Growing up in the online world: a national consultation

Protection Without Participation Is Not Protection: Children's Voices on Social Media and Safety

Response from Children's Health Scotland's Family Participation Group and Health Rights Defenders.

Social Media Ban for Under 16s

Children's Health Scotland welcomes the opportunity to respond to the proposed social media ban for under 16s.

While the intention to protect children from online harms aligns with UNCRC Article 19, protection from harm, and Article 36, protection from exploitation, a blanket ban on social media for under 16s risks disproportionately restricting children's rights to freedom of expression, Article 13, access to information, Article 17, and association, Article 15. In line with Article 3, the best interests of the child, any policy must carefully balance protection with participation and be demonstrably in the best interests of all children.

This is particularly important for children and young people with health conditions and disabilities, whose access to participation, connection and support is often already limited in offline environments. The world health organisation (WHO) Health is a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity.

The enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition.

This response is informed by engagement with our Family Participation Group, made up of parents and carers, alongside the voices of children and young people, our Health Rights Defenders (young volunteers), who have lived experience of health conditions and or disabilities. They share how systems, environments and policy decisions affect their rights, health and wellbeing.

We gathered evidence through surveys with children and young people and with parents and carers. The questions explored platform use, exposure to harm, emotional wellbeing, screen time, sleep, gaming, AI, parental involvement and views on restrictions, including age limits and nighttime access. This response is grounded in a comprehensive children's rights framework aligned with the UNCRC, the EACH Charter, Scotland's Getting It Right for Every Child approach and our My Health My Rights Charter. Social media intersects with multiple rights.

These rights are reflected across the UNCRC: the right to health (Article 24), protection (Articles 19, 34, 36), participation (Articles 12 and 13), access to information (Article 17), development (Articles 6 and 27), identity (Articles 7 and 8), and play and rest (Article 31).Under GIRFEC, this engages all SHANARRI wellbeing indicators and requires a holistic understanding of children's lived experience

Platform Use, Digital Ecosystems and Participation Rights

The survey findings demonstrate that children are engaging not with a single platform, but with a connected and complex digital ecosystem. Children reported high levels of use across YouTube, messaging apps, gaming platforms, TikTok and Instagram, alongside Discord and AI tools, with most children active across multiple platforms simultaneously rather than using one in isolation.

This reflects digital engagement that is continuous rather than occasional, multi layered across communication, learning and leisure, and embedded within everyday life.

Children described these environments as meaningful spaces:

"Platforms like YouTube are vital for learning"

"Sometimes I find out new things and become intrigued"

"I make new friends in the gaming world which helps build my confidence"

These responses demonstrate that children are actively exercising their rights to access information, participate socially and develop their identity.

For children with health conditions, this is particularly important. Digital environments enable participation where physical access is limited:

"It is very important for my children to access friends… both are socially excluded at school"

This highlights a direct link to inclusion and to GIRFEC SHANARRI wellbeing indicators:

Included: where children can feel part of a community and maintain relationships

Nurtured: where connection and interaction support emotional wellbeing

Achieving: where children are learning, exploring and building confidence

At the same time, parents and carers expressed hesitation and restriction:

- My kids are not allowed on YouTube or social media
- This demonstrates the central tension within digital environments. They are both enabling and risky, with children's rights supported and challenged within the same spaces.

Age Limits, Autonomy, Protection and Evolving Capacity

Parents showed strong support for age limits, with most in favour of a minimum age between 13 and 16. This reflects a desire to protect children from risk during key developmental stages.

Children's responses provide a more nuanced perspective. They do not reject protection but recognise both risk and benefit:

"yeah I think it's a good idea banning social media… there is a lot of stuff that kids shouldn't be seeing"

"13 is when you become a teenager… 14 to 16 should have heavy restrictions"

"It's ok to use if you use safely"

"Yes under the supervision of an adult"

These responses reflect evolving capacity, Article 5 parents and carers help children learn, grow, and make decisions, giving them more freedom as they get older and more able. Children demonstrate a clear understanding that younger children may need more protection, older children can engage more independently, and support and guidance remain essential.

Children also highlighted that restrictions are often bypassed:

"I still access platforms even if I am underage"

"Banning social media will increase VPN usage… it focuses on control rather than keeping young people safe"

Parents reinforced this concern:

"If we just say no or ban it, children will find a way"

This highlights a critical policy risk. When restrictions do not align with lived experience, they may be circumvented, reduce parental visibility and increase unmonitored access.

For children with health conditions and disabilities, this is particularly significant. Where digital access supports connection, inclusion and emotional wellbeing, overly restrictive approaches may disproportionately reduce opportunities for participation and increase isolation.

A rights-based approach requires flexible and proportionate measures that recognise different developmental stages and actively involve children in decision making.

Exposure to Harmful Content and System Responsibility

Exposure to harmful content emerged as one of the most significant concerns.

Parents described the scale of exposure:

"There is so much inappropriate and harmful content out there… it's almost impossible for them to avoid"

Children showed mixed awareness:

"I'm too young to understand the dangers"

"Yes under the supervision of an adult"

This demonstrates that risk is not simply about access, but is embedded within platform design, algorithmic systems and the lack of effective safeguards. Responsibility is too often placed on children, parents and carers to manage environments they do not control. There must be a clear shift in accountability towards social media providers such as Facebook, Instagram and TikTok, who design and operate these environments. These platforms have both the capacity and responsibility to put robust, proactive measures in place to prevent the amplification and spread of harmful content, including material related to suicide and self-harm.

For children and young people, particularly those with health conditions and disabilities who may rely more heavily on digital environments for connection and participation, this current imbalance increases exposure and vulnerability. A rights-based approach requires stronger system-level responsibility, including enforceable safeguards, transparent algorithms and content moderation practices that actively protect children and young people from harm, rather than relying on them to navigate and mitigate risks themselves.

Screen Time, Lived Experience and Cumulative Impact

The survey findings show that children's screen time varies, with the most common range between **2 to 4 hours per day**, and a notable proportion reporting **5 to 6 hours or more**.

The key insight is not the number of hours itself, but the difference in how children and parents understand and experience screen time.

Children described screen use in immediate and situational terms:

"If I am on too late it does or if I see something scary"

Parents described cumulative impacts over time:

"Anger issues and sleep issues affecting his school days"

"My children stopped wanting to play, go outside and interact socially"

This difference is significant. Children experience screen use as fluid and context dependent, while parents observe patterns and consequences that build over time.

From a rights perspective, this engages:

- Article 24, the right to health
- Article 31, the right to rest, leisure and play
- Article 6, the right to development

Within SHANARRI:

Healthy: where sleep disruption and emotional impact affect overall wellbeing

Active: where screen use replaces physical play or outdoor activity

Achieving: where tiredness or distraction impacts learning

Nurtured: where routine, balance and supportive boundaries are required

For children with health conditions and disabilities, screen use may also provide essential benefits, including connection, distraction from pain or anxiety, and access to learning and peer support. This reinforces that screen time must be understood not only in terms of how long children spend online, but how, when and why they engage.

This also highlights the importance of cumulative exposure. It is not only the amount of time spent online, but repeated exposure to certain types of content, particularly distressing, harmful or highly stimulating material, that can have a lasting impact on children's emotional wellbeing, sleep and behaviour. Children's experiences are further shaped by platform design, including algorithms that influence what content is repeatedly presented to them, meaning they are not always making fully active or informed choices about what they see. A rights-based approach therefore requires moving beyond guidance focused solely on limiting screen time, towards ensuring that digital environments themselves are safe, supportive and designed with children's health and wellbeing in mind. Digital worlds where children are safeguarded. This points to the need for a more holistic approach that supports families to understand and balance screen use, while also placing greater responsibility on systems and providers to reduce harm, promote healthy engagement and prioritise children's wellbeing by design. Ultimately, the focus should shift from how long children spend online to whether the environments they are engaging with support their health, development and rights.

Gaming, Connection, Health and Participation

Gaming emerged as one of the most significant and complex areas of children's digital lives, highlighting both clear benefits and important risks. A substantial proportion of children reported regularly using gaming platforms, with parents also identifying gaming as a central part of their child's online activity.

What is most significant is not simply the level of use, but the role and meaning that gaming plays, particularly for children with health conditions and disabilities.

Children described gaming as supporting emotional regulation:

"Gaming online is good for autistic children to decompress… without this I would have lots of meltdowns"

"Gaming provides a controlled and accessible environment where children can manage stress, regulate emotions and feel a sense of control."

Children also described the social value of gaming:

"I make new friends in the gaming world which helps build my confidence in the real world"

This demonstrates that gaming supports confidence, social skills and identity development. For children who experience exclusion in offline environments due to illness, disability or anxiety, gaming may be one of the primary ways they access participation and connection.

Parents reinforced this:

"It is very important for my children to access friends… both are socially excluded at school"

From a rights perspective this engages:

- Article 31, play and leisure
- Article 15, participation and association
- Article 6, development
- Article 24, mental health and wellbeing

Within SHANARRI:

Included: where children experience belonging

Nurtured: where environments support emotional regulation

Achieving: where confidence and skills are developed

Active: where digital engagement reflects meaningful participation

At the same time, parents raised concerns about interaction with others, inappropriate content, financial risks and design features that encourage prolonged use.

Children also demonstrated strategies to stay safe:

"We have a code word that we shout if feeling uncomfortable online"

Gaming reflects a dual reality. It can support wellbeing, connection and participation, while also presenting risks.

For children with health conditions and disabilities, restricting access to gaming risks increasing isolation, reducing opportunities for social interaction and removing important coping strategies. A rights-based approach must recognise both the benefits and risks, strengthen safeguards within gaming environments and support safe, informed engagement.

From a charitable and children’s rights perspective, it is essential that policy responses do not take a one-dimensional approach to gaming that focuses solely on restriction. For many of the children we support, particularly those with long-term health conditions, disabilities or experiences of exclusion, gaming is not simply a pastime but a vital space for connection, participation and emotional wellbeing. Measures that fail to recognise this risk unintentionally deepen inequality and isolation. A balanced approach is therefore required, one that protects children from harm through stronger regulation of harmful content, safer platform design and fairer monetisation practices, while also safeguarding access to the positive aspects of gaming that support inclusion and wellbeing. This reinforces the need for children’s lived experience, particularly those with additional needs, to be central in shaping policy, design and regulatory decisions.

AI, Learning and Emerging Risks

Around half of children reported using AI tools. Children described AI as helpful for learning:

“AI is good for homework… but my parents are better help”

Parents raised concerns about accuracy, dependency and critical thinking.

This engages

Article 17, access to information,

Article 28, education.

For children with health conditions and disabilities, AI may provide additional support where education is disrupted. A rights-based approach requires digital literacy, safeguards and the continued role of trusted adults.

From a charitable and children’s rights perspective, the rapid growth of AI brings both significant opportunity and emerging risk, particularly for children and young people whose voices are not yet fully reflected in how these tools are designed and regulated. While AI can enhance access to learning and provide valuable support for children with disrupted education or additional needs, there is a clear responsibility on developers and providers to ensure these tools are safe, accurate and developmentally appropriate. Without this, there is a risk that children may be exposed to misinformation, over-reliance or reduced opportunities to develop critical thinking skills. A balanced, rights-based approach requires investment in digital literacy for children, parents and professionals, alongside stronger system-level safeguards, transparency and accountability from those creating and deploying AI. It is essential that the benefits of AI are harnessed in a way that promotes equity, supports inclusion and protects children's health, development and rights.

Digital Access, Education, Health Support and Unintended Consequences

Digital platforms are also used to provide structured support through programmes such as SMS:CONNECT and SMS:HUB. These enable children to connect with others, access support and participate in safe, moderated environments. For children with health conditions and or disabilities, these platforms are often essential rather than optional. A blanket ban risks restricting access to these services, increasing isolation and limiting participation.

Policy must clearly distinguish between open social media platforms and safe, purpose-built environments designed to support children's wellbeing.

The COVID-19 pandemic further underscored both the risks of digital exclusion and the potential of digital access to support inclusion. During periods of school closure, many children experienced remote learning for the first time, and for some children with health conditions or additional needs, this created a greater sense of inclusion, flexibility and accessibility than they had previously experienced in traditional settings. However, evidence also shows significant inconsistency in the quality and availability of support, with children with additional needs disproportionately affected by disrupted services, gaps in provision and uneven access to appropriate resources and specialist support. This inconsistency continues in practice, including within hospital settings where access to education can vary depending on local authority arrangements, despite children having the same underlying rights to education and participation. The learning from the past five years is clear: digital solutions can play a transformative role in supporting inclusion, continuity of education and connection, but only where access is equitable, provision is consistent and services are designed around children's needs. Policy must therefore build on this learning, ensuring that digital access is recognised not as a risk to be restricted, but as an essential component of inclusive education, health support and participation for all children and young people.

From a charitable and children's rights perspective, it is critical that policy decisions fully consider the unintended consequences of restricting digital access for children who rely on these platforms as a lifeline to support, connection and participation. For many children with health conditions or disabilities, purpose-built, moderated digital services are not interchangeable with open social media, they are carefully designed environments that prioritise safety, inclusion and wellbeing. A failure to recognise this distinction risks disproportionately impacting those who are already most excluded. Policy must therefore be nuanced, ensuring that safeguards are strengthened where risk exists, while protecting access to trusted, rights-based digital provision that enables children to realise their right to health, education, participation and connection.

Policy must therefore be well balanced, ensuring that safeguards are strengthened where risk exists, while protecting and investing in trusted, rights-based digital provision that enables children to be supported to realise their rights to health, education, participation and connection. This requires national leadership to ensure consistency of provision, so that access to education and support does not depend on where a child lives or the services available. This reflects the UN Convention on the Rights of the Child, including Article 2 (non-discrimination), Article 3 (the child's best interests must be a primary consideration), and Article 4 (governments must take action to implement rights), alongside Article 12 (the right to be heard), Article 15 (the right to connect with others), Article 24 (the right to health) and Article 28 (the right to education on an equal basis)

Conclusion and Position

Children's digital lives are complex and deeply embedded. They support participation, inclusion and wellbeing—particularly for children with health conditions, while also presenting risks that require careful, considered management.

A blanket ban does not reflect this complexity and risks unintended consequences, including increased hidden use, reduced access to trusted support, and further exclusion of those who already face barriers offline.

Our Position

Children's Health Scotland does not support a blanket ban on social media for under 16s. We advocate for a rights-based, proportionate and GIRFEC-aligned approach that:

- **Balances protection and participation** – Articles 3, 12 and 19
- **Recognises evolving capacity** – Article 5
- **Strengthens safeguards for children and young people** – Articles 19 and 36
- **Addresses platform design and algorithms –** Articles 3, 17 and 36
- **Supports parents and carers** – Articles 5 and 18
- **Protects access to essential digital services** – Articles 17 and 24
- **Involves children and young people in decision making** – Article 12

Children's voices are clear: they want to be safe, and they also want to be connected, included and supported. Being "connected, included and supported" reflects children's rights to participation (Articles 12 and 13), non-discrimination (Article 2), having their best interests considered (Article 3), and being supported to develop and thrive (Article 6).

Policy must therefore move beyond restriction alone and focus on creating safer digital environments by design—ensuring that responsibility sits with those who shape these spaces, while enabling children to access the connection, support and opportunities they need. This requires strong national leadership and a balanced, rights-based approach that protects children from harm without limiting their ability to participate, belong and thrive in an increasingly digital world.