



Screened Out

Meeting the challenge of technology and young people's wellbeing



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Executive Summary

Screen-based media – TVs, computers, smartphones – can now occupy every waking hour of people’s lives, and this profound social change is most observable among young people.

Quantitative research from the University of Essex has found using screen-based media and online social networking sites is associated with lower levels of wellbeing among young people in the UK.

The research was based on a survey of around 5,000 young people aged 10-15, who were representative of the 4,365,600 adolescents in the UK in this age-group.

The research found significant negative associations between increased screen-based media (SBM) exposure, social-networking site (SNS) use, and levels of happiness:

- ▶ Those who used social-networking sites 1-3 hours per day were around half as likely to be happy than those who used these sites for less than 1 hour per day, while those who chatted for more than 4 hours per day had a 57% lower chance of happiness
- ▶ Those who played computer games for 1-3 hours per day were 41% less likely to be happy than those who played for less than 1 hour, rising to 58% for those who played for more than 4 hours
- ▶ Watching TV for 1-3 hours per day was associated with a 16% lower chance of feeling happy compared with those who watched for less than 1 hour, rising to 42% for those who watched TV for more than 4 hours
- ▶ Those who visited SNS or played video games for more than 4 hours per day were at least twice as likely to experience socio-emotional difficulties

How have researchers sought to explain the link between young people’s wellbeing, and use of screen-based media and social networking sites? Across academic research, various explanations have been suggested:

- ▶ Displacement of face-to-face social interaction
- ▶ Changes to people’s relationships and increasing social isolation
- ▶ Displacement of physical activity
- ▶ A link between SBM usage and health outcomes
- ▶ Sleep disturbance
- ▶ Social jealousy
- ▶ The effect of ‘inauthenticity’
- ▶ Cyber-bullying
- ▶ Harmful content

Overall, the academic literature, suggests that the relationship is complex and dependent on the specific context within which SBM and SNS usage takes place. Multiple effects on wellbeing may be present simultaneously.

Strong evidence of a negative association between adolescent wellbeing and usage of SBM and SNS, combined with the sheer volume young people who engage in these activities, provides a compelling rationale for UK policymakers to develop policy responses targeted at improving wellbeing.

This report explores and evaluates a number of approaches:

- ▶ **National guidelines for volume of SBM and SNS usage among young people**
- ▶ **Empowering young people through public health/education campaigns to understand how SBM and SNS usage may affect their wellbeing**
- ▶ **Awareness raising among parents and child professionals**
- ▶ **Nudging young people through the design of the SBM and SNS experience**

The growth and change in nature and usage of screen-based media has been one of the most dramatic social changes of recent decades, and has been a positive development for many young people. However, in light of strong evidence of wellbeing effects, it is now time for the government to respond to the risks to young people's wellbeing.

This report recommends the government should:

1. **Issue national guidelines for volume of SBM and SNS usage among young people**
2. **Empower young people through public health campaigns and compulsory school programmes by educating them about how SBM and SNS usage may affect their wellbeing**
3. **Compel technology and Internet companies to acknowledge their responsibilities, engage with the risks posed to young people's wellbeing and, where necessary, re-design hardware and online experiences to 'nudge' young people's behaviour**
4. **Ensure more research into the link between wellbeing, SNS and SBM**

1.Introduction

Key points

- ▶ **Screen-based media can now occupy every waking hour of people's lives, and these changes are most observable among young people**
- ▶ **Quantitative research has found a negative relationship between total screen-based media usage, social networking site usage and various markers of wellbeing among young people in the UK**
- ▶ **This report seeks to help policymakers understand and respond to this emerging challenge**

1.1. Introduction

Technology, computers, smart phones and social networking are changing the ways that people live their lives. Time spent staring at screens is no longer limited to watching television: **computers and smartphones now occupy people's attention during every waking hour of the day.**

These profound societal shifts are most observable among **young people**. An Ofcom report on adult media use (Ofcom, 2014a) found those aged between 16 and 24 exceed all other adults in the time their use of non-television **screen-based media** (SBM), such as using a mobile phone (95% compared with 85%) and going online (87% compared with 75%).

Unlike watching television, **much screen-based media use now involves use of interactive social networking sites (SNS)**. According to Ofcom (2014a; 2014b):

- ▶ 69% of all adult internet users (aged 16+) use SNS, rising to 71% among 12-15 year olds and 96% in the 16-24 year age group;
- ▶ For 83% of 16-24 year olds, SNS use is at least a daily activity (a rise from 69% in 2012). This compares with the adult average of 60% (a rise from 50% in 2012).

1.2. Young people and the emerging wellbeing challenge from SNS and SBM

Such profound changes – particularly changing forms of social interaction via SNS - could be expected to have implications for young people's wellbeing; for example, if use of social-networking sites replaces face-to-face conversations, or leads to negative self-image as teenagers compare themselves to the online lives of others.

Policymakers now have **strong evidence such effects are occurring.**

Academic research conducted by Booker et al. (2015) - **Media Use, Sports Participation, and Wellbeing in Adolescence** - used quantitative analysis of social survey data to investigate the relationship between wellbeing among UK adolescents and use of SNS, and other types of screen-based-media (SBM) exposure.

The researchers found a **negative relationship between total SBM usage, SNS usage and various markers of wellbeing among young people**. For example, the research found direct negative correlations between increased SNS exposure and levels of happiness.

1.3. Screened Out: Meeting the challenge of young people's wellbeing

In **Chapter 2**, the role of wellbeing as a policy goal is considered, alongside evidence on levels of wellbeing among young people in the UK.

Chapter 3 reviews quantitative evidence on the correlation between use of SBM and SNS, and levels of wellbeing in young people.

Chapter 4 considers some of the explanations suggested in academic research for why use of SBM and SNS may be associated with levels of wellbeing, such as displacement of physical activity or online conversations.

In **Chapter 5**, the report develops and evaluates different policy ideas for addressing the challenge to young people's wellbeing associated with SBM and SNS usage.

Chapter 6 concludes the report with key observations for policymakers.

2. Wellbeing and public policy

What is wellbeing and why does it matter to public policy? This chapter reviews the emerging science of wellbeing.

Key points

- ▶ “Wellbeing” refers to the general condition of an individual or group of people and can be measured by looking at a number of factors, such as life satisfaction, quality of life and self-reported happiness
- ▶ For policymakers, wellbeing is seen as an end in itself, but is also linked to growth in GDP, health and productivity
- ▶ The success of governments in improving levels of wellbeing among young people will inevitably be determined by the emergence and evolution of key social trends

2.1. Introduction

Evidence suggests the growing use of screen-based media and online social networking sites in everyday life pose a challenge to the wellbeing of some groups, particularly young people.

What is wellbeing and why does it matter to public policy? Why has wellbeing become a goal of public policy? This chapter briefly reviews the emerging science of wellbeing, how wellbeing in the UK compares to other countries, and the reason wellbeing has received growing attention from policymakers.

2.2. What is wellbeing?

“Wellbeing” refers to the general condition of an individual or group of people and can be measured by looking at a number of factors, such as life satisfaction, quality of life and self-reported happiness, which aim to reflect how people feel.

Governments have long targeted objective measures relating to the welfare of the population such as life expectancy or rates of diagnosed mental disorders. In particular, governments have focused on economic indicators, such as GDP or rates of unemployment.

However, recognising the difference between such objective indicators and the lived experience of their population, in recent years there has been a **growing trend for governments to take account of subjective, social measures of success** - in particular, levels of wellbeing - in order to provide a more comprehensive picture of how well societies are performing.

In 2010, the UK government launched the **National Wellbeing Programme**, which led to the annual publication of the ‘Life in the UK’ report starting November 2012, “giving the latest snapshot of the nation’s wellbeing” (ONS, 2015).

International measures of wellbeing include the OECD's annually updated 'Better Life Index', which launched in May 2011 following recommendations from the Commission on the Measurement of Economic Performance and Social Progress (CMEPSP), and the United Nation's 'World Happiness Report', which was first published April 2012.

A range of factors may determine levels of wellbeing, including mental health (Layard et al., 2013), genetics (De Neve et al., 2012), income (Lewis, 2014), social mobility (Dolan and Lordan, 2013), education (Powdthavee et al., 2013), and age (Schwandt, 2013).

2.3. Why does wellbeing matter for public policy?

A number of factors have motivated governments to focus on improving wellbeing in their populations.

First, **wellbeing is seen as an end in and of itself** reflecting the priorities of the public. For example, Jeffrey Sachs, co-editor of the World Happiness Report states, "there is now a rising worldwide demand that policy be more closely aligned with what really matters to people as they themselves characterize their wellbeing" (UNSDSN, 2013a).

Second, **boosting wellbeing levels can positively impact other areas of government policy.**

For example, the UK Department of Health has noted that improvements in wellbeing are associated with a wide range of **improvements in physical health**, both for individuals and groups of people. These include: increases in life expectancy; the ability to recover from illness; positive health behaviours in adults and children such as diet, smoking and physical activity; and, workplace productivity among health care sector staff. Ultimately, the combined health benefits of improved wellbeing can contribute to reducing the overall healthcare burden (DH, 2014).

Higher levels of wellbeing have also been linked to **productivity** outside of the health sector. For example, improvements in wellbeing in the retail sector have been shown to improve customer satisfaction and sales (Diener and Seligman, 2004).

As such, improving wellbeing may actually support more traditional policy objectives, such as boosting GDP, health and productivity.

2.4. Wellbeing in the UK

How does the UK score for the wellbeing of its population? Various aspects of wellbeing can be measured through subjective factors, such as 'current mood', which can be measured by examining levels of happiness, and life satisfaction, which measures how people evaluate their life in general.

The Office for National Statistics' (ONS) 'Life in the UK' reports that the majority of people (78.46%) rated their life satisfaction as 7 or more out of 10 in 2013-14. However, a significant portion of people (5.56%) rated their life satisfaction as 4 out of 10 or lower (ONS, 2014).

How does the UK compare to other countries? According to the Better Life Index (OECD, 2014), UK adults report slightly higher levels of general life satisfaction (6.9 out of 10) compared with other OECD nations (6.6 average). However, the number of British people reporting more daily positive experiences is slightly lower than the OECD average (74% compared to 76%).

The United Nation's World Happiness Report (UNSDSN, 2013b) ranks the UK 22nd out of 156 nations, scoring 6.883. These evaluations are primarily based on the Gallup World Poll, which began in 2005.

These findings are confirmed by the Third European Quality of Life Survey (2012), which rated UK adults' life satisfaction at 7.3 out of 10 compared with the European Union average of 7.11. For those aged 18-24 this gap was slightly narrower (7.5 compared with 7.4). However, UK adults were placed below average for satisfaction with social life (7 compared with 7.3). UK adults were also below the European Union average for mental wellbeing, arriving 20th out of 27 EU countries, with a mean score of 59 out of 100.

2.5. Wellbeing and young people

Given evidence of a link between young people's wellbeing, screen based media and online social networking, what is known about the wellbeing of young people in the UK?

According to the Office for National Statistics' (ONS) 'Life in the UK' report, young people aged 16-19 rate their life satisfaction as 7 or more out of 10 (87%).

However, **the proportion of young people reporting some symptoms of depression or anxiety is 21%**. This is **higher than all adults aged 16 and over (18%)**. This is a particular concern because this period is "an important age of transition from childhood to adulthood, and the ways in which this transition is negotiated may affect current and future wellbeing" (ONS, 2014).

In addition, a Mental Health Foundation (2014) survey found that **young people's experience of anxiety often concerns their interpersonal relationships**. For instance, they find that young people (aged 18-24) are twice as likely to be anxious about being alone than the oldest people surveyed (aged 55+). The survey also reports that young people are significantly more likely to feel anxious about personal relationships (44% compared with 15%).

The **success of governments in improving levels of wellbeing among young people will inevitably be determined by the emergence and evolution of key social trends**. In recent years, two particularly important new social trends in the UK have comprised the proliferation of **social networking sites (SNS)** and growing use of **screen-based media (SBM)**.

Both of these trends may be expected to influence levels of wellbeing across different groups in the population, especially young people. Indeed, research has now identified a significant negative association between adolescent wellbeing and use of social networking sites in the context of total screen-based media exposure, and this is now explored in the next chapter.

3. Wellbeing, screen-based media and online social networking

This chapter reviews up-to-date figures on the usage of screen-based media among different age-groups, and sets out the findings of new research on the effect on young people's wellbeing.

Key points

- ▶ New research on around 5,000 young people aged 10-15 in the UK has found significant negative associations between increased social-networking site exposure and levels of happiness
- ▶ Those who used social-networking sites 1-3 hours per day were around half as likely to be happy than those who used these sites for less than 1 hour per day, while those who chatted for more than 4 hours per day had a 57% lower chance of happiness
- ▶ Those who played computer games for 1-3 hours per day were 41% less likely to be happy than those who played for less than 1 hour, rising to 58% for those who played for more than 4 hours
- ▶ Watching TV for 1-3 hours per day was associated with 16% lower chance of feeling happy compared with those who watched for less than 1 hour, rising to 42% for those who watched TV for more than 4 hours
- ▶ Those visited SNS or played video games for more than 4 hours per day were at least twice as likely to experience socio-emotional difficulties

3.1. Introduction

New evidence is now available to policymakers on the negative consequences for some young people's wellbeing from use of screen-based media (SBM) and online social networking sites (SNS).

This chapter reviews up-to-date figures for the use of such media among different age-groups in the UK, and sets out the findings of new research on the effect of SBM and SNS by young people on their wellbeing. It then reviews new academic research on the effect of SBM and SNS usage on the wellbeing of adolescents, as well as related literature on the topic.

3.2. Use of Screen-based Media

An Ofcom report on adult media use (Ofcom, 2014a), found that in 2013 watching television was the most popular SBM activity, regularly undertaken by 96% of all adult respondents, only slightly more than 16-24 year olds (91%).

However, **16-24 year olds exceed all adults in the remaining (non-television) SBM activities**, such as using a mobile phone (95% compared with 85%), going online (87%

compared with 75%), watching videos/DVDs/Blu-rays (68% compared with 55%), playing video games (53% compared with 26%) and using a portable media player (31% compared with 17%).

From 2005 to 2013 the prevalence of adults regularly watching television was generally stable (95% to 96%). There has been a small increase in using mobile phones (73% to 85%), a much larger increase in going online (50% to 75%), a small decrease in watching videos/DVDs/Blu-rays (66% to 55%) and only a slight increase in playing video games (21% to 26%).

Ofcom has also published a separate report on children's media use (Ofcom, 2014b), which provides data on regular use of media devices, rather than on activities, a distinction complicated by the trend toward separation of device and activity, particularly for young people, as the mobile phone is the most popular device for social activities, according to the report.

The report reveals that 80% of children aged 12-15 regularly use TVs, 69% use a mobile phone, 49% use a PC/laptop, 39% use a tablet, 36% use a games console and just 9% use a DVD/Blu-ray player.

The growth of such SBM usage among teenagers represents one of the most dramatic transformations in growing up in the UK over recent decades.

3.3. Use of Social Networking Sites (SNS)

Detailed evidence on use of social networking sites in the UK was provided by a recent set of reports released by Ofcom (2014a; 2014b). These found:

- ▶ 69% of all adults (aged 16+) internet users use SNS, rising to 71% among 12-15 year olds and fully 96% among 16-24 year olds;
- ▶ **For 83% of 16-24 year olds, SNS usage is at least daily** (a rise from 69% in 2012). This compares with the adult average of 60% (a rise from 50% in 2012);
- ▶ 96% of adults with a current SNS profile have one on Facebook, making it by far the most popular SNS, the second most popular being Twitter, with 29% having a current profile. There is little difference between age groups in this respect.

The precise level of SNS usage can be difficult to ascertain as increasingly many different types of Internet activities have a social networking element. For example, news websites and video sharing services often serve as SNS, to a greater or lesser degree. Furthermore, the variety of devices through which SNS can be accessed is increasingly diverse and includes computers, mobile phones, tablets, smart TVs, e-book readers and game consoles. This is reflective of a broader trend of a growing versatility in media technologies, breaking the traditional marriage between device and activity, for example, websites can now be accessed on TVs, and live TV broadcasts can be watched on computers.

3.4. Media Use, Sports Participation, and Wellbeing in Adolescence

Academic research conducted by Booker et al. (2015) investigates the relationship between UK adolescent wellbeing and use of SNS, along with other types of screen-based-media (SBM) exposure. To judge whether wellbeing was connected to SBM and SNS use independently from levels of physical activity or not, the study also explored the effect of participation in sport.

The research – **Media Use, Sports Participation, and Wellbeing in Adolescence: Cross-Sectional Findings From the UK Household Longitudinal Study** - was based on the first wave of Understanding Society, the UK Household Longitudinal Study (UKHLS) which surveyed 4899 youths aged 10-15, living in 3656 households.¹ This sample is representative of the 4,365,600 adolescents in the UK in this age group at the time the survey was undertaken.

The study examined the lives and wellbeing of the group. Participants were asked how many hours of a normal school day they spent on the following activities:

▶ Hours per day chatting or interacting with friends on SNS

< 1	63.93%
1-3	30.03%
≥ 4	6.04%

▶ Hours per day playing video games via console

< 1	64.53%
1-3	29.26%
≥ 4	6.22%

▶ Hours per day playing video games via computer

< 1	51.99%
1-3	39.53%
≥ 4	8.48%

▶ Hours per day watching TV, including video and DVDs.

< 1	24.2%
1-3	60.13%
≥ 4	15.45%

For sports participation, participants were asked how many

¹ Launched in 2009, the UKHLS is a nationally representative longitudinal household panel study, commissioned by the Economic and Social Research Council (ESRC).

▶ **Days per week they spent playing sports, aerobics or some other keep fit activity**

< 1	6.38%
1-2	18.60%
3-4	27.12%
5-6	18.41%
7	29.48

Markers of wellbeing included ‘happiness with life’, which was determined by six questions relating to:

- ▶ School work;
- ▶ Appearance;
- ▶ Family;
- ▶ Friends;
- ▶ School; and
- ▶ Life as a whole.

Happiness and SNS exposure

The research found **direct negative correlations between increased SNS exposure and levels of happiness:**

- ▶ Those who used SNS 1-3 hours per day were around **half as likely to be happy** than those who used SNS for less than 1 hour per day;
- ▶ Those who chatted for more than 4 hours per day had a 57% lower chance of happiness.

Happiness and SBM exposure

Similar patterns were found for other types of SBM exposure:

- ▶ **Those who played computer games for 1-3 hours per day were 41% less likely** to be happy than those who played for less than 1 hour, **rising to 58% for those who played for more than 4 hours;**
- ▶ **Watching TV for 1-3 hours per day was associated with 16% lower chance of feeling happy** compared with those who watched for less than 1 hour, rising to 42% for those who watched TV for more than 4 hours.

Happiness and sports participation

Interesting, **opposite associations were found for participation in sports activities:** more frequent participation was associated with higher odds of happiness. The adolescents who participated in sports less than 1 day a week were 64% less likely to be happy than those at the other end of the scale who took part in sports 7 days a week.

Socio-emotional difficulties

The prevalence of ‘socio-emotional difficulties’ was also incorporated into the study, using the

self-reported Strengths and Difficulties Questionnaire (SDQ) – a survey instrument used to screen for behavioural and emotional problems in children. Similar associations were found between the various activities and socio-emotional difficulties, as were found with happiness.

The research found a **positive correlation between socio-emotional difficulties and SBM exposure** – in contrast to a negative correlation with sports participation.

However, while there was only a small increase in the odds of having socio-emotional difficulties reported by those who visited SNS or played video games for 1-3 hours per day compared with less than 1 hour per day, those who **visited SNS or played video games for more than 4 hours per day were at least twice as likely to experience socio-emotional difficulties**.

SBM, SNS and wellbeing

Overall, the research provides strong evidence of an association between SNS and SBM usage and low wellbeing.

Furthermore, it emphasises that SNS use contributes to total SBM exposure and sedentary behaviour, which itself is associated with poor physical health and low wellbeing, as well as lower participation in sports. The study also found that the relationship between overall SBM use and wellbeing did not change when sports participation was added, suggesting that SBM use is associated with low wellbeing among adolescents, independently of physical activity. However, this was not found with SNS use.

Crucially, the study was based on a large sample, nationally representative survey. As such, the research arguably represents the most reliable evidence UK policymakers will ever receive linking SNS and SBM usage to wellbeing among adolescents.

3.5. Related literature

To what extent are the findings of **Media Use, Sports Participation, and Wellbeing in Adolescence** consistent with related academic research and literature?

Due to the growth in SNS and SBM usage, as well as a growing awareness of the importance of wellbeing and related factors, this area of study has recently attracted the attention of a number of academic researchers. As a result, there is a range of empirical studies that support the findings of Booker et al. (2015), drawn from a range of countries:

- ▶ Research by Finne et al. (2013) examined self-reported responses from a representative sample of German adolescents and found a negative correlation between SBM exposure and health-related quality of life (HRQoL), and a positive correlation between physical activity and HRQoL;
- ▶ Hamer et al. (2010) conducted a cross sectional study using data from the 2003 Scottish Health Study to examine the relationship between SBM and mental wellbeing in adults and concluded that it was consistent with emerging research that suggested that SBM exposure was an independent risk for wellbeing;

- ▶ Kross et al. (2013) used ‘experience sampling’ to compare changes in wellbeing with use of Facebook. The research involved texting participants 5 times per day over 2 weeks to measure wellbeing, and found that levels dropped the more users visited Facebook. Other measures - including direct interaction with people, number of Facebook friends, their perceived supportiveness, motivation for using Facebook, gender, loneliness, self-esteem, or depression - did not appear to affect wellbeing;
- ▶ Hinkley et al. (2014) conducted a study using data from 8 European countries collected in two waves over 3 years, and found that early childhood exposure to electronic media predicted poorer wellbeing. Because this study is longitudinal there is a firmer basis to assert causal pathways. The researchers found a 1.2 to 2-fold increase for emotional problems and lower family functioning for each additional hour of television viewing or video game use;
- ▶ Another longitudinal study completed by Primack et al. (2009) used the National Longitudinal Survey of Adolescent Health to investigate the association between media use in adolescence and depression in young adulthood. They found that in 4,142 participants who were not depressed at baseline, those who reported more television use had significantly greater odds of developing depression for each additional hour of daily media exposure.

Nevertheless, it is important to note that systematic reviews of the academic literature report inconsistency in evidence and an absence of causal links between SNS (Best et al., 2014), SBM (Biddle and Asare, 2011) and wellbeing in children and adolescents.

Conflicting evidence regarding the association between SNS/SBM and wellbeing does not necessarily reflect academic disagreement, but might instead highlight the complexity of the phenomenon. It may be that SNS and SBM use causes low wellbeing, or that low wellbeing causes SNS and SBM use – or both simultaneously.

Indeed, it is likely that the relationship is characterised by complex, contextual, multi-directional, and mutually reinforcing feedback loops, involving a variety of contributing factors. Understanding these potential complexities will be important for policymakers to develop appropriate policy responses to the negative effect that SBM and SNS usage can have on adolescent wellbeing.

The next chapter sets out in detail some potential explanations of the drivers suggested in research, drawing on available studies.

4.Explaining the link between adolescent wellbeing, SBM and SNS

How has academic research sought to explain the link between young people's wellbeing, and use of screen-based media and social networking sites? Various explanations have been posited:

- ▶ Displacement of face-to-face social interaction
- ▶ SNS changing relationships and increasing social isolation
- ▶ Displacement of physical activity
- ▶ A link between SBM usage and health outcomes
- ▶ Sleep disturbance
- ▶ Social jealousy
- ▶ The effect of 'inauthenticity'
- ▶ Cyber-bullying
- ▶ Harmful content

Overall, the academic literature, suggests that the relationship is highly complex and dependent on the specific context within which the activity takes place.

4.1. Introduction

The previous chapter set out new evidence on the association between SNS/SBM use and levels of wellbeing among young adults.

The causal mechanisms responsible for the association between SNS/SBM usage and low adolescent wellbeing remain to be conclusively proven. However, academic research has identified a range of potential explanations and drivers that are important to consider in related policy development, which this chapter briefly reviews.

These explanations variously relate to:

- ▶ '**Participative factors**' associated with engaging in the **activity** of screen-based media usage – the physical, mental and social effects of time spent online or looking at a screen;
- ▶ '**Qualitative factors**' relating to the **nature** of people's experiences using SNS and SBM, i.e. the effects of what people do, see, read, say and experience in these ways.

This chapter considers a number of potential factors identified in academic research:

- ▶ Displacement of face-to-face social interaction;
- ▶ SNS changing relationships and increasing social isolation;
- ▶ Displacement of physical activity;
- ▶ A link between SBM usage and health outcomes;
- ▶ Sleep disturbance;

- ▶ Social jealousy;
- ▶ The effect of ‘inauthenticity’;
- ▶ Cyber-bullying;
- ▶ Harmful content.

PARTICIPATIVE FACTORS

4.2. Displacement of face-to-face social interaction

Although Hinkley et al. (2010) point out that certain SBM activities, such as watching television, are often undertaken with family members, and could even prompt discussion and interaction, there is evidence that exposure to SBM pushes out time that would be spent on face-to-face social activities (Mannell et al., 2005; Primack et al., 2009). Similarly, Kraut et al. (1998) report the findings of a longitudinal study into the impact of people’s Internet use on their subsequent social involvement and psychological wellbeing. The research found that greater use of the Internet brought about small but significant declines in social involvement, measured by family communication and the size of people’s local social networks.

Although many Internet activities are social activities and may strengthen social networks, the bonds formed between people who meet online are potentially weaker, easier to terminate, and require less commitment and investment than those formed in offline contexts.

4.3. SNS changing people’s relationships and increasing isolation

Drawing on a representative Norwegian study conducted in three annual waves, research by Brandtzæg (2012) found that SNS users scored higher in 3 out of 4 social capital dimensions: frequency of face-to-face interactions; number of offline acquaintances; and level of bridging capital, that is “the social diversity or the weak ties to which one has access” (p.473). However, SNS users, and in particular males, reported more loneliness than those who did not use SNS.

These results reinforce the concerns raised by Turkle (2011) who writes that social technologies, such as SNS, give people a false impression of sociability. SNS users may spend a great deal of time communicating with a large number other SNS users, but this is normally a solitary activity, lacking the spontaneous dialogic, or even comfortably non-verbal, shared interaction that comes from high quality relationships. The result is a loneliness that is paradoxically stronger precisely because it is experienced among others.

4.4. Displacement of physical activity

Researchers have proposed that various forms of SBM use could be responsible for low wellbeing by reducing, or entirely displacing, time spent being physically active (Primack et al., 2009; de Leeuw et al., 2010; Mannell et al., 2005). Physical activity is itself associated with wellbeing for physiological reasons, as it is known to induce endorphins which have pain reducing and euphoric effects, and for psychological reasons, as it is found to increase self-concept due to improved fitness, which in turn reduces anxiety and depression (Iannotti et al., 2009).

4.5. SBM usage and health outcomes

Research by Iannotti et al. (2009) and Ekelund et al. (2006) suggests that SBM use does not necessarily displace physical activity, as those that spend a lot of their time using SBM would not otherwise be engaging in physical activity. However, they find that there are mechanisms connecting SBM use to poor physical health, independently from reduced physical activity.

There are several possible explanations for the association between SBM use and poor health. For instance, Ekelund et al. (2006) show that television viewing is related to increased obesity among children, and suggest that those who watch more television are more likely to consume unhealthy snacks in between meals while doing so. Alternatively, Hakala et al. (2012) draw on a large sample of Finnish adolescents to reveal that SBM use, especially those involving computers, increase the risk of muscular-skeletal pain, particularly in the neck-shoulder area and the lower back. This could in turn increase the risk of obesity as it potentially makes physical activity more painful (Wosje et al., 2009). The connection between low physical health and low wellbeing is well established in the broader academic literature (Iannotti et al., 2009).

4.6. Sleep disturbance

According to a poll conducted by the National Sleep Foundation (2014) 75% of adolescents in the US had at least one electronic media device in their bedroom. While Ofcom report falls in the number of TVs and game consoles kept in bedrooms of UK 12-15 year olds (62% and 57% in 2013, to 56% and 50% in 2014), 65% of this age group now own smartphones, which increasingly offer the same functions as TVs, game consoles and more (Ofcom, 2014b). The result is that some adolescents will habitually turn to SBM devices in the time immediately before sleep, or as they are waiting to become tired, and this could potentially disturb sleep, either by pushing back bed time or by creating excessive stimulation leading to poor sleep quality (Curcio et al., 2006). In a recent study of the sleep behaviours of teenagers, Horton et al (2015) identify the growing use of social media during the night as a potential factor in adolescent tiredness. The research found that over a fifth of 12-15 year olds reported that they almost always wake up during the night to use social media, and that over half of this group say they almost always go to school feeling tired. As sleep is considered to be crucial in learning, memory, emotional and behavioural development among children and adolescents, lack of regular, high quality sleep can contribute to low wellbeing directly (Matricciani et al 2013), and also indirectly through poor academic achievement (Cain and Gradisar, 2010; Gruber et al 2010).

QUALITATIVE FACTORS

4.7. Social jealousy

A number of connected trends over recent years could be responsible for increasing feelings of jealousy caused by SNS use. For example, as a result of technological advances, young people have constant access to a pocket-sized camera, with which they can publish visual documentation of their lives and everyday experiences. The seemingly accidental and unbiased nature of the photos shared on SNS appears to provide reliable snapshots of other people's lives – despite many involving the use of photo-shopping or 'filtering' applications.

However, as Gershon (2011) points out, a positivity bias that favours photos of smiling people having fun on social events inevitably contrasts with the context in which the photos are viewed, passively and solitarily. Various researchers have revealed that comparing one's own life to the lives of others as they are ambiguously portrayed on SNS can lead to jealousy in relation to social lives (Krasnova et al., 2013), romantic relationships (Muisse et al., 2009), body image and career success (Haferkamp and Krämer, 2011). Kross et al. (2013) suggest feelings of envy deriving from social comparisons as a possible mechanism through which the SNS using adolescents in their study experienced reduced wellbeing.

4.8. Inauthenticity

Another way that the perceived difference between reality and SNS content can lead to low wellbeing is identified by Reinecke and Trepte (2014). Based on prior research linking authenticity to wellbeing in offline contexts, the authors conducted a two-wave longitudinal study examining the effect of authenticity in SNS communication on subsequent wellbeing. The study revealed a reciprocal relationship between wellbeing and SNS use, mediated by authenticity:

- ▶ Those who began the study with positive markers of wellbeing were more likely to present themselves authentically on SNS and were thus rewarded by further positive wellbeing;
- ▶ However, those with low levels of wellbeing tended to feel inauthentic on SNS, and reported even lower levels of wellbeing at the end of the study.

This paradox is related to the positivity bias discussed above; the social norms of SNS presentation dictate that users must present themselves and their lives in a positive light. However, those with pre-existing low wellbeing will inevitably fall short of this expectation. As the authors note "their negative feelings and experiences are an integral part of their true self" (p.100). This research provides compelling evidence that the effect of SNS on wellbeing is not the same for all users in all situations, rather it is highly context-dependent. This suggests that it should be possible to reverse the mechanisms that foster negative wellbeing in adolescents in order to produce positive wellbeing.

4.9. Cyber-bullying

Research into cyber-bullying among adolescents is well established, and is emerging as a distinct field in its own right. According to research conducted by Juvonen and Gross (2008) involving a survey of 1,454 adolescents, cyber-bullying - defined as the use of digital communication devices to insult or threaten - is largely an extension of the bullying experienced in school, involving, for example, direct verbal insults. Online however, bullying is limitless in many respects - it can involve the targeting of one person by many SNS users, witnessed by a larger audience, continuing long after the school bell, within a person's private space, and remaining in a more permanent state. There are also qualitative differences to bullying experienced online, which might involve violations of privacy such as hacking SNS accounts, or sharing private and intimate communication or pictures. The ambiguity of textual communication, lacking the visual social cues present in offline settings, also means that messages posted with friendly intentions are open to interpretation as personal attacks, leading to an escalation of alienation and isolation. The research reveals that cyber-bullying is

a common experience for adolescents, with 72% of the respondents reporting that they had been affected by cyber-bullying at least once in the past year. More recent research conducted by YouGov, commissioned by Vodafone (2015), supports the notion that cyberbullying is a distressing experience for many young people. From a survey of over 4,700 adolescents from 11 countries around the world, 18% report having experienced cyberbullying. These experiences resulted in significant proportions of this group feeling depressed (41%), suicidal (18%), others were led to self-harming (17%), avoiding school (21%), avoiding people (38%) or avoiding social activities (28%).

However, 90% of the respondents of Juvonen and Gross' (2008) study responded that they did not report cyber-bullying to an adult, partly for fear that their internet access would consequently be restricted. Nor did many use what Parris et al. (2011) refer to as 'reactive coping' methods - making use of digital tools, such as flagging, blocking, or filtering out offensive content. This represents an area within which cyber-bullying may be effectively reduced, through carefully designed policy, emphasising the need to improve the quality of SNS, rather than imposing outright restrictions.

4.10. Harmful content

The content of SBM can influence audience belief and behaviour (Strasburger et al., 2010). As discussed above, the content of SNS is also associated with low wellbeing, though this is seen to be connected to authenticity and social envy. For older forms of SBM, harmful content can take the form of the portrayal of violence and aggression, substance abuse, risky sexual behaviour and unattainable idealised beauty standards.

The narrative underlying this hypothesis is that, though media is seen by some to reflect reality, at least in part, there is a tendency for it to produce sensationalised accounts for entertainment value. This is particularly the case for SBM marketed towards adolescent audiences. It is suggested that younger people are less aware, or critical of the gap between reality and fiction as portrayed by the media. For this reason, the norms and values presented by the media can have an incredibly powerful effect on adolescents. Thus, there is a significant chance that portrayals of risky behaviour related to sex, substance abuse or violence might be emulated by teenagers, with low wellbeing arising from the consequences.

Researchers highlight other influences of SBM such as advertisements played between television programmes, which could increase consumption of junk food and fast food leading to poor diet, obesity and low self-concept, and the representation of idealised, unattainable beauty standards, increasing the risk of eating disorders, low self-worth, and body dysmorphia (Strasburger et al., 2010).

Though critics of this perspective assert that audiences actively interpret media in a variety of different ways, depending on their own perspectives and autobiographies, it is important to note that some adolescents may not yet have developed a critical and reflective stance towards harmful media content.

4.11. Conclusion

The range of potential mechanisms for the association between SNS/SBM use and low wellbeing among adolescents found in the academic literature, suggests that the relationship is **highly complex and dependent on the specific context within which the activity takes place. Multiple effects on wellbeing may be present simultaneously.** Different young people might have a variety of experiences using SNS/SBM, which might affect their wellbeing in different ways.

For example, teenagers with a disposition to, or pre-existing low wellbeing may be attracted to SNS because it facilitates low-risk, low-investment social connections with numerous new and distant people. However, relying on these weak relationships for sociability may increase feelings of loneliness, which could feed back into low wellbeing, perhaps via other socio-emotional problems such as anxiety and depression. Simultaneously, the largely sedentary nature of SNS, as part of overall SBM use, could lead to reduced physical activity contributing to obesity, which in turn leads to further reduced physical activity and lower well being due to worsened self-concept and by missing out on the emotional benefits of exercise.

It is important to note that these mechanisms are fluid rather than fixed, and as such, have the potential be reversed by effective public policy.

5. Policy options

Strong evidence of a link between adolescent wellbeing and usage of screen-based media and social networking sites provides a compelling rationale for policymakers to develop and implement policy responses.

This chapter develops and evaluates a number of potential approaches:

- ▶ **National guidelines for volume of SBM and SNS usage among young people**
- ▶ **Empowering young people through public health/education campaigns to understand how SBM and SNS usage may affect their wellbeing**
- ▶ **Awareness raising among parents and child professionals**
- ▶ **Changing behaviour through the design of hardware and online experiences**

5.1. Introduction

Research by Booker et al. (2015) – **Media Use, Sports Participation, and Wellbeing in Adolescence: Cross-Sectional Findings From the UK Household Longitudinal Study** – has provided UK policymakers with strong evidence of a negative association between adolescent wellbeing and usage of screen-based media (SBM) and social networking sites (SNS).

As the previous chapter noted, multiple drivers of wellbeing can be posited to explain such an association, and in fact, multiple, complex overlapping effects are likely, with different drivers affecting different young people differently at different times.

Despite such complexity, **a proven negative association between wellbeing combined with the high percentage of young people using SNS and SBM provide a strong rationale for UK policymakers to implement policy responses.**

This chapter therefore develops and evaluates a range of potential policy responses to ameliorate lower wellbeing among some young people resulting from SNS and SBM usage - reflecting different potential drivers for the wellbeing outcomes identified in research.

The policy options developed here are evaluated using three criteria:

- ▶ **Suitability** – will it improve wellbeing in the context of SBM and SNS usage?
- ▶ **Feasibility** – is it deliverable and at reasonable cost?
- ▶ **Acceptability** – will it be opposed by the public or key stakeholders?

The chapter considers a range of possible options that seek to change behaviour in different ways:

- ▶ **National guidelines for volume of SBM and SNS usage among young people;**

- ▶ Empowering young people through public health/education campaigns to understand how SBM and SNS usage may affect their wellbeing;
- ▶ Awareness raising among parents and child professionals;
- ▶ Nudging young people to change their behaviour through the design of hardware and SNS.

5.2. National guidelines for volume of SBM and SNS usage among young people

Summary: Clear, quantified national guidelines for adolescent SNS/SBM use - for example, no more than 2 hours per day - promoted by a government department such as the Department of Health.

The basic rationale for national guidelines is that although young people may in future be educated about understand the risk of low wellbeing arising from SNS/SBM use, in the absence of explicit, quantified and widely promoted benchmarks, they may not alter their behaviour. In addition to behaviour change, national recommended guidelines or limits will also raise awareness of the association between SNS/SBM use and low wellbeing, if the guidelines are promoted within this context.

Target outcomes

- ▶ Increased awareness of the association between high SNS/SBM use and low wellbeing;
- ▶ Reduced excessive SNS/SBM use.

Background

National guidelines are often issued on the basis of scientific data and expert advice in order to improve public health. A notable example is the '5 a day' recommendation for eating five 80g portions of fruit and vegetables every day in order to lower the risk of serious health problems, such as heart disease, stroke, type 2 diabetes and obesity (NHS, 2015a).

A 2010 report from the Department of Health reviews the scientific literature and international guidelines regarding obesity and sedentary behaviour, described as typically including screen-time (Biddle et al., 2010). The report highlights international recommendations that provide specific quantified limits, made on the basis of expert advice, rather than scientific evidence:

- ▶ Australia recommends **a maximum of 2 hours per day of electronic media entertainment**, particularly during daylight hours, for children;
- ▶ Canada recommends that children and youth **reduce their screen time by at least 30 minutes per day**;
- ▶ USA advises children to **limit their total TV viewing time to 1 to 2 hours** of quality programming per day;
- ▶ Finland recommends **less than 2 hours per day of TV viewing**.

However, the report concludes that while guidelines should specifically recommend people of all ages to minimise sedentary time, they should not place a quantified limit, on the basis that there is insufficient evidence. As such, current UK national recommendations advises young

people to “minimise the amount of time spent being sedentary (sitting) for extended periods” (DoH, 2011 p.7) and to break up sedentary time with “shorter bouts of activity such as just one to two minutes” (p. 19).

There are currently no UK or international recommendations for moderating SNS use.

Evaluation

► Suitability

Efficacy in influencing levels of wellbeing is uncertain, in particular, because guidelines could only be expected to reduce the quantity of time adolescents spend on SBM/SNS activity but would do little to affect the qualitative nature of these experiences. Single national guidelines are also relatively blunt measures given the wide variation in young people’s experience of SBM and SNS usage, and the effect it has on them.

► Feasibility

No significant issues, beyond the cost of finalising credible recommended guidelines and costs associated with promoting awareness of them.

► Acceptability

Some risk that national guidelines for SBM/SNS usage may prompt accusations of ‘nanny statism’. In addition, by recommending a daily limit of, for example, two hours per day, this may actually have the effect of legitimising two hours each day being spent on SNS.

Conclusion

The benefits and effectiveness of national guidelines for SBM/SNS usage is uncertain and may be weak. How such guidelines should be set is also uncertain. Nevertheless, the limited costs associated with implementing such a policy suggest a compelling case to proceed.

5.3. Empowering young people through public health/education campaigns to understand how SBM and SNS usage may affect their wellbeing

Summary: Public health education campaigns targeted at young people, whether via **classrooms** and/or via **social marketing**, about how SBM and SNS usage can affect their wellbeing, in order to influence the nature and quantity of usage.

This approach emphasises educating young people about the multiple potential ways in which SBM and SNS usage may affect their wellbeing, in order that they are empowered to examine and moderate the quantity and nature of their SBM and SNS activities.

For example, encouraging adolescents to think about the difference between how individuals present their lives on SNS compared to the real lived experience could be effective in reducing low self-esteem among those who use SNS to compare themselves negatively to others.

This section explores options for classroom-based approaches, and then the potential of social marketing.

Target outcomes:

- ▶ Empowering young people by making them aware of the potential risk to their wellbeing from the quantity and quality of their SNS/SBM usage;
- ▶ Improved quality of SNS/SBM use, in order to reverse any negative impact on wellbeing;
- ▶ Less time spent engaging in low-quality SNS/SBM use;
- ▶ Greater awareness of the options available to adolescents who are experiencing symptoms of low wellbeing.

Background: Classroom

In recent decades, there has been increasing awareness of the importance, and efficacy, of **teaching social and emotional skills in schools**, both for children's development within these areas and elsewhere in the academic curriculum:

“Emotional literacy is beginning to show encouraging outcomes and policy makers are taking these seriously.... there is ample scope for promoting emotional literacy across the curriculum and through current developments in inclusion, citizenship, healthy standards and PSHE work.” (Ministerial speech at the Antidote Conference, 2002; cited in Gray and Weare, 2003, p37)

In the US, Durlak et al. (2011) drew on a meta-analysis of 213 social and emotional learning programmes involving kindergarten and high school students to show that participants demonstrated “significantly improved social and emotional skills, attitudes, behaviour, and academic performance that reflected an 11-percentile-point gain in achievement”.

In the UK, social and emotional education is generally taught within the framework of Personal, Social and Health Education (PSHE). This is described as a “planned programme of learning through which children and young people acquire the knowledge, understanding and skills they need to manage their lives, now and in the future” (PSHE Association, 2015). The Department for Education commissioned a review of the effectiveness of PSHE in 2010 (Formby et al., 2011). Drawing on a nationally representative survey of 923 primary and 617 secondary schools, and in-depth case studies with fourteen schools, the research found that 60% of primary schools viewed their PSHE education as effective, and 34% viewed it as very effective. Similar results were found for secondary schools; the figures were 62% and 29% respectively. Emotional health and wellbeing were viewed as particularly effective elements, with less than 5% of primaries in each case seeing these elements as being less than effective.

Though PSHE is not a compulsory subject, it is widely taught as it contributes in a fundamental way towards schools' statutory obligations. Section 78 of the Education Act 2002 requires schools to have a curriculum that:

“(a) promotes the spiritual, moral, cultural, mental and physical development of pupils at the school and of society, and

(b) prepares pupils at the school for the opportunities, responsibilities and experiences of later life. (Education Act, 2002)”

More specifically, schools also have a statutory duty to “promote children and young people’s wellbeing” (PSHE Association, 2015).

Within this legislation there is scope and flexibility for schools to include in their curriculum a course of lessons on the relationship between SNS/SBM use and low wellbeing in light of the recent academic research establishing this connection. Recent developments relating to SNS/SBM, such as the proliferation of SNS across devices and media formats and the rise of new media devices, such as smart phones, present novel social and emotional issues for adolescents which deserve to be explored as part of PSHE, or an equivalent subject, as much as those issues which have traditionally been the focus.

Potential classroom programmes

A classroom-based public health/education campaign around SBM and SNS usage among adolescents could involve educating pupils using a designated course that would draw upon a range of educational methods, such as classroom activities, debates, discussions, tutorials, and exercises, to address each target outcome.

In order to raise awareness of the association between high SNS/SBM use and low wellbeing, the course would explore some of the potential mechanisms by which usage can affect wellbeing. The course would also need to acknowledge the fact that SNS/SBM activities are an increasingly integral part of young people’s lives, and that as well as risks, they also carry benefits such as social support, social networking, safe identity experimentation, opportunities for self-disclosure, education, humour, and entertainment.

As well as raising awareness of the risks associated with SNS/SBM, the course could also be a useful context to improve the quality of SNS/SBM use. This would involve encouraging a move towards ‘positive’, high quality SNS/SBM use, which would emphasise values such as respect, inclusion, consideration and care for other SNS users, particularly when producing and sharing content; reactive coping methods such as using available SNS tools to block, hide, flag, and/or filter out negative content on SNS; and the ability to take a critical stance against negative or unattainable ideal images portrayed by SBM in general.

The course would also seek to limit the amount of time students spend engaging in ‘low-quality’ SNS/SBM use, as a way to safely reduce the risk of low wellbeing. This would be achieved by educating students about how to moderate exposure and engage in alternative activities. This would involve advocating moderation when using SNS/SBM; complementing SNS use with face-to-face social meetings; and balancing overall SBM use with physical activities such as sports participation.

One activity that could prove to be effective in the context of a classroom would be the production of **SNS/SBM diaries** by pupils. This would involve participants recording the amount of time they spend using SNS and SBM in general. This could raise awareness of the issue but, for excessive users who might be surprised with the results, this activity could also serve as a prompt to begin moderating SNS/SBM use to more reasonable limits.

Classroom-based programmes could also raise awareness about the options that are available to people who are experiencing symptoms of low wellbeing, both because of SNS/SBM use, and for any other reasons. These options would need to be specific to the particular context of the school, but would most likely include formal anti-bullying channels and student welfare support. It would also be important to encourage students to feel comfortable when seeking support, or reporting an issue.

Evaluation

▶ Suitability

There is mixed evidence regarding the influence of education on subsequent behaviour. Furthermore, the way the course is designed and taught would have a large impact on its effect. For this reason it would need to be thoroughly researched in consultation with psychologists, educators, parents and students.

▶ Feasibility

PSHE is already taught in secondary schools in various forms throughout the United Kingdom. A course on wellbeing and SNS/SBM use could easily be incorporated. However, the cost of the research, design, planning, implementation and evaluation of the course could potentially be significant.

▶ Acceptability

PSHE is well-established and widely accepted. However, some interest groups may resist government-led efforts to educate young people about the risks to their wellbeing of using SBM and SNS.

Conclusion

Despite uncertainties regarding effectiveness in the absence of pilot evidence, a well-designed course has the potential to be effective both as a short term and long term measure. It is also likely to be a highly feasible and acceptable policy option.

Background: Social marketing

As an alternative to classroom based public health education for adolescents, some social marketing campaigns have been successful since increasing adoption from the 1980s onward (LeFebvre, 2013).

Potential social marketing campaigns

A campaign designed to address the link between SNS/SBM and low wellbeing could incorporate existing 'off the couch' campaigns that target sedentary behaviour, or those that promote sports participation, emphasizing that SNS contributes to total SBM and is also increasingly popular, ubiquitous and addictive. It could also incorporate existing SNS and

Internet-safety campaigns. While these tend to focus on risks of harassment, bullying, viewing adult material, this campaign would additionally emphasize the link between SNS/SBM and sedentary behaviour and low wellbeing.

While the target outcomes and the core messages would be equivalent to the public health/education campaign, the approach would take the form of a commercial marketing campaign, drawing from a diverse range of media including new and traditional formats, such as radio, TV, magazines, newspapers, posters, leaflets, websites and SNS. The use of SBM and SNS themselves could be particularly effective as it would directly contextualise the message within the medium in question. The delivery would need to be concise and attention grabbing, while still conveying the core messages of the campaign.

While an education campaign might be able to challenge negative norms, or encourage positive norms relating to SNS/SBM use, a social marketing campaign would be better suited to effectively pushing social norms such as high-quality SNS/SBM use; moderated low-quality SNS/SBM use; and ensuring that a balance is met between SNS/SBM use and face-to-face social meet ups and physical activity. SNS could prove to be a particularly effective means of promoting social norms as content is shared between friendship networks, which are seen to be influential, particularly for adolescents.

In addition, SNS could include information pages detailing the association between high SNS use and low wellbeing. This could be combined with advice encouraging positive, high quality SNS/SBM use, which would emphasise values, such as respect, inclusion, consideration and care for other SNS users when producing and sharing content; reactive coping methods, such as using available SNS tools to block, hide, report, and/or filter out negative content on SNS; and the ability to take a critical stance against negative or unattainable ideal images portrayed by SNS content.

A 'national SNS/SBM awareness week' could be included as a key part of the campaign. This would involve encouraging individuals, as part of their schools, colleges, families or youth centres, to take an active part in bringing attention to this area. The benefit of doing this as part of a national awareness week is the sense of engagement, fun and solidarity that comes with widespread simultaneous participation.

Evaluation

► Suitability

Evidence suggests social marketing campaigns can be more effective than classroom based educational programmes, as well as providing broader mechanisms to reach young people: all media formats are more or less effective at targeting specific age groups, an attribute that is widely exploited by commercial marketing campaigns;

► Feasibility

The cost of the research, design, planning, implementation and evaluation of this policy is a potential barrier.

▶ **Acceptability**

There may be some risk of accusations of ‘nanny statism’, or conversely, of legitimising SNS/SBM usage.

Conclusion

This policy option has the potential to be highly effective in influencing adolescent behaviour and reducing the risk of low wellbeing both in the long and short term.

5.4. Awareness raising among parents and child professionals

Summary: Educating youth professionals – particularly those in contact with vulnerable groups – about the potential effect of SBM/SNS usage on wellbeing. For parents - a comprehensive programme of lessons, aimed at parents and guardians of adolescents, on the risks of low wellbeing associated with SNS/SBM use, as well as details on how to monitor and support adolescents towards positive SNS/SBM use.

Target outcomes

- ▶ Greater awareness of the association between high SNS/SBM use and low adolescent well-being;
- ▶ Usage of professionals working with young people as a route to targeting vulnerable groups, influencing behaviour;
- ▶ Professionals, such as GPs, social workers, teachers, and academic welfare officers, fully aware of the potential influence of high SNS/SBM use on well-being;
- ▶ Improved quality of SNS/SBM use, in order to reverse any negative impact on well-being
- ▶ Less time spent engaging in low-quality SNS/SBM use among adolescents.

Background: Child professionals

If a young person seeks support from a professional who is responsible for their welfare, because they are experiencing low wellbeing in some form, it would be helpful for that professional to be aware of the fact that SNS/SBM use is a potential factor. The advice or solution could be tailored for the young person, taking this into account.

Potential awareness raising: child professionals

This option would involve incorporating the academic research regarding the link between SNS/SBM use and low well-being, as well as the potential mechanisms involved, into one or more existing resources used to provide information, such as training programmes, circulated reports and medical databases.

Evaluation

▶ Suitability

This policy could be effective for those who reach out for support to child professionals. However, it is also necessarily therefore limited in its reach among adolescents.

▶ Feasibility

As it would be incorporated into well-established institutions it is likely to be highly feasible.

▶ Acceptability

Likely to be acceptable as part of professional training and development.

Conclusion

While this policy is certainly feasible and likely to be acceptable, on its own, it is unlikely to be as effective as other options in improving wellbeing associated with adolescent SNS/SBM use.

Background: Parents

Parenting programmes are already widely available and have also recently emerged as online classes for parents who are unable to attend in person. A 2010 report published by the Department for Education also highlights their efficacy by showing that four evidence-based parenting programmes available from local authorities throughout the UK resulted in substantial and highly significant improvements in children's behaviour, an outcome that was maintained when measured one year after the end of the programme (Lindsay et al.). Similarly, Petrie et al.'s (2007) systematic review of 20 parenting programmes for preventing tobacco, alcohol or drugs misuse in children concluded that parenting programmes can be effective for behaviour change in this area.

Description: Parents

Parents may benefit from guidance, for example, appropriate supervision to ensure positive SNS/SBM use; imposing time restrictions or curfews; and how to facilitate alternatives to SNS/SBM use, such as face-to-face meet ups and sports participation for their children. This last issue could be particularly crucial, as young people are often dependent on their parents for activities away from the home, due to their lack of personal finances and transport.

Evaluation

▶ Suitability

Uncertain given widely varying parental influence across age-groups and households, as well as take-up among parents.

▶ **Feasibility**

Parenting programmes are widely available for parents of children of all ages, aimed at dealing with a range of emotional, behavioural, educational, mental and developmental issues.

▶ **Acceptability**

Some risk of 'nanny statism' accusations. However, a recent survey conducted by Internet Matters suggests that the use of SNS is a significant concern for parents, as it found that 85 per cent of parents of primary school children believe that under 10s should not be allowed a smartphone (Telegraph, 2015).

Conclusion

While this policy option is likely to be feasible, the acceptability and suitability of a parenting programme is less certain.

5.5. Changing SNS behaviour through the design of hardware and online experiences

Summary: Alerts, notifications and other triggers automatically activated in the design of hardware and the accounts of young SNS users to moderate the quantity and quality of their usage.

Various options can be conceived for changing behaviour through product and service design:

- ▶ Usage meters - weekly or daily alerts detailing the amount of time a member has spent on a particular SNS, or has been using particular apps or has had a mobile phone on;
- ▶ Timed alerts, which pop up after a period of high usage, such as 2 hours in one day;
- ▶ Private like/dislike functions, that encourage SNS users to reflect on how content may be making them feel.

These options could initially be default settings, which members would be able to vary, or 'opt-out' from entirely.

SNS providers in particular could be asked by policymakers to include such features as the default for accounts, or required to do so in legislation.

Target outcomes:

- ▶ To limit excessive exposure the SNS among adolescents;
- ▶ To improve the quality of SNS use among adolescents.

Evaluation

▶ Suitability

Automatic notifications and alerts may be effective influencing behaviour, but their ultimate effectiveness is difficult to assess without evidence.

▶ Feasibility

As SNS membership is high for young people, and as this membership usually requires handing over personal details such as age, this option would be efficient at targeting the right group. Incorporating 'nudge' features for a particular age-group into the design of smartphones etc. may be more difficult if this info is not collected.

▶ Acceptability

This policy could be deemed to be over reaching as SNS are often felt to be highly intimate, personal and private. However, the option to opt-out of these settings would make the policy more acceptable. SNS providers may find this policy unacceptable as their business model is partly based on users being exposed to advertisements.

Conclusion

This policy would cost little to implement and could potentially be effective, however, it may encounter opposition from the organisations who operate SNS, such as Facebook.

6. Conclusion

The growth of social networking sites and new screen-based technology such as smartphones and tablets has enhanced the lives of millions of people. However, given strong evidence of a link between adolescent wellbeing, screen-based media and social networking site usage, it is time for policymakers to respond.

By analysing data from the 'Understanding Society' social survey, Booker et al. (2014) have provided among the strongest evidence on the topic that policymakers are likely to receive, given the quality of the underlying data and the size of the sample analysed.

In response to their research, this report has reviewed the role of wellbeing in public policy, wider evidence on the negative influence on wellbeing of screen-based media (SBM) and social networking sites (SNS) for some young people, as well as potential policy responses.

Across each of these topics, policymakers confront uncertainty, for example, in relation to how such activities influence wellbeing and the efficacy of potential policy interventions. Despite such uncertainty, the case for policy action is strong given the scale of the potential issue, i.e. the very large numbers of young people using SBM and SNS.

Overall, the most significant risk of the policy options developed in this report is waste: it is uncertain how effective some of the options will be. However, none of the options discussed would present significant marginal, ongoing costs beyond initial investment. There are negligible drawbacks to pursuing the options evaluated, but significant potential benefits.

The growth and change in nature and usage of SBM has been one of the most dramatic social changes of recent decades, and has been a positive development for many young people. However, in light of strong evidence of wellbeing effects, it is now time for the government to respond to the risks to young people's wellbeing.

Recommendations

5. The government should issue national guidelines for volume of SBM and SNS usage among young people

Other countries have issued guidelines for the amount of time young people should spend watching TV etc., although UK policymakers have to date not followed suit. By their nature, national guidelines are imprecise policy tools, and may be routinely ignored. However, the very existence of national guidelines would send a clear signal and influence behaviour. Given the relatively small cost of formulating and issuing such guidelines, the government should now proceed.

6. The government should empower young people through public health campaigns, and compulsory school programmes by educating them about how SBM and SNS usage may affect their wellbeing

As technology changes society, social norms must adapt. For example, since the dawn of the automobile era, it is now un-thinkable that young people would not be educated about how to cross the road safely.

At the dawn of a new era of digital social interaction and mobile computing devices, society must respond again by empowering young people themselves to understand how usage of SBM and SNS - and the nature of that usage - can affect them, shape their relationships and how they feel about themselves and others. Children need to be given skills and awareness to use these technologies and services. These represent the new life skills required to prepare children for the modern age. PSHE programs on SBM and SNS usage should therefore be compulsory in schools.

7. The government should compel technology and Internet companies to acknowledge their responsibilities, engage with the risks posed to young people's wellbeing and, where necessary, re-design hardware and online experiences to 'nudge' young people's behaviour

Major Internet companies and hardware manufacturers generate significant revenues from the widespread adoption among young people of SBM and SNS, whether through the sale of new smartphones, or young people exchanging information and pictures on social networking sites.

The usage of SBM and SNS has enhanced the lives of millions of young people. Nevertheless, given significant evidence of the negative influence on the wellbeing of some young people, the government should compel technology companies to acknowledge the issue, recognise their responsibilities and engage with tackling the challenge.

What does this mean? First, technology companies should be funding research to help academics and policymakers understand the relationship between their products and services, and young people's wellbeing.

Second, technology companies should redesign their products and services to nudge young people in positive ways, in order to ameliorate the risk to their wellbeing. For example, companies providing social networking sites should install 'virtual' usage meters and timed alerts as defaults features for all users under-18.

8. The government should ensure more research into the link between wellbeing, SNS and SBM

The relationship between SNS and SBM usage and young people's wellbeing is complex, fluid, and is likely to be multi-directional, and may involve multiple effects operating simultaneously. The government should ensure more research is undertaken, using different methodologies, to enable a deeper understanding of these dynamics.

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