

Written Testimony in Support of LD 2212 – part GG prohibition of phones during the school day

Dear Members of the Committee,

Thank you for the opportunity to submit testimony in support of LD 2212 part GG, regarding prohibition of phone use during the school day. As a psychiatrist I see the impact of smartphones and constant connectivity on the mental health of our Maine youth and adults every day.

Availability of moment to moment, round-the-clock social feedback, from people both known and unknown by the individual, has profoundly changed the experience of childhood development. Negative social feedback and bullying have always been a component of childhood. However, the phenomenon of cyberbullying, which is strongly linked to anxiety, depression, self-harm and suicidality, is fundamentally different from school yard bullying. There is no natural reprieve when children return home. The comments, disembodied from face-to-face relationships, are often crueler, ubiquitous, and unrelenting.

There has been a surge in children, teens, and adults seeking evaluation for ADHD. Some of these individuals do benefit from treatment for ADHD. However, many are simply experiencing the effects of living in a world where distractions abound. Among my first line recommendations to most children and adults I treat is to limit media exposure and smartphone use. Unrestricted use during the school day is a major challenge to educators, and even students tell me they would welcome restrictions, if the restrictions were universally enforced.

Teenagers report spending up to 10-12 hours per day on screens, an amount of time that suggests they are on their phones during the school day, and/or sacrificing critical sleeping hours. Problematic social media, smartphone, and online gaming use in 11- and 12-year olds is associated with increased risk of depressive symptoms, physical complaints, attentional concerns, oppositional behaviors, sleep disturbances, substance use, and suicidal behaviors (Nagata et al American Journal of Preventive Medicine 2026).

Psychiatric medication cannot cure the effects of social media, cyberbullying, and destructive impact on attention that results from spending this much time on screens. Prevention is key. Pediatricians, therapists, school counselors, teachers and school administrators are all advocating for a reduction in the amount of time young people spend on screens. Teachers feel hopeless to “police” phone use on their own. **This bill offers a rare opportunity to support our educators by making schools phone-free.**

School systems that have adopted phone free schools have seen bullying and cyberbullying rates fall to one-quarter of their previous levels prior to school-wide phone bans. Adolescents tell us they would be relieved to have a phone-free school environment, but feel pressure to not be left out.

Implementing phone-free schools is a resource-saving measure. Prevention is more cost effective than crisis interventions and intensive treatments after psychiatric conditions have developed. Making schools phone-free is a straightforward, impactful policy decision that can help create safer, healthier environments where students can focus, learn, and build stronger relationships face to face.

Parents and caregivers are eager for support and guidance on how to teach children about responsible technology use. Schools are eager to partner with parents and caregivers to limit extracurricular technology use and support the efforts of families to foster learning environments in which children can thrive. You can support our students, educators, and parents by supporting LD 2212.

Sincerely,

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