



Consultation response form

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Consultation title	Consultation: Protecting children from harms online
Organisation name	Kooth Digital Health



Your response

Question	Your response
<p>Volume 2: Identifying the services children are using Children’s Access Assessments (Section 4).</p>	
<p>Do you agree with our proposals in relation to children’s access assessments, in particular the aspects below. Please provide evidence to support your view.</p> <p>1. Our proposal that service providers should only conclude that children are not normally able to access a service where they are using highly effective age assurance?</p> <p>2. Our proposed approach to the child user condition, including our proposed interpretation of “significant number of users who are children” and the factors that service providers consider in assessing whether the child user condition is met?</p> <p>3. Our proposed approach to the process for children’s access assessments?</p>	<p>Confidential? – N</p> <ol style="list-style-type: none"> 1. Yes, we agree with this proposal and support the intention that service providers not using highly effective age assurance must carry out a children’s risk assessment and implement safety measures. 2. We agree with the proposed approach to the child user condition, and particularly the requirement for service providers to demonstrate with detailed evidence that they do not meet the condition. 3. We agree with the proposed approach.
<p>Volume 3: The causes and impacts of online harm to children Draft Children’s Register of Risk (Section 7)</p>	
<p>Proposed approach:</p> <p>4. Do you have any views on Ofcom’s assessment of the causes and impacts of online harms? Please provide evidence to support your answer.</p> <p>a. Do you think we have missed anything important in our analysis?</p> <p>5. Do you have any views about our interpretation of the links between risk factors and different kinds of</p>	<p>Confidential? – Y / N</p> <ol style="list-style-type: none"> 4. When reviewed by our clinical and safeguarding professionals at Kooth, Ofcom’s assessment of the causes and impacts of online harms is comprehensive and offers a much needed synthesis of the available evidence base. It is important to highlight however the positives in providing a safely moderated online space for children and young people to appropriately and positively discuss issues such as self-harm,

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<p>content harmful to children? Please provide evidence to support your answer.</p> <p>6. Do you have any views on the age groups we recommended for assessing risk by age? Please provide evidence to support your answer.</p> <p>7. Do you have any views on our interpretation of non-designated content or our approach to identifying non-designated content? Please provide evidence to support your answer.</p> <p>Evidence gathering for future work:</p> <p>8. Do you have any evidence relating to kinds of content that increase the risk of harm from Primary Priority, Priority or Non-designated Content, when viewed in combination (to be considered as part of cumulative harm)?</p> <p>9. Have you identified risks to children from GenAI content or applications on U2U or Search services?</p> <p>a) Please Provide any information about any risks identified</p> <p>10. Do you have any specific evidence relevant to our assessment of body image content and depressive content as kinds of non-designated content? Specifically, we are interested in:</p> <p>a) (i) specific examples of body image or depressive content linked to significant harms to children,</p> <p>b. (ii) evidence distinguishing body image or depressive content from existing categories of priority or primary priority content.</p>	<p>suicide, mental health generally and body image. Kooth plc has been moderating online discussions between young people in relation to mental health for over X years utilising a range of external evidence sources, and internal clinical and safeguarding expertise, to underpin highly effective, safe and age gated moderation guidelines. An <u>independent evaluation of Kooth services</u>, conducted in 2021 by London Schools of Economics, concluded that a significant increase in self-esteem, and decrease in self-harm, was evident for those CYP engaging regularly with Kooth’s peer discussion boards. Furthermore, the evaluation showed that the experience of peer discussion boards helped CYP to have discussions with their parents about their mental health.</p> <p>5. As in point 4 above, in our view the links made by Ofcom provide a helpful rationale to the accompanying codes of practice and fill the gaps in the required regulation for this space. Kooth supports thousands of young people each year with over 300 discussion board posts made daily, and we’re particularly accessible to those experiencing health inequality (ethnic minority backgrounds, LGBTQ+). Whilst not a top presenting issue, many young people access our service for mental health support as a direct result of online harms in relation to exposure to poorly moderated content on a range of social media platforms that has triggered distress.</p> <p>6. Kooth works with 10+ age groups and we agree with Ofcom’s proposed age categories. Kooth has been moderating u2u content with age categories for over 20 years and we have developed, tested and refined our age gating guidance over this time, with this becoming a greater focus in recent years as evidence regarding harms associated with particular types of content has emerged. Kooth’s age categories are closely aligned to Ofcom’s proposals, and, on review of the evidence underpinning Ofcom’s</p>

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<p>11. Do you propose any other category of content that could meet the definition of NDC under the Act at this stage? Please provide evidence to support your answer.</p>	<p>rationale for their proposed age categories, Kooth has decided to completely realign its categories to Ofcom's proposal. We have conducted comparisons with other providers in our sector and our findings indicate that there are very few that offer more of a breakdown in age categories beyond over 18 and under 18. In our experience, aligning with the latest available research, safeguarding/safety guidance, child development evidence and children's rights, to devise a number of under 18 age categories has proven much more effective. Our most popular discussion board topics include self-harm, eating difficulties and mental health generally, as well as relationships. In our view, it is imperative that discussions are moderated differently for the younger end of our age group compared to the upper end. This both protects younger users from content that is unsuitable, and enables the older users to engage in sensitive topics safely, whilst promoting good mental health.</p> <p>7. In our experience, body image and depression appear to be a topical issue across the 10+ age group. As mentioned earlier, young people occasionally present on the Kooth platform to seek support as a result of exposure to content online in relation to depression and body image.</p> <p>8. N/A</p> <p>9. N/A</p> <p>10. N/A</p> <p>11. We have no further suggestions at this stage. However, we are currently undertaking some further research on the moderation of our discussion boards/forums with University of Lancaster and University of Southampton and would like to share any relevant findings from this as part of our ongoing engagement with Ofcom on the OSA work.</p>

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Draft Guidance on Content Harmful to Children (Section 8)	
<p>12. Do you agree with our proposed approach, including the level of specificity of examples given and the proposal to include contextual information for services to consider?</p> <p>13. Do you have further evidence that can support the guidance provided on different kinds of content harmful to children?</p> <p>14. For each of the harms discussed, are there additional categories of content that Ofcom</p> <p>a) should consider to be harmful or</p> <p>b) consider not to be harmful or</p> <p>c) where our current proposals should be reconsidered?</p>	<p>Confidential? – Y / N</p> <p>12. Yes, we agree with the proposed approach. Inclusion of contextual information will be particularly helpful, given the balance required between protecting children from harm and enabling them to express their feelings and access support. We would also be keen to see more specificity, particularly in relation to primary content, for each age category. In our experience this is a deficit in the evidence base available and regulation and would strengthen the protection of younger children, whilst also enabling much needed u2u safe discussions for the older end of the age group - that will support their mental health and even facilitate safety by enabling more open discussion on these topics. However, in order to achieve this, the governance of any services approach must include oversight from clinical and safeguarding professionals.</p> <p>13. Kooth has been providing digital mental health support services for children and young people in the UK for over 20 years; this incorporates publication of content, pre-moderated peer support, and one-to-one counselling. As such, we have developed a robust approach to content moderation which aligns with the best available evidence to reduce risk of harm and would be happy to share this guidance with Ofcom.</p> <p>14. No, the current proposals are comprehensive.</p>
Volume 4: How should services assess the risk of online harms? Governance and Accountability (Section 11)	

Question	Your response
<p>15. Do you agree with the proposed governance measures to be included in the Children’s Safety Codes?</p> <p>a) Please confirm which proposed measure your views relate to and explain your views and provide any arguments and supporting evidence.</p> <p>b) If you responded to our Illegal Harms Consultation and this is relevant to your response here, please signpost to the relevant parts of your prior response.</p> <p>16. Do you agree with our assumption that the proposed governance measures for Children's Safety Codes could be implemented through the same process as the equivalent draft Illegal Content Codes?</p>	<p>Confidential? – Y / N</p> <p>15. Yes, we agree with the proposed governance measures.</p> <p>16. Yes.</p>
Children’s Risk Assessment Guidance and Children’s Risk Profiles’ (Section 12)	
<p>17. What do you think about our proposals in relation to the Children’s Risk Assessment Guidance?</p> <p>a) Please provide underlying arguments and evidence of efficacy or risks that support your view.</p> <p>18. What do you think about our proposals in relation to the Children’s Risk Profiles for Content Harmful to Children?</p> <p>a) Please provide underlying arguments and evidence of efficacy or risks that support your view.</p> <p>Specifically, we welcome evidence from regulated services on the following:</p> <p>19. Do you think the four-step risk assessment process and the Children’s</p>	<p>Confidential? – Y / N</p> <p>17. We agree with the proposals</p> <p>18. We agree with these proposals, and Kooth’s existing approach to moderation of content aligns with the described Content.</p> <p>19. The four-step risk assessment process and Children’s Risk Profiles are useful models, though many of the questions are open to interpretation, particularly if the person carrying out the risk assessment has limited experience of safeguarding, managing risk, and child development. Advice should be provided regarding the appropriate skills and training required of the staff undertaking the risk assessment.</p> <p>20. No.</p>

Question	Your response
<p>Risk Profiles are useful models to help services understand the risks that their services pose to children and comply with their child risk assessment obligations under the Act?</p> <p>20. Are there any specific aspects of the children’s risk assessment duties that you consider need additional guidance beyond what we have proposed in our draft?</p> <p>21. Are the Children’s Risk Profiles sufficiently clear and do you think the information provided on risk factors will help you understand the risks on your service?</p> <p>a) If you have comments or input related to the links between different kinds of content harmful to children and risk factors, please refer to Volume 3: Causes and Impacts of Harms to Children Online which includes the draft Children’s Register of Risks.</p>	<p>21. Yes.</p>
<p>Volume 5 – What should services do to mitigate the risk of online harms</p> <p>Our proposals for the Children’s Safety Codes (Section 13)</p>	
<p>Proposed measures</p> <p>22. Do you agree with our proposed package of measures for the first Children’s Safety Codes?</p> <p>a) If not, please explain why.</p> <p>Evidence gathering for future work.</p> <p>23. Do you currently employ measures or have additional evidence in the areas we have set out for future consideration?</p> <p>a) If so, please provide evidence of the impact, effectiveness and cost of</p>	<p>Confidential? – Y / N</p> <p>22. Yes. We would like to propose additional information to be included within the package of measures:</p> <ul style="list-style-type: none"> a. References to ‘swift action’ in relation to content moderation should provide further guidance re: the length of time in which action should be taken. b. The requirement to provide crisis prevention information in response to known Primary Priority Content search requests should apply to user-to-user

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<p>such measures, including any results from trialling or testing of measures.</p> <p>24. Are there other areas in which we should consider potential future measures for the Children’s Safety Codes?</p> <p>a) If so, please explain why and provide supporting evidence.</p>	<p>services as well as general search services.</p> <p>c. Clarification of circumstances when HEAA is not a requirement, for instance when content is pre-moderated and age-gated in line with Ofcom’s proposed guidance.</p> <p>23. Yes, we employ measures with regards to content moderation and provision of support for all types of harmful content, including non designated content.</p> <p>24. We will continue our work to analyse our internal data identifying when children and young people seek psychological support due to distress following access to online content, and would be happy to share these findings with Ofcom to inform future measures.</p>

Developing the Children’s Safety Codes: Our framework (Section 14)

25. Do you agree with our approach to developing the proposed measures for the

Children’s Safety Codes?

a) If not, please explain why.

26. Do you agree with our approach and proposed changes to the draft Illegal Content Codes to further protect children and accommodate for potential synergies in how systems and processes manage both content harmful to children and illegal content?

a) Please explain your views.

27. Do you agree that most measures should apply to services that are either large services or smaller services that present a medium or high level of risk to children?

28. Do you agree with our definition of ‘large’ and with how we apply this in our recommendations?

29. Do you agree with our definition of ‘multi-risk’ and with how we apply this in our recommendations?

30. Do you agree with the proposed measures that we recommend for all services, even those that are small and low-risk?

Confidential? – Y / N

25. Yes

26. Yes.

27. Yes. We believe that the measures should also apply to all smaller services that are explicitly developed for and marketed towards children.

28. Yes.

29. Yes.

30. Yes.

Age assurance measures (Section 15)

31. Do you agree with our proposal to recommend the use of highly effective age assurance to support Measures AA1-6? Please provide any information or evidence to support your views.

a) Are there any cases in which HEAA may not be appropriate and proportionate?

b) In this case, are there alternative approaches to age assurance which would be better suited?

32. Do you agree with the scope of the services captured by AA1-6?

33. Do you have any information or evidence on different ways that services could use highly effective age assurance to meet the outcome that children are prevented from encountering identified PPC, or protected from encountering identified PC under Measures AA3 and AA4, respectively?

34. Do you have any comments on our assessment of the implications of the proposed Measures AA1-6 on children, adults or services?

a) Please provide any supporting information or evidence in support of your views.

35. Do you have any information or evidence on other ways that services could consider different age groups when using age assurance to protect children in age groups judged to be at risk of harm from encountering PC?

Confidential? – Y / N

31. Yes.

- a. Evidence generated by MHRA with regards to digital mental health technologies highlighted that for children and young people, anonymity is an important feature in enabling them to seek mental health support. As such, it's essential that HEAA can be adopted proportionately, with options for children and young people to anonymously access services that have appropriate protections from harmful content.

32. Yes.

33. Yes.

34. No.

We would welcome further clarity from Ofcom on what would be considered as Highly Effective Age Assurance. We agree with Ofcom's stance in terms of this being the responsibility for providers to demonstrate assurance. However, this risks a patchy landscape for children and young people to navigate when they are assessing themselves as to whether a service is safe enough. Additionally, a more concrete position on what is HEAA would surely lead to better protection for those services that HEAA is relevant for.

Content moderation U2U (Section 16)

<p>36. Do you agree with our proposals? Please provide the underlying arguments and evidence that support your views.</p> <p>37. Do you agree with the proposed addition of Measure 4G to the Illegal Content Codes?</p> <p>a) Please provide any arguments and supporting evidence.</p>	<p>Confidential? – Y / N</p> <p>35. Yes. 36. Yes.</p>
<p>Search moderation (Section 17)</p>	
<p>38. Do you agree with our proposals? Please provide the underlying arguments and evidence that support your views.</p> <p>39. Are there additional steps that services take to protect children from the harms set out in the Act?</p> <p>a) If so, how effective are they?</p> <p>40. Regarding Measure SM2, do you agree that it is proportionate to preclude users believed to be a child from turning the safe search settings off?</p> <p>The use of Generative AI (GenAI), see Introduction to Volume 5, to facilitate search is an emerging development, which may include where search services have integrated GenAI into their functionalities, as well as where standalone GenAI services perform search functions. There is currently limited evidence on how the use of GenAI in search services may affect the implementation of the safety measures as set out in this code. We welcome further evidence from stakeholders on the following questions and please provider</p>	<p>Confidential? – Y / N</p> <p>N/A – Kooth’s experience is in development and delivery of U2U services rather than Search.</p>

<p>arguments and evidence to support your views:</p> <p>41. Do you consider that it is technically feasible to apply the proposed code measures in respect of GenAI functionalities which are likely to perform or be integrated into search functions?</p> <p>42. What additional search moderation measures might be applicable where GenAI performs or is integrated into search functions?</p>	
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User reporting and complaints (Section 18)	
<p>43. Do you agree with the proposed user reporting measures to be included in the draft Children’s Safety Codes?</p> <p>a) Please confirm which proposed measure your views relate to and explain your views and provide any arguments and supporting evidence.</p> <p>b) If you responded to our Illegal Harms Consultation and this is relevant to your response here, please signpost to the relevant parts of your prior response.</p> <p>44. Do you agree with our proposals to apply each of Measures UR2 (e) and UR3 (b) to all services likely to be accessed by children for all types of complaints?</p> <p>a) Please confirm which proposed measure your views relate to and explain your views and provide any arguments and supporting evidence.</p> <p>b) If you responded to our Illegal Harms Consultation and this is relevant to your response here, please</p>	<p>Confidential? – Y / N</p> <p>43. Yes</p> <p>44. Yes</p> <p>45. Yes</p>

signpost to the relevant parts of your prior response.

45. Do you agree with the inclusion of the proposed changes to Measures UR2 and UR3 in the Illegal Content Codes (Measures 5B and 5C)?

a) Please provide any arguments and supporting evidence.

Terms of service and publicly available statements (Section 19)

46. Do you agree with the proposed Terms of Service / Publicly Available Statements measures to be included in the Children’s Safety Codes?

Confidential? – Y / N

a) Please confirm which proposed measures your views relate to and provide any arguments and supporting evidence.

46. Yes

b) If you responded to our illegal harms consultation and this is relevant to your response here, please signpost to the relevant parts of your prior response.

47. No

48. Yes

47. Can you identify any further characteristics that may improve the clarity and accessibility of terms and statements for children?

48. Do you agree with the proposed addition of Measure 6AA to the Illegal Content Codes?

a) Please provide any arguments and supporting evidence.

Recommender systems (Section 20)

49. Do you agree with the proposed recommender systems measures to be included in the Children’s Safety Codes?

Confidential? – Y / N

a) Please confirm which proposed measure your views relate to and provide any arguments and supporting evidence.

49. Yes

b) If you responded to our illegal harms consultation and this is relevant to your response here, please signpost

50. N/A - Kooth does not use recommender systems

51. N/A - Kooth does not use recommender system

52. N/A - Kooth does not use recommender systems

<p>to the relevant parts of your prior response.</p> <p>50. Are there any intervention points in the design of recommender systems that we have not considered here that could effectively prevent children from being recommended primary priority content and protect children from encountering priority and non-designated content?</p> <p>51. Is there any evidence that suggests recommender systems are a risk factor associated with bullying? If so, please provide this in response to Measures RS2 and RS3 proposed in this chapter.</p> <p>52. We plan to include in our RS2 and RS3, that services limit the prominence of content that we are proposing to be classified as non-designated content (NDC), namely depressive content and body image content. This is subject to our consultation on the classification of these content categories as NDC. Do you agree with this proposal? Please provide the underlying arguments and evidence of the relevance of this content to Measures RS2 and RS3.</p> <ul style="list-style-type: none"> • Please provide the underlying arguments and evidence of the relevance of this content to Measures RS2 and RS3. 	
<p>User support (Section 21)</p>	
<p>53. Do you agree with the proposed user support measures to be included in the Children’s Safety Codes?</p> <p>a) Please confirm which proposed measure your views relate to and provide any arguments and supporting evidence.</p>	<p>Confidential? – Y / N</p> <p>53. Yes</p>

<p>b) If you responded to our Illegal harms consultation and this is relevant to your response here, please signpost to the relevant parts of your prior response.</p>	
<p>Search features, functionalities and user support (Section 22)</p>	
<p>54. Do you agree with our proposals? Please provide underlying arguments and evidence to support your views.</p> <p>55. Do you have additional evidence relating to children’s use of search services and the impact of search functionalities on children’s behaviour?</p> <p>56. Are there additional steps that you take to protect children from harms as set out in the Act?</p> <p>a) If so, how effective are they?</p> <p>As referenced in the Overview of Codes, Section 13 and Section 17, the use of GenAI to facilitate search is an emerging development and there is currently limited evidence on how the use of GenAI in search services may affect the implementation of the safety measures as set out in this section. We welcome further evidence from stakeholders on the following questions and please provide arguments and evidence to support your views:</p> <p>57. Do you consider that it is technically feasible to apply the proposed codes measures in respect of GenAI functionalities which are likely to perform or be integrated into search functions? Please provide arguments and evidence to support your views.</p>	<p>Confidential? – Y / N</p> <p>N/A – Kooth’s experience is in development and delivery of U2U services rather than Search.</p>

Combined Impact Assessment (Section 23)

58. Do you agree that our package of proposed measures is proportionate, taking into account the impact on children's safety online as well as the implications on different kinds of services?

Confidential? – Y / N

58. Yes

Statutory tests (Section 24)

59. Do you agree that our proposals, in particular our proposed recommendations for the draft Children's Safety Codes, are appropriate in the light of the matters to which we must have regard?

Confidential? – Y / N

59. Yes

a) If not, please explain why.

Annexes

Impact Assessments (Annex A14)

60. In relation to our equality impact assessment, do you agree that some of our proposals would have a positive impact on certain groups?

Confidential? – Y / N

60. Yes

61. In relation to our Welsh language assessment, do you agree that our proposals are likely to have positive, or more positive impacts on opportunities to use Welsh and treating Welsh no less favourably than English?

61. Yes

a) If you disagree, please explain why, including how you consider these proposals could be revised to have positive effects or more positive effects, or no adverse effects or fewer adverse effects on opportunities to

use Welsh and treating Welsh no less favourably than English.	
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