

News and Perspectives

Canadian Medical Association Calls for Social Media Policies to “Heal Childhood”

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Abstract

The debate on social media bans for children is heated and ongoing, dividing researchers, clinicians, social media companies, and regulators. In this *News and Perspectives* article, JMIR Correspondent Wendy Glauser reports on the Canadian Medical Association’s “Heal Childhood” campaign in support of more stringent social media safeguards for children and youth.

Key Takeaways:

- The Canadian Medical Association is calling for stronger safeguards against online harms, including restrictions on social media access for children under 16 years of age and physician involvement in digital safety regulation.
- While the evidence suggesting social media use may negatively impact children’s mental health is preliminary, physicians say their on-the-ground observations are enough to warrant protections.

Numerous Canadian doctors say the consequences of harmful online environments are increasingly showing up in clinics and hospitals, and they’re sounding the alarm.

Through the [Heal Childhood campaign](#), launched in June 2026, the Canadian Medical Association (CMA) is urging Canada’s Parliament to pass [Bill C-34](#), which would ban children under 16 from creating social media accounts, unless the platform can show that it has adequate safeguards in place to protect children’s mental health. The legislation would also require AI chatbots and social media platforms to better prevent cyberbullying and content that encourages self-harm or sexually victimizes children. It further proposes a Digital Safety Commission that would shape regulations governing social media and online technology on an ongoing basis. The [bill](#) was introduced in June 2025 by Marc Miller, Canada’s Minister of Canadian Identity and Culture.

Bolu Ogunyemi, MD, president of the CMA, says that in addition to supporting the ban, Canada’s physicians want to be part of the Digital Safety Commission. The Heal Childhood campaign includes social media posts and a website outlining physicians’ concerns. Ogunyemi and other physicians have also been meeting with politicians from all major political parties to express their support for the legislation.

Physicians who treat children say that “mental illness is now a greater proportion of their practice compared to earlier in their careers,” Ogunyemi explains. Anxiety, suicide attempts, and eating disorders are increasingly contributing to the physical ailments that specialists treat, he says.

Meanwhile, pediatricians and child psychiatrists say that “children’s attention is down, their sleep is down. They’re missing school. Their ADHD [attention-deficit/hyperactivity disorder] is getting worse,” Ogunyemi says. In his own

dermatology practice, he says young people, especially girls, “have skin image concerns related to things they’re seeing online...and they come to me to try to medically manage something that’s perfectly normal.”

Ogunyemi recognizes that other factors contribute to poor mental health and attention issues, including low levels of physical activity. While these other factors need to be simultaneously addressed, it’s “common sense” that social media is a major contributor, he says. “When children are saying I didn’t go to school yesterday because I was up all night scrolling or chatting, yes that’s anecdotal, but anecdotes still have a place overall in policy.”

Sterling Sparshu, MD, a child and adolescent psychiatrist practicing in Calgary, Alberta, says he regularly sees social media exacerbating existing mental health problems in his practice. While he sees that comparisons with peers’ online personas worsen depression and anxiety, “sleep is probably the biggest issue that I see disrupted by screens,” he says. Children receive chat notifications that wake them, or they stay up late watching TikTok videos on autoplay.

In some cases, Sparshu says, children “may be looking for healthy things but they end up in dark places.” For example, a young person interested in nutrition may be guided by an algorithm that increasingly presents content encouraging disordered eating, he explains.

Sparshu acknowledges it’s often difficult to tell how much social media and AI chatbot use contribute to mental health problems versus how much underlying mental health issues lead to unhealthy technology use. “It’s a bit of a chicken-and-the-egg scenario,” he says, explaining that a young person experiencing depression may spend more time online seeking support.

Sparshu wants stronger regulation for push notifications, autoplay video features, gamification that nudges people to stay online, and algorithms optimized to maximize engagement. “We’ve increasingly been pushing what has become a public health issue onto families and asking them to somehow outengineer technology companies in order to protect their children,” Sparshu says, speaking of parental efforts like screen time limits, blocking apps, and online activity monitoring.

What the Research Says

Overall, the evidence suggests that social media has small negative effects on youth well-being on average, says Amori Mikami, PhD, a professor in the Department of Psychology at the University of British Columbia.

Evidence she finds particularly persuasive comes from studies assessing young people’s mental health at baseline and then again after participants restricted their social media use. For example, a [study](#) published in *JAMA Network Open* found that a one-week social media detox was associated with a ~16% reduction in anxiety symptoms and an almost 25% reduction in depression symptoms among young adults aged 18 to 24 years.

“It’s not every person and it’s not every study, but, on average, young people seem to feel a bit better [when they get off social media],” she says. Averages can mask marked effects on individuals, however. “There are some people who aren’t really affected, or they are able to get the positives out of social media. But there are other people who are quite negatively affected.”

Sparshu said that the evidence linking social media use and poor mental health in adolescents isn’t a slam dunk “partly because this technology has just developed so rapidly” that it’s hard for the research to keep up, and partly because social media companies aren’t sharing their usage or engagement data and aren’t transparent about their algorithms.

A Place to Start

While Mikami believes physicians are indeed seeing severe mental health symptoms that can be linked to online behavior, she adds that it’s important to keep in mind that physicians are often seeing those who require specialist care. “They’re seeing the people who are struggling the most,” she says.

Mikami doesn’t support a blanket age ban, because teenagers are likely to circumvent age restrictions, and bans don’t help

adolescents develop the skills necessary to navigate online environments safely.

“I understand why people feel an urgency that something needs to be done,” says Mikami. Her preferred approach, however, would include large-scale public health campaigns that teach young people and parents how to recognize online interactions that cause harm, and how they can employ strategies to use social media in a healthy way.

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Bolu Ogunyemi, MD

The issue is complex. Mikami led a [randomized trial](#) of 393 Canadians aged 17 to 29 years with elevated mental health symptoms. Those encouraged to abstain from social media for 6 weeks had reduced depression and anxiety symptoms but no improvement in loneliness, while those coached to build meaningful online connections had reductions in loneliness and fear of missing out but no improvement in depression or anxiety compared with the control group.

Mikami agrees that social media companies should be required to mitigate harms, which could mean putting time limits on children’s use and improving tools that block harmful content.

While a [previous News and Perspectives article](#) raised the risk that age bans could encourage young people to fabricate their age and enter online spaces with fewer protections, Ogunyemi doesn’t think such hypothetical possibilities should stand in the way of age bans.

He adds that the Digital Safety Commission can ensure that regulations balance privacy protections, evaluate the effects of bans and other efforts, and adapt solutions accordingly. “We need to start somewhere and we can’t let perfect get in the way of good,” he says.

Keywords: social media; digital media; child health; mental health; adolescent health; social media use; mental health services; health policy

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