

SCREENWELL

FAMILY SOCIAL MEDIA PLAN

**WHAT ARE YOUR GOALS OR INTENTIONS
FOR YOUR TIME ONLINE?**

**WHAT BENEFIT DOES SOCIAL MEDIA BRING
TO YOUR LIFE?**

HOW DOES SOCIAL MEDIA IMPACT YOUR...

THOUGHTS?

MOOD?

BEHAVIORS?

VIEW OF YOURSELF?

HOW DOES SOCIAL MEDIA AFFECT YOUR RELATIONSHIPS?

**WHAT DO YOU NOTICE ABOUT HOW YOU AND YOUR
FRIENDS BEHAVE ONLINE VERSUS IN PERSON?**

**HOW DOES INTERNET USE AND SOCIAL MEDIA
AFFECT YOUR FAMILY?**

**WHAT ISSUES CONCERN YOU ABOUT SOCIAL
MEDIA?**

WHAT DO YOU BRING TO THE TABLE?

**WHAT STRENGTHS OR RESOURCES DO YOU HAVE IN
PLACE THAT MAKE YOU MORE RESILIENT TO THE
NEGATIVE ASPECTS/ DANGERS OF SOCIAL MEDIA?**

**WHAT MAKES YOU MOST VULNERABLE TO THE
NEGATIVE ASPECTS/ DANGERS OF SOCIAL MEDIA?**

SETTING BOUNDARIES

| | |
|-----------------------|--|
| APPS TO DELETE: | |
| TIME LIMITS: | |
| WHO/WHAT TO FOLLOW: | |
| WHO/WHAT TO UNFOLLOW: | |

AVOID SOCIAL MEDIA WHEN...

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AVOID SOCIAL MEDIA IF...

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DESIGNATED "UNPLUGGED" TIME

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| DAY(S): | |
| TIME(S): | |

SOURCES OF SUPPORT TO HELP MAINTAIN BOUNDARIES:

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| ALTERNATIVE ENJOYABLE/ DISTRACTING ACTIVITIES: | |
| HELPFUL THOUGHTS: | |
| RESOURCES: | |
| SUPPORTIVE PEOPLE: | |

IF NEEDED, STOP USE & SEEK SUPPORT FROM:

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