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Psychiatry Commission

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Global action on problematic usage of the internet: announcing a *Lancet Psychiatry* Commission



Digital technologies and societal problems are increasingly interconnected, and this nexus has important implications for mental health globally.^{1,2} Concerns exist about problematic usage of the internet (PUI), digital technology-related disorders, and their public health and societal costs.³ One 2020 meta-analysis found that around 7% of the world's population show signs of internet addiction, and prevalence estimates have shown an increase over time, especially among young people.⁴ Specific types of PUI, such as problematic smartphone use, might have an even higher prevalence.⁵ Increased awareness of the association between PUI and mental disorders in general and the potential negative effects of social media use in particular has led to calls for more action to protect individuals, particularly children and youth, from online harm.^{6,7}

Specific types of PUI have been recognised as mental and behavioural disorders in the ICD-11. These include online forms of gambling disorder and gaming disorder, which are classified primarily as disorders due to addictive behaviours and secondarily as impulse control disorders, and compulsive sexual behaviour disorder, which is classified as an impulse control disorder and often expressed online. Other digital technology-related behaviours might be considered as other specified disorders due to addictive behaviours, including compulsive buying or shopping behaviours and problematic usage of social media.⁸ Important advances have been made in developing clinical measures for these conditions, and research is accumulating on the overlapping and distinctive psychobiology, psychotherapy, pharmacotherapy, and neuromodulation related to specific types of PUI.³

Despite important efforts, much more work is needed from multiple stakeholders in clinical, public health, governmental, and other sectors.⁹ Key questions for society to address include the biological, psychological, social, and commercial risk and resilience factors that lead to or mitigate against PUI, the individual and public health consequences of PUI, and the nature and outcomes of health systems and services for individuals with PUI. A key area is the relevance to PUI of

regulatory frameworks related to substances, gambling, and harmful consumer products: aspects of these regulatory frameworks might be applicable to PUI, but several unique aspects of PUI seem to require specific approaches. Particular concerns are the ready access of minors to the internet, the use of addictive design and manipulative algorithms by technology companies to encourage and direct online attention, and the ever-increasing power of artificial intelligence (AI) to strengthen such designs and algorithms.

The *Lancet Psychiatry* Commission on global action on problematic usage of the internet aims to provide evidence-based recommendations to improve health practices and advance health policy globally in this crucial area. The Commission will assemble a multidisciplinary and international group of authors—with expertise in compulsive, impulsive, and addictive behaviours, public health and policy—as well as an advisory group including people with lived experience of being negatively affected by PUI. The confluence of recent investment in networked research to detect risk and prevent PUI in teenagers at an international level,¹⁰ advances in large language models, and ongoing legislative attempts to address online safety and to regulate AI in the USA, Europe, and Asia make this effort timely.

The ultimate goal of the Commission is to set a clear agenda to guide the development and provision of evidence-based health and social care for those affected by digital harms, and to guide action to reduce population-level digital technology-related harms through public health, regulatory measures, and preventive or therapeutic interventions. The Commission aims to summarise knowledge in this area, consider diagnostic and assessment challenges, encourage implementation of evidence-based interventions and regulations, and make research recommendations to address gaps in our knowledge and practices. We are particularly concerned about vulnerable groups, such as developing young people. The Commission welcomes written input from clinicians and policy makers with an interest in this area, as well as from those with lived experience of PUI. Through

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the involvement of a diverse group of stakeholders, the Commission aims to provide a framework to limit potential harms while simultaneously affording civil liberties and harnessing positive aspects of digital technologies.

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