

**The Digital Frontier: Assessing the Impact of Social Media on Mental Health Nursing
Practice**

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The advent of the digital age has fundamentally restructured the ways in which individuals communicate, seek information, and form social connections. Central to this transformation is social media, a collective of online platforms that facilitate the creation and sharing of content. For mental health nursing, this shift represents a paradigm change that affects both service users and practitioners. As mental health nurses (MHNs) work at the intersection of biological, psychological, and social care, they are increasingly required to navigate the complex influence of the digital environment on patient well-being. This essay explores the impact of social media on mental health nursing, examining the risks of digital pathology, the opportunities for therapeutic engagement, and the professional challenges regarding boundaries and e-professionalism within a UK context.

The negative impact of social media on mental health is a primary concern in contemporary clinical practice. Research consistently indicates a correlation between high levels of social media consumption and increased rates of depression, anxiety, and body dysmorphia (Karim et al., 2020). For the MHN, this necessitates a shift in assessment techniques. Patients often present with symptoms exacerbated by 'social comparison'—the tendency to measure one's life against the curated, often unrealistic highlights of others. In the UK, the prevalence of 'FOMO' (Fear of Missing Out) has been linked to sleep disturbances and lowered self-esteem among adolescents, a demographic frequently seen in Child and Adolescent Mental Health Services (CAMHS). Consequently, nurses must now incorporate 'digital history taking' into their initial assessments, identifying whether a patient's distress is rooted in or intensified by online interactions.

Beyond general distress, social media platforms have been criticised for the proliferation of content that glamorises self-harm and disordered eating. Berry et al. (2018) highlight that while some online communities offer support, others can act as 'echo chambers' where

maladaptive behaviours are reinforced. For a mental health nurse, this complicates the risk management process. The digital world is omnipresent; even when a patient is in an inpatient setting, their smartphone provides a portal back to the very environments that may have contributed to their crisis. This 'borderless' nature of social media challenges traditional nursing interventions that rely on environmental control and safety. MHNs must balance the patient's right to autonomy and communication with the clinical need to protect them from harmful digital content.

However, it would be reductive to view social media solely through a lens of pathology. It also offers significant opportunities for health promotion and the reduction of stigma. Social media can provide a voice to marginalised groups who may feel isolated by traditional healthcare systems. For individuals experiencing psychosis or severe social anxiety, online forums can offer a 'low-stakes' environment to practice social skills and find peer support (Naslund et al., 2020). Mental health nursing has begun to harness these platforms for 'tele-nursing' and public health messaging. By engaging in digital spaces, nurses can disseminate evidence-based information, counteracting the 'misinfodemic' of unregulated health advice. The use of social media as a tool for psychoeducation allows nurses to reach service users who might otherwise avoid clinical settings due to the perceived stigma of mental illness.

The integration of digital life into clinical practice also brings forth significant ethical and professional challenges. The Nursing and Midwifery Council (NMC, 2018) provides clear guidance on the professional standards of behaviour expected of nurses, including their conduct online. 'E-professionalism' is now a critical component of nursing education. MHNs must maintain a clear distinction between their personal and professional identities. The risk of 'dual relationships'—where a patient attempts to follow or friend a nurse on social media—is a frequent dilemma. Such interactions can compromise the therapeutic alliance, leading to blurred boundaries and potential breaches of confidentiality. The UK nursing framework insists that the therapeutic relationship must be built on trust and professional distance, qualities that are easily eroded in the informal atmosphere of social networking.

Furthermore, the 'permanent' nature of digital footprints means that a nurse's past online activity can impact their current professional standing. This has led to the concept of 'digital vetting', where employers or service users may search for a practitioner's online presence. For the mental health nurse, whose work is deeply rooted in interpersonal dynamics, any perceived unprofessionalism online can diminish the patient's confidence in the care provided. Therefore, the impact of social media extends beyond the patient; it influences the very identity and public perception of the nursing profession.

The role of the MHN is also evolving towards that of a 'digital navigator.' This involves helping patients develop digital resilience—the ability to manage the negative aspects of the internet while benefiting from its connections. Rather than simply advising patients to 'stay off' social media, which is often unrealistic in a hyper-connected society, nurses are increasingly adopting 'harm reduction' models. This includes teaching patients how to curate their feeds, use privacy settings, and recognise the emotional triggers associated with certain platforms. This proactive approach acknowledges that social media is a permanent fixture of modern life and that mental health care must adapt to this reality rather than resist it.

In conclusion, the impact of social media on mental health nursing is multifaceted, presenting both significant risks and transformative opportunities. While it can contribute to the development and exacerbation of mental health disorders through social comparison and the spread of harmful content, it also serves as a vital platform for support, advocacy, and education. For the mental health nurse, the digital age requires a new set of competencies focused on digital literacy, e-professionalism, and the management of online therapeutic boundaries. As the UK healthcare system continues to move towards a more digitally integrated model, nursing practice must evolve to ensure that the digital well-being of the patient is given the same priority as their physical and psychological health. The challenge for the future lies in harnessing the power of connectivity while safeguarding the vulnerable from the inherent risks of the virtual world.

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