

Written Testimony in Support of a Bell-to-Bell Cell Phone Policy in Maine Schools

Submitted by:

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Board-Certified Family Physician

Senator Rotundo, Representative Gattine, and esteemed members of the Appropriations and Financial Affairs Committee:

Thank you for the opportunity to submit written testimony in support of funding and implementation of a bell-to-bell cell phone restriction policy in Maine schools.

I am a board-certified family physician practicing in Maine, where I care for adolescents and families daily. For more than twenty years, I have treated children and teenagers across this state. I also teach medical students and am the mother of three girls currently enrolled in Maine public schools. This testimony reflects both clinical evidence and direct experience within our school system.

Over the past decade, I have witnessed a measurable escalation in adolescent anxiety, depression, sleep disturbance, and attentional impairment. These are no longer isolated concerns; they are routine components of primary care. While multiple factors contribute, the unrestricted presence of smartphones during the school day is a consistent and modifiable driver.

Adolescent brain development remains incomplete, particularly in regions governing impulse control, emotional regulation, and sustained attention. Smartphones and social media platforms are intentionally engineered to maximize engagement through intermittent reward mechanisms that stimulate dopamine pathways. Research demonstrates that even the mere presence of a smartphone reduces working memory capacity and cognitive performance. In a classroom environment, unrestricted access predictably undermines sustained focus and academic engagement.

This is not a matter of preference or discipline. It is a developmental health issue with measurable educational and fiscal consequences.

Rising adolescent mental health needs are contributing to increased demand for school-based counseling, psychiatric referrals, special education services, and emergency

department visits. These downstream effects strain school budgets, increase Medicaid expenditures, and burden community health systems. A bell-to-bell cell phone policy represents a low-cost, upstream intervention that addresses one modifiable contributor to these pressures. Secure storage systems are durable and scalable; their cost is modest compared to the ongoing expansion of mental health and remediation services.

I have also observed how unrestricted device access during the school day has negatively affected focus, peer interaction, and classroom engagement within my own household. The impact is evident in exam rooms, classrooms, and homes throughout Maine.

Schools exist to provide structured environments that support cognitive development, social growth, and academic integrity. We do not allow known cognitive disruptors to interfere with learning. A bell-to-bell phone policy is consistent with that responsibility and represents a prudent, preventive investment in student well-being and public resources.

Thank you for your consideration.

Respectfully,
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