

Suicide Prevention and Early Intervention Network

# SOCIAL MEDIA AND SUICIDE PREVENTION



# Why is the relationship between social media and suicide prevention important?

According to the Pew Research Center, in a 2018 survey, 95% of teenagers said they have access to a smart phone. Among those teenagers using a smartphone, 45% say that they are online almost constantly. Teens use a variety of social media apps, including Youtube, Instagram, and Snapchat. <sup>1</sup>

# What is the relationship between social media and mental health?

There is a complicated relationship between social media use and mental health. There is a relationship between high levels of social media use and depression and perceived social isolation among young adults. <sup>2,3</sup> Furthermore, high levels of social media use has been linked with suicide risk and self-harm: teenagers who spend three hours or more a day on electronic devises are **35% more likely** to have a risk factor for suicide, such as making a suicide plan. <sup>4</sup> Moreover, high internet use and internet addiction are associated with self-harm, and social media platforms may normalize self-harm as a response to distress. <sup>5,6</sup> However, youth may use social media as a source of social support and community. <sup>6</sup>

## Benefits and Challenges of Using Social Media for Suicide Prevention<sup>6</sup>

#### **Benefits:**

- Youth use social media as a place to communicate distress, and as a result, peers and families can identify individuals who may be at risk for suicide.
- Social media platforms can reach a large number of youth.
- Social media provides an anonymous and accessible forum for sharing experiences.
- Modest social media use may provide some individuals with emotional support and reduced isolation.

#### **Challenges:**

- Use of social media, rather than offline help, can lead to further marginalization.
- Social media use may be connected to:
  - Normalization of suicide-related behavior.
  - Difficulties in accurately assessing risk for suicide.
  - Issues related to privacy and confidentiality.

# Reporting Guidelines for Suicide<sup>7,8</sup>

#### Avoid:

- Overdramatizing the event.
- Providing exact details and photos on the location and method.
- Oversimplifying the cause of death.
- Normalizing suicide.

#### Instead:

- Inform (without dramatization).
- Use school or family photo of the person.
- Share positive stories of hope and recovery.
- Share resources.

## Guidance for Peers, Families, and Schools<sup>9,10,11</sup>

# #1: Know the warning signs of psychological distress and suicide risk on social

- Feeling alone, hopeless, or isolated (e.g., "I can't do anything! #hatemyself!").
- Irritability and hostility (e.g., "I hate everyone!").
- Impulsive Behaviors.
- Insomnia posts.
- Withdrawal from everyday activities (e.g., "Another day not going to
- Use of negative emoticons and hashtags (e.g., #cutting #depressed).

Signs of imminent risk: wanting to die, intense and urgent emotional despair, saying goodbyes and giving away personal possessions, glorifying death, and questions about where to access lethal means.

### #2: Monitor and address suicide-related posts and messages:

- Be vigilant for suicide myths or trending topics.
- Address inaccurate posts.
- Avoid reposting stories about suicide attempts/deaths.

#### #3: Take action and intervene:

- If there is imminent risk, take the person to the emergency room or call 911.
- Share resources (such as crisis hotline text line and number).
- Report self-harm to social media platform (e.g., Instagram, Snapchat).
- Reach out directly (do not just use the "like" button).

#### When starting a conversation with a youth who may be experiencing distress:

- Share your concern and be direct. Mention specific concerning statements and behaviors. Ask if the person wants to talk, and if not, share that you think it is important that they talk to someone. Finally, you can offer to connect the person to mental health services.
- When someone opens up to you, be non-judgmental and do not act shocked when the person shares suicidal thoughts. It is important not to promise that you will keep the information a secret, because you want to connect the person at risk to mental health services. Finally, you should restrict access to means of suicide (e.g., guns and medications).

#### **Additional Guidance for Parents and Families:**

- Do not fall into the "Not My Child" syndrome.
- Monitor social media use and initiate conversations about concerning posts.
- Be prepared to talk about emotional distress and suicide, and when doing so, actively listen, remain calm and non-judgmental, do not minimize problems and provide reassurance. If actively suicidal, do not leave your child alone and seek crisis care. Connect your child to mental health services.

#### **Additional Guidance for Schools:**

- Monitor, recognize, and respond to warning signs that students share on social media.
- Integrate social media into the school's suicide prevention plan:
  - Give students suicide prevention materials to post on social networking
  - Encourage students to share concerning information found on social media with trusted adults.
  - Encourage youth to "interrupt" a bullying message.

#### Additional Resources

### **Maryland Resources**

Call 211, Press 1

www.MDCrisisConnect.org

https://health.maryland.gov/suici deprevention/Pages/home.aspx

**Maryland Crisis Text Line:** 

(Available: July, 2018): 898-211

#### **National Resources**

www.crisischat.org

National Text Line: 741-741

**Suicide Prevention Hotline** Number: 1-800-273-8255

### **Toolkits for Schools**

### SAMSHA's Toolkit on Suicide **Prevention in Schools**

https://store.samhsa.gov/product /Preventing-Suicide-A-Toolkit-for-High-Schools/SMA12-4669

### SPRC's Toolkit on Postvention in Schools:

http://www.sprc.org/resourcesprograms/after-suicide-toolkitschools

#### **Reporting Guidelines**

www.reportingonsuicide.org

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