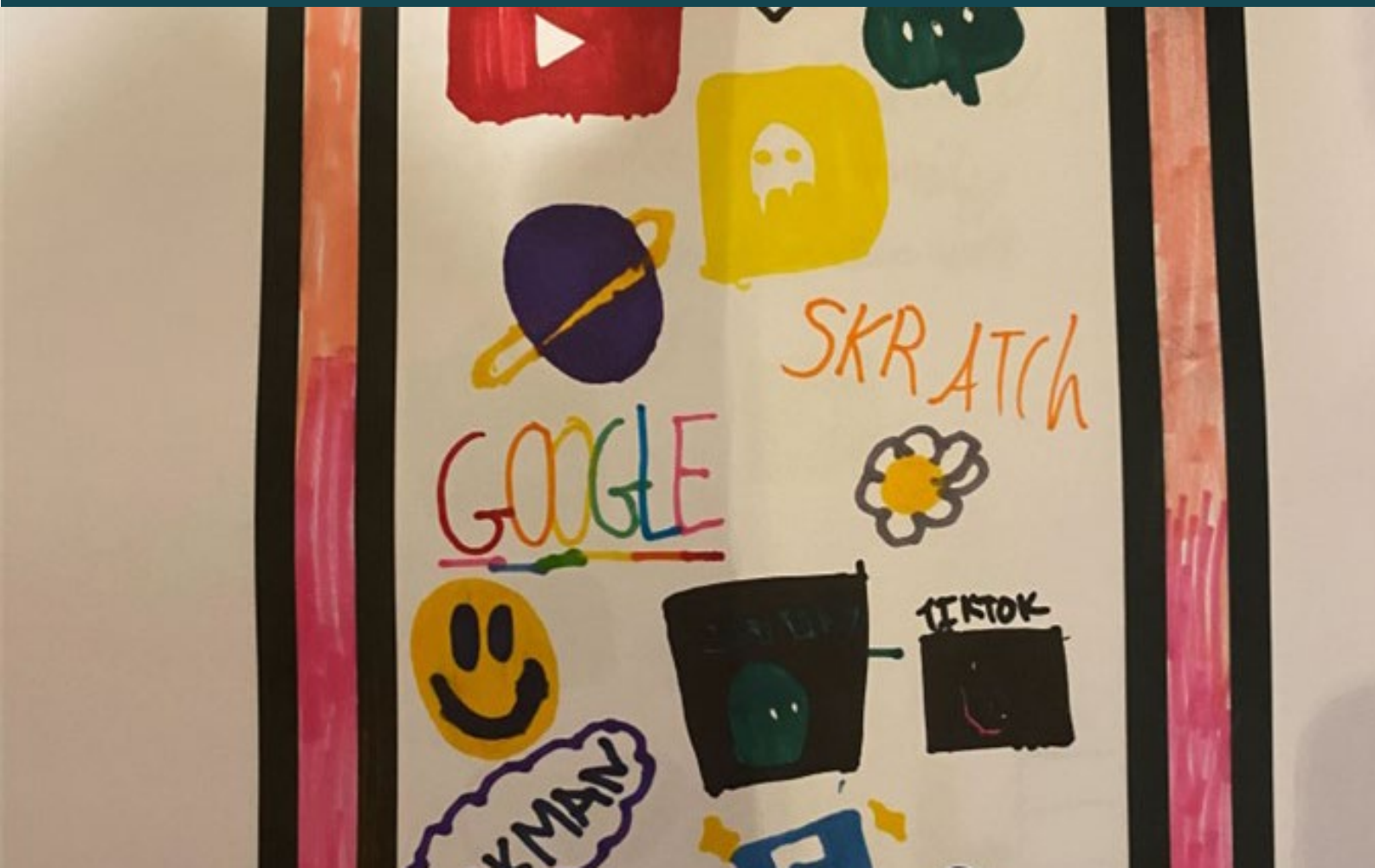# Measuring exposure to potentially harmful online content among children

Developing a survey methodology to understand exposure to potentially harmful online content among children aged 6-12

Background and context

Ofcom has a statutory duty under the Communications Act 2003 to promote and to carry out research into media literacy. Ofcom will soon be responsible for regulating online platforms as set out in the new UK Online Safety Bill ('OSB'), when enacted. To support this work, Ofcom wanted to understand what children are exposed to on social media and identify the ways in which they are exposed to potentially harmful content. Ofcom and other organisations already collect data on exposure to potentially harmful online content amongst people aged 13+. While Ofcom already conducts extensive qualitative research with children aged under 13 as part of its Children's Media Literacy and Children's Media Lives research, there is not yet an established way to collect quantitative data on exposure amongst children aged under 13 given the sensitivities and ethical considerations around surveying younger children on this particular topic.

In light of this, Social Finance were commissioned by Ofcom to develop a school-based survey methodology to collect data about exposure to potentially harmful online content amongst children aged under 13.

The aims of this project were therefore to:

- **Explore** whether data on children aged under 13's exposure to potentially harmful online content can be collected safely, ethically, and accurately through a survey;

- **Test** ways to conduct safe and ethical research on this topic in a school setting.

Researching exposure to potentially harmful online content with young children carries inherent ethical, legal, and safeguarding risks. In order to mitigate these risks, we designed a two-phase approach:

Phase 1 – Discovery: we conducted quantitative (analysis of data from 858 iPads) and qualitative research (2 focus groups, with 6 children in each) to understand children's experiences and ways of talking about their online activity;

Phase 2 – Survey: we designed and piloted an online survey with 109 children aged 6-12 to explore children's exposure to potentially harmful online content.

Through both phases, we worked in partnership with a Multi-Academy Trust which has 50+ schools across England, consulting with the Trust's National Safeguarding Lead and an Educational Psychologist at every step of the research process.

Key findings and learnings

The aim of this research was to test the feasibility of a school-based survey approach to collect data on exposure to potentially harmful online content among children under the age of 13, and to derive learnings for a potential future scaling of the approach.

Based on the results of the pilot, **we have concluded it is feasible to run a survey with children aged 8-12 to better understand their exposure to potentially harmful online content in a way that is safe and ethical.**

Finding 1: It is possible to ask children as young as 8 about to their exposure to potentially harmful online content safely and reliably, in a survey.

The findings indicate that it is possible to collect survey data on this topic with children as young as 8. Most questions were answered by most children and only 14% of respondents stated they received support from their teacher to complete the survey. Although we suggested to the schools that children aged 6 and above were of interest, most focused on Key Stage 2 (age 7-11) only and mostly put forward children aged 8 and above as they were concerned younger children could struggle to complete the survey in the current format.

Given the nature of the subject matter, we built checks into the survey to assess how children were feeling before and after completing the survey. The results indicate that, for the majority of respondents, the survey did not negatively impact their wellbeing. There were a few children – mostly boys – who indicated feeling worse at the end than at the beginning. There were no notable differences in the responses of these children who showed a decline in wellbeing when compared with the group overall, and these children completed the survey in a similar length of time to the whole group average.

No schools reported any issues or concerns following on from survey completion. There are various reasons, unrelated to the topics discussed, why children may say they feel worse at the end of the survey than at the beginning. Examples include having become bored (potentially

suggesting consideration of survey length or alternative ways of engaging participants) or issues unrelated to the survey such as worrying about the next lesson.

Finding 2: Conducting the survey in a school setting ensures there is an appropriate safeguarding infrastructure but also presents challenges.

Conducting the qualitative research and online survey in a school setting allowed us to make use of the already established safeguarding infrastructure. Being able to draw on this meant that any safeguarding response could be timely and targeted. It also meant that some potential concerns raised by our research team were not taken further as the National Safeguarding Lead was able to draw on relevant contextual knowledge to know which needed further action and which did not (see Finding 5 for more on safeguarding).

We relied on schools to administer the survey and collect parental consent. It meant that they had control over the process, including which children were selected and gathering informed parental consent (for full details see Section 3 below). We put safeguards in place to mitigate potential administrative risks, including only sharing survey links with the school once the collection of parental consent had been confirmed to us in writing.

Finding 3: The findings from the survey appear reliable when triangulated with other sources.

The survey was only piloted with a small sample (109 children) to test feasibility. However, by triangulating the findings with other sources, we can conclude that the survey findings appear to be broadly in line with what we have seen for children aged 8-11 in terms of usage (Children's Media Literacy) and not significantly different in terms of exposure to potentially harmful content compared with children aged 13-15 (which is the data we have available in Ofcom's Online Experiences Tracker). Therefore, we believe the survey is likely to produce reliable evidence of children's exposure to potentially harmful online content if run with a nationally representative sample. The results of this pilot survey will not be published due to the small sample size and because the sample is not representative.

Finding 4: The risk of exposing children to harm through the survey, including introducing them to potentially new forms of harm can be managed by rooting the survey in children's experiences and asking indirect questions.

The qualitative interviews and classroom-based exercises with children gave us an understanding of the language young children use to describe their online experiences and what types of potentially harmful online content they are familiar with. This allowed us to design a survey that is accessible to young children and should not expose them to potentially new forms of harm.

We worked closely with an educational psychologist to design the survey and were guided by a set of principles to ensure the research was trauma-informed and person-centred. In consideration of the nature of this research and the potential for any harm to the child participants, instead of asking directly about potentially harmful content, we designed questions that asked about this content in a less direct way, for example 'something that made me feel bad about my body' or 'photos, videos or messages encouraging me to do something that I'm not allowed to do'. We are therefore confident that the questionnaire developed can capture valuable information in a way that is very unlikely to expose children to a risk of harm.

Finding 5: There is a low likelihood of safeguarding concerns being raised as part of this survey, especially when minimising the use of open questions.

When designing the survey, we considered how to find the right balance between protecting anonymity and collecting personal information that allows identification of individuals in the case of safeguarding concerns being flagged. In this pilot the children included their initials, and it was explained to them on the survey landing page that safeguarding may take place if we felt it necessary. Out of 109 survey responses, 2 were identified by our research team for possible follow-up and one of these required a safeguarding follow-up by the school. This response was triggered by the child's response to a question with a free text box.

The pilot survey contained free text boxes (mainly "Other – specify" options) but a mainstage of the survey would not need to because we could build a more inclusive code frame using the insights from this pilot. Based on the learnings from this pilot study and if free text boxes were removed (limiting the ability for children to use the survey to disclose a safeguarding issue), then the strong safeguarding infrastructure that exists in a school setting would make us confident that the children could be offered full anonymity in a future survey where appropriate. The benefit of this would be that children may feel able to be more open and honest in their responses, improving the quality of the research.

In the case of a potential disclosure which requires a follow-up, the school would be able address it at a school (or classroom) level. Even though school staff might not be able to identify the individual concerned, they would be able to run a follow-up session with all children that

participated in the survey and address any potential concerns or identify the individual that way. A group safeguarding approach would be beneficial as it means that even children who do not disclose potentially harmful experiences may still receive support if someone else in their class/school does. In line with good practice, clear signposting to resources and support was included for children taking part in the survey (and their parents).

Methodology

Phase 1: Initial Research (June – July 2022)

Quantitative data analysis

The Multi-Academy Trust that we partnered with provides iPads to all children attending their schools. These iPads have monitoring, and filtering software installed that blocks access to twelve categories of potentially harmful and age-inappropriate websites and collects data on attempts made to access these sites. The list of blocked sites is determined by the school and based on police guidance.

During Phase 1, we conducted quantitative analysis of data from 858 of these iPads across nine schools, for pupils aged 8-13. This analysis helped to refine our understanding of the (blocked) platforms and sites that iPads belonging to this age group are attempting to access.

Our analysis found that there was a high total number of attempts to access blocked sites during both the half-term and the term-time weeks that the data was taken from. The iPad data indicated that a few children as young as eight years old were potentially trying to access sites deemed harmful by the schools such as sites that provide gambling and pornographic content, with attempts to access these sites increasing in frequency with age. Some of these attempts happened in school breaks so are unlikely to be driven by adults borrowing the iPad. We expect that the number of attempts to access blocked sites under-represents children's exposure (assuming they have other technology available to them), as children may learn what is blocked and over time may stop trying to access them on their school iPads.

Qualitative User Research

To inform the development of the pilot survey we also conducted qualitative research with twelve 7-12-year-olds to understand how children talk about and conceptualise their online activities and possible harmful interactions or experiences online. We ran small, in-person focus groups in two schools (one primary and one secondary), each attended by six children. The focus

groups included group drawing and discussion activities about what the children liked to do online, and 1:1 discussions about possible harmful online content in which the researcher and the child discussed possible reasons why a fictional character might be upset after having spent time online.

Our qualitative research informed the key principles followed for the survey design:

Survey content	Safeguarding principles
- Use the **basic language** that children use - Include a specific section on **gaming, separate from other questions** to ensure it doesn't dominate responses to other questions - Achieve a balance between being **specific** with questions and not **asking directly** about certain content - Differentiate between potentially harmful **content** and **contact**	- Ensure respondent can **skip questions** **Don't explicitly refer to any types of harms** children may not have come across before in the survey questions - Complete the survey with **teacher/ safeguarding lead in the room** - Provide links to **online resources** and **helplines** on an age-appropriate information sheet - Include **questions about how the children are feeling** at the beginning and end of survey. In any future survey this question could be targeted more specifically at how the survey made them feel. However, younger children may find this specific question harder to answer, which should be considered when reviewing the responses - Have a detailed safeguarding protocol for **following up on concerns** from results

Phase 2: Survey Design (Aug 2022 – Jan 2023)

Based on MRS guidelines, our findings from the initial discovery phase, and drawing on Ofcom's Online Experiences Tracker ('OET') we worked with Ofcom, the Multi-Academy Trust and an Educational Psychologist to design a survey that would be accessible and safe for children under the age of 13. Considering data security and age-appropriateness, we selected SnapSurvey[1] as our survey software. We also tested a shortlist of survey questions with approximately 10 children aged 10-13, under adult supervision. The pilot was designed to test a classroom-based methodology. We worked with the Multi-Academy Trust to ensure that the survey was completed in a supervised classroom setting and produced an accompanying guide for staff to offer support where needed.

We followed a five-step approach for the completion of the survey:

1) **Recruitment of schools**: We recruited a convenience sample of children for the pilot survey across eight schools. By convenience sample we mean the schools were selected based on capacity to take part, and schools selected children based on how easy they thought it would be for the child to complete the survey and how likely the child's parents would be to consent.

2) **Sharing information sheets and obtaining informed consent**: Parental consent was collected on an opt-in basis, with information sheets and consent forms sent out to the parents of the selected children. We also shared information sheets with children with the option to opt out of the research and developed a research guide for schools.

3) **Schools running surveys in classrooms:** After obtaining parental consent children were invited to complete the survey (and given the opportunity to opt out). The survey was then conducted in a classroom with a teacher on hand to provide support and a safeguarding lead present in the room.

4) **Social Finance reviewing responses for safeguarding concerns:** We reviewed all survey responses for potential safeguarding concerns with a particular focus on responses to free text questions and responses where children indicated a drop in wellbeing. Concerns were flagged to the National Safeguarding Lead of the Multi-Academy Trust.

5) **Schools following up with safeguarding concerns where necessary:** Based on the information shared, the National Safeguarding Lead decided whether to request information to identify the potential child at risk and where relevant passed this information back to the individual schools.

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[1] https://www.snapsurveys.com/

Anonymity and safeguarding

It was important to consider how best to balance safeguarding and anonymity. Anonymity might be expected to produce more accurate and robust data, but this opens a potential risk of being unable to follow up if a child discloses a safeguarding concern. For this pilot, we were confident that participants could be safeguarded either at an individual or group level without the child's name or initials because there were not many children in each school taking part and we had sufficient demographic detail to identify them. However, we decided to collect participant initials alongside standard demographics for the following reasons:

- It was a pilot – accurate and robust data was not the primary objective at this stage

- There was a high number of open-ended questions and uncertainty around the likelihood of disclosure in response to these questions

- The sample size was small so follow-up would be straightforward

- As only a few children were involved it was easy to read the responses quickly and the number of children likely to need a safeguarding response would be small

- As the survey included other demographic questions that could be combined to identify most participants, asking for initials felt a more transparent approach as the child may not realise they could be identified from their demographics alone

Only the school needed to know the identities of any children at risk and therefore our approach also ensured our research team and Ofcom could never identify the children from the data collected. We did this by allocating each school a unique code which was only known by the Trust's National Safeguarding Lead.

The process for cases where a child's responses indicated a possible safeguarding concern was:

1. Our research team would share these anonymous responses with the Trust's Safeguarding Lead, who determined whether this was a case where a Safeguarding response was required

2. If a Safeguarding follow-up was deemed necessary, our research team then shared the identifying information, i.e. initials with the Trust's National Safeguarding Lead

3. The Safeguarding Lead would then be able to identify the school the child attended and share this information back with the school

4. The school would then in turn be able to identify the individual child and follow up on the safeguarding concern

Cases were considered on an individual basis. Overall, it was concluded that answers to closed questions alone were not sufficient to trigger a safeguarding response from us,– e.g. children were

not safeguarded based only on a 'yes' answer to the question about whether they had been asked to send a photo of themselves to someone online. On the advice of the National Safeguarding Lead, children were not safeguarded based only on showing a decline in wellbeing at the end of the survey compared to at the beginning, as there are many reasons that could influence why a child would indicate lower wellbeing rating at the end.

Overall, we flagged two children's responses to the Safeguarding Lead, who advised one as requiring further action, based on a response to an open-ended question in the survey.

The risk of the survey causing any significant harm to children's wellbeing was also mitigated by the survey being completed in a classroom setting with a staff member on-hand who was able to identify any concerns and follow up with children during the week following survey completion. Finally, we also clearly signposted children to support services such as Childline at the end of the survey. The risk of receiving a disclosure that we could not follow up could be mitigated further by minimising the use of open questions and taking a group level safeguarding approach or structuring support lessons around the survey.

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