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*“Like twined cords we are stronger,
Together we shall conquer!”*

Position Paper submitted by the
Philippine Psychiatric Association (PPA) and
Philippine Society for Child and Adolescent Psychiatry (PSCAP):
on the Consolidated House Bills on
Child Online Safety and Protection in the Digital Environment

*Submitted to: The House of Representatives Committee on
Welfare of Children, 2nd Technical Working Group*

*Presented to: Hon. Roman T. Romulo, Chairperson, TWG,
Committee on Welfare of Children, House of Representatives*

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I. STATEMENT OF POSITION

The Philippine Psychiatric Association (PPA), together with the Philippine Society for Child and Adolescent Psychiatry (PSCAP), expresses appreciation to the Committee on Welfare of Children for convening the Technical Working Group and for inviting psychiatric expertise into deliberations on child online safety. Social media is central to Filipino adolescents’ daily lives, where friendships are built, schoolwork is exchanged, and self-image takes shape. This makes platform design a child development issue, not merely one of technology or privacy.

The position is grounded in a biopsychosocialspiritual approach, which attends to the child’s brain, mind, relationships, and sense of meaning, reinforced by active parenting and coordinated support from schools, DepEd, CHED, and local government units. Legislative and regulatory efforts that strengthen child safety on digital platforms are fully supported, ensuring that psychiatric perspectives are incorporated into both policy and practice.

II. BIOPSYCHOSOCIALSPIRITUAL VIEW OF DIGITAL EXPOSURE

The digital environment has become integral to the lives of Filipino children and adolescents. It enables creativity, connection, and learning, yet may also affect mental health and displace milestones of normal development. Heavy social media and gaming use influences biological, psychological, social, and spiritual dimensions of growth, with Philippine findings and international evidence underscoring these risks.

A. Biological and Neurodevelopmental

Adolescent brains develop unevenly. The brain systems tied to reward and social feedback (including the amygdala and nucleus accumbens) mature early, while the prefrontal cortex, responsible for impulse control and long-term planning, continues developing into a person's mid-twenties. This gap is a normal part of adolescence, but it also means teenagers are more susceptible to designs that reward frequent checking.

Features such as infinite scroll, push notifications, and unpredictable "like" counts work on a variable reward schedule, the same principle behind habit-forming behaviors. A 2023 longitudinal fMRI study of early adolescents (Maza et al., JAMA Pediatrics, following 12- to 13-year-olds over three years) found that teens who checked social media habitually developed a different trajectory in the brain's reward-processing circuitry over time: their neural response to anticipated social feedback became progressively blunted compared to peers who checked less often. This pattern mirrors what psychiatry observes in other compulsive behaviors, where the brain requires increasing stimulation to achieve the same sense of reward. This is emerging evidence that continues to evolve, rather than as a definitive conclusion

The American Academy of Pediatrics' 2026 policy statement and companion technical report, Digital Ecosystems, Children, and Adolescents (Munzer et al., Pediatrics), situates this evidence within a socioecological model: children's own developmental characteristics, their caregivers, the design of the digital ecosystem itself, and broader societal systems all interact to shape outcomes. The statement observes that platforms designed to prioritize engagement and commercialization encourage prolonged use, which displaces healthy behaviors such as movement and sleep. This reframes the policy question away from individual "screen limits" alone and toward the design obligations of platforms.

Late-night screen use also delays melatonin release and fragments sleep, and adolescent sleep is when a great deal of memory consolidation and synaptic pruning happens. Poor sleep in this age group is reliably linked to worse mood regulation and academic difficulty.

B. Psychological

The U.S. Surgeon General's 2023 Advisory on Social Media and Youth Mental Health, drawing on a cohort study of over 6,500 adolescents aged 12–15, found that teens who spend more than three hours a day on social media face roughly double the risk of depression and anxiety symptoms compared to lighter users. Recommendation algorithms can also funnel vulnerable teens toward content connected to body dissatisfaction, disordered eating, and self-harm, and the constant switching between posts and notifications makes it harder to sustain the focus needed for schoolwork and learning.

The World Health Organization's 2025 regional evidence review, Addressing the Digital Determinants of Young People's Mental Health and Well-Being, similarly finds the relationship between technology use and mental health to be bidirectional: increased use can exacerbate mental health difficulties, which in turn can drive further use, with the most vulnerable young people disproportionately affected. The companion Health Behaviour in School-aged Children international survey report (Boniel-Nissim et al., 2024) reinforces that patterns of social media and gaming use, not simply time spent, are what distinguish healthy engagement from harmful use.

Local findings point the same way, with a useful nuance. A 2022 study of over 1,000 young Filipino adults (Cleofas, Dayrit, & Albao, Health Promotion Perspectives) found that problematic, compulsive-style social media use was linked to poorer mental wellbeing, while more reflective, intentional use was linked to better wellbeing. A related 2023 study of Filipino university students (Abad Santos et al., Frontiers in Sociology) found a similar split: internet use that built genuine online social support was linked to better wellbeing, while heavy unmediated use on its own was linked to greater psychological distress. Both studies focus on young adults rather than minors, but the same use-pattern distinction remains directly relevant to defining what counts as 'problematic' or 'compulsive' use in adolescents. This distinction offers a practical basis for **designing rules that limit compulsive, algorithm-driven use while preserving the genuinely supportive functions of these platforms.**

C. Social

Human social instincts evolved for small, stable groups. Social media exposes teenagers to a much larger, curated field of peers, which can intensify comparison and feelings of exclusion. Time spent online can also displace the face-to-face interaction adolescents need to read social cues and build secure relationships, while the anonymity many platforms allow makes bullying and online predation easier to get away with.

Gaming platforms carry a parallel social risk that is distinct from social media. UNICEF Innocenti's 2025 working paper, Protecting Children in Online Gaming: Mitigating Risks from Organized Violence, documents

how the social and technical features of multiplayer gaming platforms — voice chat, guild systems, private messaging — are exploited by organized violent groups to propagandize, groom, recruit, and organize, and notes that children rarely seek out such exposure; it is imposed on them. This distinction matters for legislative drafting, since gaming platforms may require safeguards distinct from, though complementary to, those designed for social media.

This is not an abstract risk for Filipino children. In a UNICEF Philippines U-Report poll of over 1,200 children released in April 2025, 85.56% of respondents said they had encountered unsafe online content or behavior, and only 2.99% said they reported these incidents to authorities or hotlines, with most choosing instead to block the source, ignore it, or handle it privately. That gap between how often harm occurs and how rarely it is formally reported underscores the need for safe-by-design defaults and more accessible, child-friendly reporting pathways that reach the barangay level, not only national hotlines.

D. Spiritual and Existential

Constant digital stimulation leaves little room for the quiet reflection that helps adolescents build values, identity, and resilience. When validation becomes mostly external and instant, some lose touch with steadier sources of purpose such as family, service, or faith. Protecting offline spaces for identity-building, family connection, and purpose is therefore an essential dimension of well-being that legislation and school programs can support.

III. Illustrative Design Features That Heighten Addiction Risk

To operationalize the biopsychosocialspiritual framework in legislative context, the following design features common across digital platforms are highlighted. These mechanisms recur across products and evolve quickly, so legal provisions are best directed at the underlying features rather than naming specific applications.

- **Short-form video feeds:** Infinite scroll and unpredictable content order create variable-ratio reward schedules that reinforce compulsive checking. Hyper-personalized feeds foster a sense of being “understood,” making disengagement difficult, while constant stimulation displaces face-to-face interaction and quiet reflection.
- **Social networking and messaging:** Intermittent likes, comments, and notifications trigger unpredictable social-reward bursts. Fear of missing out and upward social comparison intensify psychological distress, while peer belonging becomes tied to responsiveness, undermining steadier sources of self-worth.
- **Multiplayer gaming platforms:** Near-miss losses activate reward circuitry strongly, encouraging repeated play. Rank anxiety and guild obligations create peer pressure to remain online. Social and technical features such as chat and group systems can be exploited by organized groups, exposing children to risks they did not seek out.
- **Loot-box and gacha mechanics:** Randomized rewards mirror gambling mechanics, exploiting adolescents’ heightened sensitivity to unpredictability. Sunk-cost thinking and peer status tied to rare items reinforce compulsive spending and play, while acquisition of virtual goods substitutes for authentic achievement.
- **Casual endless puzzle and idle games:** Timed “lives” or energy systems schedule habitual return visits. Streak-based loss aversion and limited-time events exploit psychological vulnerabilities, while repetitive low-effort use fills downtime that might otherwise support rest, family connection, or reflection.

Design-level standards can include disabling autoplay and infinite scroll by default, restricting algorithmic notifications during sleep hours, and curbing randomized reward mechanics in products marketed to minors. Technical parameters can be finalized with psychiatric input to ensure developmental relevance and mental health protection.

IV. THE CENTRAL ROLE OF PARENTING

Age gates and content filters have value, but tech-savvy adolescents often bypass purely structural barriers. The strongest protection remains an **engaged parent**. PPA and PSCAP recommend that psychiatrists and child psychiatrists be engaged as specialist resource consultants, so that parental-awareness and public

information campaigns move beyond “how to block an app” toward understanding adolescent development and recognizing warning signs.

Other evidence-based recommendations include household practices such as device-free meals and screen-free bedrooms, which support adolescent sleep and family connection. Strengthening family education and support through programs that guide families on developmentally appropriate supervision, online safety, recognition of warning signs, and safe reporting is also recommended, with DepEd, CHED, or LGUs developing these programs and PPA and PSCAP available for clinical review.

V. A SHARED RESPONSIBILITY: FAMILIES, SCHOOLS, DEPED, CHED, AND LOCAL GOVERNMENT UNITS

A child's development does not occur in one setting alone, so protection cannot rest on a single institution. A coordinated approach across the home, the school system, and the community is essential. PPA and PSCAP recommend collaboration in the following areas, and both organizations may serve as a mental health resource consultant in the following areas.

A. Curriculum (DepEd and CHED)

- Clinical expertise can guide DepEd and CHED in embedding age-appropriate digital wellness content into curricula at the elementary, secondary, and tertiary levels.
- Modules can address not only safe technology use but also how algorithmic feeds are designed to capture attention, alongside practical exercises in sustained focus and mindful use, and should draw on school-based digital literacy education.

B. Schools as Support Points for Families

- Schools can maintain protocols for psychological first aid, cyberbullying-prevention programming, and clear referral pathways into mental health services, as stipulated under Republic Act No. 11036 (Mental Health Act) and Republic Act No. 12080 (Basic Education Mental Health and Well-Being Promotion Act).
- Schools can host parent-facing sessions through PTAs on adolescent development and healthy digital habits, with mental health specialists available as resource consultants or speakers.
- Teachers and guidance counselors can receive training on recognizing signs of cyberbullying, digital fatigue, and academic decline, with clear referral pathways into psychiatric care, supported by specialist clinical input in developing training content.
- Evidence from clinical literature on attention and sleep benefits can guide schools piloting phone-free instructional periods.

C. Local Government Units as Front-Line Partners

- National frameworks and school-based programs cannot reach all families, particularly outside Metro Manila. Local Government Units (LGUs) provide the nearest access point for at-risk children and families, making them critical to mental health protection in the digital environment.
- Barangay and Local Councils for the Protection of Children (BCPC/LCPC), together with Barangay Health Workers, can be trained to recognize early warning signs of digital-related distress and make appropriate referrals. City and municipal health and social welfare offices can co-host digital wellness and parenting sessions, ensuring families receive guidance on adolescent development and safe technology use.
- Youth councils (Sangguniang Kabataan) can act as peer-to-peer ambassadors, reinforcing healthy digital habits among adolescents who are often more receptive to near-peer guidance. LGUs also have authority to regulate internet cafés and gaming shops, extending existing ordinances to cover screen-time and content-safety standards.
- Most importantly, LGU–DOH referral pathways can be strengthened to link barangay health stations directly to telepsychiatry services. This ensures that children identified as at risk can access psychiatric care without needing to travel to Metro Manila or regional centers, closing a critical gap in mental health service delivery.

D. Safe Physical and Digital Spaces

Investment in safe physical environments for children and adolescents — including playgrounds, parks, and sports centers designed for play and interaction — provides a structural complement to online safeguards. These spaces foster healthy development and resilience by offering constructive alternatives to screen-based activity.

The displacement of unstructured outdoor play by excessive digital use is itself a developmental and mental health concern. Accessible offline spaces give children and families genuine substitutes for compulsive digital engagement, promoting balance and wellbeing rather than imposing restrictions.

E. Broader Collaboration

Collaboration must extend beyond schools and families to ensure that mental health expertise informs both policy and practice. Psychiatric input is essential in shaping clear definitions and thresholds for terms such as “compulsive use,” ensuring that legislation rests on measurable standards. Clinical review should also guide the development of public communication materials, including those disseminated at the LGU level, so that awareness campaigns move beyond technical privacy settings to address behavioral warning signs and healthy digital habits. Participation in DOH- and DICT-led research programs will further embed psychiatric perspectives in national strategies, strengthening evidence-based approaches to child online safety.

VI. RECOMMENDATIONS FOR THE TECHNICAL WORKING GROUP

- **Research and definitional support:** DOH- or DICT-led research programs can draw on child and adolescent psychiatric expertise. Evidence-based input can translate everyday terms such as “digital addiction” and “compulsive use” into measurable clinical criteria, ensuring that rules are based on clear, measurable standards.
- **Age thresholds:** Proposed measures identify thresholds at 13, 14, 16, and 18 years. Nearly all place compliance duties on platform operators rather than penalizing minors or families, a design principle that supports child protection. Neurodevelopmental evidence supports caution through at least the mid-teen years, and verification mechanisms can remain consistent with the Data Privacy Act.
- **Safe-by-design defaults:** Safeguards can include disabling infinite scroll and autoplay for minors’ accounts, restricting algorithmic notifications during sleep hours (e.g., 9:00 p.m.–6:00 a.m.), and curbing randomized “loot” reward mechanics in products marketed to minors. These measures can be strengthened and extended, with technical parameters finalized through psychiatric input to ensure developmental relevance and mental health protection.
- **Children’s data protection:** Amendments to the Data Privacy Act can introduce child-specific safeguards, including limits on behavioral profiling and targeted advertising directed at minors, and mandatory Child Data Protection Impact Assessments. Limiting profiling is itself a mental health measure, as it reduces exploitation of the adolescent reward system.
- **School-based protocols:** Schools can maintain protocols for psychological first aid, cyberbullying prevention, digital literacy education, and referral pathways to mental health services, consistent with Republic Act No. 11036 and Republic Act No. 12080. Collaboration with DepEd and CHED can ensure developmental relevance and clinical accuracy.
- **Pathways to psychiatric care:** Referral infrastructure can be strengthened to link schools, barangay health stations, and LGU social welfare offices to psychiatric and psychosocial services. This ensures that children exposed to trauma, abuse, cyberbullying, or online exploitation can access care, addressing the gap highlighted by UNICEF data showing that only 2.99% of children report unsafe online experiences.
- **LGU-anchored public information rollout:** Public awareness campaigns can explicitly involve LGU structures alongside DepEd and CHED, ensuring reach beyond the school system. Content can address behavioral warning signs and family-level early intervention, while community-based programs can promote healthy digital-use habits.

- **Family education and support:** Programs can guide parents on supervision, online safety, recognition of warning signs, and safe reporting. Coordination with DepEd, CHED, and LGUs can ensure effective delivery, with psychiatric expertise available to review content for accuracy.
- **Investment in offline safe spaces:** Playgrounds, parks, and sports centers can be developed as structural complements to online safeguards. These environments provide children and families with genuine alternatives to compulsive digital use, supporting balance and wellbeing rather than imposing restrictions.

VII. CONCLUSION

Protecting Filipino children online calls for a shared national effort. The Philippine Psychiatric Association, together with the Philippine Society for Child and Adolescent Psychiatry, affirms its commitment to remain a continuing partner in this work. Both organizations support evidence-based policies that promote child safety, healthy development, and responsible digital engagement, and remain dedicated to the mental health, safety, and well-being of Filipino children and adolescents.

The PPA and PSCAP stands ready to support the House of Representatives, DepEd, CHED, DOH, and local government units through clinical consultancy, advocacy support, and participation in research and training as these measures move forward. Legislation that reflects how adolescent brains actually develop, that strengthens parents rather than replacing them, and that brings schools, families, and communities into the same coordinated effort will do the most to safeguard the wellbeing of the next generation.

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Appendix A: Summary of House Bills

HB No.	Author(s)	Verified Summary
470	Rep. Jaime R. Fresnedi	Requires verifiable parental consent before online service providers collect or process a child's data; bans targeted advertising directed at minors; mandates safety-first default privacy settings; strengthens National Privacy Commission enforcement.
1393	Rep. Iris Marie Demesa Montes	Grounded in Art. XV §3(2) of the Constitution and the UN Convention on the Rights of the Child; establishes a general duty to protect children online from inappropriate contact, harmful content, sexting-related reputational harm, cyberbullying, grooming, and data misuse.
3821	Rep. Javier Miguel Lopez Benitez	Imposes age restrictions on minors' use of social media platforms and prescribes penalties for violations, citing Philippine data on adolescent mental-health effects of heavy use.
4383	Reps. Bryan B. Revilla, Lani Mercado-Revilla, Ramon Jolo B. Revilla III	Bars anyone under 18 from holding a social media account. Enforcement duties (age verification, account removal) fall on platform operators, not minors or parents. Prepared in coordination with DICT.
6080	Reps. Ferdinand Martin G. Romualdez, Yedda Marie K. Romualdez, Andrew Julian K. Romualdez, Jude A. Acidre	Requires social media companies to implement age restrictions, time limits, and content restrictions; frames protection around children, minors, and consumers generally.
6567	Rep. Rachel Marguerite B. Del Mar	The "Child Online Protection and Social Media Safety Act." Bars children 14 and below from accessing or using social media platforms; sets regulations for age verification, digital safety, and responsible technology use.
7336	Rep. Audrey Kay T. Zubiri	The "Online Safe Spaces for Children Act (OSSCA)." Imposes a statutory duty of care on platforms; requires privacy-preserving age assurance; sets a minimum age of 14 (parental consent for ages 14–15); mandates 24-hour takedown of non-consensual intimate images; bans behavioral advertising based on profiling minors; requires safety-first default settings.

HB No.	Author(s)	Verified Summary
7571	Rep. Florencio T. Miraflores	Establishes a National Online Safety and Digital Child Protection Framework; imposes a statutory duty of care on digital platforms; sets a minimum age for high-risk social media services; creates the Philippine E-Safety Commission; funds parental education and support.
7714	Rep. Atty. Jennifer “Karen” A. Lagbas	Sets 13 as the minimum age for social media access; requires privacy-preserving age verification and parental consent; places liability for non-compliance on platforms rather than minors or parents, consistent with approaches in Australia and Spain.
7895	Rep. Kathryn Joyce F. Gorriceta, M.D.	The “SCREEN Act.” Protects children from harmful and inappropriate online content (sexually explicit material, excessive violence, self-harm content) and promotes safe digital practices, modeled in part on the US COPPA and UK Online Safety Act “duty of care” approach.
8193	Rep. Binky April M. Tupas	Requires social media platforms to prevent minors from holding accounts on age-restricted platforms and prescribes penalties for platform non-compliance.
8262	Rep. Eduardo “Bro. Eddie” C. Villanueva	The “Social Media Protection for Minors Act.” Bars anyone 16 or under from holding a social media account; platform-accountability enforcement via DICT; expressly imposes no liability on minors or parents absent gross negligence.
8550	Rep. Girlie E. Veloso	Proposes a minimum age (13) for social media account registration, grounded in research on children’s developing cognitive, emotional, and self-regulatory capacities relative to algorithm-driven platform design.
8598	Rep. Christopherson “Coco” M. Yap	Strengthens transparency and user controls and ensures personal data protection for children and minors on social media platforms, building on RA 11930 (OSAECSAEM) and the Data Privacy Act, with an expanded National Privacy Commission role.
8638	Rep. Eric Go Yap	Promotes safe online spaces for all users of mobile, gaming, and digital platforms. Directs DICT, NTC, and NPC to issue joint guidelines, and institutionalizes a Mandatory Parental Awareness and Information Drive administered through Local Government Units prior to school enrollment.
8671	Rep. Jeffrey Soriano	Establishes tiered, age-based access for minors 13–17 (verified parental/guardian consent required); requires reliable age verification and mandates parental-control and content-filtering tools from platform providers.
8704	Rep. Yevgeny Vincente B. Emano	The “Social Media Regulation and Protection Act.” Requires accredited, privacy-preserving age-verification systems and verifiable parental consent, especially for children below 13, addressing gaps in RA 11930, RA 9775, and the Data Privacy Act.
8756	Reps. Gerald Cloyd Alexis V. Galang, Elijah R. San Fernando, Charisse Anne C. Hernandez, Ma. Nina Francesca P. Lacson, Nathaniel M. Oducado, Niko Raul S.J. Daza	Addresses unregulated screen time relative to WHO standards and cites Philippine research on smartphone exposure in infants and toddlers; proposes regulatory standards for digital media companies to address addictive design.
9078	Rep. Roger Gaviola Mercado	The “Social Media Regulation for Minors Act.” Prohibits access to social media platforms by minors below 18 and imposes obligations on both social media companies and Internet Service Providers (ISPs).
9237	Rep. King George Leandro Antonio V. Collantes	Establishes a minimum age for social media use, regulates children’s access, and prescribes obligations and penalties for social media providers, citing concerns over algorithm-driven engagement systems.
9448	Rep. Karen Hope F. Garcia	The “Child Online Data Protection and Safety Amendment Act.” Amends the Data Privacy Act (RA 10173) to add parental consent requirements for processing children’s data, a ban on behavioral profiling and targeted advertising to minors, mandatory Child Data Protection Impact Assessments, and NPC enforcement.