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Administrator Alan Davidson
Department of Commerce
National Telecommunications and Information Administration
1401 Constitution Ave. NW, Washington, DC 20230

Re: Initiative To Protect Youth Mental Health, Safety & Privacy Online (NTIA–2023–0008)

Dear Administrator Davidson:

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The American Psychiatric Association (APA), the national medical society representing over 38,000 psychiatric physicians and their patients, appreciates the opportunity to support the National Telecommunications and Information Administration in understanding the impact of social media and other online platforms on youth mental health. APA shares the Biden-Harris Administration's commitment to addressing the youth mental health crisis both online and in our communities. Recognizing the ubiquity, opacity, and saturation of online interaction in daily life, we recommend policies that place the responsibility for safe and age-appropriate design with tech companies and developers rather than kids, parents, and schools. Importantly, there can be benefits to some social media or other interactive online platform use, and the protective elements of online interaction should be maintained while the risks should be mitigated. However, as outlined in the Surgeon General's 2023 report, "More research is needed to fully understand the impact of social media," and further research is a key element of understanding the full risks and benefits of online interaction on youth mental health.

It is the position of the APA that federal security and privacy standards should "protect vulnerable populations and their personal information from predatory algorithms and deceptive content on online platforms, through reasonable content standards and transparent self-policing efforts to prevent the proliferation of harmful content such as: promotion of self-harm, encouraging addiction-like behaviors, deceptive online content, and promotion of marketing of unlawful products or services."¹

¹ [Position Statement on Promoting Health and Protecting Vulnerable Populations from Social Media and Online Harm.](#)

Current research indicates that not merely the *volume* but the *way* that youth use interactive online platforms affects determinants of mental health, including socialization and isolation, self-image, and exposure to dangerous content. Relationships between youth time online and mental health outcomes are not linear.² Protecting youth online should focus on design and regulation that reduces harm for youth, including:

- Reducing design features that include low-friction variable rewards, manipulate navigation, or are means of social manipulation.
- Reducing exposure to doctored, manipulated, or deepfaked content that present an unrealistic image of others.
- Making protective design features default and including usability of user content and access controls.
- Providing tools to easily identify and report bullying and harassment.

I. Identifying Health, Safety, and Privacy Risks and Benefits

1. What are the current and emerging risks of harm to minors associated with social media and other online platforms?

The potential for social media, games, and other online platforms' deleterious effects on youth mental health are intuitive and well-documented. **Youth who use social media heavily are more likely to be diagnosed with depression and anxiety and to report lower levels of happiness.**³ Self-image issues can arise due to social comparison with peers, especially observing others' "highlight reels": the images they have curated and edited, those that represent the poster in the best light, and those that are designed to impress.⁴ Researchers have found that suicidality increases after two or more hours online per day, with 48% of teens who use devices for more than five hours per day being significantly more likely to experience each of four suicide-related outcomes (feeling sad or hopeless, seriously considering suicide, making a suicide plan, and making a suicide attempt). This research further notes that "adolescents using devices [five] or more hours a day (vs. [one] hour) were 66% more likely to have at least one suicide-related outcome."⁵ However, the lack of longitudinal or causal research makes many of these findings preliminary and often debated.⁶

While causality may be difficult to determine (e.g., youth with underlying mental health concerns may be more likely to engage in problematic device usage), design features that take advantage of youth behavioral patterns have the potential to entrench and worsen symptoms of mental illness including inadequate sleep, negative self-image, and isolation. Moreover, the activities that may be displaced by online interaction are protective, exacerbating risks associated with screen time: adolescents who spend more time online are more likely to have mental health concerns, while adolescents who spend more time

² [Screen media activity in youth: A critical review of mental health and neuroscience findings.](#)

³ [Media Use Is Linked to Lower Psychological Well-Being: Evidence from Three Datasets.](#)

⁴ [Facebook Knows Instagram Is Toxic for Teen Girls, Company Documents Show.](#)

⁵ [Increases in Depressive Symptoms, Suicide-Related Outcomes, and Suicide Rates Among U.S. Adolescents After 2010 and Links to Increased New Media Screen Time.](#)

⁶ [Social Media and Mental Health in Adolescents and Young Adults: Social Media and Mental Health in Adolescents and Young Adults: A Systematic Review A Systematic Review.](#)

on non-screen activities (e.g., in-person social interaction, sports, homework, extracurricular activities) are less likely to.⁷ In an APA poll conducted in January 2022, one in three Americans reported worrying about social media's impact on mental health.⁸

Online experiences that may link social media use to worsened mental health outcomes include cyberbullying and negative self-image due to comparison to others. Specific behaviors include "'oversharing' (sharing updates at a high frequency or too much personal information), 'stressed posting' (sharing negative updates with a social network) and encountering 'triggering posts.'"⁹ In testimony to the Senate Judiciary Committee Subcommittee on Privacy, Technology, a former engineering director at Meta reported that "as many as 21.8% of 13-15 year olds said they were the target of bullying in the past seven days, 39.4% of 13-15 year old children said they had experienced negative comparison, in the past seven days, and 24.4% of 13-15 year old responded said they received unwanted advances, all in the prior seven days." In relation to specific stressful events (e.g., the COVID-19 pandemic), youth who engage with online news and social media posts related to the issue are more likely to report greater levels of stress.¹⁰

Youth who communicate extensively with close friends online risk "corumination," or excessive focus on negative experiences: "especially for girls, close friendships can sometimes have a paradoxical effect, both increasing feelings of friendship quality and connection but simultaneously leading to increased depression through corumination."¹¹ **Adolescents who spend time interacting online are more likely to have depression but are less likely to report loneliness.**¹² Given the current loneliness epidemic, as reported by the surgeon general, this may suggest some benefit to social media, indicating that the specific mental health characteristics and risk factors of individual youth may require specific types of support to engage online in a healthy way.¹³

2. Are there particular market conditions or incentives built into the market structure that enhance or deter benefits and/or harms that should be addressed and/or encouraged?

Social media products and other online platforms are heavily incentivized to keep kids using their products. **These platforms are engaging by design and can include practices designed to induce heavy use and replace other activities, like endless scrolling and interacting with the app at odd hours.** As the American Academy of Pediatrics and the Center for Digital Democracy, among others, reported in a 2022 letter to the Federal Trade Commission, "**Despite mounting evidence that design features maximizing**

⁷ [Increases in Depressive Symptoms, Suicide-Related Outcomes, and Suicide Rates Among U.S. Adolescents After 2010 and Links to Increased New Media Screen Time.](#)

⁸ [One in Three Americans Worry About Social Media's Impact on Mental Health; Nearly Half Say It Has Hurt Society at Large.](#)

⁹ [Depressed adolescents' positive and negative use of social media.](#)

¹⁰ [Written Testimony of Arturo Bejar before the Subcommittee on Privacy, Technology, and the Law, November 7, 2023.](#)

¹¹ [Physically Isolated but Socially Connected: Psychological Adjustment and Stress Among Adolescents During the Initial COVID-19 Crisis.](#)

¹² [Physically Isolated but Socially Connected: Psychological Adjustment and Stress Among Adolescents During the Initial COVID-19 Crisis.](#)

¹³ [New Surgeon General Advisory Raises Alarm about the Devastating Impact of the Epidemic of Loneliness and Isolation in the United States](#)

minors’ online time and activities are implicated in concrete and serious harms to minors, [engagement-optimizing] design practices ... continue to bombard minors online.” These practices extend time online, “...expos[ing] minors to potential predators and online bullies, as well as to age-inappropriate content ... harm[ing] minors’ self-esteem and appear[ing] to aggravate risks of disordered eating and suicidality ... [and encouraging] the disclosure of, and relies on the processing of, massive amounts of privacy-invasive user data.” APA notes that “these platforms often contain personal health information that technology companies can exploit with data science, artificial intelligence, targeted advertising, behavior tracking, and other algorithms.”¹⁴

This leads youth into a spiral of usage leading to data collection leading to enhanced content customization leading to increasing usage. Data points generated by youth engagement with apps are used not just by the company itself to increase engagement and retention but are sold to advertising partners, significantly risking youth privacy and security and allowing further enhancement of targeted content.¹⁵ Data that can indicate the presence of mental illness can be derived from many non-HIPAA-protected sources, including online behavior, and can be combined using AI-driven technologies to produce highly granular, individually-identifiable information. Consumers may erroneously assume that any health-related data are protected by HIPAA and, consequently, may not understand that much of their consumer online behavior indicating their health status is unprotected. Failures in protecting users with mental illness or substance use disorder can risk enhancing existing avoidant behavior, paranoia, or discomfort as well as put users actively in harm’s way (e.g., due to exposure to harmful algorithms).¹⁶

Even in these early stages of widespread use of generative AI, user safety has been an issue – for example, the Center for Countering Digital Hate (CCDH) found instances of harmful content about eating disorders in generative AI tools 41% of the time.¹⁷ The lack of safety mechanisms in place was also highlighted by harm caused when the National Eating Disorders Association rolled out, and then quickly took offline, a chatbot that youth quickly reported was offering dangerous health advice. **As generative AI, algorithmic targeting, and user interface design increase in sophistication, risks of exacerbating and generating mental health issues among youth stand to increase and merit regulatory action.**

3. What are the current and emerging health and other benefits—or potential benefits—to minors associated with social media and other online platforms (including to physical, cognitive, mental, and socio-emotional well-being)?

APA notes that “Online interactions can have rewarding health benefits when done as part of the treatment plan.”¹⁸ Social media use, in particular, can provide opportunities for developmentally-

¹⁴ [Position Statement on Promoting Health and Protecting Vulnerable Populations from Social Media and Online Harm.](#)

¹⁵ [Data Brokers and the Sale of Americans’ Mental Health Data](#)

¹⁶ [Psychological Data Breach Harms.](#)

¹⁷ [AI And Eating Disorders: How Generative AI Enables and Promotes Harmful Eating Disorder Content.](#)

¹⁸ [Position Statement on Promoting Health and Protecting Vulnerable Populations from Social Media and Online Harm.](#)

significant activities for youth including “seeking social validation and feedback from others.”¹⁹ The COVID-19 quarantine provided instructive data about the role that social media and other online platforms were able to play in mimicking in-person interaction and have indicated that online interaction played an important role in maintaining protective social connections.

In particular, social media and other online communities can play a crucial role in social connectedness and belonging for youth with minoritized identities or those living in unsupportive home and community environments. The Trevor Project, an advocacy organization focused on suicide prevention among lesbian, gay, bisexual, transgender, queer, and questioning (LGBTQ) youth reports that “Feeling safe and understood in at least one online space is associated with lower suicide risk and lower rates of recent anxiety for all LGBTQ young people, and for LGBTQ young people of color in particular.”²⁰ One study found that “LGBTQ youths negotiated and explored identity and obtained support from peers on social media,” with “social media [use] associated with reduced mental health concerns and increased well-being among LGBTQ youths.”²¹

The importance of these protective factors, and the stakes associated with reducing appropriate use of online tools by youth in need of information and community, makes certain policy choices around restricting youth access to online content unacceptable. **Restrictive age verification and content moderation policies can create market and regulatory environments that can put youth at risk by exposing their online behavior to parents and guardians, restricting identity-affirming content and communities, and increasing the amount of identified data that online media companies host about the user.** For example, a lawmaker recently celebrated the role that a federal social media regulation bill would play in censorship by “protecting minor children from ... transgender [content].”²² Recognizing the profoundly challenging and intrinsically political question of what content is “safe” for youth, regulation of youth engagement in social media and other online platforms should prioritize protecting kids’ ability to access communities, information, and support that affirm their identities and create environments for them to safely express themselves.

4. Do particular technical design characteristics, business arrangements, or other contingent factors for some online platforms allow for or enhance the benefits referenced in Question 3?

Design features that can currently help youth safely and productively access social media and online platforms include automated content warnings (e.g., Instagram blurring posts designated as graphic), automated referrals to supportive services (e.g., Google providing suicide screening tools and the 988 Suicide Prevention Lifeline when the user searches “suicide” or related words), content restrictions (e.g., ChatGPT declining to provide results when users search for harmful content, like highly restrictive diets or means of self-harm), and misinformation tagging (e.g., Meta-owned platforms marking when vaccine

¹⁹ [Lying or longing for likes? Narcissism, peer belonging, loneliness and normative versus deceptive like-seeking on Instagram in emerging adulthood.](#)

²⁰ [LGBTQ Young People of Color in Online Spaces.](#)

²¹ [Social Media Use and Health and Well-being of Lesbian, Gay, Bisexual, Transgender, and Queer Youth: Systematic Review.](#)

²² [Senator appeared to suggest bipartisan bill would censor transgender content online.](#)

misinformation is contained in a post or YouTube demarcating when a post is erroneously marked as medical information). User preferences theoretically can compel online platforms to engage in these protective behaviors because they may make users feel safer when the protections are effectively deployed. As noted in the RFI, additional helpful practices include default protective features like safe search and restricting direct messaging between older people and younger people that are not formally connected.

Regulators should be aware, though, that market forces typically incentivize platforms to have minimal restrictions on user engagement to capture advertising, user data, and user fees. For example, while ChatGPT 3.5 – the free version – refuses to dispense advice on designing highly restricted and disordered diets, ChatGPT 4 – the paid version – will do so. Market forces are thus demonstrating that the more desirable, higher-quality experience is the one without content controls.

Regulatory efforts can revise the foundation of incentives available to companies that practically act as care managers, therapists, and data brokers. **Transparency and granularity in data use and disclosures are a key element of empowering users to understand and control privacy and security trade-offs associated with using specific platforms.** Opt-in consent policies can more clearly represent the real processes, benefits, and risks associated with usage of the platform. Ensuring that users understand the platform they are interacting with allows the market to operate meaningfully through consumer choice. **“Black box” algorithms and technologies obviate consumer decision-making.**

5. Are there ways that young people have been or could be involved in making improvements to the health and safety of online platforms including social media that you think should be encouraged?

Protective practices can continue to be enhanced through partnerships with youth, mental health experts, and technologists. **The expectation of any youth-serving media platform should be that they are aware of, and constantly expanding, opportunities to make the Internet safer and more supportive for youth.** Similarly, advertisers should commit to working with online platforms that operationalize best practices in online safety, privacy, and security. Social media firms should employ Youth Advisory Councils to identify risks and advise on algorithms and market-viable ways to make platforms safer.

II. The Status of Current Practices

6. What practices and technologies do social media and other online platform providers employ today that exert a significant positive or negative effect on minors' health, safety, and privacy?

Please see our response to Section I. 4.

11. Are there potential best practices (for example, practices related to design, testing, or configuration) or policies that are not currently employed by social media and other online platforms that should be considered?

Beyond the design features identified here, the most crucial component of developing and implementing safe design practices is **social media companies and other online platforms partnering with researchers and youth to build the evidence base.** When data on youth social media use and serious online harms

are not shared with researchers, platforms are incentivized not to identify risks for their young users. Enforcement and accountability are critical: in recent testimony to the Senate Judiciary Committee Subcommittee on Privacy, Technology, and the Law, former director of engineering at Meta Arturo Bejar reported Meta ignoring his reports of child safety issues on the platform. In Bejar’s testimony, he reported that Meta leadership seemed to intentionally understate the risks of youth harm on Instagram: “There has been extensive harm happening to teenagers, and the leadership has been aware of it, but they have chosen not to investigate or address the problems.”²³

III. Identifying Technical Barriers to, and Enablers of, Kids' Online Health, Safety, and Privacy

13. Are there technical design choices employed by specific social media platforms and other online platforms or supported by research that should be adopted by other social media and other online platforms to advance minors' health, safety, and/or privacy online?

Design features should be mandated by government entities and adopted by technology firms that reduce the likelihood of problematic engagement by youth, including:

- Reducing low-friction variable rewards design features, design features that manipulate navigation, and social manipulation design features. These rules were advocated by the American Academy of Pediatrics and the Center for Digital Democracy, among others, in a 2022 letter to the Federal Trade Commission requesting rulemaking restricting commercial surveillance and deceptive and manipulative practices by online platforms.
- Reducing exposure to doctored, manipulated, or deepfaked content that present an unrealistic image of others (e.g., by reducing the weight of these images in algorithms).
- Making protective design features default (e.g., safe search, usage-based time limitations, bedtime reminders, autoplay restrictions, time-based grayscale) and including usability of user content and access controls.
- Providing tools to easily identify and report bullying and harassment, including making report buttons readily accessible and intuitive, detecting potential instances, deploying surveys and support to young users, and quickly acting on reports of bullying and harassment.

In addition, NTIA and federal partners like FTC and SAMHSA should collaborate with teens and youth-serving organizations to identify ways to use existing data to protect youth that do not violate young users' privacy, security, and identity (e.g., applying age assurance strategies to use existing user-level or metadata to target age-appropriate design features). Protective design features should focus on the most problematic areas of use, including negative self-image, cyberbullying, and misinformation, but these efforts must be based on empirical research. For example, while policies requiring disclaimers on doctored images seem like a good idea in theory to combat negative body image from social media comparison, research has shown that these policies do not improve body image and can even worsen self-image: only reduced exposure to modified images had a positive effect on this outcome.²⁴

²³ [Written Testimony of Arturo Bejar before the Subcommittee on Privacy, Technology, and the Law, November 7, 2023.](#)

²⁴ [Consumer warning versus systemic change: The effects of including disclaimer labels on images that have or have not been digitally modified on body image.](#)

15. Are there technical options that could assist parents, guardians, caregivers, and minors by reducing potential for harm and/or increasing potential for beneficial aspects of social media and other online platforms?

Opt-in privacy consents and transparent data use policies are key to reducing harmful online engagement. User education, including education for clinicians, parents, and teachers, can help these trusted advisors help youth navigate online interaction. Online platforms can take an active role in generating these outcomes by providing valuable and transparent information and contributing digital literacy education for youth-serving institutions and individuals. Tech companies can also reduce privacy, security, and safety risks to youth by not storing user data of young users.

IV. Identifying Proposed Guidance and/or Policies

16. What guidance, if any, should the United States government issue to advance minors' health, safety, and/or privacy online?

Technology regulation should recognize the importance of autonomy, self-determination, and self-awareness in youth accessing the benefits of online communities. In a recent discussion at a meeting of the American Academy of Child & Adolescent Psychiatry, clinicians debated the merits of banning screens in kids' rooms to protect sleep quality. Discussants pointed out that:

- “Blanket bans” have the potential to compromise the alliance between the psychiatrist and the youth, as well as the parents and the youth.
- Parents need to have a supportive alliance with their children. Banning screens from the bedroom reduces the opportunity for parents to have conversations with their youth.
- Banning screens also reduces opportunities for the youth to learn how to regulate themselves as they enter adulthood.”²⁵

While proponents noted that a one-hour reduction in screen time per day equated to a 20-minute increase in sleep time, “which is just enough to reduce the risk of car crashes and improve grades,” the majority of participants ended up agreeing that psychiatrists should *not* advocate for bans and instead should apply a harm reduction framework to helping youth use social media and other online platforms to their benefit. Researchers argue for educating youth “in a developmentally appropriate manner, in the context of supportive relationships rather than strict bans and limits ... Talking to adolescents about mindful media consumption and granting them the agency to self-regulate may help keep healthy routines in place in both the short and long term.”²⁶

17. What policy actions could be taken, whether by the U.S. Congress, federal agencies, enforcement authorities, or other actors, to advance minors' online health, safety, and/or privacy? What specific regulatory areas of focus would advance protections?

Recognizing certain limitations on FTC's ability to enforce upstream data protections, **APA urges the Federal Trade Commission (FTC) to apply its authority to define unfair or deceptive practices and issue the Commercial Surveillance and Data Security Proposed Rule.** Given the ever-increasing rate of exposure to privacy and security risks due to increasing access to online tools, increasing sophistication of

²⁵ [Should Psychiatrists Advocate Banning Screens From Kids' Bedrooms?](#)

²⁶ [Physically Isolated but Socially Connected: Psychological Adjustment and Stress Among Adolescents During the Initial COVID-19 Crisis.](#)

data aggregation and person-level matching capabilities, and the increased potential for profit associated with unrestricted access to data, FTC's enforcement role must grow alongside the market for consumer data.

To enhance user protections, we urge FTC to use its rulemaking authority to expand the definition of what constitutes user consent to privacy policies. It is well-established that most users do not read privacy policies, and privacy policies are text-heavy, long documents, often written in “legalese,” that most users do not fully understand.²⁷ Most are written at a college reading level, so many youth are not able to meaningfully engage with them.²⁸ To mitigate deceptive use of data, companies that are regulated by the FTC should be required to:

- Make language in privacy policies accessible to users, ideally at no more than a sixth-grade reading level.
- Present key information in large print with fewer words, with each key element requiring affirmative agreement.
- Present the risks associated with agreeing to the privacy policy.

Further, currently, social media companies are restricting access to researchers, so the most important data for designing effective policy is unavailable. Companies host huge amounts of proprietary, health-related data that are not available to researchers working in the public interest. There is a need for sharing of data with qualified teams to continue to generate new knowledge and insights on this evolving topic.²⁹

Online platforms that engage in data surveillance of vulnerable populations, like youth, should be compelled to share data with research teams. Increasing the flow of data from private institutions to research entities can help use these data for good – to inform overall mental health research efforts, to improve user design for youth mental health, and to detect and mitigate risks.

APA looks forward to collaborating with NTIA and other partners to enhance the evidence base and strategies around youth online safety. If you have any questions or would like to discuss our comments further, please contact Abby Worthen (aworthen@psych.org), Deputy Director, Digital Health.

Sincerely,



Saul M. Levin, M.D., M.P.A., FRCP-E, FRCPsych
CEO and Medical Director
American Psychiatric Association

²⁷ [Americans' attitudes and experiences with privacy policies and laws.](#)

²⁸ [The Complexity of Mental Health App Privacy Policies: A Potential Barrier to Privacy.](#)

²⁹ [Platform-controlled social media APIs threaten open science.](#)