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Social media and mental wellbeing:

How can social media be used to support
the mental health and wellbeing of
young adults

A thesis presented in partial fulfilment of the
requirements for the degree of Master of Social Work at
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Abstract

This research aimed to explore the role of social media in supporting the mental health and wellbeing of young adults (18 to 24 years old) in Aotearoa New Zealand. The literature highlighted that young adults in Aotearoa New Zealand experience a range of impact from various aspects of society on their mental health and wellbeing. Research also highlighted how young adults utilise social media platforms, and how these platforms impact the mental health and wellbeing of young adults, such as by providing psychoeducation and normalising mental health concerns. However, there are also negative effects of social media use by young adults, such as the concepts of self-diagnosing and misinformation.

This research project utilised semi-structured interviews with 7 young adults, using a theoretical framework grounded in social constructionism. Participants highlighted their experiences around mental health and wellbeing, and social media. Key findings showed the significance of developing online communities to improve mental health and wellbeing outcomes for young adults, and the possibility for young adults to develop and strengthen their coping strategies and skills from various social media platforms. Additionally, this research found concerns with misinformation, and the need for better verification processes, and concerns with the growing culture of self-diagnosing by young adults. Lastly, research showed that social media allows for social services to improve engagement with young adults, which increases the potential to support mental health and wellbeing outcomes.

From the data, five key recommendations were derived including for social services to purposefully engage with social media platforms to provide psychoeducation on mental health and wellbeing, and on coping skills for young adults. Social services could also better use social media platforms to provide information about their services to enhance engagement with young adults. Additionally, around the need for increased fact checking in online communities, regarding mental health and wellbeing, to ensure accurate information is provided to community members by social

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services and clinicians. Social services should also review policy and practice relating to social media use of staff, to allow staff have time to post and provide accurate information, or to hire specific staff to manage social media accounts. Further research is recommended on how to best engage with young adults on social media platforms and provide effective psychoeducation to young adults in an online environment.

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difference we can make in the lives of the individuals and families we work with, and our communities.

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Chapter 1: Introduction

Due to the increase in young adults presenting with mental health concerns to services in Aotearoa New Zealand, the growing demands for support, and increasing wait times for access to support, alternative approaches to support are needed (Mental Health Foundation, 2021; New Zealand Government, 2018; Oliveira et al., 2021; Reger & Hammer, 2021). Accessibility has been signalled as one of the biggest concerns young adults are experiencing in terms of mental health support (Mental Health and Wellbeing Commission, 2022; New Zealand Government, 2018). These concerns exist in combination with confusion around supports services offered, which leads to questioning if the service is the right service for a young adult, and/or what support they may be eligible for (New Zealand Government, 2018).

Social media platforms may offer an effective pathway for social services to advertise available support and entry criteria, in a method that is more likely to reach young adults (Kong et al., 2021; Tan et al., 2021; Ventola, 2014). There is an increasing body of research on alternative methods to provide mental health support, specifically internet-based interventions including the use of social media (Kuhn & McGee-Vincent, 2021; Oliveira et al., 2021; Reger & Hammer, 2021). As social media becomes more integrated with society, it is important that social services explore their role in using social media to support their clients and communities. The aim of this research is to understand the role of social media in supporting the mental health and wellbeing of young adults in Aotearoa New Zealand. It is a qualitative exploratory study involving semi-structured interviews with seven young adults in Aotearoa New Zealand to explore the role of social media in supporting their mental health and wellbeing.

This chapter outlines the rationale for this research, followed by highlighting the research aims and objectives, and the design of this study. Following this there is background information on the research topic and a personal position statement. Concluding this chapter is a definition of key terms used in this thesis, an outline of the structure of the thesis, and a summary of this chapter.

Rationale for the Research

One of the reported concerns young adults are facing when trying to access mental health support is around waitlists and delayed access to mental health support (Every-Palmer et al., 2022; New Zealand Government, 2018; Oliveira et al., 2021). This is partially in response to the increased demand on mental health clinicians, and the inability to effectively support all individuals and families and whānau requiring support using traditional mental health supports (Kuhn & McGee-Vincent, 2021; Oliveira et al., 2021; Reger & Hammer, 2021). Social media has become a critical part of the everyday lives of many individuals, especially for young adults (Tan et al., 2021; Vaid & Harari, 2021; Yang et al., 2021). As a result, social media may impact on the mental health and wellbeing of many young adults through the current use of the range of social media platforms (Reger & Hammer, 2021).

Social media has the potential to be both a positive and negative influence on the lives of young adults (Gallagher, 2021; Gupta & Ariefdjohan, 2021; Naslund et al., 2016). This is due to the interactions that occur on social media, along with the varying quality of information available to young adults (Gallagher, 2021; Gupta & Ariefdjohan, 2021). Despite the risks of social media to the mental health and wellbeing of young adults, there is an abundance of possibilities for positive impacts too (Reger & Hammer, 2021). While social media is regularly criticised for its impacts on the mental health and wellbeing of young adults, in reality, social media appears to be here to stay, and we need to review how social media can effectively support the mental health and wellbeing of young adults. Research shows there is a range of benefits of using social media in mental health treatment (Oliveira et al., 2021; Reger & Hammer, 2021). This research intends to build on this foundation of knowledge to consider the ways young adults engage with social media in terms of their mental health and wellbeing, and the possibilities for social services to use social media when engaging with young adults.

Research Aim

The aim of the research is to explore the role of social media in supporting the mental health and wellbeing of young adults (18 to 24 years old) in Aotearoa New Zealand.

Objectives of Research

The objectives for this research are to:

- explore how social media is currently supporting the mental health and wellbeing of young adults.
- explore how social media can impact the mental health and wellbeing of young adults.
- explore how social services can effectively utilise social media to support the mental health and wellbeing of young adults.

Study Design

The research is a qualitative exploratory study. It adopted a social constructionism orientation, which acknowledges that social actors are both influenced by the social world and influence their social world (Bryman, 2012; Flick, 2014). To achieve the above, semi-structured interviews were conducted with seven young adults. This allowed for the co-construction of knowledge with participants (Bryman, 2012).

Background

Both the international community and Aotearoa New Zealand are seeing a significant rise in demand for mental health services and professional supports (Lattie et al., 2022; Mental Health Foundation, 2021; New Zealand Government, 2018; Oliveira et al., 2021; Reger & Hammer, 2021; Williams et al., 2017). This is accompanied by a change in public perception around therapy, counselling, and mental health treatment, with the stigma associated with help-seeking reducing in many communities and cultures internationally (Angermeyer et al., 2017). Despite more individuals seeking support there are also several unintended consequences such as the significant demand

placed on mental health services, and the increasing shortfall of trained mental health clinicians, therapists, and counsellors (Lattie et al., 2022; Williams et al., 2017). This has resulted in larger wait-times, stricter entry criteria, an overworked workforce, and many individuals unsure of how to access support (Lattie et al., 2022; New Zealand Government, 2018; Oliveira et al., 2021; Reger & Hammer, 2021; Williams et al., 2017). Subsequently, researchers have begun seeking alternative solutions to the rising demand for mental health treatment and support, such as exploring the use of social media, applications, and other means that are less demanding on clinicians (Every-Palmer et al., 2022). As noted earlier, young adults are among those experiencing negative impacts from the increasing demand for mental health services, and this may then negatively affect their mental health and wellbeing (New Zealand Government, 2018; Roberts et al., 2022).

The Mental Health and Wellbeing of Young Adults

In alignment with national and international trends, there is an increasing number of presentations to mental health services by young adults in Aotearoa New Zealand (Hudson & Abbott, 2013; Officer et al., 2022; Wheeler et al., 2015). Young adults are disproportionately presenting to mental health services compared to other age groups (Hudson & Abbott, 2013; Stats NZ, 2022). Many young adults are reporting a range of barriers and concerns with traditional mental health supports, such as waitlists, accessibility of services, entry criteria, and general confusion around how to access support (McMillan et al., 2022; New Zealand Government, 2018; Roberts et al., 2022; Stubbing & Gibson, 2021).

There is a range of factors that negatively contribute to the mental health and wellbeing of young adults that need to be considered when exploring alternative treatment options for this age group (Beautrais, 2003; Gonzales et al., 2015; Groot et al., 2022; New Zealand Government, 2018; Tuffin & Clark, 2016). These include society-wide concerns and barriers with current social services, and these areas are explored in the following chapter. Understanding the current situation around the mental health of young adults in Aotearoa New Zealand is important, especially when considering alternative solutions to the gap between demand for mental health services and the

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shortage of clinicians. There is hope young adults may be more open to help-seeking than older generations. Many young adults are also reporting positive experiences when they are able to engage with mental health supports, and that engagement and support lead to positive impacts on their mental health and wellbeing (McMillan et al., 2022; Rickwood et al., 2007). However, as research indicates, there are a range of barriers for young adults to accessing social services, and so one possible solution or at least contribution, to address these barriers is the increased use of social media.

Social Media and Young Adults

Social media is a source of information, connection, and entertainment for a majority of young adults (Cataldo et al., 2021; Ventola, 2014; Yang & Lee, 2020). Social media has become entangled in the everyday lives of young adults and has surpassed print media as a source of information for young adults (Sheth, 2020; Tan et al., 2021). As a result of the rising popularity of social media, particularly as an information source, there has been an increasing focus on the accuracy and reliability of information found on social media. Misinformation is a growing concern and is spreading at a faster rate than ever before in recorded history (Gabarron et al., 2021; Pennycook & Rand, 2019; Scherer et al., 2021; Shijie et al., 2021; Tasnim et al., 2020). This has had real-world negative impacts in relation to health-related information and decisions and has caused risks to public health and safety (Gabarron et al., 2021; Ma et al., 2021). The accessibility of social media has contributed to this spread, but despite this, it can also be used as a tool to counter the detrimental impacts by supporting greater access to accurate information about mental health treatment and support (Roberts et al., 2022; Smailhodzic et al., 2016).

Online communities may enable many young adults to gain greater awareness of their own agency in relation to their mental health and wellbeing, understand the experiences of other individuals, and reduce stigma around help-seeking (Diesing, 2013; Tan et al., 2021; Ventola, 2014). These online communities hold risks at times, particularly in relation to risky behaviours, such as non-suicidal self-injury and suicidal behaviours, and self-diagnosing (Beautrais, 2003; Colhoun, 2016;

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Marchant et al., 2017; Naslund et al., 2016; Wasson, 2014). This risk is associated with a range of negative impacts from social media platforms. However, they also allow for greater sharing of coping strategies, treatment options, and personal experiences. Due to these reasons, this research explores how social services can effectively utilise social media to support the mental health and wellbeing of young adults.

Position Statement

All individuals hold values, beliefs, and biases, that impact the experiences they face, and their ability to engage in research and practice (Keinemans, 2015; Rescher, 2004). When conducting any form of research, it is important to acknowledge the position of the researcher, as the researcher is not a neutral participant (Bryman, 2012; Creswell, 2013). This is equally true for social work practice (Yeung et al., 2010). By acknowledging and accepting one's own values, beliefs, and biases, the researcher can begin to consider the impacts on their ability to be objective in their research (Babbie, 2014; Bryman, 2012; Creswell, 2013). This can be of importance in qualitative research, particularly when the researcher is using interviews as the data collection method (Bryman, 2012; Creswell, 2013).

As a registered social worker, working as a mental health clinician for a social service in Whanganui, I became interested in the impacts of social media on the mental health and wellbeing of young adults. I noticed that we were experiencing an increase in demand for therapy for various mental health diagnoses and stressors from young adults, many of whom were struggling to get their needs met through available services in a timely manner. These young adults turned up to our agency often unsure of where to get appropriate support. An increasing number of self-referrals were young adults unsure of pathways to gain support but eager to approach the correct social services once they were aware of their existence. Within the therapy space, I also began hearing increased mention of social media. While part of this was negative, many clients mentioned social media positively. I noticed a trend of individuals asking me questions about psychoeducation they

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received on social media, often asking about its accuracy. Other individuals discussed skills and strategies they had learnt on TikTok or Instagram, or peer support they had received from Facebook groups. I became increasingly curious about the positive impact social media was having on my clients, and I wondered if mental health clinicians, social workers, and social services should have more of a role on social media, to improve mental health and wellbeing outcomes for young adults. As a result, I choose to make this the focus of my research.

Definitions of Key Terms

The following terms have been defined to ensure consistency of understanding across the report:

Client: a person who has accessed support from a health or social service.

Coping strategies: purposefully used skills and techniques that an individual can use to identify their emotional signals and to manage heightened emotions and distress. These skills and techniques are used in helpful and non-harmful ways.

Diagnosis or clinical diagnosis: a formal diagnosis of a condition or illness from a registered and qualified mental health professional.

Disinformation: the purposeful spreading of incorrect or false information, with the purpose of misleading or manipulating individuals or groups. Where the individual spreading the information is aware the information is incorrect or false.

Functional impacts: the impacts of an individual's ability to complete the tasks of everyday life and their goals due to their mental health concerns.

Infographic: a visual representation of information, data, or knowledge, presented to be eye-catching.

Mental health and wellbeing: a state of wellness that enables people to cope with the stresses of life, realise their capacity, function in their everyday life, and interact positively with their community.

Mental health clinician: a person who works for a health or social service working with clients who experience mental health concerns. This person will hold professional registration as a social worker, nurse, occupational therapist, psychologist, psychotherapist or other allied health professional.

Mental health concerns: ongoing symptoms affecting an individual's mood, thoughts, and behaviours, that cause frequent distress and affect their ability to function. This includes but is not limited to formal diagnoses.

Mental health services or mental health supports: social or health services specifically focused on mental health or a mental health clinician. This includes non-governmental organisations offering clinical mental health support.

Mental health treatment: any purposeful activity to improve one's mental health and wellbeing or to reduce symptoms associated with mental health concerns.

Misinformation: the spreading of incorrect or false information. The participant spreading information may or may not be aware of the information's accuracy.

Non-suicidal self-injury (NSSI) behaviours: are defined as "the direct, purposeful damage to body tissue, without suicidal intent" (Garisch et al., 2017).

Online communities: a group of individuals, who interact with one another in an online environment, such as on a social media platform. These communities are identified by members having a shared interest or circumstance, a space where support, resources and experiences are shared, and interpersonal relationships exist.

Pharmacological treatments: medications to treat various mental health conditions.

Presentations or presenting: terms used by mental health clinicians to highlight the behaviour of clients making initial contact with mental health services.

Professional supports: a mental health clinician, support worker, or social or health service.

Self-diagnosing: the behaviour of applying clinical diagnostic language to oneself, as a replacement for a clinical diagnosis.

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Social and health services (also referred to as either **social services** or **health services**):

organisations that work with individuals and families around particular health or social stressors or circumstances

A social media influencer: someone who has a large following on a social media platform, and posts content related to a particular industry or niche, to spread information, insight, or advertisements.

Social media platforms: interactive websites or applications where individuals can connect with and communicate with other individuals. These platforms include Facebook, Instagram, TikTok, X (formally known as Twitter), YouTube, Reddit, LinkedIn, Snapchat, and Pinterest.

Social worker: a person who holds registration as a social worker with the New Zealand Social Workers Registration Board.

Traditional mental health supports refers to accessing mental health services, social services, health services, a GP (general practitioner), mental health clinician, private therapist/psychologist, or a psychiatrist for support around mental health and wellbeing.

Young adults: individuals aged between 18 years and 24 years of age.

Structure of Report

This thesis has been separated into seven chapters.

Chapter One: Introduction. This chapter establishes the foundation of this thesis.

Background information and the rationale for this research is outlined. The research question, objectives, and study design are detailed prior to an explanation of the researcher's positionality. Key terms used throughout the thesis are also defined.

Chapter Two: The Mental Health and Wellbeing of Young Adults. This chapter explores the literature on the mental health and wellbeing of young adults in Aotearoa New Zealand. Key themes from the literature include experiences of mental health and wellbeing of young adults in Aotearoa New Zealand; the positive and negative impacts on the mental health and wellbeing of young adults;

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the functional impacts of having mental health concerns; and risky behaviours associated with mental health concerns.

Chapter Three: Social Media and Young Adults. This chapter explores literature on the relationship between social media and young adults. It discusses the patterns of social media use by young adults; the accessibility of social media; the use of social media to support the mental health and wellbeing of young adults; how social media compensates for traditional mental health and wellbeing supports, and the risks of social media use.

Chapter Four: Methodology and Methods. Within this chapter is a discussion of the methodology and methods used in this research. The theoretical framework, research design, and ethical considerations that went into the development of this research are outlined.

Chapter Five: Results. The results chapter highlights common patterns and themes from participants, analysed from the semi-structured interviews.

Chapter Six: Discussion. This chapter discusses the key findings from both the participants and the literature review that align with the three research objectives.

Chapter Seven: Conclusion. The final chapter concludes the thesis and presents the key findings as well as recommendations for social services in Aotearoa New Zealand to consider how to most effectively use social media platforms to support the mental health and wellbeing of young adults.

Chapter Summary

This chapter has introduced and provided a rationale for the research, along with background information. In exploring the role of social media in supporting the mental health and wellbeing of young adults this research aims to explore the current support social media offers, the impacts of social media, and how social services can effectively use social media to support the mental health and wellbeing of young adults. The following chapter presents literature related to the mental health and wellbeing of young adults in Aotearoa New Zealand.

Chapter 2: The Mental Health and Wellbeing of Young Adults

Young adults in Aotearoa New Zealand currently have the poorest access and engagement to mental health services out of all adult age groups (McGorry et al., 2013; Stubbing & Gibson, 2021). Along with poor access to and engagement with mental health services, young adults are also presenting with mental health concerns at an increasing rate (Hudson & Abbott, 2013; Wheeler et al., 2015). This research seeks to explore the role of social media in supporting the mental health and wellbeing of young adults in Aotearoa New Zealand. This chapter identifies the literature on the mental health and wellbeing of young adults. Exploring the literature on the mental health and wellbeing of young adults provides a foundation of knowledge for exploring the impacts social media has on the mental health and wellbeing of young adults, which is explored in the subsequent chapter.

The chapter begins by exploring the current situation of the mental health and wellbeing of young adults in Aotearoa New Zealand. Subsequent sections explore the negative factors that contribute to the mental health and wellbeing of young adults, followed by factors positively impacting the mental health and wellbeing of young adults. Next is a discussion of the functional impacts of mental health and wellbeing concerns for young adults including the risky behaviours of young adults with mental health concerns. This is to provide the current context of mental health and wellbeing of young adults in Aotearoa.

Framing the Mental Health and Wellbeing of Young Adults in Aotearoa New Zealand

As detailed in chapter one, there is an increasing number of presentations of young adults with mental health concerns in Aotearoa New Zealand (Hudson & Abbott, 2013; Officer et al., 2022; Wheeler et al., 2015). Data collected by Stats NZ (2022) showed that 11% of young adults reported higher rates of unhappiness, compared to 7.8% in the general population. 17.8% of young adults reported high rates of anxiety, compared to 16.1% of the general population. Stats NZ (2022) data

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shows that 21.4% of young adults expressed complete dissatisfaction with their lives compared to 19% of the public, along with 22% of young adults reporting what they do is not worthwhile, compared to 14% in the general public. This is compounded by 11.6% of young adults not having enough money to meet their basic needs compared to 8.8% of the general public, and 18.2% of young adults dissatisfied with their work/life balance compared to 14.8% of the general public (Stats NZ, 2022). Furthermore, the youth suicide rate (aged 15 to 24) in Aotearoa New Zealand is higher than the adult suicide rate (Manatū Hauora, 2022).

For young adults who experience mental health concerns, there are many negative impacts on their everyday lives, including affecting employment, socialisation, relationships, increased non-suicidal self-injury (NSSI) and suicidal behaviours, lower life expectancy, poorer quality of life, and lower abilities to engage in activities of daily living (Beautrais, 2003; Filia et al., 2022; Gariépy et al., 2022; Stubbing & Gibson, 2018; Wheeler et al., 2015). While young adults have a myriad of factors negatively impacting their overall mental health and wellbeing, they also have poorer access to mental health services than older adult age groups (McGorry et al., 2013; Stubbing & Gibson, 2021).

Suicide, Non-Suicidal Self-Injury (NSSI), and Other Risk Behaviours

Suicide is becoming increasingly normalised in Aotearoa New Zealand society among young adults, with expressing ideations becoming a normal part of everyday life (Colhoun, 2016; Stubbing & Gibson, 2018). This dangerous trend has been linked with increased media reporting of suicide, social media's glorification of suicide, and changed public perceptions around suicide (Beautrais, 2003; Colhoun, 2016; Marchant et al., 2017). Almost half of Aotearoa New Zealand suicides are males aged between 25 and 44 years of age, and particularly at risk are those of lower socioeconomic status or without educational qualifications (Beautrais, 2003). However, the strongest precursor of suicidal ideations or behaviours is mental health concerns (Stubbing & Gibson, 2018). The most high-risk mental health disorders that indicate suicide risk are mood disorders, anxiety disorders, substance use disorders, and conduct disorders (Beautrais, 2003).

There is a growing number of youth and young adults engaging in NSSI behaviours (Fitzgerald & Curtis, 2017; Garisch et al., 2017). NSSI behaviours are defined by Garisch et al. (2017) as “the direct, purposeful damage to body tissue, without suicidal intent” (P. 98). Current research on NSSI puts the lifetime prevalence between 13% and 18%, with the rate of young adults engaging in NSSI behaviours at 38.2% (Fitzgerald & Curtis, 2017). However, most individuals who engage in NSSI behaviours begin engaging in NSSI during their adolescent years (Gillies et al., 2018). Groups at a higher risk of engaging in NSSI behaviours include women and members of the LGBTQI+ community (Fitzgerald & Curtis, 2017). Often NSSI is used as a coping mechanism for uncomfortable and difficult emotions and thoughts, due to the short-term psychological relief that can be experienced (Blasco-Fontecilla et al., 2016). However, this relief is generally short-lived, which can create an addictive nature of NSSI behaviours for many young adults (Blasco-Fontecilla et al., 2016). Along with the physical harm, NSSI can also reduce individuals’ abilities to self-regulate their emotions, leading to greater reliance on NSSI behaviours (Garisch et al., 2017). Research around coping strategies highlights the importance of alternative means of coping. Providing pathways, such as using social media platforms to learn coping strategies is important to reduce NSSI behaviours in young adults (Blasco-Fontecilla et al., 2016; Garisch et al., 2017; McMillan et al., 2022; Rickwood et al., 2007). The following section explores the range of factors negatively affecting the mental health and wellbeing of young adults.

Factors Negatively Contributing to the Mental Health and Wellbeing of Young Adults

Exploring the presenting concerns for young people engaging with social services provides a framework for understanding the space in which social services can effectively use social media to improve mental health and wellbeing for young adults. Social factors are important to understand, as social media heavily influences the social world of young adults, both positively and negatively, and understanding this context is key to exploring how social media can be used to support the

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mental health and wellbeing of young adults. Many factors can negatively impact the mental health and wellbeing of young adults, which may lead to an increase in mental health concerns.

Understanding the society-wide concerns is to further frame the presenting situation around the mental health and wellbeing of young adults in Aotearoa New Zealand to understand the context for supporting young adults. These factors are divided into three categories: society-wide concerns; social factors; and concerns with social services.

Society-Wide Concerns

The mental health and wellbeing of young adults can be impacted by a range of societal factors. One important factor impacting young adults is housing, specifically unaffordable housing (Groot et al., 2022; New Zealand Government, 2018). Increased urbanisation worldwide has increased the demand for housing in urban areas, and this has had an economic impact on the cost of housing (Hikichi et al., 2020). Many young adults find themselves struggling with costs of independent living, often related to the transitional stage of young adults around occupation, and thus find themselves in lower quality living situations, particularly in comparison to their parent's houses (Hikichi et al., 2020; Seo & Park, 2021; Tuffin & Clark, 2016). Having a lack of fixed and long-term housing has negative implications for the mental health and wellbeing of young adults (Narendorf, 2017). Hikichi et al. (2020) discuss boomerang children, referring to young adults who return to living with their parents' multiple times after first leaving their parent's house. These young adults who live with their parents are associated with an increase in depression-related symptoms (Hikichi et al., 2020). Even for young adults who live independently, research highlights that those living in low-quality housing, or perceived low-quality housing, will also face negative implications on their mental health and wellbeing (Seo & Park, 2021).

Occupation can be a key factor affecting the mental health and wellbeing of young adults, particularly, due to the transitional nature of the young adulthood stage (Gariépy et al., 2022; New Zealand Government, 2018; Seo & Park, 2021). Lack of employment is one of the three largest psychological stressors that precipitate suicidal behaviours for young adults (Beautrais, 2003). There

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has been an increase in young adults who are not in education, employment, or training (NEET) worldwide (Robertson, 2019). The relationship between negative mental health outcomes and being NEET is bidirectional (Filia et al., 2022; Gariépy et al., 2022). Young adults who become NEET experience a range of factors that may negatively impact their mental health and wellbeing (Filia et al., 2022; Gariépy et al., 2022; Lindhardt et al., 2022). They are more likely to experience higher rates of depression, anxiety, suicidality, and engagement in risky behaviours, including eating disorders, non-suicidal self-injury (NSSI), and substance use (Gariépy et al., 2022; Robertson, 2019). This disengagement from employment and education often results in a heightened sense of shame and hopelessness for young adults (Gariépy et al., 2022). For New Zealanders who are unemployed, 32.6% reported having poor mental wellbeing, 14.8% feeling unhappy often, and 20.8% reported experiencing large amounts of anxiety (Stats NZ, 2022). There are also significant economic implications of being NEET as a young adult, both in the short-term and long-term, which have flow-on implications for housing quality for young adults (Filia et al., 2022; Lindhardt et al., 2022). Becoming NEET may increase social exclusion from peers, and this social exclusion may become more prominent the longer they maintain the NEET status (Filia et al., 2022; Gariépy et al., 2022). This is further enhanced for young adults who belong to marginalised groups in society (Filia et al., 2022).

Discrimination against young adults who experience mental health concerns often results in reduced opportunities for employment, safe housing, and social rejection (Morgan et al., 2016). In Aotearoa New Zealand, structural and interpersonal racism significantly impact the mental health and wellbeing outcomes of many population groups (Harris et al., 2018). Population groups in Aotearoa New Zealand who experience higher rates of racism are Māori, Asian, and Pacific people (Harris et al., 2018). In addition to racism, discrimination around sexual orientation and gender identity may impact the mental health and wellbeing of young adults, especially for members of the LGBTQI+ community (Adams et al., 2013; Pennay et al., 2018). Mental health and wellbeing concerns are more common for young adults who are members of the LGBTQI+ community (Adams et al.,

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2013; Pennay et al., 2018). Pennay et al. (2018) related this to the levels of discrimination members of this group experience, along with the lack of inclusive language and gender and sexual assumptions made by both mental health professionals and members of the public. The relationship between discrimination and mental health concerns is bidirectional, as many young adults who experience mental health concerns face a range of discrimination as a result (Filia et al., 2022; Morgan et al., 2016).

Social Factors

As social beings, the social relationships of young adults have a direct influence on their mental health and wellbeing. While social media is seen as a method to increase the social access young adults have to their peers, this is not always the case. However, with and without the influence of social media platforms, mental health concerns have a strong relationship with where a young adult fits in the social world (Baker & Procter, 2015). This includes social exclusion and isolation, close relationships, bullying and peer pressure, and social stigma.

Alongside the discrimination noted in the previous section many young adults who experience mental health concerns are at a higher risk of social exclusion, isolation, and rejection from their peers (Gonzales et al., 2015; Tuffin & Clark, 2016). This is largely due to negative stigma and a lack of understanding of mental health concerns, along with individuals feeling lost about how to best support their friends (Brandt et al., 2022; Prizeman et al., 2023). By being socially rejected by their peers, individuals with mental health concerns are likely to experience further impacts on their mental wellbeing, lower self-esteem, and increased feelings of isolation (Efeoglu & Sen, 2022; Gonzales et al., 2015). While having a mental health concern can increase experiences of social rejection for young adults, the relationship between mental health implications and social rejection also goes the other way. Friendships are an important factor in the overall wellbeing of many young adults; while strong friendships can strengthen an individual's wellbeing, a lack of friendships can weaken their wellbeing (Efeoglu & Sen, 2022). Many young adults who experience social rejection

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from their peers, especially from their same-sex peers, are likely to experience negative implications on their mental health and wellbeing (Efeoglu & Sen, 2022).

The role of intimate relationships also plays a key role in the mental health and wellbeing of many young adults. This is in alignment with Erik Erikson's theory of psychological development, wherein young adults enter the stages of intimacy or isolation (Drewery & Claiborne, 2013; Payne, 2014). Young adults are learning to form loving relationships with other people, and intimate relationships can be a significant part of this developmental stage (Drewery & Claiborne, 2013). Positive experiences with intimate relationships can have positive impacts on the development and mental wellbeing of young adults (Drewery & Claiborne, 2013; Liang & Horn, 2022). However, the dissolution of an intimate relationship can lead to increased psychological distress, lower life satisfaction, and feelings of rejection and betrayal (Liang & Horn, 2022; Rhoades et al., 2011). Furthermore, there are logistical concerns that come from intimate relationships, such as having to move house, increased living costs, and possible custody issues (Rhoades et al., 2011). The combination of these factors can have implications for the mental health and wellbeing of young adults. Many young adults who experience the dissolution of a positive intimate relationship experience higher rates of depression and anxiety (Liang & Horn, 2022). Relationship breakdowns are one of the largest psychological stressors that precipitate suicidal behaviours (Beautrais, 2003). For many young adults, social media has become critical to their intimate relationships, with online dating applications emerging, and with an expectation of sharing one's intimate relationship on social media platforms (Méndez-Díaz et al., 2022; Sutcliffe et al., 2018).

Bullying during adolescence can also significantly affect the mental health and wellbeing of young adults. There is a pool of evidence that highlights that bullying can lead to increased rates of mental health concerns (Coggan et al., 2003; Ong et al., 2021). Bullying can cause psychological stress for many individuals, and the impacts of this stress may follow the young adult into adulthood (Oxle et al., 2020; Ong et al., 2021). Bullying can also lead to increased rates of engagement in non-suicidal self-injury (NSSI) behaviours and suicidal ideations (Coggan et al., 2003; Ong et al., 2021).

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Bullying is one of the most commonly experienced traumatic events many young adults report from their childhood and adolescent years (Ong et al., 2021). Social media has opened up a new space for bullying behaviours to emerge (Gallagher, 2021; Naslund et al., 2016). The risks to the mental health and wellbeing of young adults from bullying have been part of society over history, however, with the accessibility of social media, these concerns are growing.

Misinformation and negative stigma around mental health and wellbeing are other social factors affecting young adults (Cunningham et al., 2023; Flett et al., 2020). The stigma around mental health concerns has a range of negative impacts on the mental health and wellbeing of young adults, such as acting as a barrier to them seeking professional input around their mental health and wellbeing, and as a foundation for bullying (Cunningham et al., 2016; Flett et al., 2020). Stigma and misunderstandings around mental health concerns can come from friends and family, as well as peers. Often it is the misunderstandings around mental health concerns from family that can be the largest barrier to accessing support for young adults (Cunningham et al., 2016).

The negative social impacts of having mental health concerns for young adults are important to understand when considering how social media can impact the mental health and wellbeing of young adults, as it provides the context for understanding why certain recommendations and changes are required.

Concerns with Social Services

There are a range of barriers that young adults face when trying to access mental health services in Aotearoa New Zealand (New Zealand Government, 2018; Roberts et al., 2022). These barriers range from accessibility, a focus on pharmacological treatments, perceptions around mental health services, demand for services beyond the current capacity of services, and knowing what support services offer (New Zealand Government, 2018; Oliveira et al., 2021; Roberts et al., 2022; Stubbing & Gibson, 2021).

As detailed in chapter one, young adults are less likely to access mental health supports in Aotearoa New Zealand than adults in older age groups (Wells et al., 2006). This can possibly be

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explained by the current perception that mental health services are not accessible for young adults who do not present as having concerns serious enough to require support (Every-Palmer et al., 2022; Fraser, 2020; New Zealand Government, 2018). Researchers have found that many individuals who present for mental health support, have been declined support from secondary mental health services in Aotearoa New Zealand, as they did not meet the criteria of having a moderate-to-severe mental health disorder (Fraser, 2020; Mathieson et al., 2019; Sopoaga et al., 2023). For these young adults, there are limited publicly funded options for support, and the available options vary across the country (New Zealand Government, 2018). Growing waitlists and complexities of cases further the concerns around accessibility to services across Aotearoa New Zealand for young adults, with many studies finding that young adults were not able to access mental health support in a timely fashion (Every-Palmer et al., 2022; Fraser, 2020; New Zealand Government, 2018). Further accessibility barriers to gaining support identified for young adults include services having inaccessible locations and limited hours of operation (Stubbing & Gibson, 2021). In previous studies, many young adults have indicated that often mental health services can be too confusing to access, and that they struggle with knowing what service is appropriate for them (McMillan et al., 2022; Stubbing & Gibson, 2021).

Young adults prefer to engage in treatment options that are more active, than treatment options that are based on waiting to notice if changes present (McMillan et al., 2022; Rickwood et al., 2007). Young adults, therefore, may prefer therapy or counselling-based treatment options, over pharmacological treatments (New Zealand Government, 2018; Rickwood et al., 2007; Stubbing & Gibson, 2021). Internationally many young adults have reported feeling a loss of autonomy with pharmacological treatments as noted in McMillan et al.,'s 2022 study, with young adults in this research reporting that their medications were decided by their parents and doctors, rather than themselves. This perception often led to young adults favouring therapy and counselling over pharmacological treatments. More active treatment options, in addition to therapy, include practical things young adults can do to improve their mental health and wellbeing, such as the use of coping

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skills and strategies, positive self-care, and good foundational health habits (Garisch et al., 2017; McMillan et al., 2022; Rickwood et al., 2007).

There are many negative perceptions that young adults across Aotearoa New Zealand hold against mental health services, which may be a barrier to accessing support (Rickwood et al., 2007). One negative perception is that mental health services cannot help them with their mental health, and that they need to address their concerns themselves (Rickwood et al., 2007). Furthermore, young adults may believe that mental health services are not appropriate for them (Stubbing & Gibson, 2021). The stigma that is held around mental health services and help-seeking amplifies these perceptions and adds an additional barrier for young adults engaging in mental health support, while the stigma is reducing, this is still a concern for many young adults (Rickwood et al., 2007; Stubbing & Gibson, 2021). Beyond these perceptions, many young adults may also worry about confidentiality and their privacy if they access support, and about negative attitudes from mental health clinicians (Stubbing & Gibson, 2021). These perceptions all have elements of truth to them, as research shows that young adults have poorer access to mental health support than older adults and that many adult mental health services are not suited to young adults (McGorry et al., 2013; Stubbing & Gibson, 2021).

Understanding the factors that negatively impact the mental health and wellbeing of young adults, or limitations to support for mental health concerns for young adults by social services is important when considering how social media can impact the mental health and wellbeing of young adults. The next section explores positive impacts on the mental health of young adults to develop an understanding of how these can be amplified through the use of social media platforms.

Positive Impacts on the Mental Health and Wellbeing of Young Adults

A range of factors can have positive impacts on the mental health and wellbeing of young adults including social relationships, lived experiences of mental health survivors, active treatment options, and engagement with social services.

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Social relationships are an important part of the lives and developmental stages of young adults, whether these are located in community groups, social relationships, familial relationships, or intimate relationships (Drewery & Claiborne, 2013). Having a group of supportive people involved in the lives of young adults is directly related to improved mental health and wellbeing outcomes (Efeoglu & Sen, 2022; Liang & Horn, 2022). As many young adults who experience mental health concerns experience isolation and loneliness, it is important that support includes exploring the individual's social situation and supporting the growth of one's social circle as appropriate (Filia et al., 2022; Tuffin & Clark, 2016).

Young adults may value knowing that they are a part of a community of individuals with mental health concerns (Gallagher, 2021; Griffith & Stein, 2021). For instance, many young adults benefit from the shared experiences of other individuals who previously have, or currently experience, mental health concerns (Griffith & Stein, 2021; Wilson & Stock, 2021). By seeing the lived experiences of other individuals with mental health concerns people can feel less alone and validated about their own experiences (Gallagher, 2021; McCosker & Gerrard, 2021). These stories can also install hope into a population group that may struggle to feel hopeful, as they can view other individual's successful journeys of recovery and begin to believe this is possible for themselves (Gallagher, 2021; Naslund et al., 2016). This allows for young adults to offer support to other young adults.

Treatment options that involve active participation from the young adult who is experiencing mental health concerns are noted to have improved outcomes in engagement from young adults (McMillan et al., 2022; Rickwood et al., 2007). Many young adults reported positive experiences with engagement in therapy with mental health clinicians they felt comfortable with (Rickwood et al., 2007). For many young adults, the development of coping strategies and grounding skills is key to improving their mental health and wellbeing (Garisch et al., 2017). Young adults have reported they prefer treatment options that are more holistic and require active user participation (McMillan et al., 2022; New Zealand Government, 2018; Rickwood et al., 2007). Research shows that

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mental health services are supporting better mental health and wellbeing outcomes for young adults when engagement is maintained (Shailer et al., 2017). The current impacts on the mental health and wellbeing of young adults are important to understand to explore how social media platforms can enhance and increase practical supports. The following section explores the functional impacts for young adults with mental health concerns.

Functional Impacts for Young Adults with Mental Health Concerns

There are a range of functional impacts young adults may experience as a result of having mental health concerns. Many functional impacts contribute to the barriers young adults experience when engaging with social services, social relationships, and society in general. Social media platforms can be a consistently accessible resource. Key functional areas where mental health impacts young adults include employment training and education, social relationships, housing, activities of daily living, and future planning (Bowden et al., 2020; Folia et al., 2022).

For young adults with mental health concerns, becoming NEET is a significant concern. McGirr and Earle (2019) reported that young adults with mental health concerns were a high-risk group of becoming NEET. Becoming NEET is a risk factor for young adults with mental health concerns for several reasons, such as struggling with motivation and confidence to seek and maintain opportunities, experiencing discrimination based on their mental health concerns, and conflicts between accessing mental health treatments and standard working hours (Bowden et al., 2020; Morgan et al., 2016; Wheeler et al., 2015). Becoming NEET due to their mental health concerns has significant impacts on the life prospects of many young adults (Bowden et al., 2020; Gariépy et al., 2022). There are many tasks that need to be completed on a daily basis, such as maintaining our environment, completing personal hygiene cares, and paying bills, these can come under the header of activities of daily living.

Individuals with mental health concerns may struggle to achieve their activities of daily living (Wheeler et al., 2015). Through the combination of the functional impacts of mental health concerns

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on employment and education, and on meeting their activities of daily living, young adults with mental health concerns may face issues with maintaining housing (Filia et al., 2022; Morgan et al., 2016; Wheeler et al., 2015). The role of mental health concerns in the social interactions of young adults cannot be understated. The above functional impacts have flow-on implications for the socialisation for young adults, largely due to stigmas around being NEET, on their living situations, and around the importance of personal hygiene and activities of daily living (Filia et al., 2022; Gariépy et al., 2022; Wheeler et al., 2015). These elements may then increase difficulties for young adults as they socialise with others (Gonzales et al., 2015; Tuffin & Clark, 2016). Beyond these functional impacts for young adults with mental health concerns, there are a range of risky behaviours that young adults with mental health concerns may engage in.

Chapter Summary

This chapter has explored the literature on the mental health and wellbeing of young adults in Aotearoa New Zealand. It highlights that the mental health and wellbeing of young adults in Aotearoa New Zealand is a complex topic and, many factors can be impactful. Many of these factors can negatively impact the mental health and wellbeing of young adults but can also lead to functional impacts in these areas. Additionally, to strengthen the mental health and wellbeing of young adults, these same areas are important. The next chapter addresses literature on the relationship between social media and young adults. This is to provide foundational knowledge on the current role of social media and to begin to explore how social media may be able to support better mental health and wellbeing outcomes for young adults.

Chapter 3: Social Media and Young Adults

The use of social media in the lives of young adults has grown significantly with advancements in social media technology, leading to social media becoming an integral part of the everyday lives of many young adults (Yang et al., 2021). Social media has influenced many aspects of young adults' lives, ranging from the way young adults socialise with friends to how they take in new information (Pennycook & Rand, 2019; Yang & Lee, 2020). Social media holds a range of benefits and risks for young adults, but it is evident that social media is now entrenched in our society. With the high rates of social media use among young adults, there is a need to explore how we can amplify the benefits of social media to better support the mental health and wellbeing of young adults. This is not however to ignore the current risks of social media to the mental health and wellbeing of young adults. This chapter explores the literature related to the relationship between social media and young adults, with a focus on mental health and wellbeing.

Patterns of Social Media Use by Young Adults

Social media has become one of the most accessed sources of information in contemporary society (Pennycook & Rand, 2019; Tan et al., 2021; Vaid & Harari, 2021). In the fourth quarter of 2021, Facebook recorded 2.91 billion monthly users, while Instagram had 2.00 billion users, and TikTok reported 700 million monthly users (Bursztynsky, 2021; Statista, 2022a, 2022b). By becoming a part of the everyday lives of individuals, social media fills a range of needs and is used in myriad ways (Cataldo et al., 2021; Hartnett, 2017; Kingsbury et al., 2021). Young adults are no exception to this with one of the highest rates of social media use; both in terms of having at least one social media account and average time spent on social media (Bailey et al., 2022; Diesing, 2013; Yang et al., 2021). This section explores the patterns of social media use by young adults addressing how social media is used as a tool for socialisation, as an information source, and how the Covid-19 pandemic and lockdowns impacted the use of social media by young adults.

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Social media is a frequently used tool in the everyday lives of young adults (Diesing, 2013; Vaid & Harari, 2021). At any given time, around half of the world's population is using social media and young adults spend a larger proportion of their day on social media than older age groups (Diesing, 2013). Young adults have a wide range of uses for this tool, from entertaining themselves, socialising, finding love, passively and purposefully consuming new information, surveillance, expressing themselves, and supporting their mental health and wellbeing (Cataldo et al., 2021; Kim & Kim, 2022; Kingsbury et al., 2021; Stone et al., 2022; Sun, 2022; Yang et al., 2021). It is both a purposeful tool for young adults to achieve a set purpose and also a passive tool young adults use to pass the time (Kim & Kim, 2022; Wunderlich et al., 2022).

As noted in the introduction to this section social media can be a vital part of social connectedness for young adults (Yang & Lee, 2020). The communication function of social media is one of the most powerful aspects for young adults (Cataldo et al., 2021; Kim & Kim, 2022; Yang et al., 2021). Evidence shows that social media supports young adults to meet their social needs (Teater et al., 2021; Wilson & Stock, 2021). In times when young adults are unable to physically socialise with others, social media can be a key factor in decreasing loneliness (Teater et al., 2021; Wilson & Stock, 2021). The use of social media by young adults can enhance their sense of community, by increasing their social interactions with people in similar situations themselves (Cataldo et al., 2021; Gallagher, 2021; Griffith & Stein, 2021). This is especially true in terms of health conditions, such as mental health. Many young adults find support for their health conditions in online communities, which can support their wellbeing during difficult times (Gallagher, 2021; Teater et al., 2021; Wilson & Stock, 2021).

Social media is used as an information source by a large proportion of young adults (Diesing, 2013; Kim & Kim, 2022; Lewandowsky et al., 2012; Pennycook & Rand, 2019). Research has highlighted that young adults are less likely to visit news websites than older age groups, using social media as their primary news source (Diesing, 2013; Wunderlich et al., 2022). In this way, young adults are increasingly using social media as a primary source of information on current events,

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along with other pieces of information relevant to them (Gallagher, 2021; Kong et al., 2021; Ma et al., 2021; Pennycook & Rand, 2019; Shijie et al., 2021).

Often young adults are described as passively consuming new content, where news and new information appear on the newsfeeds and 'for you' pages of young adults, rather than young adults purposefully seeking information (Kim & Kim, 2022). This passive approach to using social media, and consuming news has resulted in a perception in many young adults that news will find them (Wunderlich et al., 2022). This passive approach to information-seeking creates space for social media becoming a first step for many young adults in seeking support for their mental health. As increasing quantities of information about mental health and wellbeing are becoming available on social media platforms, we are seeing an increase in information on mental health and wellbeing being viewed by young adults, due to the passive nature of information-seeking (Kummervold et al., 2002; Wunderlich et al., 2022). The Covid-19 pandemic also impacted patterns of social media use by young adults which is explored in the next section.

Impacts of Covid-19 Lockdowns on Social Media Use for Young Adults

Research from Australia and Aotearoa New Zealand highlighted that throughout the Covid-19 pandemic, many young adults experienced higher rates of psychological distress (Bailey et al., 2022; Officer et al., 2022). In Aotearoa New Zealand, the Covid-19 pandemic brought an increase in fear, anxiety, and feelings of grief and loss, which had detrimental effects on the mental health and wellbeing of many New Zealanders (Officer et al., 2022). Part of this decline was related to social distancing, and reduced social interaction, which at times led to a trade-off between physical safety and maintaining positive mental health and wellbeing (Officer et al., 2022). Social media was commonly used by young adults during the Covid-19 pandemic to seek support for mental health concerns, such as suicidal ideations and NSSIs (Bailey et al., 2022). During the various lockdowns and restrictions put in place to prevent the spread of Covid-19, social media was one of the largest methods used to support young adults to meet their social needs (Kocabiyik, 2021; Teater et al., 2021). Young adults who used social media as a communication tool during this time were likely to

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experience lower rates of loneliness and isolation than other young adults due to the social nature of social media platforms (Teater et al., 2021). In addition, Bailey et al. (2022) reported that half of the young adult Australians in their research used social media to support themselves or friends around mental health concerns, such as suicidal thoughts and NSSI ideations during the covid-19 pandemic.

Accessibility of Social Media

Part of the success of social media is that it can be widely accessed by young adults, which means it can be a powerful mechanism for health services to provide accessible information to their communities (Ventola, 2014). Traditional delivery of social and health care services may create a range of barriers to engagement including restricted opening hours, transportation issues, stigma, waitlists, and lack of knowledge of available services (Appleby & Phillips, 2013; Ferris-Day et al., 2021; Roberts et al., 2022).

Physical barriers to services, such as the opening hours of services and transportation often disproportionately affect particular population groups. These include individuals of lower socio-economic status who face financial barriers, such as affording transportation, and individuals in paid employment, who face challenges in taking time off from work to engage with services (Appleby & Phillips, 2013). Another population group disproportionately affected by physical barriers are individuals in rural or smaller communities, who often have fewer services available to them, and face concerns such as the lack of knowledge of services in urban centres, and increased concerns around confidentiality, due to the lower population in their community (Ferris-Day et al., 2021). Physical barriers to engagement can, at least in part, be overcome by social media use from social and health care services. This is due to the accessibility of information on social media as information and resources can be available to an individual's own devices at any time (Smailhodzic et al., 2016; Ventola, 2014). This increased access to information can mean that individuals can review information outside of appointments (Smailhodzic et al., 2016; Yao & Sheng, 2022).

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Social media may address the stigma of engaging with mental health services. For instance, as stories are shared from service users around their experiences, along with psychoeducation around mental health, this helps to normalise having mental health concerns (Diesing, 2013; Ferris-Day et al., 2021; Roberts et al., 2022; Tan et al., 2021). Through the use of social media by social and health care services, individuals can have a greater awareness of the services in their community, giving greater choice in care providers, which has been linked to greater engagement (Roberts et al., 2022; Ventola, 2014). Research highlights that greater involvement in decision-making processes from young adults around their mental health and wellbeing treatments leads to better outcomes (New Zealand Government, 2018). This therefore indicates the potential for social media platforms to improve the mental health and wellbeing outcomes for young adults.

Functions of Social Media

As already noted, social media platforms play an important role in supporting the mental health and wellbeing of young adults, and positive use of social media platforms can lead to better mental health and wellbeing outcomes (Kim & Kim, 2022; Wilson & Stock, 2021). Understanding these functions is important to realising the role social media has in supporting the mental health and wellbeing of young adults, and the potential for social services to effectively use social media to support this population cohort. It is also important to understand these functions also hold risks and may potentially negatively impact the mental health and wellbeing of young adults. These functions are explored in three sections; normalising mental health and wellbeing through social media, how psychoeducation and information can be provided through social media platforms, and how treatment options can be explored.

Normalising Mental Health and Wellbeing with Social Media

Each year, one in every five New Zealanders experience mental health concerns or significant mental distress, and between 50-80% of New Zealanders will have mental health concerns over their lifetime (New Zealand Government, 2018). Many individuals with mental health

concerns feel isolated and alone (Calati et al., 2019; Naslund et al., 2016; New Zealand Government, 2018). Others find themselves stuck in a negative thinking pattern, that they are alone, that no one would notice if they disappeared, and they are not important to the people in their lives (Calati et al., 2019). Research highlights the positive impact that having a sense of community can offer for individuals with mental health concerns (Griffith & Stein, 2021; Wilson & Stock, 2021). Social media is no exception to this as many young adults feel a greater sense of community and belonging through the use of social media (Marchant et al., 2017; Wilson & Stock, 2021).

Online communities focused on mental health and mental illness create spaces where experiences of wellness and unwellness can be shared, discussed, and explored (Cataldo et al., 2021; Kong et al., 2021; Russell et al., 2021). From sharing these experiences, young adults can learn they are not alone in their experiences (Feuston & Piper, 2018; Russell et al., 2021). Membership in these online communities leads to increased normalisation of many mental health concerns and this has been linked to better engagement with mental health treatments and gaining formal diagnoses (Russell et al., 2021; Wilson & Stock, 2021). Normalising the experience of having mental health concerns often relies on accurate and reliable psychoeducation which is explored in the next section.

Psychoeducation, Information, and Misinformation

As noted earlier, one key motivator for young adults to use social media is as an information source to seek knowledge on relevant topics (Stone et al., 2022; Sun, 2022). This is no different when it comes to mental health and wellbeing (Faelens et al., 2021; Naslund et al., 2016). Social media is becoming a key source of accessible information about mental health and wellbeing (Kong et al., 2021; Zener, 2019). Many young adults feel that social media sites, such as TikTok, can provide easy-to-understand psychoeducation on a range of mental health disorders (Kong et al., 2021; Russell et al., 2021). One commonly reported benefit of social media posts on mental health is that they are less clinical and easier to understand than other information sources (Gallagher, 2021).

One danger of psychoeducation about mental health and wellbeing on social media sites is that sites are largely unregulated and can be posted by anyone (Pagoto et al., 2019). Often, key

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sources of psychoeducation on social media are individuals who have experienced mental health concerns themselves and are sharing their experiences. Private therapists and counsellors and some social and human services may also share information with their followers (Gallagher, 2021; Gupta & Ariefdjohan, 2021; Ma et al., 2021). While there may be some concerns about the quality of information posted, the benefits are that young adults can quickly find posts from different people explaining mental health and wellbeing, and find a communication style that they can easily relate to and comprehend (Gallagher, 2021; Griffith & Stein, 2021; Naslund et al., 2016). Research highlights that young adults often seek factual information to make informed decisions (Mendes et al., 2017)

The growth of social media as an information source in contemporary society has led to a significant concern about the rapid and uncontrollable transmission of misinformation (Lewandowsky et al., 2012; Ma et al., 2021; Scherer et al., 2021; Wang et al., 2021). While misinformation is not a new phenomenon, social media has allowed misinformation to spread faster and further than ever before in human history (Gabarron et al., 2021; Pennycook & Rand, 2019; Scherer et al., 2021; Shijie et al., 2021; Tasnim et al., 2020). Diesing (2013) reported that young adults are more influenced by social media than older age groups. This can lead to concern about the content young adults are viewing and the information they are taking onboard.

The spread of misinformation on social media has real consequences for public health and individual wellbeing (Gabarron et al., 2021; Wang et al., 2021). Many individuals are making decisions about their health and wellbeing based on health-related information they gain from social media (Gabarron et al., 2021). This was evidenced during the Covid-19 pandemic with health-related misinformation causing significant risks to public health and safety. It has been reported that many individuals made decisions against their best interests and their communities' best interests based on misinformation on social media (Gabarron et al., 2021; Ma et al., 2021; Naeem et al., 2021). Further, research has shown that the use of verification badges, such as the blue ticks seen on Facebook and Instagram, does not ensure greater access to accurate information, and at times, pages with verification badges spread greater quantities of misinformation (Wang et al., 2021). To

combat misinformation, there is a need to increase the skills young adults possess around identifying misinformation, checking sources, and regulating emotions while using social media (Gabarron et al., 2021; Hartnett, 2017; Naeem et al., 2021).

Self-Diagnosing

The increased access to psychoeducation about a range of mental health diagnoses has been highlighted as an advantage of social media, as young adults can then better understand their mental health conditions (Gallagher, 2021; Kong et al., 2021). Using social media for information about mental health conditions also allows young adults without a formal diagnosis to better understand possible symptoms they may experience, and relate these to a range of mental health disorders (Guntuku et al., 2017; Zener, 2019). Increased knowledge of mental health disorders can lead to young adults attempting to self-diagnosis (Naslund et al., 2016; Zener, 2019). In this context, self-diagnosing refers to giving oneself a diagnosis from the DSM-IV or DSM-5 without having a registered medical professional officially confirm the diagnosis.

Self-diagnosing can be both a helpful and unhelpful approach to managing an individual's mental health. The risks of self-diagnosing include these diagnoses not being officially recognised by health services, the likelihood of applying the incorrect diagnosis, and a lack of official and factual information. Young adults who self-diagnose are left unidentified by health-related services, which means that the appropriate support that goes with their diagnosis cannot be offered or accessed by the young adults (Wasson, 2014). These young adults will still require their diagnosis to be confirmed by a registered health professional to access these supports (Lupton & Jutel, 2015). Naslund et al. (2016) highlighted concerns around the likelihood of incorrectly self-diagnosing oneself and that self-diagnosing is risky due to the high likelihood of incorrect diagnoses being applied, as this determination is not done in consultation with a registered health professional (Naslund et al., 2016; Wasson, 2014).

The likelihood of incorrect self-diagnoses being applied is amplified by the quantity of misinformation available on social media (Naslund et al., 2016; Scherer et al., 2021). Misinformation

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can lead to young adults misinterpreting symptoms or physical sensations they experience as symptoms of a particular mental health disorder, and believing they have this particular disorder (Tan et al., 2021; Wang et al., 2021). The combination of misinformation, incorrect self-diagnosing, and lack of support available to individuals without a formal diagnosis highlights the concerns around self-diagnosing of mental health concerns (Tan et al., 2021; Wasson, 2014).

Self-diagnosing, however, may also have benefits for young adults. Young adults who use social media to gain psychoeducation around mental health may find a particular mental health diagnosis they were not aware of that seems to fit their situation and symptoms (Lupton & Jutel, 2015). This can be particularly beneficial in an environment where diagnostic assessments may be difficult to access through the public sector (Zener, 2019). The use of self-diagnosing has supported many young adults to go to their doctor or mental health professional with an idea of the diagnosis they believe they have, and the knowledge to articulate why they believe they need to undergo an assessment (Griffith & Stein, 2021; Lupton & Jutel, 2015). Additionally, young adults who are seeking a diagnosis for a mental health disorder that is not easily diagnosed in the public sector, and cannot afford to be assessed in the private sector, find that self-diagnosing is better than no diagnosis at all (Zener, 2019).

Exploring Treatment Options

Social media also provides information on treatment options for varying mental health concerns (Naslund et al., 2016; Russell et al., 2021). The sharing of experiences by members of online communities around mental health treatments can help to normalise treatment options, and show young adults a range of treatment options (Gupta & Ariefdjohan, 2021; Roberts et al., 2022). Research suggests that many young adults have been able to learn through social media groups about others' experiences with various mental health treatments, and use these experiences to support their decision-making processes, and questions they ask their mental health clinician (Gupta & Ariefdjohan, 2021; Kong et al., 2021; Zener, 2019).

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For many young adults, feeling they have a sense of agency is an important factor in increased engagement in mental health treatments (Roberts et al., 2022). Social media can significantly increase young adults' understanding of their treatment options, leading to increased feelings of control over their treatment plans (Gupta & Ariefdjohan, 2021; Tan et al., 2021). Social media can be a useful tool for exploring treatment options for young adults who do not currently have mental health input and are unsure of where to seek support (Kong et al., 2021; Zener, 2019). For these individuals, online communities can provide direction about relevant services in their local communities, and the experiences peers had with these services (Kong et al., 2021; Tan et al., 2021; Ventola, 2014).

How Social Media Compensates for Traditional Mental Health-Related Services

Many of the key benefits of social media accounts that support the mental health and wellbeing of young adults are potential solutions to concerns with mainstream in-person services. One significant concern with mental health services in Aotearoa New Zealand is the waitlists and response times (Appleby & Phillips, 2013; New Zealand Government, 2018). Social media has the advantage of not being limited to clinician availability, with a lot of information freely available online (Sheth, 2020; Ventola, 2014). As stated in the accessibility of social media section, there are many barriers to social services. Health and social services have limitations in terms of availability for clients. These services tend to have set opening hours, and limited appointment slots for clients, along with a workforce that often cannot meet the demand for support from individuals (Every-Palmer et al., 2024; New Zealand Government, 2018; Oliveira et al., 2021). Support available on social media platforms is available any time every day of the week and can be accessed as many times as required, without having to wait for the next appointment (Kong et al., 2021; Tan et al., 2021). This allows for greater accessibility for young adults (Diesing, 2013; Every-Palmer et al., 2024; Ferris-Day et al., 2021). Another barrier that may be overcome by social media platforms is the cost of engaging with social services. Individuals accessing traditional mental health supports often face a

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range of costs, including the cost of private therapy (due to the lack of publicly funded therapy options), transport costs, unpaid leave from work, and childcare costs (Tan et al., 2021). This is in contrast with accessing social media for support, which is largely free. Social media platforms mean a wider range of community groups can share information. Social media is reported to be the most efficient way to spread information, which can be utilised by social services to advertise their services, and practical support tips to young adults (Gabarron et al., 2021; Gallagher, 2021; Pennycook & Rand, 2019; Pretorius et al., 2022; Tasnim et al., 2020). While considering the benefits of how social media platforms can compensate for traditional social services, the impacts of social media on the mental health and wellbeing of young adults need to be considered.

Impacts of Social Media on Mental Health and Wellbeing

A common critique of social media is its negative impacts on the mental health of individuals, particularly young adults (Gupta & Ariefdjohan, 2021; Kingsbury et al., 2021; Kummervold et al., 2002). While the social support available on social media can be a protective factor for many young adults, it can also be extremely detrimental. Social media can be home to many negative comments, criticisms, bullying, and hostility (Gallagher, 2021; Naslund et al., 2016). In addition to negative comments, social media has pages full of information which is counterproductive to positive mental health and wellbeing, such as pro-eating disorder content, or examples of self-harming behaviours (Calati et al., 2019; Marchant et al., 2017). Social media has been shown to normalise self-harming strategies, glorify self-harm/suicide, advise on how to deceive support people, and increase nihilism (Marchant et al., 2017; Zdanow & Wright, 2012).

Social media is also linked to increases in comparative-based behaviours. Research on young adults engaging in social comparisons on social media has shown direct impacts on declining mental health and wellbeing for these individuals (Wilson & Stock, 2021). Young adults have also reported that social media can at times reduce the face-to-face contact in their lives and show social situations they have missed out on (Sun, 2022; Wilson & Stock, 2021). Both of these experiences can

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lead to increased feelings of isolation, loneliness, and increased anxiety. However, this is a contentious point, as research has also shown that the use of social media can enhance social interactions and make young adults feel more connected with peers (Marchant et al., 2017; Wilson & Stock, 2021).

Chapter Summary

This chapter highlights that many aspects of the use of social media in supporting mental health and wellbeing are positive. Many young adults have already had their mental health and wellbeing improved due to their use of social media. This is a result of psychoeducation around numerous disorders, improved knowledge of treatment options, greater accessibility, and having help-seeking normalised. These four key areas tie in with the patterns of use of social media in the everyday lives of young adults, with a focus on socialisation and gaining information. While there are key risks to be aware of, these do not take away from the potential that social media may hold for improving mental health and wellbeing. The following chapter discusses the methodology and research design used in this research.

Chapter 4 – Methodology and Method

The objectives of this research are to explore how social media is currently supporting the mental health and wellbeing of young adults, along with how social media can impact the mental health and wellbeing of young adults. Additionally, it explores how social services can effectively utilise social media to support the mental health and wellbeing of young adults. The research aim seeks to explore the role of social media in supporting the mental health and wellbeing of young adults in Aotearoa New Zealand.

This qualitative research was guided by a theoretical framework of social constructionism and informed by social work values. This chapter discusses the methodology, theoretical framework, method, and ethical considerations of this research. Following the introduction of the methodology and theoretical framework the research method is explored, outlining the data collection and analysis process. Lastly, the ethical considerations for this research are explored, including the ethical approval process, the rights of the participants and the responsibilities of the researcher, the storage and collection of data, as well as the limitations of this research.

Research indicates that mental health services are overwhelmed and overburdened with demand for therapy and mental health support (New Zealand Government, 2018; Oliveira et al., 2021). Alternative methods of providing mental health support are therefore being explored internationally, and internet-based interventions are becoming increasingly common among young adults and university students (Oliveira et al., 2021). Due to the need to explore ways to reach a greater number of young adults seeking mental health support, with concerns of increasing demands, this research was conducted with the intention of contributing to the growing body of research in this space. This research was conducted using a qualitative research approach.

Qualitative Research

Two significant research strategies are utilised in research, quantitative and qualitative research (Bryman, 2012). A key decision that researchers make in the initial stages of planning

research is which methodology their research will utilise. This then impacts the principal orientation for the research along with the position of the research. For example, quantitative research is more likely to adopt a deductive orientation as it focuses on testing hypotheses, while qualitative research adopts an inductive orientation that explores subjective realities (Bryman, 2012). Quantitative research focuses on the collection and analysis of numerical data, using a deductive orientation to test the validity of the hypothesis. Qualitative research, however, concentrates on subjective data including narratives from participants, rather than numerical data. Qualitative research is centred on exploring a specific research question and using narrative data that is then interpreted and conceptualised to reach a research conclusion (Bryman, 2012). Both these research strategies have important places in the field of research, and which approach is utilised depends on the objectives of the research (Patton, 2002).

This research aimed to explore the relationship between social media and the mental health and wellbeing of young adults in Aotearoa New Zealand. The objectives were to understand the current impacts social media has on the mental health and wellbeing of young adults and to understand how social services can better use social media to support the mental health and wellbeing of young adults in Aotearoa New Zealand. Due to these research objectives, understanding the subjective nature of the experiences of young adults was of great importance. A qualitative research orientation was therefore a better fit for this research as it allowed for richer data by exploring the perspectives of the seven participants utilising semi-structured interviews (Glesne, 2006). Due to the reliance on exploring the individual experiences of participants, qualitative researchers cannot be sure of the data they will collect from their research and are required to adapt to the range of information given by participants (Glesne, 2006). This is largely beneficial for this research, due to the objective of wishing to explore how social services can effectively utilise social media to support the mental health and wellbeing of young adults.

The qualitative orientation adopted for this research impacts the design of this research and its ontological and epistemological positions. Commonly used in qualitative research is the social

constructionism orientation. This research adopted this orientation due to the way social constructionism asserts that knowledge is created by the shared experiences of individuals (Bryman, 2012; Nathaniel, 2018). Social media is made up of billions of users and the collective interactions between these users (Bursztynsky, 2021; Pennycook & Rand, 2019). It influences the lives of individuals who use the platforms, while also being influenced by the collective content posted by these various users (Pennycook & Rand, 2019; Yang et al., 2021). Due to the nature of the relationship between social media and its users, a social constructionism theoretical framework was appropriate for this research. In line with qualitative research strategies, this research takes an interpretivist position (Bryman, 2012). Social science researchers often adopt an interpretivist orientation due to the understanding of the subjective meaning of social interactions (Bryman, 2012). This approach places value on the data held by participants and their subjective understanding of the phenomena being researched (Tuli, 2011). In meeting the research objectives for this research, importance was placed on the perspectives of the participants, and their understanding of how social media impacts the mental health and wellbeing of young adults.

Theoretical Framework

Research requires clear foundations and an understanding of theoretical frameworks, approaches, and designs. This is important so that the underlying beliefs and principles the research is built upon are clear (Bryman, 2012). The researcher is influenced by their chosen research philosophy, approaches, theories, and designs as this informs how research data is collected and analysed (Bryman, 2012). By clearly stating the theoretical framework, there is space to identify possible limitations, gaps, conflicts, or any ethical issues (Glesne, 2006).

Social Constructionism

Social constructionism asserts that knowledge is constructed by people and their communities, rather than knowledge being something that is discovered (Andrews, 2012). The significance of this is that people can construct various understandings and therefore knowledge of

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various topics as varying experiences occur (Andrews, 2012). As individuals interact with other members of their community, experiences are shared, and therefore knowledge is co-constructed. An understanding of social constructionism was critical during this research, as research has shown that the way individuals have shared experiences on social media and constructed knowledge, has led to concerning behavioural and health outcomes (Jenol & Pazil, 2021).

As this research explores the impacts of social media on the mental health and wellbeing of young adults and how social media can be best used to support the mental health and wellbeing of young adults, it is important to explore the way knowledge about mental health and wellbeing is constructed on social media platforms. Social media is a platform for individuals to rapidly share their experiences with a significant audience, greater than any form of media previously has allowed (Pennycook & Rand, 2019; Tasnim et al., 2020). This allows for knowledge to be constructed and re-constructed faster than before (Adorjan, 2019). Social constructionism supported a greater understanding of how shared experiences construct knowledge and affect our society, making this theoretical position vital to this research (Adorjan, 2019; Andrews, 2012; Bryman, 2012).

Social constructionism offers an understanding of how individuals and communities interconnect to create knowledge (Bryman, 2012). The knowledge that is created in our communities affects the behavioural responses of individuals within the community and can lead to a range of outcomes (Adorjan, 2019; Jenol & Pazil, 2021). Understanding the way knowledge is created supports an exploration of how social services can use social media to support the shared understanding of mental health and wellbeing, and support outcomes for young adults.

Social Work Principles and Values

There are many reasons why social workers may conduct research. Doebel (2022) suggests that international social workers often conduct research to improve practice and create real-world change. Often, social workers seek to create change within the profession, to lead to both micro and macro-level changes for their communities (Chhetry et al., 2022). They may however get tied down with the business of frontline practice and that macro practice becomes less focused on (Doebel,

2022; Rothman & Mizrahi, 2014). In contrast, the Aotearoa New Zealand Association of Social Workers (ANZASW) *Ngā Tikanga Matatika Code of Ethics* highlights that social workers have a dual focus, to support individuals and whānau to address the presenting problems they are experiencing, and to inform society at large, to be able to create societal change (ANZASW, 2019).

Along with social constructionism, the principles and values of the social work profession have influenced the research design for this research. The Social Workers Registration Board (SWRB) *Code of Conduct* highlights the principles that the social work profession is to adhere to. Principle 11 focuses on the behaviour and conduct that social workers are required to adhere to in research. This includes the ethical requirements for research (Social Workers Registration Board [SWRB], 2016). The Aotearoa New Zealand Association of Social Workers (ANZASW) *Code of Ethics* also highlights the ethical requirements that social workers in Aotearoa New Zealand are required to adhere to when conducting research (Aotearoa New Zealand Association of Social Workers [ANZASW], 2019). Both Codes highlight the importance of adhering to other relevant ethical guidelines and seeking ethical approval.

Method

Social constructionism and social work values informed the research design and method including the sampling, recruitment, and data analysis. The research method involved semi-structured interviews with seven young adults. Semi-structured interviews are often used in qualitative research as the interactive approach allows for the generation of complex and in-depth data. Semi-structured interviews can be a powerful tool for researchers with sensitive research topics as they can adapt the interview depending on the responses from participants (Bryman, 2012). The participants of this research were interviewed using a semi-structured interview approach, to explore their experiences around mental health and wellbeing, social media use, and their ideas for how social media can be used to support the mental health and wellbeing of other young adults, along with the role of social services in supporting this.

Sample

Using a non-probability sampling method, such as recruiting through social service organisations is common in qualitative research especially when there is a criterion for participants (Bryman, 2012; Ritchie et al., 2003). Criterion-based sampling is a form of purposive sampling which requires the research question and objects to underpin the sampling processes (Bryman, 2012).

The inclusion criteria for participants were that they:

- Were a young adult (aged between 18 years old and 24 years old).
- Had used social media to support their mental health and wellbeing.
- Were in a position where they believe they can safely talk about mental health and wellbeing.
- Were proficient in speaking and communicating in English.

The first criterion was significant as social media has become an integral part of the lives of young adults in Aotearoa New Zealand and internationally and is often influential in the everyday lives of young adults. This is largely due to young adults' passive approach to seeking information and social media. Additionally, in Aotearoa New Zealand, many social services target young people up to the age of 24.

The second criterion was due to the researcher's interest in how social media can be best used to support the mental health and wellbeing of young adults. Social media is a powerful tool in the everyday lives of young adults. Social media use has influenced the way young adults find intimate relationships, express themselves, socialise with their friends, and consume new information. It also has the capacity to enable young adults to support their mental health needs particularly as young adults face increasing difficulties, wait times, and barriers to gaining mental health support. It is important that alternative methods to support the mental health and wellbeing of young adults are adapted to contemporary times.

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The third criterion was important to ensure the safety of all participants. As this is a sensitive research topic for young adults it was important that the participants were in a position where they could safely talk about their mental health and wellbeing. As a registered social worker / clinical mental health professional, the researcher was able to assess with the participant their capacity to engage safely in this research.

The fourth research criterion was required so that the researcher and the participant could communicate effectively and explore the questions in the semi-structured Interview Guide (Appendix One). As the researcher only speaks English, it was important for the participant to be proficient in English.

Participant Recruitment

Participants were recruited with the support of community social services. Following ethical approval, these services were sent an email asking them to advertise the research (Appendix Two) alongside the actual advertisement (Appendix Three)

The first seven participants who responded to the advertisement and who met the inclusion criteria were sent an information sheet and given the chance to ask questions. If they were still willing to engage, they were offered the chance to be interviewed. One of the initial seven potential participants pulled out prior to participating in a research interview. No reason was given for their withdrawal from the research. The next available potential participant was then contacted and offered an interview. Prior to the interview process, all participants provided informed consent after reading the information sheet, and having the opportunity to ask any questions they had about the research. Consent was provided in writing.

Semi-Structured Interviews

This research method involved semi-structured interviews. This research had an interview schedule, that explored the following topics (also included is how each topic is related to the goals of the research.

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- Social media use patterns – to explore the current use of social media, for context when exploring the impacts of social media on their mental health and wellbeing.
- Perspectives on the strengths and weaknesses of using social media to support the mental health and wellbeing of young adults – to explore how participants believe social media is both positively and negatively affecting their mental health and wellbeing.
- The relationship between social media use and mental health and wellbeing – to explore the current impacts of social media on the mental health and wellbeing of young adults.
- Ideas for how social media can be better used to support the mental health and wellbeing of young adults – to explore how social media can be better used to support the mental health and wellbeing of young adults.
- Current experiences around mental health and wellbeing – to provide context around the current mental health and wellbeing of young adults.
- How participants support their own mental health and wellbeing – to gain information about what is currently working for young adults, and to understand areas where social media can enhance this.
- Interactions with social and health services around mental health and wellbeing – to gain context on the current situation for participants with social and health services.
- Ideas for how social and health services can better engage with young adults around mental health and wellbeing – to gain an understanding of how social services can effectively utilise social media to support the mental health and wellbeing of young adults.

The researcher deviated from the interview schedule, as appropriate, throughout the interviews with the participants. Semi-structured interviews utilise a range of open questions to collect a range of data from participants. Open questions allowed the participants to answer questions in their own way, without being restricted to predetermined answers, giving richer data to the researcher (Bryman, 2012; Patton, 2002). Open questions can often be more difficult to process and can require clarification from the researcher on the answers from the participant. The ability to

deviate from the interview schedule was appropriate due to the inductive nature of the qualitative research (Bryman, 2012; Patton, 2002).

Using this semi-structured approach, the researcher was able to expand on answers participants gave to explore the unique viewpoints different participants held. These interviews were recorded on a Dictaphone, and throughout the interviews, the researcher took field notes. Field notes allow researchers to document contextual information, and support the data analysis stages of research (Phillippi & Lauderdale, 2018).

Interviews were all conducted in person, at the choice of participants (online interviews were offered). These interviews took place in community centres and local social services, depending on the preference of the participant. One interview took place in the participant's place of work at their request. It was important for participants to have interviews in a place where they felt comfortable, and for there to be mutual trust between the researcher and participant. Trust is a requirement in qualitative research, due to the nature of sharing experiences from participant to researcher (Bryman, 2012). Interviews ranged between forty and sixty minutes. Interviews were transcribed by Otter.ai, a transcription software. Participants were offered the opportunity to review their transcripts, and the participants who opted to do so were emailed their transcripts, however, none of the participants made any changes. Participants receiving their transcripts is an important aspect of trustworthiness in qualitative research, as part of respondent validation (Bryman, 2012).

Data Analysis

The research utilised thematic analysis following the method outlined by Braun and Clarke (2013). This approach began with the researcher familiarising themselves with the data, through reading the transcripts, multiple times. Bryman (2012) highlighted this as key to the coding process. While reading the transcripts, the researcher made notes, to record key terms, themes, and significant observations. Once the data has been coded, they are to combine these codes into set themes. Themes are reviewed and then determine the overall significance of said themes. From here, the key findings are reported.

This research had seven participants who were interviewed using a semi-structured interviewing approach. Once the transcription software (Otter.ai) completed the initial transcription of the semi-structured interviews, the transcriptions were reviewed by participants to ensure the accuracy of their statements during their interviews. The researcher also reviewed each transcription to allow a further viewing of the data from each individual interview, and so that the researcher was able to be familiar with the data (Braun & Clarke, 2013). Through becoming familiar with the data, the researcher was better able to identify key themes and concepts from the data, that were relevant to the overarching research aim and objectives (Braun & Clarke, 2013). Identifying key themes and concepts from the research data is an important aspect of data analysis (Braun & Clarke, 2013; Creswell, 2009).

The process of establishing key themes was achieved by reviewing the transcriptions of all seven participants and taking notes on the key topics discussed by each participant. This was reviewed against field notes taken at the time of the interviews. These notes of key topics from each participant were compared against one another to explore similarities and differences across the seven participants. From this comparison, key themes and categories were identified, such as some of the key benefits of social media use including creating connections and a sense of community and coping strategies, or the deficits of social media use, including misinformation and self-diagnosing. With these key themes and categories in mind, each transcript was reviewed again to explore further details on these key themes and categories. These were then compared against the research aim and objectives to ensure that the information analysed was relevant to the overarching goals of this research. Any irrelevant themes or categories were discarded. From here, key themes and categories were reviewed and linked back to the literature review. This is a vital process in determining if research can contribute to current research on the chosen topic, or if research can challenge current research (Braun & Clarke, 2013).

Ethical Considerations

Braun and Clarke (2013) report that all researchers are required to adhere to relevant research ethical codes. The social work profession places importance on ethical practice and ethical research, with both the ANZASW and SWRB providing guidelines for ethical research (ANZASW, 2019; SWRB, 2016). Due to the involvement of human participants in this research, an appropriate ethical review and approval process was necessary (SWRB, 2016). Key to any research is ensuring that participants' rights are maintained (Braun & Clarke, 2013). These rights include a participant giving informed consent to engaging in research, that their confidentiality is maintained, not exposing participants to unnecessary risk, and accurately reporting research results (Braun & Clarke, 2013). With this in mind, the researcher reviewed the Massey University *Code of Ethical Conduct*, the ANZASW *Code of Ethics*, the SWRB *Code of Conduct*, and Te Ara Tika: Guidelines for Māori Research Ethics: A Framework for Researchers and Ethics Committee Members along with literature around ethical research. This was to support the ethical approval process, outlined below, and to ensure participants' rights were respected throughout the research.

A full ethics application was submitted to Massey University's human ethics committee. This application outlined the details of the research, information on participant recruitment and criteria for participation, the Treaty of Waitangi and cultural considerations, consent, data collection, recording of data, privacy and confidentiality issues, sharing research outcomes, and benefits and risks of this research. Ethics approval was granted by the Massey University Human Ethics Committee (Appendix Four).

Participant Rights

Participants' rights included the right to confidentiality, the right to have full information regarding the expectations of the research, and the right to be protected from harm (Bryman, 2012). All participants were informed that the researcher would do everything in their power to maintain their confidentiality. Client confidentiality is an important principle to be considered when

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completing qualitative research. For this research, all participants were made aware that their real names were not going to be used in the research, and that a pseudonym would be used instead. Participants were given an opportunity to give their own pseudonym. Key identifiable details about them were also changed. All documentation, such as the Consent Form, were stored in a lockable drawer until they were scanned and transferred to the researchers' Massey University One Drive. The hard copies were destroyed at this point. The audio recordings were transferred from the recording device to the researchers' Massey University One Drive.

All participants received full information regarding the research by receiving the Participant Information Sheet (Appendix Five), Semi-Structured Interview Guide (Appendix One), and Participant Consent Form (Appendix Six) before consenting to engage in this research. This was to ensure participants were able to give informed consent, as it is critical to receive this when carrying out ethical research (Braun & Clarke, 2013). It is the responsibility of the researcher to ensure that the participant is fully aware of their rights and has complete information about the research, including details about the purpose of the research, the financing of the research, and why the research is being conducted (Bryman, 2012). The participants had the objective of the research, along with the purpose of the research presented to them before participating in the interview, as they were outlined in the Participant Information Sheet. All participants were also given the opportunity to ask the researcher any questions they had before the interview commenced. Once participants had the opportunity to review the Participant Information Sheet, Semi-Structured Interview Guide, and Participant Consent Form, they were able to sign the Participant Consent Form and give informed consent to participate in this research. All participants were informed that they could end the interview at any stage, and withdraw up until one month after receiving their transcripts although none chose this option.

Due to the potentially sensitive nature of the research and the impact on participants' wellbeing, the inclusion criteria included the requirement for participants to be in a position where they believe they can safely talk about mental health and wellbeing. All participants were given a List

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of Support Services (Appendix Seven). Participants were encouraged to reach out to the services as required. The researcher is a registered social worker who works as a mental health therapist. If a participant showed signs of distress, the researcher would have assessed the situation and responded appropriately. A number of the participants were quite anxious about the research process and checked in to see if their answers were what the researcher was looking for. In response, the researcher provided reassurance that there were no wrong answers and that they wanted to hear about their experiences.

Researcher's Responsibilities

It was the responsibility of the researcher to ensure that participants were aware of their rights, including experiencing no harm. In the ethics application, the researcher developed a list of safety strategies and plans to keep the participants and the researcher safe. This included considering possible risks of discomfort to participants and developing a plan to support participants in the event of any of these events. As stated above, this plan included the researchers' position as a clinical social worker, with mental health experience. One participant experienced some distress after concluding the interview, due to it reminding them of experiences at school. The researcher and participant engaged in a brief conversation about this experience until the participant felt more comfortable. As with all other participants, this participant was given the List of Support Services. These safety strategies and plans also included a plan to keep the researcher safe. This included ensuring the interviews were held in a public space, a contact person to ensure the researcher checked in after each interview, and knowing what to do if they did not. Fortunately, this was not required to be actioned.

Storage and Collection of Data

The participants all signed the Participant Consent Form and Transcript Release Form (Appendix Eight). These documents gave consent to the researcher to audio record the interviews. Interviews were recorded onto a Dictaphone. Through the use of the Otter.ai transcription tool, all

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interviews were transcribed. These transcriptions were given back to participants for review, and to correct and adjust their comments, if required. The audio recordings, electronic copies of the transcripts, and all digital notes were stored on a password-protected USB drive. Audio recordings were destroyed once the transcripts were finalised, and transcripts will be destroyed once the thesis has been examined.

Limitations

One limitation of this research was the limited sample size of this research. This research was limited to seven participants, who were able to speak to their experiences around mental health and social media. Due to the small sample size, there was not a cross-section of various ethnicities, socio-economic groups, genders, religious beliefs, mental health diagnoses, ages, or personality types, which are important factors when assessing the generalisability of a research (Bryman, 2012; Lietz & Zayas, 2010). It was not intended the seven participants would be representative of the young adult population in the region, but they would offer insight from their own experiences. While common trends were able to be explored and identified, along with recommendations for local social services, this cannot be reported to be able to be transferable for services across Aotearoa New Zealand. However, as the aims of this research included exploring the relationship between social media and mental health and wellbeing for young adults, and understanding the current impacts social media has on the mental health and wellbeing of young adults, this sample size was sufficient to meet these aims. The criteria of trustworthiness in qualitative research focuses on thick description, to illustrate the contextual findings of research, and for others to make their own judgement of the transferability of this research to their situation (Bryman, 2012). A final limitation relates to the definition of trustworthiness, around confirmability, in that it is impossible for the researcher to remain completely objective (Bryman, 2012). However, through the use of supervision and reflection, the researcher has ensured that good faith has been maintained throughout the research process.

Chapter Summary

This chapter has highlighted the methodology, theoretical framework and research design that have affected the way the research data was generated and analysed. The ethical considerations that were made in the planning and implementation of this research have been outlined above, to ensure that the research was conducted in an ethical manner. The entirety of this research was influenced by the information in this chapter. The following chapter presents the results of the research.

Chapter 5: Results

The aim of this chapter is to present the results of the research. The chapter begins with an introduction to the participants by presenting some of their demographic information. The next section outlines the role of social media in supporting the mental health and wellbeing of young adults, the impacts of social media on the mental health and wellbeing of young adults, and how mental health and wellbeing support services can use social media to support the mental health and wellbeing of young adults. Data was collected with the research aim, to explore the role of social media in supporting the mental health and wellbeing of young adults (18 to 24 years old) in Aotearoa New Zealand, guiding the interviews. Exploring the data given by the participants, this chapter presents the key themes including social media usage by young adults, the benefits of social media, deficits and risks of social media, and social services use of social media.

Participants

Seven participants were interviewed. All the participants met the research criteria: they were young adults (aged between 18 years old and 24 years old); they had used social media to support their mental health and wellbeing; they were in a position where they believed they could safely talk about mental health and wellbeing; and they were proficient in speaking and communicating in English.

- Ava was a 20-year-old female, currently studying. Ava used social media for three hours a day on average engaging with Facebook, Snapchat, TikTok, and Instagram. Ava felt social media was a great way to keep in contact with friends, and she also used it as a way to wind down after a long day.
- Isla was a 22-year-old female who was studying and working part-time in the mental health field as a support worker. Isla spent around three hours a day on social media, primarily using TikTok, Snapchat, Instagram, and Facebook. She spoke about social media being good for mindless scrolling when bored, and a way to communicate with friends.

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- Mia was a 21-year-old female. Mia used social media for between six and eight hours a day, primarily using TikTok, Instagram, and Snapchat. She also reported using Facebook for work. Mia stated that social media was great for entertainment and as a fidget tool.
- Noah was a 21-year-old non-binary person. They reported using social media for around two to three hours a day. Noah used Instagram, Snapchat, TikTok, and YouTube primarily. They use social media largely for entertainment and to keep in contact with friends.
- Johnny was a 24-year-old male, who described himself as a country boy. He used social media for around two hours a day, primarily using Facebook, YouTube, and Snapchat. Johnny had deleted Instagram and had stopped using it for mental health reasons. Johnny said he mainly used social media for videos around his interests.
- Arthur was a 21-year-old male who used social media for around one hour a day. He used Facebook and Snapchat, while avoiding the use of Instagram. Arthur mainly used social media to keep up with current events and for contact with friends.
- Olivia was an 18-year-old female. She used social media for around four hours a day. Her main platforms were Instagram, TikTok, Facebook, Snapchat, and YouTube. Olivia mainly used social media to keep up with what was going on around the world and with friends, and for entertainment.

Social Media Usage

Social media was used by participants for a variety of reasons. All participants identified that social media was a large part of their everyday lives, with participants reporting an average of three to 3.5 hours on social media each day. The male participants averaged 1.5 hours a day on social media, while the non-binary participants averaged two-three hours a day, and the female participants averaged four-4.5 hours a day. Social media was used for its entertainment value, to communicate with friends and family, to gain information, and as a distraction.

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Participants were especially vocal about enjoying social media as an entertainment device, as evident in their statements, *“just for fun, entertainment, kind of a quick thing to go on”* (Olivia), and *“if I’m just bored, just looking for some entertainment, a little bit of a dopamine hit”* (Noah). As many young adults often have their phones on them this allows for increased access to social media.

Communicating and connecting with friends and family was another important use of social media. Olivia explained:

Really good to kind of stay in contact with people, ... [I use social media to] stay connected to my friends, ... I’ve got a lot of people that I can’t see a lot, like friends overseas, we kind of all use [social media] to stay in contact.

Multiple participants shared Olivia’s view that social media is a great platform for communicating with friends and family as young adults can message anyone whenever they want. Isla added, *“I communicate with my friends a lot on TikTok, we’re sending each other things that we see”*. Ava shared a similar experience, reporting *“It’s good, because you’ll send a funny meme or something, or you’ll send another TikTok that relates to them, and they’ll be like oh my God, and you react to it”*. These experiences highlighted that social media platforms can be used to start conversations with friends and improve communication in their social groups, as communication may be easier for young adults with the use of social media platforms.

Being a source of information was another reason participants used social media. For example, social media was used to gain information on the participants’ individual interests, and current events, and for updates on their friends and family. Johnny tailored his use of social media explaining that *“YouTube is just between cooking, fitness, horses, and car stuff. So just my interests”*. Other participants reported that social media was useful to *“see what is going on in the world”* (Arthur), and *“I think people tend to use [social media] as like a highlight reel, it’s good to kind of, you know, catch up with what people are doing and stuff like that”* (Olivia). The ease of access to information in short informative videos was highlighted by participants. Noah stated that:

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I sometimes go on [TikTok] if I need to know something or learn something real quick. Just because it's easier than looking at a YouTube video, ... [YouTube] is like 5-15 minutes long, [TikTok] takes like 15 seconds? I mean, this comments on my attention span.

Social media was also a helpful distraction in difficult moments, or when they needed to take time away from the thoughts in their heads. Isla gave the example of the Covid-19 pandemic, commenting about “*the daunting fact of this novel pandemic, that’s killing people. So [social media] was distracting from that*”. The idea that social media was a distraction was shared by various participants, with Mia remarking that she used social media as something to occupy her fingers:

... just scrolling, ... [that social media is] something to look at, and do with your fingers when you’re, you know, chilling, ... either [when I’m] bored or I need something to do with my hands while I watch a TV show. So, I’m just like scrolling, and then like, look at the TV show.

Social media consequently served a purpose in the participants’ everyday lives, evident in the amount of time they invested on various social media platforms on a daily basis. While there are several reasons why young adults utilise social media, there are many benefits and risks that they also experience through their time on social media.

Benefits of Social Media

Social media offers a range of positive impacts on people’s mental health and wellbeing. These benefits were a key motivator for the ongoing use of social media by the participants. As already noted, the entertainment value of social media was seen as a contributor to participant wellbeing and their ability to maintain social contact with friends. Additional benefits of social media were noted as the ability to destigmatise mental health, develop connections with other people and communities, and develop coping strategies.

Destigmatisation

The destigmatisation and normalisation of mental health were reported to be a key benefit of social media usage by the participants. They spoke about situations where important people in their lives lacked understanding and knowledge about mental health and wellbeing and the implications this had on them.

The stigma around mental health was a key concern expressed by participants as that impacted their ability to engage with social services. Stigma was present in a range of relationships such as with friends, family, and professionals. Ava shared her experience with her school counsellor:

... the barrier was that [my school counsellor] didn't think I was sick enough to get support, ... [telling me] oh, no, you're fine, just go back to class. [it was] like, what are you doing here? This is a waste of time, ... [this was] another adult telling me I didn't need support.

Social media was seen as a method to overcome this barrier as young adults can use psychoeducation videos they find on social media platforms to explain how they feel to other people in their lives. Social media platforms can be supportive to justify the need for support from social services, and that needing support is actually normal. Social media posts further support the destigmatisation of mental health related to the lack of understanding from peers and parents and facing judgement around their behaviours. Participants stated that videos on social media were helpful for destigmatising mental health and wellbeing with natural supports. Ava reported that:

... educational videos are so helpful for parents as well, ... I'll watch a TikTok and it's something that related to me, that my parents complained to me about, or it related to what I feel like I'm going through. I kind of don't have to explain, I can just send them the video, like hey, this is kind of how I am feeling, and they'll go, oh okay.

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Ava identified that this strength was also helpful with friends:

I [sent an ADHD educational video] to one of my mates recently. Because she didn't understand why I was shaking my foot or flicking my pen or whatever. She's like, I don't know why you do that, like, it's really annoying, and all this kind of stuff. And I sent her a video, of a lovely TikTok. And she was like, Oh, okay. And so she's not like, resentful about it or anything. She's kind of just like, okay, that's why you do it. It's informative. It's really, really helpful.

Isla also reported using TikTok's to explain mental health and wellbeing to friends, and that she had found this helpful. Similarly, Johnny mentioned, *"I have noticed these days people are really starting to open up about their mental health on social media and it makes it a lot easier for someone like me that isn't as open"*, highlighting that psychoeducation on social media platforms, along with people sharing their experiences, helped him with talking about mental health and wellbeing.

Creating Connections

Connecting with friends and family on social media was a key use of social media reported by participants and was seen as a benefit of social media. This connection was important to the wellbeing of participants. Olivia highlighted that being able to maintain contact with friends and family was key to maintaining positive mental health and wellbeing over the Covid-19 lockdowns:

I got to stay in contact with all my friends, ... when you felt really alone, because obviously being on lockdown is not going to be a good thing for your mental health, been able to use social media it's kind of an escape, [which] was a really good thing.

Using social media to keep in contact with friends was important to maintain positive mental health and wellbeing, with Isla reporting that *"I'd be quite sad if I couldn't talk to my friends, ... I predominantly use social media to just see what my friends are up to and, ... communicating with*

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friends". Isla explained this connection meant she didn't feel socially isolated and said social media was good for "*making people feel like they're not alone*".

Building connections supported a reduction in self-stigmatisation around participant's mental health and wellbeing, as feeling like they were alone was a key topic explored by participants, who expressed that experiencing mental health concerns can feel lonely at times. Social media was referred to as a solution to feeling alone in their experiences, with other individuals sharing their experiences with mental health concerns. Olivia explained:

I remember watching, like one one-hour video, [of] someone sitting there talking about something that I had gone through, ... I went through a rough friendship breakup and then [watched] someone else [talk about their experience]. I think it helps to see someone else going through the same thing you're going through, and it kind of makes you feel less alone.

The idea that other people shared their experiences created connections and supported participants to feel less alone was a feeling shared by Johnny, Olivia, Noah, Isla, and Ava. Johnny commented: "*I'm not one to make a post like that. But it's really nice just seeing other people out there that are going through the same things, and you don't feel alone*". Knowing others had a similar experience normalised mental illness for the participants. This sense of shared experiences meant they did not feel so alone. Noah highlighted these shared experiences also provided hope and inspiration.

... on YouTube, sometimes I'll either come across or look up somebody getting their life together, which kind of motivates me to sort my stuff out and try to get my life back on track. To see what they do and how I can add that to my routines or lifestyle. Sometimes there are TikToks that come up, and it's just a bit of self-care kind of stuff. I'll see if I can use that to my routines and lifestyle.

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Connections, both with friends and families and with online communities of people with similar experiences, were indicated by participants to be important to maintaining positive mental health and wellbeing.

Coping Strategies

The therapeutic value of social media was clearly stated by participants who spoke about the range of support for their mental health and wellbeing they received from social media. Participants highlighted this strength by discussing the psychoeducation on coping strategies, and methods of social media use that enhanced their mental health and wellbeing. Coping strategies and ideas around supporting your mental health and wellbeing were a key theme around the positive points of using social media in supporting the mental health and wellbeing of young adults. Noah spoke about how they learned from social media:

... watched this YouTuber, ... one that really stuck was [when] she read atomic habits, and was talking about [the book], ... I didn't read [the book], ... having that kind of information from someone else, that was simplified. From someone who did actually read the book is a good thing especially for social media. Some people don't actually like reading and some people don't want to watch a documentary just to get a little bit of information, if they see a little video on it whether it is YouTube or TikTok it can be really good, ... it was helpful for me to watch, and take some strategies and coping stuff.

Participants highlighted that while they were unlikely to watch a full documentary or read a book, they were likely to watch short psychoeducation videos on social media platforms. A TikTok or YouTube video often has the content condensed, and meaningful information, strategies, and skills can be taken from this approach. This fits with the subtheme around the attention span of young adults, which was mentioned by Ava, Noah, Arthur, and Isla. Isla reported that “[young adults] love things that don't drain attention. So short, quick, and not boring [videos]”. Olivia, Mia, Johnny, Noah

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and Ava all spoke about learning a range of coping skills and strategies off social media around mental health and wellbeing and they were able to each name several skills and strategies. Mia stated that social media was useful for learning coping skills and strategies, but also that these “[*coping skills*] have been reinforced”. Participants gave examples of key supports from social media. Mia spoke about previous use of a *finsta*, which she described as:

... a really private Instagram that you just kind of like rant on, ... it was okay, so definitely [there were] benefits of doing it. Because you can have like a rant, and you can get whatever you want off your mind.

Ava also saw benefits for her mental health saying that social media can be used as a supportive tool:

... that would talk to you about your day, and you'd have a certain time to answer ... it was about how are you feeling today? What are you feeling right now? And then they'd pause, to give the person they had sent the video to answer, ... I used to really like them.

Participants were interested to learn that some of the videos they were referring to from TikTok and Instagram have therapeutic underpinnings. They articulated the positive impacts they had on their mental health and wellbeing, while other factors, such as getting stuck on social media, had negative impacts on their mental health and wellbeing. Social media platforms had a range of impacts on the mental health and wellbeing of young adults, as evident in the following sections and themes.

Deficits and the Risk of Social Media

Along with the benefits of social media use, participants reflected on the deficits and risks of social media. Participants were clear that they held concerns about the risks of social media. Participants also highlighted the role of capitalism as a barrier to removing these deficits on social

media. The barriers explored by participants included misinformation, self-diagnosis, unsafe and risky content, and getting stuck on social media platforms wasting time.

Misinformation

Misinformation was identified by participants as a particularly negative aspect of using social media for guidance or support. All seven participants spoke about misinformation, inaccurate information, or misleading information throughout their interviews. These comments included “people tend to kind of twist the trust a little bit” (Olivia), “there's a lot of misinformation about health and all that” (Mia), and “it's misinformation, if it's educating people on the wrong thing ... it's really negative” (Ava). Several concerns around the inaccuracy of information shared online were raised by participants, which was evident by Arthur's statement:

... everyone on social media has their own sort of source of information, ... it's the hardest bit, to distinguish between who is a professional in their own right, and who is just opinionated. Because it is very hard to verify, ... it [can be] someone's opinion against a news article, which may have been researched, ... and then you've got a professional viewpoint on it [too].

Arthur was concerned about the weighting of the importance of opinions on social media, that, at times, the view of a professional who has done empirical research was taken in equal regard to someone's opinion, which may not have an empirically researched foundation. Olivia shared this concern and reported that “people will be like, I saw this on TikTok, [so] it must be true, because someone made a video about it, ... some people know that that's going to get views and people talking”.

The importance of verifying online information about mental health and wellbeing was noted by several participants. Participants agreed that knowing what information on social media was accurate could be difficult and that improvements to verification systems were required. Comments from participants included “It is really hard to believe things on social media” (Mia), and

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“that is a big thing with the internet, you don’t know what is fake, and what’s true” (Johnny). They highlighted that young adults struggled with a culture of incorrect information and misinformation, which made it difficult to know what to trust. Mia spoke about people representing themselves as professional on social media, when they did not have relevant qualifications, adding to the concerns around unfounded information on social media platforms. These concerns about verification were not addressed by the various verification systems used on social media platforms. Arthur stated that *“just because it’s a verified account doesn’t mean it’s genuine, or that the information they are putting out is true”*. Noah had also seen verified accounts posting incorrect information, a concern shared by Isla and Ava. This suggested that the current verification system did not actually mean that information posted by a verified account was accurate.

Self-Diagnosing

Self-diagnosing was a concern raised by several participants. Participants highlighted that the increase of shared experiences, psychoeducation, and misinformation around mental health and wellbeing shared online, while positive in many ways, has led to a theme of self-diagnosing among many young adults. Isla was worried about this, and gave an example from her experience:

I've noticed there's a pattern on social media. And that's quite a bad one, especially on like TikTok, that someone will share their ADHD diagnosis, for example. And their symptoms and their behaviours and what their diagnosis and stuff. And people will comment. Oh, my gosh, it's so me. And they're just like I must have ADHD then.

The concern around self-diagnosing was shared by Johnny, Arthur, and Ava and illustrated in Johnny’s comment:

... mental health has become more aware these days, I do find a lot of young adults sort of grab onto it, ... they might be slightly struggling with something in

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life, like a breakup, and they're not feeling right, so they go, oh, I have anxiety, ... they just like to label themselves.

Johnny tied this in with his previous statements about other young adults using their self-diagnoses as an excuse for certain behaviours and not doing anything to treat their self-diagnosed mental health and wellbeing concerns. Ava shared the concerns around self-diagnosing:

... [people] are using diagnostic terms as mood terms, ... [then videos say] if you're feeling depressed, ... go for a walk and drink some water, and [she] reads the comments, [which say] this really helped me, I'm no longer depressed, ... that's false information, it should say if you're feeling sad, this is what you should do, ... If you've got depression, you might look at that video. And you'll be like, oh my God, I can't, I can't even get up, I can't even do anything, ... I'm so useless, and it gets worse.

Ava's concern related to the use of diagnostic terms being used as mood terms, which led to minimising the seriousness of mental health disorders, such as depression, when individuals use depression as a synonym for very sad. The issue with self-diagnosis raised by participants highlighted that they felt it was dangerous, and that individuals were using these self-diagnoses to label their behaviours, rather than to address their behaviours. Isla reflected that there were many clients and therapists who are contributing to the culture of self-diagnosing online:

... there's heaps of therapist[s] on TikTok, a lot of them are American, ... like what kind of therapist are you to be sharing stuff on social media to hundreds if not millions of people without actually, like, you can't broad-spectrum everyone with information and that's what they're doing. People are like, that must be me, when like the person posting has no idea about anyone's life.

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Participants felt that therapists played a role in the problem of individuals self-diagnosing themselves with various mental health disorders. Ava believed that these therapists had good intentions but that they were adding to a dangerous culture. The use of self-diagnosing created confusion around what was happening for a young adult, especially when young adults believed this self-diagnosis and used this to excuse their behaviour.

Unsafe Content

Unsafe content on social media was a concern raised by several participants. This is related to their social media use and the exposure to explicit content without warning. A clear example of this was mentioned by Ava:

Sometimes your 'for you' page comes up with stuff that can expose you to [explicit] stuff. Sometimes it talks about sexual assault, ... and there's no warning on it, ... [then you are] feeling all these emotions, ... [and thinking] that this is not what I wanted to see.

Participants felt there was a range of content on social media that did not have warnings and this could be distressing to some people impacting their mental health and wellbeing. Isla stated that she had seen a video of the Christchurch Mosque Shootings on Facebook, without warning, and that it "took me a good [few] seconds to click what it actually was". She also reported seeing the Nashville Mass Shooting on TikTok, and she had not expected to see live footage of this on social media and that it could be significantly traumatic for some viewers. The unsafe content that was shared on social media also included topics that were more a part of everyday life, as Olivia mentioned:

See videos of some fights at school, or like, this person bullying another kid, and someone will just take a video of it, because they think it's funny to be a bystander to it, ... people posting stuff to try get likes from other people, and not understanding that the person's feelings the person that might have been in the fight, or might have been bullied might see that online, and get harmed from it.

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Part of the conversations around unsafe content included that social media platforms try to remove unsafe content before it causes distress to users of social media platforms. However, as pointed out by Isla, people tried to find ways around this, such as in her previous example, or people changing keywords to avoid detection, such as changing suicide or killing themselves to *unaliving themselves*.

Beyond the various themes around content shared on social media platforms were the themes around the types of information on mental health and wellbeing shared on social media platforms. This also included an exploration of the implications of this information being shared on social media platforms.

Getting Stuck on Social Media

The amount of time spent on social media every day received a range of uncomfortable responses from participants. Ava expressed horror about the amount of time she spent on social media daily, saying “*ohhh, this is just unhealthy*”. Isla shared this concern, declaring: “*my screen time is probably a bit embarrassing*”. This view was shared by Mia and Olivia. While participants described that their social media use had a range of purposes, they also identified that social media could occupy a large proportion of their time which had implications for their routines and wellbeing. Isla spoke about getting stuck on social media, and the impacts of this on her everyday life:

I'd say so TikTok's great for the short attention span. It is amazing. Love it. But my God like you can get roped into it. So time is, it sucks out time if I'm away with the fairies, it might disrupt my routine and so I might get less sleep.

Ava explored a similar concern:

It's really bad because you could be on your phone for a really long time. And then in a way you could [be] disconnected in a way, if you're not talking to friends and you're just scrolling on TikTok continuously for a really long period of time, ...

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yeah, I'll literally be there for ages, ... you've got so many, like, videos popping up on your, For You Page or whatever, suddenly, you can get overwhelmed in it.

Participants felt it was easy to get immersed in social media and to engage in mindless scrolling. This had negative impacts on participants, their routines, and getting important things done. Noah explained, *"the mindless scrolling [is a concern], because you can just lose yourself in it, ... either it keeps you up at night, or it distracts you from the things that you've been planning"*. Participants reported that breaks from time on social media were important and they felt it was important to practice self-control and restraint when engaging with social media platforms.

Participants were aware of the significance of algorithms which meant that the social media platforms learnt what content the young adult liked to view and showed more of this content. Olivia explained it was important to her to be conscious of her social media use. She said the algorithm could become a concern for example when she was in a low mood, she searched for content that reflected this, and then this content continued to present when she was no longer in a low mood. Olivia expressed that *"if you search [something] up once, it's there forever, and you don't really lose it, ... [that she] makes sure she tries to keep the stuff I don't want to see to a minimum"*. Mia shared this concern around algorithms and highlighted that *"it's quite difficult to change what you take in, ... when you don't necessarily get a choice on what comes up on your for-you page."* She commented that it took a conscious effort to change what comes up on social media, but it was important to search for content you wanted to see as this would be positive for wellbeing. The concern around the potential for negative impacts from algorithms was shared by Johnny:

When you're not in a good place, I find you literally feed off [the negative content], ... when I was struggling with a breakup, I could related to quotes [on social media], but after a while, they actually started to make things worse, ... [I] was trying to move on, and didn't need to be seeing that stuff, and that was why,

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for a while, I did not have Facebook, ... because [the algorithms] were making him worse.

Johnny was concerned that young adults could get stuck in patterns of negative content on social media. While initially, this content could be quite helpful and relatable, after a while, it could lead to individuals getting stuck in negative thinking patterns and emotional states. Olivia highlighted that by trying to get her algorithm working for her, she had been able to ensure she saw the content she wanted. Olivia mentioned this took her time to learn, and that when she was younger she did not know the importance of getting her algorithm working for her. Both Noah and Mia highlighted that the impact of the content that appeared on their various social media platforms depended on their mood when they went on to social media; if they were already in a bad space, it often made things worse, while if they were in a good space, it often enhanced their mood.

Social Services Use of Social Media

Participants had high rates of engagement with mental health and wellbeing support services, with six out of the seven participants having engaged with these at one point in their life. Key themes explored by participants included effective social media use by mental health and wellbeing support services and enhancing engagement with support services.

Effective Social Media Use by Mental Health and Wellbeing Support Services

Social media was identified as a powerful tool to spread awareness of mental health and wellbeing-related concerns and of support services available in the communities. Spreading awareness, challenging misinformation, and reaching young adults were the key subthemes mentioned by participants around how to increase the effectiveness of social media use for mental health and wellbeing support services. Ava believed that *“social media is a full-time job, I’m sure influencers will tell you that it is a full-time job, ... [that] you get someone who actually knows what they’re doing and can engage”*. It was stated that this approach of using a funny video or keeping up with trends *“shows how it is, rather than an ad that says if you need help come. Which is a bit*

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broader and vague, if you have like a funny video, it's like, oh, they're actually cool, it could be helpful" (Noah). Mia suggested:

Just having information available [on social media] having it spread out [so] the information reaches everyone [is beneficial], ... it comes back to awareness, if you know about all of these services, you are going to want to use them, they will be more likely to be used.

If social services used social media positively to advertise their services, this allowed for young adults to have a greater understanding of the services meaning that individuals could find it easier to access the service. This idea was shared by Olivia, Johnny, and Isla. Isla commented on mental health and wellbeing support services sharing information on social media to provide information on how best to access their services:

... if it is made aware of what the criteria is to meet that service, and the person is not meeting it, they can decide to not bother wasting their time and sharing their story, ... [services] might be able to say, this is our criteria, if you don't meet that, these [other] options exist.

Misinformation was identified as a key area for mental health and wellbeing support services to engage with on social media to improve outcomes for young adults. Participants reflected on how misinformation exists both online, and in their social circles, and that the more support services post accurate psychoeducational videos around mental health and wellbeing the more they can challenge misinformation. In the online space, Isla stated it would be helpful for mental health and wellbeing support services to *"reshared [misinformation] and say, this is wrong"*. Participants shared the idea that services could engage more with misinformation and replace it with accurate information.

Reaching young adults was seen as a key strength of social media:

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... the internet is everywhere, ... so it is a lot more likely for someone to see [information] online than they are with like a poster, ... most people these days, if they saw a poster about mental health, they'd walk straight past it, but if it's on your phone in front of you, you might read it, or half of it. (Johnny)

This view was shared by several participants, including Arthur, who stated “*I don't think that there is really any other way you can reach as many people [than on social media]*”. All participants discussed the ability to reach more people on social media than any other method, and that this could be used more effectively by support services to ensure that positive, helpful, and accurate information about mental health and wellbeing was shared.

Enhancing Engagement with Mental Health and Wellbeing Support Using Social Media

Enhancing engagement with mental health and wellbeing support services was a key theme around social media use for young adults. This theme of enhanced engagement with mental health and wellbeing support services highlighted key aspects of how this could be achieved, looking at learning about services, removing stigma around contact with services, and contact with services.

“I think it was just the barrier of not knowing that services are there” (Noah). Noah's thoughts about not knowing about mental health and wellbeing support services were shared by Ava, Mia, Arthur, and Isla, who all reported that at times, either they or others they knew had experienced this barrier. In contrast, participants also spoke about social media being a key strength to enhance engagement with mental health and wellbeing support services. Noah believed:

Advertising is probably the biggest thing. You wouldn't even have to put ads out, especially for TikTok. Because if you're just if you want to aim for gen Z, just make a funny video and then pray that it goes viral. I'm probably seeing more less ads for companies, and more viral videos and funny videos from companies that have let a Social Media Manager loose on their accounts. But it has made the brand a lot bigger and a lot more known. Some of them I've never even heard of.

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Funny but accurate informational videos about mental health and wellbeing support services were an idea shared by many participants who believed that by sharing these videos on social media more people would learn what services existed, and that this could make services seem more friendly. Participants believed that young adults may feel more open to engaging with services if they saw these types of videos on social media, rather than seeing a poster or flyer about a service. As Noah reported, *“catch them with the funny video and then reel them in [with tips, advice, and information]”*.

Stigma was seen as a big barrier to accessing support; however, stigma was a barrier in multiple ways, two of which were repeated across participants including that: individuals, families, and other professionals may misunderstand the purpose of services and their entrance criteria; and people were afraid of bullying or disapproval as a result of engagement. Ava shared her experience of her school counsellor telling her she does not need professional support, which Ava stated invalidated her own experiences and meant the counsellor was yet another adult not listening to her. Social media was seen as a way to overcome stigma as a barrier, as young adults can use psychoeducation videos to explain to themselves and to adults in their lives their experiences around mental health and wellbeing concerns. Participants felt that this could be supportive and could justify the need for mental health and wellbeing support services support, as well as normalising their experiences.

Communication is one of the key reported strengths of social media for young adults. Participants discussed how they used social media to keep in contact with friends and family, and that communication on social media platforms was easier than using other forms of messaging. This was a strength that translated across to getting in contact with mental health and wellbeing support services. Arthur stated:

I suppose the biggest thing is if you can do it in such a way that it gives the person using social media, the ability to interact with you or whoever's providing the

service. And whereas if it was just an article, it was just a video, It might be like there's no next step? What is the next step?

Arthur's point was that using social media platforms to share information about mental health and wellbeing, information about their services, and positive mental health and wellbeing messages, meant individuals would need a follow-up step to get support. This could be achieved by contact within social media platforms.

Chapter Summary

This chapter details the results of the research as well as providing information about who the participants were, and their social media habits. Participants presented the benefits they found regarding social media use in supporting their mental health and wellbeing, such as the benefits from destigmatisation, creating connections, and learning coping strategies. Subsequently, participants highlighted the deficits and risks associated with social media platforms, such as misinformation, self-diagnosing, unsafe content, and getting stuck on social media. Finally, this chapter explores the role of social services and social media use to support the mental health and wellbeing of young adults. Looking at what effective social media use by social services could entail, and then how social services can enhance engagement with young adults around mental health and wellbeing on social media platforms. These findings will be explored in depth in the following chapter in relation to the relevant extant literature.

Chapter 6: Discussion

This research explored the role of social media in supporting the mental health and wellbeing of young adults in Aotearoa New Zealand. Social media has a large presence in the lives of most young adults (Reger & Hammer, 2021; Yang & Lee, 2020). Young adults develop and form behavioural responses from their interactions with other individuals, including through the online environment (Cilliers, 2021; Hutchison & Charlesworth, 2008; Hutchison et al., 2007). Research shows that there are a range of positive and negative implications for young adults from engaging with various social media platforms, and social media is often criticised for negatively impacting their mental health (Gallagher, 2021; Gupta & Ariefdjohan, 2021). This chapter explores the research aim and the three research objectives, comparing participants' data and literature to gain insight into the meaning and implications of the results discussed in the previous chapter. There are three sections in this chapter with the first discussing the benefits of social media on the mental health and wellbeing of young adults. The subsequent section explores the negative impacts of social media on the mental health and wellbeing of young adults, while the final section explores how social services can effectively use social media to support the mental health and wellbeing of young adults.

Benefits of Social Media

Young adults have some of the highest rates of social media usage out of every age group, both in terms of the quantity of social media platforms they use, and time spent on social media (Bailey et al., 2022; Yang et al., 2021). The participants were no exception to this, as they all reported using multiple social media platforms, and frequently using social media. Between 50-80% of New Zealanders will experience a mental health concern over their lifetime, and each year, one in every five New Zealanders will experience mental health concerns (New Zealand Government, 2018). Many young adults find their engagement on various social media platforms can have beneficial impacts on their mental health and wellbeing. This section discusses the benefits of social media on

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the mental health and wellbeing of young adults including destigmatisation and normalisation, creating connections, coping strategies, and education.

Destigmatisation and Normalisation

Sharing information about mental health concerns is an effective method to reduce stigmatisation around mental health and to normalise these experiences (Roberts et al., 2022; Tan et al., 2021). Young adults sharing their experiences and information regarding mental health and wellbeing supports the creation of shared knowledge of mental health and wellbeing. Young adults are more likely to engage with supports when the stigma around mental health is reduced and mental health is normalised (Cunningham et al., 2023; Flett et al., 2020; Roberts et al., 2022). Through social media platforms, simple and understandable information on mental health can be distributed, which the participants described as contributing to destigmatisation and normalisation, thus improving their mental health and wellbeing.

The destigmatisation and normalisation of mental health were identified as a key benefit of social media by participants. Destigmatisation and normalisation of mental health decrease experiences of self-stigmatisation and can address the stigma around mental health experiences held by family members, friends, and members of the community. A majority of New Zealanders will experience mental health distress during their lifetime (New Zealand Government, 2018) however individuals who experience mental health concerns still face stigma and discrimination (Cunningham et al., 2023; Cunningham et al., 2016; Flett et al., 2020). Cunningham et al. (2016) highlighted that the key areas their participants experienced discrimination from in relation to their mental health were from friends and family as well as mental health services and discrimination in seeking employment. A lack of understanding, knowledge, and accurate information is a key cause of the societal views around mental health that lead to discrimination (Cunningham et al., 2023; Flett et al., 2020). Participants' experiences concurred with findings by a similar population group as those detailed by Cunningham et al. (2016). They shared stories about barriers to accessing support due to unsupportive input from family members and friends. However, they also detailed that by sharing

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online infographics and educational videos they were able to normalise mental health to their family and friends by developing their understanding of the presenting concerns that they face. Most people are willing to have a positive relationship (whether this is professional, friendship, or familial) with an individual with mental health concerns, however, views around mental health can be a barrier (Flett et al., 2020). With an increased number of people who understand mental health concerns, it is expected that individuals will be more willing to support people with mental health concerns (Flett et al., 2020). The participants indicated that social media could play a positive role in increasing this understanding.

Mental health services and professionals are another source of discrimination for individuals seeking support for their mental health (Cunningham et al., 2023; Cunningham et al., 2016). Similarly, the participants reported times when professionals would not refer them to appropriate supports, due to not believing they were necessary. Participants indicated that social media platforms, such as TikTok and Instagram would be beneficial on these occasions, as often they could find videos that better described their situation than they could. An example given by Ava, is that the young adult can show the video they believe helps explain their situation to their health-care professional to start a conversation on their situation. A concern of this behaviour, particularly with growing concerns around self-diagnosing, is that professionals will need to understand the experience of the presenting individual, not from a social media influencer (Kong et al., 2021; Naslund et al., 2016).

Creating Connections

Social media platforms, such as Facebook, support greater connections and socialisation, which can positively impact the mental health and wellbeing of young adults. Feeling alone and isolated is a common occurrence for individuals with mental health concerns, with many individuals stuck in negative thinking patterns such as that they are alone in their struggles, that no one cares about them, and no one understands them (Calati et al., 2019; Naslund et al., 2016). Online communities and social groups support the wellbeing of young adults as they can learn and develop

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new behavioural responses (Cilliers, 2021; Ngai et al., 2015). Participants felt that connections were a vital support around mental health and wellbeing, and highlighted that social media platforms, such as TikTok and Instagram allowed for greater visualisation of mental health. Social media platforms including YouTube and TikTok were praised by participants for being a place where they could see other people with similar mental health concerns, and this made them feel more connected and hopeful about their situation. Individuals with a strong sense of community are more likely to achieve positive mental health outcomes, therefore through the use of online communities, such as Facebook groups, young adults are able to form connections and communities with individuals in similar situations and experiences (Marchant et al., 2017; Wilson & Stock, 2021).

There are many communities on social media that exist to share information, experiences, and treatment outcomes around various mental health diagnoses (Kong et al., 2021; Russell et al., 2021). These online communities (such as Facebook groups, *ADHD NZ* and *Depression/Anxiety Support for N.Z Women*) provide a sense of companionship and community to a group of individuals who may feel isolated from society, and alone (Feuston & Piper, 2018). They hold a large amount of power in the social learning of young adults, as young adults can be heavily influenced by social groups (Ngai et al., 2015). By joining these online communities, young adults can gain a range of mental health and wellbeing benefits, such as forming connections with individuals in similar situations, which participants reported was motivational when addressing their own situations.

Social media platforms are effective tools to improve socialisation and connection with both friends and family (Kim & Kim, 2022; Wilson & Stock, 2021). Communication can be enhanced using social media platforms, whether this is communication around mental health and wellbeing, or just communication in general about a range of topics. Communication is an area that the use of social media platforms can enhance, which may subsequently support a reduction in loneliness by fulfilling the social needs of young adults (Cataldo et al., 2021; Kim & Kim, 2022; Teater et al., 2021). The capacity that social media platforms have for building connections and socialisation is important. Creating connections, whether in online communities based around various mental health diagnoses

or shared interests or by strengthening communication between friends and family using social media, was described positively by the participants as well as in previous research (Gallagher, 2021; Teater et al., 2021). Overall, the participants agreed with the literature that engagement with online mental health and wellbeing-related community groups supported the mental health and wellbeing of young adults.

Coping Strategies

Social media platforms have a range of helpful and informative information for individuals experiencing mental health concerns, including ways to support their mental health and wellbeing and learning ways of coping (Gallagher, 2021; Gupta & Ariefdjohan, 2021; Zener, 2019). Many social media platforms offer coping strategies that can support the mental health and wellbeing of young adults. Coping strategies are tools for individuals experiencing mental health concerns to effectively cope and decrease the functional impacts of their various mental health concerns (McMillan et al., 2022; Rickwood et al., 2007). Effective training in utilising coping strategies is linked with reductions in non-suicidal self-injury (NSSI) behaviours and other risk-taking behaviours (Blasco-Fontecilla et al., 2016). This is due to both risk-taking and NSSI behaviours and coping strategies often leading to short-term psychological relief to manage uncomfortable emotions and thoughts (Blasco-Fontecilla et al., 2016; Garisch et al., 2017). Coping strategies from social media sources were highlighted by participants as a positive support mechanism for young adults, and the effective use of these coping strategies enhanced their mental health and wellbeing. The knowledge that coping strategies make such a positive difference in the lives of many young adults raises the question of how to ensure that more young adults are aware of such strategies.

Social media platforms, like Instagram, were seen by participants as a key source of education for developing coping strategies. Participants spoke about a range of coping strategies, including breathing techniques, externalisation, self-care strategies, and various mindfulness techniques. Research provides evidence that coping strategies are a key part of supporting an individual's mental health and wellbeing (Garisch et al., 2017; Rickwood et al., 2007). Seeing videos

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on coping skills on social media platforms can reinforce skills that had been learnt in therapeutic contexts, and teach helpful skills and ideas around managing their mental health and wellbeing. Participants reported that coping strategies would often come up on their 'for you' page and feed on TikTok, Instagram, and Facebook. Videos and infographics were reported by participants to be the two most popular and easy-to-absorb sources of information on coping strategies. However, participants suggested that memes or other humorous sources of information were most likely to catch their attention and be remembered. Participants reflected on various experiences of gaining information on coping skills on social media platforms, highlighting that their current mental state affected how information was received. For example, when they were not in a good space, they would often watch more videos about mental health and wellbeing on social media platforms and actively seek out information such as YouTube videos of other people's stories about overcoming anxiety or depression. In contrast, when they were in a more positive space, they would skip over the more serious videos and infographics on mental health and wellbeing, opting for humorous posts and memes instead. Coping strategies taught via social media platforms can positively support the mental health and wellbeing of young adults, however, young adults require a range of sources of information around coping strategies to receive the full benefit (Blasco-Fontecilla et al., 2016; Garisch et al., 2017; McMillan et al., 2022).

Social media provides information on coping strategies that young adults may find beneficial, whether these are skills-based coping strategies such as dialectical behaviour therapy (DBT) techniques, or foundational health habits. Social media has proven positive outcomes for young adults in learning methods to cope with their mental health and decrease the functional impacts of various disorders (Gallagher, 2021; Naslund et al., 2016). Coping skills were both searched for by participants and passively discovered in their feeds and 'for you' page. By having coping strategies shared in a variety of formats, from a range of reliable sources, this information is readily available for young adults.

Education

Having an understanding of mental health and wellbeing, along with an understanding of treatment options, is important for young adults, as this supports them to have greater input into their own care, and improve their ability to look after themselves (New Zealand Government, 2018; Roberts et al., 2022). Research shows that individuals have better mental health outcomes when they have a voice and agency in their treatment (New Zealand Government, 2018; Roberts et al., 2022). The educational value of content posted on social media platforms is important to consider, as infographics and videos on social media platforms around mental health and wellbeing allow young adults to have an increased understanding of available options for support. This then supports individuals to have a more informed voice and a greater sense of control in their treatment plans (Gupta & Ariefdjohan, 2021; Tan et al., 2021).

Social media is a key information source for young adults, however, their approach to gaining information is inherently passive (Naslund et al., 2016; Stone et al., 2022). Research has shown that young adults find that social media platforms, such as TikTok and Instagram, have easy-to-understand psychoeducation about mental health and wellbeing, often in video or infographic formats (Kong et al., 2021; Russell et al., 2021). Facebook, Instagram, YouTube, and TikTok were all highlighted by participants as providing a range of educational value for young adults.

Understanding mental health and wellbeing can be complicated at times, particularly with the stigmatisation of mental health concerns. The easy-to-understand education methods used on social media platforms, such as YouTube and TikTok, were helpful for participants who would then send infographics and videos found on social media to important people in their lives to increase awareness. Participants spoke about stigmatisation including views that people with mental health challenges have something wrong with them and it is some type of disease. Additionally, participants spoke about individuals in their lives not accepting the reality of their mental health due to their own views on mental health and wellbeing. Participants indicated that, at times, information from their families and friends acted as barriers to accessing support or knowing that they needed to

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address their mental health. Participants reported using social media to gain education about mental health and to share this information with their families, friends, and other adults. Using social media to improve education about mental health and wellbeing for young adults and significant people in their lives supports improved mental health outcomes. This is due to the improvements in relationships between young adults and significant people in their lives with a greater understanding of the functional impacts on them due to their mental health concerns. Research shows that when significant people are not informed about the mental health and wellbeing of their loved ones, they can create barriers for young adults (Cunningham et al., 2023). Also, young adults can be more active in their treatment planning, which has been shown to improve mental health outcomes (New Zealand Government, 2018; Roberts et al., 2022).

Social media offers a range of benefits for the mental health and wellbeing of young adults. Social media has become an integral part of the everyday lives of young adults, with significant daily use of social media platforms in this age group. Social media platforms such as Facebook, TikTok, and Instagram often have large audiences and can be effective methods to distribute information. This ties in with the social constructionism view of how knowledge is created, through the sharing of individuals' experiences (Andrews, 2012). Young adults learn behaviours from various role models in their lives, which, with social media, includes virtual role models (Cilliers, 2021; Hutchison et al., 2007). Currently, young adults are often engaging with social media platforms to support their mental health and wellbeing, and using various platforms to gain education, and coping strategies, create connections, and work towards destigmatisation and normalisation of mental health and wellbeing (Gupta & Ariefdjohan, 2021; Naslund et al., 2016; Stone et al., 2022; Wilson & Stock, 2021).

In sum, communication with friends and family is enhanced through social media use by young adults. Many young adults are effectively and purposefully using social media to maintain their social connections, but also to be part of online communities which contribute to significant positive impacts on their mental health and wellbeing. Additionally, the use of social media

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platforms has many positive outcomes in terms of sharing information and education about mental health and wellbeing. Many young adults can see people in similar situations as themselves, which helps reduce self-stigmatisation and improve one's sense of self. Young adults can learn a range of methods to cope with their mental health concerns, and better understand their own diagnoses due to infographics or educational videos on social media platforms. As information on social media platforms around mental health is often easy to understand, young adults can find this helpful to share with significant people in their lives and this also supports positive outcomes. While the use of various social media platforms can be beneficial for the mental health and wellbeing of young adults, there are also a range of negative impacts that social media can have on the mental health and wellbeing of young adults.

Negative Impacts of Social Media on the Mental Health and Wellbeing of Young Adults

Social media platforms offer a range of support for young adults regarding their mental health and wellbeing. However, there are a range of negative impacts that also need to be considered (Spence, 2023; Wilson, 2023). One of the most common critiques of social media is that it is harmful and detrimental to a person's mental health and wellbeing (Kingsbury et al., 2021; Kummervold et al., 2002). This section will discuss four key areas of negative impact including misinformation, self-diagnosing, unsafe content, and getting immersed in social media.

Misinformation

False facts, incorrect information, and conspiracy theories can be dangerous and concerning, with many young adults being influenced by misinformation (Diesing, 2013; Gabarron et al., 2021). Misinformation is a growing concern on various social media platforms (Gabarron et al., 2021; Pennycook & Rand, 2019; Tasnim et al., 2020). As individuals create knowledge through the sharing of experiences, sharing misinformation-based experiences also creates knowledge that can be harmful to many young adults (Adorjan, 2019; Jenol & Pazil, 2021). As many of the benefits of social

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media use for supporting the mental health and wellbeing of young adults relate to the ability to share information, education, strategies, and stories online, the phenomenon of misinformation is of concern. Research has shown how misinformation has real consequences for public health and wellbeing, as was evident during the Covid-19 pandemic (Gabarron et al., 2021; Ma et al., 2021). In agreement with the literature, participants expressed concerns about the quantity of misinformation they saw on social media and that online, professional viewpoints were compared to the opinions of reporters and members of the public. This is concerning as it compares empirically researched views to opinions and popularity can become more important than qualifications (Walter & Salovich, 2021). If social media is to be used professionally to spread information about mental health and wellbeing, then the phenomenon of misinformation needs to be understood.

Learning how to navigate information found online is a key skill that many young adults need to develop (Gabarron et al., 2021; Hartnett, 2017). As social media has become a breeding ground for misinformation there needs to be responsibility taken by young adults to ensure they are able to safely engage in this environment (Gabarron et al., 2021; Naeem et al., 2021). Participants highlighted the steps they take to fact-check, knowing that misinformation is common in online environments. This included looking at the account that is the source of information, fact-checking pieces of information they discovered on social media platforms, and exploring other content posted around the same topic to identify common themes. Research has shown that young adults often seek to make informed decisions based on accurate information (Mendes et al., 2017). Similarly, the participants wanted to find accurate information on social media platforms about mental health and wellbeing.

Verification methods that social media platforms have installed are not always fit for purpose (Wang et al., 2021). Many social media platforms use verification badges, such as the blue tick next to the account's name, for accounts the platform believes are verified sources, such as a known public figure or company. Research shows that these verification badges do not ensure more accurate information and can be detrimental to combating misinformation (Wang et al., 2021). The

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need for a better method of verification was also stated by participants as they suggested it was often difficult to tell who was a professional in their field, or which accounts were run by individuals pretending to be experts in the field.

Several solutions for this concern about misinformation were identified by participants. Firstly, they suggested an improved verification system which relies on changes from the platforms themselves. Secondly, for trusted community groups and social services to provide accurate information about mental health and wellbeing on social media platforms (this will be further explored in the following section). Social services providing accurate information about mental health and wellbeing on social media platforms give a space where accurate information is accessible for young adults, to support fact-checking, and dilute misinformation with accurate information. Lastly, young adults themselves take responsibility for fact-checking, and learn to look for reinforcing information once they learn something new on social media. This was common practice across participants in this study.

Self-Diagnosing

Self-diagnosing is the growing trend of applying a clinical diagnosis to oneself, rather than receiving the diagnosis from a qualified clinical professional (Kong et al., 2021; Naslund et al., 2016). The theme of self-diagnosing is amplified by the concerns around misinformation. Greater education and information on various mental health disorders have led to an increase in young adults' self-diagnosing (Kong et al., 2021; Naslund et al., 2016). While an increased understanding of mental health and wellbeing is proven to be beneficial, self-diagnosing comes with a range of risks (Lupton & Jutel, 2015; Naslund et al., 2016). This is largely due to the fact a self-diagnosis is not recognised by mental health professionals, and so limits funding for support or treatment or prescription medications (Wasson, 2014). Participants shared these concerns around self-diagnoses, highlighting why diagnoses require a registered professional, as individuals often get their self-diagnoses wrong. Many young adults give themselves self-diagnoses when they are just experiencing heightened emotions, not a disorder, and then expect other people to change their behaviour based on the self-

diagnosis. This has led to detrimental outcomes for young adults who engage in self-diagnosing, such as engaging in self-treatment for the incorrect diagnosis, worsening mental health and wellbeing related to their self-diagnosis, and over-identification with their self-diagnosis (Dewak, 2023; Naslund et al., 2016; Wasson, 2014).

Despite the previously reported risks of self-diagnosing, many young adults are still using information from social media platforms to engage in this behaviour. Self-diagnosing serves a function in Aotearoa New Zealand presently, as many young adults currently struggle to get the support they require through the public sector, and for many young adults, the private sector is unaffordable (Murray, 2021; Zener, 2019). Without a formal pathway to diagnosis for many disorders, such as ADHD and ASD in young adults, self-diagnosing may be perceived as the only option (Murray, 2021). Having information on their possible diagnosis means that young adults can begin to consider how they can support themselves with online and accessible resources. However, the potential benefit of this relies on the accuracy of the content found online (Babbage et al., 2020). Additionally, many young adults self-diagnose themselves before engagement with clinical services so that they can use the clinical language mental health professionals use to better articulate their perceived need for diagnostic assessment or treatment (Griffith & Stein, 2021; Lupton & Jutel, 2015).

Self-diagnosing currently has an important role in the mental health and wellbeing treatment of young adults but can be problematic. With misinformation and misunderstandings being common, it is clear that this cannot be the only tool drawn on to support the mental health and wellbeing of young adults.

Unsafe Content

Unsafe content is another negative impact of social media on young adults in relation to supporting their mental health and wellbeing. On social media platforms, there are a range of sensitive topics and risky topics discussed, such as sexual assaults, suicidal and NSSI ideations, plans, and means, drug use, and violence (Beautrais, 2003; Marchant et al., 2017). Participants were concerned about some of the content they have seen on social media platforms such as posts

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around physical violence and self-harm (or NSSI), reporting that they often, without warning, will see something that can be triggering or elicit a strong emotional response. Examples provided by the participants included seeing live footage of mass shootings, posts of sexual assault, and about NSSI and suicide. Unsafe content is poorly regulated, and while there are safeguards on certain platforms, these are not currently fit for purpose (Pagoto et al., 2019; Stasi, 2019). Participants explained they were able to identify how to easily get around these safeguards, simply by changing words in posts, for example, “unaliveing” instead of “suicide”. This then escalated their exposure to unsafe content.

There are discussions in parliamentary debates in various countries around this topic, and the role of governments in regulating social media (Daaalder, 2021; Edwards et al., 2021; Trengove et al., 2022). The concerns around unsafe content on social media platforms are not new, but are an ongoing concern, despite these political discussions. The growing concern around unsafe content on social media platforms is that these posts can glorify and normalise unsafe coping mechanisms, such as drug taking, NSSI behaviours, and suicide (Beautrais, 2003; Colhoun, 2016; Fitzgerald & Curtis, 2017). However, there is also evidence that sharing these unsafe coping mechanisms on social media platforms can be beneficial as a form of externalisation and help-seeking (Rice et al., 2016; Thorn et al., 2020). Participants shared similar views about the complexities of unsafe content and the need for improved regulation of social media. In general, they believed the lack of regulation and exposure to unsafe content had negatively impacted their mental health and wellbeing. Trigger warnings are a key intervention to support the mental health and wellbeing of young adults from unsafe content, but this is largely left to the individual to include, and to report posts that do not include these warnings. This is an important consideration when exploring how social media platforms can be used to support the mental health and wellbeing of young adults by social services.

Getting Immersed in Social Media

Mindless scrolling was a phrase used by multiple participants to describe the experience of getting immersed in social media, to the point they felt stuck. Young adults are spending more time on social media than most other age groups and are often fulfilling a range of needs from their time

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on different platforms (Cataldo et al., 2021; Diesing, 2013; Stone et al., 2022). The concept of getting immersed in social media is common, with many researchers referring to this as mood-scrolling or mindless-scrolling (Baym et al., 2020; Chen et al., 2022; Rajeshwari & Meenakshi, 2023). Participants highlighted their own considerable screen time on social media platforms, with many reporting this was embarrassing or being quite shocked by their amount of screen time. Some participants also noted a disconnect between their ideal screen time and their actual screen time. Mindless scrolling and becoming immersed in social media can distract young adults from more meaningful activity which may then impact sleep, hobbies, relationships, and other aspects that maintain positive mental health and wellbeing. Falling behind on these foundational health habits holds negative impacts on the mental health and wellbeing of young adults.

Being mindful about the use of social media was a key message participants delivered. They suggested that by taking an active approach to social media use, young adults are able to regulate their screen time and reduce the likelihood of getting overly immersed. Research has found that knowing about the concerns associated with mindless scrolling, and using phone functions such as timers are key to reducing the impacts of mindless scrolling (Baym et al., 2020). However, this isn't always possible. Participants indicated that they have come across posts that encourage people to take a break or do something active, thereby reducing immersion in social media. While considering how social media can support the mental health and wellbeing of young adults, it is important to ensure that current negative impacts are being addressed and that methods to support mental health and wellbeing, are not also supporting immersion in social media.

Social media platforms impact the mental health and wellbeing of young adults, and a range of negative implications need to be considered when exploring this space. Social media has successfully integrated with society meaning that despite these negative implications, social media is now entrenched. In the online environment, concerns have been raised about misinformation, young adults self-diagnosing themselves, unsafe content being shared, and with young adults getting overly immersed. It is evident that social media platforms are not presently doing enough to

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regulate these concerns themselves, and that many of the current regulation systems are not fit for purpose, or require users to buy in, such as by reporting posts or using app timers. However, there are solutions to the concerns that can be further explored and implemented. Some of these solutions are for the social media platforms themselves, but others can be met by individuals, community groups, and social services. Examples include having accurate information shared by trusted community groups and social services, educating individuals on fact-checking, using trigger warnings, having posts to remind individuals to take breaks, and exploring the current need for self-diagnosing. In combination, these will all make a positive difference to the mental health and wellbeing of young adults.

Effective Social Media Use by Social Services

Social services, and the social workers who work in these organisations, are increasingly engaging with social media platforms to enhance their practice with service users, including young adults (Stanfield & Beddoe, 2016). Understanding how social services can effectively support young adults on social media platforms is important for the future of social work and positive outcomes for young adults (Stanfield & Beddoe, 2016). Social media may both positively and negatively impact the mental health and wellbeing of young adults, which is why it is important to understand how social services can work within the landscape of social media to best support young adults. Social services currently have a significant role in supporting the mental health and wellbeing of young adults in Aotearoa New Zealand (Appleby et al., 2020; Kean, 2017; Rodenburg & Dowell, 2008). With many aspects of society transitioning to effective use of social media, such as businesses, there is evidence that effective use of social media platforms can lead to better outcomes in various fields.

Within the social work profession, it is important for practitioners and services to continually improve, adapt, and advance their practice, to best support clients (Ballantyne et al., 2022; Doebel, 2022). Exploring how social media platforms can be used by social services, is an example of how social services can adapt and advance their practice, to provide better outcomes for service users

(Doebel, 2022; Rothman & Mizrahi, 2014). The ANZASW states the social work profession has a dual focus, firstly to enable and empower individuals and whānau to address their own concerns, and secondly, to work at a macro level to change and challenge societal structures (ANZASW, 2019). The second focus goes beyond one-on-one working with clients, where tools such as social media platforms can be used to effectively support clients, working around societal structures and limitations. There is a range of concerns that young adults experience when accessing mental health supports, which has led to many young adults in Aotearoa New Zealand feeling like they cannot receive adequate care (New Zealand Government, 2018; Roberts et al., 2022; Stubbing & Gibson, 2021). This section reviews how social services can effectively use social media to support the mental health and wellbeing of young adults. To explore how they can be supportive, the next section will discuss effective social media use by social services, how to enhance engagement with social services on social media, and how the accessibility of social services on social media can support better mental health and wellbeing outcomes for young adults.

Effective Social Media Use by Social Services

Social media is a tool that can be intentionally and effectively used by social services to better support the mental health and wellbeing of young adults. As explored in the previous sections social media is a powerful tool, and despite risks, there are many benefits related to supporting young adults and their mental health and wellbeing. These benefits can be enhanced by effective social media use by social services. Internationally and domestically, demand for mental health and wellbeing social services has grown to the point where traditional services are overwhelmed and overburdened (Lattie et al., 2022; New Zealand Government, 2018; Oliveira et al., 2021; Reger & Hammer, 2021; Williams et al., 2017). Therefore, exploring effective alternatives to enhance social services to support the mental health and wellbeing of young adults is important (New Zealand Government, 2018; Oliveira et al., 2021).

Education and information on mental health and wellbeing, treatment options, and coping strategies on social media are all indicated to be highly positive for young adults in terms of

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supporting their mental health and wellbeing (Kong et al., 2021; Russell et al., 2021). However, there is also a risk of misinformation that needs to be addressed (Gabarron et al., 2021; Pennycook & Rand, 2019). Participants shared these concerns and spoke about the role of social services could play in providing accurate information, and challenging misinformation. If social services effectively engage with their communities on social media, they will be able to provide accurate information about mental health, local treatment options, and coping strategies. By engaging with clients online, mental health professionals are able to share accurate information about mental health and wellbeing with their online followers (Koinig, 2022; Pretorius et al., 2022; White & Hanley, 2022). Increasing the quantity and quality of infographics and posts by social services and mental health professionals on social media will allow for greater spreading of accurate information for young adults. This helps challenge the misinformation around mental health and wellbeing that exists, both online, and in interpersonal relationships, which helps to support the mental health and wellbeing of young adults. Social services' role in providing this information is key to these positive outcomes.

Engaging with posts, such as infographics, posted by mental health professionals and social services on social media, has led clients to report that this has enhanced their traditional mental health supports (Pretorius et al., 2022). Young adults have reported that they appreciate when their mental health professional recommends online resources for them to solidify their understanding of key concepts and strategies (Pretorius et al., 2022). Participants reported similar feedback, that they found it beneficial to combine their formal mental health care with support on social media. At times, social media posts helped to solidify their understanding and use of key strategies and messages. By social services and mental health professionals effectively using social media, young adults may benefit from this combined approach to treatment. Health social media influencers have proven to be effective in providing positive outcomes for communities around health issues, highlighting the potential for positive impact information on social media platforms (Pretorius et al., 2022).

Social services and mental health professionals can deliver effective treatment to young adults by engaging in the online environment, as well as working face-to-face with young adults (Gallagher, 2021; Gupta & Ariefdjohan, 2021; Pretorius et al., 2022). By ensuring that accurate information is available online, many young adults find that they can better reinforce their learnings, and better understand key strategies and concepts (Gallagher, 2021; Pretorius et al., 2022). Concerns around finding reliable information online around mental health and wellbeing can be overcome by effective social media use by social services. From the information provided by participants, effective use of social media platforms includes eye-catching and easy-to-understand infographics and videos being shared on social media, that provide information about various mental health concerns, and explore treatment options and services available. With the effective use of social media by social services to support the mental health and wellbeing of young adults, it is important to consider how to enhance engagement with social services on social media.

Enhancing Engagement with Social Services on Social Media

Understanding how social services can enhance engagement with young adults on social media around mental health and wellbeing is necessary when exploring how social services can effectively use social media to support the mental health and wellbeing of young adults, and central to this study. Offering support to young adults around their mental health and wellbeing both on social media and in person is only effective if people can engage with social services.

Many mental health professionals and therapists who have become social media influencers have large audiences online, with many international influencers having between 1,000 and 5,000 followers, and some macro influencers reaching over 100,000 followers (Pretorius et al., 2022; White & Hanley, 2022). By having large followings on social media, these influencers can promote local organisations and support groups and spread information around mental health and wellbeing. Maintaining one's status as a social media influencer requires a large time commitment to ensure that the individual is posting enough content to maintain a following (Koinig, 2022). Participants reported that social services wanting to enhance their engagement with young adults on social

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media need to treat social media like a full-time job and that social services need to commit to operating in this space if they hope to gain a following. Participants reported that online posts that are humorous and engaging are more likely to maintain their interest. This highlights that having informative content online is not enough, it must also capture the interest of young adults.

The perception of an individual mental health professional or of social service can be affected by their social media presence, both in a negative and positive light (White & Hanley, 2022). A previous study showed that many young adults who found their mental health professional or therapist on social media had an increased perception of their therapist's expertise and an increase in positive feelings towards their therapist (White & Hanley, 2022). Participants reflected on how being able to view the social media profile of a social service or mental health professional would likely make them feel more comfortable engaging with the service or individual. In addition, being able to follow the social media page of a social services or mental health professional would take away the foreign nature of engaging in face-to-face support for young adults.

Knowing which supports are available and appropriate in the community can be difficult to navigate for many young adults, as indicated by the participants. Similar findings have been evident in a government report which indicated that, at times, the mental health system and available supports can be difficult for young adults to navigate (New Zealand Government, 2018). Participants highlighted stories where support was declined as the wrong service was approached. Social services could enhance engagement with their services by effectively using social media and also promoting other services in their area, as well as being transparent about entrance criteria (Kong et al., 2021; Tan et al., 2021; Ventola, 2014).

The use of social media by social services has the capacity to enhance engagement from young adults with social services. Social media use allows young adults to explore the availability of social services in their area and to gain a deeper understanding of what specific services are provided. This facilitates young adults to feel more comfortable about reaching out for support,

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along with receiving the other benefits that social media can offer for their mental health and wellbeing.

Accessibility of Mental Health and Wellbeing Support on Social Media for Young Adults

Social media is one of the most accessible sources of information available to the general public (Sheth, 2020). There are many barriers to accessing mental health and wellbeing support for young adults in Aotearoa New Zealand, such as the opening hours of social services, the physical location of services, and the costs of accessing services (New Zealand Government, 2018; Roberts et al., 2022; Stubbing & Gibson, 2021). Participants also indicated barriers regarding the accessibility of social services. Physical barriers to social services are an area where social media can enhance support for the mental health and wellbeing of young adults, due to the ability for social media platforms to be accessed whenever required (Appleby & Phillips, 2013; Ferris-Day et al., 2021). Participants spoke about a lack of familiarity with accessing services and highlighted that social media can support this process, by introducing clinicians and office spaces on their social media pages. Further, if social services posted infographics and videos with information about mental health and wellbeing, young adults could have greater access to support around their mental health and wellbeing whenever they require this support (Diesing, 2013; Ferris-Day et al., 2021; Roberts et al., 2022; Tan et al., 2021). They could also put greater trust in this content since it was coming from a recognised organisation. This highlights an important space where social services can effectively utilise social media to support the mental health and wellbeing of young adults.

The accessibility of information posted on social media platforms gives the space for social services to effectively support the mental health and wellbeing of young adults. One limitation of social services in terms of supporting the mental health and wellbeing of young adults is that they are generally only open during standard business hours are only accessible by appointment, and at certain physical locations (Appleby & Phillips, 2013; Ferris-Day et al., 2021). Social media platforms are a key method social services could utilise to support young adults with their mental health and wellbeing, overcoming these barriers.

Potential Risks

Social media is a key tool that social services can use to effectively support the mental health and wellbeing of young adults in their communities, by reducing barriers, such as accessibility, enhancing engagement with their services, and increasing the effective distribution of information. However, there are also potential risks. These risks include perpetuating misinformation, inadvertently encouraging young adults to engage in self-diagnosing behaviours, exposure to unsafe content, getting immersed on social media, difficulties with risk management, and deterring young adults from accessing social services for support.

There is a relationship between mental health concerns and risk-taking behaviours, such as alcohol and other drug use, NSSI behaviours, and suicidal ideations and behaviours (Beautrais, 2003; Colhoun, 2016; Stubbing & Gibson, 2021). Suicide and NSSI are often spoken about on social media platforms in mental health and wellbeing communities and pages, which was a concern mentioned by participants. There are risk factors around NSSI and suicide being spoken about on social media platforms, due to evidence that this can increase these risks factors (Marchant et al., 2017; Zdanow & Wright, 2012). Risk assessment and management is a key component of professional support and mental health professionals have an obligation to effectively assess risk factors and support clients in addressing risky behaviours (Matthewson, 2006). Risk assessment and management is not generally possible on social media platforms by social services or mental health professionals and this may lead to young adults seeking support for their mental health and wellbeing on other social media platforms (White & Hanley, 2022). Social services wanting to support young adults on social media platforms therefore need to carefully consider the challenges with risk management.

Participants reported that mental health professionals and social services using social media platforms to post about mental health and wellbeing can also have a negative effect on the engagement of young adults with these supports. One key reason for this is that young adults may question the ethics, professionalism, and confidentiality of social services or mental health professionals based on their presence on social media (White & Hanley, 2022). The perception of the

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mental health professional or social services is critical for the young adult to engage with the service, and reputations can be easily damaged in the online environment. Alternatively, young adults may feel that their learning or engagement with social media platforms is enough to support their mental health and wellbeing. Young adults may use social media support rather than face-to-face support and view social media as an alternative to therapeutic input (Wardi-Zonna et al., 2020; White & Hanley, 2022). It is important that social services and mental health professionals operating in the mental health space on social media platforms are clear that their posts and information online are not a replacement for formal support and that this is also communicated to young adults (White & Hanley, 2022).

Social media platforms have many benefits for young adults associated with supporting their mental health and wellbeing, along with a range of negative implications. Social services and mental health professionals have a key role in supporting the mental health and wellbeing of individuals in their communities. At times, social services can struggle to effectively support the mental health and wellbeing of young adults. Social media platforms can offer a level of effective support around the mental health and wellbeing of young adults, and, if used appropriately, can lead to a range of positive impacts. While there are risks connected with social services and mental health professionals operating in the social media space, the benefits can improve mental health outcomes for young adults.

Chapter Summary

There are many factors to be considered when exploring the role of social media in supporting the mental health and wellbeing of young adults in Aotearoa New Zealand. This chapter has drawn on the literature and the results from participants, to explore benefits and negative impacts of social media on the mental health and wellbeing of young adults. Additionally, how social services can effectively utilise social media to support the mental health and wellbeing of young adults has been discussed.

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Social media may positively support the mental health and wellbeing of young adults by providing information and education on mental health which ensures that young adults have the ability to be more informed on mental health. This includes supporting young adults to develop coping strategies and mechanisms and form connections with individuals with similar mental health and wellbeing concerns. This sense of community and ability to share information and methods to cope can significantly improve the mental health and wellbeing of young adults. Social media can also support the normalisation and destigmatisation of mental health and wellbeing. However, social media may also negatively impact young adults. These negative impacts include misinformation and unsafe content being accessed by young adults. Many young adults engage in self-diagnosing behaviours using information they read on social media, leading to a range of concerns. Concerns have also been raised about young adults getting immersed on social media, and this impacting their routines and productivity, leading to negative impacts on their mental health and wellbeing.

Social services and mental health professionals can effectively utilise social media to support the mental health and wellbeing of young adults. Social services can provide information that enhances traditional therapeutic interventions, enhance their engagement with clients through online sessions and asynchronous resources, and reduce the accessibility barriers young adults may face. By engaging with young adults online social services and mental health professionals can increase awareness and engagement with their services. There are, however, risks attached to social services and mental health professionals using social media and these need to also be considered. Overall, however, the potential for increased effectiveness in supporting the mental health and wellbeing of young adults via social media is evident. The following chapter will summarise the findings from this research and make recommendations.

Chapter 7: Conclusion

Social media is used by a majority of young adults and impacts on many aspects of their lives. The mental health and wellbeing of young adults is no exception to this, with various positive and negative impacts identified by young adults. The aim of this research was to explore the role of social media in supporting the mental health and wellbeing of young adults (18 to 24 years old) in Aotearoa New Zealand. This chapter concludes the research. It briefly summarises the study design and then outlines the key findings and conclusions. The final sections of the chapter highlight the strengths and limitations of this research and recommendations based on the research findings.

Study Design

This qualitative study aimed to explore the role of social media in supporting the mental health and wellbeing of young adults (18 to 24 years old) in Aotearoa New Zealand. The three key objectives were to:

- explore how social media is currently supporting the mental health and wellbeing of young adults.
- explore how social media can impact the mental health and wellbeing of young adults.
- explore how social services can effectively utilise social media to support the mental health and wellbeing of young adults.

Seven young adults were interviewed to gain an understanding of their experiences, perspectives, and reflections on the use of social media in relation to their mental health and wellbeing, and the mental health and wellbeing of other young adults. The research utilised a qualitative methodology and a social constructionism theoretical framework. Social constructionism holds a view that individuals and their behaviours both contribute to society and are influenced by society, which fitted with the interactive nature of social media (Schradler, 2015). Additionally, social

constructionism was utilised, due to the ability to share experiences to create knowledge on social media platforms, how young adults are socialised through social media, and how it affects their behaviours. This study also drew from the values of the social work profession. Following collection, the data was analysed thematically drawing on the common experiences and perspectives of participants. These themes were then reviewed in relation to the research objectives and against the current literature.

Key Findings

Five key findings were evident from this research. These findings were derived from the participants' data and the literature:

1. Engagement with online communities around mental health and peer support can offer a space to normalise mental health concerns leading to improved mental health and wellbeing outcomes for young adults.
2. Social media platforms can enable effective teaching of coping skills and strategies which can lead to improved mental health and wellbeing outcomes for young adults.
3. Young adults are required to develop skills for navigating the online world and this includes understanding the presence of misinformation and fact-checking skills.
4. The culture of self-diagnosis has been amplified by social media use and carries both positive and negative implications for the mental health and wellbeing of young adults.
5. With social services effectively contributing knowledge on mental health and wellbeing on social media platforms, the mental health and wellbeing of young adults can be better supported.

Together, the key findings answer the objectives of the research and are explored further below.

Developing a Sense of Community

Many young adults benefit from engaging with individuals online who have or had similar mental health concerns to themselves. These online communities provide a space where young adults can feel a greater sense of connection to others and can reduce feelings of isolation that are often associated with mental health concerns (Feuston & Piper, 2018; Filia et al., 2022; Tuffin & Clark, 2016). A greater sense of connection and reduced feelings of isolation are linked with improved mental health and wellbeing outcomes (Marchant et al., 2017; Wilson & Stock, 2021). These online communities also offer a range of positive experiences for young adults, beyond simple connection. These benefits include hearing shared or similar experiences from others (Marchant et al., 2017; Wilson & Stock, 2021). This sharing of experiences may also give hope and inspiration to many young adults in relation to their own journey (Marchant et al., 2017; Wilson & Stock, 2021). Participants found that shared experiences were motivational to make changes in their own lives.

This study found that online communities built around various mental health concerns and experiences offer a space where these experiences can be normalised. Self-stigmatisation has been identified by participants as a concern for young adults, following views from family, friends, and community members. Online communities, shared experiences, and psychoeducation shared on social media platforms have been highlighted as ways to reduce the negative impacts of self-stigmatisation (Cunningham et al., 2016; Flett et al., 2020). These online communities also offer one space for young adults to strengthen their skills and tools for coping.

Strengthening Skills and Strategies for Coping

The use of effective skills and strategies to cope with mental health concerns is a key aspect of effective mental health treatment as it supports the enhancement of the mental health and wellbeing of individuals (Blasco-Fontecilla et al., 2016; McMillan et al., 2022; Rickwood et al., 2007). This study highlighted the usefulness of coping skills and strategies for young adults to use in their everyday lives to manage uncomfortable emotions and thoughts and gain short-term psychological relief (Blasco-Fontecilla et al., 2016; Garisch et al., 2017). Coping skills and strategies give young

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adults alternative ways to respond to uncomfortable emotions and adversity which improves mental health and wellbeing outcomes.

This study found that social media platforms can enable young adults to strengthen and develop their use of coping skills and strategies, whether or not they are engaged with traditional mental health supports. Through seeing videos or infographics on social media platforms, young adults can reinforce skills and strategies they have learnt in therapeutic contexts, as well as develop new skills that they can use in their everyday lives (Gallagher, 2021; Gupta & Ariefdjohan, 2021; Zener, 2019). The sharing of accurate videos and infographics to explore skills and strategies such as breathing techniques, self-care ideas, externalisation, mindfulness, and distress tolerance skills is one of the most effective impacts on mental health and wellbeing for young adults (Gallagher, 2021; Naslund et al., 2016). Participants reported that the accessibility of social media means that if these videos and infographics are available, young adults can save and bookmark them in order to find them in times of need. The sharing of accurate videos and infographics around coping skills and strategies on social media platforms is a key strength of using social media to support the mental health and wellbeing of young adults as it removes several barriers, such as wait times between sessions or initial appointments, travel barriers, and costs for services (Every-Palmer et al., 2022; New Zealand Government, 2018; Roberts et al., 2022; Stubbing & Gibson, 2018).

On various social media platforms, there are many resources that can strengthen the understanding of coping skills and strategies for young adults. These include health social media influencers, individuals sharing their experiences from therapy, and mental health clinicians. While the quality of information varies between these sources, and at times, misinformation and self-diagnosing behaviours can become a concern, overall, the sharing of coping skills and strategies is reportedly a positive influence on the mental health and wellbeing of young adults (Pretorius et al., 2022). Participants reported that videos were highly effective for learning new coping skills.

Developing Skills for Navigating the Online World

Social media is a breeding ground for misinformation, conspiracy theories, and unsafe content. Due to the nature of social media, society is seeing increasing misinformation (Diesing, 2013; Gabarron et al., 2021; Pennycook & Rand, 2019; Tasnim et al., 2020). This study heard several experiences from participants about seeing misinformation on various health-related topics. Misinformation has several consequences for young adults, negatively impacting their mental health and wellbeing. These include young adults making health-related decisions based on inaccurate information, becoming hesitant to engage with services based on one-sided accounts and false facts, and engaging in dangerous behaviours based on mistruths posted on social media platforms (Gabarron et al., 2021; Ma et al., 2021). Social media platforms currently do not provide an effective and reliable method to differentiate between opinions from members of the public, journalists and media representatives, and empirically based professional viewpoints. Posts on social media are more visible and accessible based on the follower count of the account that creates the post, and engagement from other users, and this means that popularity becomes more important than qualifications in how far content is spread (Walter & Salovich, 2021). The current verification systems that various social media platforms utilise do not help to ensure the quality of information and therefore do not prevent the spread of misinformation (Wang et al., 2021). Participants reported that the blue tick on Facebook and Instagram did not mean more accurate information.

This research found that young adults are required to develop skills for navigating the online world and this includes understanding the presence of misinformation and fact-checking skills. While many young adults have individual methods they use to fact-check, as highlighted by participants, an improvement to the verification checks used on social media platforms is essential. As misinformation is posted frequently on social media platforms, an increase in reliable information, posted by mental health clinicians and social services is one way that the mental health and wellbeing of young adults can be supported. Having more accurate information available on various social media platforms means that young adults will be able to access information to counter

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misinformation (Koinig, 2022; Pretorius et al., 2022; White & Hanley, 2022). Participants highlighted that as many social services will have local reputations, this further enhances the believability of the content they share on social media platforms, meaning that young adults will feel that they can trust the information provided.

Culture of Self-Diagnosing

With increased psychoeducation on various mental health-related topics being available to young adults on social media platforms, the culture of self-diagnosing has developed. Self-diagnosing is a concern, as it has been linked, at times, to worsening mental health and wellbeing outcomes, increases in NSSI behaviours, and over-identification with a self-diagnosis (Dewak, 2023; Naslund et al., 2016; Wasson, 2014). Diagnoses are given by qualified professionals, who are trained to assess and diagnose individuals, while self-diagnoses are self-given, based on an individual's perspective of their situation and their understanding of the disorder. Often, self-diagnoses are incorrect, due to the lack of ability and understanding to correctly self-assess and self-diagnosed, and the increase of misinformation about diagnoses (Dewak, 2023; Lupton & Jutel, 2015; Naslund et al., 2016; Wasson, 2014). Participants reported experiences of hearing other young adults identify with a self-diagnosis and using this as an excuse for their behaviours. Furthermore, a self-diagnosis does not equate to receiving professional support for the presenting situation the young adult is experiencing. Funding for support, such as the prescription of medications, and access to certain services requires a clinical diagnosis.

Despite this, self-diagnosing is meeting several needs in Aotearoa New Zealand presently. Firstly, for young adults in Aotearoa New Zealand, it can be extremely difficult to have a publicly funded assessment for various disorders, such as ADHD and ASD (Murray, 2021; Zener, 2019). Young adults who cannot afford a private assessment for these diagnoses may feel they are left without an alternative to self-diagnosing if they want to better understand themselves (Murray, 2021). Secondly, approaching a social service or mental health clinician can be an anxiety-provoking situation, especially with the use of clinical language. Young adults highlight that by self-diagnosing

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they feel they can better articulate their perceived need for assessment and treatment around their self-diagnosis and have better outcomes in gaining support (Griffith & Stein, 2021; Lupton & Jutel, 2015). A key finding was that with these benefits of self-diagnosing, it is important that accurate information is provided to young adults around various mental health diagnoses, and the risks of self-diagnosing are clearly highlighted.

Enhancing Engagement for Social Services

The role of social services in supporting the mental health and wellbeing of young adults has traditionally been met by providing person-to-person support, whether this was in person, over the phone, or using video chat software. However, demand for mental health clinicians is currently overwhelming social services, as both nationally and internationally there are shortages of clinicians (Every-Palmer et al., 2022; New Zealand Government, 2018; Oliveira et al., 2021). The use of social media platforms to provide some types of support can be one of the many pathways to overcoming this issue.

There were several key areas identified where social services can enhance engagement with young adults on social media platforms. The first is to provide effective and accurate information so that young adults can gain psychoeducation from a reliable source, accessible at any time when they may require the information. This will ensure that young adults can support their own mental health and wellbeing without a demand on clinicians at any given time. Engagement can also be enhanced by social services considering how they gain attention and followers on social media. This may require employing staff to manage social media accounts so that content is authentic, appealing, humorous, and interesting. Thirdly, this study found that if social media can be used it can make services appear and feel more approachable for young adults so that young adults feel more familiar with services before initial engagement. This allows for young adults to feel more comfortable to engage in person with social services. Additionally, by services being more present on social media, participants reported that young adults can develop a better understanding of the support available, which means they will be more likely to present to the appropriate service. This will then reduce the

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number of times referrals need to be made due to a mismatch of needs from the young adult and support offered by the service. Finally, social services should provide accurate information on social media platforms, so that young adults will be able to reinforce their understanding of their experiences and coping skills and strategies learnt in sessions, and thereby have greater support in between sessions.

Social media platforms can enhance the support social services offer to young adults around their mental health and wellbeing, and also support social services to reduce the significantly increasing demand for support.

Strengths and Limitations

This section outlines the strengths and limitations of the research.

The first strength of this research was in the rich data provided by participants. Participants were open in their answers to the questions posed and showed an interest in the topic area. Participants were able to articulate the positives and negatives of social media and to openly talk about their own experiences both with social media and their own mental health journeys.

A limitation of this research was the sample size of seven participants. The data from this study cannot be generalised across the population of young adults across Aotearoa New Zealand. However, as the research utilised a qualitative methodology, which is not centred on the need for generalisability, this sample size was adequate and provided proximal similarity.

Another limitation of this project is that due to the recruitment of participants being through social services, the majority of participants had had some contact with social service organisations. This meant that many of the young adults have had treatment related to their mental health. There is a large proportion of the young adult population who have not had engagement with social services, and these young adults may have differing perspectives.

A final limitation of this study was that data was based on the experiences of young adults rather than the views of managers and clinicians in social services. This means that

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recommendations for social services are based on the participants and literature rather than on social services themselves.

Recommendations

Based on the study's findings the following recommendations are made:

- For social services to purposefully engage with social media platforms in order to provide psychoeducation on mental health and wellbeing and coping skills for young adults.
- For social services to use social media platforms to provide information about their services to enhance engagement with young adults.
- To increase fact-checking, from social services and clinicians, on online communities regarding mental health and wellbeing and so to ensure accurate information is provided to community members.
- For social services to review policy and practice, regarding social media engagement, to ensure clinicians have time to post and provide accurate information, or to hire specific staff to manage social media accounts.
- For further research to be conducted on how to best engage with young adults on social media platforms and provide effective psychoeducation around mental health and wellbeing for young adults in an online environment.

Conclusion

This research aimed to explore the role of social media in supporting the mental health and wellbeing of young adults in Aotearoa New Zealand. The findings of this research showed the relationship between social media and young adults and the current impacts and support from social media on the mental health and wellbeing of young adults. The opportunities for social services to use social media to support the improvement of mental health and wellbeing for young adults were considered. This study indicated several pathways forward for social services to improve in their use

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of social media platforms to enhance the mental health and wellbeing of young adults. Whether social media is viewed positively or negatively, it is a large part of society which impacts the everyday lives of young adults. As this research has shown, there are many opportunities for social services to better use social media as a tool to support the mental health and wellbeing of young adults.

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Appendix One: Semi-Structured Interview Guide



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Social Media and Mental Wellbeing

How can social media be used to support the mental health and wellbeing of young adults?

Semi-Structured Interview Guide

1. Can you tell me a bit about your social media habits and what social media platforms you use?
2. What are the main reasons you use social media?
3. On average, how many hours a day do you estimate you spend on social media?
4. What does 'supporting mental health and wellbeing' mean to you?
5. In what ways has the use of social media supported your mental health and wellbeing? Can you give examples?
6. What do you see as the greatest strengths of using social media to support the mental health and wellbeing of young adults?
7. What do you see as the greatest weaknesses of using social media to support the mental health and wellbeing of young adults?
8. Can you give me some examples of any skills, strategies, or techniques you have gained from social media that improve your mental health and wellbeing?
9. Overall, how would you describe the impact of social media on your mental health and wellbeing?
 - a. Can you give any examples of how using social media to support your mental health and wellbeing has worked well for you?
 - b. Can you give any examples of how using social media to support your mental health and wellbeing has not worked well for you?
10. How do you believe social media could be better used to support the mental health and wellbeing of young adults? Can you give examples?
11. Can you talk about any experiences of getting information on social media that you believe was untrue or harmful?
 - a. Do you check the source of information you find on social media, such as checking the validity of the account that made the post? If so, how do you do this?



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12. Aside from social media, can you give examples of how you support your mental health and wellbeing?
13. Have you used any social services or health services to support your mental health and wellbeing?
14. In your experience, what are the key barriers to accessing social services or health services to get support for your mental health and wellbeing?
 - a. How do you believe that social media can compensate for these barriers?
15. Do you follow any social services social media pages?
 - a. If yes, how have social service social media pages supported your mental health and wellbeing?
 - b. If yes, how do you believe social services social media pages could be improved to better support the mental health and wellbeing of young adults.
 - c. If not, how do you believe social services social media pages could be improved so that you would follow them, and benefit from them?
16. How did your social media use change during the Covid-19 lockdowns?
17. Do you have any further comments that you believe would be beneficial to add?

Appendix Two: Advertisement Request Letter



Social Media and Mental Wellbeing

Advertisement Request Letter

Tēnā koe,

My name is Nathan Williams, and I am a Master of Social Work student at Massey University.

I am completing a research project exploring how the role of social media in supporting the mental health and wellbeing of young adults (18 to 24 years old) in Aotearoa New Zealand.

The research explores:

- How social media is currently supporting the mental health and wellbeing of young adults.
- How social media can impact the mental health and wellbeing of young adults.
- How social services can effectively utilise social media to support the mental health and wellbeing of young adults.

I am seeking your support to recruit participants. Could you please display this advertisement in your building, pass on to young adults you are engaging with and circulate it on your social media page?

I am wanting to interview young adults, aged 18 to 24, about their experiences with social media, how they have used social media to support their mental health and wellbeing, and to gain their ideas on how social media can be better used to support the mental health and wellbeing of young adults.

If you have any questions, please call me on [REDACTED] or email me at Nathan.Williams.7@uni.massey.ac.nz or contact my supervisor Dr Kathryn Hay, k.s.hay@massey.ac.nz

I would be happy to talk with you about my research project and present the findings to your organization when it is completed. This research project has full ethics approval from Massey University [SOA 22/37].

Noho ora mai ra,

Nathan Williams

Appendix Three: Advertisement



Social Media and Mental Well-being

How can social media be used to support the mental health and well-being of young adults?

Are you a young adult (aged between 18 and 24 years old)?
Have you ever used social media to support your mental health and wellbeing?
Would you like to contribute your experiences and knowledge to a research project?

I would love to hear from you. If you are keen to be involved in an interview about your experiences, or if you have any questions about possibly being involved, please get in touch.

About the research project

To be involved in this research project, you will need to be aged between 18 and 24, have used social media to support your mental health and wellbeing, and be in a position where you feel you can safely talk about mental health and well-being.

This research project aims to understand how social media is used to support mental health and well-being, the impact of social media on mental health and well-being, and how social services can better use social media to support the mental health and well-being of young adults.

Interviews will be up to 60 minutes and will be scheduled at a time and place that is convenient to you. These interviews will take place in person, or via Zoom, depending on your preference.

If you are interested in taking part in this research, please contact me.

Nathan Williams
Nathan.Williams.7@uni.massey.ac.nz

This project has been reviewed and approved by the Massey University Human Ethics Committee: Southern A, Application 22/37. If you have any concerns about the conduct of this research, please contact Dr Negar Partow, Chair, Massey University Human Ethics Committee: Southern A, telephone 04 801 5799 x 63363, email humanethicsoutha@massey.ac.nz



Appendix Five: Ethics Approval Letter



MASSEY
UNIVERSITY
ŪR KUNINGA KI PŪREHUROA
UNIVERSITY OF NEW ZEALAND

6/10/2022

Dear: Nathan Williams

Re: Ethics Application - SOA 22/37 - Social media and mental wellbeing: How can social media be used to support the mental health and wellbeing of young adults.

Thank you for the above application that was considered by the Massey University Human Ethics Committee:

Human Ethics Southern A Committee at their meeting held on **Tuesday, 12 July 2022**

On behalf of the Committee I am pleased to advise you that the ethics of your application are approved.

Approval is for three years. If this project has not been completed within three years from the date of this letter, reapproval must be requested.

If the nature, content, location, procedures or personnel of your approved application change, please advise the Secretary of the Committee.

Yours sincerely

A handwritten signature in blue ink, appearing to read 'C Johnson', written over a light-colored rectangular background.

Professor Craig Johnson
Chair, Human Ethics Chairs' Committee and Director (Research Ethics)

Appendix Five: Participant Information Sheet



Social Media and Mental Wellbeing

How can social media be used to support the mental health and wellbeing of young adults?

Information Sheet

Tēnā koe,

My name is Nathan Williams, and I am a Master of Social Work student at Massey University, and a registered social worker.

Part of completing a Master of Social Work is completing a research project exploring the role of social media in supporting the mental health and wellbeing of young adults in Aotearoa New Zealand. The following research objectives are used to meet the aim of this research project:

- How social media is currently supporting the mental health and wellbeing of young adults.
- How social media can impact the mental health and wellbeing of young adults.
- How social services can effectively utilise social media to support the mental health and wellbeing of young adults.

By joining this research project, you will be one of 6-8 young adults I am interviewing for this project. Interviews will take up to 60 minutes. If you would feel more comfortable completing your interview with a friend or support person, please let me know in advance, and this can be catered to.

All participants in this research project will be made anonymous – your name and other personal details will not be used.

It is important to note, that these interviews will be exploring the topic of mental health and well-being, which can be a sensitive topic to discuss. All research participants will be provided with a list of support services, to support with any potential distress caused by engaging in this research project.

Project Procedures

As a research participant, you will be invited to attend an interview. With your consent, these interviews will be audio-recorded so that they can be later transcribed, by me with the assistance of Otter.Ai (a transcription software). Once they have been transcribed, you will be sent a copy of the transcription, and given the opportunity to make any alterations to your answers and statements. Also included in this email is the *Semi-Structured Interview Guide*, please feel free to look over this document to see the topics discussed in the interview.



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Data Management

The data collected from your interview will be used in both the thesis this research project has been conducted to produce, and potentially any subsequent journal article written about this research project. Research data, such as recordings, will be deleted one year post examination of this project. As stated above, any data that could identify you as a research participant will be made anonymous.

As a research participant, you will be sent both a PDF copy of the completed thesis and journal article.

Participant's Rights

You are under no obligation to accept this invitation. If you decide to participate, you have the right to:

- decline to answer any particular question;
- withdraw from the study (up until the research project is complete);
- ask any questions about the study at any time during participation;
- provide information on the understanding that your name will not be used;
- be given access to a summary of the project findings when it is concluded.
- ask for the recorder to be turned off at any time during the interview.

If you are interested in attending an interview for this research topic, please review the *Participant Consent Form* and *Interview Topic Information Sheet*. Once you have, please return the signed consent form to me, and we can schedule your interview.

Project Contacts

Researcher: Nathan Williams (email: Nathan.Williams.7@uni.massey.ac.nz)

Research Supervisors: Associate Professor Kathryn Hay (email: K.S.Hay@massey.ac.nz)

Dr Nicky Stanley-Clarke (email: N.Stanley-Clarke@massey.ac.nz)

Please contact me, or either of my supervisors, with any questions you may have about participating in this research project.

This project has been reviewed and approved by the Massey University Human Ethics Committee: Southern A, Application 22/37. If you have any concerns about the conduct of this research, please contact Dr Negar Partow, Chair, Massey University Human Ethics Committee: Southern A, telephone 04 801 5799 x 63363, email humanethicsoutha@massey.ac.nz

Noho ora mai ra,

Nathan Williams

Appendix Six: Participant Consent Form



Social Media and Mental Wellbeing ***How can social media be used to support the mental health and wellbeing of young adults?***

Participant Consent Form

I have read, or have had read to me, and I understand the Information Sheet attached as Appendix I. I have had the details of the study explained to me, any questions I had have been answered to my satisfaction, and I understand that I may ask further questions at any time. I have been given sufficient time to consider whether to participate in this study and I understand participation is voluntary and that I may withdraw from the study at any time.

1. I agree/do not agree to the interview being sound recorded.
2. I wish/do not wish to have my recordings returned to me.
3. I agree to participate in this study under the conditions set out in the Information Sheet.

Declaration by Participant:

I _____ hereby consent to take part in this study.
[print full name]

Signature: _____ Date: _____

Appendix Seven: List of Support Services



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Social Media and Mental Wellbeing

How can social media be used to support the mental health and wellbeing of young adults?

List of Support Services

Whanganui Based Supports

Youth Services Trust

Youth Services Trust (YST) is a free health-care centre for young people aged between 12 and 25 years old. YST has a counsellor, youth worker, doctor (on Thursday afternoons), and a nurse available. The counselling service is completely free.

Phone: 06 348 9935

Email: admin@yst.org.nz

Address: 39 Drews Avenue, Whanganui

Te Oranganui – Waiora Hinengaro

Waiora Hinengaro is the mental health service within Te Oranganui. Waiora Hinengaro offers support around mental health, alcohol & other drugs, rangatahi and tamariki services, and vocational programs. This is a completely free service.

Phone: 06 349 0007

Email: support@teoranganui.co.nz

Address: 57 Campbell Street

Mental Health & Wellbeing Support – Hāpai Oranga

Mental Health & Wellbeing Support – Hāpai Oranga are a community based service that aims to support the whānau of people with mental health or addiction concerns, along with individuals with mild to moderate mental health concerns. This is a completely free service.

Phone: 06 345 3301

Email: office@mhws.co.nz

Address: 210 Wicksteed Street, Whanganui



New Zealand Wide Supports

Health Improvement Practitioners

Many GP clinics across New Zealand have a Health Improvement Practitioner (HIP) in their services. These practitioners are registered mental health and addiction practitioners.

Contact your GP to have an appointment with your HIP.

1737

1737 is a free service for New Zealanders feeling down, anxious, a bit overwhelmed or just need to chat to someone. You can call or text us for free 24/7. Using the 1737 number you will get to talk to (or text with) a trained counsellor or talk to a peer support worker. This is a completely free service.

Phone: 1737

Text: 1737

Youthline

Youthline offers a free 24/7 Helpline service (text, phone, webchat & email), free face-to-face counselling services, youth mentoring, programmes in schools and communities to help people grow and develop. This is a completely free service.

Phone: 0800 376 633

Text: 234

The Low Down

The Lowdown is an online resource to support young new Zealanders with depression or anxiety. There are a range of helpful online resources on their website, along with a chat function for further advice. They can also be contacted via a phone call or texting. This is a completely free service.

Website: <https://thelowdown.co.nz/>

Phone: 0800 111 757

Text: 5626

Appendix Eight: Transcript Release Form



MASSEY UNIVERSITY
COLLEGE OF HEALTH
TE KURA HAUORA TANGATA

Social Media and Mental Wellbeing

How can social media be used to support the mental health and wellbeing of young adults?

Transcript Release Form

I confirm that I have had the opportunity to read and amend the transcript of the interview conducted with me.

I agree that the edited transcript and extracts from this may be used in reports and publications arising from the research.

Signature: _____ Date: _____

Full Name – Printed: _____