

From Inner Chaos to Clarity: A Qualitative Study on the Role of Influencer Mental Health Content in the Self-Diagnosis of Neurodivergent Conditions and Its Implications for the Lived Experiences of Dutch Female Adolescents



From *Volkskrant* [Cartoon], by Peter de Wit, 2024. Translated and used with permission

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June, 2024

Wordcount: 5978

Disclaimer: This thesis has been written as a study assignment under the supervision of a Utrecht University teacher. Ethical permission has been granted for this thesis project by the ethics board of the Faculty of Social and Behavioural Sciences, Utrecht University, and the thesis has been assessed by two university teachers. However, the thesis has not undergone a thorough peer-review process so conclusions and findings should be read as such.

Abstract

This study investigated the impact of mental health influencers on TikTok and Instagram on the understanding of mental health, the tendency to self-diagnose neurodivergent conditions (NDCs), and the lived experiences of 18- to 25-year-old Dutch adolescent females.

Specifically, it focused on the self-diagnosis of ADHD, autism, and OCD. Public discourse raised concerns about online content influencing adolescents' perceptions, prompting them to self-diagnose and potentially impacting them negatively. This study addressed a knowledge gap, as the impact of influencer mental health content on youth who self-diagnose is unknown. Using a grounded theory approach with sensitizing concepts, qualitative research was conducted through in-depth interviews with ten Dutch females aged 18-25. Findings revealed that, despite concerns about misinterpretation, adolescents were empowered to externalize their feelings and manage inner chaos through linguistic empowerment.

Influencers helped participants recognize and understand their NDCs, leading to cautious and well-considered self-diagnosis. Findings showed influencers effectively challenged stereotypes and provided relatable narratives. Algorithms amplified mental health content, significantly influencing self-identification through accumulated evidence. Although potential negative consequences exist, social media facilitated self-mastery, personal growth, inner harmony and resilience strategies. The study revealed a more positive narrative amid concerns of misinterpretation and overinterpretation. While it is essential to navigate risks of self-diagnosis, social media could be a valuable tool for mental health education and support. This aligned with the neurodiversity movement's advocacy for acceptance and understanding of NDCs. Public discourse should balance acknowledging youth concerns with avoiding hasty dismissals.

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Introduction

The cartoon by Peter de Wit on the title page of this thesis offers a satirical commentary on the impact of TikTok¹ on adolescents' self-perceptions and their identification with neurodivergent conditions (NDCs)². It depicts a young individual claiming to have a neurodivergent condition (NDC) based on social media information, met with a dismissive response from an authority figure. This cartoon underscores societal concerns about the validity of social media-driven self-diagnoses and the trivialization of such claims. De Wit's work encapsulates public discourse on the alleged trend among adolescents to self-diagnose NDCs based on information encountered on platforms like TikTok.

The topic of youth self-diagnoses influenced by social media receives significant attention in public discourse. Mental health professionals report an increase in youth self-diagnosing, based on their own observations, as noted during media interviews (Caron, 2022; Murphy Kelly, 2023; McVay, 2023). According to Chochol et al. (2022), TikTok is frequently mentioned by youth during discussions at appointments inside the psychiatrist's office. Adolescents show a significant inclination towards platforms like TikTok, known for its short videos (Vogels et al., 2022).

According to journalist Murphy Kelly (2023), youth turns to influencers for advice, guidance and tools. User engagement data supports this observation, with mental health-related hashtags on TikTok attracting tens of billions of views, indicating a substantial and active interest among users in NDCs (Chochol et al., 2022). Influencers on social media, especially those sharing personal mental health stories, are believed to play a crucial role in shaping adolescents' views on mental health (Leung et al., 2022; Vrontis et al., 2021). By

¹ TikTok is a short-form video social media application where users create, share, and watch brief clips. Instagram Reels is a similar platform (Boeker & Urman, 2022).

² Neurodivergent conditions involve unique brain functioning, leading to different cognitive processes compared to neurotypical individuals. This includes ADHD, OCD, autism, dyspraxia, dyscalculia, and Tourette's syndrome, and can present challenges in everyday life (Kirby & Smith, 2021; Ampe & Rammant, 2023).

identifying with symptoms depicted in videos, numerous viewers have initiated self-diagnosis. This was validated by Gilmore et al. (2022), who analyzed Twitter discussions among young individuals about the impact of TikTok videos on their decision to self-diagnose.

Parents, experts, and schools have observed that many young people are choosing to self-diagnose. They are concerned about the potential negative consequences, such as mislabeling or receiving treatment for misdiagnosed conditions (Murphy Kelly, 2023). Dr. Jennifer Katzenstein from Johns Hopkins All Children's Hospital highlights that platforms like TikTok could lead adolescents to misinterpret and adopt the experiences of influencers as their own. She suggests that youth might hastily conclude they have a condition based on limited information (McVay, 2023).

While concerns about accuracy and professional oversight persist, Chochol et al. (2022) highlight the proactive behavior of youth in their interest in mental health, which deserves praise. This indicates that young individuals are actively taking steps to understand their mental health, demonstrating initiative and self-awareness. Historically, mental health was taboo and stigmatized, preventing open discussion and help-seeking, making the societal shift towards greater openness especially significant (Foulkes & Andrews, 2023).

Over the last decade, efforts in western countries have aimed to raise public awareness, encouraging support and reducing stigma (Foulkes & Andrews, 2023; Sampogna et al., 2017; Hasan et al., 2023). However, this increased awareness can also lead to over-pathologizing normal emotions and misusing diagnostic labels (McVay, 2023; Hasan et al., 2023). This suggests that while raising awareness has benefits, it also presents challenges that need careful management (Foulkes & Andrews, 2023). The increased focus on mental health is a double-edged sword. On one hand, it fosters understanding, helps accurately identify symptoms, and encourages help-seeking behavior (Foulkes & Andrews, 2023). On the other

hand, it may lead to over-pathologizing normal emotions and misusing diagnostic labels (McVay, 2023; Hasan et al., 2023).

Despite the growing public discourse on the impact of influencers on youth, scientific research lags behind. It remains unclear whether exposure to mental health content on platforms like TikTok genuinely leads adolescents to misinterpret and adopt mental health conditions as their own. This discrepancy between media attention and scientific research highlights the necessity of the current inductive qualitative study

Therefore, this thesis answers: “How does exposure to influencer social media content on TikTok and Instagram influence the perceptions of mental health and neurodiversity among 18 to 25-year-old Dutch adolescents, their tendency to self-identify with neurodivergent conditions (NDCs), and the subsequent implications for their lived experiences?” This main research question is further dissected into three focused sub-questions:

1. How does exposure to influencer social media content on TikTok and Instagram alter the perceptions of mental health and NDCs among 18 to 25-year-old Dutch adolescents?
2. In what ways does engagement with influencer mental health content on TikTok and Instagram contribute to the tendency among 18 to 25-year-old Dutch adolescents to self-identify with NDCs?
3. What are the subsequent implications of exposure to influencer mental health content on the lived experiences of 18 to 25-year-old Dutch adolescents who self-identify with NDCs?

The focus on youth who self-diagnose as neurodivergent is motivated by their substantial engagement with TikTok content on NDCs such as ADHD, OCD and autism

(Caron, 2022; McVay, 2023). NDCs are frequently self-diagnosed due to the presence of online communities dedicated to NDCs and self-advocacy (Stenning & Rosqvist, 2021).

This qualitative study holds scientific relevance as it aims to bridge a gap in the current understanding of the intersection between social media influence and adolescent mental health. By focusing on an underexplored area within academic discourse, this study seeks to guide future research and provides insights into the implications of online mental health content consumption among Dutch adolescents, thus contributing new insights to fields related to adolescent mental health and social media studies.

This study's exploration of influencer impact not only fills a gap in academic research but also holds profound societal relevance. Incorrect self-diagnosis could lead to unnecessary distress (David & Deeley, 2024). In more detrimental scenarios, adolescents could inadvertently place themselves on a trajectory toward receiving treatment for a mental health condition they do not have (Murphy Kelly, 2023). Moreover, the overinterpretation and misuse of diagnostic labels can undermine the seriousness of certain conditions and the challenges faced by those who genuinely struggle with mental health issues (David & Deeley, 2024). The societal relevance of youth self-diagnosing is significant due to its wide-ranging implications for individual and public health. Gilmore et al. (2022) highlight a crucial societal concern: extended waiting times for mental health services. The increasing number of people seeking health care—possibly driven by overdiagnosis or incorrect understanding of their conditions—might pressure mental health systems, challenging their capacity to provide timely and efficient care. As mental health awareness increases in society, so does the responsibility to ensure this awareness leads to positive outcomes rather than contributing to an epidemic of overdiagnosis, oversimplification of conditions, and misinterpretation among adolescents.

Findings from this study contribute to a nuanced understanding of how influencer-driven social media content on platforms like TikTok shapes adolescents' perceptions of mental health and their self-identification with NDCs. Employing a grounded theory approach with sensitizing concepts, this study offers an original theoretical perspective on the topic of investigation. This approach allows for a nuanced understanding of adolescents' experiences and informs both policy and practice.

Literature Review and Theoretical Underpinnings

The Role of Influencers

Influencers³ share mental health information through videos, acknowledging disorders and providing guidance and inspiration to viewers (Leung et al., 2022; Vrontis et al., 2021). Murphy Kelly (2023) noted that adolescents increasingly encounter influencers sharing personal mental health stories. Some influencers provide definitions, self-evaluation-quizzes and checklists to help others assess diagnostic criteria (Carton, 2022). Adolescents prefer short videos over medical textbooks for mental health literacy (Retew, 2024). However, Yeung et al. (2022) emphasize the importance of critically consuming content, highlighting that about half of the analyzed ADHD TikTok videos were misleading. Interestingly, influencers often present themselves as experts (Khamis & Welling, 2017). They share intimate details about themselves and use interactivity and storytelling to connect with viewers (Schouten et al., 2020; McVay, 2023). Nevertheless, they often prioritize appearance, potentially distorting perceptions by neglecting depth and understanding (Khamis & Welling, 2017). Adolescents, viewing influencers as relatable sources, are particularly susceptible to their influence (De Veirman et al., 2017; Djafarova & Rushworth, 2017; Schouten et al., 2020). The role of influencers in this study examines their impact on participants' perceptions of mental health and their tendency to claim a neurodivergent label, highlighting influencers' crucial role in shaping adolescents' understanding of mental health.

Algorithmic Influence

While influencers shape youths' mental health perceptions through engagement and content, social media algorithms amplify this effect (McVay, 2023). Gillespie (2014) describes algorithms as gatekeepers, filtering content based on user interactions such as likes.

³ When the term "influencer" is used in this thesis, it refers to "mental health influencer". Mental health influencers are prominent social media personalities with substantial followings who openly share their personal experiences, including their diagnoses, coping mechanisms, and symptoms (Leung et al., 2022; Vrontis et al., 2021).

By analyzing these interactions, algorithms personalize content streams, adapting to and predicting user preferences over time. Cheney-Lippold (2011) explains that as adolescents engage with content, they leave data trails which algorithms use to categorize them into social categories. This categorization shapes their experiences and reinforces social norms. Algorithms create a digital reflection of users' identities, affecting their self-perception and interactions. This influence is evident on TikTok's "For You" page and Instagram's "Explore" page, which showcase content based on individual preferences, thereby shaping users' interests and behaviors (Boeker & Urman, 2022; Bishqemi & Crowley, 2022). Once teens search for content, the algorithms may keep surfacing similar videos and posts. Once adolescents come to the conclusion that they have a condition, it can be difficult to change their minds (Murphy Kelly, 2023). Building on the understanding of how TikTok's algorithms amplify adolescents' exposure to mental health content, it's essential to delve into the consequences of this exposure. As teens are increasingly presented with content that mirrors their interests, there emerges a significant concern regarding their interpretation of information (Foules & Andrew, 2022).

Overinterpretation

Concerns are growing about teens' interpretations of content tailored to their interests, especially regarding mental health awareness. Foulkes and Andrew (2022) highlight that emphasizing symptom awareness can lead teens to misinterpret normal experiences as signs of NSCs. Influencers exacerbate this by encouraging followers to monitor and discuss their mental health experiences, making normal emotions seem problematic. Foulkes & Andrews (2023) expand on this with their Prevalence Inflation Hypothesis, which explores the unintended consequences of mental health awareness campaigns. These campaigns, while aiming to reduce stigma and encourage openness, might paradoxically increase the perceived prevalence of mental health issues by causing individuals to view ordinary psychological

distress as mental health problems. Foulkes & Andrews (2023) call for empirical research to understand the relationship between awareness campaigns and the identification of mental health issues, suggesting a reassessment of their impact. A qualitative study allows to explore adolescents' interpretations of mental health content and the following implications.

Benefits of Self-Diagnosis

Nonetheless, diagnosis serves a crucial role in providing clarity and understanding to individuals regarding their conditions (David & Deeley, 2024). It alleviates uncertainty by identifying the causes of symptoms and connecting individuals with communities of shared experience (Yanos et al., 2020). Beyond medical implications, diagnosis confers a distinct social status, unlocking resources, sanctioning behaviors, and facilitating support (David & Deeley, 2024). Social media further amplify these benefits, offering resources to empower individuals (McVay, 2023; Murphy Kelly, 2023). Recognizing the merits of self-diagnosis underscores its potential for empowerment, early intervention, and fostering community support (McVay, 2023).

Social Construction Theory and Labeling Theory

The benefits show why adopting a label is appealing, but labeling is a complex process. Social construction theory, and labeling theory are interconnected concepts. According to Longhofer & Winchester (2023), social construction theory posits that individuals must articulate their internal experiences to have them recognized as reality. This process involves labeling and defining experiences, creating distinct boundaries. Reality is shaped through discourse, social interactions, and language, meaning individuals do not have direct access to an objective world. Instead, reality is a construct of social processes and linguistic practices. When individuals label themselves with a specific condition, they may adopt behaviors and identities associated with that label.

Labeling theory, as described by the American Psychological Association (2023), suggests that being labeled with certain traits can influence actions, like a self-fulfilling prophecy. For example, young people who believe they have a NDC after consuming online content might begin to view and act according to the symptoms of that condition. This belief can lead to behaviors that make the condition seem real. Kroska and Harkness (2008) found that labeling a condition does more than just identify it; it also links the person to societal stereotypes, making them seem less competent. This impacts how diagnosed individuals see themselves and how they are treated by others.

Importance of Professional Diagnosis

Labeling oneself with NDCs without professional guidance can lead to confusion, unnecessary worry, mislabeling, delayed treatment, unsafe self-treatments, and feelings of isolation. Adolescents are particularly at risk as they may oversimplify their conditions, complicating their access to proper care. Experts caution against equating normal experiences with disorders and using online information for self-diagnosis, stressing the need for professional assessment. (David & Deeley, 2024; Hasan et al., 2023; Carton, 2022; McVay, 2023; Murphy Kelly, 2023; EOS Wetenschap, 2023). This study explores the impact of self-diagnosis on adolescents' daily lives.

Medical Model vs Neurodiversity Movement

In everyday life, there exist contrasting perspectives. Kapp et al. (2013) discussed two perspectives on neurodiversity: the medical model of disability and the neurodiversity movement. The medical model views NDC as disorders needing treatment to conform to norms. Tekin (2011) added that this perspective can lead individuals to see their disorders as illnesses beyond their control, negatively impacting their socio-economic status, relationships, self-care, adaptability, worldview, self-perception, and growth. In contrast, Kapp et al. (2013) explained that the neurodiversity movement regards neurodiversity as natural variations rather

than pathologies requiring correction. This movement emphasizes acceptance, support and celebration while advocating for diversity and challenging stigma. Tekin (2011) suggested this perspective fosters self-understanding and personal growth.

Methods

Methodological Design

This study employed a qualitative, inductive approach using grounded theory with sensitizing concepts, making it well-suited for answering the research question. Since the phenomenon of adolescents self-diagnosing NDCs, influenced by social media, was unexplored, qualitative methods were ideal for capturing the complexity of participants' experiences. Grounded theory allowed new theories to emerge from the data, while the inductive approach offered flexibility without predefined hypotheses. Sensitizing concepts, derived from existing literature, functioned as guiding searchlights, providing a framework to navigate the data while remaining open to new insights. This study integrated different theoretical perspectives to enhance the understanding of the complex issue under investigation. An interdisciplinary approach was taken (see Appendix A). Qualitative research provided contextually grounded insights into the perceptions, behaviors, and experiences of adolescents included in this study. In contrast, quantitative methods, relying on predefined hypotheses, were inadequate for understanding this novel phenomenon. Member checking was planned as a strategy to enhance credibility but was not conducted due to time constraints.

Participants

The study involved ten Dutch females, eight of whom were highly educated, who self-identified with ADHD, OCD, or autism. Most participants also reported comorbidities with additional non-neurodivergent mental health issues (see Appendix B). Although the intention was to include ten participants, time constraints hindered individual recruitment. To overcome this, a collaborative effort was undertaken with a fellow student⁴. Each recruited

⁴ A fellow student investigated a similar topic, focusing on understanding the motivations behind youth self-diagnosis behavior through influencer mental health content.

and interviewed five participants, and data sharing ensured the creation of a comprehensive qualitative dataset. This collaboration ensured the dataset was comprehensive enough to address the research question. Although the small sample size limits generalizability, focusing on ten participants allowed for detailed and in-depth data collection. Minors were excluded to ensure all participants were legally recognized adults capable of providing informed consent. All participants self-diagnosed based on social media content and followed mental health influencers. There were clear inclusion and exclusion criteria, and all pre-established criteria were met during recruitment (see appendix C). The purposive sampling strategy involved selecting five participants from TikTok, based on their active engagement with neurodiversity content, identified through comments like "This is me" on videos. This approach may have introduced bias by primarily targeting expressive females, potentially overlooking less vocal participants and males. The other five participants came from the fellow student's personal network, possibly mirroring her demographic characteristics. Consequently, the findings may not fully represent males and less vocal participants, limiting the study's generalizability.

Procedure and Strategy

Ten in-depth semi-structured interviews were conducted. The procedure involved: developing an interview guide, obtaining informed consent, conducting and recording interviews and transcribing the data for analysis. The data collected from these interviews provided saturation, eliminating the need for additional qualitative content analysis. Data collection involved collaborative efforts with another student who conducted half of the interviews. To maintain consistency, interview guides were coordinated, and key questions were exchanged. The data will be openly and freely shared as part of a qualitative dataset. Of the ten interviews, eight were conducted online, one via a phone call, and one in person. Interviews lasted 45 minutes or more, while the fellow researcher's interviews lasted 30

minutes. This study acknowledges potential biases in participants, especially regarding self-diagnosis. Therefore, the findings should be interpreted with caution.

Instruments

The interview guide (see Appendix D) served as a tool for operationalizing the research questions. Operationalization of the research question involved creating stipulative definitions for the central concepts in the study and translating the central theoretical concepts from the theoretical framework into concrete interview questions (Appendix E). This enabled the formulation of non-suggestive, open-ended interview questions designed to elicit participants' unfiltered thoughts and experiences, ensuring the collected data effectively addressed the research question.

Data-analysis

Data analysis involved a thematic analysis approach, transcripts were reviewed to identify themes across participants' responses. The analysis utilized open, axial and selective coding techniques to extract meaning from data, ensuring the analysis remained focus on answering the research question. Raw data underwent open coding with the aid of Nvivo software. Subsequently, open codes were manually grouped into broader themes in tables. Themes were iteratively refined and combined as more data were analyzed. Each theme was named and described, facilitating a deeper understanding of the research questions. Once data was analyzed, the coding tree was finalized (see Appendix F). Member checking was planned to enhance credibility but not conducted due to limited time. These themes were then analyzed against the theoretical framework to assess whether they provided new insights or supported existing knowledge.

Positionality

The researcher's positionality as a 28-year-old female university student with a background in science and personal familiarity with social media platforms such as TikTok

may have introduced biases into the research. This background could potentially influence interpretations and expectations regarding the data. To address this issue, a commitment to reflexivity was maintained throughout the study. This involved ongoing examination and questioning of assumptions to safeguard against personal experiences impacting data analysis and conclusions, thus aiming to uphold objectivity and minimize researcher bias.

Ethical Considerations

Participants took part in the study based on informed participation, guided by a Dutch informational letter (see Appendix G). They were briefed on the study's non-invasive nature and their right to withdraw, and provided written consent. Data was anonymized and secured per Utrecht University's guidelines, with transcripts added to an open-access dataset. The study complies with national laws and Ethics Review Board approval from the Faculty of Social & Behavioral Sciences.

Externalizing Inner Chaos

The theoretical framework suggests that mental health influencers shape adolescents' views on NDCs (Murphy Kelly, 2023; Rettew, 2024; Leung et al., 2022; Vrontis et al., 2021). This chapter explores how influencers influence adolescents' understanding of NDCs. It compares participants' perceptions before and after exposure to content, examining how these interactions may alter their perceptions.

Growing Up with Negative Mental Health Stigma and Stereotypes

In their upbringing, participants encountered stigma surrounding mental health, which promoted self-reliance and discouraged open discussions about personal struggles. P1 recalled being told she simply "need[s] a kick in the butt, and [...] keep going," reflecting the prevailing belief in pushing through challenges independently. This societal context often led individuals to internalize their feelings and continue with their daily lives without addressing their internal struggles, as illustrated by P3: "You really didn't talk about it at all. And then you just kept going. And then you just let it disappear into the back of your mind." Moreover, the social context shaped participants' perceptions with neurodivergent stereotypes. All participants encountered NDCs such as ADHD and autism through limited and often extreme examples. P1's understanding of autism was constrained to knowing a "train-collecting autistic" and "someone who was always unreasonably angry due to their diagnosis." P4 recalled, "The image that was always portrayed to me about ADHD... or what I always got while growing up... was just like... you know, that classic image of a bouncing boy in the corner of the class." Stigma and stereotypes created significant barriers to understanding and accepting NDCs.

Unawareness

Beyond the presence of stigma and stereotypes, six participants experienced lack of knowledge and understanding about NDCs. P3 highlighted "[she] didn't even know what

ADHD was.” A knowledge gap led to limited understanding and the formation of preconceived judgments about those who deviated from social norms. This lack of awareness was evident in P4’s experience, who, despite now having ADHD, “thought [ADHD] was something distant and irrelevant to [her].” Participants seemed to have a very basic perception of NDCs, lacking the knowledge necessary for comprehensive understanding. Unawareness prevented individuals from recognizing neurodivergent traits in themselves. P6 explained that “[b]efore I had the diagnosis, or before I saw that content indeed, I just thought, oh yeah, that’s just how I am. That’s just how it is.” This overarching lack of understanding impeded the ability of individuals to seek appropriate information and support.

Feeling Different and Being Dismissed

While participants experienced mental health stigma, stereotypes, and limited awareness, they all felt different early on and consistently encountered dismissal, being overlooked, and not being taken seriously despite their challenges. P1 said she “never felt normal,” and P2 observed in school she was “one of the only ones who (...) was hyperactive.” P8 came to realize: “[e]veryone procrastinates sometimes. Everyone has trouble starting now and then. But at a certain point, I realized, okay, for me, it’s more significant than for others.” Early signs of NDCs were often dismissed by educators, healthcare professionals and family members. P1 heard from a psychologist, “it probably isn’t autism because you’re social” and “we’re not going to investigate,” while she later explained, “[she] spent 21 years really learning how to be social.” P10 was dismissed by family telling her, “you’re talking nonsense.” Dismissals were prevalent among participants, revealing a pattern of misunderstanding and neglect regarding mental health issues at the individual level.

Internal Chaos

Growing up amidst stigma, stereotypes, and dismissive attitudes about mental health, participants faced internal struggles and conflicts from an early age, independent of social

influences. P1 expressed a sense of incongruity between her internal experiences and the external explanations available, saying "the picture didn't quite fit," which left her with "really big questions." P2 described she experienced uncertainty and internal conflict, leaving her "all tangled up with [herself]." P3 experienced confusion, explaining that she went through "a bit of an identity crisis," questioning, "Do I not have ADHD? Is it autism? What is this?" Similarly, P4 shared her thoughts: "At some point, you start to think, either I'm part of a mass hysteria, or there's really something wrong."

Participants frequently encountered invalidating external feedback, causing a divide between their internal reality and external perceptions. This internal turmoil disrupted their self-concept, emphasizing the critical need for self-understanding and clarity as they struggled to navigate their internal worlds.

Expanding Understanding

Influencers shaped participants' perceptions of NDCs, broadening understanding beyond stereotypes. Social media provided diverse and nuanced representations, challenging oversimplified views. For instance, P6 mentioned that she had to "shake off those stereotypes" and explained: "I ended up on TikTok and came across people with ADHD talking about their symptoms and the less known aspects beyond just a hyper ten-year-old boy." P2 expanded her understanding of ADHD by "seeing different forms," while P1 learned about "a subtype of OCD." Similarly, P5 gained insights into how NDCs manifest differently in women. P9 highlighted the importance of recognizing ADHD's complexity, stating, "It's more than just the stereotypes. It's actually quite a complex thing." Interactions with influencers provided validation, broadened perspectives, and fostered a deeper understanding of neurodiversity, encouraging youth to view conditions through a more informed lens.

Linguistic Empowerment

Interviews revealed social media played a crucial role in helping nine participants understand their inner selves, primarily by introducing and disseminating new terminology.

P4, for instance, describes neurodiversity as “a term [she] only learned a few years ago.”

Similarly, P1 expressed:

Suddenly you hear a term for something you experience and struggle with, something I always thought was just part of me or something stupid I did not know how to change and then you realize that other people experience it too... there is literally even a term for it. That gives a (...) a feeling of recognition.

Participants learned terms and concepts such as: "executive dysfunction"; "gender bias"; "underdiagnosis"; "AuDHD"; "masking"; "scripting"; and "neurodiversity". Influencers provided participants with the jargon needed to articulate their internal experiences. The process of understanding the inner self involved navigating significant internal struggles. However, experiencing the freedom to explore one's identity without dismissal transformed this journey into one of self-acceptance. Participants struggled to cope with their internal realities. However, engaging with influencers and encountering specialized jargon helped them externalize their thoughts and feelings. This externalization allowed participants to create a sense of distance from their internal chaos. This distance enabled individuals to reflect on their experiences more objectively, facilitating a deeper understanding and integration of these experiences into their self-concept.

Theoretical Implications and Conclusion

The findings in Chapter One highlight the significant influence of influencer content on the perceptions of mental health and neurodiversity among Dutch female late-adolescents. Participants' evolving views support the theory that influencers' personal narratives shape adolescents' understanding of mental health and NDCs (Murphy Kelly, 2023; Rettew, 2024;

Leung et al., 2022; Vrontis et al., 2021). This study addresses the societal concern regarding the impact of influencer content on youths who self-diagnose. While existing literature suggests adolescents might misinterpret normal behaviors as symptoms, this study shows participants moved from stigma and stereotypes to a more nuanced understanding through influencer content. Chapter One revealed that participants, after experiencing prolonged unrecognized symptoms, gained the language to articulate their struggles, countering the fear of overidentification (Foulkes & Andrews, 2023). This theme of linguistic empowerment aligns with Social Construction Theory, which posits that reality is shaped through discourse and social interactions (Longhofer & Winchester, 2023). According to this theory, shared understandings within online communities create unique perceptions of reality.

In conclusion, the interaction between social media and adolescent mental health exemplifies Social Construction Theory principles. Influencers facilitate discourse that allows adolescents to construct their realities, highlighting social media's potential for empowerment and validation. However, a critical approach to content consumption is necessary to avoid overidentification and self-diagnosis. These insights set the stage for examining how contextualizing newfound terminology within personal narratives aids in resolving inner turmoil and fostering genuine self-understanding in the next chapter.

Making Sense of Inner Chaos

Chapter One suggested that linguistic empowerment helps individuals express their experiences. However, the resolution of underlying turmoil is not achieved by simply having the right terms. True understanding is required to be contextualized within one's life history, personal circumstances, and broader influences. Self-understanding seemed to require introspection. For inner chaos to be alleviated by linguistic empowerment, new insights were integrated into one's self-concept and reconciled with lived experiences to achieve a sense of belonging.

Recognition and Validation

Nine participants recognized themselves in influencer content, resonating with shared experiences, and finding validation. P1 found influencers "who experience that exact same thing." P4 illustrated how influencers reenact everyday scenarios relatable to individuals with ADHD: "You see someone from a point-of-view perspective." Familiarity and specificity prompt recognition. Participants discovered shared struggles and behaviors in the content, reflecting their own experiences. This transformed personal challenges into shared narratives and validated their feelings and behaviors. This process resulted in validation. P5 concluded, "I'm not the only one experiencing that" and P6 realized, "I'm not making this up." Influencers provide participants comfort and reassurance by showing that others share their experiences. P6 explains, "[TikTok] has definitely helped with my own mental health, I think. Because it was just... I finally had an explanation for why I did the things I did and such. And I found that comforting." This highlights the powerful role of social media in shaping self-perception, ultimately fostering a supportive environment for those who struggle and desire to make sense.

Expanding Knowledge

Participants desired to make sense of their inner chaos. Nine participants delved deeper into complex information to understand neurodiversity. For example, P1 embarked on a learning journey, which led to continuous research and expanded knowledge. P1 explains social media was “[a] real trigger to start reading intensively about [autism] on the internet.” P8 states, “[She] really recognized [herself] in [content]” and “she [started] doing more and more research.” P5 illustrates, “[She] looked up a lot about ADHD in women, because it’s so different from what’s commonly known about ADHD.” P4 also spent time on self-education and therefore thinks self-identification “[is] more of a slow process.” By engaging with influencer content, and conducting personal research, participants gained comprehensive insights, increasing self-awareness and confidence in their self-understanding.

Accumulation of Evidence

While participants gained more confidence in their self-understanding, participants experienced moments of realization prompted by accumulation of evidence. P5 noted that encountering many relatable videos made her think, “It gets a bit suspicious.” Similarly, P7 described how frequent relatability led to a reevaluation of her own experiences: “It’s so frequently relatable that you start to think, hmm, maybe it’s not just a coincidence... But when you come across it often and it’s combined with other signs, then you start to think, okay, yeah, maybe so.” Moments of realization occurred when individuals identified similarities between their behaviors and the content they consumed. For example, P3 recounted multiple instances of thinking, “I have this too,” viewing these acknowledgments as further evidence supporting their self-diagnosis. Recognizing patterns plays a critical role in expanding participants’ understanding of neurodiversity. Such realizations not only validate their self-assessment but also encourage them to seek professional evaluation and support, marking significant milestones in their journey towards making sense.

Connecting the Dots and Self-Identification

Claiming a label after accumulating evidence provides a framework for understanding experiences and behaviors. Through exposure to nuanced content on neurodiversity, participants like P1, P3, and P4 found ways to comprehend their past actions, often recognizing traits of ADHD or autism. This understanding helped them view challenges and behaviors through the lens of mental health conditions. Social media played a key role, leading to validation and clarity in embracing their neurodivergent identities. P1 explained, “That did kind of complete the puzzle and made me understand myself very well.” P2 found clarity in “adding everything together and thinking, yes, maybe I do have ADHD after all.”

Theoretical Implications and Conclusions

Chapter Two reveals that influencer content aids self-recognition and validation, helping individuals define their experiences. Algorithms enhance exposure to relevant content, resonating with personal experiences and potentially leading to self-diagnosis. However, participants use social media as a starting point for deeper exploration rather than hastily claiming a neurodivergent label. This challenges Dr. Katzenberg's suggestion that youth might prematurely self-diagnose based on limited information. Instead, the study indicates that youth cautiously gather extensive information.

The study also challenges concerns from Foulkes & Andrew (2022) about overinterpretation. Increased symptom awareness helps in understanding mental health rather than causing anxiety. Participants adopt labels that clarify their experiences, transforming their self-concept in a way that makes sense. The study underscores there is a nuanced journey toward self-awareness and mental health understanding.

Existing literature outlines two perspectives on mental health: the medical model and the neurodiversity movement. This study's findings align more with the neurodiversity perspective, showing participants use social media to affirm their identities, valuing diversity

and personal understanding over medical pathologization. These findings highlight social media's role in fostering self-recognition and validation among adolescents, helping them understand and embrace their neurodivergent identities. The next chapter will explore how adolescents use these insights to develop strategies for managing their lives. The next chapter explores how adolescents apply newfound insights to develop strategies for living beyond inner chaos and navigating their realities.

Learning How to Live Beyond Inner Chaos

The previous chapters revealed how participants used social media to expand their understanding and articulate their mental health experiences. Chapter Three delves into how participants applied their insights to develop coping strategies, learning how to live beyond the inner chaos of neurodivergent identities, and navigate the ongoing challenges of adapting to and thriving within their realities.

Resilience Strategies

Self-diagnosis enhances self-understanding and equips individuals with resilience strategies. Participants utilized specific strategies to enhance their ease and stability in daily life. The study identified four key approaches: Managing Expectations, Positive Reframing, Accommodating Needs, and Receiving Support and Resources. By adopting these approaches, adolescents maintain stability and rebound from life's challenges, learning to live beyond inner chaos. P1 exemplifies she manages expectations at work. When assigned an task, she remarked, “You are asking the person with ADHD to create structure out of chaos,” setting expectations about her performance. Despite challenges, P1 maintained a positive outlook, expressing hope for the future, “[she is] not discouraged by thoughts like 'will I ever succeed?’” Her view of the future remains “very positive.” Meanwhile, P3 embodies accommodating needs, “[her] priority is actually to prioritize [herself] and not always do what others want.” Lastly, receiving support and resources is evident as P4 receives support from family, enhancing her ability to navigate her condition effectively, exemplified when her mother asked, “Hey, what do you need from me now?” Participants illustrate the practical application of resilience strategies in their lives, enabling them to manage their conditions with greater efficacy.

Personal development: Self Mastery, Self-Acceptance and Inner Harmony

Building on resilience strategies, participants embark on a journey of personal development, marked by managing expectations, accommodating needs, and leveraging support. This theme of personal development reflects their pursuit of aspirations, enhancement of capabilities, and transformation—from self-mastery to self-acceptance and inner harmony. All participants, except P9, demonstrated significant strides toward self-mastery by naming and understanding their experiences. They shared stories of self-regulation, self-discipline, skill enhancement, and goal achievement. P7 explained that self-diagnosis made it possible to “try to help yourself a bit with things you have problems with, or to find solutions for them within the framework of [your condition].” P4 expands on this, sharing that self-diagnosis led to “learning [her] own instruction manual. And learning to deal with it.” Understanding their condition allowed participants to practice self-mastery. P3 described managing her life more effectively:

I make sure to keep my daily morning routine somewhat consistent so that my mind doesn't get overwhelmed. When I have to go to work or something, in the beginning, I used to have a very chaotic morning. But now, with what I have in mind, I really have to plan that out steadily for myself. Otherwise, it won't work out. And that's something that has really changed for the better for me, and now I can handle it better.

In addition to self-mastery, six participants showed increased self-acceptance. They felt more at ease, recognized their strengths, and attributed difficulties to their conditions rather than personal failings. This shift reduced self-blame and fostered a more compassionate self-view. For instance, P9 noted, “I notice that I can understand that much better or something. That I think, oh yeah, it's not stupid or lazy or anything like that. But it's just, yeah, how my brain is wired.” Similarly, P5 expressed self-acceptance by embracing less desirable aspects of

herself: “By accepting those more negative aspects, it's more like, okay, this is a part of me.” She added, “You also learn to accept yourself a bit.” P4 and P5 sought strategies online to mitigate symptoms and improve behavioral responses. P6 and P7 advanced in time management. Self-acceptance seemed to foster inner harmony. P1, P4, P5, P6, and P8 reported relief and peace through self-diagnosis, suggesting that inner harmony is a key outcome of self-acceptance and self-management.

Theoretical Implications and Conclusion

Participants in this study highlighted personal development and resilience strategies, aligning with the neurodiversity movement's emphasis on celebrating neurodivergent traits rather than viewing them as deficits (Kapp et al., 2013). The study found that self-diagnosis aids in developing coping mechanisms and resilience, supporting theoretical arguments about its benefits and contrasting with concerns about over-diagnosis. Themes of self-mastery, self-acceptance, and inner harmony challenge the critical views regarding social media's impact on mental health. While the theoretical framework suggests social media may lead to overinterpretation and misunderstanding (Foulkes & Andrew, 2022), participants found it provided valuable resources and inspiration for personal growth and self-management. This suggests a nuanced impact of social media, highlighting its potential as a supportive resource when used effectively.

Conclusion

This study explored how influencer content impacts the mental health perceptions of Dutch late-adolescents, particularly their self-identification with NDCs and its impact on their daily lives. Findings revealed a journey from experiencing inner chaos to achieving clarity: externalizing inner turmoil, making sense of it, and learning how to live with it. Influencers provided language and discourse that helped adolescents articulate their struggles, aligning with Social Construction Theory. Despite concerns about misinterpretation and hasty self-diagnosis, adolescents used this content cautiously, deepening their understanding rather than hastily adopting labels. Findings showed that influencers effectively challenged stereotypes and provided relatable narratives, helping participants recognize and understand their neurodivergent traits, leading to cautious and well-considered self-diagnosis. Algorithms amplified mental health content, significantly influencing self-identification through accumulated evidence. Social media facilitated self-mastery, personal growth, inner harmony and resilience strategies. The study revealed a more positive narrative amid concerns of misinterpretation and overinterpretation.

Potential alternative explanations were also considered. Adolescents may experience confirmation bias⁵, seeking content that validates their existing suspicions. The placebo effect⁶ might lead to perceived improvements in self-understanding simply because they believe the content is helpful. Additionally, societal pressures, such as high-performance demands, might drive adolescents to seek explanations for their struggles, with identifying NDCs providing explanation or relief. These alternatives highlight the complexity of the issue.

⁵ Confirmation bias is the inclination to validate one's original beliefs and to ignore evidence that challenges them. This bias functions unconsciously in human thought processes (Nickerson, 1998).

⁶ The placebo effect is an occurrence where a non-effective intervention leads to positive changes in a person's condition because of their belief in the intervention's effectiveness (Chua & Pitts, 2015).

Future research could examine the impact of mental health influencers on youth prone to self-diagnosis, using larger, diverse samples and mixed methods. Investigating the influence of social media across various demographic groups and cultural contexts will enrich findings. It would also be valuable to explore the roles of gender and intelligence. The study showed that nearly all participants were highly educated females, hinting that intelligent females might mask symptoms and be underdiagnosed. Conversely, those with lower education might misinterpret their symptoms. Examining these factors can provide insights into how social media affects adolescents' mental health perceptions and behaviors.

For policy, clear guidelines are needed to ensure responsible mental health content on social media. Schools could teach critical thinking skills for navigating social media. Mental health professionals would benefit from training, helping them approach self-diagnosing youths with caution rather than immediate dismissal. This approach will help adapt mental health practices to social media's growing influence and provide better support for accurate diagnoses and appropriate care. While it is essential to navigate risks of self-diagnosis, social media could be a valuable tool for mental health education and support. This aligned with the neurodiversity movement's advocacy for acceptance and understanding of NDCs. Public discourse should balance acknowledging youth concerns with avoiding hasty dismissals.

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Appendix A

Reflection on Interdisciplinarity

This thesis adopts an interdisciplinary perspective to address the complex issue of youth self-diagnosis of NDCs influenced by social media, particularly in a society increasingly aware of mental health. This multifaceted topic requires a comprehensive approach that transcends the limitations of a single discipline. A monodisciplinary lens would only illuminate part of the problem, failing to capture its full complexity.

Interdisciplinary Approach

Understanding the intricate dynamics of adolescent self-diagnosis necessitates insights from various disciplines. By integrating perspectives from media and communication, psychology, sociology, and public health, the study aims to offer a holistic understanding of the phenomenon. Media and communication studies help elucidate the role of influencers in shaping adolescents' perceptions, while psychology delves into the behavioral and cognitive processes behind self-diagnosis. Sociology provides insights into societal norms and the stigma associated with mental health, and public health addresses the broader implications of self-diagnosis on community health. Combining these perspectives allows the study to answer the research question comprehensively.

Arguments for Interdisciplinarity

The central aim of the research is to explore how TikTok influencer content affects mental health perceptions and self-identification with NDCs among 18 to 25-year-old Dutch adolescents. To achieve this, it is crucial to understand the psychological, sociological, media-related, and public health implications of the phenomenon. An interdisciplinary approach is well-suited to the qualitative research question and inductive research design. It encourages an open-minded perspective, willing to cross boundaries and synthesize

knowledge from different fields.

Insights from Multiple Disciplines

Insights from various scientific fields significantly contribute to understanding the problem under investigation. Psychology explains how adolescents process information and their developmental susceptibility to influence, which is vital for comprehending their propensity to self-diagnose. Sociology shows how social labels and interactions shape adolescents' realities and identities, particularly through social construction and labeling theories. Media studies reveal the mechanisms of influencer culture and algorithmic influence, demonstrating how content is tailored to and impacts adolescent behavior. Health sciences highlight the broader public health impact and ethical concerns of self-diagnosis. By integrating these perspectives, the study provides a complete picture of the issue.

Relevance of Specific Disciplines

Theoretical insights from psychology, sociology, media studies, and public health sciences are meaningful for the research question. Psychology is fundamentally linked to the phenomenon of self-diagnosis of NDCs because it provides critical insights into how adolescents process information, their developmental vulnerabilities, and their cognitive and emotional responses. This connection helps explain why and how young people might identify with certain mental health conditions based on their interactions with social media content and influencers. Sociology helps understand how societal norms and interactions shape adolescents' identities and perceptions. Media studies shed light on the influence of social media and its algorithms that, affecting adolescent behavior. Health sciences emphasize the public health implications, including the risks and benefits of self-diagnosis. Drawing on these disciplines allows for a nuanced exploration of the research question, providing a holistic view of the psychological, social, media-related, and health impacts on adolescents.

Perspectives from Stakeholders

Incorporating perspectives from stakeholders outside academia significantly enhances the understanding of the problem. Observations from mental health experts in youth practice offer real-world insights and highlight emerging trends, such as the use of TikTok for self-diagnosis, which academic research has yet to fully capture. Public discourse and media discussions frame this self-diagnosis trend as problematic, emphasizing the risks of overinterpretation and misdiagnosis among adolescents. These societal perspectives raise awareness and generate dialogue, underscoring the gap between rapidly evolving social behaviors and slower-paced scientific investigation. By integrating these external viewpoints, the thesis bridges the gap between scientific research and real-world practices, ensuring the investigation is grounded in both empirical evidence and practical relevance.

Importance of Youth Perspectives

The perspectives of youth are paramount in bridging the gap between science and practice concerning mental health and neurodivergence. Their firsthand experiences with mental health struggles, the impact of social media, and the process of self-identification provide crucial insights that drive the understanding of the study's topic. Qualitative interdisciplinary research focused on the individual allows for an in-depth understanding of personal experiences, behaviors, and perspectives, capturing the nuances of individual contexts and meanings. While public discourse often alleges that youth self-diagnosis through social media is problematic, the study gives voice to adolescents, highlighting their real-world implications and experiences. Their insights reveal the significant impact of influencer mental health content and the self-diagnosis process, emphasizing the importance of their perspectives in understanding the phenomenon.

In conclusion, the interdisciplinary approach adopted by the thesis allows for a comprehensive exploration of the complex issue of youth self-diagnosis of NDCs influenced by social media. By integrating insights from psychology, sociology, media studies, and public health, and incorporating perspectives from outside academia, the study provides a holistic understanding of the phenomenon, addressing multiple aspects of the issue.

Appendix B

Participants' Characteristics

Appendix B

Participant Characteristics

Participant ID	Age	Gender	Geographical Region	Education Level	Formal Diagnosis	Informal Diagnosis	Mental Health Issues
P1	23	Female	Zuid-Holland	Higher education	OCD ^a , ADHD ^b	Autism, GAD ^c	Academic stress, overwhelm from obligations, sensitivity to stimuli
P2	20	Female	Groningen	Vocational education	Eating disorder	ADHD ^b	Negative self-image,
P3	23	Female	Gelderland	Vocational education	High sensitivity	ADHD ^b	Grief processing, depression
P4	23	Female	Utrecht	Higher education	ADHD ^b , GAD ^c	Autism	Academic stress, sensitivity to stimuli
P5	25	Female	Zuid-Holland	Higher education	ADHD ^b		Stress from overcommitment
P6	18	Female	Utrecht	Higher education	ADHD ^b , Autism		
P7	24	Female	Noord-Holland	Higher education		ADHD ^b	
P8	22	Female	Utrecht	Higher education	ADHD ^b		Social anxiety, depression
P9	23	Female	Utrecht	Higher education	ADHD ^b		
P10	25	Female	Zuid-Holland	Higher education	ADHD ^b , Borderline personality disorder		

Note. All participant identifiers (e.g., P1) have been anonymized; gender is based on self-identification; data in this table are derived from the author's own qualitative study.

^a Obsessive-Compulsive Disorder

^b Attention Deficit Hyperactivity Disorder

^c Generalized Anxiety Disorder

Appendix C

Inclusion and Exclusion Criteria of Study Sample

Appendix C

Inclusion and Exclusion Criteria for Study Sample

Criterion	Inclusion	Exclusion
Age	18-25 years	Under 18 or over 25 years
Legal Status	Legally recognized as adults capable of providing informed consent independently	Minors or individuals not capable of providing informed consent independently
Residence	Adolescents living in the Netherlands	Adolescents not living in the Netherlands
Gender	No distinction in gender during recruitment; however, only women who had self-diagnosed were found	
Social Media Engagement	Active engagement with TikTok or Instagram and interaction with influencer mental health content	Lack of active engagement with TikTok or Instagram and no interaction with influencer mental health content
Self-Diagnosis	Adolescents who have self-diagnosed their mental health condition(s) based on social media content	Adolescents who never self-diagnosed their mental health conditions based on social media content
Medical Diagnosis	Whether the self-diagnosis was made by a professional was irrelevant, inclusion allowed irrespective of medical confirmation	

Appendix D

Interview Guide

Appendix D

Interview Guide

Onderwerp	Subonderwerp	Voorbeeldvragen
Algemene informatie	1. Voorstellen	- Kun je iets over jezelf vertellen?
Blootstelling aan TikTok en content over mentale gezondheid	2. Gebruik van TikTok (frequentie en duur) 3. Content en influencer voorkeuren 4. Ontdekken van content over mentale gezondheid 5. Impactvolle contentervaringen	- Wat vind je zelf interessant en leuk aan social media met korte video's? - Kun je de dagelijkse routine met dat soort social media beschrijven, inclusief wanneer en waarom je besloot om Instagram of TikTok te gebruiken? - Hoe verloopt een typische sessie op Instagram of TikTok? - Kun je mij vertellen over de content die jouw interesse wekt op TikTok? - Wat heb jij gezien op de kanalen van mental health influencers? - Wat was je eerste ervaring met het horen over mentale gezondheid en symptomen op social media zoals TikTok en Instagram? - Ging jij op zoek naar meer van dat soort content? - Hoe kwam jij content over neurodiversiteit van influencers tegen? - Zocht jij actief naar content over mentale gezondheid, of kwam je het toevallig tegen? - Kun je een situatie uit het verleden beschrijven waarin je content over neurodiversiteit

		<p>bekeek waarin je jezelf herkende?</p> <ul style="list-style-type: none"> - Wat heb je van jezelf herkent in de verhalen van anderen? - Wat deed dat met je?
Perceptie op mentale gezondheid en neurodiversiteit	<p>6. Percepties van neurodiversiteit en mentale gezondheid vóór TikTok-gebruik</p> <p>6. Impact van TikTok content op mental health awareness</p> <p>7. Evolutie van begrip</p> <p>8. Rol van influencers</p> <p>9. Support en hulp</p>	<ul style="list-style-type: none"> - Wat was jouw kijk op neurodiversiteit en mentale gezondheid voordat je TikTok gebruikte? - Terugkijkend, hoe denk je dat jouw eerste gedachten over neurodiversiteit en mentale gezondheid zijn gevormd? - Hoe zou je de houding ten opzichte van mentale gezondheid in jouw omgeving beschrijven? - Hoe hebben deze houdingen jouw eigen kijk op mentale gezondheid beïnvloed voordat je TikTok of Instagram ging gebruiken? - Terugdenkend aan de periode voordat je TikTok en Instagram gebruikte, hoe zou je jouw bewustzijn en begrip van neurodiversiteit en mentale gezondheid omschrijven? - Kun je delen hoe influencers nieuwe perspectieven of informatie over neurodiversiteit aan je hebben geïntroduceerd? - Wat heb je gedaan met deze content? - Kun je beschrijven hoe jouw begrip van neurodiversiteit en mentale gezondheid is gegroeid sinds je TikTok of Instagram bent gaan gebruiken? - Wat is vandaag de dag jouw kijk op neurodiversiteit en mentale

		gezondheid?
Influencers en zelfidentificatie	<p>10. Gevallen van zelfidentificatie</p> <p>11. Het proces van zelfidentificatie</p> <p>12. De rol van influencers bij zelfidentificatie</p> <p>14. Ondernomen acties in de fysieke wereld</p>	<p>- Hoe hebben influencers, bijgedragen aan jouw begrip van neurodiversiteit?</p> <p>- Hoe zie jij de mensen die online korte video's posten over mental health als persoon?</p> <p>- Wat denk jij over hen?</p> <p>- Wanneer heb je de stap genomen om een 'keuze' te maken over je eigen mogelijke neurodivergentie?</p> <p>- Hoe is dat verlopen?</p> <p>- Welke stappen heb je verder ondernomen? Ben je bij een arts geweest?</p> <p>- Hoe beoordeel je de nauwkeurigheid en volledigheid van informatie over neurodivergentie die online wordt gedeeld?</p> <p>- Ben jij een TikTok community of hashtags tegengekomen die gerelateerd zijn aan jouw reis naar zelfidentificatie?</p> <p>- Wat is jouw ervaring met een online community op TikTok of Instagram?</p>
Gebruik van diagnose	<p>15. Functie van label</p> <p>16. Toepassing van label</p> <p>17. Acceptatie van label</p> <p>18. Perspectief op label</p>	<p>- Wat is de functie van kunnen zeggen dat jij een neurodivergente conditie hebt?</p> <p>- In welke context moet jij meestal zeggen dat je een bepaalde conditie hebt?</p> <p>- Hoe reageren anderen hierop?</p> <p>- Zijn er weleens mensen geweest die je wilden overtuigen dat je een andere of geen diagnose hebt?</p> <p>- Hoe maak jij onderscheid tussen wat gewone ervaringen zijn of wat</p>

Gevolgen voor het dagelijkse leven	19. Impact op het dagelijkse leven	<p>bij een diagnose hoort?</p> <ul style="list-style-type: none"> - Zie jij je diagnose als iets medisch of als iets om te vieren? - Heeft je diagnose gevolgen gehad voor je werk, inkomen, schoolwerk of persoonlijke sociale leven? - Is wat je belangrijk vindt in het leven veranderd door je diagnose? - Wat heeft je diagnose gedaan met je gevoel van zekerheid of onzekerheid? - Kun je vertellen over veranderingen die je hebt opgemerkt in je dagelijkse routine na het zien van influencer mental health content? - Heeft je diagnose impact gehad op hoe je voor jezelf zorgt? - Heb je levensstijlveranderingen doorgemaakt nadat je dacht “het dit heb ik”? - Hoe bewust ben jij je nu van je mentale dagelijkse staat vergeleken met vroeger? - Kun je voorbeelden geven van hoe jezelf herkennen in een diagnose je heeft geholpen? - Heeft dit je ook belemmerd? - Welke impact had je verkenning van neurodiversiteit op je zelfinzicht en persoonlijke ontwikkeling? - Heb je veranderingen waargenomen in je sociale interacties die je toeschrijft aan een breder begrip van neurodiversiteit? - Zijn er hulpmiddelen of ondersteuning die je hebt gevonden of geraadpleegd na het
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		<p>verkrijgen van meer inzicht over neurodiversiteit?</p> <ul style="list-style-type: none"> - Kun je vertellen over veranderingen in je vaardigheden of kwaliteiten? - Hoe is je aanpak voor het aanpakken van dagelijkse taken beïnvloed door de online content die je zag? - Hoe voel je dat je algehele welzijn is beïnvloed door je verkenning van neurodiversiteit? - Heb je bepaalde gedachten over het belang van het krijgen van een formele diagnose en het bespreken van behandelopties met een expert? - Reflecterend op je weg naar zelf-diagnose, hoe zie jij de balans tussen de voordelen en uitdagingen van zelf-diagnose?
Toekomst	20. Hoop voor de toekomst	<ul style="list-style-type: none"> - Hoe ga je om met verlangens die je hebt voor de toekomst? - Wat was voor je diagnose je hoop voor de toekomst? - Wat is nu je hoop voor de toekomst?
Vragen van andere onderzoeker	21. Motivatie	<ul style="list-style-type: none"> - Wat motiveerde je om een diagnose te stellen? - Waarom dacht je dat een diagnose je ging helpen? - Ken je andere mensen met dezelfde diagnose?

Appendix E

Stipulative Definitions and Operationalization

Appendix E1

Stipulative Definitions of Central Concepts

Central Concept	Stipulative Definition
Mental Health Influencer	An individual with a significant following on social media platforms who shares content that impacts their audience's perceptions, behaviors and decisions, particularly in the context of mental health and self-diagnosis
Social Media	Online platforms and applications where users create, share and engage with content, facilitating interactions and the dissemination of information, including mental health narratives and discussions
Content	Text, images and videos shared on social media platforms like Instagram and TikTok, focusing on personal experiences and self-help resources related to mental health and self-diagnosis
Neurodiversity	Variations in human brain function and behavior, some celebrate these variations and see them as natural variations and some see variations in human brain function as disorders.
Self-Identification	Process by which individuals label themselves based on symptoms or traits they believe they exhibit, influenced by content encountered on social media
Overinterpretation	The tendency to attribute normal emotional experiences to specific mental health conditions
Algorithm	A set of processes and technological mechanisms used by social media platforms to personalize content based on user interactions and preferences, shaping the information users are exposed to

Appendix E2

Central Theoretical Concepts and Operationalization

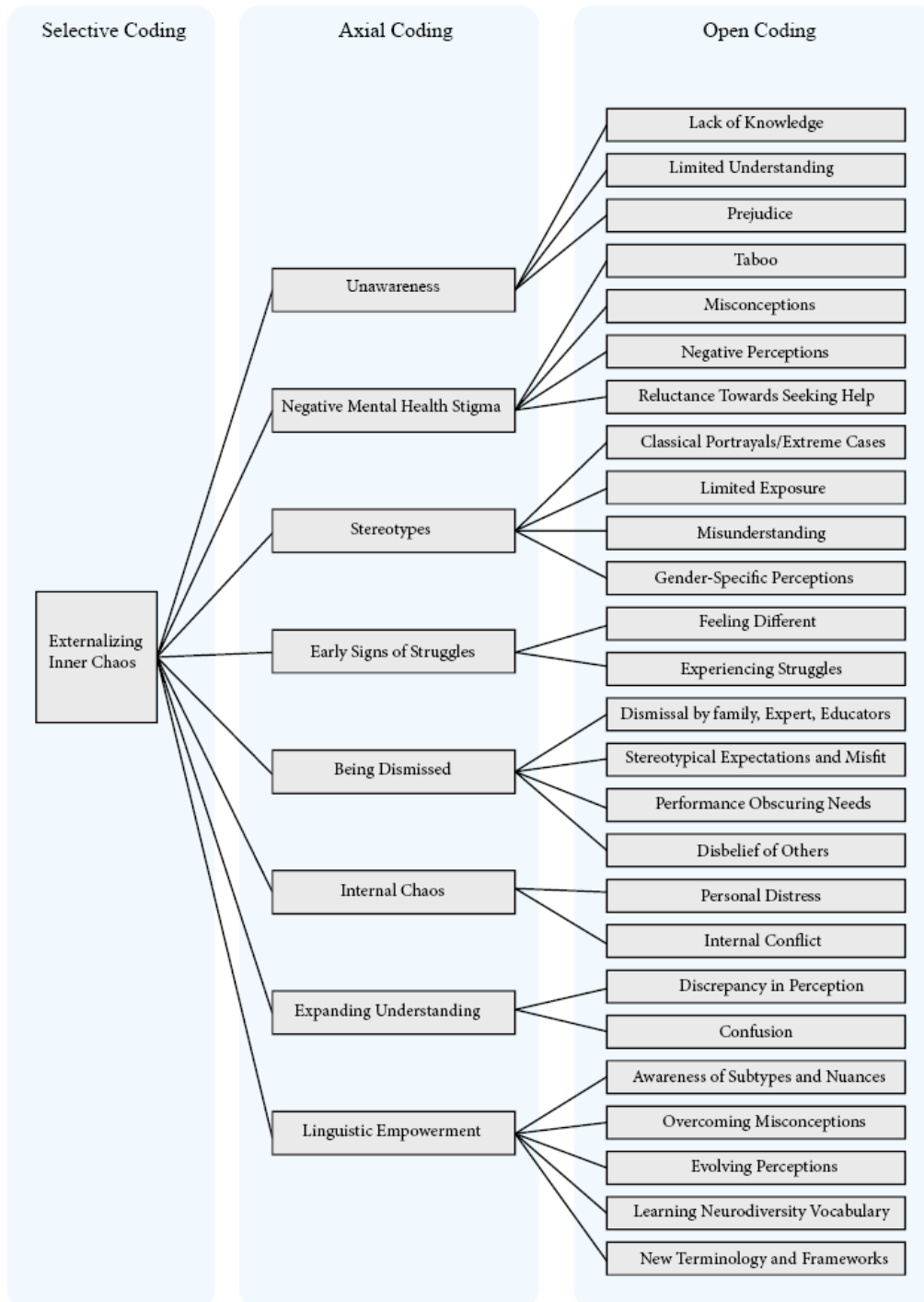
Central Theoretical Concepts	Operationalization
Role of Influencers	The role of influencers was operationalized into specific interview topics to investigate their impact on adolescents' mental health perceptions and behaviors. This included questions on exposure to influencer content, changes in perceptions, self-identification, actions taken offline, and involvement in online communities.
Algorithmic Influence	The concept of algorithmic influence was operationalized into specific interview topics to investigate how a recommendation system shapes adolescents' exposure to mental health content and its impact on their perceptions and behaviors. This included questions aimed at understanding: discovery of content, engagement with content and influence of algorithmic influence on perceptions.
Overinterpretation	The concept of overinterpretation was operationalized in the interview guide to explore how adolescents interpret mental health content on social media and the risk of misdiagnosis. This included questions focused on: participants' first experiences with mental health content, identification, resonance, reasons for resonance, perception changes and misinterpretation
Self-Diagnosis Benefits	The concept of self-diagnosis benefits was operationalized in the interview guide to explore the positive aspects of adolescents identifying mental health conditions through social media. These involved questions targeting perceived benefits, social and emotional impact, community involvement and balancing benefits and challenges
Social Construction	The concept of social construction was operationalized in the interview guide to explore how adolescents' understanding, and perceptions of mental health and neurodiversity are shaped through their interactions with social media. This included questions aimed at understanding: formation of initial thoughts, exposure to new perspectives and evolution of understanding.
Labeling Theory	The concept of Labeling Theory was operationalized in the interview guide to explore how adolescents label their mental health experiences and the influence of these labels on their identity and behavior. The interview guide contained questions about the self-identification process, instances of self-identification, how participants distinguish between normal experiences and those associated with a mental health diagnosis, the effect of labeling oneself on daily life, social interactions and self-perception.

Belief in the Medical Model	The belief in the medical model was operationalized in the interview guide to explore adolescents' views on mental health as conditions requiring medical intervention versus natural variations. This included questions about medical vs. celebratory views, impact on daily life, importance of support and resources
Belief in the Neurodiversity Movement	The belief in the neurodiversity movement was operationalized in the interview guide to explore adolescents' views on neurodiversity as natural variations to be embraced rather than pathologies to be corrected. This included questions aimed at understanding: celebratory views and perceptions of neurodiversity

Appendix F Coding Tree

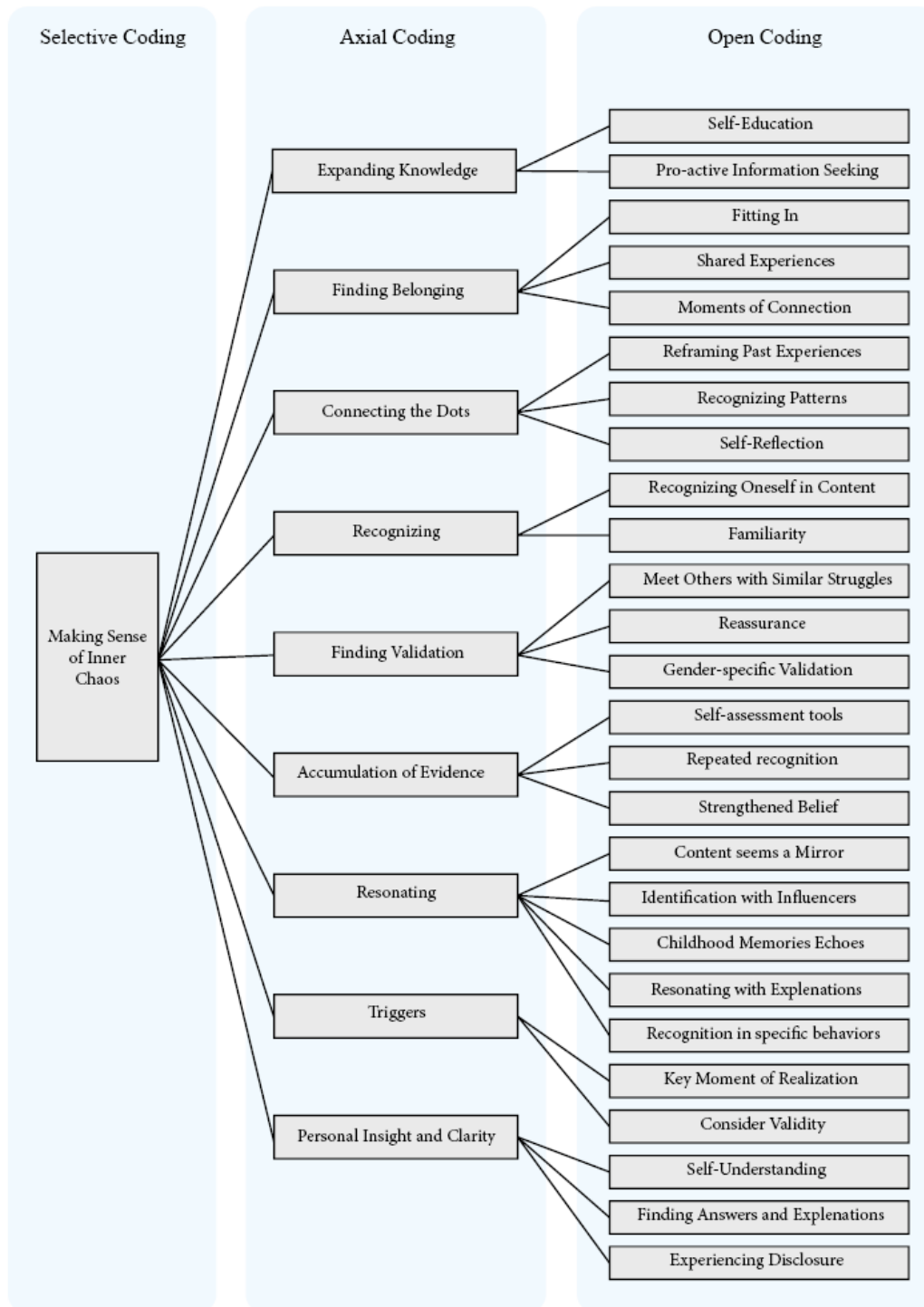
Appendix F1

Coding Tree Research Question 1



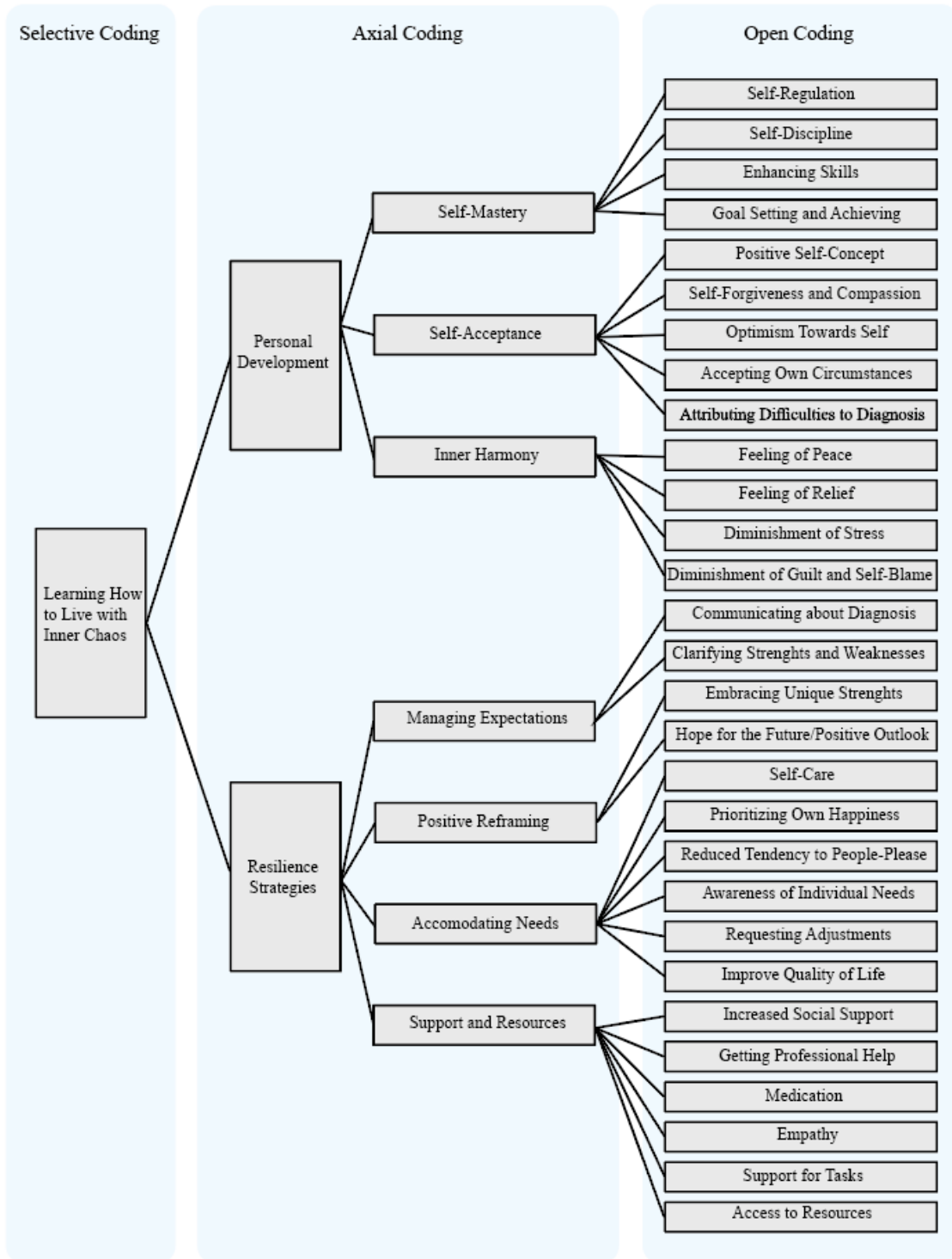
Appendix F2

Coding Tree Research Question 2



Appendix F3

Coding Tree Research Question 3



Appendix G

Informational Letter and Informed Consent Form

Appendix G1

Informational Letter

Informatiebrief

How does exposure to influencer social media content on TikTok and Instagram influence the perceptions of mental health and neurodiversity among 18 to 25-year-old Dutch adolescents, their tendency to self-identify with neurodivergent conditions (NDCs), and the subsequent implications for their lived experiences?"

Hoe beïnvloedt blootstelling aan content van influencers op TikTok en Instagram de percepties van geestelijke gezondheid en neurodiversiteit onder Nederlandse adolescenten van 18 tot 25 jaar, hun neiging om zichzelf te identificeren met neurodivergente aandoeningen (NDC's), en de daaropvolgende implicaties voor hun ervaringen in het dagelijks leven?

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Beste potentiële deelnemer,

Ik vraag je deel te nemen aan een onderzoek waarbij ik wil begrijpen hoe het zien van *social media content* over mentale gezondheid, gemaakt door *mental health influencers*, van invloed kan zijn op degenen die deze content op TikTok tegenkomen. Ik ben benieuwd naar de invloed van zulke content op hoe Nederlandse adolescenten in de leeftijd van 18 tot 24 jaar kijken naar mentale gezondheid. Daarnaast ben ik ook benieuwd naar hoe het zien van de influencer TikTok content over neurodiversiteit de neiging beïnvloedt van zelfidentificatie met neurodivergente condities zoals adhd en autisme, en welke impact dit heeft op het dagelijkse leven.

Voordat je een beslissing maakt over deelname, is het belangrijk om deze informatiebrief te lezen. Heb je na het lezen van deze informatiebrief nog vragen, dan kan je contact opnemen met mij als onderzoeker via bovenstaande contactgegevens.

Opzet van het onderzoek

Het doel van het onderzoek is om te onderzoeken hoe het bekijken van *influencer mental health content* op TikTok invloed heeft op de manier waarop Nederlandse adolescenten in de leeftijd van 18 tot 25 jaar kijken naar mentale gezondheid. Het onderzoek focust zich daarbij ook op verkennen of blootstelling aan zulke content van invloed is op je neiging om te

overwegen of je zelf mogelijk neurodiverse eigenschappen hebt die kunnen horen bij bijvoorbeeld adhd of autisme. Verder wordt onderzocht hoe veranderingen in hoe je kijkt naar mentale gezondheid en zelfidentificatie met een conditie zoals adhd of autisme van invloed kunnen zijn op je dagelijkse leven. Het onderzoek betreft een studentonderzoek in het kader van de thesis voor mijn master *Youth Development & Social Change*. Het onderzoek richt zich niet op de mentale gezondheidstoestand van deelnemers, maar legt de nadruk op perspectieven, zelfidentificatie en ervaringen in het dagelijkse leven. Het doel is om inzichten te verkrijgen, zonder in te gaan op de eigen mentale gezondheid. Het hoofddoel is inzicht verwerven in de gedachten, gevoelens en ervaringen van de deelnemers. We vermijden het bespreken van mentale gezondheidsproblemen en de gezondheidsstatus

Wat wordt van je als participant verwacht?

Ik vraag je om deel te nemen aan een diepte-interview dat ongeveer 45 minuten tot één uur van je tijd vraagt. Tijdens het interview ga ik met je in gesprek over:

1. Blootstelling aan TikTok content over mentale gezondheid
2. Perceptie op mentale gezondheid en neurodiversiteit
3. Jezelf herkennen in de verhalen van influencers
4. Impact van zelfidentificatie op je dagelijks leven

Tijdens het interview stel ik vragen op basis van de bovenstaande vier onderwerpen. Wanneer je de antwoorden op de vragen later wil inzien, is dit mogelijk en kan je contact met mij opnemen.

Mogelijke voor- en nadelen van het onderzoek

Het onderzoek kan bijdragen een beter begrip van hoe sociale media invloed heeft op adolescenten. Dit is belangrijk in een tijd waarin adolescenten in toenemende mate naar sociale media wenden voor informatie en steun. Daarnaast kan het onderzoek mogelijk zorgen voor verhoogd zelfbewustzijn. Je kan dit misschien ervaren door actief na te denken over de onderwerpen die zijn besproken.

Compensatie

Voor deelname ontvang je een compensatie, je krijgt €15,00 als blijk van dank.

Vertrouwelijke verwerking van uw gegevens

Ik verricht dit onderzoek onder supervisie van Dr. Jaco Smit. Mijn supervisor is werkzaam binnen de faculteit Sociale Wetenschappen van Universiteit Utrecht. Informatie zoals je telefoonnummer en e-mail worden alleen gebruikt om contact met je op te nemen tijdens het onderzoek. Je persoonsgegevens worden op een andere computer opgeslagen dan de onderzoeksgegevens zelf. De computer waarop je persoonsgegevens worden opgeslagen is beveiligd volgens de hoogste normen en alleen ik als onderzoeker heb toegang tot deze gegevens. Ook de gegevens zelf worden beveiligd met een beveiligingscode.

De informatie die je mij middels het interview verstrekt zal alleen worden gebruikt om mijn onderzoeksvraag te beantwoorden. Met uw schriftelijke toestemming wordt tijdens het interview een geluidsopname gemaakt, op basis van deze geluidsopname kan ik later mijn data-analyseren en bevindingen rapporteren. Met de opname en uw antwoorden zal zorgvuldig worden omgegaan. Beide zijn vertrouwelijk en worden alleen verwerkt en gebruikt voor het onderzoek. Tijdens het interview hoeft je geen persoonlijke informatie te delen. Zowel je naam als wat je vertelt wordt **geanonimiseerd**. Je bent niet te herleiden in mijn onderzoeksrapport. Identificeerbare gegevens worden alleen opgeslagen gedurende het

onderzoeksproject. Geluidsopnames, transcripten en data van mijn onderzoek worden veilig bewaard via YODA. Het verzamelen van uw gegevens wordt gedaan op basis van de Algemene Verordening Gegevensbescherming. Mijn thesis wordt intern opgeslagen voor een periode van minimaal tien jaar. Dit is in overeenstemming met de richtlijnen van de Universiteiten van Nederland (voorheen VSNU). Je kan informatie vinden over persoonlijke data op <https://autoriteitpersoonsgegevens.nl/nl/onderwerpen/avg-europese-privacywetgeving>.

Geanonimiseerde data van dit onderzoek zullen op termijn opgenomen worden in een zogenoemde open access database, wat betekent dat ook andere onderzoekers deze data kunnen inzien. Alle persoonlijke informatie die u redelijkerwijs zou kunnen identificeren, zal worden verwijderd of gewijzigd voordat de bestanden met andere onderzoekers worden gedeeld of de resultaten openbaar worden gemaakt. Andere onderzoekers kunnen alleen toegang tot deze gegevens krijgen als zij ermee instemmen de vertrouwelijkheid van de informatie te bewaren zoals gevraagd in dit formulier.

Vrijwillige deelname

Wanneer u besluit om deel te nemen aan mijn onderzoek is dit herroepelijk. Het is mogelijk om op elk moment te stoppen zonder het geven van een reden. Mocht u bezwaar maken, dan kan u dit het beste doen voor de data is geanonimiseerd. Het kan onmogelijk zijn om de data nog aan u te koppelen wanneer deze is geanonimiseerd. Wanneer u niet meer wil deelnemen, maak ik gebruik van de tot dan toe verzamelde gegevens, tenzij u mij uitdrukkelijk anders mededeelt. Wanneer u wil stoppen, zijn daar geen consequenties aan verbonden.

Contactgegevens voor vragen en/of klachten

Mocht u vragen, klachten of opmerkingen hebben, dan kan u contact opnemen met mijn onafhankelijke supervisor w.j.smit@uu.nl. Heeft u een officiële klacht over de studie, dan kan u contact opnemen met klachtenfunctionaris-fetsocwet@uu.nl.

Vragen over privacy

Als u vragen heeft over de verwerking van uw persoonsgegevens kunt u deze richten aan privacy@uu.nl. Graag verwijs ik u ook naar de algemene privacyverklaring van de UU: <https://www.uu.nl/organisatie/praktische-zaken/privacy/privacyverklaring>. Meer informatie over privacy kunt u lezen op de website van de Autoriteit Persoonsgegevens: <https://autoriteitpersoonsgegevens.nl/nl/onderwerpen/avg-europese-privacywetgeving>.

Als u na het lezen van deze informatiebrief besluit tot deelname aan het onderzoek verzoek ik u bijgevoegd antwoordstrookje te ondertekenen en in te leveren bij mij als onderzoeker.

Met vriendelijke groet,

Nina Hendrix

Appendix G2

Informed Consent Form

Toestemmingsverklaring

How does exposure to influencer social media content on TikTok influence the perceptions of mental health among 18 to 20 year-old Dutch adolescents, their tendency to self-identification with neurodivergent conditions, and the subsequent implications for their daily lives?

Hoe beïnvloedt blootstelling aan influencer social media content op TikTok de percepties van mentale gezondheid onder 18 tot 24-jarige Nederlandse adolescenten, hun neiging tot zelfidentificatie met neurodivergente condities, en de daaropvolgende implicaties voor hun dagelijks leven?

Document version date: 4-4-2024

Hierbij verklaar ik dat ik de informatiebrief over de studie heb gelezen. Ik ben volledig schriftelijk geïnformeerd over het doel van de studie en de manier waarop data wordt verzameld en verwerkt. Ik verklaar dat ik akkoord ga met het deelnemen aan het onderzoek. Ik mag ten alle tijden stoppen met deelname aan de studie, zonder het geven van uitleg en het ervaren van consequenties.

Naam:

Datum:

Handtekening: