Tech-Well

BEST PRACTICES REPORT

Preventing Problematic Digital Use among Young People
Prepared on behalf of the TechWell Erasmus+ Project

Partner Countries: Italy - France - Türkiye

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TECHWELL
TECHNOLOGICAL WELLNESS FOR YOUNG PEOPLE

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TURKISH NATIONAL AGENCY

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00 Project information

Field	Description
Project title	Technological Wellness for Young People
Programme	Erasmus+ KA2 - Cooperation for innovation and the exchange of best practices
Output	Best Practices Report - Expert Interviews Analysis
Partner countries	Italy, France and Türkiye
Source base	Italian educator interviews; French expert interviews; Turkish clinical and psychological expert views
Prepared for	TechWell Erasmus+ Project consortium
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Disclaimer

The information and views set out in this report are based on the source documents and expert inputs provided for the TechWell Erasmus+ Project. The report is intended to support project learning, transferability and the design of educational tools. It does not constitute medical, clinical or legal advice. The European Union institutions and bodies cannot be held responsible for any use which may be made of the information contained herein.

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01 Overview of the TechWell project

The TechWell Erasmus+ project is dedicated to understanding, preventing and addressing problematic digital uses among young people. Recognising that smartphones, social media, games and short-form video have become central to adolescents' daily lives across Europe, the project brings together partners from Italy, France and Türkiye to examine the issue from clinical, educational, cognitive, family and social perspectives.

The project treats digital technology neither as inherently harmful nor as automatically beneficial. Instead, it promotes a balanced, evidence-informed and context-sensitive approach to digital well-being. The source documents converge around a common finding: problematic use cannot be understood only through the amount of time spent on screens. Quality of use, developmental stage, family context, educational environment, emotional vulnerabilities and the design of digital platforms all shape whether digital use becomes supportive, distracting or harmful.

Driving question. How can we equip educators, families, clinicians and policymakers with evidence-informed tools to prevent and address problematic smartphone use among young people?

Project aims and approach

·Equip educators with research-informed frameworks for managing smartphone use in classrooms and school life.

·Provide mental health professionals with shared evidence on intervention strategies across partner countries.

·Support families with practical guidance on co-constructing healthy digital habits with their children.

·Influence institutional and policy-level responses through cross-national best practice sharing.

·Develop open educational resources for use in schools, families and community settings across partner countries.

·Promote cooperation between schools, families, clinicians, public health actors and digital ecosystem stakeholders.

Target groups

·Students and adolescents, particularly secondary-school-aged young people, with the Italian inputs focusing on ages 14–19, the Turkish expert views emphasising ages 15–17, and the French expert interviews highlighting developmental stage, age-appropriate guidance and progressive digital autonomy.

·Teachers, school leaders and school counsellors who manage digital use in learning environments.

·Parents and caregivers who create home routines, model digital behaviour and negotiate boundaries.

·Psychologists, counsellors, prevention specialists and youth workers who support young people with problematic digital use.

·Policy makers, public health actors, application developers and digital platform stakeholders who shape the wider environment.

02 Methodological note

This report synthesises three types of evidence: (1) educator interviews from Italian secondary schools, (2) expert interviews from France with specialists in screens, digital parenting, addiction studies, cognitive development and adolescent psychology, and (3) Turkish expert opinions from clinical psychologists and mental health professionals. The material was reviewed thematically and translated into best practices that can be adapted across partner countries.

The analysis does not present the inputs as isolated interview summaries. Instead, it converts recurring expert insights into practical, transferable practices. Each practice includes the country evidence base, implementation model, transferability potential and a concise lesson learned.

Analytical lens

·Problematic digital use is multi-dimensional: it involves behaviour, emotion, cognition, family dynamics, school routines and platform design.

·Screen time alone is insufficient as a diagnostic or pedagogical indicator; context, purpose and quality of use matter.

·Schools need both rules and educational mediation. Prohibition without understanding can create resistance; unrestricted use can reinforce distraction and dependency.

·Effective prevention requires a coordinated ecology: student skills, educator capacity, parental mediation, clinical support and safer digital design.

Cross-national convergence. Across Italy, France and Türkiye, experts independently identify declining attention spans, social isolation, anxiety and depression as co-occurring difficulties, family conflicts over device use, sleep disruption, emotional overload, hyperconnectivity, and inconsistent institutional policies. This convergence strengthens the shared evidence base for the practices described in this report.

03 Introduction to the best

This revised Best Practices Report provides a cross-country synthesis of seventeen best practices for preventing and managing problematic smartphone and digital media use among young people. The practices were identified from expert and educator input from Italy, France and Türkiye and grouped according to the stage and level at which intervention is most effective. The report is structured around four complementary levels: student empowerment, educator and school capacity, family and community mediation, and clinical/ecosystem support. Together, these levels move the response from individual restriction to shared digital well-being.

Best practice theme	Main contribution
Student digital well-being and self-regulation	Focuses on attention, emotional awareness, social comparison, offline belonging and purposeful use.
Educator and school capacity	Focuses on consistent rules, teacher training, classroom protocols, developmental prevention, multi-stakeholder school activities and digital wisdom curricula.
Family and community mediation	Focuses on parental role modelling, shared rules, routines, dialogue and home-school coherence.
Clinical and ecosystem support	Focuses on underlying vulnerabilities, harm reduction, clinical pathways, neurocognitive awareness and safer design responsibilities.

04 Student digital well-being and self-regulation

Student-focused practices respond to attention fragmentation, reduced tolerance for slow reflection, emotional overload, social comparison, FOMO, loneliness and difficulty disconnecting. The aim is not to shame young people for using technology, but to help them understand the mechanisms that shape their use and to develop practical self-regulation skills.

01 Attention education and deep-focus routines

France / Italy | Student self-regulation; sustained attention

French experts identify attentional fragmentation, multitasking and disrupted executive functions as central risks. Italian educators similarly report a reduced ability to sustain attention and to engage with slower learning processes. This practice turns attention into an explicit learning objective

Core components	Implementation notes	Transferability
Short focus cycles; notification-off routines; reflection tasks; classroom discussion on attention; gradual rebuilding of sustained reading, writing and problem-solving time.	Begin with short, predictable periods of device-free concentration. Explain why the routine exists, connect it to learning outcomes, and progressively increase duration. Use student reflection logs to make attention visible.	Highly transferable to secondary schools and non-formal youth education. It requires teacher guidance rather than expensive infrastructure.

Lesson learned. Attention is not only a discipline issue; it is a skill that can be taught, practised and protected.

02 Balanced digital literacy education

Italy / France | Digital wisdom; critical thinking; quality of use

Experts across Italy and France stress that technical fluency does not automatically mean healthy or wise use. A balanced digital literacy practice should therefore move beyond general warnings and teach young people to understand the quality, context and psychological mechanisms of digital use.

04 Student digital well-being and self-regulation

02 Balanced digital literacy education

Italy / France | Digital wisdom; critical thinking; quality of use

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Core components	Implementation notes	Transferability
Media literacy modules; analysis of notifications, infinite scroll and recommendation algorithms; discussion of social validation, FOMO and dopamine-driven feedback loops; teacher-student shared vocabulary for digital well-being.	Integrate digital literacy into mainstream subjects rather than treating it as a one-off awareness campaign. Include teachers in the training so that students and staff share the same concepts and language.	Transferable to citizenship education, guidance modules, ICT lessons, language classes and project-based learning.

Lesson learned. Digital literacy is strongest when it explains why devices are compelling, not only why students should use them less.

03 Purposeful smartphone use in learning activities

Italy | Constructive classroom integration

Italian educators do not present a purely prohibitive view. Several examples show that smartphones can support learning when used for clearly assigned tasks such as analysing graphs, consulting formulas, documenting activities or linking concepts to real-life applications.

Core components	Implementation notes	Transferability
Teacher-defined use windows; task-specific device use; documentation through photos or videos; subject-specific apps; explicit end-of-use signals.	Create a simple protocol: why the device is used, how long it is used, what output students must produce, and where the device goes afterwards. This protects learning purpose while reducing uncontrolled use.	Transferable across disciplines, particularly STEM, languages, arts and project-based learning. It is most effective when embedded in a whole-school policy.

Lesson learned. The smartphone can become a learning tool only when its use is purposeful, bounded and pedagogically justified.

04 Student digital well-being and self-regulation

04 Psychosocial and emotional education around social media

France / Türkiye | Social comparison; self-esteem; FOMO; emotional regulation

French experts highlight emotional overload, social validation, self-esteem, anxiety and cyberbullying. Turkish experts similarly connect social media use with comparison, loneliness, social anxiety, depression, FOMO and unmet relational needs. This practice addresses the emotional mechanisms of problematic use.

Core components	Implementation notes	Transferability
Discussion groups; emotional vocabulary; exercises on social comparison; critical analysis of idealised online images; coping strategies for FOMO; help-seeking pathways.	Use age-appropriate workshops where students analyse scenarios, identify emotions triggered by social media, and design alternative coping responses. Link activities to school counselling when needed.	Suitable for schools, youth centres and parent-student workshops. It can be integrated into citizenship, guidance, psychology or health education modules.

Lesson learned. Problematic use is often an emotional regulation strategy; prevention must therefore address emotions, belonging and self-worth.

05 Offline belonging and creative alternatives

Türkiye / Italy | Healthy routines; social connection; activity repertoire

Turkish experts underline that reducing phone use is difficult if young people have no meaningful offline alternatives. Students need safe spaces where they can express themselves, build identity, experience belonging and receive recognition outside digital platforms.

Core components	Implementation notes	Transferability
Sports, arts, group projects, peer clubs, volunteering, creative production, school events, collaborative tasks and structured breaks that encourage face-to-face interaction.	Create visible opportunities for students to participate offline. Avoid presenting alternatives as punishment; frame them as attractive spaces for expression, friendship and competence.	Highly transferable but requires local adaptation to school resources and student interests. Community organisations can strengthen the model.

Lesson learned. Digital reduction is more sustainable when the time gained is filled with meaningful offline connection.

05 Educator and school capacity

School-based practices address the institutional level of prevention. Experts emphasise that educators are often left to manage smartphone-related problems individually, while school policies remain inconsistent. Effective schools develop shared rules, train staff, involve students and families, and connect prevention with digital literacy rather than relying only on prohibition.

06 Structured classroom device management

Italy / Türkiye | Classroom management; temptation reduction

Italian educators frequently report that unmanaged smartphone access reduces attention and academic performance. Turkish experts similarly recommend limits that make balanced use possible. The most effective classroom practice combines physical device management with clear rules and purposeful exceptions.

Core components	Implementation notes	Transferability
Device boxes or desk storage; defined device-free periods; task-specific exceptions; visible classroom norms; student explanation of why rules exist.	Use restrictions as part of a learning routine rather than a punitive measure. Explain the temptation effect and allow device use only when the learning task requires it.	Transferable to all secondary school settings. Success depends on consistency across teachers and support from school leadership.

Lesson learned. Structured device management works best when students understand the rationale and when rules are applied consistently.

07 Age-appropriate developmental prevention

France / Türkiye | Developmental calibration; early intervention

French experts stress that prevention must be calibrated to developmental stage. Early adolescence is marked by heightened social validation seeking and lower awareness of problematic patterns, while later adolescence may involve more established dependency behaviours. Turkish experts also emphasise the developmental needs of the 15-17 age group, including identity, belonging and autonomy.

05 Educator and school capacity

Core components	Implementation notes	Transferability
Age-stratified modules; differentiated content for 14-15, 16-17 and older adolescents; progressive autonomy; links to counselling; alignment with parental expectations. The French 3-6-9-12 approach can inform a broader age-sensitive logic.	Map interventions onto the developmental arc. Intensive preventive work should begin before dependency patterns become normalised. Adjust language and activities to students' maturity, autonomy and social needs.	Transferable across schools and youth services. It requires adaptation to national curricula and local age-group structures.

Implementation note on adolescent resistance. Age-appropriate prevention should also consider adolescents' readiness for change. Restrictions imposed without explanation may be perceived as control, punishment or exclusion, especially among adolescents seeking autonomy and peer belonging. When young people experience preventive measures as external pressure, resistance may increase and treatment adherence may weaken. Interventions should therefore be introduced through dialogue, motivational interviewing, shared goal-setting and gradual autonomy. Families should also be supported through psychoeducation, since unrealistic expectations of rapid change may create additional pressure.

08 Teacher training for digital well-being and classroom protocols

France / Italy | Professional development

Teachers need support to move beyond individual improvisation. Italian educators describe inconsistent school responses, while French experts emphasise teacher training, attention education and psychosocial skills. A shared training model helps schools align classroom management with digital well-being education.

Core components	Implementation notes	Transferability
Training on problematic use; classroom protocols; attention routines; referral pathways; non-alarmist communication; constructive integration of smartphones; working with families.	Train teachers together rather than leaving each teacher to invent rules. Include case discussions and practical tools such as sample classroom agreements, device-use scripts and student reflection prompts.	Highly transferable through Erasmus+ teacher training modules, school professional development days and online open educational resources.

Lesson learned. Teacher confidence is a precondition for coherent student guidance.

05 Educator and school capacity

09 Multi-stakeholder prevention seminars in schools

Türkiye / Italy | Participatory prevention; school-community cooperation

Turkish and Italian experts identify education and awareness programmes in schools as a critical prevention tool, while also stressing that passive, one-off lectures are not enough. Effective school programmes are participatory, recurring and involve students, teachers, parents and external experts.

Core components	Implementation notes	Transferability
Group debates; discussion sessions; drama and role-play; student-led peer workshops; clinical psychologist sessions; parent involvement; recurrent seminars rather than annual lectures.	Co-design activities with students and invite external specialists to strengthen credibility. Ensure the school models the norms it advocates, including staff awareness of device use.	Transferable to school networks, Erasmus+ partner schools and community education settings. It can be implemented with local psychologists, youth workers or public health organisations.

Lesson learned. Prevention programmes work best when they are recurring, participatory and multi-actor, not one-way information delivery.

10 Digital wisdom and media literacy curriculum

France / Italy / Türkiye | Critical thinking; responsible use; platform literacy

All three country sources point to the need for digital literacy, but not in a narrow technical sense. Young people need to understand persuasive design, algorithms, online risks, misinformation, cyberbullying, privacy and the difference between purposeful use and passive consumption.

Core components	Implementation notes	Transferability
Curriculum modules; peer discussions; platform analysis; privacy and safety exercises; cyberbullying prevention; media critique; comparison between active creation and passive scrolling.	Embed digital wisdom across subjects. Students can analyse social media design in language classes, algorithms in ICT, well-being in guidance, and attention in study skills modules.	Transferable through open educational resources and teacher guides. Materials should be translated and culturally adapted.

Lesson learned. Young people should be educated as digital citizens, not treated only as digital consumers.

06 Family and community mediation

Family-centred practices respond to the responsibility gap identified across sources. Schools often expect families to regulate device use, while parents may feel powerless or become reactive only after problems such as cyberbullying, academic decline or emotional crisis appear. Best practice therefore requires shared language, parental role modelling and co-constructed routines.

11 Family-school co-construction of digital rules

France / Italy / Türkiye | Shared boundaries; mediation

Experts across the three countries agree that school-based measures have limited impact if they are not reinforced at home. The most transferable practice is a family-school agreement that sets clear expectations while allowing local adaptation.

Core components	Implementation notes	Transferability
Joint school-family meetings; co-created rules; consistent language; family guides; student involvement; shared distinction between healthy, excessive and problematic use.	Avoid sending rules home as a top-down document. Use workshops or meetings where families, teachers and students discuss realistic routines and agree on a common framework.	Transferable to schools and community centres. Works best when supported by school leadership and parent associations.

Lesson learned. Healthy digital routines are easier to internalise when home and school send the same message.

12 Parental role modelling and screen-free routines

France / Türkiye | Digital parenting; home environment

Turkish clinical psychologists and French digital parenting specialists independently emphasise that children learn digital norms by observing adults. Parents who are constantly attached to their own screens undermine rules that ask children to disconnect.

Core components	Implementation notes	Transferability
Technology-free meals; device-free bedrooms; evening screen-free periods; parental self-reflection; family routines that do not centre on devices; parents observing the same rules they ask of children.	Begin with parental awareness. Ask families to reflect on their own use before negotiating rules with children. Frame routines as family well-being rather than child discipline.	Highly transferable across households, though routines should reflect family structure, work patterns and cultural context.

Lesson learned. The most powerful digital parenting tool is credible adult modelling.

06 Family and community mediation

13 Family dialogue and rule co-construction

France | Parent guidance; conflict reduction

French digital parenting experts describe a pragmatic and non-judgmental approach. Rather than treating parental difficulty as failure, this model recognises that device use has become normalised across generations and that parents need tools for dialogue, not only rules.

Core components	Implementation notes	Transferability
Parent-child conversations; screen-free spaces; family routines; discussion of why specific platforms feel compelling; peer support among parents; conflict de-escalation strategies.	Build parents' confidence to set and maintain boundaries without escalating conflict. Include the young person's perspective and developmental needs so that rules are more likely to be accepted.	Transferable through parent workshops, school counselling units and community organisations.

Lesson learned. Family programmes are most effective when they build the capacity for meaningful conversations, not only the capacity to impose restrictions.

07 Clinical and ecosystem support

Clinical and ecosystem-level practices recognise that problematic smartphone use is rarely only a matter of willpower. It may be linked to anxiety, depression, ADHD, social anxiety, loneliness, unmet relational needs, avoidance, poor sleep, platform design and family or school environments. Sustainable intervention requires both individual support and environmental change.

14 Integrative clinical frameworks for adolescent digital addiction

Türkiye / France | Mental health; case formulation; multi-component care

Turkish clinical experts describe smartphone addiction as often being the visible part of a deeper emotional, relational or psychological difficulty. French experts add caution around terminology, distinguishing excessive use, problematic use and clinical addiction. Assessment should examine what function the smartphone serves for the young person: avoidance, emotional regulation, social validation, belonging, escape from anxiety, or access to other potentially addictive behaviours such as online gambling or compulsive online shopping. Together, these inputs support a careful integrative clinical framework.

Core components	Implementation notes	Transferability
Four-component model: psychotherapeutic intervention such as CBT, motivational interviewing or integrative therapy; behavioural strategies and environmental modifications; active family involvement; pharmacological support only where clinically indicated for co-occurring conditions and under appropriate professional care.	Do not treat every high-use case as addiction. First assess function, impairment, comorbidity, family context and developmental stage. Set realistic goals around controlled, conscious and purposeful use.	Transferable to counselling centres, school psychology services and referral networks. Requires clinical supervision and clear ethical boundaries.

Lesson learned. Clinical programmes achieve better outcomes when they address the underlying needs that the smartphone use is serving.

07 Clinical and ecosystem support

15 Harm reduction, CBT-informed tools and digital detox

Türkiye / France | Treatment and support strategies

Experts emphasise that complete abstinence is often unrealistic because smartphones are embedded in education, safety, social life and work. Harm reduction therefore becomes central: reducing risk, improving control and building alternative coping strategies.

Core components	Implementation notes	Transferability
Functional analysis of use; trigger mapping; cognitive restructuring; behavioural activation; notification control; temporary digital detox periods; gradual reintroduction; relapse planning; alternative coping activities.	Set small, measurable goals. For example: no phone during meals, device outside the bedroom, scheduled social media windows, or replacing passive scrolling with planned communication or creative use.	Transferable to school counselling and clinical settings. It should be adapted to severity and should not replace professional treatment when risk is high.

Lesson learned. Since total abstinence is rarely realistic, the best goal is controlled, meaningful and self-aware use.

Implementation note on temporary device modification. In severe cases, clinicians may temporarily limit app access, set device-free periods, or recommend a low-function phone to interrupt automatic patterns. These measures should be framed as harm reduction, not punishment.

16 Neurocognitive awareness approach

France | Executive functions; attention systems; non-alarmist education

French experts with backgrounds in neurocognitive development and developmental psychology bring a distinctive perspective. They foreground executive functions, attentional systems and brain plasticity, while cautioning that screen time alone is an insufficient metric.

Core components	Implementation notes	Transferability
Educational modules on attention, multitasking, sleep, executive functions and cognitive displacement; self-assessment of quality and context of use; teacher training in non-alarmist neurocognitive framing.	Reframe the conversation from moral failure to cognitive health. Ask students not only how long they used a device, but what kind of cognitive demand it created and what activities it displaced.	Transferable to teacher training, student workshops and school counselling. It is particularly useful when adolescents resist alarmist messaging.

Lesson learned. A non-alarmist neurocognitive approach helps students understand digital well-being as part of their capacity to learn, focus and relate.

07 Clinical and ecosystem support

17 Safer digital design and public health awareness

Türkiye / France | Platform responsibility; public health

Turkish experts point to the role of infinite scroll, short videos, notifications, reward loops, game mechanics, visibility metrics and commercial incentives in reinforcing problematic use. French experts also emphasise the need to move beyond individual blame and consider social and environmental factors

Core components	Implementation notes	Transferability
Screen-time dashboards; friction before endless scrolling; sleep and study modes; age-appropriate settings; public awareness campaigns; guidance for safer app design; stakeholder dialogue with developers and public health actors.	Develop public health messages that explain persuasive design. Encourage schools and families to use available device settings while advocating for stronger well-being-by-design principles.	Partly transferable through policy dialogue, public campaigns and school resources. Platform-level change requires cooperation beyond the education sector.

Lesson learned. Digital well-being is not only a personal responsibility; it is also shaped by design choices and commercial incentives.

Implementation note on stakeholder responsibility. The responsibility of digital ecosystem stakeholders should go beyond awareness-raising. Technology companies, application developers and platform owners can contribute to prevention by supporting public health campaigns, co-funding school-based digital well-being programs, and making protective design features more accessible by default.

Future risk note. Future-oriented prevention should also take emerging technologies into account. Artificial intelligence, augmented reality, immersive digital environments and increasingly personalized recommendation systems may make problematic use more difficult to recognize and regulate. Good practice should therefore include anticipatory digital literacy: helping young people, families and educators understand not only current smartphone risks, but also the evolving mechanisms through which future technologies may shape attention, emotion, social interaction and autonomy.

08 Cross-country comparative

The three country inputs converge strongly on the need for balanced, multidisciplinary prevention. However, each country source adds a distinctive perspective: Italy foregrounds classroom realities and educator management strategies; France emphasises non-alarmist scientific caution, developmental context, neurocognitive awareness and family mediation; Türkiye brings strong clinical insight into underlying emotional needs, comorbidity and treatment pathways

Main areas of convergence

Convergence	Implication for practice
Beyond screen time	The amount of use is insufficient on its own. Context, quality, purpose, vulnerability and developmental stage matter.
Attention and sleep	Attention fragmentation, multitasking and sleep disruption are recurrent concerns that should be addressed directly in school and family routines.
Social and emotional risks	Social comparison, FOMO, anxiety, self-esteem issues, isolation and reduced face-to-face interaction are common themes.
School-family cooperation	Rules are more effective when families and schools use shared language and consistent routines.
Balanced intervention	The most promising approach combines boundaries, education, self-regulation and support; it is not purely permissive or purely prohibitive.
Need for coordination	The persistent barrier is not only lack of knowledge, but lack of coordination between schools, families, clinicians and policy actors.

08 Cross-country comparative

Distinctive contributions by country

Country input	Distinctive contribution
Italy	Educator interviews show how smartphones affect attention, academic performance, peer interaction and classroom management. Italy contributes concrete school-level practices: device storage, clear use windows, constructive pedagogical integration and digital wisdom.
France	Expert interviews add a careful developmental and non-alarmist framing. France contributes practices around parental mediation, progressive autonomy, media literacy, psychosocial skills, neurocognitive awareness and the distinction between excessive use, problematic use and clinical addiction.
Türkiye	Clinical expert views highlight the emotional and psychological functions of smartphone use. Türkiye contributes an underlying-needs approach, CBT-informed intervention, harm reduction, parental role modelling, healthy offline alternatives and attention to platform design.

09 Implementation roadmap, recommendations and indicators

The best practices can be implemented as a progressive model. The roadmap below is designed for schools and project partners who want to pilot the approach without overburdening educators or families.

Suggested implementation phases

Phase	Action
Phase 1 - Diagnose and align	Map current school rules, classroom practices, family concerns and student needs. Agree on a shared definition of healthy, excessive and problematic digital use.
Phase 2 - Build capacity	Train teachers and counsellors in digital well-being, classroom protocols, attention education, developmental prevention and referral pathways.
Phase 3 - Pilot student modules	Run modules on attention, media literacy, social comparison, FOMO, neurocognitive awareness and emotional regulation. Include reflection tools.
Phase 4 - Engage families	Organise parent workshops and co-create family-school digital agreements, including screen-free routines and role modelling.
Phase 5 - Strengthen support and scale	Create escalation pathways for students needing counselling or clinical support. Review indicators and adapt policies.

09 Implementation roadmap, recommendations and indicators

Recommendations by actor

Schools	Develop clear, consistent and educationally grounded smartphone policies. Implement age-appropriate digital literacy programmes that address psychological mechanisms of problematic use, not only screen time. Create regular family communication channels and involve external clinical experts in prevention programmes.
Families	Develop awareness of adult device use as a first step. Co-construct household digital norms with children rather than imposing rules unilaterally. Maintain consistency between home and school expectations and engage proactively with school digital well-being programmes.
Clinicians	Apply integrative, multi-component frameworks. Address co-occurring conditions such as anxiety, depression, ADHD or social anxiety as part of the treatment plan. Set realistic goals of controlled, conscious use rather than complete abstinence and involve families where appropriate.
Policymakers	Support coordinated, evidence-informed digital well-being programmes in schools. Fund cross-sector collaboration between educational, clinical and family support systems. Encourage transparent usage monitoring and age-appropriate safeguards in digital services.
Digital ecosystem stakeholders	Increase transparency around persuasive design features, provide meaningful well-being settings by default, and support public education on healthy and purposeful digital use.

09 Implementation roadmap, recommendations and indicators

Possible monitoring indicators

·Existence of a written school digital-use protocol co-created with staff, students and parents.
·Number of teachers trained in digital well-being and classroom smartphone management.
·Student self-reported ability to concentrate during device-free learning periods.
·Frequency of technology-free routines at school and at home.
·Parent participation in digital parenting workshops.
·Number of students referred to counselling pathways for problematic digital use and related emotional difficulties.
·Student understanding of platform design, algorithms, notifications and persuasive design features.
·Qualitative feedback from students on offline belonging, social interaction and emotional regulation.
·Number of schools or partner organizations using guidance on emerging digital risks such as AI, augmented reality and personalized persuasive design.
·Evidence of digital ecosystem stakeholder engagement, including safer-design dialogue, public awareness support or co-funding of prevention activities

10 Conclusion

The expert and educator inputs from Italy, France and Türkiye reveal a striking degree of convergence. Despite differences in national context, clinical tradition and educational culture, the sources identify the same core challenges and point towards similar principles for effective response.

Problematic smartphone use among young people is neither a moral failing nor simply a matter of individual willpower. It is a complex behavioural phenomenon shaped by the design of digital platforms, the developmental vulnerabilities of adolescence, the dynamics of family and peer environments, and the insufficient coordination of the institutional actors best placed to respond.

The best practices described in this report demonstrate that effective responses are available. They address the underlying emotional, relational and cognitive needs that drive problematic use; they involve multiple actors; they avoid both alarmism and permissiveness; they are developmentally calibrated; and they model the norms they advocate at school, family and institutional levels.

For Erasmus+ implementation, the transferable value of this report lies in its multi-level design. Schools can begin with classroom routines and teacher training; families can build screen-free routines and role modelling; counsellors can identify students who need deeper support; and public actors can promote safer digital environments. Together, these practices can help young people use technology as a tool for learning, connection and creativity rather than a source of dependency, distraction and isolation.

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