

Consultation response form

Your response

Question	Your response
The incidence of content that is harmful to children on regulated services We invite stakeholders to provide evidence relating to the incidence of PPC, PC or NDC on regulated user-to-user, search or combined services. Please provide as much detail as you can. This could include but is not limited to evidence about:	
The quantity, prevalence or presence of specific kind(s) of PPC, PC or NDC on regulated services and the frequency with which children are encountering this content.	Confidential? – Y / N
How demographic characteristics such as age, gender, race, sexual orientation and disability influence the likelihood that children will encounter specific kind(s) of PPC, PC or NDC.	Confidential? – Y / N
The services or types of service where children are most likely to encounter specific kind(s) of PPC, PC or NDC.	Confidential? – Y / N

Question	Your response
The severity of harm that UK children suffer, or may suffer, as a result of content that is harmful to children We invite stakeholders to provide any evidence regarding the severity of harm that UK children suffer, or may suffer, as a result of encountering PPC, PC or NDC. Please provide as much detail as you can. This could include but is not limited to evidence about:	
The impact that specific kind(s) of PPC, PC or NDC can have on a child's wellbeing, behaviours, or other physical or psychological outcomes. This might include evidence concerning cumulative exposure to specific kind(s) or combinations of PPC, PC or NDC.	The UKRI Adolescence, Mental Health and Developing Mind initiative has funded new research of relevance to this call for evidence. Young people's views on TikTok algorithms and eating disorder content New evidence from the EDIFY research programme shows the patterns of engagement that young adults have with eating disorder (ED) content on TikTok. Although these interviews were conducted with 18-to-25 year-olds, findings may be useful in understanding the types of engagement that young people (YP) report. Participants described engaging regularly with ED content on TikTok. Their interactions showed that the personalised nature of TikTok's algorithm can interact with and exacerbate some ED behaviours and psychologies, leading some YP into what they describe as negative echo-chambers of ED content. Three dominant themes that account for participants' encounters with this type of content, and which seek to capture both participants' immediate experiences and the longer-term effects of consuming this content: • 'View One, See More' - not being able to control the constant flow of content that is initiated even if they have only engaged with it once or twice • 'Morbidity Curiosity' - even for participants who describe more deliberate engagement with pro-

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	ED videos, they still present themselves as powerless to subsequently shift out of the echo chamber of ED content that the algorithm creates for them • 'From Helpful to Unhelpful' – the algorithm's lack of distinction between 'helpful' and 'harmful' content meaning that young people are exposed to harmful content without wanting to see it All three themes contributed to young people's experience of diminished personal agency regarding exposure to unwanted ED content (Parnell et al., 2025). Online activities, digital agency and mental health The DIORA (Dynamic Interplay of Online Risk and Resilience in Adolescence) project, part of the Digital Youth initiative investigates how young people's online activities shape their mental health and wellbeing. The DIORA team have reviewed studies of digital experiences among young people with pre-existing clinical vulnerabilities. These include opportunities for social connection and support, and distraction from mental health problems. However, included studies showed that some clinically vulnerable young people find it difficult to self-regulate their digital engagement, and their experiences online can exacerbate psychological difficulties or lead to the normalisation of pathological behaviour (Kostyrka-Allchorne, 2023). To improve understanding of the links between young people's digital activities and their mental health that go beyond simple measures of screen time, the team have co-developed two new self-report questionnaires with a youth panel of young people aged 12-17 years. • <i>Digital Activities and Feelings Inventory</i> (DAFI) designed specifically to distinguish digital activities that may be risky to mental health and psychological wellbeing from those that are either neutral or protective in this context. Using the DAFI, study participants report on their digital activities in the past 2 weeks: (i) their specific digital activities and (ii) the affective and cognitive reactions being online has induced. (Kostyrka-Allchorne et al. 2025).

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	• The <i>Digital Insight and Agency Scale</i> (DIAS) measures young people's awareness of and attempts to manage the impact of their online experiences on their daily functioning and mental health (Tang et al., 2025). Their work draws on a pilot study with 383 adolescents and young adults aged 16-25, and a longitudinal study of 552 Year 9 students (age 13-14), surveyed three times over the course of one year. It also includes a qualitative strand involving focus groups with 110 children age 13-14, offering in-depth insights into their everyday digital experiences and strategies for coping online. Their research shows that young people's digital lives are deeply interwoven with their mental health and offline behaviours in both positive and negative ways. To view these findings online, click here. Key findings 1. What young people do online and how it makes them feel matters • Associations between screen time and mental health are negligible and not significant once digital activities and emotional reactions are considered. It's not about how long children spend online but what they do and how it affects them. • Social engagement such as chatting with family and friends and sharing posts, is the most common digital activity and is modestly associated with better wellbeing. • Social comparisons, such as comparing appearance or popularity, are frequent and strongly associated with increased depression and lower wellbeing. • Negative feelings about the self (for example, feeling judged, insecure, rejected) and feeling stressed are common, and strongly linked to poorer mental health. • Conversely, positive feelings (for example feeling calm, supported, or loved) are also frequent and associated with lower depression and higher wellbeing.

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	- Importantly, feelings and thoughts evoked by online experiences predict mental health outcomes far more effectively than screen time alone. 2. Young people show agency in managing digital risks 78% of the young people in the study were worried about the impact of digital activity on their mental health, and 82% took at least one action to address this in the past two weeks. - Actions included seeking positive content, avoiding harmful interactions, taking social media breaks, blocking or reporting others. - These strategies were more common among those with higher anxiety symptoms or recent exposure to risky digital content, indicating that youth agency acts as a protective response. - Notably, those who had both positive and negative experiences online were more likely to engage in risk management suggesting a nuanced, reflective relationship with digital media, not a passive one. 3. Social comparison is a strong correlate of depression and anxiety symptoms - Young people who engage in more risky digital activities, including risky content, risky interactions and social comparison, tend to have higher depressive and anxiety symptoms. Social comparison is most strongly associated with depression and anxiety symptoms, after considering the influence of other digital, as well as non-digital activities. This was found both in younger (age 13-14) and older (age 16-25) adolescents. - Engaging in more social comparison online predicts subsequent increases in depressive and anxiety symptoms in adolescents. References Kostyrka-Allchorne, K., Bourgaize, J., Murray, A., Stoilova, M., Abbas, I., Bridgwood, A., ... & Digital Youth Research Programme. (2025). Understanding Youth Online Experiences and Mental Health: Development and Validation

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	of the Digital Activity and Feelings Inventory (DAFI). <i>International Journal of Methods in Psychiatric Research</i>, 34(2), e70028. Link Kostyrka-Allchorne, K., Stoilova, M., Bourgaize, J., Rahali, M., Livingstone, S., & Sonuga-Barke, E. (2023). Digital experiences and their impact on the lives of adolescents with pre-existing anxiety, depression, eating and nonsuicidal self-injury conditions—a systematic review. <i>Child and Adolescent Mental Health</i>, 28(1), 22-32. Link Parnell, T., Hunt, D., Wilkins, J., Ince, B., Sharpe, H., Schmidt, U., & Bartel, H. (2025). 'Falling down the rabbit hole': a thematic analysis of young people's views on TikTok algorithms and eating disorder content. <i>Journal of Eating Disorders</i>. Link Tang, P., Kostyrka-Allchorne, K., Bourgaize, J., Murray, A., Stoilova, M., Etherson, M.E., Azeri, E., Abbas, I., Bridgwood, A., Hollis, C. and Townsend, E., (2025) 'Digital Insight and Agency Scale'(DIAS): a novel tool to illuminate young people's agency in mitigating the negative impact of digital activities on their mental health. <i>International Journal of Methods in Psychiatric Research</i>. Link
Any causal links between a child encountering specific kind(s) of PPC, PC or NDC and subsequently suffering physical or psychological harm.	Confidential? – Y / N
How demographic characteristics such as age, gender, race, sexual orientation and disability can influence the severity of harm that UK children suffer, or may suffer, as a result of encountering specific kind(s) of PPC, PC or NDC.	Confidential? – Y / N
Whether it is appropriate to make changes to the kinds of PPC and PC in the Act	

Question	Your response
We invite stakeholders to provide evidence that suggests any kind(s) of PPC and/or PC in the Act are inappropriate or incorrectly categorised. This could include but is not limited to evidence indicating that:	
Any kind of PPC or PC in the Act should cease to be categorised as content harmful to children.	Confidential? – Y / N
Any kind of PPC would be more appropriately categorised as PC.	Confidential? – Y / N
Any kind of PC would be more appropriately categorised as PPC.	Confidential? – Y / N
We invite stakeholders to provide evidence in support of additional kind(s) of content being added to the PPC or PC categories in the Act. This should include, but is not limited to:	
Evidence that the kind(s) of content pose a material risk to an appreciable number of children.	Confidential? – Y / N
Evidence that the kind(s) of content pose a risk of significant harm to children.	Confidential? – Y / N
Evidence to support each kind of content being categorised as either PPC or PC.	Confidential? – Y / N

Please tell us how you came across about this call for evidence.

- ☐ Email from Ofcom
- ☐ Saw it on social media
- ☐ Found it on Ofcom's website
- ☐ Found it on another website

- ☐ Heard about it on TV or radio
- ☐ Read about it in a newspaper or magazine
- ☐ Heard about it at an event
- ☐ **Somebody told me or shared it with me** Via MoreThanRobots email bulletin
- ☐ Other (please specify)

Please complete this form in full and return to ContentHarmfultoChildren@ofcom.org.uk.