THE IMPACT OF SOCIAL MEDIA ON YOUNG PEOPLE'S HEALTH AND WELLBEING: EVIDENCE, GUIDELINES AND ACTIONS

PROJECT OVERVIEW

Underpinning research supported by the Wellcome Trust. Research undertaken in the School of Sport, Exercise and Rehabilitation Sciences, University of Birmingham, UK

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EXECUTIVE SUMMARY

This report provides new empirical evidence on the ways in which young people engage with health-related content on social media, and how this impacts on their health-related understandings and behaviours.

Focussing on the key content areas of physical activity, diet/nutrition and body image, researchers from the University of Birmingham worked with young people to better understand the issues from their perspectives. The data highlight positive impacts of social media use as well as the risks and potential harm to young people's physical and mental health. The data have also informed the development of guidelines and actions to support parents, practitioners in education and health, policy-makers and researchers.

KEY FINDINGS

- Nearly half of young people in the sample (46%) reported changing their health-related behaviours as a direct result of accessing content from social media
- A sizeable minority of young people (43%) report that health-related content on social media positively impacts their health
- There are many different types of content that young people access, create and share on social media that influence their health-related understandings and behaviours; for example: peer content (e.g. selfies); suggested or recommended content (e.g. on YouTube); automatically sourced content (e.g. commercial content promoted on Instagram through the Search and Explore function); and content from reputable accounts (e.g. celebrities, government, official organisations)
- Likes and Followers are used by young people to inform their judgements about whether information is credible and which types of health-related content they should act upon

KEY GUIDELINES/ACTIONS

- Social media is a powerful educational resource that should be harnessed in schools and in the home to support young people's education about health
- Adults who have a responsibility for young people's health and wellbeing – such as teachers and parents/guardians – must be supported to become sufficiently digitally literate so they, in turn, are able to support young people to use social media safely and in ways that generate positive health education outcomes
- In designing health interventions for young people, it is essential to recognise the variety of relevant social media content including peer content, suggested/recommended content, automatically sourced content, content from reputable accounts and/or the role of likes and followers
- Technology and app designers and social media sites have a responsibility to act ethically in order to limit the range of inappropriate health-related material that reach young people

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INTRODUCTION

This report provides a summary of the latest evidence-based thinking on the role of social media in influencing young people's health and wellbeing. The report has been developed in the context of growing national and international concerns about young people's health and wellbeing and reported increases in unhealthy lifestyle behaviours, obesity, mental health problems and access to risky online environments.[1,2,3,4]

Evidence suggests that young people are increasingly turning to social media and digital technologies for health-related information,[5,6,7,8] and there is confusion and uncertainty about how this behaviour impacts upon young people's health and wellbeing, [9,10,11] and whether/how interventions by adults can be optimally effective.[12,13,14,17] We have a poor understanding of how to 'position' young people in the social media-health nexus, and there is a tendency to focus mainly on risk and negative outcomes of use. [13,14,15,17]

No robust guidance on young people's health-related uses of social media is available for researchers, practitioners or clinicians.[10,11,17,18] There is also little mention of health and social media in school/ childcare guidelines in current European, UK and US policy. There is, therefore, a clear gap in research and policy in our understanding of the relationship between young people, social media and health, and the impacts.

Adults are currently ill-equipped to support young people in their engagement with social media. The support that informed adults could provide is twofold: to help young people deal with the risks attached to the vast amounts of widely available unsolicited and unregulated health-related digital material[14,17]; and to optimize the potential for social media to be a powerful and positive educational tool to inform young people's health-related understanding and behaviors.[13,14,18]

This report presents new evidence on the relationship between young people, social media and health, as well as providing clear guidance and actions for education and health research, policy and practice.

METHODS

The project aimed to generate new evidence on the types of health-related content young people access from social media, and identify the types of content that impact their health-related understandings and behaviours. In particular, the project aimed to understand health impacts from the use of health-related social media from young people's perspectives.

The project involved 1346 young people (age 13-18) in the UK.

A participatory and mixed methods design was adopted, involving class activities, focus group interviews, and workshops with young people. An international multi-disciplinary and multi-sector advisory board was established to provide a robust analysis of the data, and to collaborate to produce this report (see Appendix). The board involved 35 stakeholders who have a responsibility for young people's health. These methods resulted in 3 project outputs:

- **6 digital and animated case study videos** on the diverse ways in which young people experience health-related social media, and the varied types of impacts on their understandings and behaviours

  Videos can be accessed here - https://goo.gl/1AvXFw

- **An open access edited book** that involves 6 evidence-based case studies on the diverse ways in which young people experience health-related social media, and the varied types of impacts on their understandings and behaviors. The book includes an analysis from multi-disciplinary authors, and presents guidelines for research, policy and practice. The book is titled: Young People, Social Media, Physical Activity and Health, Edited by Dr Victoria Goodyear and Professor Kathleen Armour

- **An academic paper** on the types of health-related content young people do or do not engage with. Goodyear, V.A., Armour, K.M., & Wood, H. (2018). Young People and their Engagement with Health-related Social Media: New Perspectives. Sport, Education and Society, DOI:10.108013573322.2017.1423464

  Paper can be accessed here: https://goo.gl/tCkgta

KEY FINDINGS

1 Social media offers exceptional opportunities to inform young people's learning about health, and to have a range of impacts on their health and wellbeing behaviours

2 A significant amount of unsolicited and unregulated health information on social media reaches young people and impacts negatively on their health and wellbeing

3 Social media sites are responsible for the fact that vast amounts of inappropriate content reaches young people

4 Young people choose to engage with and act on information based on the number of likes a post receives and/or who has posted to social media and/or whether a site is 'official'

5 Content created and shared by peers, and the actions of young people liking or not liking posts, have a powerful influence over health-related understandings and behaviours

6 Schools/teachers, parents/guardians and the media fail to understand and/or adequately address the social media-generated pressures that are experienced by young people

HEALTH-RELATED LEARNING

EVIDENCE, GUIDELINES AND ACTIONS

Social media offers exceptional opportunities to inform young people's learning about health, and to have a range of impacts on their health and wellbeing behaviours

KEY FINDINGS

TETHERED

- Young people are tethered to social media; most check and/or post to SnapChat, Instagram and YouTube before, during and after school

ACCESS TO HEALTH INFORMATION

- 53% use social media to access health information on food intake, sleep, exercise or body image from SnapChat, Instagram and YouTube

GOOD SOURCE OF INFORMATION

- 63% believe that social media is a good source of health information

CHANGED HEALTH-RELATED BEHAVIOURS

- 46% have changed their health-related behaviours because of something seen on social media

UNREGULATED INFORMATION

EVIDENCE, GUIDELINES AND ACTIONS

A significant amount of unsolicited and unregulated health information on social media reach young people and impacts negatively on their health and wellbeing

KEY FINDINGS

INAPPROPRIATE CONTENT

- Nearly all young people report seeing inappropriate content related to diet/nutrition, exercise and body image; e.g. Water diets, FitTea, adult weight loss and/or bodybuilder transformations

DEVELOPMENT OF NEGATIVE BEHAVIOURS

- Some young people report that they have developed obsessive/addictive monitoring behaviours, engaged with extreme diets and/or exercises, and experienced heightened levels of body dissatisfaction as a result of accessing material from social media and healthy lifestyle technologies

SOCIAL MEDIA SITES

EVIDENCE, GUIDELINES AND ACTIONS

Social media sites are responsible for the fact that vast amounts of inappropriate content reach young people
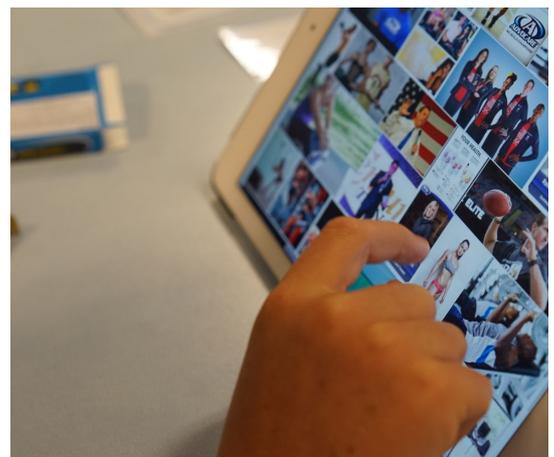
KEY FINDINGS

TAILORED CONTENT

- Social media sites tailor what young people see based on the images they follow, post or like, previous videos watched, commercial adverts, cookies, and/or topics the site/device considers that young people will enjoy

LIABILITY/ACCOUNTABILITY

- Young people suggested that the liability/accountability lies with the social media sites and app developers, and feel that mechanisms should be in place to protect young people from inappropriate content; e.g. 'fake news'

CREDIBILITY

EVIDENCE, GUIDELINES AND ACTIONS

Young people choose to engage with and act on information based on the number of likes a post receives and/or who has posted to social media and/or whether a site is 'official'

KEY FINDINGS

LIKES

- Credibility of information is gauged by the number of likes a post receives, with 200 likes acting as the benchmark

CELEBRITIES

- Celebrities act as role models, yet their posts and/or advertisements are often inappropriate and/or targeted at adult health-related behaviours
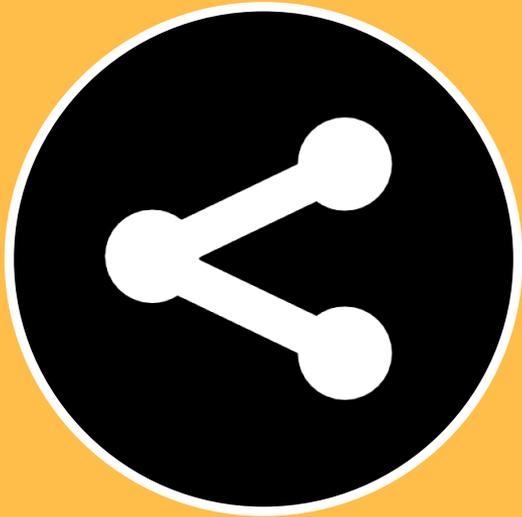
OFFICIAL ORGANISATIONS

- 53% would consider changing their health-related behaviours if it was posted by an official organisation (e.g. NHS, Sport England, Youth Sport Trust)

PEER CONTENT

EVIDENCE, GUIDELINES AND ACTIONS

Content created and shared by peers, and the actions of young people liking or not liking posts, have a powerful influence over their health-related understandings and behaviours

KEY FINDINGS

PEER-PRESSURE

- Young people experience a level of peer-pressure to change their behaviours from viewing health-related material shared by peers, including selfies

SHARED UNDERSTANDINGS

- Young people can develop shared understandings about health from sharing and creating content in health-related spaces
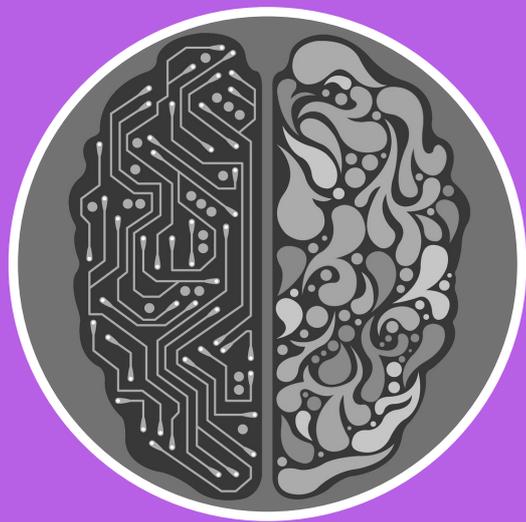
SOCIAL AND EMOTIONAL SUPPORT

- Peers act as a valuable source of emotional support in online and offline spaces

SUPPORT FROM ADULTS

EVIDENCE, GUIDELINES AND ACTIONS

Schools/teachers, parents/guardians and the media fail to understand and/or adequately address the social media-generated pressures that are experienced by young people

KEY FINDINGS

NEW PRESSURES

- Young people report that schools/teachers and parents/guardians fail to understand young people's uses of social media; adults should take greater responsibility for the pressures facing young people and should avoid dismissing these pressures

WRONG FOCUS

- Schools focus primarily on cyberbullying, but for young people, a bigger problem is peer-pressure on social media and its relationship to enhanced body dissatisfaction

MISINTERPRETED

- Young people believe that the media/news makes fun of their uses of social media and exaggerates or inadequately represents the real risks experienced by young people

DIGITAL LITERACY

- Adults' digital literacy skills should be developed. Adults who are digitally literate would understand the varying impacts of digital media on young people, and be able to support young people to be critically aware of the health-related content they access

CASE STUDIES

From our participatory research with 1346 young people in the UK, five key forms of content were identified as having an impact on young people's health-related understandings and behaviours.

These five forms of content are represented in the following case studies.
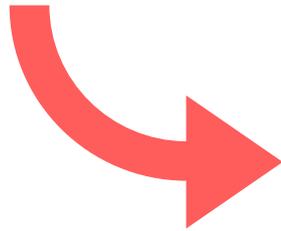
WATCH ALL THE VIDEOS BY CLICKING HERE
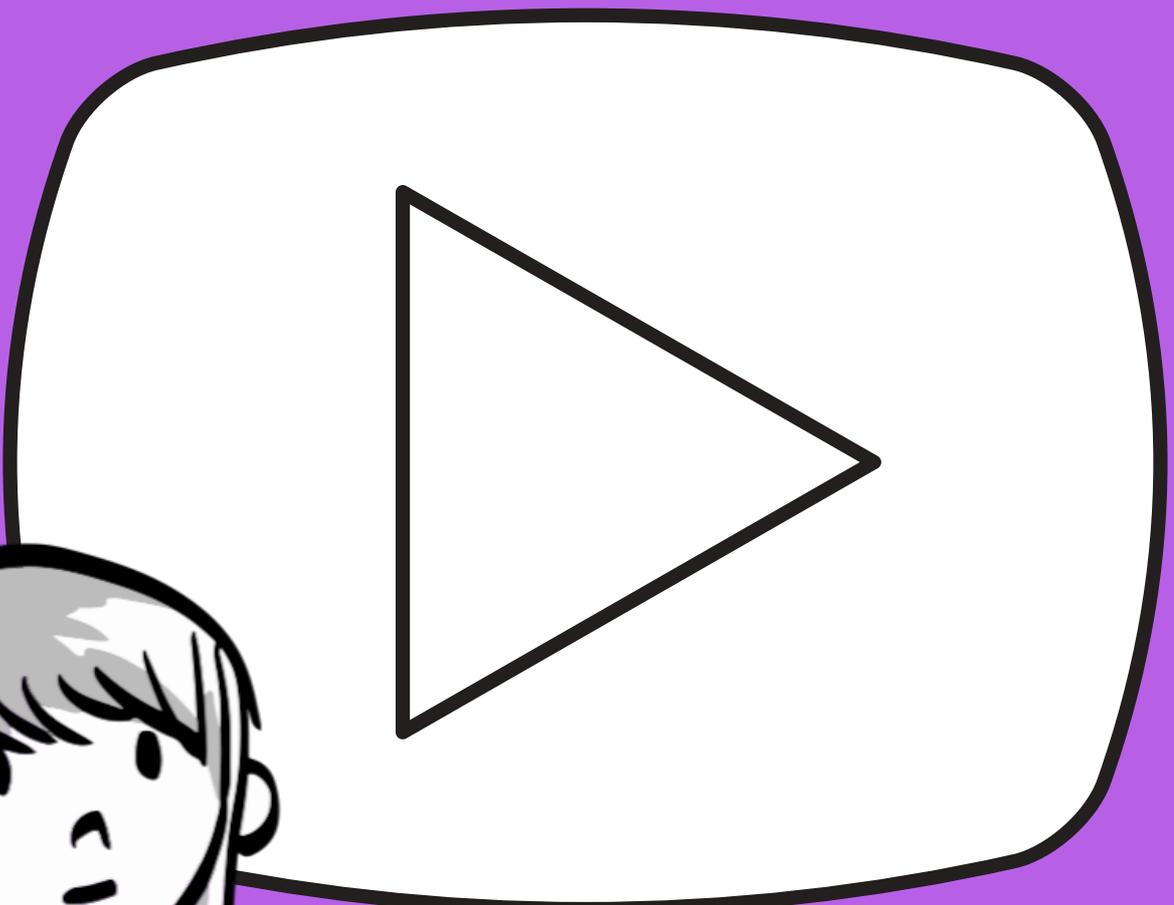
1. CONNECTED
2. PEER PRESSURE
3. FAKE
4. LIKES
5. RELATABLE

CONNECTED

This case study demonstrates how social media sites pre-select and promote health-related content to young people through young people's peer networks

Click here for the case study video
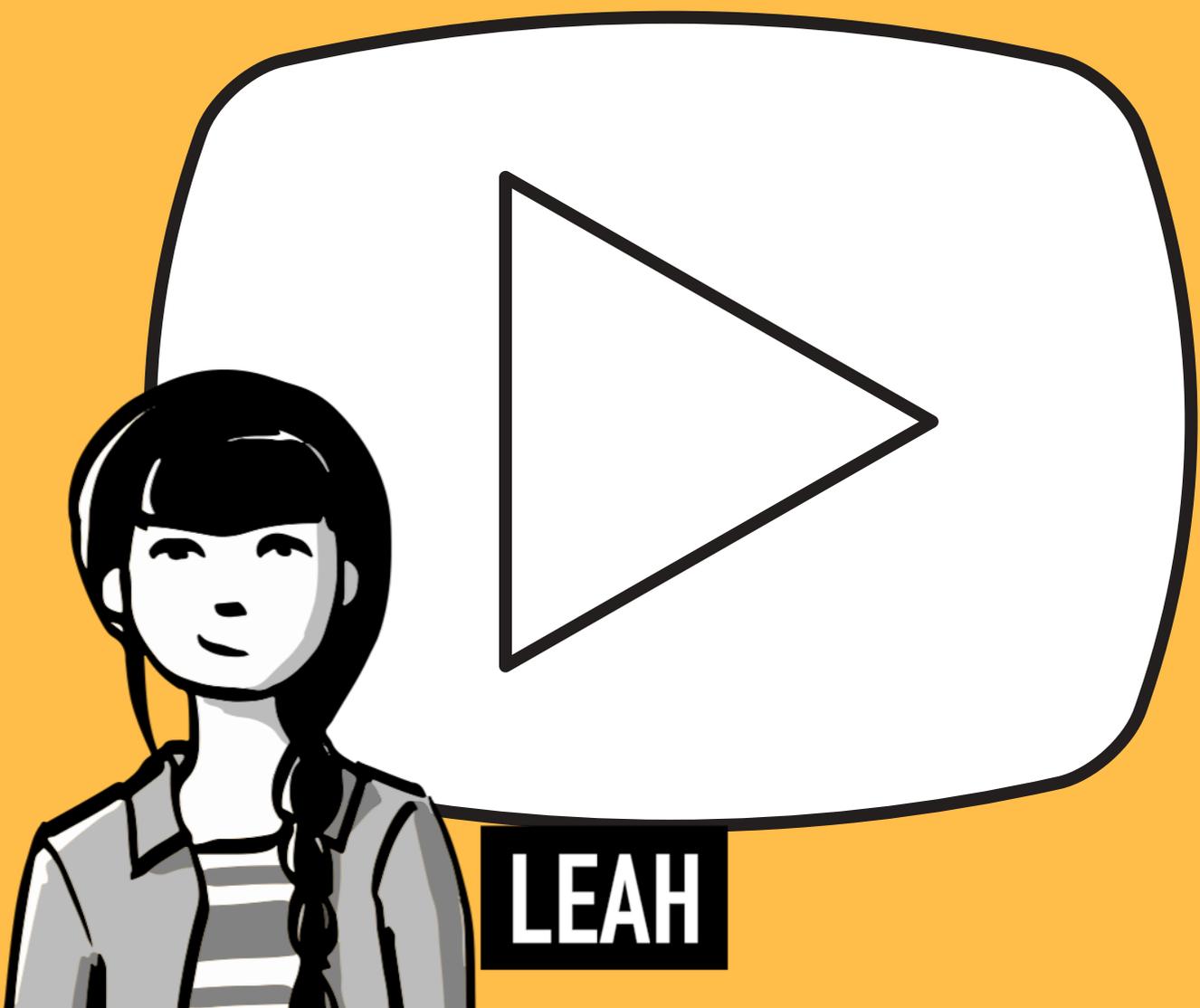
KELLY

PEER PRESSURE

This case study refers to the material that young people create and the influence of this material on other young people's self-perception of their own bodies
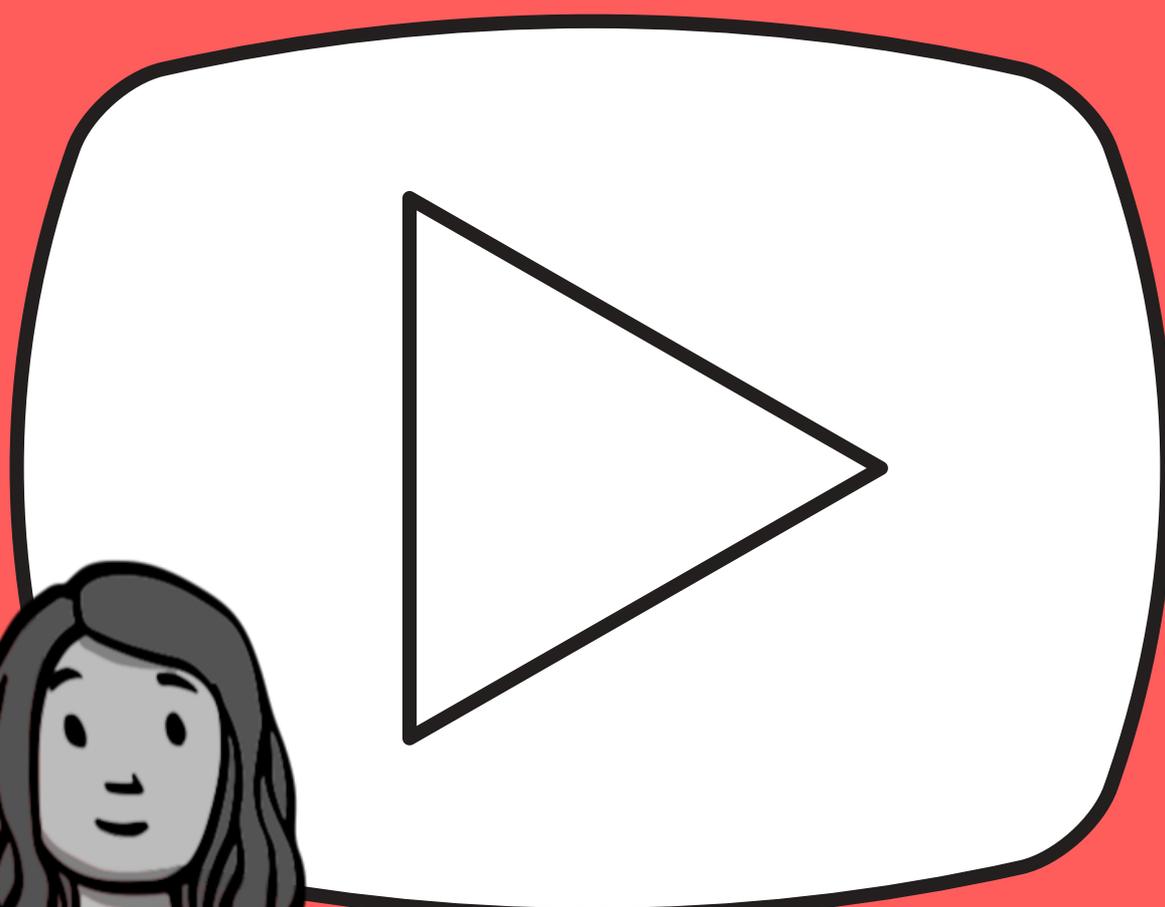
Click here for the case study video

LEAH

FAKE

This case study demonstrates the influence of specific social media accounts on young people's health-related understandings and behaviours

Click here for the case study video

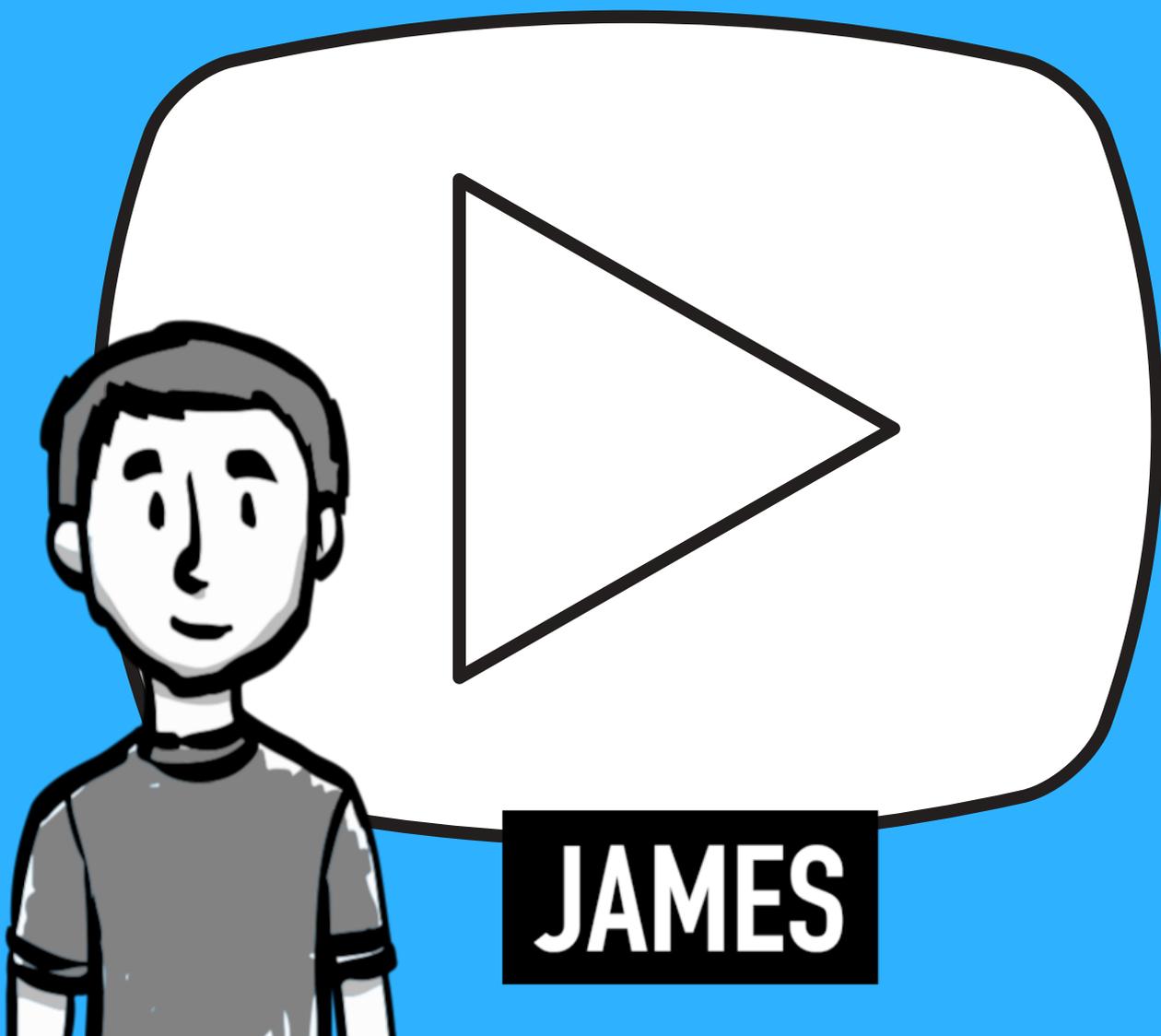JESS

LIKES

This case study shows how likes are positioned as a form of endorsement, and how likes have a strong influence on young people's engagement with health-related material and their health-related knowledge and behaviours

Click here for the case study video

JAMES

RELATABLE

This case study refers to the process whereby young people's 'searches' for specific health-related material result in social media sites then promoting vast amounts of partially related material to their accounts

Click here for the case study video

RECOMMENDATIONS

1 Social media is a powerful educative resource that should be harnessed in schools and the home to support young people's education about health

2 Adults who have a responsibility for young people's health and wellbeing – such as teachers and parents/guardians – must be supported to become sufficiently digitally literate so they, in turn, are able to support young people to use social media safely and in ways that generate positive health education outcomes

3 In designing health interventions for young people, it is essential to recognise the variety of relevant social media content including peer content, suggested/recommended content, automatically sourced content, content from reputable accounts and/or the role of likes and followers

4 Technology and app designers and social media sites have a responsibility to act ethically in order to limit the range of inappropriate health-related material that reaches young people

RECOMMENDATIONS

EVIDENCE, GUIDELINES AND ACTIONS

1 Social media is a powerful educative resource that should be harnessed in schools and the home to support young people's education about health

Social media and digital technologies are a way of living for adolescents; varying sites, apps, and devices are used multiple times a day and are woven into the very fabric of contemporary youth culture.

Unlike for most adults, there is no online/offline binary and young people are tethered to their devices. Young people publish their lives in short snippets and turn to social media and digital technologies to stay connected with friends and to access information.

Access to digital media is, therefore, viewed by young people as a 'right' and as essential for their wellbeing, making it a powerful educative resource.

RECOMMENDATIONS

2 Adults who have a responsibility for young people's health and wellbeing, must be supported to become sufficiently digitally literate so they, in turn, are able to support young people to use social media safely and in ways that generate positive health education outcomes

Key risk-related impacts resulting from young people's access to social media material are; mental wellbeing, including factors such as stress and anxiety; obsessive, addictive and/or disordered behaviours in the areas of diet/nutrition and physical activity; and body dissatisfaction resulting from negative body comparisons.

Personal, social and cultural factors can also contribute to and intensify a young person's vulnerability and/or resilience to social media material. Young people need to be protected from the development of harmful views and/or behaviours that are linked to their engagement with social media. This is an important action/responsibility for schools/teachers and parents/guardians.

In order to provide support to young people that will be effective, adults' digital literacy should be a key focus. Digital literacy support for adults should aim to help adults to critically evaluate the relevance of health-related information for their own and young people's lives, as well as developing the digital skills to navigate social media sites so they can understand and offer appropriate support to young people.

RECOMMENDATIONS

3

In designing health interventions for young people, it is essential to recognise the variety of relevant social media content including peer content, suggested/recommended content, automatically sourced content, content from reputable accounts and/or the role of likes and followers

Young people have a right to grow up as knowledgeable, practical and empowered digital citizens who are able to understand digital social norms and manage risk for themselves. They need to be empowered to engage in critical, safe, and ethical behaviours. Young people should be supported to act prudently and carefully, and to become thoughtful users of social media and digital technologies.

Given that many young people can already recognise harmful, fake and/or untrue information, the focus should be upon extending young people's existing digital, critical, safe and ethical skills and developing new understandings with young people themselves about what critical, safe, and ethical behaviours entail.

This is an important action/responsibility for schools/teachers and parents/guardians. The different forms of content can be used to support young people's understanding of health-related social media and for health promotion interventions.

Condition	Explanation
Automatically Sourced Content	Automatically sourced content refers to the influence of health-related material that social media sites pre-select and promote to young people. For example, Instagram pre-selects content that users see on the 'search and explore' feature, based on a user's likes, who that user follows and their followers' likes, and automatically sourced accounts
Suggested Content	Suggested content refers to the process whereby young people's 'searches' for specific health-related material result in social media sites then promoting vast amounts of partially related material to their accounts
Peer Content	Peer content refers to the material that young people create and the influence of this material on other young people's self-perception of their own bodies
Likes	Likes are positioned as a form of endorsement and had a strong influence on young people's engagement with health-related material and their health-related understandings and behaviours
Reputable Content	Reputable content refers to the influence of specific social media accounts on young people's health-related understandings and behaviours. These types of accounts have a high number of followers and this provides a powerful platform from which to reach and impact young people in both positive and negative ways

RECOMMENDATIONS

EVIDENCE, GUIDELINES AND ACTIONS

4 Technology and app designers and social media sites have a responsibility to act ethically in order to limit the range of inappropriate health-related material that reach young people

Minimum standards should be developed and applied to protect young people from inappropriate content and limit the amount that reach them through social media and digital technologies.

Minimum standards would include a requirement for social media sites and apps to apply account filters to regulate the ways in which information is advertised, marketed and distributed to young people.

In addition, all social media material and information from apps about diet/nutrition, exercise/physical activity and body image material should include clear signposting explaining to whom the material is relevant/appropriate.

Technology and app designers and social media sites have a responsibility to deliver a service to young people that is safe, even if it is not in their immediate commercial interests.

ACTIONS

This report provides evidence about the relationship between young people, social media and health. The data have also informed the development of guidelines and actions to support parents, practitioners in education and health, policy-makers and researchers.

Policy makers

National and international governments must take overarching responsibility for the role of social media in young people's lives, for supporting schools/teachers and parent/guardians to become better informed, and requiring technology and app designers and social media sites to act ethically. Policy makers should proactively take account of the trust young people place in them and the influence they can exercise, to optimise the potential of social media to promote youth health and wellbeing.

Third Sector (Health and Wellbeing)

Health and wellbeing organisations, associations, charities and trusts have a responsibility to increase awareness of the risk-related impacts of social media. The third sector should proactively provide continuous professional development resources for schools/teachers and appropriate educational support for parents/guardians. Equally, they should exercise their trusted and influential role in young people's lives by using social media as a mechanism to promote health.

Researchers

International researchers have a responsibility to strengthen the evidence-base on the opportunities and risk-related impacts of social media on young people's health and wellbeing. Further evidence is required from large samples of young people in different contexts and cultures, and from those with a wide range of learning needs. New evidence on the educational mechanisms (e.g. campaigns, curriculum, pastoral) that engage young people with their health through social media, and that positively impact on their health-related behaviours are also required.

Practitioners/professionals (Schools/Teachers, Parents/Guardians)

Schools/teachers and parents/guardians should also engage in on-going conversations with young people to ensure that these adults act in ways that respect young people's digital rights and meet their expectations. In short, adults who have a responsibility for young people's health should be sufficiently digitally literate to protect young people from harm.

APPENDIX

Existing Evidence-Base Informing this Report

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Attendees of Workshop May 11th 2017, University of Birmingham

Professor Kathleen Armour	University of Birmingham, UK
Ms Nicky Beirne	University of Birmingham, UK; St Patrick's Academy, Ireland
Mr Marcus Belben	Birmingham City Council; Active Streets, UK
Dr Kris Bevelander	Radboud University, Netherlands
Ms Hannah Bodsworth	The Bedford Modern, UK
Ms Tina Bold	Birmingham City Council, UK
Ms Suzie Britt	Ninestiles School, UK
Professor Moniek Buijzen	Radboud University, Netherlands
Dr Ashley Casey	Loughborough University, UK
Dr Shushu Chen	University of Birmingham, UK
Mr Alex De Lyon	University of Birmingham, UK
Ms Holly Duckworth	Lode Heath School, UK
Dr Dean Dudley	Macquarie University, Australia
Mr Gareth Evans	Ninestiles School, UK
Ms Clare Fletcher	Youth Sport Trust, UK
Dr Victoria Goodyear	University of Birmingham, UK
Dr Mark Griffiths	University of Birmingham, UK
Dr Frank Herold	University of Birmingham, UK
Professor Suzanne Higgs	University of Birmingham, UK
Ms Karen Hill	Swanhurst School, UK
Dr Alfredo Joven	National Institute of Physical Education of Catalonia, Spain
Dr Charlotte Kerner	Brunel University, UK
Professor David Kirk	University of Strathclyde, UK
Mr Adam Llevo	University of Birmingham, UK
Dr Eloísa Lorente-Catalán	National Institute of Physical Education of Catalonia, Spain
Dr Anthony Papathomas	Loughborough University, UK
Dr Paul Patterson	Forward Thinking Birmingham, UK
Dr Tom Quarmby	Leeds Beckett University, UK
Professor Mikael Quennerstedt	Örebro University, Sweden
Ms Charlotte Ralph	The Bedford Modern, UK
Dr Rachel Sandford	Loughborough University, UK
Professor Brett Smith	University of Birmingham, UK
Mr Jagdish Sohal	University of Birmingham, UK
Mr Will Swaithes	Youth Sport Trust, UK
Ms Hannah Wood	University of Birmingham, UK

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The guidelines and case study videos were created by **JustJag**.

JustJag is a digital creative consultant that specialises in educational material that helps communicate research results to a broad audience through engaging and accessible videos, in order to maximise reach and impact.

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