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Social Media: Children/tamariki and Young people/rangatahi

Position statement

October 2025

About the Royal Australasian College of Physicians (RACP)

The RACP trains, educates and advocates on behalf of physicians and trainee physicians, across Australia and Aotearoa New Zealand. The RACP represents a broad range of medical specialties including paediatrics and child health, adolescent and young adult medicine, public health medicine and general medicine. Beyond the drive for medical excellence, the RACP is committed to developing health and social policies which bring vital improvements to the wellbeing of patients, the health system and the community.

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Executive Summary

The Royal Australasian College of Physicians (RACP) welcomes the commitment by governments in Australia and Aotearoa New Zealand to protect the health and wellbeing of children/tamariki and young people/rangatahi in their use of social media.

The RACP calls for the Australian and Aotearoa New Zealand Governments to ensure that social media platforms are accountable for both creating safer online environments for children/tamariki and young people/rangatahi and enabling safer online environments into adulthood

The RACP advocates for a public health/whole of population approach to regulating children/tamariki and young people/rangatahi's access to social media. A public health approach supports the implementation of sensible and appropriate interventions that prioritise the health and wellbeing of children/tamariki and young people/rangatahi. It also balances this with the importance of young people/rangatahi not being deprived of the benefits that social media can provide, including communication with loved ones, a sense of belonging, and educational opportunities.

RACP physicians and trainees, particularly paediatricians and paediatric trainees, and adolescent and young adult medicine physicians and trainees, have considerable expertise and experience in caring for children/tamariki and young people/rangatahi, who recognise both the positive and negative impacts of social media use. These physicians and trainees are well- placed to identify and advise on appropriate responses to the challenges that social media presents for the health and wellbeing of children/tamariki and young people/rangatahi.

Young people/rangatahi should be engaged and consulted on any proposed bans on or restrictions of their social media use in recognition of their agency and right to participate in the decisions that impact them.[1]

Recommendations

The RACP calls for the **Australian and Aotearoa New Zealand Governments** to:

1. Adopt a **public health/whole of population approach** to the regulation of access and use of social media by children/tamariki and young people/rangatahi.

2. Implement **effective legislation that requires social media platforms** to:
   a. **enforce appropriate age restrictions** on access to social media for children/tamariki under the age of 16 years,
   b. **be accountable** for maintaining safer online environments for children/tamariki and young people/rangatahi, with monitoring and reporting requirements,
   c. **adhere to appropriate age-related advertising,** such as no commercial marketing of unhealthy food/beverages, tobacco and vaping, alcohol, gambling and so on,
   d. **introduce regulation of appropriate age-related algorithms** for children/tamariki and young people/rangatahi.

3. Ensure there is **national consistency** in relation to the access and use of social media by children/tamariki and young people/rangatahi.

4. Preserve and support:
   a. mechanisms to ensure that young people/rangatahi can **maintain their support networks and access to reliable sources of information,**
   b. the development of **appropriate, alternative spaces** to provide access to educational and creative resources, connect vulnerable youth and provide avenues for help-seeking.

5. Engage, consult and listen to the:
   a. **voices of children/tamariki and young people/rangatahi** in relation to the proposed ban.
   b. **education sector** to consider how access to social media can be supported for appropriate educational/in-school purposes.

6. Invest in measures to **improve social media literacy** among children/tamariki and young people/rangatahi, and their families, to equip children/tamariki with the skills to safely navigate online environments.

7. Provide **education and support** to empower children/tamariki, young people/rangatahi and their families to make social media use as safe and healthy as possible.

The RACP also calls for **social media platforms** to:

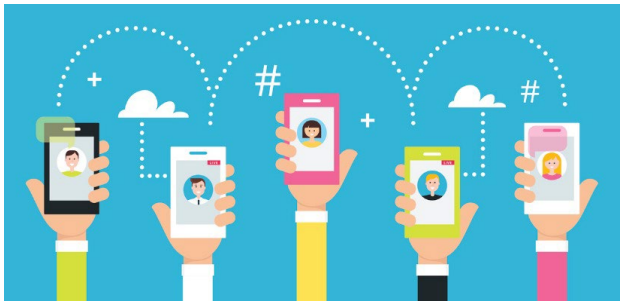
8. Implement **appropriate and effective restrictions** to ensure reasonable limitations on children/tamariki and young people/rangatahi's use of social media, such as age verification, time limits, exposure to advertising and time-of-day based access limitations.

9. Implement **safety mechanisms** to create a safer online environment that minimises the harm of social media and its impact on children/tamariki and young people/rangatahi, for example, restricting certain features or reforming algorithms to be age appropriate for young people/rangatahi.

Access and use of social media

Social media has evolved from what was originally a tool to connect people with common interests to a platform for creating and sharing user-generated content.[2] Social media is now a digital technology that enables information to be shared through virtual networks and communities and is commonly used for communication, entertainment, information sharing, advertising, collaboration, and networking. Social media and associated technological advancements will continue to evolve and policies must regularly adapt to keep pace to ensure the safety of children/tamariki and young people/rangatahi.

There has been a significant increase in social media use among children/tamariki and young people/rangatahi, and often at a young age.[3] Increased access and use was likely accelerated as a result of the worldwide COVID-19 pandemic, which necessitated greater reliance on digital platforms for social interactions and educational needs,[4] and resulted in a 17% increase in screen use for children/tamariki and young people/rangatahi aged between 8 and 18 years from 2020 to 2022 (a greater increase than in the four years prior).[3]



Australian young people aged between 12 and 17 years spend an average of 14.4 hours per week online.[5] These young people/rangatahi commonly engage in a range of activities while online, including researching topics of interest, watching videos (including movies and TV), chatting with friends, listening to music and playing online games.[5] The Office of the eSafety Commissioner states that 87% of children/tamariki aged between 4 and 7 years use the internet, with 16% having accessed the internet without adult/parent permission, and 40% of children/tamariki in this age group having access to a personal device.[6]

Many popular social media applications have self-imposed minimum age limits for users to sign up to their platforms. For example, the minimum age limit to sign up for Meta applications (Facebook and Instagram) and TikTok is 13 years of age. However, circumventing these age limits has often been easy, with young users able to navigate around this requirement. With 34% of children/tamariki aged between 8 and 13 years reported to use social media,[7] **leaving age limit enforcement in the hands of social media applications has not proven effective.**

The recent introduction of Teen Accounts on Instagram[8] is a welcome reimagining of social media applications to be more age-appropriate for young people/rangatahi, particularly the sensitive content control feature to limit young people/rangatahi's exposure to harmful content. This is a positive first step that needs to be supported with additional protections for young people/rangatahi.

Consideration for all social media, or similar platforms must be included, such as Facebook, TikTok, Instagram, WhatsApp, Snapchat, YouTube, YouTube Kids, Twitch, WeChat, Telegram, X, Pinterest, Discord and online gaming platforms, like Roblox and so on.

Benefits of social media use

Social media can offer positive experiences for children/tamariki and young people/rangatahi. As both the Australian[9] and Aotearoa New Zealand[10] Governments have committed to banning young people/rangatahi under 16 years of age from accessing social media, **it is important that the ban does not impede access to educational and creative resources, isolate vulnerable youth, or remove avenues for help-seeking by young people/rangatahi.** For more isolated or vulnerable children/tamariki and young people/rangatahi, social media can provide a sense of community, help to connect with others (including those like them), and reduce feelings of loneliness and poor mental health[11].

Social media can be an important tool for young people/rangatahi to seek information, share knowledge, and learn collaboratively with their peers, which has the potential to improve educational engagement and learning outcomes.[12] Social media can also be a creativity outlet, allowing access to new skills, experiences, and learnings from around the world, as well as sharing from individuals to online spaces. Access to educational content can support a child's knowledge and understanding of the world, including by developing their critical thinking and analytical skills.[13] Social media can also be a key mechanism to access diverse perspectives[14] and to counter misinformation that young people/rangatahi have encountered. This is one way in which social media also becomes a key tool for identity formation.[15]

In a survey of young people/rangatahi aged between 16 and 17 years, nearly half (44.8%) interacted with friends online as much or more than they did face-to-face.[16] **Social media can be a positive medium to foster connection and a sense of belonging in children/tamariki and young people/rangatahi, and to communicate with friends and family**.[17] This can be particularly important for children/tamariki and young people/rangatahi who live apart from family or friends, including those who live in regional, rural and remote areas, those who are expatriates, those from culturally and linguistically diverse backgrounds, those who are neurodivergent, and those who identify as LGBTIQ+.

Social media is also important for children/tamariki and young people/rangatahi who struggle to find a sense of belonging at their school or within their immediate friend/social circle, as they may instead find a sense of community with others online who share their identity, abilities and/or interests.[18] This has been shown to have a cushioning effect against stress for young people/rangatahi marginalised by society, including those from various racial, ethnic, sexual and gender groups who benefit from seeing representation and seeking community.[19]

Social media can also be a source of help and support. Young people/rangatahi who are struggling with mental health challenges frequently rely on online resources to make sense of

their experiences, while those with severe suicidal ideation are more likely to seek help online than in-person.[20]

Removing young people/rangatahi's access to social media can involve negative impacts and remove a vital tool for connection and belonging.[21] It can also impede young people/rangatahi's pathways for help-seeking if they are struggling with mental health challenges or suicidal ideation. A survey of young people/rangatahi in Aotearoa New Zealand showed the benefits of online access to mental health support to be ease of access, anonymity and a non-threatening starting point.[22]

Harms of social media use

Studies on social media usage show **compelling indications that unrestrained social media use by children/tamariki and young people/rangatahi has negative correlations with reduced cognitive, emotional, and social wellbeing**.[23] [24] [25]

The mental health of Australian young people/rangatahi began falling sharply after the launch of popular social media platforms in recent years, suggesting a potential link between social media and mental health,[26] although more research is needed to establish a causal link. It is clear, however, that higher use of social media is associated with a higher risk of poor mental health, with adolescents who spend greater than 3-hours a day on social media facing double the risk of poorer mental health outcomes.[27] Social media platforms can facilitate adverse experiences, such as cyberbullying[4] and gender-based violence,[28] which can seriously negatively impact the mental health of children/tamariki and young people/rangatahi and contribute to mental health disorders or suicidality.[29]

Concerns have been raised about how social media use and access to harmful content can impact children/tamariki's development, with the potential to impact language acquisition,[30] cognitive development, and socio-emotional health. Excessive social media use and media multitasking has also been linked to attention deficits and impaired cognitive control, which has the potential to negatively impact academic performance.[31] Chronic media multitasking behaviour has been linked to cognitive operation deficits including deficits to working and long-term memory, impulse response, and inhibitory control.[32] Media multitasking during learning has been negatively related to academic outcomes, academic attitudes and behaviours, and perceived learning.[32]

Over-exposure to digital environments can trigger negative and potentially long-term metabolic changes, as well as deregulating serotonin and dopamine neurotransmitter pathways in a child's brain in a way that is similar to cases of severe substance abuse.[33] Heavier use of social media in young people/rangatahi has been associated with poor sleep patterns, including late sleep onset and late wake times on school days, difficulty falling back asleep after waking during the night, and tiredness during the day. [34] Increased engagement with social media platforms can also encourage a sedentary lifestyle and limit opportunities for healthy physical activity and exercise, which can contribute to children/tamariki becoming overweight and/or obese.[35]

Misinformation on social media also presents a very significant risk to young people/rangatahi – particularly because of algorithms curating content to optimise user engagement, often curating sensational content that aligns with users' existing beliefs and biases.[36]

Harmful content on social media

Social media platforms can expose children/tamariki and young people/rangatahi to inappropriate and illegal content, including pornographic material, gambling and alcohol advertising, vaping and cigarette promotion, unhealthy food and beverage marketing, dangerous viral challenges that have resulted in the deaths of children/tamariki and young people/rangatahi around the world, and more.[37]

Exposure to commercial sexual exploitation via social media platforms also poses both a considerable public health issue and a social problem.[38] It affects the health and wellbeing of children/tamariki and young people/rangatahi, through such issues as anxiety, depression and post-traumatic stress disorder, plus other physical and mental health problems.[39] [40] [41]

If children/tamariki and young people/rangatahi engage with such content mentioned here, social media algorithms target the user with further similar content.[42] This is a particularly serious risk for young people/rangatahi who have eating disorders, who can be easily exposed to weight-loss content, and those who are sexually and/or gender diverse.[4]

Exposure to aggressive, violent, misogynistic and racist content can normalise unhealthy behaviours and beliefs.[43] Frequent social media use and social media addiction can increase irritability and aggression,[44] with online social comparisons fueling feelings of envy and frustration. This can lead to behavioural changes online, where anonymity can lead to reduced accountability and encourage hostility and cyberbullying,[4] as well as behavioural changes in the offline world.

Access to online marketing on social media platforms can also contribute to unhealthy food and beverage choices, with Australian young people/rangatahi exposed to almost 100 junk food and sugary drink advertisements each week from online sources.[45] The RACP launched the Switch off the Junk campaign in 2023 calling on the Australian Government to support a national regulatory system administered at arms-length from the marketing industry that applies to online junk food advertising for children/tamariki and young people/rangatahi.

Children/tamariki and young people/rangatahi with developmental delay are also more vulnerable to additional risk from the harm of social media.[46] This is due to challenges with social communication (meaning they can misunderstand social cues and expectations) and impulse control (meaning they more readily share personal information that puts them at risk, including images). This cohort of children/tamariki and young people/rangatahi requires consideration and appropriate education.

The way forward

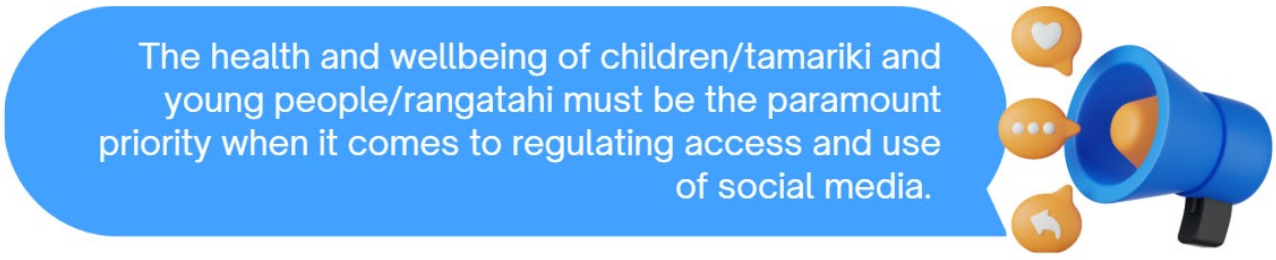
The health and wellbeing of children/tamariki and young people/rangatahi must be the paramount priority when it comes to regulating access and use of social media. In partnership with parents/whānau/carers and teachers, healthcare professionals play an important role as advocates for children/tamariki and young people/rangatahi.

Legislation and regulation must place **responsibility on social media companies for the content on their platforms, the algorithms used by their platforms, and for minimising the harm created by their platforms**. Social media companies are the entities with control over their platforms and the ability to shape a safer online environment for children/tamariki and young people/rangatahi.

Obligations to maintain the online safety of children/tamariki and young people/rangatahi cannot be placed solely on parents. To this end, it is important to adopt a public health approach to children/tamariki and young people/rangatahi's access and use of social media. **A ban on access must be supplemented by additional measures to strengthen the safety of young people/rangatahi online.**

A public health approach involves the Australian and Aotearoa New Zealand Governments taking **reasonable and appropriate interventions to ensure that young people/rangatahi and children/tamariki are protected from the harms of social media**. These interventions should be nationally consistent across all jurisdictions. They should include legal measures to ensure that social media platforms enforce reasonable restrictions and limitations on children/tamariki and young people/rangatahi's use of their platforms, including by enforcing new age restrictions for users under the age of 16 years. It should also include mechanisms for social media platforms to ensure that their online environments are safe for children/tamariki and young people/rangatahi.

Social media companies must reduce opportunities for abuse, including the malicious sharing of intimate images, online abuse and harassment, and technology-facilitated coercive control, as well as moderating the content that is accessible on their platform, including combating dangerous misinformation and harmful content. This requires careful consideration of the types of social media access that can be helpful or harmful to children/tamariki and young people/rangatahi at different ages.



Social media platforms should ensure users can be linked to relevant supports if their interactions on the platform indicate they are at risk. **Social media companies should also commit to accurate fact-checking tools to challenge false information on their platforms** and ensure that social media can foster critical thinking skills and digital literacy in young people/rangatahi, rather than leading them to misinformation.

There is strong support among Australians for licenses, content removal, holding social media companies to codes of conduct like broadcasters, and to tax profits made by platforms harvesting personal data.[47]

Measures to regulate social media platforms should be **accompanied by initiatives to combat some of the problems exacerbated by social media, such as cyberbullying**, to protect children/tamariki and youth from mental health harm and suicidality. Initiatives to combat cyberbullying, including support lines, cyber safety tools, parent and youth support programs, and mental health first aid training are commendable and should be supported by the Australian and Aotearoa New Zealand Governments.

The pathway forward in **banning social media access for those under 16 years must be bolstered by mechanisms to ensure that young people/rangatahi can maintain their support networks and access to reliable sources of information.** Young people/rangatahi would also need to still need to see themselves represented and connected through other platforms, such as movies, television, and other media - especially those who are gender-diverse, Indigenous, or from culturally and racially marginalised communities.

It is crucial for the Australian and Aotearoa New Zealand Governments to **support educational opportunities for children/tamariki and young people/rangatahi to develop greater media literacy and health literacy skills**. This will promote safer engagement with social media by allowing children/tamariki and young people/rangatahi to navigate online environments in a way that maximise the benefits of social media and minimise the negative experiences once they are able to access the platforms at the age of 16 years, or beforehand if young people/rangatahi manage to circumvent the ban.

Prevention by education is an important tool to counteract the harms of social media and the harmful content available on social media platforms. In implementing the ban on social media access, the Australian and Aotearoa New Zealand Governments should mirror the Australian Institute of Family Studies' public health approach to preventing child maltreatment.[48] Governments must ensure that children/tamariki, young people/rangatahi, parents, grandparents, whānau and carers are educated about the importance of prevention, the identification of risk factors, possible interventions, and ways to access support for young people/rangatahi online.

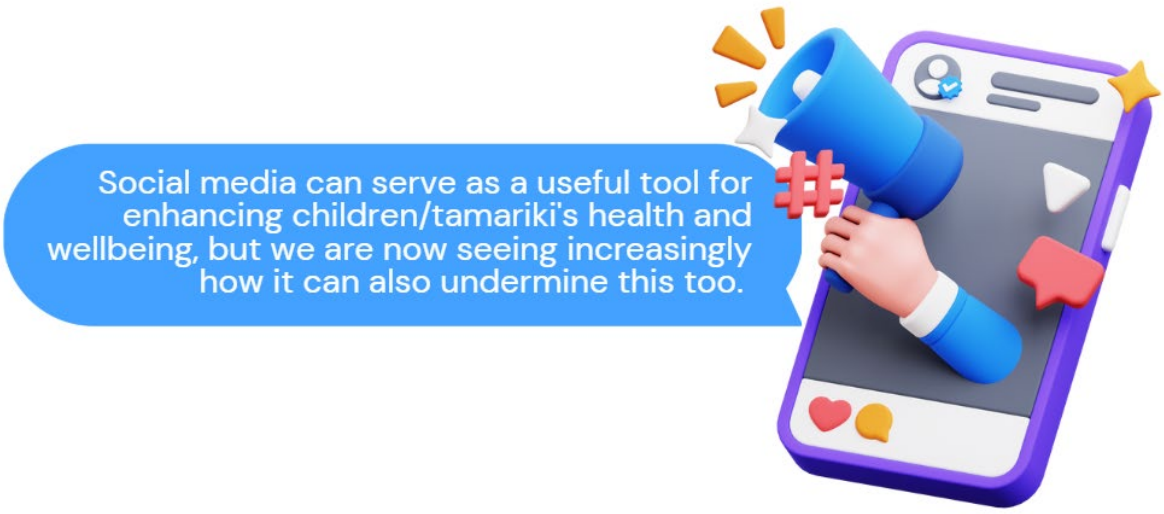
Increasing the digital literacy and health literacy of young people/rangatahi and their support networks is a crucial step in preventing harm, allowing safe conversations between carers and young people/rangatahi and for adults to model healthy social media behaviours and limits. This can reduce the chances of young people/rangatahi circumventing the ban by

accessing social media through their parents/whānau/carers' accounts. **It is also crucial to equip young people/rangatahi with the skills to navigate online environments prior to them being granted access at 16 years of age, so that the harm of social media can be prevented rather than merely delayed.**

Online safety education should be delivered in a way that engages children/tamariki and young people/rangatahi, and should learn from the eSafety Commissioner's report on the consultations undertaken with young people/rangatahi for the eSafety Commissioner's Engagement Strategy.[49] In supporting children/tamariki and young people/rangatahi to access the benefits of social media and avoid the detrimental impacts, the RACP believes it is **important to consult with and listen to the voices of children/tamariki and young people/rangatahi about decisions that impact them**.

The Australian and Aotearoa New Zealand Governments must also **support research into the impacts of social media** on the development, health and wellbeing of children/tamariki and young people/rangatahi, and into the interventions that could effectively protect children/tamariki and young people/rangatahi online. Regulators should collaborate to define new monitoring and evaluation frameworks that more clearly identify platform usage relative to commercial gain and impacts to health.[50]

The RACP calls upon parents, educators, healthcare professionals and policymakers to work together to promote positive age and developmentally appropriate online experiences while mitigating the risks for children/tamariki and young people/rangatahi's wellbeing**. Social media can serve as a useful tool for enhancing children/tamariki's health and wellbeing, but we are now seeing increasingly how it can also undermine this too.** We must enable stronger protection for our children/tamariki and young people/rangatahi to better support their health and wellbeing.



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