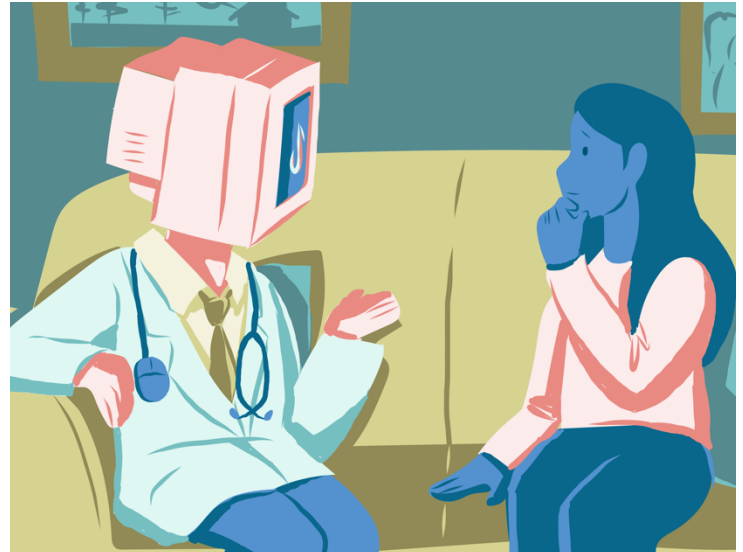


The Self-Diagnosis Trend: Treating Mental Illness on Social Media

According to the University of Virginia, TikTok is the second most popular social media platform among teenage users, and data collected from Statista suggests that the app grew in popularity by 180% for 15 to 25-year-olds in the aftermath of COVID-19. Where there might once have been a few in-person avenues by which adolescents could connect with or relate to each other, social media offers an endless variety of outlets for teenagers to find supportive people who share similar experiences. Platforms like TikTok have been used in recent years as vehicles for finding ‘diagnoses’ for the “isolation, anxiety and general unwellness” that they experienced when the pandemic forced adolescents out of their normal social routines.



According to the Cleveland Clinic, the “Barnum Effect” is a psychological “tendency to accept general and vague statements and personality descriptions” as if they are true or “applicable to us.” The Barnum Effect applies to adolescents who are on social media because social media platforms are full of influencers who share anecdotal experiences with their audiences in the hopes that these experiences will be generally relatable, destigmatizing and informative. Although these influencers are using their platforms to, as one mental health provider from Johns Hopkins Medicine notes, “raise awareness and reduce stigma surrounding mental health,” adolescents who misdiagnose themselves with the wrong mental health condition based on a select set of symptoms may not receive adequate treatment nor any relief from their symptoms.

As one researcher from the University of Virginia suggests, adolescents who seek mental health diagnoses on TikTok are most likely to find information from different influencers on Obsessive Compulsive Disorder (OCD), Dissociative Identity Disorder (DID), Attention Deficit Hyperactivity Disorder (ADHD), Borderline Personality Disorder (BPD), Autism, Anxiety and Depression. Although DID is a relatively rare condition that usually develops in 1.5% of mature adults who have experienced severe trauma, many adolescents on TikTok have come to identify with this disorder, and some experts worry that glamorizing disorders like DID minimizes how debilitating they can be. Furthermore, other experts from Charlie Health and Science Focus wonder whether self-diagnosing with serious mental health conditions such as DID might lead adolescents to self-medicate “without the guidance of a trained mental health professional.”

In “Down the Rabbit Hole of Self-Diagnosis in Mental Health,” mental health counselor Jessica Jaramillo identifies a list of other mental illnesses that are commonly misdiagnosed:

- **Anxiety and Depression:** Some symptoms of anxiety and depression – including “lack of energy, motivation, difficulty concentrating, high irritability, insomnia” and problems with eating – overlap and co-occur, making it difficult to distinguish between the two.
- **ADHD and BPD:** Sufferers of ADHD and sufferers of BPD often present with “impulsivity, interpersonal relationship difficulties, and emotional sensitivity.
- **BPD and Bipolar Disorder:** Sufferers of BPD and sufferers of Bipolar Disorder may both experience suicidal ideation, irritability, impulsivity, and mood swings.
- **Autism and Schizoid Personality Disorder:** Individuals who have Autism and individuals who have Schizoid Personality Disorder both struggle to develop strong relationships and may experience difficulty in the “social domain.”

One other researcher from the University of Virginia suggests that an effective mental health diagnosis does not come from simply recognizing a “single symptom” at a particular moment; a trustworthy healthcare provider must be able to identify a “range of criteria” that an individual patient meets and understand how their “mental health conditions develop over time.” One study from the National Library of Medicine published in 2022 examines the sudden onset of tic-like behaviors in adolescent girls who have no genetic link to Tourette’s and whose symptoms match the ‘tics’ that circulate on popular social media channels. While “diagnostic categories,” such as the ones that are spread around for Tourette’s awareness on social media platforms, can serve as a “framework” for making meaning out of the frustrating or disappointing experiences that adolescents have, improperly labeling oneself with a diagnosis creates the impression that the diagnosis is permanent, inescapable and integral to a person’s identity.

Dr. Joseph E. Davis, who is a Professor of Sociology at the University of Virginia, argues that adolescents who are struggling to make sense out of their experiences need to re-engage with the kinds of friends who will allow them to be authentic and “vulnerable” in their “own words.” Experts like Davis believe that social media strips an adolescent of his or her own ability to cope with symptoms that they may be able to overcome with the proper language and skills.

The harmful effects of self-diagnosing mental illness on social media can be offset by supportive interventions that help a child discern what is true and untrue. These interventions include:

- **Dietary Media Restriction:** Children and adolescents should take regular breaks from social media consumption and create healthy habits around the amount of time they spent on social media, which will prevent them from overexposure.
- **Consulting a Professional:** Adolescents who notice that their symptoms fall in line with a diagnosis that they see online should consult a mental health professional and ask open-ended questions about the nature of their symptoms.
- **Seeking Community & Support:** Teenagers who get involved in their communities and social circles are less likely to isolate and depend on social media for validation or acceptance. They are more likely to find the language to express their emotions in a healthy and productive way.
- **Avoid Over-Identification:** Adolescents who do spend time on social media should be wary of anecdotal evidence they gather from ‘influencers’ and hesitant to identify with diagnostic labels about their personal experiences and mental health symptoms.

For more information regarding the harmful effects of social media, please see [Charlie Health's 'TikTok and Mental Health: What's the Connection?'](#)

For more information regarding tips for healthy social media usage, please see Therapy Brand's ["The Risks of Self Diagnosing Mental Illness on Social Media"](#).

References:

Charlie Health on the Dangers of Self-Diagnosing: <https://www.charliehealth.com/post/the-dangers-of-self-diagnosing>

Cleveland Clinic on the “Barnum Effect”: <https://health.clevelandclinic.org/barnum-effect>

Cleveland Clinic on Dissociative Identity Disorder: <https://my.clevelandclinic.org/health/diseases/9792-dissociative-identity-disorder-multiple-personality-disorder>

Johns Hopkins Medicine on Social Media and Self-Diagnosis: <https://www.hopkinsmedicine.org/news/articles/2023/08/social-media-and-self-diagnosis>

National Library of Medicine on ‘TikTok Tourette’s’: <https://pmc.ncbi.nlm.nih.gov/articles/PMC9733629/>

Science Focus on Online Self-Diagnosis Culture: <https://www.sciencefocus.com/the-human-body/online-self-diagnosis-culture>

University of Denver on The Rabbit Hole of Self-Diagnosis in Mental Health: <https://www.ucdenver.edu/student/stories/library/healthy-happy-life/down-the-rabbit-hole-of-self-diagnosis-in-mental-health>

University of Virginia on Social Media Self-Diagnosis: <https://give.as.virginia.edu/news/story/calling-dr-tiktok-experts-weigh-alarming-social-media-trend>

Breaking the Stigma of Addiction

The National Institute on Drug Abuse (NIDA) defines drug addiction as a “chronic, relapsing disorder characterized by compulsive drug seeking and use despite adverse consequences.” Addiction, also referred to as a substance use disorder, is a disease that affects a person’s brain and behavior making it challenging to control the use of a legal or illegal drug. In fact, brain imaging studies of people with substance use disorders show physical changes in areas of the brain that are critical to judgment, decision-making, learning, memory, and behavior control (NIDA). When it comes to teen addiction, alcohol, marijuana, and nicotine are the most common substances used.

No single factor determines whether a person will become addicted to alcohol or drugs. Rather, it is a combination of factors that may include genetics, environmental stressors, social influences, and psychological conditions. A person’s age and stage of development also plays a role. For example, the earlier that substance use begins, the greater chance for addiction. This has to do with the harmful effect that drugs, including nicotine and alcohol, have on the developing brain. Thus, teens are at greater risk of developing substance use disorders compared to other populations. As addiction develops and intensifies, it becomes more difficult to treat and overcome. Early intervention during the teen years helps to prevent the lasting effects of long-term substance use.

Unfortunately, even though substance use disorders are chronic and treatable medical conditions, stigma can stand in the way of addressing the illness. Research has shown that addiction is more highly stigmatized than other health conditions (American Addiction Centers). This stigma can lead to reluctance to ask for help or get treatment as well as lack of understanding by family and friends.

Stigma occurs because of negative attitudes or stereotypes and can also stem from misperceptions about addiction. An example of a misperception that can fuel stigma is that addiction is a choice. Research tells us that substance use disorders are caused by a chemical dependence in the brain and are not the result of moral weakness or character flaws. Using substances for the first time may have been a choice, but once dependence starts, it can be difficult or impossible to stop without adequate support. The changes in the brain diminish a person’s self-control and ability to make good decisions while sending intense impulses to continue to use the substance, despite negative consequences.

Language and the words we use can also contribute to stigma against people experiencing a substance use disorder. While it may be unintentional, the language surrounding addiction can portray those struggling in a negative or shameful way. Experts note that it is important to use language that avoids defining the person by their drug or alcohol problem. Below are examples of language that can make it easier for someone struggling with substance use to feel understood:

- Use person-first language to separate the person from their illness. For example, say, “person with a substance use disorder” instead of “addict” or “person who uses drugs” instead of “drug user.”



- Avoid slang such as junkie or stoner.
- Use language that shows care and concern, rather than judgement.
- Speak up when you hear someone being treated or talked to in a disrespectful way.
- Use language that acknowledges and promotes the fact that recovery from addiction is possible and looks different for everyone.

School professionals may be the first to observe concerns that a student may be using drugs or alcohol. When confronting teen substance use concerns, not only is language important when talking to the person who is struggling with substance use, it is also valuable to be mindful of the language used when addressing student substance use concerns with parents and guardians.

Below are strategies to help create a safe space for open dialogue:

- Acknowledge the emotional impact with empathy and compassion- hearing about a child's substance use can be hard for parents and caregivers. They may be feeling a mix of confusion, guilt, anger, or worry. Express understanding by starting the conversation with, "I know this may be difficult to hear, but we are here to support you and your child."
- Use active listening- encourage parents to share their thoughts, concerns, and feelings. Listen and reflect without judgment so they feel heard and understood. This can help reduce defensiveness.
- Focus on support, not blame- emphasize that the goal is to support the student's well-being and development. Frame the conversation in terms of working together as a team for the student's benefit.
- Provide information, not accusations- share information about drug and alcohol use and its potential impacts on development, learning, and behavior. Focus on solutions, resources, and interventions available to help both the student and the family navigate the situation.
- Offer resources- provide parents and caregivers with concrete resources, such as counseling services, support groups, or community programs like SCIP.

Substance use addiction is a medical condition that requires support and treatment, just like any other disease. Unfortunately, stigma can prevent teens and families from seeking professional help. Through education and awareness, we can all play a role in reducing stigma by sharing facts about substance use and challenging stereotypes and misperceptions about addiction.

References: American Addiction Centers; Centers for Disease Control and Prevention; Hazelden Betty Ford Foundation; John Hopkins Medicine; National Institute on Drug Abuse



Youth drug trends such as vaping (nicotine & marijuana), marijuana use, and other illicit drug use (prescription/pain medication, heroin, cocaine, meth, fentanyl, etc.) tend to grab our attention quickly.

However, according to the 2023 Monitoring The Future (MTF) youth survey:

- **Vaping** actually remained about the same from the previous year for eighth graders. 11.4% of 8th graders, 17.6% of 10th graders and 23.2% of 12th graders reported vaping nicotine in the past year. For the two upper grades, there was a decline in vaping from 2022 to 2023. Nicotine is considered a mood-altering substance like caffeine.
- **Marijuana/Cannabis** use remained virtually the same for all three grades compared to 2022. 8.3% of 8th graders, 17.8% of 10th graders, and 29.0% of 12th graders reported marijuana use in 2023.
- **All other illicit drug use (not including marijuana)** also remained stable for all three grade levels. Eighth graders reported 4.6% illicit drug use, 10th graders reported 5.1% illicit drug use and 12th graders reported 7.4% illicit drug use in 2023.

And while all these substances used by youth should grab our attention, we tend to overlook and dismiss the most common and prevalent psychoactive drug used and abused by youth...ALCOHOL!

According to the National Center for Drug Abuse Statistics (NCDAS), alcohol, by far, is the most widely used and abused substance among youth in the United States.

According to the 2023 MTF youth survey:

- **Alcohol** use was reported by 15.1% of eighth graders, 30.6% of 10th graders and 45.7% of 12th graders.
 - As we can see, alcohol use and abuse by youth is still considerably higher than nicotine vaping in 8th graders. And what is more concerning is the fact that alcohol use is about twice as high among 10th and 12th graders compared to vaping.

- Moreover, alcohol use compared to all other psychoactive drugs, including marijuana and all other illicit drug use, is also significantly higher among all three grade levels surveyed.

Furthermore, we know the brain is still developing in youth and young adults, which makes it more vulnerable to experiencing adverse effects from alcohol use than the adult brain.

Research shows that the earlier in life, especially in youth, that a person begins to drink alcohol, the higher the probability that they will develop serious problems with alcohol abuse.

So why do we not seem to be as concerned?

Quite honestly, there are a multitude of reasons why youth alcohol use seems to fly under the radar.

One of the more obvious reasons is how alcohol tends to be connected with so many of the activities and traditions that we partake in on a regular basis, from simply relaxing to watching sporting events to special events, ceremonies, celebrations and holidays.

And because alcohol is so intertwined into our lives, often times we don't view alcohol as dangerous and life threatening as we do other drugs.

However, that belief is not supported by facts. According to the Center for Disease Control and Prevention (CDC), there are approximately 700 deaths per year among youth related to illicit drug use and around 4,000 deaths per year among youth (younger than 21) related to excessive alcohol use. As we can see, youth deaths related to alcohol occur over 5 times more often than all other illicit drugs combined.

What can we do?

Truth of the matter is, preventing underage drinking is no simple task, yet there certainly are things that can be done to help prevent and lessen the use of alcohol by youth.

Parents play a vital role in their child's thoughts and behaviors associated with drinking. Below are some things parents can do to help address youth underage alcohol use.

- Talk about the dangers of drinking as well as what is responsible drinking and what is not responsible drinking.
 - Let it be known that breaking the law to drink is definitely not responsible drinking.
 - Click on the sites below to help you start the conversation:
<https://talkheart2heart.org/>
<https://knowwhenknowhow.org/>
- Have regular, open conversations about life in general.
 - It is not always easy to find time to just sit and talk with your kids about everyday life happenings and for some parents, having an open conversation isn't quite as easy as we think it should be. Click on the link below to help you learn how to start a conversation.
 - <https://talkheart2heart.org/>

- Model Responsible Drinking, if you choose to drink.
 - Eat before you drink.
 - Don't drink too much.
 - Don't drink as a way to cope with life stressors.
 - Don't drive after drinking.
 - Click on the site below to learn more about responsible drinking.
<https://www.responsibility.org/tips-for-drinking-responsibly/>

Restrict the access of alcohol in your home.

- Lock your alcohol up if you can. Otherwise, store it in a place where kids can't easily access it.
- Get to know your children's friends.
 - Next to parents, kids, especially teens, are highly influenced by their peers and friends.
 - Get to know their friend's parents and their attitudes about alcohol and underage use.
- Supervise youth gatherings/parties in your home to make sure there is no alcohol use occurring.

For more information about youth alcohol use and prevention and other substance use prevention, please visit our web page at <https://scipnebraska.com/>

Article Resource Sites:

<https://www.cdc.gov/alcohol/underage-drinking/index.html>

<https://www.niaaa.nih.gov/publications/brochures-and-fact-sheets/underage-drinking>

<https://www.niaaa.nih.gov/alcohols-effects-health/alcohol-topics/alcohol-facts-and-statistics/underage-drinking-united-states-ages-12-20>

<https://nida.nih.gov/news-events/news-releases/2023/12/reported-drug-use-among-adolescents-continued-to-hold-below-pre-pandemic-levels-in-2023>