



Social media and youth wellbeing: The need for a multi-layered public health approach

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Summary

Last year, Australia passed legislation to increase the age of access to social media from 13 to 16. This represented a first step in a public health approach to addressing the harms of social media use in young people. A similar approach could be introduced in Aotearoa New Zealand, where giving children access to social media platforms has become a societal norm.

In this Briefing, we discuss the potential benefit of a policy to increase the age of access to social media as a pathway to shifting social norms. We also explore the possibility of a backfire effect when working with young people in this context. To achieve the most out of a policy change, we recommend a multi-layered public health approach that includes action at all levels to protect and promote the health of individual children and the wider community.

Social media use in children: an emerging determinant of health

Social media use in children and teens represents a pressing public health challenge.¹ There is a growing body of evidence linking social media use to negative impacts on mental health,²⁻⁵ eating disorders and body image issues,^{6,7} loneliness,⁸ sleep,⁹⁻¹² and physical symptoms.¹³ Of particular concern in Aotearoa New Zealand (NZ), is evidence showing that Māori are more likely than non-Māori to be exposed to content promoting discrimination based on race, as well as self-harm and suicide.¹⁴

Therefore, access to social media is emerging as an important determinant of health for children and adolescents. Like other public health challenges that have been successfully addressed in the past, tackling this issue will require a coordinated, multi-layered approach.

Shifting societal norms

In NZ, young people's use of social media has become an accepted social norm, and the social endorsement of this behaviour has allowed it to continue. Shifting this social norm so that it is no longer sanctioned by society could lead to a rapid shift in this normative behaviour.¹⁵ But where do we begin to initiate such a shift?

Policy change is one pathway. Australia recently passed legislation to increase the age of access to social media platforms to 16 years.¹⁶ A key aim of this legislation was to support parents in challenging entrenched societal norms while requiring platforms to implement robust gatekeeping measures before granting site access. While it remains to be seen if this approach is effective and how the law will be enacted, it represents the first step by a country to shift this societal norm. However, this alone is unlikely to be enough to shift normative behaviour.

Public health campaigns are another possible pathway. However, they can backfire, especially those targeting adolescents. For example, some anti-smoking ads increased young people's positive attitudes toward tobacco companies.¹⁷ This reaction, known as psychological reactance, occurs when teens perceive a threat to a behaviour they value. This can lead to negative emotions and behaviours that restore their sense of freedom - such as seeking out the restricted activity.¹⁸ On its own, a policy raising the age of access to social media may provoke a similar reaction, so it's crucial when policies or public health campaigns are introduced that we track and evaluate effectiveness and be prepared to address this potential response.

Working with adolescent values

Another approach worth considering is to introduce age-appropriate, values-driven programmes that highlight how social media companies profit by targeting children. The Truth Campaign used counter-marketing to reduce youth smoking in the United States and is an exemplar of how to achieve this. The Campaign did not tell young people what to do, as research had already shown that the "just say no" approach backfired. Instead, the Campaign provided information and statistics, empowering young people to make their own decisions.¹⁹ A similar strategy could help young people recognise how social media conflicts with their core values.

However, public health approaches should extend beyond targeting individuals. Relying too heavily on youth programmes to change norms could support the notion that social media use is a personal choice, and so shift responsibility from companies to children. The

intentionally persuasive design of social media apps and the adolescent brain's vulnerability to rewards²⁰ make it clear where the responsibility for the issue really lies.

Public health action at other levels

Action at other levels is also required to address the risks of social media for young people. This will include parent education to build the knowledge and awareness of parents and other adults who interact with and influence young people, training for healthcare professionals, enforcement of school policies limiting smartphone use, and the creation of social-media-free spaces. It will also require good mental health support services, both online and offline, to ensure young people have safe and effective ways to seek help. We elaborate on these points in the [Appendix](#) below.

Addressing the challenge of social media's impact on youth requires a public health approach, one that is comprehensive and multi-layered. This should include policy change, messaging aligning with societal values, youth-led initiatives, parent and healthcare provider education, and the creation of more supportive online and offline environments. It will require collective action - from policymakers, health professionals, families and communities - to protect and improve the wellbeing of our young people.

What this Briefing adds

- Social media use in children and teens represents a pressing public health challenge, with a growing body of evidence linking social media use to negative impacts
- Australia has passed legislation raising the minimum social media access age from 13 to 16

Policy and practice implications

- Introducing a policy to increase the age of social media access to 16 in NZ is the first step in a public health approach to addressing the harms posed by social media to the wellbeing of young people
- Research is necessary to establish the best way to communicate with young people about the harms of social media to avoid a backfire effect
- Successful campaigns used to reduce smoking in young people could be used as examples of how to avoid a backfire effect when introducing a new policy
- Education around how to support children and adolescents as they transition off social media is needed for healthcare providers, schools, parents, and whānau
- The concept of social-media-free environments should be explored and developed with adolescents
- Coordinated efforts at all levels are likely necessary to reduce the level of harm posed by social media to children and adolescents

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Competing interests: Samantha Marsh is a member of Before16, an advocacy group to protect NZ children from the harms of screens. She is the academic advisor on the Board for Smartphone Free Childhood NZ, and she provides parental education around the impact of screens on children and adolescents.

Appendix

Public health action at other levels - additional information

Parent education is a key part of the solution. Research has shown better mental health outcomes for children whose parents report greater control over their time spent online;²¹ however, many NZ parents are unaware of the risks their children face on social media or how to support them.²² Yet, relying solely on parents to be vigilant is simply not feasible, with many lacking the tools and time to monitor their children's social media access. For solutions to be equitable, they must extend beyond parental responsibility.

Healthcare professionals also need training to recognise when social media and technology use contributes to poor outcomes in young people and to support families navigating these challenges.

The physical and online spaces where children spend their time are also important considerations. Many schools in NZ have adopted smartphone-free policies, and it's crucial to ensure that all schools comply with this legislation, which will help shift current social norms. Creating more social-media-free spaces - a 'healthy environments' strategy akin to smokefree areas - can help. Further, despite the many responsibilities of schools, they may help by re-evaluating the necessity of device-based homework.

Support services for teens may also be necessary, including online support. There is an irony here because social media platforms are often cited as sources of mental health support and a place where marginalised communities can connect. Yet, when relied on exclusively, they have also been shown to be unhealthy places to obtain support. Therefore, both individualised support and offline services should be available to help young people.

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