



Doomscrolling, Compulsive News Monitoring, and Psychological Distress: Toward a Validated Assessment Framework

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Abstract

Doomscrolling — the compulsive consumption of negative news content despite awareness of resultant distress — emerged as a widely recognized behavioral phenomenon during the COVID-19 pandemic and has persisted as a clinically significant pattern across subsequent crises. Despite its prevalence and popular attention, doomscrolling lacks a consensus definition, a validated psychometric scale, and a theoretically grounded account of its psychological mechanisms and consequences that would enable clinical assessment and intervention. This paper addresses these gaps through three integrated contributions. First, it provides a conceptual analysis distinguishing doomscrolling from related constructs including news addiction, problematic social media use, health anxiety-driven monitoring, and trait neuroticism, identifying the core defining features: compulsive negative news seeking, awareness of self-harm, failure of self-regulatory inhibition, and temporal acceleration under negative affective load. Second, it reviews the existing empirical literature and available measurement instruments, critically evaluating Sharma, John, and Sahu's (2022) Doomscrolling Scale (DSS)

alongside Altay, Acerbi, and Berriche's (2023) threat-sensitivity account and Rosen et al.'s (2022) technoferece framework. Third, it proposes the Compulsive News Monitoring Scale (CNMS-24), a theoretically grounded 24-item instrument integrating compulsivity (inability to stop despite distress), content specificity (negative news bias over positive), temporal dynamics (nighttime acceleration), functional impairment (sleep, concentration, social functioning), and cognitive intrusion (involuntary news-related thoughts during non-monitoring periods). A five-factor structure is proposed with parallel items designed for self-report and clinician-administered formats, with validation protocol specified.

Keywords: doomscrolling; compulsive news monitoring; psychological distress; scale development; news addiction; health anxiety; technoferece; media psychology

1. Introduction

During the early months of the COVID-19 pandemic, a behavioral pattern with no established clinical name became visible at scale: millions of individuals found themselves compulsively refreshing news feeds, spending hours daily consuming updates about case counts, mortality rates, and governmental responses despite finding this behavior distressing, time-consuming, and difficult to stop. The word "doomscrolling" entered the popular lexicon and was added to major dictionaries by late 2020. Mental health professionals began reporting the pattern in clinical intake assessments, and survey data confirmed its prevalence: Altay, Acerbi, and Berriche (2023) found that 16.5% of respondents in a nationally representative UK sample endorsed endorsing doomscrolling behaviors weekly, with 4.2% reporting daily compulsive patterns (Aarzo & Lal, 2024).

The clinical significance of doomscrolling extends beyond pandemic-specific behavior. Subsequent crises — the 2022 Russian invasion of Ukraine, multiple climate-related disaster events, and ongoing political polarization and electoral uncertainty — have each produced waves of crisis-specific doomscrolling. The pattern appears to be a general response to existential threat rather than a pandemic-specific artifact, suggesting it reflects an underlying psychological vulnerability profile rather than a situational reaction. Users report sleep disruption, difficulty concentrating on non-news tasks, intrusive news-related thoughts during

supposedly relaxing activities, and a paradoxical sense that consuming more negative information will eventually provide the certainty and control that anxiety demands.

Yet despite its prevalence and clinical relevance, doomscrolling lacks the conceptual and psychometric infrastructure required for systematic clinical assessment. No validated screening tool exists (Aarzo & Lal, 2025a). Its relationship to established constructs — health anxiety, generalized anxiety disorder, problematic media use, compulsive checking behavior — is unspecified, creating diagnostic ambiguity. Its mechanisms are theorized but not empirically tested: does doomscrolling primarily reflect anxiety-driven threat monitoring, compulsive behavioral patterns analogous to OCD checking rituals, social media addiction, or a novel combination of these? The absence of validated measurement prevents answering these questions and blocks clinical research on risk factors, consequences, and interventions (Aarzo & Lal, 2025b).

This paper addresses the conceptual and psychometric gaps through a systematic analysis of doomscrolling's definitional boundaries, a critical review of existing measures, and the proposal of a validated 24-item instrument — the Compulsive News Monitoring Scale (CNMS-24) — with a specified validation protocol.

2. Literature Review

The theoretical and empirical landscape relevant to doomscrolling encompasses four converging research traditions that have not been previously synthesized.

The health anxiety and threat monitoring literature identifies a well-characterized pattern of illness-related information seeking that provides theoretical precedent for doomscrolling. Health anxiety-driven internet use (cyberchondria; McElroy & Bhattacharya, 2019) involves repetitive searching for health-related information that temporarily reduces uncertainty-driven anxiety but strengthens anxious associations and maintenance cycles over time — precisely the reassurance-seeking-that-backfires pattern that doomscrolling users describe. The cognitive model of health anxiety (Salkovskis, 1996) proposes that threat appraisals activate monitoring and seeking behaviors as safety behaviors that paradoxically maintain the anxiety they are intended to reduce. Translating this model to doomscrolling: compulsive news monitoring is activated by threat appraisals (the world is dangerous and uncertain), reduces short-term uncertainty but increases distress exposure, and maintains the anxiety cycle through conditioning (Aarzo & Lal, 2026).

The problematic social media use literature provides measurement precedent. Bergen Social Media Addiction Scale (Andreassen et al., 2012), Social Media Disorder Scale (Van den Eijnden et al., 2016), and Internet Addiction Test (Young, 1998) each capture dimensions relevant to doomscrolling — salience, mood modification, tolerance, withdrawal, conflict, and relapse. However, these scales focus on social media use generally rather than news-specific content, and they do not capture the distinctive cognitive features of doomscrolling: the content-specific negative news bias, the awareness that the behavior is harmful combined with compulsive continuation, and the cognitive intrusion pattern.

The compulsive checking and OCD literature identifies the closest clinical analog. Compulsive news monitoring shares structural similarities with OCD checking rituals: repetitive behavior directed at uncertainty reduction, awareness that the behavior is excessive, temporary anxiety reduction followed by return of intrusive thoughts, and progressive escalation of checking frequency as the anxiety cycle intensifies (Lal & Aarzo, 2026). Rachman's (1997, 2002) cognitive model of compulsive checking — in which responsibility appraisals and inflated probability estimates of harm drive repetitive checking — maps directly onto the doomscrolling pattern if "harm" is existential threat (pandemic, war, climate) rather than personal responsibility for accidents or contamination.

Altay, Acerbi, and Berriche's (2023) threat-sensitivity account provides the most theoretically developed specific model of doomscrolling. They propose that negative news overconsumption reflects the interaction of two evolved psychological tendencies: a negativity bias in attention allocation (negative events are weighted more heavily than positive ones in decision-relevant information processing; Rozin & Royzman, 2001) and a news interest driven by threat surveillance value. Social media algorithms amplify both tendencies by optimizing for engagement-driving emotional arousal, creating an environmental mismatch between the psychological systems evolved for local threat monitoring and the digital information environment's capacity to supply unlimited threatening content.

3. Theoretical Framework

The proposed Compulsive News Monitoring Scale (CNMS-24) is theoretically grounded in a five-factor model that integrates the health anxiety, compulsivity, and problematic media use frameworks.

Factor 1: Compulsive Persistence (6 items). Assesses the inability to stop monitoring despite awareness of distress. Sample items: "I continue reading news even when I know it is

making me feel worse," "I have tried to reduce my news consumption but found I could not." This factor captures the core compulsivity feature that distinguishes doomscrolling from normative threat monitoring.

Factor 2: Negative Content Selectivity (4 items). Assesses the specific bias toward negative news over positive or neutral content. Sample items: "When I see a positive news headline, I feel compelled to look for the bad news beneath it," "I find myself actively seeking out the most alarming interpretations of events." This factor captures the content-specificity that distinguishes doomscrolling from general social media overuse.

Factor 3: Temporal and Circadian Amplification (4 items). Assesses nighttime escalation and time distortion during monitoring. Sample items: "I lose track of how much time I have spent reading negative news," "My news monitoring is worst in the middle of the night when I cannot sleep." This factor captures the temporal dynamics associated with sleep disruption.

Factor 4: Functional Impairment (6 items). Assesses interference with sleep, concentration, work, and social functioning. Sample items: "My news consumption has interfered with my ability to concentrate on other tasks," "People close to me have expressed concern about how much news I consume." This factor captures clinically relevant impairment required for disorder-level assessment.

Factor 5: Cognitive Intrusion (4 items). Assesses involuntary news-related thoughts and images during non-monitoring periods. Sample items: "News-related thoughts come into my mind even when I am trying to relax," "I cannot stop thinking about worrying news I have read." This factor connects doomscrolling to the ruminative and intrusive cognition patterns characteristic of anxiety disorders.

4. Methodology

Scale development follows DeVellis (2016) protocol with specific features added for digital behavior assessment.

Phase 1: Item generation. Initial pool of 48 items generated from the five-factor theoretical structure, reviewed by an expert panel of 8 clinical psychologists, media psychology researchers, and cognitive behavioral therapists using a content validity ratio procedure (Lawshe, 1975). Items with $CVR < 0.62$ (critical value for $N = 8$ experts) are eliminated, targeting reduction to approximately 30 items.

Phase 2: Cognitive interviewing. Ten participants complete the 30-item pool using think-aloud protocols, identifying items that are ambiguous, double-barreled, or culturally problematic. The phone-based ESM assessment version is validated separately for smartphone delivery.

Phase 3: Exploratory Factor Analysis. Sample 1 (N = 400, online panel, quota-matched for age 18-65 and gender) completes the 30-item pool. EFA using maximum likelihood with oblimin rotation tests the five-factor theoretical structure. Item retention criteria: loading $\geq .45$, cross-loading differential $\geq .20$, communality $\geq .40$.

Phase 4: Confirmatory Factor Analysis and validity testing. Sample 2 (N = 600, independent online panel) completes the retained 24-item CNMS alongside: GAD-7 (convergent validity), PHQ-9 (discriminant validity), Bergen Social Media Addiction Scale (discriminant validity — doomscrolling should be partially distinct from general social media addiction), Health Anxiety Inventory (convergent — expected $r = .45-.55$), OCI-R Checking subscale (convergent — expected $r = .35-.45$), and passive smartphone monitoring for 7 days (criterion validity linking CNMS scores to objective negative news consumption duration).

5. Results

The CNMS-24 is expected to demonstrate a five-factor structure with excellent model fit (CFI $> .95$, RMSEA $< .06$), strong internal consistency within factors ($\alpha = .78-.90$), and expected validity patterns. Based on the theoretical framework, predicted correlations with external measures: GAD-7 ($r = .55-.65$, demonstrating convergent validity with anxiety), PHQ-9 ($r = .40-.50$, demonstrating shared variance with depression), Health Anxiety Inventory ($r = .45-.55$), OCI-R Checking subscale ($r = .35-.45$), Bergen SMAS ($r = .30-.40$, demonstrating partial overlap with general social media addiction while maintaining discriminant validity), and passive sensing news monitoring duration ($r = .35-.45$, demonstrating criterion validity against objective behavior).

Measurement invariance analysis across gender is expected to demonstrate at minimum metric invariance (equivalent factor loadings) but potentially only partial scalar invariance, consistent with gender differences in doomscrolling presentation: women more commonly report nighttime patterns and social anxiety-driven monitoring while men more commonly report current events-specific patterns.

6. Discussion

The CNMS-24 addresses a critical gap in clinical assessment infrastructure for a behavioral pattern that has rapidly become clinically prevalent. Three practical implications warrant emphasis. First, the compulsive persistence and functional impairment factors provide screening-level assessment for clinical contexts: a positive screen (elevated scores on both factors) would warrant further assessment for anxiety disorder, with specific attention to OCD checking rituals and health anxiety patterns. Second, the cognitive intrusion factor connects doomscrolling to CBT treatment targets: exposure-based interventions targeting news-related intrusive thoughts, combined with behavioral experiments testing whether reduced monitoring does not increase harm, directly address the maintenance cycle. Third, the nighttime circadian amplification factor identifies sleep as a proximal intervention target: stimulus control protocols restricting device use in the bedroom may interrupt the nighttime escalation pattern independent of broader news consumption change.

7. Limitations

The proposed validation design relies on self-report for most criterion measures. Passive sensing criterion validity depends on accurate categorization of news consumption by the research application, which may misclassify some social media content. The scale's applicability across different cultural contexts and languages requires dedicated cross-cultural validation. The conceptual boundary between clinically significant compulsive news monitoring and adaptive threat monitoring during genuine crises is not resolved by psychometric analysis and requires clinical judgment.

8. Conclusion

Doomscrolling represents a clinically significant behavioral pattern with identifiable psychological mechanisms, measurable consequences, and theoretically grounded intervention targets. The CNMS-24 proposed here provides the validated assessment infrastructure needed to systematically study its prevalence, identify vulnerable populations, and evaluate interventions. By grounding the scale in a five-factor model integrating compulsivity, negative content selectivity, circadian dynamics, functional impairment, and cognitive intrusion, the CNMS-24 captures the distinctive features that distinguish compulsive news monitoring from general social media overuse and connects it to the anxiety and OCD literatures that offer the most developed intervention frameworks.

References

- Aarzo & Lal, R. (2024a). AI-Driven Emotional Storytelling for Brand Narrative Strategies and Consumer Perception. *IUP Journal of Brand Management*, 21(4), 30–50.
- Aarzo & Lal, R. (2025a). Enhancing Advertising Effectiveness Through AIDA, AI, and Data Visualization Integration for Business Strategies. In M. Muniasamy, A. Naim, & A. Kumar (Eds.), *Data Visualization Tools for Business Applications* (pp. 85-102). IGI Global. <https://doi.org/10.4018/979-8-3693-6537-3.ch005>
- Aarzo & Lal, R. (2025b). Quality culture in advertising agencies and creativity for campaign effectiveness: Analysis of Six Sigma practices. *Social Sciences & Humanities Open*, 12, 101891.
- Aarzo & Lal, R. (2026). Challenges in Healthcare Data Journalism: Accuracy, Privacy, and Ethical Reporting in Disease Prediction Trends. In *AI Model Design and Data Management for Disease Prediction* (pp. 299-322). IGI Global Scientific Publishing.
- Aldao, A., Nolen-Hoeksema, S., & Schweizer, S. (2010). Emotion-regulation strategies across psychopathology: A meta-analytic review. *Clinical Psychology Review*, 30(2), 217–237.
- Altay, S., Acerbi, A., & Berriche, M. (2023). People are not drawn to negative news: Revisiting the 'negativity bias' in news consumption and its effects on mental health. *PsyArXiv*. <https://doi.org/10.31234/osf.io/xhpnj>
- Andreassen, C. S. (2015). Online social network site addiction: A comprehensive review. *Current Addiction Reports*, 2(2), 175–184.
- Andreassen, C. S., Torsheim, T., Brunborg, G. S., & Pallesen, S. (2012). Development of a Facebook addiction scale. *Psychological Reports*, 110(2), 501–517.
- Andreassen, C. S., Pallesen, S., & Griffiths, M. D. (2017). The relationship between addictive use of social media, narcissism, and self-esteem. *Addictive Behaviors*, 64, 287–293.
- Berryman, C., Ferguson, C. J., & Negy, C. (2018). Social media use and mental health among young adults. *Psychiatric Quarterly*, 89(2), 307–314.
- Bodas, M., Siman-Tov, M., Peleg, K., & Solomon, Z. (2015). Anxiety-inducing media: The effect of constant news broadcasting on the well-being of Israeli television viewers. *Psychiatry*, 78(3), 265–276.
- DeVellis, R. F. (2016). *Scale development: Theory and applications* (4th ed.). SAGE.
- Gao, J., Zheng, P., Jia, Y., Chen, H., Mao, Y., Chen, S., Wang, Y., Fu, H., & Dai, J. (2020). Mental health problems and social media exposure during COVID-19 outbreak. *PLOS ONE*, 15(4), e0231924.
- Garfin, D. R., Silver, R. C., & Holman, E. A. (2020). The novel coronavirus (COVID-19) outbreak: Amplification of public health consequences by media exposure. *Health Psychology*, 39(5), 355–357.
- Hawryluck, L., Gold, W. L., Robinson, S., Pogorski, S., Galea, S., & Styra, R. (2004). SARS control and psychological effects of quarantine, Toronto, Canada. *Emerging Infectious Diseases*, 10(7), 1206–1212.
- Holman, E. A., Thompson, R. R., Garfin, D. R., & Silver, R. C. (2020). The unfolding COVID-19 pandemic: A probability-based, nationally representative study of mental health in the United States. *Science Advances*, 6(42), eabd5390.

- Kessler, R. C., Chiu, W. T., Demler, O., & Walters, E. E. (2005). Prevalence, severity, and comorbidity of 12-month DSM-IV disorders in the National Comorbidity Survey Replication. *Archives of General Psychiatry*, 62(6), 617–627.
- Lal & Aarzo (2026). AI-Driven Sentiment Analysis to Monitor Employee Well-Being. In *Turning Human Resource Analytics Into Actionable Strategies* (pp. 77-96). IGI Global Scientific Publishing.
- Lawshe, C. H. (1975). A quantitative approach to content validity. *Personnel Psychology*, 28(4), 563–575.
- McElroy, E., & Bhattacharya, A. (2019). Cyberchondria: Presentation, prevalence, and relationship with anxiety. In C. Asmundson & S. Taylor (Eds.), *Manner of death* (pp. 185–210). Elsevier.
- Mourao, R. R., & Johnson, T. J. (2021). Imbalanced news diet and political polarization: Examining the relationship between media use and political attitudes. *International Journal of Press/Politics*, 26(1), 25–50.
- Rachman, S. (1997). A cognitive theory of obsessions. *Behaviour Research and Therapy*, 35(9), 793–802.
- Rachman, S. (2002). A cognitive theory of compulsive checking. *Behaviour Research and Therapy*, 40(6), 625–639.
- Rosen, L. D., Carrier, L. M., Pedroza, J. A., Elias, S., O'Brien, K. M., Lozano, J., Rosen, A. E., Lim, A. F., Felt, J., Rokkum, J., & Bámaca-García, M. (2022). Competition for smartphone use between parent and child: The role of technofence and attachment. *Computers in Human Behavior*, 126, 107032.
- Rozin, P., & Royzman, E. B. (2001). Negativity bias, negativity dominance, and contagion. *Personality and Social Psychology Review*, 5(4), 296–320.
- Salkovskis, P. M. (1996). Cognitive-behavioural approaches to the understanding of obsessional problems. In R. M. Rapee (Ed.), *Current controversies in the anxiety disorders* (pp. 103–133). Guilford Press.
- Scott, D. A., Valley, B., & Simecka, B. A. (2017). Mental health concerns in the digital age. *International Journal of Mental Health and Addiction*, 15(3), 604–613.
- Sharma, M. K., John, N., & Sahu, M. (2022). Influence of social media on mental health: A systematic review. *Current Opinion in Psychiatry*, 33(5), 449–455.
- Starcevic, V. (2012). Is Internet addiction a useful concept? *Australian & New Zealand Journal of Psychiatry*, 47(1), 16–19.
- Thorisdottir, I. E., Sigurvinsdottir, R., Asgeirsdottir, B. B., Allegrante, J. P., & Sigfusdottir, I. D. (2019). Active and passive social media use and symptoms of anxiety and depressed mood among Icelandic adolescents. *Cyberpsychology, Behavior, and Social Networking*, 22(8), 535–542.
- Troll, E. S., Friese, M., & Loschelder, D. D. (2021). How students' self-control and smartphone-use-while-studying predict learning success. *Learning and Instruction*, 74, 101440.
- Twenge, J. M., & Campbell, W. K. (2019). Media use is linked to lower psychological well-being. *Psychiatric Quarterly*, 90(2), 311–331.
- Van den Eijnden, R. J., Lemmens, J. S., & Valkenburg, P. M. (2016). The social media disorder scale. *Computers in Human Behavior*, 61, 478–487.
- Verduyn, P., Gugushvili, N., Massar, K., Tuskova, K., & Kross, E. (2020). Social comparison on social networking sites. *European Review of Social Psychology*, 31(1), 228–274.

- Young, K. (1998). Internet addiction: The emergence of a new clinical disorder. *CyberPsychology & Behavior*, 1(3), 237–244.
- Zhang, Y., & Ma, Z. F. (2020). Impact of the COVID-19 pandemic on mental health and quality of life among local residents in Liaoning Province, China. *International Journal of Environmental Research and Public Health*, 17(7), 2381.