

REVIEW ARTICLE

Healing Young Minds: Ayurvedic Solutions for Screen Addiction in Children – A Critical Evidence-Based Review

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ABSTRACT

Screen addiction is an emerging pediatric behavioral concern with multifaceted effects on cognitive, emotional, and sensory development. This review critically examines the problem through the lens of Ayurvedic concepts such as *Vishaya* of *Mana*, *Asatmya Indriyarth* *Samyoga*, and *Prajnaparadha*, integrating them with contemporary findings on neurodevelopmental disruption. A narrative review was conducted using Ayurvedic classical texts and modern databases (PubMed, Google Scholar, and ResearchGate), focusing on the terms “screen addiction in children,” “Ayurveda and cognition,” “child behavior,” and “mental health.” This study acknowledges confounding variables such as age, parental supervision, and home environment, which influence the severity and presentation of screen addiction. Specific Ayurvedic interventions are examined with emphasis on age-appropriate applications. These include child-friendly techniques as *Yoga* and *Pranayama* according to age (e.g., animal poses, *Trataka*, *Kaphalabhati*), validated *Rasayana* herbs such as *Brahmi* and *Mandukaparni* for cognitive enhancement. Behavioral guidelines based on *Dinacharya* and *Sadvritta* offer preventive and promotive solutions for restoring mental balance and sensory discipline. The review establishes a link between modern clinical symptoms (e.g., inattention, irritability, poor sleep, and anxiety) and Ayurvedic pathology such as *Vata-Pitta* and *Manovaha Srotas Dushti*. By integrating evidence-based modern insights with classical principles, the review proposes a sustainable, context-sensitive framework for managing screen addiction in children. Integration of Ayurveda wisdom with modern research provides a sustainable approach to address screen addiction and furthermore preventive strategies, combined with parental involvement and awareness campaigns, can further support children’s mental health.

1. INTRODUCTION

In the present era, the growing problem of screen addiction in children is a significant public health concern. Screen addiction refers to the excessive and habitual use of technology, leading to a dependence on devices such as smartphones, tablets, computers, and televisions.^[1] In children, screen addiction poses significant challenges as their developing minds are particularly vulnerable to the adverse effects of prolonged digital engagement. For example, in 1970, children began to regularly watch TV at 4 years of age, whereas today, children begin interacting with digital media at 4 months of age.^[2] In 1999, the average screen time of 8–18 year olds was 6.21 h/day and had increased by 2009–7:38 h.^[3] Excessive screen time in children

can disrupt cognitive, emotional, and social development, leading to issues such as reduced attention span, impaired memory, mood swings, and social withdrawal. The dependency on screens also detracts from physical activities, outdoor play, and face-to-face interactions, which are critical for holistic growth and well-being. While contemporary science addresses screen addiction through psychological and neurobiological frameworks, Ayurveda offers complementary insights through its concepts of *Mana*, *Doshas*, and sensory regulation. This review focuses specifically on integrating these concepts with age-sensitive, evidence-backed solutions for managing screen addiction in children.

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1.1. *Vishaya* of *Mana* in Ayurveda

In Ayurveda, the *Vishaya* (Objects) of *Mana* encompass several critical mental faculties essential for cognitive and emotional well-being. These include *Chintya*, which pertains to the process of thinking

and contemplation, and *Vicharya*, involving the logical analysis of thoughts. *Uhya* represents the ability to visualize or engage in creative imagination, while *Dhyeya* focuses on goal orientation and objectives. Finally, *Sankalpa* refers to the capacity for resolution and decision-making, highlighting the integrative role of the mind in synthesizing thoughts, plans, and actions.

1.2. *Asatmya Indriyarth Samyoga* and Screen Addiction

As per *Acharya Charaka*, three main causes of illness impact both the body (*Sareera*) and the mind (*Mana*): *Asatmya Indriyarth Samyoga* (improper sensory perception), *Prajnaparadha* (intellectual misconduct), and *Parinama*. In the present era, *Asatmya Indriyarth Samyoga* is particularly significant when considering screen addiction. *Asatmya Indriyarth Samyoga* can manifest in three distinct ways.^[4] *Ati Yoga* (overuse) occurs when the senses are excessively stimulated, such as through prolonged screen time, which overuses vision (*Chakshu*) and hearing (*Karna*). *Hina Yoga* (underuse) is observed in the reduced engagement of the senses in natural activities, like outdoor play, leading to sensory neglect. Finally, *Mithya Yoga* (misuse) involves the exposure to inappropriate or overly stimulating content, exemplifying the misuse of sensory faculties.^[5] Together, these forms of improper sensory engagement disrupt mental and sensory equilibrium, contributing to various imbalances. Screen addiction primarily arises from *Ati Yoga* and *Mithya Yoga*, resulting in mental strain and *Dosha* imbalances, particularly overstimulation of *Vata* and heightened irritability due to *Pitta*.^[6]

1.3. Objective

This review aims to critically analyze child screen addiction through Ayurvedic principles and assess integrative solutions combining classical concepts and modern findings.

2. METHODS

This narrative review employed a qualitative synthesis of both classical Ayurvedic literature and contemporary scientific studies to explore the impact of screen addiction on children and potential Ayurvedic interventions. Relevant Ayurvedic concepts such as *Mana* (mind), *Indriyas* (senses), *Asatmya Indriyarth Samyoga* (improper sensory interaction), and *Dosha* imbalances were identified through a detailed review of classical texts including *Charaka Samhita*, *Sushruta Samhita*, and *Ashtanga Hridaya*. In parallel, a comprehensive search was conducted with systematic approach using the PubMed, Google Scholar, and ResearchGate database to identify relevant studies on child screen addiction using keywords such as “screen addiction in children,” “Ayurveda and mental health,” and “Ayurvedic management of behavioral disorders.” Studies and texts were included if they addressed cognitive, emotional, or sensory impacts of screen overuse in children and proposed relevant Ayurvedic approaches. Extracted data were thematically organized to highlight the intersections between screen addiction, Ayurvedic psychopathology, and interventions such as *Dinacharya*, *Sadvritta*, *Rasayana*, and *Sattvic Aahara*. This approach facilitated a holistic understanding of how Ayurveda can contribute to managing and preventing screen addiction in children.

2.1. Research Focus and Confounding Variables

Understanding screen addiction in children requires acknowledging the multiple psychosocial, environmental, and developmental factors that influence its onset and severity. These confounding variables not only affect the presentation of addiction but also determine the

success of any preventive or therapeutic intervention. The following table 1 outlines key determinants – such as age, gender, family environment, and socio-cultural context – that must be considered for a comprehensive and individualized approach to managing screen addiction in pediatric populations.

2.2. Impact on Cognitive Functions

Prolonged screen exposure significantly affects children’s cognitive abilities, including attention, memory, and problem-solving skills. Studies have found that screen addiction correlates with decreased academic performance.^[12] This can be correlated with disturbances in *Chintya* (thinking) and *Vicharya* (logical reasoning). In addition, research suggests that excessive screen media use in children is associated with a range of negative outcomes, including cognitive impairments such as reduced attention span and delayed language development.^[13]

2.3. Emotional and Behavioral Effects

Excessive screen use has been linked to anxiety, depression, and irritability in children. Mood swings and social withdrawal are commonly observed among children with high screen exposure, and associated with attention deficit hyperactive disorder.^[14] Moreover, children addicted to screens often withdraw from social interactions, leading to difficulties in forming and maintaining relationships, further exacerbating feelings of isolation.^[15]

2.4. Sleep Disorders

The blue light emitted from screens delays melatonin production, disrupting sleep patterns and causing irregular sleep cycles. Poor sleep quality results in fatigue, irritability, and diminished cognitive performance.^[16] In 2011, it was estimated that children slept, on average, 1 h less each night compared to those in the early 20th century. Sleep is crucial for the neurodevelopment of infants and toddlers. Growing evidence suggests that insufficient sleep, in terms of both duration and quality, can negatively impact the physical and mental health, as well as the psychosocial well-being, of young people. Inadequate sleep during critical developmental periods disrupts brain maturation, affecting processes such as synaptic pruning, neurogenesis, and myelination and, therefore, impacts memory consolidation, emotional regulation, and cognitive functions, as well as the brain’s ability to clear toxins, increasing the risk of long-term neurodevelopmental issues. According to Ayurveda, *Rathri Jagarana* (Staying awake at night) and *Alpa Nidra* (inadequate sleep) aggravate *Vata Dosha* by causing *Rukshata* in the body. Moreover, sleep (*Nidra*) is considered essential for mental balance. Hence, *Nidra Nasha* (disrupted sleep) aggravates *Vata Dosha*, which destabilizes the mind (*Manovaha Srotas*), impairs *Dhi* (intellect), *Dhriti* (decision-making), and *Smriti* (memory), ultimately hindering overall mental and emotional growth in children. Altogether sleep deprivation is believed to aggravate all three *Doshas* (*Vata*, *Pitta*, and *Kapha*), thereby affecting overall well-being.^[17]

2.5. Sensory Overload and *Asatmya Indriyarth Samyoga*

Continuous screen exposure overstimulates the visual (*Chakshu*) and auditory (*Karna*) senses, leading to fatigue, headaches, eye strain, and irritability. This sensory overload impairs judgment and decision-making, further highlighting its detrimental impact. Such effects align with Ayurveda concepts of *Ati Yoga* (overuse) and *Mithya Yoga* (misuse) of sensory organs, emphasizing the need for balanced sensory engagement.^[18]

2.6. Screen Addiction and *Pragnaparada*

Screen addiction in children is intricately linked to the Ayurveda concept of *Prajnaparadha* (intellectual error), which arises from knowingly acting against wisdom. This error disrupts the functions of *Dhi* (intellect), *Dhriti* (self-control), and *Smriti* (memory). Normally, *Dhi* ensures the ability to comprehend, analyze, and make rational decisions, driven by the clarity of *Sattva guna*. However, excessive screen use overstimulates the mind, aggravating *Rajas* (hyperactivity) and *Tamas* (ignorance), which cloud judgment and weaken cognitive abilities. This leads to poor decision-making, diminished focus, and impaired creativity. Similarly, *Dhriti*, the capacity for self-restraint, is eroded by the hyper-stimulating and addictive nature of digital content, making it increasingly difficult for children to regulate their screen time and resist instant gratification. Over time, this cycle weakens *Smriti* (memory), impairing the ability to consolidate and recall information, as mental fatigue caused by overstimulation disrupts natural cognitive functions.

2.7. Neurological Impacts

Excessive screen use has been associated with structural and functional changes in the brain of children (ranging from birth to 18 years old). Structural and functional changes involve the specific brain regions impacted, encompassing the brain's cortex, cerebellum, and subcortical structures, such as the basal ganglia, the thalamus, and the hippocampus. It has been found that the prefrontal cortex is the most vulnerable region.^[19] Excessive screen use disrupts the balanced functioning of *Vata Dosha*, leading to various neurological disturbances. It depletes *Utsaha* (energy) by over stimulating dopamine pathways, resulting in reduced motivation and lethargy. Respiratory functions such as *Uchhvasa* and *Nishvasa* become irregular due to shallow breathing and stress-induced sympathetic dominance. *Cheshta* (motor and sensory activities) is affected as prolonged inactivity impairs coordination and increases sensory overload.^[20,21]

2.8. Physical Health Issues

Screen addiction contributes to a sedentary lifestyle, reducing physical activity and increasing the risk of obesity and related health conditions. In addition, prolonged device use often results in poor posture, leading to musculoskeletal issues among children. In Ayurveda, a sedentary lifestyle contributes to metabolic disorders such as *Prameha* (diabetes) by disturbing the balance of *Vata* and *Kapha Dosha*. When physical activity is insufficient, *Vata* becomes aggravated, leading to poor circulation and reduced digestive function, while *Kapha* accumulates, causing sluggish metabolism and weight gain. This results in impaired *Agni* (digestive fire), which weakens digestion and leads to the formation of *Ama* (toxins), a key factor in the development of *Prameha*. These physical health concerns further illustrate the multifaceted impact of screen addiction on children's overall well-being.

2.9. Ayurveda Interventions

Ayurveda offers a holistic approach to managing screen addiction through various interventions aimed at restoring mental and sensory balance. Incorporating a structured daily routine (*Dinacharya*) with physical activities, mindfulness practices, and outdoor play can effectively counteract the negative effects of screen addiction in Children. Furthermore, a *Sattvic* diet, comprising fresh and wholesome foods, nourishes the mind and reduces irritability caused by excessive screen time. *Abhyanga* (oil massage) to calm the nervous system and balance *Vata dosha* further aid in mitigating the impact of prolonged screen exposure. Rejuvenation herbs (*Rasayana*) are known to enhance

cognitive function and mental resilience that can be given under the supervision of an Ayurveda physician as palatable formulations such as syrup. In addition, *Yogasanas* (according to the suitability of the age of the child), meditation, and breathing exercises (*Pranayama*) help balance mental faculties and alleviate stress.^[22,23]

Table 2 outlines recommended yoga and techniques tailored to different pediatric age groups for improving focus, emotional regulation, and nervous system balance. These practices – when appropriately selected and mindfully introduced – can support cognitive and behavioral development in children. However, to ensure safety and avoid potential strain or musculoskeletal injury, these yoga practices should always be performed under the guidance of a qualified instructor and supervised by a registered Ayurvedic pediatric physician, particularly when introduced to young children.

The following Ayurvedic *Rasayana* herbs mentioned in Table 3 are traditionally used to support cognitive function, emotional stability, and overall development in children.. However, it is important to note that these formulations should only be administered under the supervision of a registered Ayurvedic pediatric physician, considering the child's age, palatability of the formulation, constitution (*Prakriti*), and health status.

2.10. Preventive Strategies

Preventive measures are crucial for addressing screen addiction in children. Implementing a digital detox with designated screen-free periods helps restore mental balance, while parental involvement in family-oriented activities fosters emotional connections.^[15] Parents can set an example by prioritizing screen-free quality time, encouraging greater interaction with their children. They can establish family routines, such as leaving phones at home during outings or designating a common charging station to keep devices out of bedrooms, thereby reducing impact on sleep. Awareness programs targeting parents and educators can play a pivotal role in highlighting the risks of screen addiction and the benefits of Ayurveda solutions for promoting overall well-being.

The concepts of *Dinacharya* and *Sadvritta*, which are enriched with Ayurveda principles can be used to prevent screen addiction in children by providing holistic and sustainable approach to maintaining physical and mental health. *Dinacharya* (structured daily routine) helps establish a disciplined rhythm for the day, balancing doshas and promoting overall well-being. Encouraging older children to wake up before 7.00 a.m. during *Brahma Muhurta* (pre-dawn) aligns their body with nature.

Practices like *Abhyanga* (oil massage) with sesame or coconut oil twice a week calm *Vata Dosha* and enhance physical strength. Regular meals based on *Tridosha-balancing Ahara* and mindful eating without distractions (Screen-free meals) further promote health, while avoiding *Tamasika* foods like junk snacks minimizes lethargy and dependency on digital devices, gentle foot massage, no screens 1 h before sleep.

Sadvritta (code of conduct) focuses on cultivating disciplined behavior and reducing screen dependency. Teaching respect for parents and reinforcing values such as *Shraddha* (respect) and *Anushasana* (discipline) diminishes the need for digital distractions. Setting time limits for screen usage and encouraging outdoor play enhances *Prana Vayu* and promotes holistic development. Establishing family storytelling sessions (replacing screen time) and encouraging gratitude journaling or drawing, instill moral values, and divert attention from screens. *Indriya Nigraha* (self-control) can be nurtured for older

children by educating children on the harmful effects of screen addiction on *Manas* (mind) and *Indriyas* (senses), encouraging constructive screen use.

3. DISCUSSION

The findings emphasize the intricate relationship between screen addiction and the disruption of mental faculties, sensory balance, and overall well-being, as understood through the framework of *Vishaya* of *Mana* and *Asatmya Indriyarth Samyoga*.

Screen addiction, characterized by prolonged and compulsive use of digital devices, is shown to impair cognitive functions such as thought processing (*Chintya*), analytical reasoning (*Vicharya*), and decision-making (*Sankalpa*). These disruptions resonate with vitiations of *Vata* and *Pitta Dosha*, as seen in symptoms such as restlessness, irritability, and emotional instability. The overstimulation caused by screen exposure, particularly through *Ati Yoga* (overuse) and *Mithya Yoga* (misuse) of sensory organs such as the eyes (*Chakshu*) and ears (*Karna*), leads to sensory overload, which further aggravates mental and physical imbalances.

An important aspect in addressing screen addiction is the acknowledgment of its multifactorial origin, especially in children. Table 1 presents a summary of the major confounding factors that influence the pattern and impact of screen use. Age plays a pivotal role – while younger children (under 5 years) are more susceptible to sensory overload and struggle with self-regulation, older children and adolescents often face peer pressure and exposure to addictive digital content, such as social media or gaming. Parental behavior significantly shapes children's media habits; inconsistent screen-time rules, excessive parental screen use, and lack of modeling healthy routines often escalate dependency. The home environment, especially when devoid of outdoor engagement, structured family activities, or communal dining, can foster compulsive screen habits. Furthermore, gender differences have been observed – boys tend to gravitate towards gaming, while girls are more affected by social media overuse, each carrying unique cognitive and emotional repercussions. Socioeconomic and cultural dynamics, such as urbanization, competitive academics, or single-child households, also amplify screen exposure risks. Recognizing and accounting for these confounding factors is essential when designing and implementing Ayurveda-informed interventions, ensuring they are developmentally appropriate, contextually relevant, and sustainable.

Contemporary research corroborates these Ayurveda interpretations, with studies linking excessive screen time to reduced attention, memory impairments, mood disorders, and sleep disturbances. The interplay between *Dhi*, *Dhriti*, and *Smriti* – perpetuates the cycle of *Prajnaparadha*. Impaired *Dhi* leads to poor choices, weak *Dhriti* hinders self-control, and disrupted *Smriti* prevents learning from past mistakes, reinforcing screen dependency. The alignment between Ayurveda principles and modern findings reinforces the relevance of integrating traditional wisdom into addressing screen addiction. For example, disruptions in sleep (*Nidra*) caused by blue light exposure align with 'Ayurveda's understanding of sleep as a crucial factor for mental equilibrium and *Dosha* harmony.

Ayurveda interventions, including *Dinacharya* (daily routine), *Sadvritta* (ethical and social discipline), and *Rasayana* herbs, offer holistic solutions for managing screen addiction. Practices like *Abhyanga* for calming the nervous system, and mindfulness techniques such as Yoga *Asana*, *Pranayama* (according to age) help restore the balance of *Mana* and mitigate the effects of sensory misuse. Furthermore, a *Sattvic* diet

and digital detox strategies can enhance emotional resilience and mental clarity in children. These solutions reflect not only traditional healing logic but also address neurobehavioral disruptions observed in recent pediatric screen addiction studies. The success of Ayurvedic interventions is also dependent on parental involvement, child's age, and home routine. For instance, *Dinacharya* and *Sadvritta* can be adapted to suit the family's cultural and environmental context.

The incorporation of preventive and curative approaches, along with parental involvement and awareness campaigns, can further amplify the efficacy of these interventions. Ayurveda research and practices provide a robust framework for addressing the multifaceted effects of screen addiction on children's mental health. However, more empirical studies and interdisciplinary collaborations are needed to substantiate these traditional practices with scientific evidence and ensure their integration into contemporary healthcare systems.

By integrating classical Ayurveda principles with contemporary scientific findings, this study offers a holistic perspective on how excessive screen exposure disrupts cognitive, emotional, and sensory functions. The analysis of *Vishaya* of *Mana* and *Asatmya Indriyarth Samyoga* provides a deeper insight into the root causes of screen addiction, beyond the conventional neurological and psychological explanations. Furthermore, the discussion on *Prajnaparadha* highlights the self-perpetuating cycle of impaired cognition and poor decision-making, offering a unique Ayurveda-based framework for understanding digital dependency. The proposed interventions, including targeted Ayurveda therapies and preventive strategies, present practical solutions that extend beyond symptom management to address the underlying imbalances. By advocating for empirical validation and interdisciplinary collaboration, this review encourages a more integrative approach to tackle screen addiction, ensuring its relevance in both traditional and modern healthcare contexts.

4. CONCLUSION

Screen time addiction significantly disrupts children's mental health by affecting the *Vishaya* of *Mana* and aggravating *Dosha* imbalances. Screen addiction disrupts these mental faculties by either over stimulating or diminishing their functioning. Overuse of screens impairs *Chintya* and *Vicharya*, reducing analytical and decision-making abilities, while *Dhyeya* and *Sankalpa* are undermined by distractions caused by digital content. Improper sensory use, as described by *Asatmya Indriyarth Samyoga*, exacerbates these issues further leading to imbalances in *Doshas*. Contributing factors such as age, parenting style, and environment must be considered when designing interventions. Ayurveda offers holistic, age-appropriate solutions – including *Dinacharya*, *Sadvritta*, *Rasayana*, and yoga practices – that can be tailored to modern needs. Integrating these with contemporary evidence provides a sustainable framework to prevent and manage screen addiction, promoting balanced mental health in children. Further, interdisciplinary research and practical guidelines are essential to validate and implement these integrative solutions in contemporary pediatric care.

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6. AUTHORS' CONTRIBUTIONS

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9. CONFLICTS OF INTEREST

Nil.

10. DATA AVAILABILITY

This is an original manuscript and all data are available for only review purposes from principal investigators.

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REFERENCES

- Tekeci Y, Torpil B, Altuntaş O. The impact of screen exposure on screen addiction and sensory processing in typically developing children aged 6-10 years. *Children (Basel)*. 2024;11(4):464. doi: 10.3390/children11040464
- Radesky JS, Christakis DA. Increased screen time: Implications for early childhood development and behavior. *Pediatr Clin North Am*. 2016;63(5):827-39. doi: 10.1016/j.pcl.2016.06.006
- Magee CA, Lee JK, Vella SA. Bidirectional relationships between sleep duration and screen time in early childhood. *JAMA Pediatr*. 2014;168(5):465-70. doi: 10.1001/jamapediatrics.2013.4183
- Sharma RK, Dash B, editors. Agnivesa's charaka samhita. Sharirsthana. Vol. 2., Ch. 1., Ver. 20-24, 98-108, 118-126. Varanasi: Chaukhambha Sanskrit Series Office Publishers; 2008. p. 315-7, 336-7, 341-2.
- Murthy KR, editor. Vagbhata's astanga hrdayam. Sutrasthan. Vol. 1., Ch. 12., Verse. 34-37. Varanasi: Chowkhamba Krishnadas Academy; 2021. p. 173-5.
- Weinstein A, Lejoyeux M. Neurobiological mechanisms underlying internet gaming disorder. *Dialogues Clin Neurosci*. 2020;22(2):113-26. doi: 10.31887/DCNS.2020.22.2/aweinstein
- Franchak JM, Adolph KE. Early exposure and sensory overload: Infants' and toddlers' interaction with media. *Develop Psychol*. 2011;47(3):573-83. doi: 10.1037/a0021281
- Nikken P, Schols M. How and why parents guide the media use of young children. *J Child Family Stud*. 2015;24:3423-35. doi: 10.1007/s10826-015-0144-4
- Christakis DA. Interactive media use at younger than the age of 2 years: Time to rethink the American academy of pediatrics guideline? *JAMA Pediatr*. 2014;168(5):399-400. doi: 10.1001/jamapediatrics.2014.264
- Leonhardt M, Overå S. Are there differences in video gaming and use of social media among boys and girls?-a mixed methods approach. *Int J Environ Res Public Health*. 2021;18(11):6085. doi: 10.3390/ijerph18116085
- Twenge JM, Campbell WK. Associations between screen time and lower psychological well-being among children and adolescents. *Prev Med Rep*. 2018;12:271-83. doi: 10.1016/j.pmedr.2018.10.003
- Hu BY, Johnson GK, Teo T, Wu Z. Relationship between screen time and Chinese children's cognitive and social development. *J Res Child Educ*. 2020;34(2):183-207. doi: 10.1080/02568543.2019.1702600
- Karani NF, Sher J, Mophosho M. The influence of screen time on children's language development: A scoping review. *S Afr J Commun Disord*. 2022;69(1):825. doi: 10.4102/sajcd.v69i1.825
- Lissak G. Adverse physiological and psychological effects of screen time on children and adolescents: Literature review and case study. *Environ Res*. 2018;164(1):149-57.
- Muppalla SK, Vuppapapati S, Pulliahgaru AR, Sreenivasulu H. Effects of excessive screen time on child development: An updated review and strategies for management. *Cureus*. 2023;15(6):e40608. doi: 10.1016/j.jaim.2021.07.021
- Silvani MI, Werder R, Perret C. The influence of blue light on sleep, performance and wellbeing in young adults: A systematic review. *Front Physiol*. 2022;13:943108.
- Varghese E, Prashanth KT, Kuttikrishnan M, Yesodharan R. Ratrijagarana night wakefulness and its impact on manasika bhava mental characteristics among industrial workers: A descriptive cross-sectional study. *J Ayurveda Integr Med*. 2022;13(2):100505. doi: 10.1016/j.jaim.2021.07.021
- Sharma A, Gothecha VK, Ojha NK. Dyslexia: A solution through Ayurveda evidences from Ayurveda for the management of dyslexia in children: A review. *Ayu*. 2012;33(4):486-90. doi: 10.4103/0974-8520.11052
- Ding K, Shen Y, Liu Q, Li H. The effects of digital addiction on brain function and structure of children and adolescents: A scoping review. *Healthcare (Basel)*. 2023;12(1):15. doi: 10.3390/healthcare12010015
- Sharma RK, Dash B, editors. Agnivesa's charaka samhita. Sutrasthan. Vol. 1. Ch. 18, Ver. 49. Varanasi: Chaukhambha Sanskrit Series Office Publishers; 2008. p. 346.
- Kuss DJ, Griffiths MD. Internet and gaming addiction: A systematic literature review of neuroimaging studies. *Brain Sci*. 2012;2(3):347-74.
- Tadpatrikar A, Sharma S, Sharma MK, Bhargav H, Anand N, Mishra P. An integrated yoga and cognitive behavioral therapy intervention for managing excessive use of internet among the youth: A case series. *Int J Yoga*. 2023;16(1):56-60. doi: 10.4103/ijoy.ijoy_47_23
- Puthavayala CK, Singh D, Sashidharan RK. A perspective of yoga on smartphone addiction: A narrative review. *J Family Med Prim Care*. 2022;11(6):2284-91. doi: 10.4103/jfmpe.jfmpe_1765_21
- Busch AM, Modica CA, Sheridan ER. The effect of yoga on anxiety, attention and social-emotional symptoms in preschool children: A pilot quasi-experimental study. *Child Psychiatry Hum Dev*. 2025;56(2):570-9. doi: 10.1007/s10578-023-01588-9
- Salimath M, Prashanth AS. Role of kapalabhati and tratak in school going children w.s.r. to poor academic performance. *J Ayurveda Integr Med Sci*. 2018;6:153-8. doi: 10.21760/jaims.3.6.23
- Hagins M, Haden SC, Daly LA. A randomized controlled trial on the effects of yoga on stress reactivity in 6th grade students. *Evid Based Complement Alternat Med*. 2013;2013:607134. doi: 10.1155/2013/607134
- Mitra-Ganguli T, Kalita S, Bhushan S, Stough C, Kean J, Wang N, Sethi V, Khadilkar A. A randomized, double-blind study assessing changes in cognitive function in Indian school children receiving a combination of *Bacopa monnieri* and micronutrient supplementation vs. Placebo. *Front Pharmacol*. 2017;8:678. doi: 10.3389/fphar.2017.00678
- Puttarak P, Dilokthornsakul P, Saokaew S, Dhippayom T, Kongkaew C, Sruamsiri R, Chuthaputti A, Chaiyakunapruk N. Effects of *Centella asiatica* (L.) Urb. On cognitive function and mood related outcomes: A systematic review and meta-analysis. *Sci Rep*. 2017;7:10646. doi: 10.1038/s41598-017-09823-9
- Malik J, Karan M, Vasisht K. Nootropic, anxiolytic and CNS-depressant studies on different plant sources of Shankhpushpi. *Pharm Biol*. 2011;49(12):1234-42. doi: 10.3109/13880209.2011.584539

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Table 1: Research focus and confounding variables in pediatric screen addiction

Factor	Influence	Evidence
Age	Younger children (under 5) are more vulnerable to sensory overload; older children face peer pressure and content-based addiction.	Franchak and Adolph 2011 ^[7]
Parental behavior	Parental screen use, discipline style, and screen-time rules affect children’s digital habits.	Nikken and Schols 2015 ^[8]
Home environment	Lack of outdoor play, absence of communal dining, or unstructured family routines can facilitate addictive patterns.	Christakis 2014 ^[9]
Gender	Research suggests boys tend toward gaming addiction, while girls are more vulnerable to social media overuse.	Leonhardt and Overå 2021 ^[10]
Socioeconomic and cultural factors	Urbanization, single-child families, and competitive education systems increase screen exposure risks.	Twenge and Campbell 2018 ^[11]

Table 2: Age-specific yoga interventions/techniques for managing screen addiction in children

Age group	Recommended yoga/technique	Effect	Evidence
4–6 years	Animal poses	Enhances attention, regulates breath	Busch <i>et al.</i> , 2025 ^[24]
7–10 years	Kaphalabhati, Trataka	Improves focus and calms mind	Salimath and Prashanth 2018 ^[25]
10+ years	Nadi Shodhana, Bhramari, Yoga Nidra	Reduces anxiety	Tadpatrikar <i>et al.</i> , 2023; Hagins <i>et al.</i> , 2013 ^[26]

Table 3: Commonly used Ayurvedic Rasayana herbs for cognitive and emotional support in children

Rasayana herb	Effect	Evidence
<i>Brahmi (Bacopa monnieri)</i>	Enhances memory and focus	Mitra-Ganguli <i>et al.</i> , 2017 ^[27]
<i>Mandukaparni (Centella asiatica)</i>	Boosts cognition, reduces anxiety	Puttarak <i>et al.</i> , 2017 ^[28]
<i>Shankhpushpi (Convolvulus pluricaulis)</i>	Enhances memory and reduces anxiety	Malik <i>et al.</i> , 2011 ^[29]