

Hashtags and Healthcare:

Social Media and their relationship to Mental Health

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What are we going to talk about today?

The State of the World

Social Media: good or bad? (and why this is the wrong question)

The Importance of Nurses

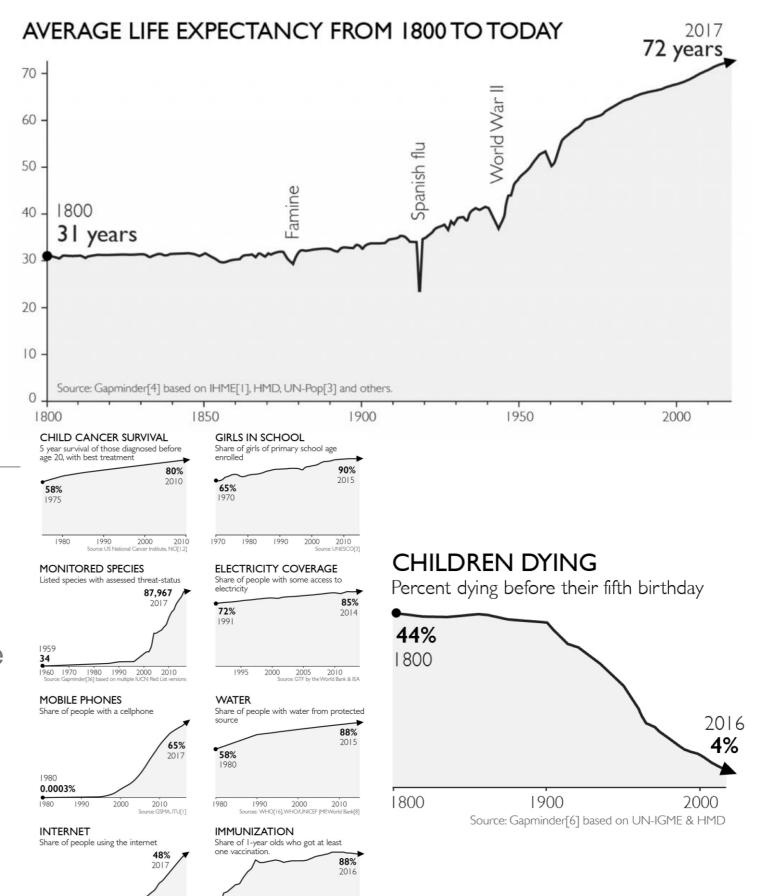


The world is getting better.

Many innovations that have been viewed with fear have led to positive health and wellbeing.

Things can be **better and bad** at the same time.

It is important to be analytical, but also hopeful.



2000

What is healthy?

Mental Health needs to be approached with an individualistic perspective, and cultural sensitivity.



- 4.4 billion people use the internet (57% of the global population).
- 3.5 billion active social media users (45% of the global population, up 9% year-on-year)
- Of that 45%, 93% use social media on their mobiles (up 10% year-on-year).



Singapore: 79% use social media.

Australia: 72% use social media.



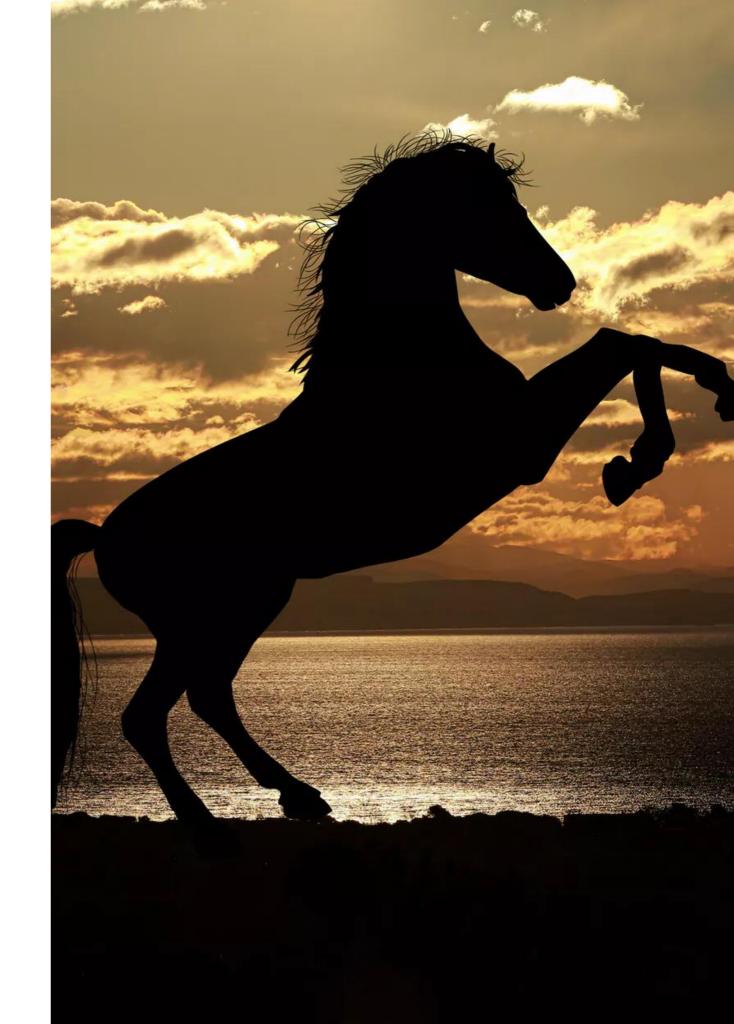
1 in 20 Google searches are for health-related information

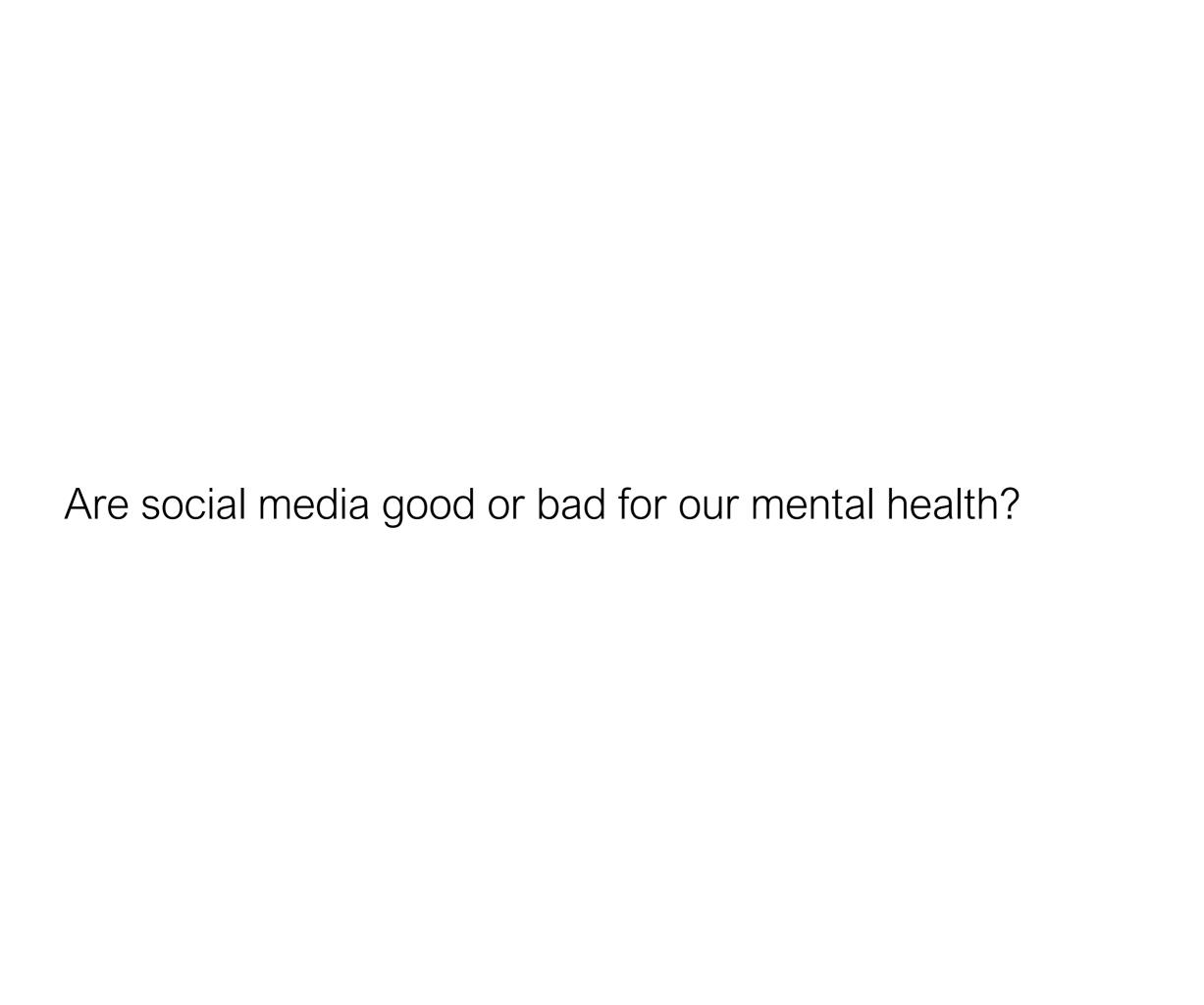
1 in 5 patients look on Facebook for health information.

80% of people aged 18-34 will use Google to avoid seeing the doctor



THE HORSE HAS LEFT THE STABLE!







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

Common Mental Health Issues

- Depression
 - Modest link between cyberbullying and depression.
- Anxiety
- Psychosis (and associated conditions)
 - Nil evidence of social media induced psychosis.
- Suicide

Chicken or the Egg?

For those who experience a mental health issue and use social media, which came first?

Most studies can't determine if more time on social media causes depression and anxiety, or if people with depression and anxious are more likely to use social media.



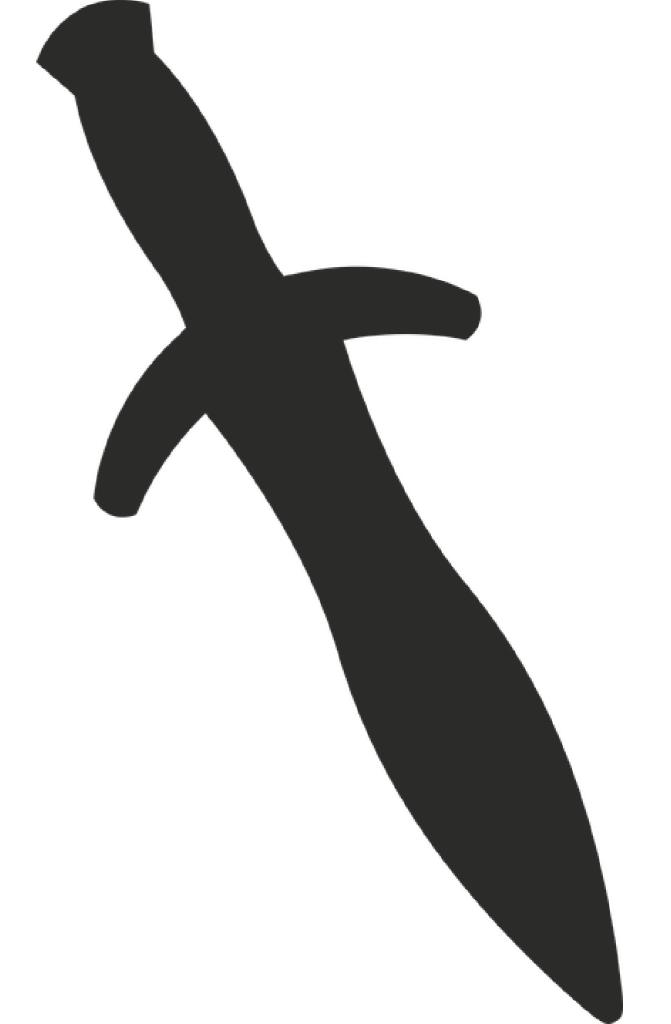
What does the research say?

- Narcissism
 - Social Media and taking selfies make narcissistic people more narcissistic, BUT:
 - Conflicting evidence that social media are making people narcissistic or leading to an increase in narcissistic personality disorder.
- Depression
- Anxiety
- Fear of Missing Out (FOMO)

Double-Edged Sword

Currently, there is **conflicting evidence** discussing social media and their relationship to our mental health.

Most benefits can be found to have a consequence, and vice versa.



What does the research say?

- Social Isolation vs. Peer Support
- Finding Information
- Storytelling and Behaviour Change
- Promoting Ourselves vs. The Highlight Reel

Nurses & Social Media

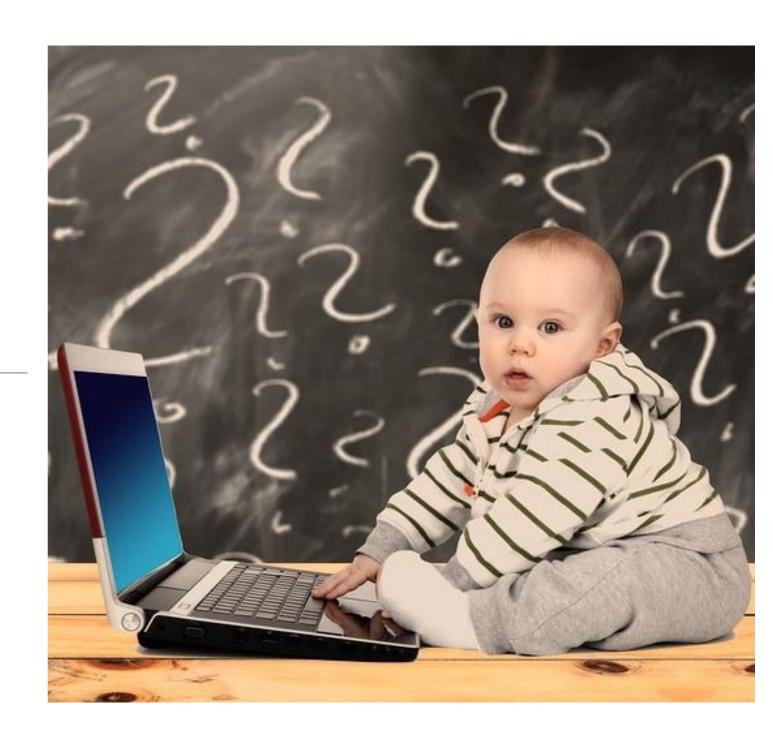
How can nurses, including and especially nursing students and recent graduates, mitigate risks and encourage positive mental health using social media?



Consider Research

This area of research is in its **infancy** & we need **more nurses** at the forefront of building evidence.

Be sure not to provide information without evidence.



Moderation

Wellness is not about restriction.

Like so many other things (alcohol, desserts, gaming, socialising, even exercise) we need to find **balance**.

Multiple platform use has been associated with higher risk factors for depression and anxiety.

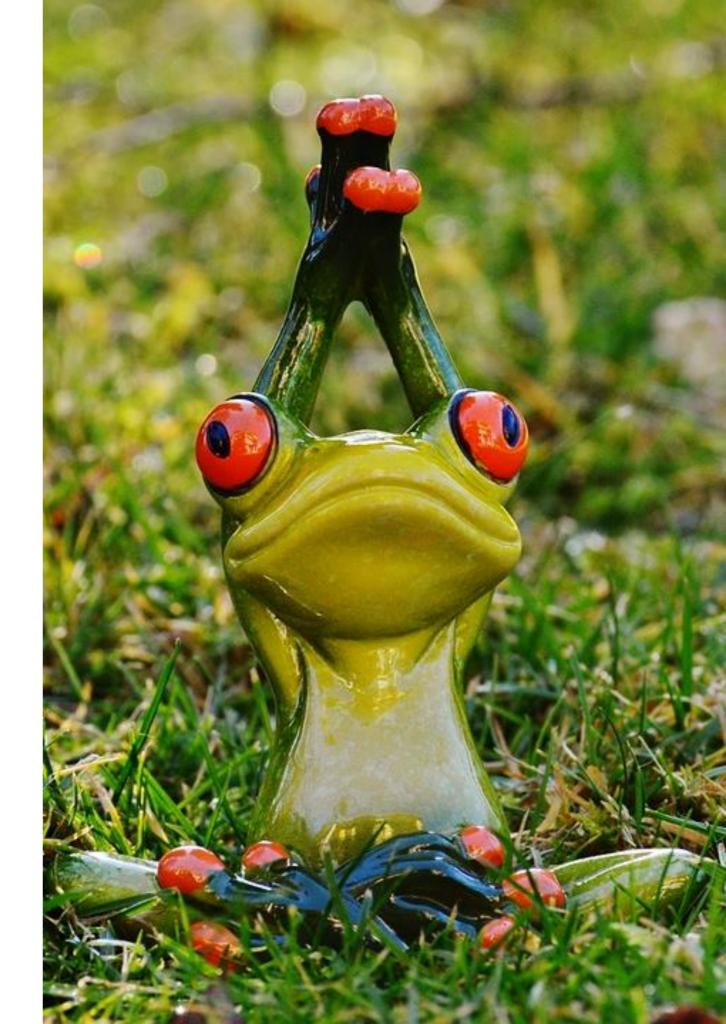


Encourage Mindfulness

Social Media & the Internet are designed to attract our **attention**.

Notifications and FOMO can encourage mindlessness.

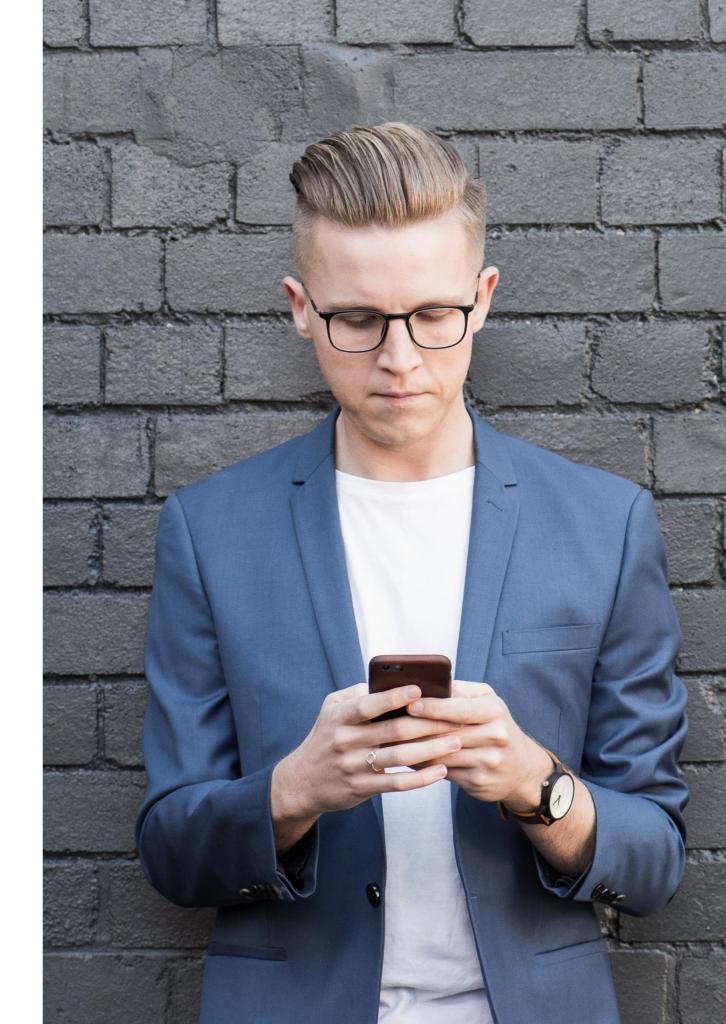
Teach **stillness and mindfulness** to patients, once you understand it yourself.

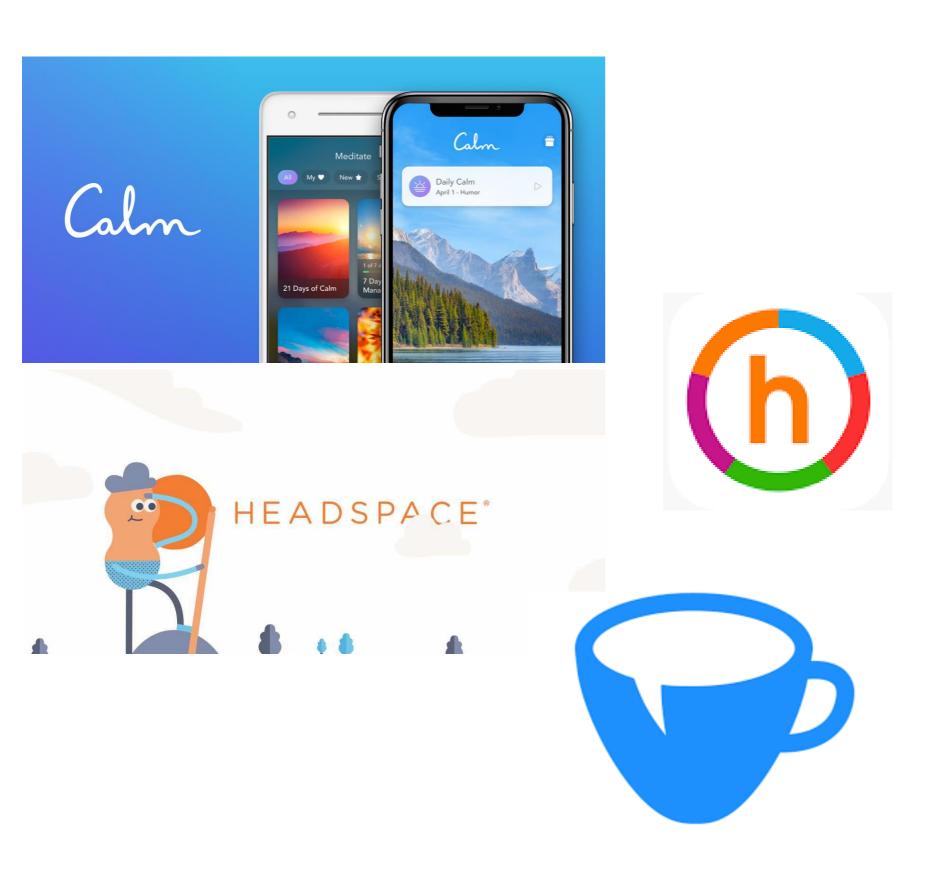


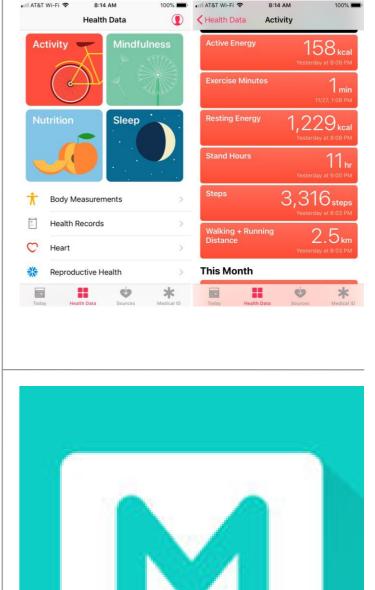
Nurses & Social Media

Is digital literacy a part of your registration standards?

Make social media and digital therapeutics a part of your **scope** of practice.







Digital Therapeutics for mental health.

HEALTH-RELATED MOBILE APP EVALUATION CRITERIA

Criteria 1: Purpose, description and audience

- 1. Is the overall purpose/ objective of the health app well described?
- 2. Is the health topic covered by the app specifically described in the app store?
- 3. Is the target population (e.g., patient or clinician target group or speciality area) specifically described?

Criteria 2: App development and production

- 4. Does the app describe how it was developed or produced?
- 5. Who is the app written, developed or produced by?
- 6. Were experts and/or consumers involved in the development of the app?
- 7. Is this a credible or well-known health outlet?
- 8. Is the web address credible (if downloaded from a website)?

Criteria 3: Content and evidence

- 9. Is the content of the app peer-reviewed or evidence-based?
- 10. Does the app detail how evidence was selected or appraised to be included in the app?
- 11. If the app makes recommendations to the user, are the methods for formulating the recommendations clearly described?
- 12. Are there links available to users to seek more information and evidence related to the recommendations?

Criteria 4: Endorsement and credibility

- 13. Has the app been externally reviewed by experts?
- 14. Is the app endorsed or certified by any relevant and credible peak body?
- 15. Are there details on how the app development was funded? Are there any funding acknowledgements or conflict of interests disclosed?
- 16. How old is the app, when was it first developed?
- 17. Has the content ever been revised or updated?

Criteria 5: Usability, review and rank

- 18. Generally, is the app intuitive and easy to use?
- 19. Has the app received generally positive or negative reviews and comments by users?
- 20. Does the app rank well by users in the app store?
- 21. Is the app free, or is there a cost attached?

Criteria 6: Patient-centeredness

- 22. Consider patient's health status, well-being and independence, cognitive and physical ability and digital and health literacy—is this app suitable for them? Could they use this independently or in partnership with their caregiver?
- 23. Is there need for patient follow-up to monitor and evaluate health outcomes related to the app?

Overall assessment

- Rate the overall quality of the app (1-10 with 1 being very poor and 10 being outstanding)
- Would you recommend this app for use? (YES/ NO)

Table 2. Healthy Social Media Habits Education for Adolescents and Families

- Develop a Family Media Use Plan with parents and teens using shared decision making. An example of family media contract can be found at https://www.healthychildren.org/English/media/ Pages/default.asox
- Use resources from the Department of Health and Human Services "Think, Act and Grow" Program to improve adolescent care.
- Restrict social media during dinner, social gatherings, and in the bedroom.
- Patients should consider contracting with adolescent to diminish behaviors that may interfere with optimal health, including social media and other forms of technology.
- Encourage healthy sleep habits by limiting media use at bedtime.
- Parents must also agree to limit their own use of technology to 2 hours per day.
- Keep cell phone out of the bedroom and put the computer in a public part of the home.
- Allow the family to determine how much privacy they want to give their child around Facebook and Instagram.
 For adolescents, parents may want to be a member of the adolescent's Facebook friends. It is important to discuss concerns regarding social media and adolescents with parents and their child together.
- Discuss cases of an adolescent getting in trouble due to social media use. The adolescent needs to be made aware of social media use, including sexting and cyberbullying
- If a child is being cyberbullied, eliminate access to the platform where the abuse is occurring.
- Encourage families to read about the negative effects of media use.
- Do not use cell phone while walking or driving.

Table 3. Role of Nurses in Assisting Adolescents Develop Healthy Social Media Habits

At well-child visit, ask two questions:

- How much time do vou spend using media?
- Is there a television or Internet-connected device in your bedroom?^a

Ask adolescents about social media use and experiences:

- Have you ever felt threatened or bullied by anyone online?
- Have you ever sent or received nude pictures?
- Do you ever feel sad or depressed while on social media?^o

Take a more detailed history of adolescents with:

- · Obesity or overweight.
- History of aggression.
- Tobacco or substance use.
- Academic issues.
- Mental health concerns, such as anxiety or depression.
- Vulnerable adolescent populations.^a

During sick visits:

 If patient presents with hand, neck, or back problems, make sure you take a complete history of technology use, including computer use.^c

Assist families in developing a Family Media Plan:

 Consider screening for Problematic Internet Use by use of PRIUSS-18 tool.^a

Encourage families to avoid the use of smart phone while walking or driving.^o

Work with schools and the community to encourage media education:

- Support technology use in the classroom.
- Promote rules about what content can be accessed on devices in the classroom.^a

Sources:

- Reid Chassiakos, Radesky, Christakis, Moreno, & Cross, 2016.
- O'Keeffe & Clarke-Pearson, 2011.
- O'keefe, 2016.

Social Media for CPD

Let social media keep you evidence-based and connected to colleagues!

Source: Moorley & Chinn (2014)

How Social Media can add to CPD

Social Media



Twitter Discussions

Formal discussions on Twitter such as #WeNurses can be used as part of continuing professional development if it is relevant to your practice



Read the pre discussion background information before taking part. Often there is links to further reading or videos

During the discussion you can either get involved by contributing to the discussion or just watch and listen to what others

After the discussion you will find that some hosts may create a transcript that will allow you to go over what was said at your own

pace

Document your learning. It's a good idea to write your own summary of the discussion to facilitate reflection on what you have learnt



Twitter Discussions Top Tips **4**

Make notes on comments & people that got you thinking, as content may disappear quite

You may identify nurses that you you the discussion with so follow

You may want to blog or video blog about you reflection or simply add it to your portfolio.

nsure you document the content, the relevance and the time you have spent

Consider reflecting:

- Why did you think this discussion would be relevant to you
 What twists and turns did the discussion take?
- Summarising the discussion in your own words
 Noting any ideas you found interesting that you can discuss with colleagues

AND - include why you found the discussion valuable and relevant to your practice

Other Social Media for CPD :::::::









As with Twitter the discussions that take place within forums like these are valuable learning activities which can be documented and reflected upon. Facebook unlike Twitter may operate a closed group and you may have to be a member before being able to view any information published



There are 100 hours of YouTube videos being uploaded every minute the use of videos to aid CPD is becoming increasingly easier and again the refelction process is much the same.



Blogs

Blogs can be used to gain different insights from a variety of perspectives including the patient perspective, the student nurse/ mentor relationship and learning can take place and reflected upon.



Blogs have a reflective component, which means that not only can the knowledge and Information within them be used for CPD but also

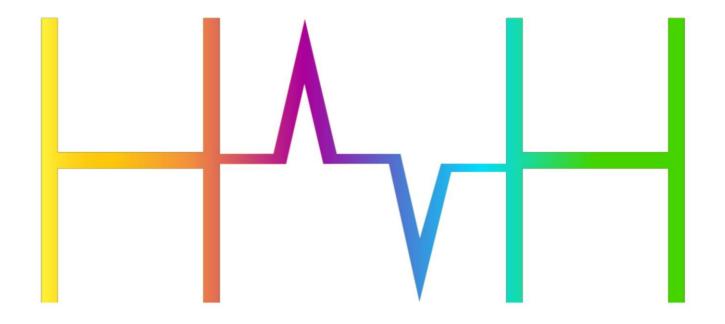
a blog can act as a

Spontaneous Twitter Discussion

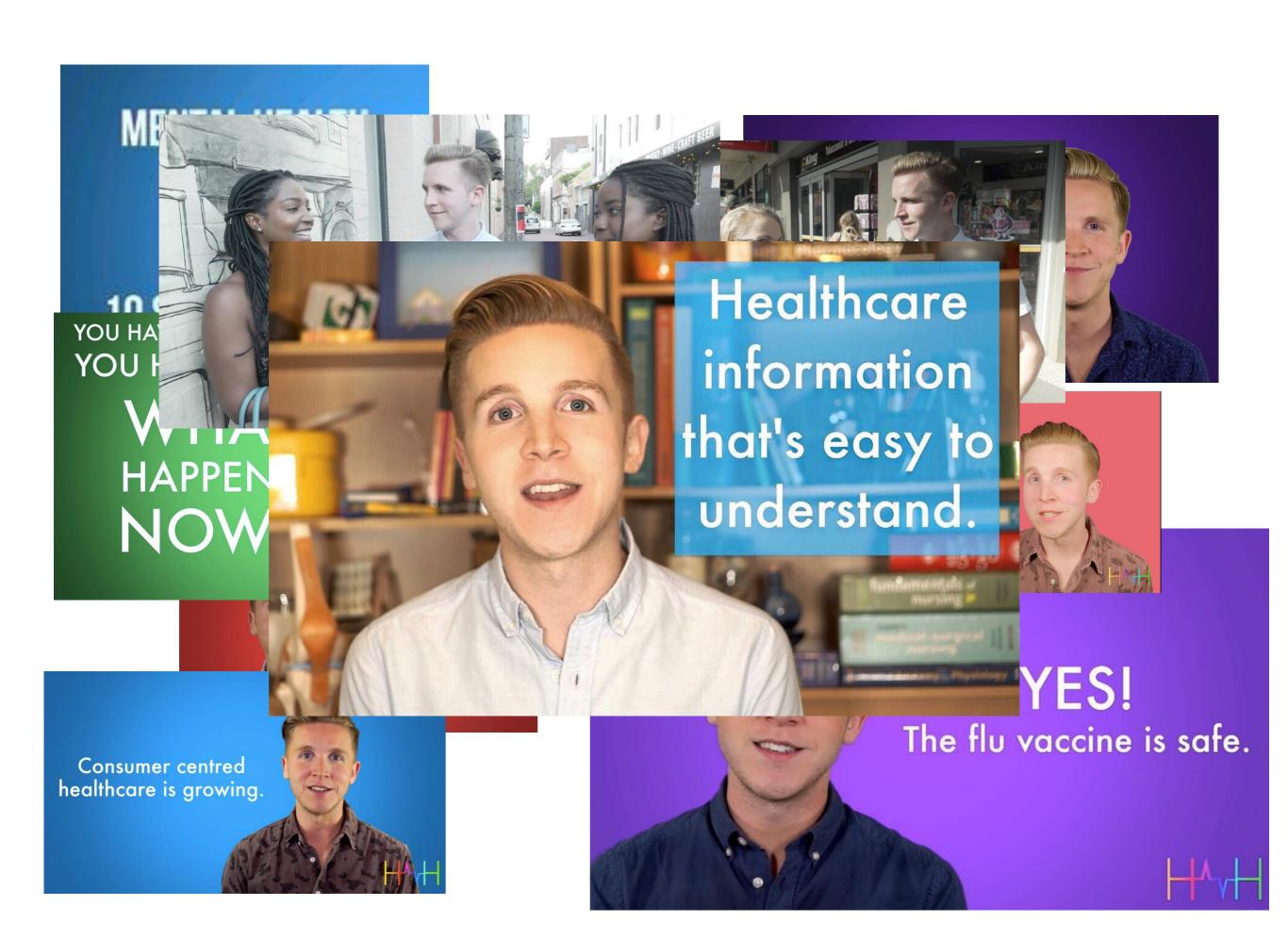
Not all Twitter discussion are scheduled. Sometimes a professional conversation takes place in a spontaneous and unorganized way and learning can take place as a result of this. Tools like Storify can help to collate these discussions

Hot on Health

Video-based platform, shared via social media and the internet, to improve health literacy.



HOT ON HEALTH



Storytelling

Nurses are masters of empathy; storytelling is a wonderful way to foster empathy and connection in communities.



I have lived my entire life with chronic pain but at a certain point I stopped talking about it. Until recently, most friends could tell you my top three Kelly Clarkson songs but not that I have arthritis in my elbows and ankle from years of internal bleeding. I have built a version of myself that hides my illness, even from those I love most.

Today is World Haemophilia Day; I am a person with severe haemophilia and I have decided to break my own silence. I want to show other people with hidden pain, disability or illness that there is power in vulnerability and you are enough just as you are.

A KID IN ADULT'S CLOTHES

On January 1st 2019, at midday, I lost my voice and didn't get it back for three weeks. I didn't feel unwell and I hadn't gone out partying for New Year's Eve; I simply got laryngitis and off it went. Unlucky. In those same first weeks, an old ankle injury flared up and impaired my ability to walk. It had never been that bad before, nor that painful. So, with no choice but to wait them both out, I began the new year mute and in pain.

In the first week, I viewed it as a test of resilience, a beautiful metaphor to start the year. In the second week, my headspace bled from frustrated to overwhelmed. My career involves speaking; I talk to patients, I deliver workshops and speeches! Who am I without a voice? More than that, people began to notice that I was walking with a limp and I was running out of energy to deflect their concern. Who am I without mobility?

By the third week, I couldn't believe how many cracks I'd begun to see in myself. I found

Plant Seeds

What do you do when someone is lacking a point of reference?

Pre-contemplative people can't be forced into change or told what to do; as a nurse you need to then plant seeds for change.



Let's get connected:

Website: www.nurserobbie.com

Facebook: Nurse Robbie, Hot on

Health (@nurserobbieofficial)

Instagram: @nurse_robbie

Twitter: @nurse_robbie

YouTube: Hot on Health



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Thank you!

Questions?