#chatsafe
A young person’s guide for communicating safely online about suicide
Background
Background: suicide & social media

- Social media sites are commonly used for the communication about suicide-related behaviour with others.
- Whilst this is not necessarily done in a harmful way, the potential for harm exists.
- Media guidelines have been helpful in terms of educating professionals about communicating about suicide online. But, they have limited utility with young people.
- However, the popularity of social media made us question how can we help young people stay safe on social media when talking about suicide.
Purpose of use: establishing new relationships, maintaining relationships, online peer support

100% used social media (2.6 h/day, 9 times/day)
40% looked for info regarding symptom treatment
65% would like to be approached by clinicians via social media when symptoms emerge
78% would like to get support from professionals via social media
Instagram failing to remove graphic self-harm images

Sky News finds numerous disturbing videos and pictures on the social media website without encountering any filters or warnings.

Facebook ‘sorry’ for distressing suicide posts on Instagram

Health secretary tells social media firms to protect children after girl's death

It’s not just reality TV - all media must help to prevent suicides

Coverage of high-profile deaths such as Love Island contestant Mike Thalassitis often falls short - we can and must do better, says psychiatrist Rory O’Connor

Six weeks after Instagram pledged to block damaging posts blamed for 14-year-old’s death, we reveal the sickening proof that suicide, self-harm and anorexia material is still widespread

- Posts of teenagers inciting each other to cut, starve themselves and commit suicide visible on Instagram
- Instagram pledged an immediate crackdown on self-harm and suicide content after Molly Russell’s suicide
- But more than six weeks on, thousands of harmful posts seen in a few hours
Social media can be bad for youth mental health, but there are ways it can help.
Some pro’s and cons

- Young people spend a lot of time on social media, and are also more susceptible to peer pressure, low self-esteem, and mental ill-health than adults.
- Research has found associations between increased social media use and depression, anxiety, sleep and eating problems, and suicide risk.
- Aspects of social media which may have negative impact:
  - Cyberbullying (many don’t report), comparisons to unrealistic portrayals, and potential for sharing suicide/self-harm content.
- Potential benefits:
  - Sense of community, seeking and giving support and information, improved ability to understand others, low cost, reach, ability to detect people at-risk via monitoring posts (e.g. Facebook) but ethical implications.
- We do not know if more social media use leads to negative outcomes, or if people who are depressed/anxious spend more time on social media.
- The way social media is used can be important i.e. active vs passive use.
- Some people may be more susceptible to negative impact (e.g. certain personality traits, level of envy).
- We need to harness benefits & mitigate risks.
Key findings: literature review

- Social media platforms enable people to access info, support & counselling and to share their experiences in a flexible, timely and readily accessible format.
- They also allow people to create unique & positive identities in a way that they may not otherwise have been able to do e.g. as a helper as well as being helped.
- Many highly valued the ability to engage in online peer-to-peer support as an adjunct (not alternative) to face-to-face Tx.
- Social media has the capacity to reach large numbers of people quickly for treatment and research purposes.
- It also allows people to intervene quickly in case of immediate risk.
- Health profs should engage more successfully with this form of media in order that the two avenues for support and treatment may coexist.

Key findings: survey

- All groups reported believing that social media, in particular Facebook, has the potential to be a useful tool for delivering suicide prevention activities

- **Key benefits**: Enabling people to share experiences & express feelings; non-stigmatising; accessible; ability to help & support others; opportunities for early intervention if someone expresses suicidal thoughts or feelings online

- **Key risks**: Contagion was raised but the need for clinical practice/ethical guidelines was a bigger concern

- **For the most part participants believed that the benefits outweighed the risks**
Closed groups & memorial pages

• Benefits = 24/7 availability; feel less alone/talking to others; help cope, especially at anniversaries/birthdays; helping others; preserve memories.
• Limitations = few endorsed.
  • Moderators do not do enough to help forum members in distress (5%)
  • Became more depressed as a result of using the forum (5%)
  • Received inaccurate information (5%)
  • Experienced suicidal thoughts (2%)
  • Forum interfered with daily activity (8%)
  • Harder to move on with life (9%)
  • Trolls (10%)
• There were no differences in perceived benefits and limitations between users of Facebook groups and web-based forums

Aims

1. Develop a set of evidence-informed guidelines regarding safe and helpful peer-peer communication about suicide online

2. Bring the guidelines to life via a national social media campaign
Guideline development
Delphi consensus study

1. Systematic Search of the literature ($n = 42$); grey literature ($n = 31$)

2. Development of the Delphi Questionnaire

3. Expert Panel Formation
   - Young people ($n = 27; 23$); professionals ($n = 43; 36$).
   - Overall participation rate: 63% Completion rate = 84%

4. Delphi Consensus ratings over 2 iterative rounds
   - Items with 80% consensus in both panels = included; less than 70% in both panels = excluded; items in between = re-rated

5. Development of the #Chatsafe guidelines
<table>
<thead>
<tr>
<th>TOPIC</th>
<th>EXAMPLES OF QUESTIONNAIRE ITEMS</th>
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<tbody>
<tr>
<td>1</td>
<td><strong>General tips</strong>&lt;br&gt;Don't say “committed suicide” Do say “died by suicide”&lt;br&gt;Do not use clichéd, emotional images (e.g., a person holding their head in hands)</td>
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<td>2</td>
<td><strong>Things to consider before you post online</strong>&lt;br&gt;Be aware that once your post is made public you have no control over who will see it, or who will share it</td>
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<td>3</td>
<td><strong>Communication about someone you know who is affected by suicide</strong>&lt;br&gt;Do not speculate in your post about why the person took their life;&lt;br&gt;Include any efforts that the person made to reduce their suffering;</td>
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<td>4</td>
<td><strong>Celebrity suicide</strong>&lt;br&gt;Do not post or share content that speculates the suicide of a celebrity before it has been confirmed by an official source (e.g., a well-known and reliable news website)</td>
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<td>5</td>
<td><strong>Writing about your own experience</strong>&lt;br&gt;Consider that others in your life who don’t know about your experience, (e.g. employers or family members), might find out as a result of online disclosure;&lt;br&gt;Highlight parts of your story that support recovery and hope</td>
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<td>6</td>
<td><strong>Monitoring online content</strong>&lt;br&gt;Do check responses to your post regularly for unsafe content in the following circumstances:&lt;br&gt;Your post refers to suicide or suicidal behaviour;</td>
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<td>7</td>
<td><strong>Responding to someone who may be suicidal</strong>&lt;br&gt;Ask the person at risk directly if they are thinking of suicide (e.g., “are you thinking suicide?”, “are you suicidal?”, “are you thinking of ending your life?”)</td>
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<td>8</td>
<td><strong>Responding to harmful comments</strong>&lt;br&gt;Advise the user that their post is unsafe;&lt;br&gt;Delete the users post if the platform allows it</td>
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<td>9</td>
<td><strong>Memorial pages and closed groups to honour the deceased</strong>&lt;br&gt;Include a ‘terms of use’. Ask all potential members/followers of the account, group, or page to read and accept the ‘terms of use’ before approving their membership</td>
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</table>
Examples of excluded items

- Approve comments before they are publicly displayed
  - Professionals: 80.56%
  - Youth: 78.26%

- DO the following if you see a post and think someone may be at risk of suicide: Always reach out to the person at risk directly, even if you think that they may not intend to follow through
  - Professionals: 66.67%
  - Youth: 95.65%

- DO the following if you decide to post online: Include thoughts and feelings you experienced that others could relate to
  - Professionals: 66.66%
  - Youth: 82.61%

- DO the following if you do want to pay tribute to a celebrity who has died by suicide: Provide information on how the celebrity contributed to society
  - Professionals: 69.45%
  - Youth: 91.30%

- Don't exaggerate, or use provocative adjectives, such as "deadly addiction"; "disastrous relationship breakdown"; "frightening", or "alarming"
  - Professionals: 91.67%
  - Youth: 78.26%
Structure of the guidelines

What are you looking for?

I want to help...
- Myself
  - What do you want to do?
    - Post or comment online
      - Section 1: Before you post anything online about suicide
    - Share my thoughts safely
      - Section 2: Sharing your own thoughts, feelings or experience with suicidal behaviour online
  - I want to know about memorial pages
    - Section 5: Memorial websites, pages and closed groups to honour the deceased

I want to know about memorial pages
- Someone else
  - Do you think they are currently at risk of suicide?
    - No, but I want to talk about suicide with them
      - Section 3: Communicating about someone you know who is affected by suicidal thoughts, feelings or behaviour
    - I think so, I want to be able to talk to them about it
      - Section 4: Responding to someone who may be suicidal
Before you post anything about suicide online...

1.1

**Remember that posts can go viral**

Any image, photo, video or written post can quickly go viral online. If the post is inaccurate, stigmatising or unsafe, it could have a negative impact on yourself and others. It's important to be aware that once your post is published, **you will have no control over who will see it or who will share it.**

1.2

**The permanency of the internet: “Once posted, always posted”**

It is possible that what you post or share online may be there forever. Even if you have sent a private message to a friend, or you have made a post that you later delete, it **is possible that it will never be permanently erased.** For example, other users could take screenshots of your messages and posts or they could create screen recordings of a live stream or story. As a consequence, your friends, parents, caregivers, work colleagues and current or future employers may later see it.
Language and safety tips...

Unhelpful language

Don’t use words that describe suicide as criminal or sinful. This may suggest to someone that what they are feeling is wrong or unacceptable, or make someone worry that they’ll be judged if they ask for help.

Examples:
- Don’t say “committed suicide”.
- Don’t say that suicide is a "solution" to problems, life stressors or mental health difficulties.
- Don’t use words that glamourise, romanticise, or make suicide seem appealing.

Helpful alternatives

- Try to say the person “died by suicide”.
- Indicate that suicide is complex and that many factors contribute to a person ending their life.
- Include messages of hope and recovery (e.g., you can post links to videos or poetry which has content about hope and recovery).
- Inform others that suicide can be prevented and include links to sources of help and websites that contain information about suicide prevention. Some examples include:
  - eheadspace
  - Kids Helpline
  - Lifeline
- Tell others who might be thinking about suicide where and how they could get help.
- Include information on factors that protect against suicide (e.g., engaging in meaningful activities and building and maintaining meaningful connections and relationships).
- Indicate suicide is preventable, help is available, treatment can be successful, and that recovery is possible.
Sharing your own thoughts, feelings or experience with suicidal behaviour online...

2.2 Sharing your experience in a safe and helpful way

...consider that other people in your life who don’t know about your experiences might find this out as a result of your post. You may also receive a mixture of both positive and negative responses. Think about what aspects of your personal experience you wish to disclose and remember that you don’t have to share everything.

...you could provide them with information outlined on page 16 or provide a link to a support service such as a suicide prevention or counselling helpline. If you include links to support services, they should be placed clearly at the beginning of your post and only include services that you know are reputable.

2.3 The use of “trigger” or “content” warnings

If your post does include graphic or descriptive content or content that might be distressing to others, you should consider providing a trigger warning in your post.... The trigger warning should be positioned at the beginning of your post so readers can make an informed decision about whether or not they continue to read the post. It should also include a link or information on available support services.
How to respond to someone who may be suicidal…

4.1 How to respond to someone who might be at risk of suicide

Always respond in private (e.g., through DM or PM), as the conversation may become upsetting or triggering for others.

4.2 It’s OK to ask someone “Are you thinking of suicide?”

“*I just wanted to check in, because you posted ..., and I am worried about you. It sounds like you might be feeling suicidal, is that the case?*”

4.3 If the person indicates they are not at immediate risk of suicide

If they say “no”, it’s best not to pressure them. Don’t always expect a positive response and don’t take this personally; this person might be struggling to cope and may feel angry, upset or ambivalent. They may appreciate your help later, when they’re feeling better.

4.4 How to respond to a person at immediate risk of suicide or in the process of making a suicide attempt

If you contact emergency services on the person’s behalf, keep the person at risk informed about what is happening, unless this might increase the risk to them or someone else. If possible, try to maintain a conversation with the person until help arrives.
Memorial websites, pages and closed groups to honour the deceased

There may be times when you want to set up a website, page or closed group to memorialise a person who has died by suicide. Setting up a page or group to remember someone who has died can be a good way to share stories and receive and provide support. But there is also the potential that certain content could negatively impact the thoughts and feelings of others. For this reason, some concerns have been raised about the potential for copycat suicides. If you create a page or closed group to memorialise someone who has died by suicide, there are a few things that you can do to make the memorial page or group safe for others. These include:

- Monitoring comments for harmful or unsafe content
  (see page 12 for harmful content, and pages 17-20 for language tips).
- Deal with any disagreements or unsupportive comments quickly, as they can discourage people from sharing how they feel.
- Include a ‘Terms of Use’ that outlines the rules for participating in the online memorial page or group.
Terms of use for memorial pages & closed groups

- Encourage users to look after their own wellbeing, and to take a break if things are getting too much.
- Make it clear that discrimination of any kind is unacceptable.
- Make it clear that graphic details about the suicide are not allowed.
- Outline the approval process for comments and feedback from other users.
- Explain when and how users can report harmful suicidal content to the appropriate social media monitoring authority (e.g., Facebook Help Centre), or to the memorial page or group administrators.

5.2
Responding to comments that indicate a person is struggling or distressed

- Personalise the message by using the person's name.
- Express concern for the person (e.g., “I am worried about you, because of X”).
- Adapt your message to the person's situation, and reflect the language they have used to describe their feelings.
Some points on self-care...

If you do come across suicidal content online, it’s important that you also look after yourself. Some helpful tips for looking out for your own wellbeing are available on page 13.

- Talk to someone about how you are feeling.
- Take a break. This might include physically stepping away for a while, logging out of your social media accounts or engaging in a different activity that doesn’t involve social media.
- Take control of the content that you see. For example, if you are going through a rough patch, you may want to minimise the amount of suicide-related content you are exposed to by hiding certain posts on your feed or unfollowing content that may cause you distress.

www.orygen.org.au
Co-design: bringing the guidelines to life with young people
Co-design workshops (N=10; 122 YP)
Young people want...

1. Create safe and engaging online resources that provide information based on user motives (e.g., opt in ‘trigger/sensitivity’ settings in FB)
2. Create content that young people will share (e.g., videos of memorial page guidelines)
3. Use AI, Chatbots, interstitials, and live social media to create and deliver the conversation
4. Deliver the message of continual help-seeking (e.g., stories of hope)
Minority group needs and wants

Aboriginal and Torres Strait Islander
- Community user-generated content
- Use digital storytelling (dreamtime stories) to convey messages
- Video/image content rather than text

CALD
- Use of AI and online support to combat stigma
- Simple, digestible, interactive content
- Images, videos, and emojis
- Links to support services
- Stories of hope and recovery

LGBTIQA+
- Visual content rather than just verbal e.g., animals and animations (non-gendered)
- Interactive activities to practice how to post/respond
- Bite-sized content, links to location-based resources, and automatic check-ins
- Visibility and safety
- Inclusive language and messages
- Targeted content for intersectional groups
- Instructions for safe communication
Evaluation & next steps
### Workshop evaluation data

<table>
<thead>
<tr>
<th>Demographic Characteristics</th>
<th>Experience of MH / Suicide</th>
<th>Evaluation of Workshop Outcomes</th>
<th>Evaluation of Workshop Experience</th>
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<tbody>
<tr>
<td>107 participants</td>
<td>85% have experienced a mental health problem</td>
<td>74% developed new skills</td>
<td>95% agreed that the #chatsafe project was enjoyable</td>
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<td>87% live in metropolitan areas</td>
<td>79% have had thoughts or feelings of suicide</td>
<td>67% have a better understanding of how to talk about suicide safely online</td>
<td>86% agreed that the #chatsafe project was helpful</td>
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<tr>
<td>60% female, 20% male, 4% trans, 16% other</td>
<td>65% have self-harmed</td>
<td>63% can better identify and support others online who may be at risk of suicide</td>
<td>9% felt upset</td>
</tr>
<tr>
<td>M age = 21</td>
<td>98% have supported a friend who was experiencing mental health problems</td>
<td>58% have a better understanding of how to talk about suicide generally</td>
<td>8% felt suicidal</td>
</tr>
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<td>12% Aboriginal and/or Torres Strait Islander</td>
<td>88% have supported a friend who was experiencing suicidal thoughts or feelings</td>
<td>40% felt their confidence increased</td>
<td>90% agreed that the #chatsafe project was worthwhile</td>
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<tr>
<td>51% heterosexual</td>
<td>90% have seen a post on social media that indicated that the user was suicidal</td>
<td>54% feel better equipped to provide emotional support</td>
<td>93% would recommend the #chatsafe project to a friend</td>
</tr>
<tr>
<td>84% speak English at home</td>
<td>51% have lost someone close to suicide</td>
<td>62% feel more able to educate others about cyber-safety</td>
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<td>40% are bilingual or multilingual</td>
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Just participated in a really effective (and fun!) national youth suicide prevention social media campaign co-design workshop. The project is headed by Orygen and partners with Facebook- and has sought input from young people from various backgrounds and orgs such as Minus18, batyr, headspace and Reach Out. These 'react' pillows were kind of ridiculous, but the need to focus on researching the way young people interact with social media in regards to mental health is not. So stoked with this project and excited to see the outcomes!
Campaign directions

Campaign messages
1. **Want to chat?** Sharing stories about chatting or choosing not to chat.
2. **How to chat.** Bite-sized tips and tricks from guide.
3. **Chat to me!** Get equipped and let friends know you’re someone they can chat to.

Content types
1. **Animation** e.g., anthropomorphic blobs, animals etc.
2. **Video** e.g., interviews, scripted narratives, messages from influencers
3. **Image** e.g., memes, inspirational messages, photos with quotes
Video: influencer

Theme:
“Here are some helpful tips and tricks for looking after yourself and communicating safely”

Key messages:
1. Language matters - helpful alternatives & helplines
2. Suicide is more complex than you think, and it’s okay to share hope and recovery
3. Trigger and content warnings are actually important
How to chat....

Talking about suicide online? #LanguageMatters.

Try not to say someone “committed suicide”

Instead say they “died by suicide”
In summary: what does all this tell us?

- Young people see social media as part of the **solution** not just part of the problem
- But they want the **conversation started** for them
- They are comfortable with online platforms using **AI** and the data they collect to serve up **personalised content** to them
- **Chatbots, video and proactive messaging** are considered sharable and helpful
- Tools such as this give young people **agency** over the content they are exposed to and their feelings
- They are ‘over’ campaigns that just raise awareness; they want to actually ‘**do**’ something
- Young people want their **voices to be heard** & all young people should be **visible** in materials developed
- It can be **safe** to develop social media content about suicide with and for young people
Next steps

1. Complete user testing
2. RCT testing efficacy of guidelines & campaign content in young ppl
3. Roll out of national campaign
4. Dev’t of educational programs based on the guidelines for educators & caregivers
5. Publish the guidelines in the US – April 17th
Discussion/ things to consider

• What do you see as the benefits & challenges of social media when it comes to suicide prevention?

• What can the mental health community do to help young people and the general public stay safe online?

• How often should social media platforms check for safety & what is an optimal response?

• What criteria/ procedures should be in place for assessing & responding to risk?

• When does personalized intervention/ AI become intrusive?

• What responsibilities should social media platforms have when it comes to user safety?
Thank you

Thank you to the Commonwealth Gov't of Australia and to our partners: Portable, The University of Melbourne, Everymind & Facebook Australia. Thanks also to our panel members & all the young people who have taken part.

- Link to guidelines: www.orygen.org.au
- Webinar: YouTube/Orygen
- Facebook Live event: https://www.facebook.com/OrygenAus

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