

Pediatrics Gets it Wrong about ‘Facebook Depression’

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You know it’s not good when one of the most prestigious pediatric journals, *Pediatrics*, can’t differentiate between correlation and causation.

And yet this is exactly what the authors of a “clinical report” did in reporting on the impact of social media on children and teens. Especially in their discussion of “Facebook depression,” a term that the authors simply *made up* to describe the phenomenon observed when depressed people use social media.

Shoddy research? You bet. That’s why *Pediatrics* calls it a “clinical report” — because it’s at the level of a bad blog post written by people with a clear agenda. In this case, the report was written by Gwenn Schurgin O’Keeffe, Kathleen Clarke-Pearson and the American Academy of Pediatrics Council on Communications and Media (2011).

What makes this bad a report? Let’s just look at the issue of “Facebook depression,” their made-up term for a phenomenon that doesn’t exist.

The authors of the *Pediatrics* report use six citations to support their claim that social media sites like Facebook actually *cause* depression in children and teens. Four of the six citations are third-party news reports on research in this area. In other words, *the authors couldn’t even bother with reading the actual research to see if the research actually said what the news outlet reported it said.*

I expect to see this sort of lack of quality and laziness on blogs. Hey, a lot of time we’re busy and we just want to make a point — that I can understand.

When you go to the trouble not only of writing a report but also publishing it in a peer-reviewed journal, you’d think you’d go to the trouble of reading the research — not other people’s reporting on research.

Here’s what the researchers in *Pediatrics* had to say about “Facebook depression:”

Researchers have proposed a new phenomenon called “Facebook depression,” defined as depression that develops when preteens and teens spend a great deal of time on social media sites, such as Facebook, and then begin to exhibit classic symptoms of depression.

Acceptance by and contact with peers is an important element of adolescent life. The intensity of the online world is thought to be a factor that may trigger depression in some adolescents. As with offline depression, preadolescents and adolescents who suffer from Facebook depression are at risk for social isolation and sometimes turn to risky Internet sites and blogs for “help” that may promote substance abuse, unsafe sexual practices, or aggressive or self-destructive behaviors.

Time and time again researchers are finding much more nuanced relationships between social networking sites and depression. In the Selfhout et al. (2009) study they cite, for instance, the researchers only found the correlation between the two factors in people with *low quality* friendships. Teens with what the researchers characterized as high quality friendships showed no increase in depression with increased social networking time.

The *Pediatrics* authors also do what a lot of researchers do when promoting a specific bias or point of view — they simply ignore research that disagrees with their bias. Worse, they cite the supposed depression-social networking link as though it were a forgone conclusion — that researchers are all in agreement that this actually exists, and exists in a causative manner.

There are a multitude of studies that disagree with their point of view, however. One longitudinal study (Kraut et al., 1998) found that, over a period of 8–12 months, both loneliness and depression increased with time spent online among adolescent and adult first-time Internet users. In a one-year follow-up study (Kraut et al., 2002), however, the observed negative effects of Internet use had disappeared. In other words, this may not be a robust relationship (if it even exists) and may simply be something related to greater familiarity with the Internet.

Other research has shown that college students’ — who are often older teens — Internet use was directly and indirectly related to less depression (Morgan & Cotten, 2003; LaRose, Eastin, & Gregg, 2001).

Furthermore, studies have revealed that Internet use can lead to online relationship formation, and thereby to more social support ([Nie and Erbring, 2000], [Wellman et al., 2001] and [Wolak et al., 2003]) — which may subsequently lead to less internalizing problems.

In another study cited by the *Pediatrics* authors, simply reading the news report should've raised a red flag for them. Because the news report on the study quoted the study's author who specifically noted her study could not determine causation:

According to Morrison, pornography, online gaming and social networking site users had a higher incidence of moderate to severe depression than other users. "Our research indicates that excessive Internet use is associated with depression, but what we don't know is which comes first – are depressed people drawn to the Internet or does the Internet cause depression? What is clear is that for a small subset of people, excessive use of the Internet could be a warning signal for depressive tendencies," she added.

The other citations in the *Pediatrics* report are equally problematic (and one citation has nothing to do with social networking and depression [Davila, 2009]). None mention the phrase "Facebook depression" (as far as I could determine), and none could demonstrate a causative relationship between use of Facebook making a teenager or child feel more depressed. Zero.

I'm certain depressed people use Facebook, Twitter and other social networking websites. I'm certain people who are already feeling down or depressed might go online to talk to their friends, and try and be cheered up. This in no way suggests that by using more and more of Facebook, a person is going to get more depressed. That's just a silly conclusion to draw from the data to date, and we've previously discussed how use of the Internet has not been shown to *cause* depression, only that there's an association between the two.

If this is the level of "research" done to come to these conclusions about "Facebook depression," the entire report is suspect and should be questioned. This is not an objective clinical report; this is a piece of propaganda spouting a particular agenda and bias.

The problem now is that news outlets everywhere are picking up on "Facebook depression" and suggesting not only that it exists, but that researchers have found the online world somehow "triggers" depression in teens. *Pediatrics* and the American Academy of Pediatrics should be ashamed of this shoddy clinical report, and retract the entire section about "Facebook depression."

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