Questions for Mental Health and Suicide Prevention Digital Creators
This sheet is designed to highlight some questions that digital creators may ask themselves when developing mental health or suicide prevention apps or incorporating mental health or suicide prevention tools into their digital platforms and websites. These considerations incorporate best practices and recommendations used by National Suicide Prevention Lifeline and Vibrant Emotional Health to evaluate suicide prevention and mental health tools online.

This resource provides a basic framework for digital creators, and will not address every concern or need. More comprehensive tools and supports for digital creators will be shared in the future. If you have questions or would like a more in-depth consultation, please write to Jacque Moutier, VP of Business Development for Vibrant Emotional Health, at jmoutier@vibrant.org.
Does this resource offer information from trusted sources and relevant crisis supports?
It is important to include free and accessible crisis services such as the National Suicide Prevention Lifeline or other crisis lines in an easy-to-find space. If you share resources or specific information, make sure to cite trusted organizations and update your resources and content regularly to reflect new information.

Does this resource take into account best practices in risk assessment?
Not every digital resource aims to reach people in suicidal crisis, but every resource should have processes in place to support people at varying levels of emotional distress, including those at imminent risk of suicide. Imminent risk is a term used to define a situation in which an individual is at immediate risk of harming themselves or another person. If the individual identifies a specific method of suicide (the plan) and/or indicates a specific day or time in which they will carry out this method (the timeline), and/or states where he/she wishes to attempt suicide, then that individual is likely at imminent risk of suicide. In situations where a person is perceived to be at imminent risk of harming themselves or others, it is imperative to connect that individual to emergency services or 911 for immediate assistance, or to provide ways for that individual to connect themselves.

Does this resource promote safety?
All content regarding mental health and suicide prevention should promote supports, methods, and tools that value personal safety and recovery. The content should not promote risky behaviors such as drug or alcohol use or self-harm, and should encourage people to connect to care if they do not feel safe or able to keep themselves safe.
Does this resource utilize supportive, destigmatizing, and strengths-based language and imagery?

Language and imagery should avoid sharing methods of self-harm or suicide, promoting or glorifying suicide/self-harm, or sharing insults, misinformation, or denigrating language regarding mental health conditions and the people who are affected by them. Language and imagery should focus on encouraging positive support and recovery from crisis, highlight the many different ways that people cope with crisis, and aim to reduce the stigma of mental health conditions.

Does this resource include interactive or custom elements? Are those interactive elements within best practices?

Everyone’s mental health needs are different, and there are many tools and resources available that can help people identify the coping skills or resources that best work for them, such as safety plans. If your digital resource hopes to share interactive tools or resources, is there an element of customization that takes those individual needs into account? If there are spaces for comments or user interaction, are there moderation processes in place? (See moderation question below.)

Have persons with lived experience reviewed this?

Persons who have experienced mental health conditions, suicidal ideation, suicide attempts, or have lost loved ones to suicide can provide valuable insights into how people that may be in crisis or who have been directly affected by mental health conditions may respond to and interact with your digital resource.
If your resource focuses on suicide prevention, have suicidologists and/or crisis workers reviewed it?

Not every mental health professional is a suicide prevention or crisis intervention specialist. Suicidologists are mental health professionals that specialize in suicide prevention best practices, and crisis workers are trained in providing emotional support for people in distress through technological means such as phone, text, or chat. They can provide valuable insight into best ways to support people in crisis, and how those best practices apply to digital tools.

Does this resource have active moderation policies in place?

If there are elements to your digital tool that incorporate user submissions, feedback, or interactivity, those areas are spaces where people may share materials that do not promote safety or recovery. Share a clear policy about what content is allowed, and ensure that human eyes are regularly looking at user content and screening items that do not promote safety.

In addition to screening for inappropriate content, people may utilize user-focused areas to ask for help. In those cases, are there people checking for content that would indicate a user is in crisis and may require connection to additional supports outside of your digital tool, such as crisis lines? Ensure there is a clear pathway for moderators to connect a user to emergency services if necessary.

NOTE: While we encourage active moderation and response online, we do not encourage community managers to take on the role of mental health care professionals. All engagement with an at-risk individual should be designed to provide appropriate support while connecting that individual to mental health or crisis resources like the National Suicide Prevention Lifeline, your local crisis center, or other local mental health providers.

What are the barriers that may prevent accessing this resource?

Examine your digital tool to see what barriers exist that may prevent people from accessing and using it. Is there a cost associated with it? Is it accessible to people with disabilities? Does it require a certain type of hardware or software? Is it limited by region? How many of these barriers were established intentionally and how many were not? You may intentionally establish some barriers in order to meet your tool's goals and needs, but other restrictions may be worth examining to see if they can be overcome.
Additional Resources

National Suicide Prevention Lifeline’s Social Media Toolkit
Vibrant Emotional Health’s Safe Space
#BeThe1To
Suicide Prevention Resource Center’s Social Media Guidelines for Mental Health Promotion and Suicide Prevention