



Listening to experts: Mental health and media literacy

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Making Sense
of Media



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Introduction

The effect our online behaviours and experiences have on our mental health and of those we care about is a topic that many of us have considered. As part of Ofcom's duty to promote media literacy we commissioned a rapid exploration to identify the innovative practices, projects and initiatives being trialled by a range of organisations across the UK, bringing together online media literacy and mental health support. The goals were to:

- better understand the intersections between mental health and media literacy;
- learn more about which organisations are involved in this type of work;
- find out more about this work and who benefits from it; and
- share the findings with the media literacy and mental health sectors and consider further opportunities.

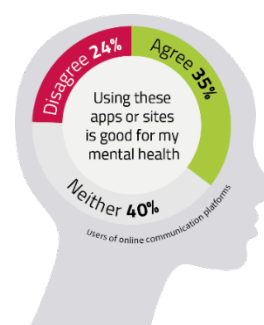
Ofcom defines media literacy as "the ability to use, understand and create media and communications in a variety of contexts". We commissioned this work primarily for Ofcom to better understand how to provide media literacy support that will be effective for people experiencing, or at risk of, mental health challenges. We hope the richness of the information provided through the case studies, and the ideas for action, will also be of interest to delivery organisations, funding and commissioning organisations, policy-makers and others interested in mental health and media literacy.

This document reflects what we heard from service managers, practitioners and service users – many of the words in this report are their words, and it is their lived experience that has provided the basis of the four principles and connected ideas for action. Fundamental to this work is the understanding that we are online, that it's personal and that the quality of anyone's mental health can change at any time.

Context

Research into mental health and media literacy has typically focused on screentime and 'displacement theory', suggesting that time spent online prevents a person from taking part in health-promoting activities such as sleep or exercise. However, Ofcom's media literacy research suggests a more nuanced picture. In the *Adults' Media Use and Attitudes 2023 report*¹, when asked whether using these platforms was good for their mental health, there was no clear consensus from respondents with the largest group of people being unwilling to agree or disagree with the statement:

- 35% agreed
- 24% disagreed
- 40% neither agreed nor disagreed.



The report suggests that people recognise online information and content can have a role in supporting mental health. The majority of people who use the internet had been online to support their wellbeing, and this finding was even more true among younger adults (aged 16 to 24). The most common examples cited in the report are: looking up health symptoms (45%), relaxation (34%)

¹ <https://www.ofcom.org.uk/research-and-data/media-literacy-research/adults/adults-media-use-and-attitudes>

and healthy eating/nutrition (33%). Our qualitative studies, including the recent *A Day in the Life*² research, also illustrate how positive online experiences can improve wellbeing.

In the context of Ofcom's existing video-sharing platform (VSP) duties, and forthcoming online safety duties, we are clear that the platforms have a vital role to play in protecting people, especially children and young people, from content and experiences which may be harmful. Online safety campaigners have drawn attention to the potentially devastating real-world impact of online experiences. While several of the case studies in this report talk about protecting mental wellbeing by disrupting algorithms and 'taking charge' of our online worlds, there is a limit to how much power individuals have to control their online experiences. Media literacy skills form an important part of this picture, which also includes the responsibilities of platforms and Ofcom's regulatory role.

Mental health and media literacy

During our initial scoping, it became clear that media literacy initiatives to support mental health could be seen as a spectrum – from treating people with a diagnosed mental illness to protecting people's wellbeing. Each of the case studies has a different starting point, including violence reduction, bullying, risky or harmful behaviour and loneliness, as well as connectivity, learning, sharing, support and community. In each case, they aim to help people flourish online and use media literacy skills to address a mental health challenge.

The key learning from this project is that good media literacy can and does support good mental health. The World Health Organisation defines mental health as *"a state of mental wellbeing that enables people to cope with the stresses of life, realise their abilities, learn well and work well, and contribute to their community"*. For most people, most of the time, our online life is woven throughout our everyday experiences and provides an important opportunity for connection, support, enjoyment and access to a wider world, all contributing to good mental health. However, it is important to recognise that alongside these benefits, life online has inherent risks, so having the tools and confidence to proactively navigate and manage these risks is critical to managing our mental health and remaining safe and well online.

The case studies featured in this report demonstrate the complex and multifaceted challenge of bringing together the topics of mental health and media literacy. Despite this challenge, the principles we identified in their work are reassuringly simple:

- [Principle 1: We no longer go online – we are online.](#)
- [Principle 2: Online spaces can nourish us and contribute to good mental health.](#)
- [Principle 3: The most helpful approaches are led by the needs of the user.](#)
- [Principle 4: The rapid pace of change means we are all learning as we go.](#)

While we have aligned specific case studies to each of the principles, many relate to more than one principle, and have informed our learning, across all the principles and ideas for action. At times, ideas or issues are repeated across case studies, demonstrating their relevance to a range of target groups and delivery organisations.

This report aims to evolve the conversation about the way online life affects our mental health and we invite those in relevant sectors to help us identify what more can be done. There are lessons for anyone who struggles, or is at risk of struggling, with their mental health and for the people and professionals who support them. That could be all of us.

² <https://www.ofcom.org.uk/research-and-data/media-literacy-research/publications/a-day-in-the-life>

Methodology

An initial desktop exercise was undertaken to identify projects of interest for this work. The team members also reached out directly to members of the Making Sense of Media network, and to the UKCIS Vulnerable Users Working Group, via LinkedIn and Twitter and their own personal networks. The criteria used to identify examples included projects:

- working to integrate mental health and online media literacy;
- across a spectrum of mental health from prevention to treatment;
- based in rural and urban locations across the UK;
- aimed at supporting people from a range of different demographics;
- using a range of different methodologies; and
- which could engage in semi-structured interviews between January and March 2023.

There was a significant response to our initial call-out to projects for expressions of interest. To ensure that we could create a helpful report in the time available, we worked with 14 projects to develop case studies. A further 11 organisations provided us with information about their work, and we have provided a directory at the end of each section for readers to follow up and find out more.

The case studies and references we have included are not an exhaustive list, but rather an illustration of practice, based on those who were able to work with us during our specific timeframe.

Throughout the report we have used excerpts and quotes to draw out the four principles and ideas for action. The full information contained within the case studies is rich, demonstrating a significant amount of work taking place in this area across the UK and beyond.

Process

To produce the case studies, depending on the scale and nature of the project, the exploration activities comprised interviews with:

- the leadership teams, to gather a strategic perspective on the need and support for the project;
- service managers, to gather an operational perspective on how the project is carried out;
- commissioners and funders, to understand how the project or innovation is being provided to meet the needs of specific people; and
- participants or users of services, to understand the process of involvement or impact of the project on the end user.

All the interviews were automatically transcribed. The transcriptions were retained until this report was finalised, and all the interviewees consented to be interviewed. The participating organisations are named in this report, while individual respondents are attributed with permission. No payment was offered for interview.

Principle 1: We no longer go online – we are online

Summary

Being online is a necessary part of life. Many of the case studies in this report acknowledge that disaggregating our online and offline lives can be unhelpful as they are so tightly interwoven. They acknowledge that risks are inherent in every aspect of our lives but that online risks can be better managed by providing the right support and strategies.

Those we listened to acknowledged that online content is not neutral and requires a level of critical engagement to navigate. Several of the projects focus on the agency of their participants, supporting them in developing the skills and resilience to take charge of their online experiences as far as possible, and to seek out content and interactions likely to have a positive effect.

For many, getting the balance right about how much time to spend online versus offline remains a challenge that people seek to manage. Several of the case studies suggested that young people are increasingly aware of the need to spot and manage the blurring of online and offline life.

Many of the case studies explore the benefits of taking time out from our online lives as a useful way to manage the intensity of engagement with certain topics. However, ‘turning it off’ is not always a helpful option; it can remove access to essential aspects of our lives, such as information and connection with those we love and trust, and not being able to access these things can increase stress and anxiety. Where it is beneficial for people to step away from their time online to support their mental health and wellbeing, the case studies indicate that it is important to have interventions and support available to help people develop strategies for managing their time online in a positive way when they inevitably ‘turn it back on’.

Ideas for action

1. Consider the context for every person and every situation.
2. Acknowledge the reality of being online and the implications that this has for mental health support and provision.
3. Talk to people about how their online lives interact with their offline actions, so they are equipped to know what actions will help them to thrive, both on and offline.
4. Understand the benefits of peer-to-peer support.

Examples in practice



Support Hope and Recovery / Resource Online Network – SHaRON

Description	An online social network run by a team of clinicians, providing expert advice and peer support 24/7.
Delivery team	Berkshire Healthcare NHS Foundation Trust
Participants	<ul style="list-style-type: none">• Young people aged 18 and over with eating disorders• Families of young people with or waiting for an assessment for autism• New mums with mental health difficulties• Partners and carers of a new mum with mental health difficulties

The idea for SHaRON was conceived when it became evident that some people using eating disorder services would benefit from a safe space to engage with others who were having similar experiences, in a way that supports their recovery. Although people were able to connect on other mainstream social media platforms, as a high-risk group they lacked the safety of a platform that had the ability to include clinical oversight, support and moderation.

“We recognised that there were some unregulated and unhelpful social media and internet-based avenues that people looking for support with eating disorders could explore, and we wanted to balance that offering with something that had a professional and sound basis of support that could be trusted and relied upon. We also wanted to connect patients to each other in a confidential and safe way.”

Dr Clare Moran – Consultant Clinical Psychologist

The opportunity to connect with people while they wait for care, are in receipt of care, or are at the end of their recovery journey instils hope. SHaRON transforms out-of-hours support by decreasing isolation and providing a safe platform for patients in times of need.

“Really helpful connecting to others with similar problems, and a friendly approachable way of accessing help from healthcare professionals.”

SHaRON user

Once someone is on SHaRON they can remain a member indefinitely. This has proved to be especially useful in eating disorders and other conditions that can be at risk of relapse. The ability to use SHaRON has had a beneficial impact, reducing the need for people to seek support through traditional services.

“SHaRON can provide an important place of peer and clinician support whilst people are waiting for their treatment to start and at the other end, after having lots of intensive support. Reaching the end of treatment can feel like a bit of a cliff edge so SHaRON can provide a really helpful step-down benefit.”

Sara Wise – Senior Clinical Project Manager, SHaRON

“I love it because there are other people who understand how I feel without having to explain myself. I would be totally lost without it now.”

SHaRON user

“We had one patient who put on SHaRON that she was great at adhering to her meal plan Monday – Thursday when she had people around, but as she lived on her own, she found it really hard to stick to the plan on Friday and the weekend when she had no one supporting her. Other patients on the platform said they had lunch at 1 o’clock on a Friday, so why don’t they meet on SHaRON live to have a chat and have lunch together – real peer support in action.”

Dr Clare Moran – Consultant Clinical Psychologist



The Hive

Description	A mental health and wellbeing service for young people in Camden, who can be referred or ‘walk in’ to The Hive.
Delivery team	Catch22
Participants	Young people aged 16-24 in Camden

Using a goal-setting approach, young people can receive one-to-one support via a worker, as well as access other services such as sexual health and employment support. Part of The Hive’s role is to help young people make good choices and avoid risky behaviour. One of the topics that comes up frequently for young people is the issue of social groups and friendships.

“One of the key things that I have established with young people is loneliness, managing social anxiety and friendships. For the young people using The Hive, friendships and social media are completely connected.”

Krystal Donaldson - Centre Manager, The Hive

Working closely with the young people, sessions have been set up to discuss and debate how they can build and develop positive and safe friendships and social groups, both online and offline. This includes a Women’s Group which meets specifically to discuss issues that affect women and girls, including the role social media plays in shaping body image, the desire to seek popularity through ‘likes’ and ‘comments’ and how to manage negative comments or trolls.

“You can’t separate social media from the things we would tend to focus on such as friendships, family and school. Social media and being online is part of everyday life and so to look at these two things in isolation is not helpful.”

Emma Norman - Director of Young People and Families, Catch 22



“If we tell people to turn it [social media] off, they are curious that they might be missing something. Resilience is a hard thing to build. It is something we want to work on with young people.”

Krystal Donaldson – Centre Manager, The Hive

Helping young people to develop strategies to be resilient, and to take positive decisions about how to navigate friendships and social groups online and offline, is a key aspect of the support provided by Catch 22 at The Hive. The ability for people to ‘drop in’ provides an important safety net. The team working there get to know the young people and by maintaining a safe and trusted space, allow young people to seek help and support when they need it.

“Some social media platforms fire different information at you so quickly that you can’t regulate your emotions accordingly, it can make you feel really anxious. But social media can also be a positive way to access wider opportunities and a sense of the bigger world around you. It’s easy to be passive on some platforms, mindlessly scrolling, or just tapping pictures you like without thinking about it too much. I prefer to use social media for direct messaging. Just consume the content that’s relevant to you and what you’re actually interested in. Manage your content so you can filter and take control.”

Young person – Women’s Group attendee, The Hive





Mixy and Chill

Description	The Mixy and Chill Movement aims to breakdown stigma, cultural barriers and discrimination to normalise taboo conversations and change the narrative around mental health.
Delivery team	Taraki
Participants	South Asian men in Birmingham

Taraki is a verb found in Punjabi, Urdu and Hindi that translates as progress, or moving towards an improved or more developed state. Working with Punjabi communities, Taraki focuses on four areas: awareness, education, peer support and research.



Taraki established a collaboration with the Soho Tavern Group of pubs and restaurants, which were interested in playing a part in supporting the mental health and wellbeing of those in the Punjabi community. Together they provide “Mixy and Chill”. A subtle but powerful way to provide easy access to [mental health support and information](#), available in Punjabi and English: a QR code is embedded into every menu. This was developed in response to a number of suicide cases among young South Asian men during the pandemic.

Once someone accesses the QR code they are directed to a landing page which outlines two types of information to support them with their mental health, community resources and emotional wellbeing, including sexual health and alcohol and substance misuse. Taraki can see from its click data that the information and support resources about suicide are some of the most frequently accessed.

“It is important that it is subtle and not instantly about mental health. It's not just talking to the right people but it's talking in a way that communicates with people where they are and within the kind of cultural references and frameworks that they operate in.”

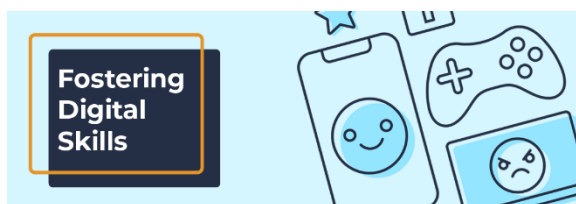
Shuranjeet Singh – CEO and Founder, Taraki

Success here is about bringing together culturally relevant social spaces to provide an accessible way to direct people to wider networks and further information and support for their mental health and wellbeing needs.

“Mental health is made in communities. Taraki is a community-led organisation that has made innovative use of the digital world to connect people and boost mental health in ways that would otherwise not have been possible. Organisations like Taraki are essential to creating better mental health for all.”

Andy Bell – Interim Chief Executive,
the Centre for Mental Health





Fostering Digital Skills

Description	A course designed to equip foster carers with the skills and confidence to guide children and young people in their care through the digital world.
Delivery team	Internet Matters The Fostering Network
Participants	Foster carers

Internet Matters and The Fostering Network recognise digital technologies and the internet as an important source of social connection and identity exploration, both of which are crucial for wellbeing and good mental health for many children and young people, particularly those identified as belonging to LGBTQ+, SEND or care-experienced groups.³

The Fostering Digital Skills course builds on the skills and knowledge that foster carers already have and shows them how to support their child's safety, confidence and competence online. The course was co-created with care experienced young people and foster carers from across the UK. The Fostering Digital Skills training takes a digital resilience-based⁴ approach, supporting foster carers to learn how to support care-experienced children to take informed decisions about how to flourish online. Modules include supporting a child in their online life, building confidence and trust, and understanding the skills young people need to become capable digital citizens.

The screenshot shows a presentation slide for '4.1 Raising Digital Citizen'. It includes a 'Questions' section with three bullet points about digital technology benefits and risks. Below this is a 'Record your answers' box. A video player shows a woman speaking. The 'Digital Resilience Skills' section lists six skills: Health, well-being and lifestyle; Self-image and identity; Online bullying; Copyright and ownership; Managing relationships; and Digital Resilience Skills. Each skill is accompanied by a brief description and an icon.

Due to the particular needs and vulnerabilities of looked-after children, foster carers will have usually received training that takes a risk-based approach to digital access and which often reduces the access a young person has; for example, implementing restricted access settings or taking

³ https://www.internetmatters.org/about-us/vulnerable-children-in-a-digital-world-report/?gclid=CjwKCAiAu5agBhBzEiwAdiR5tHMYfF01OQ9VcyMChDqCj_3DBKeaMsrx8LZDBFkO6qSk8Kwhq5woSRoC5ucQAvD_BwE

⁴ [UKCIS Digital Resilience Framework.pdf](#) (GOV.UK)

devices away overnight. Young people in the focus groups talked about how digital access helps to keep them connected to their friends and family at a time of separation.

“I think the training has not just helped foster carers but also people internally in the organisation to think more about resilience rather than managing risk. For example, a foster carer was worried about a controversial online influencer and how much time a young person in their care was spending watching their video content. Straight away we were able to signpost to content that was about how to have a discussion with the young person. I’m not sure we would have had that awareness before.”

Elizabeth Bryan – Head of Operations, The Fostering Network

Directory

To find out more about the projects explored in this section, as well as other relevant projects, please follow the links below. All projects featured in this report will be added to [Ofcom’s media literacy initiatives library](#).

Organisation	Project
Action Mental Health	Provoking Thought
Aneurin Bevan University Health Board , NHS Wales Digital Communities Wales (DCW) United Welsh housing association	Older adult mental health team lockdown support
Apart of Me	
Berkshire Healthcare NHS Foundation Trust	Support Hope and Recovery / Resource Online Network (SHaRON)
BMHS	Creative writing project
Brook	My Life Programme
Catch22	The Hive
The Day University of Oxford	Brainwaves
Internet Matters Fostering Network	Fostering Digital Skills
Molly Rose Foundation	
People Know How	Reconnect
Power of 0	No Bully System®
Taraki	Mixy and Chill
Thrive London	Good Thinking

Principle 2: Online spaces can nourish us and contribute to good mental health

Summary

Life online can provide access to a world beyond our immediate surroundings. For those dealing with mental health challenges this can be particularly helpful in offering a community of acceptance and support, along with access to help and advice. Poor media literacy and digital inequality can create barriers to being able to access the positive support available online.

A common theme across the case studies was the power and benefit of taking more control of time online, through playing an active role in curating the content seen and the interactions had. This allows people to harness the power of the internet to be a positive force for good by providing access to inspiration, new ideas, networks and opportunities. The case studies also acknowledge the risks associated with finding a community online and the potential for this to generate negative rather than positive influences.

Online mental health services can enhance access to support for people who are managing mental health challenges. They can provide targeted and evidence-based interventions and support that directly address the needs of individuals. This is particularly necessary in the stages of early intervention and prevention, and when face-to-face services are either not available or not desirable. In the case studies, moderators such as clinical staff played an important role in helping to create a safe and supportive environment for people experiencing mental health challenges to connect online, and in seeking to ensure such spaces remain safe. In some examples, they were able to integrate online support with other mental health pathways to provide a holistic model of care, led by what would work best for the person.

Throughout the case studies, digital tools have been used to brilliant effect for signposting, information, advice and prompting reflection, but these do have limitations. Their helpfulness depends on the user's context and how they are feeling at the time. Knowing the limitations of online support and the safety of individuals is critical, while awareness of, and signposting to other offline sources of help in times of crisis is an important feature in many of the case studies.

Ideas for action

1. Embed online opportunities into existing mental health provision, to enhance what is already available.
2. Promote positive influences online, especially to people who are at greater risk of being negatively affected by online content.
3. Create dedicated and tailored online spaces for people to engage freely and safely with their mental health challenges, preserving their ability to maintain privacy and to have a sense of personal agency.
4. Enable access to support in real time, at times when it is better to step away, or in times of crisis.

Examples in practice



WORTH WARRIOR

Worth Warrior

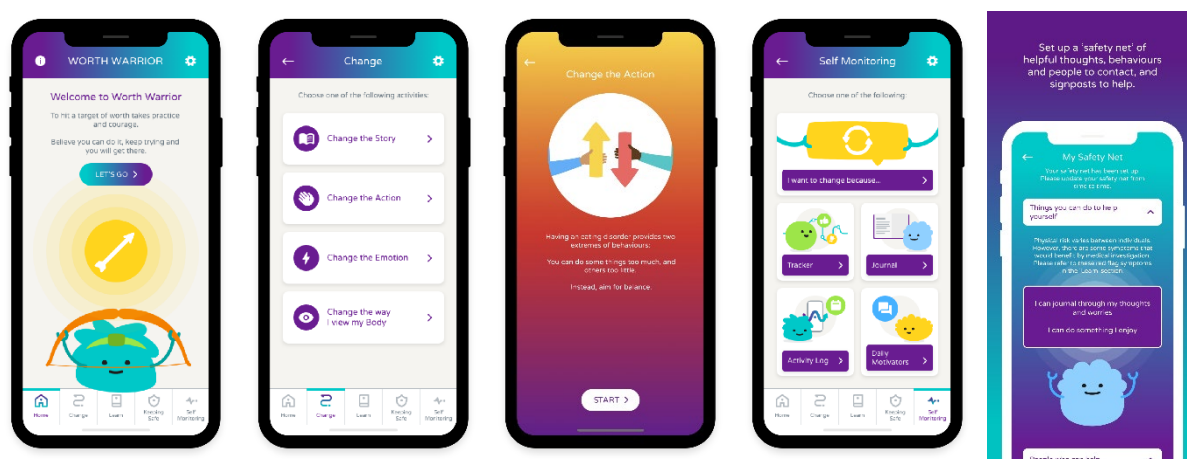
Description	A free app created for young people to manage negative body image, low self-worth, and related early-stage eating difficulties or disorders.
Delivery team	stem4
Participants	Young people with mild to moderate disordered eating

The app is aimed at meeting the needs of young people who may not meet the thresholds for diagnosis or be able to gain access to traditional eating disorder services. The app focuses on an early intervention model that promotes positive self-worth and body image to help young people be more resilient and take steps towards recovery.

Clinical and professional groups provided expert advice on online safety, user risks and strengths, potential barriers, and tone of voice. The app uses pop-ups to help reduce risks and guide people to seek further help if they are experiencing specific physical symptoms. The pop-ups also offer clear guidance on any symptom severity that indicates the need for other interventions, or if particular risk factors, such as previous admissions to inpatient services, warrant more intensive, offline support. Pop-ups also prompt people to seek further support if the app doesn't seem to be helping. Information is then very clear about what the app can and can't do.

"We get it's difficult. We use an archery analogy for this, so the target of self-worth is a little archer with the gold arrow and so they collect little gold arrows as they go, which are positive thoughts about themselves that they can use when things are quite hard, so they have a little affirmation."

Dr Nihara Krause - CEO and Chief Clinical Officer, stem4



Using the model of Cognitive Behavioural Therapy (CBT), adapted for eating disorders (CBT-E), the app asks young people if they want to ‘change the story’, ‘change the action’, ‘change the emotion’ or ‘change the way I feel about my body’ today. With these four options they are then prompted to take an action. After the activity they will then be asked ‘did that help’? Although ‘change the emotion’ tasks are helpful for some users, the team recognise that for others they may be ‘triggering’. They have therefore provided the option for users to hide any activities they might find triggering, so as to personalise the Worth Warrior app for their safety.

The app also has an information and learning section so that young people can find out more and get further support on certain topics. There is a section specifically on social media and eating disorders, exploring how to interact with social media in a positive and useful way, how to notice when it is helpful, and to understand how recommender algorithms might push or suggest certain kinds of content. Helping young people to understand this enables them to make positive decisions.

“The goal is to make a positive difference by ensuring clinical safety at all times and to anticipate and mitigate against any potential risks or unintended consequences.”

Dr Richard Graham – Consultant, Child and Adolescent Psychiatrist and
Clinical Director, stem4

“I just wanted to say that this is a lovely app. I came across a social media post which recommends the app so thought I’d give it a whirl. After battling severe depression for 23 years and a binge eating disorder as well as other destructive behaviours, this app will help me to break the cycles of behaviour easier.”

Worth Warrior app user



Disrupt Your Feed

Description	A study, and resulting campaign, aiming to protect the mental health of girls, providing them with a way of enjoying social media and turning it from potential toxicity into a force for good.
Delivery team	The Female Lead
Participants	Girls aged 13-17 using social media

Disrupt Your Feed was designed to: explore how teenage girls can learn to resist the negative pull of social media and use it as a force for good, show how parents and teachers can promote healthy social media use, and provide evidence for regulatory control and government policy to offer social media platforms ways to improve safe and healthy user engagement.

The original research, carried out in 2019, involved large-scale data analysis of hundreds of thousands of social media accounts, alongside a year-long qualitative study with 28 girls aged 13 to

17 in five diverse schools across the UK. The 2019 results⁵ were striking, and Cambridge psychologist [Dr Terri Apter](#) concluded that there is a direct (causal) relationship between who you follow and your self-belief.

“That’s why we came up with the name Disrupt Your Feed, because literally it caused this disruption, the diet that they were being fed through the algorithm was suddenly measurably different and it made them evaluate things like, actually what doesn’t make me feel good? What do I not enjoy seeing? It gave these young people a sense of agency.”

Veryan Dexter – Research Lead, The Female Lead

In 2022-23 the team reunited to re-run the study⁶ with a new group of teenage girls and to reconnect with the original group to find out whether the positive impact of Disrupt Your Feed (2018/19) had been lasting or short-lived.

The participants from the original study described a lasting impact on their relationship with social media. Three specific outcomes had continued long after the intervention ceased. They had become more aware of how social media was affecting their mood, and as a result were more careful users. Their career goals had become aspirational and they were using social media less overall.

“I actually feel from a personal perspective that being part of Disrupt Your Feed did subconsciously help inspire me to pursue a career in engineering and ... to reconsider my goals... It was really, really helpful and it’s helped me become a very balanced social media user now.”

Study participant 2019, reflecting in 2023

There were some striking and significant differences between participants in the 2019 and the 2023 studies. In 2019, a major theme was the feeling of not measuring up to the idealised body images presented on social media. In 2023 the participants were more aware of image manipulation and the fact that what was presented did not reflect reality.

“I’ll try and make a conscious effort to unlike whatever comes up that’s not good [on my feed]. I feel like it will be better to like things that are interesting and kind of informative, educational. Something that will make you feel positive, depending on your interests.”

Study participant, 2023



Although the 2023 participants understood better how social media works, they also talked about struggling to control the amount of time that they spent on it, and their exposure to negative or distressing content, which contributed to them feeling overwhelmed and over-stimulated.

“The power of social media is extremely strong. And so, if you do one small mistake, or if you see one thing, which can be interpreted that way, people can ruin your life.”

Study participant, 2023

⁵ https://www.thefemalelead.com/files/ugd/05606b_f82a45849ca2436a863686a67de7a96c.pdf

⁶ https://www.thefemalelead.com/files/ugd/05606b_fea474c9456f4a79b280a330c6fd7294.pdf

The Disrupt Your Feed campaign accepts that girls will continue to consume popular content but encourages them to mix it with valuable content about real women whom they admire, to inspire higher career aspirations and more positive outcomes. But they also acknowledge that social media can be a negative force, and its users need to learn how to navigate it safely and manage it positively.

“Seeing people who almost have the perfect body on social media just felt very upsetting... I just felt like I couldn’t live up to that. By kind of disrupting my feed and being more aware of my social media use and filtering out content that upset me, I was able to almost take control and reclaim my body image as my own

Nida, 2019 study participant, reflecting in 2023

"The toxic impact of social media amongst teens is greater than ever, but when they connect with positive role models’ we’ve proven that their mental health improves, they feel better about themselves and are setting higher personal and career goals. The Disrupt Your Feed study highlights the need for better social media literacy amongst young people and wider societal understanding of how to manage social media as part of your daily life.”

Edwina Dunn – Founder and Chief Executive, The Female Lead



Description	Personalised mental health services provided online, commissioned by the NHS, local authorities, Public Health England, policymakers, charities and businesses.
Delivery team	Kooth
Participants	Four main services: for children and young people, students, adults and employees.

Digital mental health services provide an important alternative in addition to traditional mental health services. Available in a flexible way to meet people’s needs, including outside regular hours, the services provided by Kooth go beyond supporting mild and moderate mental wellbeing by providing safe digital services staffed by professionals.

Kooth is anonymous and aims to remove the barriers, including stigma, associated with accessing mental health services. The services are designed to be person-centred and to respond to a range of mental health needs.

“I’ve felt able to explore my true identity and understand who I really am.”

Kooth user

Using a range of digital mental health interventions, including cognitive behavioural therapy (CBT) based applications, mindfulness, self-help, peer support and online counselling, the service provides interventions that increase access to early intervention and support.

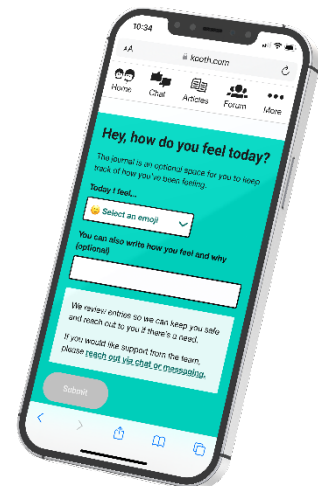
There are four ways in which people can engage with Kooth:

1. Proactive community: users actively involved in reading, creating and commenting on the Kooth magazine, participating in self-help activities such as keeping a diary or peer-to-peer conversations.
2. Responsive support: users receiving immediate interventions for brief intermittent therapeutic support.
3. Structured counselling: users actively working through therapeutic interventions with a Kooth practitioner.
4. Ongoing therapeutic support: users who choose to use Kooth's service instead of traditional mental health services.

Kooth users have access to peer- and professionally-created content, alongside access to experienced practitioners. The digital approach means there are no thresholds for support and no waiting lists. All content is moderated to ensure users' safety and there is a process to ensure that any content uploaded to the platform is age-rated appropriately to provide a bespoke, safe, and appropriate user experience depending on age.

"I feel respected and heard. I can let out my biggest worries without being judged or shut down."

Kooth user



As Kooth requires no referral and is anonymous, those using the services often present with complex needs. This requires comprehensive risk assessment and management as well as ongoing structured support. The Kooth community provides a safe environment for those who want immediate access to peer-to-peer and professional support.

"There's a huge emphasis at Kooth on keeping people safe."

Brian Rock – Clinical Director, Kooth

Moderation is an essential aspect of safeguarding for those using the site. All content posted, whether in open forums or in one-to-one chat, is moderated. If the moderation team identifies information that provides a cause for concern around an individual's safety, they will reach out to the person directly via the platform and signpost them to other services. In circumstances where there is a significant safeguarding concern, the Kooth team may ask the individual to provide personal information, should that be deemed helpful in providing effective support.

"This means there is no room for any kind of hate speech or discrimination or bullying. That's something we feel really very strongly about."

Yasin Hassan - User Marketing Lead, Kooth

"The ability to be anonymous on Kooth is really important and presents both an opportunity and a challenge. But I think ultimately, it means we probably support a lot of people who wouldn't otherwise be accessing mental health support."

Hannah Wilson - Consultant Clinical Psychologist, Kooth

Last year the team at Kooth worked with two community groups, [Blkout UK](#) and [Cultures CIC](#), employing user-centred design to ensure the service meets the needs of specific communities.

“We very much want to ensure that the content that we have on the site really does speak to an individuals’ experience and help them with their particular struggles and with a positive outcome for their own mental health journey.”

Brian Rock – Clinical Director, Kooth



Directory

To find out more about the projects explored in this section, as well as other relevant projects, please follow the links below. All projects featured in this report will be added to [Ofcom’s media literacy initiatives library](#).

Organisation	Project
Cross Gates and District Good Neighbours’ Scheme CIO	The Skills Toolkit
The Female Lead	Disrupt Your Feed
Get Set Up	
Kooth	
Scottish Children’s Parliament	Mind Yer Time
stem4	Worth Warrior
Togetherall	
Young Scot	Aye Feel
ySKILLS	Internet use, digital skills and mental health: deliberative workshops with young people

Principle 3: The most helpful approaches are led by the needs of the user

Summary

Lived experience is a powerful starting point. Several of the case studies are a direct response to a personal experience, and stem from an individual desire to address a specific need and to connect with and support people who have had similar experiences. The role of peer moderators is significant; this approach not only enables people to provide support to others based on shared experiences, but also enables the moderators themselves to engage in a journey of personal growth and development. The case studies were clear that the level of trust and responsibility afforded to peer supporters can be transformative for their own recovery or wellbeing.

All the case studies work closely with people who have lived experience, using co-design or co-production processes to ensure they are led by the user, and that the initiative is relevant and tailored to their needs. There are a significant number of strong messages about the importance of this approach, to ensure that any intervention genuinely meets the needs of those it is aiming to serve.

Ongoing feedback from users is also a key feature of measuring impact across the case studies, and in determining whether there has been a positive and useful impact on people's ability to manage their mental health and wellbeing online.

People are not defined by their mental health, or by specific mental health conditions. We are all complex individuals living complex lives, with many factors contributing to who we are and how we feel on any given day. We may belong to a particular community or life stage which means we are at greater risk of experiencing poor mental health. It is important to recognise the intersectionality of people experiencing mental health challenges and to acknowledge that mental illness is not a static state and fluctuates throughout our lives.

The social determinants of mental health⁷ are relevant across every aspect of our lives, including how we live online. In any attempt to provide tailored help and support to enable people experiencing, or at risk of, mental health challenges to thrive online, it is important that we avoid labelling or 'othering' people. Health⁸ and digital inequalities⁹ are compounding factors; a number of the case studies address these issues directly.

Ideas for action

1. Treat experience as expertise. Listen, hear and empower people to become leaders and champions of their own mental health, and empower people to be the author of their own journey wherever possible.
2. Provide media literacy resources and support in response to challenges identified by the people experiencing them.
3. Develop tools for self-care, approaches for risk reduction, access to knowledge, and strategies for resilience with the people most likely to use them, to help combat any negative consequences of life online.

⁷ Mental Health Foundation <https://www.mentalhealth.org.uk/explore-mental-health/mental-health-statistics/social-determinants-statistics>

⁸ Health Equity in England: The Marmot Review 10 Years On <https://www.health.org.uk/publications/reports/the-marmot-review-10-years-on>

⁹ [Building a Digital Nation - Good Things Foundation](#)

Examples in practice



Samaritans' guidance for practitioners

Description	An e-learning module and guidance for practitioners to support people to have safe and positive online experiences around suicide and self-harm
Delivery team	Samaritans
Participants	Developed alongside health and care practitioners (including Tees, Esk and Wear Valleys NHS Foundation Trust) and people with lived experience.

Working with those with lived experience and practitioners, Samaritans explored how to provide the right support for people to reflect on their online activity around suicide ideation and self-harm.

“Despite having been mentally ill for the last 15 years and being under mental health services for a large proportion of that time. I’ve actually never been asked about my internet or social media use by any professionals or practitioners. I think it would have been really helpful to have been asked.”

Lucy – hear more by watching a short video as part of the guidance

People are not always in complete control of what they see online. Online communities shift and change as people join and leave. Almost everyone will encounter things they did not actively look for, sometimes including unwanted unexpectedly graphic content. They may start finding this harder to avoid. The same algorithms may also cause people to come across more positive content, including signposting to support.

“You might think it is a negative thing but sometimes you can get good support from recovery communities... You just need to make sure you follow people who are positive influences and good for you.”

Person with lived experience of support online



Samaritans' research recognised the essential role of the internet in our lives, and this informed the guidance, which was designed to support positive conversations and help people stay safe online.

Co-creation was a key feature; the guidance was shaped by significant engagement with those who had relevant lived experience¹⁰.

“Appreciate the role of internet in a person’s life will be different – might depend on their experiences.”

Lived experience co-design participant

“It is a day-to-day tool for a lot of people and the sole means of communicating with people.”

Lived experience co-design participant

The Tees, Esk and Wear Valleys NHS Foundation Trust was among the services, clinicians and academics helping shape the guidance. A social media and suicide steering group provided strategic input; workshops discussed concerns about internet use, suicide and self-harm; usability testing explored how practitioners learn and how best to deliver guidance and content, and was peer reviewed.

“Online activity is not going away, it is part of everyday life. That’s the reason we got involved in this project. Things are changing so fast. Especially with younger people accessing information in completely different ways to the adult practitioners working with them. Removing phones and access to online is not usually the answer. It puts up barriers to communication. It’s important that our staff are educated to benefit the people that use our services at the end of the day. To harness the good that the internet has to offer and control the bad.”

Joanne Cook – Senior Project Manager Preventing Suicide,
Tees, Esk and Wear Valleys NHS Foundation Trust

The guidance provides information, training and resources to support open conversations about how their online activity makes people feel.

“It is a move away from just teaching people about the internet to teaching people how to talk to people about their online experiences.”

Francesca Edmans – Digital Products Manager, Samaritans

¹⁰ Key themes included:

- Be open and non-judgemental. Don’t assume the internet is bad, recognise that it can be a positive source of support.
- Respect individuals’ choices for using the internet, be curious about why they might want to use it and how it is affecting them.
- Understand different attitudes to mental health, in particular in those individuals who are neurodiverse, and people from different cultures.
- Adapt support and advice based on the person and how they feel about what they see online.
- Avoid telling people off for using the internet, or encouraging them to go offline, or removing access.
- Remove shame; validate a person’s experience by asking open questions and listening first.
- Acknowledge that it’s fine for practitioners not to know everything, but important that they are willing to learn.

The guidance is clear that not all online activity around suicide and self-harm is harmful and that stories of recovery can be an important source of support. But it also acknowledges that there are times when a practitioner may need to respond to worrying online activity that they have seen¹¹, e.g. content that suggests someone online is in immediate danger or that puts other people at significant risk. This usually includes information about methods of harm, direct encouragement for people to harm themselves, or content leading to copycat behaviour. A separate section supports practitioners on what to do in these situations.



Wellkit

Description	A prototype, game-style app, built on the principles of Cognitive Behavioural Therapy (CBT)
Delivery team	Passion4Fusion in partnership with Youthlink Scotland
Participants	Young people from Black and ethnic minority communities

Using funding from Comic Relief, the app was made by young people from Black and ethnic minority communities to help improve wellbeing for people like them.

“By us, for us, with us.”

Young person involved in the Wellkit project

Passion4Fusion is a Black and ethnic minority organisation in Scotland. It was established in 2014 as an informal community initiative by a group of multi-cultural volunteers who were motivated to create a support structure to meet the needs of Black and Asian communities, particularly young people and women, in Edinburgh and the Lothians. Mental health is an important part of the work of Passion4Fusion, made even more so by the pandemic.

“There has been a huge demand in our community. I don’t think that before [the pandemic] we recognised it as much or we realised how much our community was being affected. Professionals don’t always offer culturally appropriate support, and this increases health inequalities.”

Helene Rodger – Passion4Fusion

The idea for a project to develop an app to support mental health came about from an earlier piece of work that brought adults and young people together to use storytelling as a way of helping young people understand their emotions, especially during lockdown. The team started working with

¹¹ <https://www.samaritans.org/about-samaritans/research-policy/internet-suicide/internet-safety-practitioners/understanding-online-activity/risks-benefits/>

YouthLink Scotland and the young people to explore how to create digital resources for mental health, developed for young Black people by young Black people.

A key point made by those involved was that they didn't feel culturally represented in many of the other resources that were available, or in the narratives that surround mental health.

'Wellkit' is a prototype, game-style app, built on the principles of Cognitive Behavioural Therapy (CBT). It brings culturally appropriate early intervention positive mental health approaches to a community that needs them. It seeks to build social and emotional literacy through a game, and encourages young people to be creative, reflective and mindful.

It asks how you are today and to pick an emoji or a word to describe how you are feeling. This leads to a page of video gifs and prompt words that you can select to help go a bit deeper and to understand your emotions better to avoid or resolve conflicts and move past difficult feelings. The app encourages you to pinpoint your emotions to help manage them in a healthy way. The next stage is a prompt to write about how you're feeling, to improve your mood and to earn some points.

It was important to the Wellkit project that young people from Black and minority ethnic communities were felt valued, seen, heard and represented throughout.

"Changing the world we see, changing the way the world sees us."

Young person involved in the Wellkit project



Promoting Digital Resilience and Wellbeing for LGBTQ+ young people aged 14+ in Newport

Description	Workshops and mentoring for LGBTQ+ young people to produce online resources and a webinar aimed at their peers, parents and teachers.
Delivery team	WISE KIDS
Participants	Young people aged 14 years and over who are members of their school's LGBTQ+ group in Newport

LGBTQ+ people are more likely to have difficult experiences online; for example, navigating their privacy, or seeing homophobic or transphobic content and messages.

Working with two schools in Newport, WISE KIDS began the project with open talks for the schools' LGBTQ+ groups – where young people aged 14 years and over were invited to participate in the project. This was followed by focus group sessions to listen to and understand the online experiences of this group, both positive and negative, and what support they wanted. This was a key part of the project.

"Making no assumptions and starting with listening is really important."

Dr Sangeet Bhullar – Executive Director, WISE KIDS

Next, the young people participated in face-to-face digital literacy and critical thinking workshops. These were followed by a series of mindfulness-based sessions (both online and face-to-face) as well as online mentoring sessions. The mentoring sessions had two aims: firstly, to support a group of these young people to produce online resources for their non-queer peers (aimed at developing knowledge and improving the experiences of LGBTQ+ young people). Secondly, to help them prepare presentations and take part in a Q and A panel session at an online webinar hosted for parents and professionals. These activities aimed to build knowledge, confidence, digital resilience and wellbeing, based on the philosophy that we need to address both human and digital competencies:

“We’re humans first. We need to put our ability to deal with difficult emotions and experiences first. Often, we focus on the technology, not on the fact that we’re humans dealing with experiences mediated by technology.”

Dr Sangeet Bhullar – Executive Director, WISE KIDS

The project also sought to help young people develop a sense of agency and leadership. Reflecting on the project, the young people expressed many positives:

“It has boosted my confidence and also helped me meet other people going through similar situations and share similar experiences as me.”

“It has let us combine our efforts and let us educate other students, teachers, parents etc. who want to understand more on the LGBTQ+ community and how to support them.”

“We created and developed our ideas, allowing us to work together to create outcomes we're all happy with... but also allowed us to relax and take time to think and share ideas together especially during times of stress in school and likewise activities.”

Young people involved in the project



The resources that the young people have created will be shared online through WISE KIDS and the schools’ websites and social media channels. The project is so responsive to the needs of the young people that it is probably not possible to deliver on a large scale. However, it would be replicable with young people in different marginalised groups. Feedback from the schools has been very positive, with teachers reassured that the young people participating felt safe throughout.



Care Opinion

Description	An online feedback service for health and care services, including mental health.
Delivery team	Care Opinion
Participants	People with experience of health and social care services

Care Opinion is an online platform providing the opportunity for the users of public health and social care to provide feedback on their experience as a means of improving the services. Overall, there are now almost 550,000 stories, viewed over 100 million times. To date, at least 15,000 people have shared stories about mental health care, have seen their stories responded to and in some cases have made a difference to service provision. This is in response to the challenges people have previously faced when raising concerns, especially in relation to mental health services, where those who wish to raise concerns may find themselves ignored, marginalised or even pathologised¹².

“Posting on Care Opinion has helped me to develop my voice. I want to do something to make a difference. I want to be part of the solution, not simply part of the problem.”

[Read the full blog here](#)

“Anonymity makes feedback a less scary and risky thing to do. I can’t help worrying about life’s “what ifs?” ... what if they take my services away if I speak out? If they’re horrible to me afterwards? If they see my anger as poor mental health, rather than being quite frankly fed up with your service?

“Posting here takes feedback out of the helping relationship and stops it from being seen as biting the hand reaching out to us. Care Opinion is a step removed. We share with you, the providers, instead. No one takes it personally or feels misunderstood.”

[Read the full blog here](#)

¹² Using patient experience data to support improvements in inpatient mental health care: the EURIPIDES multimethod study. <https://doi.org/10.3310/hsdr08210>

Directory

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Organisation	Project
Barnado's NI	<i>PATHS® Programme</i>
Care Opinion	
Glitch	
ParentZone	Ollee
Passion4Fusion Youthlink Scotland	Wellkit
Samaritans	Guidance for health and care practitioners
See Me Scotland	Feels FM
Who Cares? Scotland	Digital wellbeing resources
WISE KIDS	Promoting Digital Resilience and Wellbeing for LGBTQ+ young people aged 14+ in Newport

Principle 4: The rapid pace of change means we are all learning as we go

Summary

The pace at which technology and our lives online are developing is rapid. As we grapple to understand the latest application, social media platform, game, machine learning innovation or AI, it can feel like we are constantly playing catch-up. A number of the case studies, across all age groups, illustrated examples of how this can leave us feeling that just as we get to grips with one new thing, the next thing is already on us. The pace of change means the evidence base is somewhat behind the curve, and as we consider the impact of our online life, a sense of being ‘in the dark’, can feel especially risky in the context of protecting our mental health online.

The pace of change isn’t just about the technology, it is also about changing social norms. Different demographic groups become used to specific ways of communicating online, and this in turn defines a set of evolving social rules and language that vary from one group to another. Without being acknowledged, this can leave us feeling afraid of being out of the loop and fearful of what we don’t know.

From the case studies, we can see that differences in formative online experiences can lead to a significant disparity between the online experiences of different age groups. This in turn has an impact on the validity of the messenger of any guidance, and the providers of advice and support. It is clear from many of the case studies that the more relatable the messenger, the more likely the recipient is to engage. Peer-to-peer approaches appear to be particularly helpful.

The case studies also acknowledged the vital role of people who are in a position to help. As well as peers, this included health and care professionals, parents and teachers. The focus for these helpers was on encouraging open conversations about online behaviours and building confidence in the knowledge and skills they have which are relevant to media literacy.

With technology developing so quickly, many of the case studies focus on helping people to talk about the impact of online life on mental health and wellbeing rather than focusing on how the technology works or how to use a particular app, platform or game.

The case studies aim to harness the online space as a positive force for good. There is of course wide acknowledgement that there are risks as well as benefits to life online. Increasingly, people understand that what they see online might be augmented or driven by an algorithm, and younger people in particular are becoming increasingly aware of this. Many of the case studies aim to provide tools and strategies to help people proactively manage their time online and deal with negative or distressing content.

Ideas for action

1. Upskill peers and professionals to create opportunities to openly engage in discussion about life online and the impact this might have on our mental health and wellbeing.
2. Deliver support in a relevant and relatable way, through multiple channels, to ensure people get the support they need, delivered in a way that works for them.
3. Empower people to develop their own agency to use personal tools and strategies, interventions and support to manage their time online.
4. Broaden research to further explore the connection between media literacy and mental health.

Examples in practice



Greater Manchester Social Switch

Description	A social media education programme which empowers young people to educate younger peers as well as parents, teachers and other trusted adults to better support children and young people.
Delivery team	Greater Manchester Social Switch Funded by Greater Manchester Violence Reduction Unit (GM VRU)
Participants	Young people through their schools in Greater Manchester

Greater Manchester Social Switch is a project created by the Greater Manchester Violence Reduction Unit (GM VRU). With social media now an inevitable part of growing up for nearly all children, and building on the success of the London Social Switch, the project aims to build the digital resilience and literacy of young people, and the trusted adults around them, in order to reduce the chances of online risks becoming online/offline violence-related harms.

Against the tide of social media, we aren't going to stop it, there's no way we can turn that switch off now. We've opened it up. It's happening. Social media is an ever present in the lives of our children."

Damian Dallimore – Assistant Director, Police, Crime Fire and Criminal Justice
and Director of the Violence Reduction Unit and Commissioner of Greater
Manchester Social Switch

Social Switch acknowledges that being online is a really important part of life for young people. During the formative years of early secondary school life, they are establishing a stronger sense of identity and image in every aspect of their lives, including online.

"We realised we don't need to tell young people to be safe online, they're getting that drilled into them from a young age already. We saw it was more impactful to help young people consider how they wanted to 'be' online. Acknowledging that the internet is brilliant, it's an amazing tool, it provides so many opportunities that we didn't have growing up. So, we wanted to help young people maximise the opportunities they have online whilst keeping them happy and thriving."

Zoe Appleton – Project Lead, Greater Manchester Social Switch

With a focus on the important transition period as young people start secondary school, the Social Switch approach involves empowering Year 10 students to mentor and guide Year 7s. It acknowledges the blurring of online and offline worlds, so goes beyond e-safety to cover how identities, relationships, risks and opportunities spill across online and offline worlds.

The programme promotes positive use and supporting young people in navigating pitfalls, recognising that they can't do it alone.

"One of the other great pieces of learning from the research was that young people really listen to their older peers. We also saw how parents are really struggling, particularly with their knowledge and confidence and perhaps there is a bit of a dislocation between how parents and youth practitioners perceive it compared to young people. So, the way they use social media is often how they assume other people use it. But actually, if you're comparing 11-year-olds to 13-year-olds, to 17-year-olds, they are all using social media in very different ways."

Henry Stratford – Project Lead, Greater Manchester Social Switch

One of the first tasks for schools is to select their Year 10 champions. These are often students who have had experience in navigating social media challenges and so can be a positive role model at school and online.

"I noticed how much Year 7s and Year 10s opened up through mutual respect and trust. Being relatable is really important"

Julia Sweeney – Teacher, Irlam and Cadishead Academy

Each week the programme focuses on a different topic, covering issues such as identity, conflict and hate speech, relationships and sexting, online friends, disinformation and misinformation, digital footprint and data, and sharing images.



Social Switch works with schools to improve the media literacy of adults and parents working with young people, develop Year 10 digital leaders, improve the digital resilience of Year 7s, and adopt social media guidelines. The goal is for there to be fewer incidents in schools with an online element, and improved conversations between parents and young people about social media.

"I learned that there is(sic) a lot of underage children online and on apps that they shouldn't be on – like having three accounts on Insta."

"I learned I am already out of the loop at my age... it's changing so quickly."

"I learned about the positives of social media... I was against it as a whole, all I saw was this negative content, but I learned that it can be used for positive."

Year 10 Champions



Self Esteem Team

Description	Wellbeing classes to help young people navigate their minds.
Delivery team	Self Esteem Team
Participants	Young people through their schools UK-wide

Self Esteem Team started nearly ten years ago. Having struggled with her own challenges, the founder and CEO was inspired to put together a workshop focused on mental health and self-esteem to take into schools. In direct response to need, one of those talks now has a particular focus on social media and online gaming and addictive behaviours.

Self Esteem Team's unique quality is the ability for the speakers to draw from their first-hand, lived experience and to relate to the people they are speaking to.

“Bringing first-hand experiences into the room really resonates with the young people. It means they can open up and have a different kind of conversation about these things that are very personal and can be hard to discuss with teachers or even parents.”

Melanie Sutton – Teacher, Hasmonian High School for Girls

In response to demand, and working closely with a clinical psychologist, the Self Esteem Team created a specific talk that explored addiction, originally to go alongside a talk on drugs and alcohol. As content for this session was being created, they realised that it also applied in other situations where it was helpful to think about and notice addictive behaviours. In particular, the ways in which young people use social media and gaming have become an important aspect of the talk. The session is led by one of the Self Esteem speakers who developed the content, drawing directly from his own experiences as someone who became addicted to gaming and drugs. He presents his own story as well as information on addiction. The team draw on real-life examples to deliver relatable content that helps young people think about their own use of gaming platforms and social media.



“I use social media as part of the talk on addiction because it is helpful to explain the hook model. This is based on having a trigger, an action, a reward and a response. I use the notifications received from social media platforms as an example of the trigger. They hear the ping, and then go and open the app because there is something there for them to look at, then there's some sort of an action, like you see someone has liked your photo, you respond, which leads to a reward, like a boost to your self-esteem. This creates a hit of dopamine and the hook starts over again.”

Alex Stuart – Self Esteem Team

The Self Esteem team works hard to create a safe space for young people to consider the impact that social media and gaming can have on their mental health. This is often done by showing young people that mental health is a universal human condition that we all need to be aware of and look after.

“There would be no need for the Self Esteem Team in an ideal world because everyone would navigate social media and their friendship groups without feeling ashamed or lonely or any of the other emotions that young people struggle with, but the reality is we are needed more than ever.”

Nadia Mendoza – CEO and Founder, Self Esteem Team



Boys' Biggest Conversation

Description	A campaign to encourage young men across the UK to talk about body image and the effect it has on their mental wellbeing.
Delivery team	Media Smart First News
Participants	7-14-year-old boys, their teachers and their parents

Body image is an issue that affects girls and boys of all ages and can be hard to talk about while surrounded by images of perfect bodies that for the most part are unattainable.

“With the blurring of boundaries between online and mainstream media, and the rise of influencer culture, shows like Love Island get extensive coverage across both and portray an image of bodies that for most people are completely unattainable.”

Nicky Cox – Editor in Chief, First News

“We wanted to create something which would look at boys’ body image as well as encouraging them to talk about their feelings, and signpost where to go for support.”

Rachel Barber-Mack – Director, Media Smart

The Boys’ Biggest Conversation included a short documentary-style film to highlight how the male body is represented in the media and to improve body confidence and mental health. The film includes open and honest feedback from boys in schools and young men about their body image, including a body builder and an ex-footballer describing their own insecurities about the way they look. With the help of TV doctor and youth specialist Dr Ranj, the film demonstrates the extent to which male bodies can be mis-represented in advertising and in the media.

The aim was to create a helpful film that would be interesting and relatable to boys, but also a useful tool for parents and teachers to watch and share. As part of the film, Dr Ranj goes through the process of seeing images of his body being digitally enhanced to create a version of his body that is very different from the reality. The final version, however, is very familiar as a 'perfect' body image that is seen in advertising and across the media.

To go alongside the campaign, Media Smart developed a set of [education resources](#) that provide teaching tools, including lesson plans for primary and secondary school teachers, case studies, and parents' and guardians' guides on body image and advertising. Crucially, these are aimed at all genders, as body image and advertising is an issue that is relevant to everyone.



The pandemic saw a significant increase in downloads of the film and materials as young people spent more time online and levels of anxiety increased. Signposting to further help and support was an important aspect of the campaign, so the team worked with [NSPCC](#) and [Childline](#) to make sure information about how to contact them was included in all the promotional material and resources.

Directory

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Organisation	Project
BBC	Own It
Centre for Countering Digital Hate	Parents' guide
Greater Manchester Violence Reduction Unit	The Social Switch Project in Greater Manchester
Headstart Kernow	Digital resilience tool
Media Smart First News	The Boys' Biggest Conversation
Partnership for Young London	Digital Health Ambassadors
Self Esteem Team	Mental health workshops
Somerset Film	Zero Likes
YGAM	Young People's Gambling Harm Prevention Programme

Acknowledgement and thanks

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Identifying the organisations delivering this important work was a group effort and we appreciate the contribution of the UKCIS Vulnerable Users' Working Group, and the Making Sense of Media panel members in helping us find the projects.

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