

Joint response from the Royal Society for Public Health and the APPG on Social Media to the government consultation on Online Harms White Paper

This is a joint response based on the work of the Royal Society for Public Health (RSPH) and the APPG on Social Media who RSPH provide secretariat to. Our response specifically considers the impact of social media on the public's health and wellbeing, which has the potential for both positive and negative impacts. These can vary hugely from those experienced using screens in other ways, for example watching TV or playing games. By considering social media use separately from other online harms, we seek to avoid obscuring the important differential effects of each kind of screen use. Our response is not intended to be an exhaustive and comprehensive summary of all the issues and viewpoints related to the potential impacts of online harms caused by social media.

Although there is no agreed definition of social media, for the purposes of this response, we have taken social media to include "websites and applications that enable users to create and share content or to participate in social networking"¹.

Background to the work of RSPH and the APPG on Social Media in toward tackling online harms

Social media has revolutionised the way we connect with each other and today forms an integral part of the lives of what is now over 4 billion users globally². In early 2017, RSPH conducted a UK-wide survey of 1,479 14-24 year olds asking them about five of the most popular social media platforms: Facebook, Instagram, Snapchat, Twitter and YouTube. The aim of the survey was to find out how they felt each of these platforms impacted on their health and wellbeing (both positively and negatively), to make comparisons between these platforms, as well as asking them their views on a number of policy recommendations. Based on these findings, RSPH published the #StatusofMind report³, which considered the impact of social media on young people's mental health and wellbeing.

This report highlighted that social media has potential positive effects on mental health, including: providing access to other people's health experiences and expert health information, emotional support and community building, providing a space for self-expression and self-identity and making, maintaining and building upon relationships. However, with these positives came a range of potential negatives, with our report identifying that social media was responsible for creating feelings of anxiety and depression, negative body image, cyber bullying, poor sleep and a fear of missing out (FOMO).

Following these findings, and in light of growing public concern, it became a priority for RSPH to take measures to mitigate the negatives while maximising the positive impacts which social media can have on young people's mental health and wellbeing. A key step in this was the establishment of the All Party Parliamentary Group (APPG) on Social Media and Young People's Mental Health and Wellbeing. On 18th April 2018, the APPG launched its Inquiry "Managing the Impact of Social Media on Young People's Mental Health and Wellbeing". The Inquiry ran from 29th July 2018 until 9th January 2019 and was hosted in two stages, beginning with a call for written evidence open to the

¹ The Law Commission (2018). Abusive and Offensive Online Communications: A Scoping Report. [online] p.xi. Available at: <https://www.lawcom.gov.uk/abusive-and-offensive-online-communications> [Accessed 12 Mar. 2019].

² We Are Social (2019). World's Internet Users Pass the 4 Billion Mark. [online] Available at: <https://wearesocial.com/blog/2018/01/global-digitalreport-2018> [Accessed 12 Mar. 2019].

³ <https://www.rsph.org.uk/uploads/assets/uploaded/62be270a-a55f-4719-ad668c2ec7a74c2a.pdf>

public. The Inquiry received written evidence submissions from 37 expert stakeholders including academics, charities, government officials, social media industry representatives, parents and young people, between 29th of June and 17th August 2018. Additionally, a variety of reports in relation to social media and its potential impacts were submitted to the Group and helped inform the Inquiry as well as previous research conducted by RSPH into this topic, including the findings of the 2017 #StatusOfMind report. Following a review of written evidence, the APPG invited a variety of expert stakeholders to provide oral evidence throughout the course of five oral evidence sessions held in the House of Commons between 24th October 2018 and 9th January 2019. Following this inquiry, the APPG published its report, “#NewFilters to manage the impact of social media on young people’s mental health and wellbeing⁴” which explores the positive and negative health impacts of social media, as well as putting forward recommendations to protect young social media users from potential health harms.

Furthermore, in January 2019, RSPH published the report Moving the Needle⁵, which looks at the importance of vaccination through childhood, working-age adulthood, and later life, and explores the barriers to uptake at different stages of the life course. Although the UK has a world-leading vaccination programme and this should be celebrated, history and current events have shown that fear and misinformation about vaccines can cause significant damage to seemingly stable vaccination programmes. Social media was identified as propagating negative messages around vaccinations, especially for parents, with two in five (41%) saying they are often or sometimes exposed to negative messages about vaccines on social media. This increased to as many as one in two (50%) among parents with children under five years old. The report calls for efforts to limit health misinformation online and via social media should be increased, especially by social media platforms themselves.

Question 1: This government has committed to annual transparency reporting. Beyond the measures set out in this White Paper, should the government do more to build a culture of transparency, trust and accountability across industry and, if so, what?

We welcome the government’s commitment to annual transparency reporting including those measures set out in the White Paper to grant the regulator power to require annual transparency reports from the companies in scope. It is vital that transparency reporting by social media platforms is presented in a way which is accessible to everyone, and in particular, to children, young people and vulnerable groups so that all users are able to make informed decisions about which platforms they engage with.

We commend actions being taken by industry to help protect children and young people online. However, polling commissioned by RSPH in April 2018 on behalf of the APPG on Social Media found more than half of the public (52%) feel that not enough is being done by social media companies to address their potential impact on mental health and wellbeing, with a further 80% of respondents advocating that tighter regulation of social media companies was needed⁶.

Our inquiry into the impact of social media on young people’s mental health and wellbeing identified considerable evidence supporting the case that social media companies should have a duty of care to protect their users. We endorse the White Paper’s plans for an independent regulator to enforce

⁴ <https://www.rsph.org.uk/uploads/assets/uploaded/23180e2a-e6b8-4e8d-9e3da2a300525c98.pdf>

⁵ <https://www.rsph.org.uk/uploads/assets/uploaded/3b82db00-a7ef-494c-85451e78ce18a779.pdf>

⁶ The survey cited was carried out by Populus on behalf of RSPH, between 13 and 15 April 2018, using a representative UK-wide sample of 2,000 adults. 239 respondents were aged 18-24.

a new statutory duty of care upon companies to ensure they take more responsibility for the safety of their users and tackle harm caused by content or activity on their services.

A statutory duty of care would provide a robust, flexible legal framework within which the Government could require the implementation of a social media code of conduct for providers, which specifically includes measures to protect the mental health and wellbeing of users. We believe this would support the building of a culture of transparency, trust and accountability across industry – whilst ensuring innovation continues to thrive.

To support the development of this culture, and the government's commitment to annual transparency reporting, prior to the implementation of statutory legislation, as outlined in detail in our #NewFilters report, we propose the establishment of a Social Media Health Alliance to work under the direction of the regulator to advise on what harms are set out in this code of conduct. The Alliance would be independent of industry, and would be independently constituted with representatives who have a shared interest in reducing online harms caused by social media, across England, Scotland Northern Ireland and Wales.

RSPH and the APPG believe that a Social Media Health Alliance would be well placed to regularly review evidence of the impact of social media on young people's mental health and wellbeing. Based on a polluter pays principle, we propose the Social Media Health Alliance is funded by a compulsory 0.5% levy on the profits of social media companies.

The Alliance would seek to:

- Commission and review the growing evidence base on the impact of social media on health and wellbeing with a view to disseminating research and translating into further policy calls and changes to the Code of Conduct.
- To support the ambitions for a comprehensive digital education.
- Establish clearer guidance for the public.

It is proposed that the Alliance is developed using a model RSPH has already found to be successful which in tackling other public health priorities, by creating a broad coalition. Examples of other such alliances include the Alcohol Health Alliance, Obesity Health Alliance and the Smokefree Action Coalition.

Question 2: Should designated bodies be able to bring 'super complaints' to the regulator in specific and clearly evidenced circumstances?

Yes

Question 2a: If your answer to question 2 is 'yes', in what circumstances should this happen?

We are pleased to note that the White Paper recognises the importance of an independent review mechanism to ensure that users have confidence that their concerns are being treated fairly. As outlined, we recommend the establishment of a statutory duty of care, including the definition of key harms for an independent regulator to focus on.

We propose this is supported by a code of conduct for all relevant service providers, which would address the defined harm for the regulator to focus on. The code of conduct would set out an expectation for service providers to prevent reasonably foreseeable harms from occurring.

We propose that along with those harms outlined in the Internet Safety Strategy Green Paper, the following harms identified to our inquiry by Carnegie UK Trust⁷, are reflected in the code of conduct:

- Harmful threats, including a statement of an intention to cause pain, injury, damage or other hostile action such as intimidation.
- Psychological harassment, including threats of a sexual nature, threats to kill, racial or religious threats known as hate crime.
- Hostility or prejudice based on a person's race, religion, sexual orientation, disability, gender identity, or misogyny.
- Economic harm, including financial misconduct and intellectual property abuse.
- Emotional harm, including preventing emotional harm suffered by users such that it does not build up to the criminal threshold of a recognised psychiatric injury.
- Harm to young people such as bullying, aggression, hate, sexual harassment and communications, exposure to harmful or disturbing content, grooming and child abuse.

The code of conduct should also include protection against harms specifically to the mental health and wellbeing of young people using social media platforms including, but not limited to:

- Self-harm;
- Health harms resulting from the spread of misinformation;
- Disordered eating;
- Low-self-esteem;
- A lack of sleep;
- Over dependence on social media.

In addition to internal appeals processes identified in the White Paper, independent review or resolution mechanisms will be most appropriate in some circumstances in order to increase the accountability of companies and help rebuild users' trust. In instances of a clear breach of the code of conduct by service providers, designated bodies could play an effective role in protecting the public from online harms by bringing 'super complaints' to the regulator.

We endorse the suggestion made in the White Paper that a provision could be made in legislation for designated bodies representative of users interests to bring 'super complaints' to the regulator for consideration. This could be effective in specific and clearly evidenced circumstances, such as in instances of a breach of the code of conduct and could act as an important safeguard in the user redress process. A role of the proposed Social Media Health Alliance could be to act as a designated body to bring 'super complaints' to the regulator for consideration, specifically concerning social media harms.

Question 3: What, if any, other measures should the government consider for users who wish to raise concerns about specific pieces of harmful content or activity, and/or breaches of the duty of care?

It is important that the government educates the public on how they can raise concerns about specific pieces of harmful content or activity, breaches of the duty of care, and clarity on what harms the duty of care aims to protect users against.

The APPG on Social Media heard in its inquiry evidence that certain groups of young people may be more vulnerable to the negative effects of social media. As identified to the group, research led by

⁷ Carnegie UK Trust. (2019). Harm Reduction in Social Media. [online] Available at: <https://www.carnegieuktrust.org.uk/project/harm-reduction-in-social-media/> [Accessed 12 Mar. 2019].

Professor Yvonne Kelly of University College London found the magnitude of association between social media use and depressive symptoms was larger for girls than for boys: “14-year-old girls were heavier users of social media with two fifths of them using it for more than three hours per day compared with one fifth of boys. Only 4% of girls reported not using social media compared to 10% of boys”⁸. Moreover, when examining the underlying processes that might be linked with social media use and depression, it was found that 40% of girls compared to 25% of boys had experience of online harassment or cyberbullying.⁹

The inquiry heard that it would be of benefit for more research to be conducted into understanding the extent to which the impact of social media varies amongst different demographics and the extent to which this may be discriminatory. Specific consideration should be given by government to ensure that mechanisms in place for raising concerns are made accessible to all users.

Question 4: What role should Parliament play in scrutinising the work of the regulator, including the development of codes of practice?

It will be important to ensure that Parliament is well positioned to scrutinise the regulator’s work. We recommend that a duty is placed on the regulator to lay its annual report and audited accounts before Parliament. Furthermore, we agree with the White Paper that responsibility should lie with the regulator to provide Parliament with information about its work, as and when requested.

Furthermore, the APPG on Social Media aims to drive policy change that mitigates the negatives and maximises the positives of social media, to build upon the evidence base of the impact of social media; to raise the political profile of the issue; and, to drive policy change that mitigates the bad and maximises the good of social media. It is proposed that the APPG would also play a role in scrutinising the work of the regulator and the development of codes of practice.

Question 5: Are proposals for the online platforms and services in scope of the regulatory framework a suitable basis for an effective and proportionate approach?

RSPH and the APPG on Social Media endorse the White Paper’s plans for an independent regulator that will enforce a new statutory duty of care to make companies take more responsibility for the safety of their users and tackle harm caused by content or activity on their services.

While this new regulator will be independent, the White Paper points out that its development will have to draw upon the work already started by DCMS and the Home Office on defining industry standards. We stress, as the duty of care has considerations for harm to users, that the Department for Health and Social Care (DHSC) should also have a role in the development of the regulator. As identified in the Moving the Needle¹⁰ report published by RSPH in early 2019, vaccine misinformation on social media, for example, is a health issue and has the potential to negatively impact vaccine confidence and uptake, ultimately leading to increased harms to the population through outbreaks of disease.

⁸ Yvonne Kelly in University College London International Centre for Lifecourse Studies (2019). Depression links with social media twice as high among girls. [online] Available at: <https://www.ucl.ac.uk/iehc/research/epidemiology-public-health/research/international-centre-for-lifecourse-studies/icls-news-publication/Social-media-use-depression> [Accessed 12 Mar. 2019].

⁹ Kelly, Y., Zilanawala, A., Booker, C. and Sacker, A. (2018). Social Media Use and Adolescent Mental Health: Findings From the UK Millennium Cohort Study. *EClinicalMedicine*, 6, pp.59-68.

¹⁰ <https://www.rsph.org.uk/uploads/assets/uploaded/3b82db00-a7ef-494c-85451e78ce18a779.pdf>

We recommend that any research into where health knowledge, information and education has an impact on health should be commissioned by DHSC, in order to ensure the new regulator and any associated organisations are robust in anticipating all potential harms to users.

Question 6 In developing a definition for private communications, what criteria should be considered?

The inclusion of messaging in the White Paper is welcome, considering the vast size of some private messaging groups. We agree with the point made by Carnegie UK Trust in their summary response to this consultation that, “it is important to remember however that one-to-one communications have traditionally formed part of constitutional and international law-based privacy guarantees and any state intrusion into that space must be limited, clearly justified and subject to safeguards”¹¹.

Question 7: Which channels or forums that can be considered private should be in scope of the regulatory framework?

Whilst we recognise online harms extend beyond those harms caused by social media, our response specifically focuses on these. Although there is no agreed definition of social media, for the purposes of this response, we have taken social media to include “websites and applications that enable users to create and share content or to participate in social networking”¹². We recommend that all forums meeting this criterion are in scope of the regulatory framework.

Question 7a: What specific requirements might be appropriate to apply to private channels and forums in order to tackle online harms?

n/a

Question 8: What further steps could be taken to ensure the regulator will act in a targeted and proportionate manner?

n/a

Question 9: What, if any, advice or support could the regulator provide to businesses, particularly start-ups and SMEs, comply with the regulatory framework?

A statutory duty of care would provide a robust, flexible regulatory framework within which the Government could require the implementation of a code of conduct for providers. Providing all businesses, regardless of size, with a clear framework and accessible guidance on how to uphold the duty of care, would support providers to comply with the regulatory framework. It will be important that all new start-ups are compliant with the regulatory framework from the outset.

Adolescence and early adulthood is a critical and potentially vulnerable time for social and emotional development. This is coupled with the fact that 91% of 16-24 year olds use the internet for social media¹³. We recommend that the regulatory framework should apply to any social media site with

¹¹ <https://www.carnegieuktrust.org.uk/blog/online-harms-response-cukt/>

¹² The Law Commission (2018). Abusive and Offensive Online Communications: A Scoping Report. [online] p.xi. Available at: <https://www.lawcom.gov.uk/abusive-and-offensive-online-communications> [Accessed 12 Mar. 2019].

¹³ Office for National Statistics (2016). Internet access – households and individuals, Great Britain: 2016. [online] Available at: <https://www.ons.gov.uk/peoplepopulationandcommunity/householdcharacteristics/homeinternetandsocialmediausage/bulletins/internetaccesshouseholdsandindividuals/2016> [Accessed 12 Mar. 2019].

registered UK users aged 24 years and under, regardless of size or the number of users of the platform. This is to ensure that all social media platforms take an appropriate level of care, regardless of the size or newness of a platform.

Question 10: Should an online harms regulator be: (i) a new public body, or (ii) an existing public body?

(ii)

Question 10a: If your answer to question 10 is (ii), which body or bodies should it be?

On the basis of evidence reviewed throughout the APPG on Social Media's inquiry into the impact of social media on young people's mental health and wellbeing, we recommend that the Government resources Ofcom to assume responsibility for regulatory duties.

As summarised by Maeve Walsh, Carnegie UK Trust Associate, who provided evidence to our inquiry, "The regulator would set out a harm reduction cycle involving civil society as well as companies at each consultative step. Companies would be required to measure and survey harm, produce plans to address these harms for public consultation and agreement with the regulator, then implement the plans. If the cycle does not reduce harms or the companies do not cooperate then sanctions could be deployed¹⁴"

The APPG recommends that a code of conduct, regulated by Ofcom, should take effect by 31 October 2019.

To support the role of the regulator, we propose the establishment of a Social Media Health Alliance, funded by a 0.5% levy on the profits of social media companies.

We recommend that a Social Media Health Alliance (see Q1) is established as a supporting body, to work under the direction of Ofcom to advise on the development of regulation.

Question 11: A new or existing regulator is intended to be cost neutral: on what basis should any funding contributions from industry be determined?

As identified, we propose the establishment of a Social Media Health Alliance to work under the direction of the regulator to advise on what harms are set out in this code of conduct. It is proposed this Alliance would be independent of industry, and independently constituted with representatives who have a shared interest in reducing the damage caused to young people's mental health and wellbeing from social media, across England, Scotland Northern Ireland and Wales.

RSPH and the APPG on Social Media believe that a Social Media Health Alliance would be well placed to support the work of the regulator by regularly reviewing evidence of the impact of social media on young people's mental health and wellbeing. Based on a polluter pays principle, we propose the Social Media Health Alliance is funded by a compulsory 0.5% levy on the profits of social media companies.

Question 12: Should the regulator be empowered to i) disrupt business activities, or ii) undertake ISP blocking, or iii) implement a regime for senior management liability? What, if any, further powers should be available to the regulator?

¹⁴ <https://digileaders.com/introducing-a-duty-of-care-for-social-media/>

In instances where the identified duty of care to users is breached, the regulator should be empowered to undertake necessary measures to protect the public from online harms. These may include disrupting business activities, undertaking ISP blocking, or implementing a regime for senior management liability.

Question 13: Should the regulator have the power to require a company based outside the UK and EEA to appoint a nominated representative in the UK or EEA in certain circumstances?

Yes.

Question 14: In addition to judicial review should there be a statutory mechanism for companies to appeal against a decision of the regulator, as exists in relation to Ofcom under sections 192-196 of the Communications Act 2003?

n/a

Question 14a: If your answer to question 14 is 'yes', in what circumstances should companies be able to use this statutory mechanism?

n/a

Question 14b: If your answer to question 14 is 'yes', should the appeal be decided on the basis of the principles that would be applied on an application for judicial review or on the merits of the case?

n/a

Question 15: What are the greatest opportunities and barriers for (i) innovation and (ii) adoption of safety technologies by UK organisations, and what role should government play in addressing these?

n/a

Question 16: What, if any, are the most significant areas in which organisations need practical guidance to build products that are safe by design?

Specialist knowledge in the realm of health is a significant area in which organisations need practical guidance. As identified in the report #StatusofMind, published by RSPH in 2017¹⁵, the sheer volume of health information that is now available on social media means that it is difficult to know which sources they can trust and get reliable and consistent information from. This is especially the case with the emergence of so-called 'fake news', meaning trust is declining in information on social media platforms.

The proposed regulator could build on the work of [NHS England's Information Standard](#), which is a certification scheme that lets the public know an organisation that is giving out information on health and social care is trustworthy. If an organisation is certified by the Information Standard, it

¹⁵ <https://www.rsph.org.uk/uploads/assets/uploaded/62be270a-a55f-4719-ad668c2ec7a74c2a.pdf>

will be ensured that they are adherent to best practices for producing high quality information related to health and hence are safe by design.

The new regulator could work with online and tech companies to ensure that they can automatically indicate whether sources of health-related information are certified by the Information Standard whenever they appear on their platforms. The Information Standard should be presented in a way which is accessible to all users, indicating whether a source should be trusted.

Question 17: Should the government be doing more to help people manage their own and their children's online safety and, if so, what?

The APPG on Social Media's inquiry heard evidence of an increase in experiences of mental ill health amongst young people using social media sites for three or more hours a day. Amongst other things, the more a young person engages with social media, there is an increased likelihood of social media negatively impacting a young person's sleep, self-esteem, of exposure to cyber-bullying, and an increased likelihood of social media negatively impacting a young person's sleep and self-esteem, and of exposure to cyber-bullying and inappropriate images or videos.

The APPG recommends the government prioritise further research is prioritised into understanding whether the relationship between social media and mental health problems is one of cause or correlation. However, in the absence of current further robust longitudinal research and data, taking a precautionary approach, we recommend the Government publishes evidence based guidance for those aged 24 and younger to avoid excessive social media use, that is use of "websites and applications that enable users to create and share content or to participate in social networking". Further research is also recommended to determine what constitutes "excessive use" and the extent to which this varies amongst different demographic groups.

We believe that a comprehensive digital education, which specifically addresses how to safely use social media, alongside the development of other key life skills, will empower young people to manage their social media use in the long term. Furthermore, while screen-use generally has the potential for different kinds of positive and negative impacts these can be very different in comparison to those specifically experienced by young people using social media. Therefore, we recommend that the government take steps to ensure Personal, Social, Health and Economic (PSHE) education is made mandatory for primary and secondary school children in the next parliamentary session and that the PSHE curriculum adequately delivers understanding of the harms and benefits specifically of social media to support digital resilience.

Furthermore, it is recommended that guidance is issued by the government, with a supporting campaign, to support young people, parents and those working with young people, to help mitigate some of the negative effects which social media can have on mental health and wellbeing, whilst promoting the positives. Our #NewFilters report suggests that this could be developed as a charter, by a newly constituted Social Media Health Alliance (as proposed in Q1).

Question 18: What, if any, role should the regulator have in relation to education and awareness activity?

With support of the regulator and associated bodies, the APPG on Social Media and RSPH recommend that the UK Government prioritises investment into further research to understand the impact of social media on the public's health, and does so as a matter of urgency. To support this, all companies within scope should make all data, including data that is currently anonymised, available to researchers. We recommended that legislation is updated to ensure that this data is available.

The regulator should work to ensure platforms integrate the Information Standard in their detection and presentation of sources.

The regulator should also act as a bridge between health-related public education campaigns run by the DHSC and approved organisations. For example, online companies should be made aware by the regulator of health campaigns such as Public Health England's #ValueOfVaccines and Vaccine Heroes. Information circulated by these campaigns should have highest priority on online platforms in the topic/keyword/search area, meaning users would be more likely to see posts regarding vaccination from credible sources such as Public Health England or NHS England, rather than from other sources.