

Exhibit B

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UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

IN RE: SOCIAL MEDIA)
ADOLESCENT ADDICTION/) Case No.
PERSONAL INJURY PRODUCTS) 4:23-MD-03047-YGR
LIABILITY LITIGATION) MDL No. 3047
_____)
THIS DOCUMENT RELATES TO:) CONTAINS CONFIDENTIAL
ALL ACTIONS) INFORMATION
_____)

V O L U M E I
VIDEOTAPED DEPOSITION OF JEAN M. TWENGE, Ph.D.
SEPTEMBER 17, 2025
9:12 A.M.

Job No. MDLG7525839
Reported by: Leslie A. Todd, CSR No. 5129 and RPR

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1 Videotaped deposition of JEAN M. TWENGE,
2 Ph.D., held pursuant to notice, before Leslie Anne
3 Todd, California Certified Shorthand Reporter in
4 and for the State of California, who officiated in
5 administering the oath to the witness, at the:

6
7 COURTYARD SAN DIEGO RANCHO BERNARDO
8 LAKESIDE ROOM
9 11611 Bernardo Plaza Court
10 San Diego, California 92182
11 (858) 613-2000
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1 mechanism by which dog videos like that --
2 cute dog videos cause suicidality?

3 MS. McNABB: Objection. Form.

4 THE WITNESS: Well, I didn't
5 say that they did cause that. I said
6 with my previous answer, that if
7 someone spent hours and hours and
8 hours a day of, say, eight to ten
9 hours a day being one example, that
10 that would have effects.

11 That, for example, if then they
12 were not getting enough sleep, not
13 getting enough sleep is a very strong
14 risk factor for suicidality.

15 BY MS. LEHMAN:

16 Q. All right. And so I just want to
17 make sure I understand. You think if someone
18 watched ten hours a day of those cute dogs,
19 that that could lead them to stop sleeping,
20 and then that they would have suicidality. Is
21 that correct or is that not correct?

22 MS. McNABB: Objection. Form.

23 THE WITNESS: That's not what I
24 said.

25 BY MS. LEHMAN:

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1 Q. Okay.

2 A. So that if at -- especially
3 those very high levels of use, if that child
4 is also going to school, and eating and
5 surviving, then -- then spending ten hours a
6 day is going to crowd out time for sleep.
7 They will not sleep enough. And that is a
8 risk factor for mood disorders and
9 suicidality.

10 Q. Okay. Well, so other than the
11 extreme situation of someone watching ten
12 hours a day of dog videos, is it your opinion
13 that dog videos like that cause suicidality?

14 MS. McNABB: Objection. Form.

15 THE WITNESS: So what I was
16 charged to do in the report was to
17 look primarily at time spent, and then
18 how that predicts mental health
19 disorders. And that is agnostic to
20 content.

21 BY MS. LEHMAN:

22 Q. Okay, but my question is more
23 specific. So if someone watches dog videos
24 like that on TikTok for two hours a day, does
25 that cause suicidality?

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1 MS. McNABB: Objection. Form.

2 THE WITNESS: So we'd have to
3 go back to the research literature,
4 and look to see what links we would
5 find. Now, suicidality, if we're
6 going to say depressive symptoms,
7 we're going to take those two
8 interchangeably, then, yes, especially
9 at younger ages, there is a connection
10 to spending two hours a day on social
11 media, having -- it leading to an
12 increase in depressive symptoms, low
13 life satisfaction, and so on.

14 BY MS. LEHMAN:

15 Q. Okay. Well, I -- I want to make
16 sure that we're being clear, because I have
17 not asked about depressive symptoms or low
18 life satisfaction. I have asked if watching
19 two hours of dog videos causes suicidality.

20 MS. McNABB: Objection. Form.
21 Asked and answered many times.

22 THE WITNESS: So I would,
23 again, go back to the research
24 literature, and say in the time series
25 data, that at the time that, say,

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1 watching videos online became more
2 popular, that suicidality went up.

3 That in the correlation on
4 cross-sectional studies, that the
5 Youth Risk Behavior Surveillance
6 Survey, for example, asks about
7 general screen time, and links to
8 suicidality. And does find a fairly
9 linear increase. So that's how I
10 would answer that. It was to try to
11 go back to the research literature
12 about time spent.

13 BY MS. LEHMAN:

14 Q. Okay. And does any of the
15 research literature that you have looked at,
16 and that you're pointing me to, look at the
17 type of material that someone is looking at?

18 MS. McNABB: Objection. Form.

19 THE WITNESS: What I reviewed,
20 for the most part, no. What I
21 reviewed looked at time spent, which
22 is agnostic to content. Now, there's
23 may be other research on content, but
24 I was mostly looking at time spent.

25 BY MS. LEHMAN:

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1 Q. And would your answer be the same
2 if I asked you these questions about not
3 suicidality, but instead self-harm,
4 depression, unhappiness, low psychological
5 well-being?

6 A. Yes, my answer would be the
7 same.

8 Q. Would your answer be the same if
9 I asked you the same questions about
10 loneliness and low self-esteem?

11 A. Self-esteem, yes. Loneliness is
12 a little more complicated.

13 Q. Okay. How is loneliness
14 different?

15 A. You would have to make sure -- I
16 mean, it's always a good idea, but especially
17 for loneliness, to control for levels and
18 frequency of in-person social interaction.

19 Q. Okay. All right. Are you
20 familiar with the AI videos of interviews with
21 babies that are on TikTok?

22 A. Yes. Well, let me amend that.
23 I've seen them on X.

24 Q. Okay. All right. So I want to
25 make sure that you and I are talking about the

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1 MS. McNABB: Objection. Form.

2 THE WITNESS: I have not
3 researched and don't discuss in this
4 report research on content. The focus
5 is on time spent, which is agnostic to
6 content.

7 BY MS. LEHMAN:

8 Q. Okay. And so, then, is it
9 correct, since you have not researched the
10 impact of content, you are completely unable
11 to offer an opinion about the impact of
12 content on people?

13 MS. McNABB: Objection. Form.

14 THE WITNESS: What do you mean
15 by impact?

16 BY MS. LEHMAN:

17 Q. I mean impact. Like, does it
18 cause, does it contribute to any of the mental
19 health conditions that you have talked to?
20 And by that, I mean, suicidality, self-harm,
21 depression, unhappiness, loneliness, low
22 psychological well-being, and low self-esteem?

23 MS. McNABB: Objection. Form.

24 THE WITNESS: I think what the
25 literature shows is that content plays

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1 a role, but so does time spent, and
2 thus, the feature of these platforms.

3 BY MS. LEHMAN:

4 Q. Okay. And are you able to tell
5 me what percentage is related to content
6 versus what percentage is not related to
7 content?

8 MS. McNABB: Objection. Form.

9 THE WITNESS: That's not how
10 these studies work. I can tell you
11 that time spent, agnostic to content,
12 has a causative relationship to mental
13 health.

14 BY MS. LEHMAN:

15 Q. All right. And what study are
16 you referring to that has completely
17 controlled for content, that shows that there
18 is a causative relationship to mental health?

19 MS. McNABB: Objection. Form.

20 THE WITNESS: So the
21 experimental studies, for example,
22 that ask people to cut back the time
23 they spend on social media, or give it
24 up entirely. Because the content that
25 individual people are watching is

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1 going to differ, that is agnostic to
2 content. And those experiments show
3 that when people cut back or give up
4 social media, their mental health
5 improves.

6 BY MS. LEHMAN:

7 Q. Okay. And which study are you
8 referring to?

9 A. All the ones in my report that
10 use an experimental design.

11 Q. So you believe that every single
12 experimental study that you cite in your
13 report that asks people to cut back on the
14 time they spend on social media, or give it up
15 entirely, controls for content?

16 A. That's not what I said. I said
17 that many of the experimental studies show
18 that when people give up or cut back on social
19 media, that their mental health improves.

20 Q. Okay. My question is a little
21 bit different, so I want to make sure that
22 we're on the same page.

23 Please tell me the name of any
24 study you're referring to that completely
25 controls for content, that shows that there is