Sin Sar Bar Social Media Campaign: "It's OK not to be OK"

Mental Health Content of Social Media Posts

Please note the following regarding the social media posts content.

- Module and social media post names may be significantly different as the result of translation/linguistic adaptation and that is to be expected.
- Core mental health messages can vary based on theoretical orientation, public health policy, target audience, culture, and other variables. The core messages here are selected with consideration for this specific social media campaign at this time in Myanmar. The messages are based on the target audience being the "general public"—the widest audience possible. The challenge is to create the message as simple as possible without being trite while remaining factual. It is also important not to cram too much information in each post taking into account the concise nature of social media posts to be impactful. The core messages (I try to keep them to three) in each post are related; sometimes they are given the effect of reinforcing or drumming in the message. This will also help with cohesion of the campaign.
- There is scholarship behind the core messages. They are based on research-based prevailing theories and practices of mental health in psychological literature and application in communities. The selected messages also reference the nature of outreach and education for the general public across cultures.
- These social media messages cannot sound scholarly or didactic; they must be relatable or instructive to everyday life. Whenever possible, the messages in this campaign relate to or start with what Myanmar people already know or the language that is in everyday vernacular.
- As overwhelming research is conducted in the West, attention is paid to frame mental health messages on how effectively they can be adapted and will play out in Myanmar. For example, the messages for SSB posts pay attention to factors beyond the individual and considers the community and collectivistic nature of cultures in Asia and Myanmar.
- Beyond the core mental health messages, this social media campaign will provide additional linkage to resources that are accurate and simple. Some of the resources may already exist in Myanmar while others may not. (Need to research this.) For example, there are resources in nutrition while there may be none for sleep hygiene. When there is not, SSB will have to create them.
- In addition, the core messages consider how succinctly they can be presented in words, sounds, music, movement, dance, and acting in social media posts. There may be cues for creative direction. Brief messages with cohesive content across messages will help with a planned roll-out of the posts.

- The core messages need to be brief in impactful way on social media. This does not mean it has to stop there. Besides linkage to evidence-based resources, this SSB social media campaign will present creative user engagement activities. These are most prominent in modules 3 ("Change for the Better") and 5 ("Self-care"). SSB's creative team will have to develop culturally accessible engagement activities that users can done in real life.
- With regard to the creative work, if SSB is executing a project such as this professionally considering that there are many components to the project, I suggest having a creative director for artistic direction. In communications companies, art director is a separate position. (Charlie did mention having a creative team—and in a sense, Charlie and Hsu Myat seem to function as creative directors in terms of ensuring production schedule and coordinating the team.) The creative/art director will oversee the artistic aspects of the project as in how the content can be best delivered, including how it should look with regard to aesthetics that speak to the subject, how it should sound and be scripted, and through which medium (e.g., still cartoon, animation, chat show) while creating a cohesive message (I have organized content messages to be cohesive that you will have to follow through in delivery.) Sometimes, the medium may be intentionally varied to maintain interest in the same topic or module.
- **It is essential for you to prominently show a disclaimer before you social media posts and videos.** It is an ethical thing to do even if there may be no legal issues in Myanmar. An example:

> ***The following is developed in consultation with mental health professionals to inform and educate. They are not medical advice. Please consult your medical provider, such as your primary care physician, psychiatrist or professional mental health counsellor regarding your personal health.***

Module 1: "SAY HELLO TO MENTAL HEALTH"		
Social Media Posts	**Core Mental Health Messages**	**Creative Direction**
1a. What is mental health?	• Mental health is about well-being within one's self and with one's environment (e.g., family, community, economic state, ~~political situation~~). • Mental health is not just about mental illness. Mental health is about how we function. • Our functioning—how we think, feel, and act can benefit or hurt ourselves and others around us. Functioning is about learning and understanding. Functioning is about reacting and responding. Functioning is about taking actions for our well-being that can have impact on others.	
1b. Why is mental health important?	• Mental health *is* health. WHO maxim: "There is no health without mental health." • Mental health concerns whatever your ethnicity, sex, age, rich or poor—whoever you are. It is about being human. A human concern. • Mental health affects our thinking, feeling and actions—contribute to our well-being. This means, mental health helps us cope with life challenges, let us grow as human beings, and help us contribute to society.	
1c. Why mental health can be invisible?	• We hide. We are hidden. We are not seen. We don't want to see. We don't notice. • So, why? Stigma. Stigma is an attitude that is negative, disapproving by society, stereotyped by society, often unfair, with blame and shame put on the person who suffers. • Stigma harms the person who suffers because the person and his/her family may become reluctant to seek help and that change for the better is not possible. The truth is: We can do better, get better, and overcome stigma. (Stay-tuned.)	

1d. What can we do about mental health stigma?	• Being "normal" has gradations. (E.g., Some are tall, some are short. Some are fat, some are thin. Some are dark, some are fair. Some are fast, some are slow. Some are quiet, some are loud.) You view them with your attitude you have learned. • Don't be *arr-nar-de* and ask for help for yourself, your family member, your friend, and your community members. You deserve care. Speak up against stigma. • What will YOU say and do to de-stigmatize mental health? (E.g., It's OK to talk about mental illness. It's OK to ask questions about mental health and treatment. It's OK to be honest with yourself. It's OK to seek treatment.)	

Module 2: "WE LIVE IN OUR BODIES"		
Social Media Posts	**Core Mental Health Messages**	**Creative Direction**
2a. Have you eaten? What did you eat? Or, How was your meal?	• To stay alive, we must eat. Eating is for our physical and mental health—our well-being. • When we are healthy, we enjoy our food. When we are unhealthy, we may not have appetite or we may eat too much. These may be signs of mental health problems, for example, stress, anxiety, depression and trauma. • Some foods are especially good for health—physical and mental. E.g., fresh vegetables and fruits.	
2b. Have you slept? How was your sleep?	• To stay alive, we must sleep. Sleeping is for our physical and mental health—our well-being. • When we are healthy, we sleep well. When we are unhealthy, we can have difficulty falling asleep or staying asleep or over-sleep. These may be signs of mental health problems, for example, stress, anxiety, depression and trauma. • Some sleep conditions are especially good for health—physical and mental. E.g., having a sleep schedule and attention to what you eat and drink before bedtime.	
2c. Yes, the body feels. The body tells you about your mental health.	• How does your body feel or what happens to your body when you are in love? [The brain releases dopamine—feel-good hormones activated → ecstatic, (good) nervous--attentive, tingly, can't sleep…"butterflies".] • How does your body feel or what happens to your body when you feel happy? [Dopamine and serotonin in our brains—our "happy hormones" activated → keeps blood pressure from rising, lowers stress level, relaxes you, makes you sleep better, eat better, heals the body better…"light and bright".]	[Research and use expressions of emotions in each ethnic groups in Myanmar.]

	• How does your body feel or what happens to your body when you are sad? [The brain circuits for physical and emotional pain overlap → can't sleep, cant' eat, increases stress…feels "heavy".] • How does your body feel or what happens to your body when you are angry? [Amygdala in the brain is activated → blood rushes through your brain, clouds rational thought, feels threatened, you fight back or you shut down…feels "hot".]	
2d. Yes, the body can help improve your mental health.	• Physical and mental health are connected. Let's look at the body and stress. • When you feel stressful, how does the body respond or react? [Headache? Stiff neck? Tight shoulders? Strained eyes? Knotted stomach muscles? Indigestion?] • Stress makes you weak physically and mentally → increases the risk of getting diseases. [Negative impact on immune system.] • How can we work with the body to improve your mood? Here three basic things you can start doing today. - Physical activity: Exercise. Can we start with walking? - Sleeping well: Can we start with sleeping at the same time every night? - Eating well: Can we start with eating less sugar and less salt? [Links to resources for the above three activities.]	

Module 3: "CHANGE FOR THE BETTER"		
Social Media Posts	**Core Mental Health Messages**	**Creative Direction**
3a. How does change affect you?	• Change is a feature of life: we are born, we grow up, we die—the nature of things. • Change can affect the way we think, feel and behave—for the better or can become worse. Again, this is the nature of change. • What is your response to change: - Run away from change? - Fight change? - Plead with change? - Freeze yourself not to change? - Work with change? - Embrace change?	
3b. Change can start with you	• You are not in control of everything in your life. Do what is in your control. • Start with self-reflection: (a) Identify something personal about your life that you care and want to change for the better. (b) Ask questions of what, when, how and why about this personal issue. (c) What is your response to change regarding this personal issue? (d) Can you see, think, feel and do something differently about this personal issue—to become who you want to be? • Then, change the way you think, feel and behave. [In the next post.]	[User engagement activities?]

3c. Some ways to change	• Reminder: Change your eating and sleeping habits. • Learn new perspectives: Can you look at the same old problem in a new way and come up with new solutions? Do you generally see the glass half empty or half full? • Learn different ways of thinking (examples): (a) Practice mindfulness: Your thoughts are not reality. Your thoughts are your thoughts. - Observe your thoughts: Notice your thoughts and let them go. - Notice your physical sensations: Acknowledge the sensation (e.g., warm, itchy) and let them go. (b) Practice gratitude: What are you thankful for in life? - Affirm the good thing, positive thing you receive or experience - Acknowledge the role of other people in your life that helped you receive or experience it • Learn different ways of feeling (examples): (a) Notice how your body reacts when you feel something. Reminder: What happens to your body when you are happy? When you are sad? (b) Question your assumptions: What is this feeling based on—facts? beliefs? What other ways can this experience be interpreted—felt differently? • Notice your behaviors (examples): (a) Your speech: How quickly do you say back something? How you say it? (b) Your listening: How well do you listen? What did you hear? • Learn different ways of behaving (examples): (a) Identify one problem behavior you have and assess the following: - Motivation to change: What makes you want to change this behavior? - Readiness to change: Do you have the knowledge and help to do differently? - Barriers to change: What is stopping you from changing? - Likelihood of relapse: What might push you back to former behavior? - Are you ready to do it now?	[User engagement activities?]

3d. Counselling	• What is counselling? What is not counselling? • Who provides counselling? • When is counselling needed? • How can counselling help you?	[Chat show: A celebrity interviews a professional counsellor]

Module 4: "SOCIAL CONNECTION"		
Social Media Posts	**Core Mental Health Messages**	**Creative Direction**
4a. Social connection is health care	• Social connection is your internal state of feeling connected with others. - Social connection is about the quality of connection and not the number of connections. (E.g., you have 1000 Facebook "friends" and yet feel lonely.) - Social connection is having emotional or physical social support and not about negative social interaction. (E.g., you say you have "friends" and they belittle you directly or indirectly making you feel bad, such as highlighting what you don't have while showing off what they have on Facebook) - Social connection is about having meaningful interaction/relationship and not about superficial interaction/ relationship. (E.g., you "chat" or "comment" or throw "emoji" to stay connected but that does not convey quality interaction or develop into deeper relationship if you don't have a meaningful conversation.) • Research shows that social connection improves physical and mental health. - Strong social connection strengthens immune system - Strong social connection helps recover from disease faster - Strong social connection lowers anxiety and depression - Strong social connection shows that you have self-esteem - Strong social connection means you deal with others in positive, meaningful ways, which allows for better emotional regulation skills—ability to check and control our own emotions—helps us to be in a state of equanimity (*upekkha*).	
4b. The flipside of social connection: social isolation	• Social isolation is voluntary or involuntary absence of having contact with others. - Social isolation is typically when the person feels disconnected from other people and avoids or removes one's self from social situations. - Please note that social isolation is not necessarily bad if we seek with a purpose, such as being alone to relax and meditate.	

	• Research shows that social isolation weakens physical and mental health. - Social isolation increases risk for diseases, such as atypical blood pressure, heart disease, and in older adults, increased risk of dementia - Social isolation adds to the risk of addictive alcohol use, smoking and obesity - Social isolation means you are on your own → high negative self-focus → stress - Social isolation increases your anxiety and depression - Social isolation makes you more vulnerable to suicidal behavior	
4c. More joys of social connection: social well-being	• Social connection gives you a sense of belonging that is critical for mental health. When you have a sense of belonging it makes you feel good and reduces isolation. • Social connection makes you more active in body and mind—and active means healthy • Social connection can help you discover new aspects of yourself and even happiness—you grow • You are part of your community, your society. Your well-being contributes to your community's, your society's well-being.	
4d. What you can do to increase social connection?	• Ask for help. Examples: - Communicate with family, friends, romantic partners, neighbors, and classmates or work colleagues; be a good listener; have questions—be curious about/interested in others - Ask if you can join a social group, formal or informal; try something new, such as a hobby, that you have been thinking about - Communicate your needs; don't be ar-nar-de. You have to let others care for you. • Give to others without any expectation (*dana*). Examples: - Acts of service/volunteering—volunteer for a cause you care about or may have interest in - Show kindness (*myitta*) with words, deeds and demeanor to others - Giving to others also means taking initiatives on new ventures that will benefit you and others	[Apply Myanmar ethnic culture-based activities]

Module 5: "SELF-CARE"		
Social Media Posts	**Core Mental Health Messages**	**Creative Direction**
5a. Self-care is necessary to health care	• Self-care is "the ability of individuals, families, and communities to promote health, prevent disease, maintain health, and to cope with illness and disability with or without the support of a health care provider" (WHO definition). • Self-care means caring for yourself to be healthy physically, emotionally and spiritually. - To do what you need to do for yourself for daily functioning. You are already doing some of them every day. Examples: bathing, brushing your teeth, washing your plate, keeping your space clean. - Some self-care will need a plan. You may need to create a special time for yourself, a special activity to do, a special place to go to, or be with a special person. Example: going for medical check-up, taking medication, participating in counselling, exercise, meditation, attending church, cooking healthy food, gardening to nurture and see things go, and doing other art work. In the most fundamental sense, you also do them because you enjoy them—fun for you.	
5b. Self-care is not selfish	• Selfishness disregards others. Self-care regards everyone—others and yourself. - Replenishing yourself does not mean you take away from other people. - Focusing on yourself does not mean you ignore others. - Self-care, then, is self-love knowing that you are worthy and deserving of care. (If your car has no petrol, you can't drive to where you want to go.)	
5c. Self-care with and for others	• Self-care does not necessarily be done on your own alone. Self-care can happen with others—your family, your classmates, your work colleagues, and your community members. - Engaging in social connections makes you feel less alone and feel that you are part of something else larger than yourself. - When you are healthy and feel good, you can help others feel good. - Helping others becomes self-care when you feel happy giving.	

5d. Self-care activities	• What helps *you*: - to de-stress? - to feel relaxed? - to feel safe? - to feel happy? - to feel healthy?	[User engagement]