulated—can paradoxically lead to a withdrawal from face-to-face interactions, degradation of conversational skills, and eventual emotional alienation [1]. This phenomenon closely aligns with the constructs of social disengagement and cognitive regression, which have become pivotal components in conceptualizing the Modern Mowgli Syndrome. Individuals afflicted by MMS often exhibit disrupted internalization of social norms, reduced moral reasoning capacities, and a dependency on digital avatars or virtual identities that supplant their real-world selves. The historical context of child and adolescent development has always emphasized the role of interactive social environments in the formation

of stable identity structures and cognitive integrity. According to Vygotsky's sociocultural theory, learning is inherently a social process, and cognition develops through interaction with more knowledgeable others. However, in the context of MMS, such interaction is often supplanted by algorithmically mediated digital content, where human mentorship is replaced by artificial stimuli devoid of contextual feedback. The resulting psychosocial environment becomes impoverished, leading to an atrophy of critical human faculties such as empathy, narrative memory, moral judgment, and emotional reciprocity. Several psychological paradigms intersect in the analysis of MMS, notably those of Eriksonian identity theory, Bandura's social learning theory, and contemporary neurodevelopmental frameworks [2]. Erikson posited that adolescence is a critical period for identity formation through social roles and interactions; however, for digitally isolated youth, this period is marked by a kind of psychosocial foreclosure—wherein identity is constructed not through exploratory engagement but through passive consumption. Furthermore, Bandura's emphasis on observational learning suggests that role models are essential for social learning; however, in MMS-affected youth, such models are often replaced with digital influencers whose behaviors may promote narcissistic, antisocial, or escapist tendencies [3]. Neuroscientific research further corroborates these concerns by indicating that the developing brain, particularly the prefrontal cortex responsible for executive functioning and social cognition, may be negatively affected by prolonged exposure to fast-paced, reward-driven digital environments. Social disengagement, in the context of MMS, should not be mistaken for introversion or social preference. Rather, it represents a pathological detachment from the social fabric, wherein the individual becomes increasingly incapable of participating in reciprocal relationships. This disengagement is often accompanied by linguistic minimalism, nonverbal communication deficits, and a retreat into solitary, screen-based routines that substitute for the complexities of lived human interactions [4]. In parallel, cognitive regression—manifesting as memory fragmentation, impaired abstract reasoning, and attentional dysregulation—signals a disruption in the integrative processes necessary for adaptive functioning in dynamic social contexts. Furthermore, the implications of MMS extend beyond the psychological domain into the educational, familial, and societal spheres. Schools report increasing instances of students with diminished verbal fluency, low frustration tolerance, and an inability to collaborate in group settings [5]. Families, in turn, struggle with intergenerational communication gaps

exacerbated by digital insularity, while society at large faces the challenge of reintegrating these digitally-conditioned individuals into participatory civic life. The psychosocial cost of such phenomena may manifest in the form of rising youth mental health disorders, including anxiety, depression, alexithymia, and in extreme cases, hikikomori-like withdrawal. It is imperative, therefore, to conceptualize Modern Mowgli Syndrome not merely as a behavioral anomaly but as an emergent syndrome with distinctive clinical and sociological dimensions. Its etiology appears to be multifactorial—rooted in technological overuse, familial neglect, educational inadequacies, and broader cultural shifts toward individualism and digital hyper-connectivity [6]. Accordingly, the diagnosis, prevention, and treatment of MMS necessitate an interdisciplinary approach that integrates psychological diagnostics, pedagogical reforms, technological literacy, and therapeutic intervention. Within this context, the present study aims to systematically examine the clinical, cognitive, and socio-emotional manifestations of Modern Mowgli Syndrome as observed among youth exhibiting symptoms of chronic internet dependency and psychosocial isolation. The research seeks to identify key indicators of cognitive regression and social disengagement through psychometric analysis, behavioral observation, and qualitative interviews.

Literature review

The increasing prevalence of socio-cognitive disturbances in adolescents due to excessive digital engagement has become a major concern in contemporary psychological discourse. Among the most influential scholars who have addressed the multifaceted implications of technological immersion and its effects on identity, empathy, and interpersonal communication is Prof. Sherry Turkle, a clinical psychologist and professor at the Massachusetts Institute of Technology (MIT). In her seminal works such as "Alone Together: Why We Expect More from Technology and Less from Each Other" [7], Turkle postulates that the proliferation of screen-mediated communication is contributing to a new form of psychological solitude—a paradox wherein hyperconnectivity is coupled with emotional isolation. Her longitudinal ethnographic studies reveal a disturbing trend of digital dependency that undermines authentic human interaction, particularly among adolescents in critical phases of identity consolidation. Turkle introduces the concept of "relational impoverishment," wherein individuals raised in technologically saturated environments exhibit underdeveloped empathic skills, stunted emotional literacy, and a preference for mediated rather than direct social experiences—symptoms highly congruent

with what is described in contemporary literature as Modern Mowgli Syndrome (MMS). Her work also underscores the erosion of dialogic skills and symbolic reasoning, essential components of social cognition that, when degraded, lead to a regression in cognitive-emotional development. Building on this theoretical foundation, Dr. Larry D. Rosen, Professor Emeritus of Psychology at California State University and a leading expert in the field of media psychology, has contributed extensively to the empirical understanding of technology's impact on youth cognitive functioning. In his book "The Distracted Mind: Ancient Brains in a High-Tech World" [8], Rosen delineates how sustained exposure to digital stimuli affects attentional control, working memory, and executive functioning—cognitive faculties central to adaptive psychosocial behavior. Through experimental and neurocognitive methodologies, Rosen illustrates how chronic multitasking and intermittent reinforcement mechanisms inherent in digital platforms foster patterns of cognitive fragmentation, mental fatigue, and neuroplastic changes that impede sustained focus and deep information processing. These neurocognitive alterations bear a direct correspondence to the cognitive regression symptoms observed in individuals afflicted with MMS, particularly those related to the decline in metacognitive awareness, problem-solving capacity, and long-term goal orientation. Moreover, Rosen's research draws attention to the psychosocial disintegration manifesting as reduced prosocial behavior, increased irritability, and diminished real-world social participation—all integral to the phenomenon of social disengagement as outlined in this study. Collectively, the scholarly contributions of Turkle and Rosen not only validate the conceptual framework of Modern Mowgli Syndrome but also enrich the diagnostic and therapeutic discourse surrounding it. While Turkle emphasizes the psycho-emotional detachment and empathic deficits resulting from digital oversaturation, Rosen elucidates the cognitive underpinnings of this detachment through the lens of neuropsychological decline. Their works converge on a critical juncture: the urgent need for interdisciplinary strategies to mitigate the psycho-cognitive degeneration accompanying the unchecked digitization of youth socialization. Accordingly, this study synthesizes their findings to provide a comprehensive theoretical backdrop against which the clinical features, diagnostic indicators, and rehabilitative pathways of MMS can be systematically explored.

METHODOLOGY

The present study employs a complex, multimodal methodological framework integrating qualitative-

phenomenological analysis, comparative content analysis, and neurocognitive profiling, with the aim of examining the psychosocial and cognitive deviations associated with Modern Mowgli Syndrome (MMS) among digitally overexposed youth; in particular, the research leverages semi-structured interviews to capture first-person experiential narratives, facilitating the identification of emotional flattening, social withdrawal, and self-perceptual disturbances, while concurrently applying a battery of standardized psychological instruments—including the UCLA Loneliness Scale, Beck Cognitive Insight Scale, and DSM-5-aligned diagnostic criteria—to establish clinical validity and symptom specificity, and further substantiates its findings through cross-sectional comparisons with previously published longitudinal data on internet addiction, digital dependency, and socio-affective regression, thereby enabling a triangulated interpretation of the interplay between social disengagement and cognitive regression within the framework of digital over-socialization and techno-induced isolation.

RESULTS

The findings of the study reveal that individuals exhibiting symptoms consistent with Modern Mowgli Syndrome demonstrate a statistically significant correlation between chronic internet dependency and multidimensional social disengagement—characterized by diminished interpersonal reciprocity, avoidance of real-world communication, and progressive detachment from socio-normative frameworks—accompanied by cognitive regression markers such as impaired executive functioning, reduced self-reflexivity, and decreased abstract reasoning capacity, wherein prolonged exposure to virtual environments induces a neuropsychological shift from integrative cognitive-emotional processing toward passive, stimulus-driven reactivity, ultimately precipitating a disruption in identity coherence and self-narrative continuity in digitally over-immersed youth.

DISCUSSION

The conceptualization of Modern Mowgli Syndrome as a compound neurocognitive and psychosocial construct emerges from an interdisciplinary synthesis of developmental psychology, digital sociology, and clinical psychopathology. This study positions the syndrome not merely as a derivative of internet addiction, but as a meta-phenomenon indicative of a broader epistemic crisis in self-construction within the context of ubiquitous digital immersion. In support of this view, the observed correlation between prolonged virtual engagement and attenuated cognitive flexibility

resonates with Vygotskian perspectives on mediated learning, where cultural tools (in this case, digital interfaces) reshape higher-order mental functions. Furthermore, the manifestations of social disengagement identified in participants—characterized by withdrawal from embodied relational contexts and a marked preference for algorithmic sociality—echo Turkle's (2011) findings on the erosion of empathic attunement in screen-saturated environments. The erosion of self-narrative continuity, as noted through diminished autobiographical integration and weakened identity salience, further supports McAdams' (2001) narrative identity theory, which posits coherent life storytelling as central to psychological well-being. Here, the fragmentation of personal narrative under conditions of overstimulation and hyperreality illustrates a profound disruption in temporal self-referencing mechanisms. Of particular concern is the emergence of cognitive regression patterns, especially among adolescents, evidenced by reduced executive functioning and concrete operational thinking re-emergence [9]. This neuropsychological decline aligns with Greenfield's (2014) postulation of screen time-induced neuroplasticity, which posits the displacement of reflective cognition by reactive digital stimulus processing. The data suggest that modern youth are increasingly reliant on externally provided cognitive scaffolding—e.g., recommendation algorithms, predictive search engines—which may inhibit the maturation of metacognitive faculties and internal locus of control. Moreover, the findings problematize traditional psychodiagnostic frameworks that inadequately capture the hybridized psychopathologies emerging in digital ecologies. The syndrome's symptomatic constellation defies neat categorization within DSM-V or ICD-11 criteria, necessitating the development of new diagnostic models integrating behavioral addiction, identity diffusion, and socio-cognitive decoupling [10]. The interdisciplinary implications point toward the urgent need for a reconfiguration of mental health interventions, privileging integrative therapeutic paradigms such as cognitive-behavioral therapy (CBT) augmented with digital detox strategies, narrative reconstruction techniques, and socio-emotional skills training. In light of these insights, it becomes evident that Modern Mowgli Syndrome is not an isolated aberration but a symptomatic reflection of a broader anthropotechnical transformation wherein the human subject is increasingly configured through, and confined by, the logic of the digital. Therefore, psychological research must not only map the contours of this syndrome but also interrogate the structural conditions enabling its proliferation.

CONCLUSION

The analysis of Modern Mowgli Syndrome as an emergent psychological and social pathology rooted in chronic internet addiction and compounded by sustained social disengagement reveals a complex interplay of cognitive regression, identity diffusion, and interpersonal dysfunction that transcends traditional diagnostic categories. The findings of this study underscore that the excessive and unbalanced immersion in virtual environments can induce a regressive neurocognitive profile in youth, manifesting through diminished executive functioning, attenuated autobiographical narrative coherence, and weakened empathic responsiveness. Furthermore, the syndrome's entanglement with socio-cultural processes of hyper-connectivity and algorithmic sociality suggests that its emergence is symptomatic of a deeper structural transformation of human subjectivity within the framework of digitized society.

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