Use of psy discourse on the popular vernacular

A recontextualization analysis on TikTok

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Abstract

Social media has become a safe place where users can discuss taboo topics, like mental health, with the purpose of creating awareness and de-stigmatization. However, online discussions on mental health have caused *psy discourse* to seep into the popular vernacular.

This study aims to analyze how psychiatric terms (specifically *bipolar, narcissist, sociopath, OCD* and *trauma*) are used by TikTok users, the meanings they attribute to them and the contexts in which they occur. I aim to look at how recontextualization has affected the meaning, comparing it to the clinical sense. I also look at the social implications that these online interactions have and how social media communication practices work.

A corpus was created from transcriptions of 150 TikTok videos that were analyzed with AntConc, looking for collocates and patterns in context. These videos were classified into three general categories: *educational, evaluative* and *humorous*. The results were then compared to the definitions found in the DSM-V (American Psychiatric Association, 2013) to find changes in meaning. The interpretation of the results is informed by Critical Discourse Analysis and tied to concepts like representation, identity and affiliation.

Results show that almost half of the users apply these terms in a clinical sense while the other half do not. The context in which they are used varies among each of the terms. Although all of them are stigmatized concepts, each tends to show different levels of recontextualization and transformation of sense. Some are used in positive contexts like educating the public on the condition and sharing their own experiences to create visibility. However, others still carry connotations of stigmatization and negativity.

The findings reflect the complexity of social media communication. Posts on social media act as tools to construct our identity, affiliate to certain groups, broadcast and learn new (mis)information. This study informs us on how recontextualization and social media users play a role in the transformation of meanings. It complements previous research on psychiatric terms use in social media, providing information about the interactions occurring on TikTok and contributing to document change on language use.

Keywords

Recontextualization, psychiatric discourse, online discourse, corpus linguistics, discourse analysis, critical discourse analysis, social media communication.

Contents

1. Introduction

1.1 Background of the study

Psychiatric terms have permeated popular discourse during the last few years. Users of social media platforms share even the most intimate experiences (Jamison-Powell, 2012, quoted by Makita et al., 2021), including taboo topics like mental health. Additionally, there has been an international effort to promote awareness of mental health issues (Makita et al., 2021). This awareness is beneficial, as it aims to end stigmatization and the use of harmful slurs, as well as increase the use of medical services. However, taking psychiatric terms outside the medical context can also lead to further stigmatization and to the trivialization of illnesses (Hwang & Hollingshead, 2016). As these terms continue to be used, they increase in popularity and their non-clinical use permeates into everyday discourse.

At the same time, discourse is powerful enough to reproduce or transform our society and culture (Fairclough, Mulderrig & Wodak, 2011). The way in which we use language affects ideologies, power relations, social identities, objects of knowledge, relationships between people, etc. since they influence the way in which they represent things and position people (Fairclough and Wodak, 1997, quoted by Weiss & Wodak, 2003). Furthermore, the way in which we construct reality, frame concepts, interact and share our thoughts with others has changed greatly, especially online and in this Web 2.0 era. This means that the language we see in places like social media platforms can affect the way in which we see those with a mental illness diagnosis and in turn, how we use these terms can help to either reproduce or challenge stereotypes.

Unfortunately, there is not much literature on self-disclosure in social media platforms and the discourse used in them (Balani & Choudhury, 2015). A few existing studies investigate perceptions of mental health but they are mostly on Twitter and Facebook and focused on one specific diagnosis (Budenz et al. (2019); Dyson & Gorvin (2017); Joseph et al. (2015); Makita et al. (2021); Pavelko & Myrrick (2015); Pavlova & Berkers (2020)). Makita et al. (2021) performed a study on Mental Health discourses in Twitter and they suggest that future research on digitally-mediated mental health discourse should include data from other social media platforms to complement their findings.

Not only Twitter, but all social media platforms remain a great source of uncensored, unscripted, naturalistic discourse samples for the analysis of contemporary language in use and the colloquial use of psychiatric terms (Joseph et al. 2015; Hwang & Hollingshead, 2016). TikTok is a fairly new social media platform and thus has not been used for research to the extent that other platforms have. I chose to use TikTok for this study because it not only shares the uncensored nature of other platforms but also possess the attractive factor of being a recently-developed, greatly popular platform with a majority of young users and the convenience of short-length videos for sampling.

Aside from the concepts of social media and online and psychiatric discourses, the concept of recontextualization is highly relevant for this study, as taking out a word from its original context into a new one can eventually result in a change in

its usage or its sense. Recontextualizing a psychiatric term then refers to using it outside the medical context. However, in this study, context is not seen as a place, the surroundings or a situation. Therefore, the social media platform of TikTok is not being considered as a context but rather a medium of communication.

The concept of context as defined in this study is drawn from the definition provided in Bauman & Briggs (1990), pointing to the negotiations performed in the interaction, rather than the environment. In this case, the contexts as defined in this study can also be considered as linguistic functions to some extent. Identifying those contexts, in the form of functions or negotiations, which are performed through the use of psychiatric terms, is one of the most relevant parts of this study.

1.2 Aim and Research Questions

This study aims to observe the way in which users on TikTok employ five particular psychiatric words when interacting online, to see in which sense they are being used, if their meaning and context has changed from the clinical sense and what the usage of this vocabulary can reveal about those who interact in modern social media. Therefore, the research questions for this study are:

1. Are the psychiatric terms *narcissist, bipolar, sociopath, OCD* and *trauma* used in a clinical sense on TikTok?

2. If not, what are the new contexts in which they are being used and has this recontextualization changed their meaning?

3. What does the recontextualization of these terms in social media demonstrate about modern communication and social practices online?

1.3 Contribution to previous research

This study could be valuable in different ways. Firstly, it provides a picture of the usage of psy discourse in the English language in this moment in time. At the same time, it complements the studies that have been done on the use of psychiatric discourse on other social media platforms and the way mental health is approached and discussed online. It can also contribute to the documentation of online discourse in the era of Web 2.0.

Since TikTok is a new platform, it can contribute to inform others on the way in which it works and influences other areas such as language. It can enlighten those interested on social media about TikTok affordances, the way in which people make use of it and the choices they make in order to transmit messages, create identities and belong to communities through their posts.

Also, this study can contribute to the study of language change through recontextualization. The results show how the interactions in this platform and the use of language on it can transform meanings by taking psychiatric terms outside of their original context. The analysis of these terms' recontextualizations can be observed as a

process that can make a psychiatric term move either closer or farther away from its clinical sense.

1.4 Outline of the study

Chapter 2 discusses the important concepts and previous research, connecting them to the research aims and questions. After this, Chapter 3 outlines the method design and explain its different stages. Then, Chapter 4 combines the results and discussion thereof into one section, dividing it into the three different research questions, in which there is an analysis for each term. Chapter 5 includes the conclusion from these results and the possibilities for further research.

2. Literature Review

In this chapter, it is my aim to show the different themes and topics considered as relevant in this study. Important concepts and theories that will be fundamental for this study are discussed throughout the text. Therefore, the text itself is divided into 5 main sections: *Online Discourse, Social Media, Representations, Relationships and Identities, Recontextualization,* and *Psy Discourse*. In every section, I show the previous research that has been done in the fields of linguistics and how these studies, their observations and findings play a role in the questions posited in this study.

2.1 Online Discourse

During many years, researchers have separated online and offline speech, seeing computer-mediated communication as a distinct language and using terms such as 'NetSpeak' or 'internet slang' to describe it (Androutsopoulos, 2006). In reality, the way we speak online reflects the way we speak offline. Herring (2007), who created the concept of *computer-mediated communication* seems to agree with the aforementioned, stating that this kind of communication provides "an abundance of data on human behavior and language use" (p.1). There are three phases of computer-mediated communication (hereinafter referred to as CMC): pre-Web, Web 1.0 and Web 2.0 (Herring, 2018b). The latter differentiates itself from the others in the sense that it reflects the new ways in which information can be shared and the web can be used as a social platform (Herring, 2018b). Also, a shift can be observed where users are seen as creators rather than consumers of content (Page et al. 2014).

Within the concept of Web 2.0, we can also include the *interactive multimodal platforms* (IMPs), which according to Herring (2015, quoted by Herring, 2018b) are platforms which include two or more semiotic modes for interactions, whereas CMC took into consideration only one. Due to the wide range of social media networks that exist today, new types of content can now be analyzed: tweets, status updates, text annotations on videos or pictures, hashtags, etc. (Herring, 2013). Despite the many modes of communication these websites offer, Herring (2018a) found that text is usually used negatively and sarcastically while non-textual modes are related to more positive aspects

such as sociability. Another widely-used mode is video, which has grown in accessibility and in popularity due to the creativity that it involves.

Herring (2013) suggests to be observant about the linguistic phenomena occurring in these websites, since they seem to be influenced by technology and society. These linguistic phenomena introduce the concept of *Discourse 2.0.*, which differs from the previous idea of discourse in that it has introduced new communicative practices, new patterns, new affordances and new user adaptations (Herring, 2013). *Discourse 2.0*, also known as *Convergent Media Computer-Mediated Discourse* (CMCMD), focuses on "language, communication, conversation, social interaction and media co-activity as they occur anywhere online (including via mobile phones), with collaboration on the periphery" (p. 6).

In online discourse, like in any other kind of discourse, it is expected to find recurrent patterns that may occur with or without the speaker knowing (Goffman, 1959 quoted by Herring, 2004). It is the goal of discourse analysis to identify those patterns, seeing them as choices that are affected by other factors, whether they are linguistic and/or social (Herring, 2004). Critical Discourse Analysis then, begins the research process by identifying a social problem related to discourse (Wodak, 2011). Like in any other space where discourse occurs, online environments reflect a variety of social problems. Many of these problems are talked about online in different ways, either in a personal or public domain, and online discourse is an important factor in the construction of representations of reality and social relationships (Mautner, 2005).

Offline contexts penetrate online activities and these in turn reshape offline contexts (Baym & boyd, 2012). Similarly, Fairclough and Wodak (1997, quoted by Weiss & Wodak, 2003) claim that discourse is socially constitutive and socially conditioned. It is evident that whatever is said, both in online and offline spaces, has a strong connection to what is happening in society. Lee (2015) states that the use of language (whether online or offline) is part of people's daily social practices and these practices can travel into different domains of our lives. Of course, technology is constantly advancing and practices in social media are constantly changing. As the affordances on social media platforms change, new forms of communication and interaction emerge, resulting in changes in language and new phenomena to observe and research (Page et al. 2014).

2.2 Social Media

Social media, according to Page et al. (2014), refers to the online social-media sites that foster interaction among users. In these apps or websites, participants can share information about their own lives, complain, joke, confess, express opinions, etc. (Page et al., 2014 & Zappavigna, 2013). Since social media, along with the technology used for accessing them, have become part of our daily routines, it is expected for them to have an effect in modern society. Page et al. (2014) mention that the relationship between technology, culture and society has long been discussed. Of course, a paramount part of our culture and society is language and communication.

The nature of social media is so ephemeral and brief that it encourages continuous updating of everything occurring in our personal lives (Zappavigna, 2013).

Zappavigna (2013) discusses how posts, and therefore the language used in them, is constructed or chosen depending on the context of the situation: cultural aspects, the type of answer the user is providing, the type of device, the time of day, etc. The construction of the posts imply editing and reflecting beforehand. Reflection is a normal part of life, but it has taken a new form in social media and creates reflexive discourse practices online, either for constructing an identity, building relationships, protesting politically or just for mere entertainment (Fairclough, Mulderrig & Wodak, 2011).

These new social and discursive practices have caused for social media applications to be used mainly to communicate our experiences and bond with others (Zappavigna, 2013). By doing so, we can include deeply personal topics (Page, 2011) that we perhaps would not discuss in face-to-face conversation. These applications have become such a big part of our everyday lives that nowadays is not unusual to observe that many users share private details, as Nesseler (2011) states, almost to the point of pornography. This is due to the fact that online interactions lack the negative connotations that face-to-face interactions do (Jamison-Powell et al., 2012 quoted by Makita et al., 2021): there is a sense of anonymity and separation from our lives offline when we interact on social media, causing what is known as the Online Disinhibition Effect (Suler, 2004).

Nevertheless, this disinhibition can have its benefits. Users who share embarrassing stories that others can relate to can attract followers (Slater, 2022). According to Zappavigna (2013) when we microblog our daily experiences, we can bond and we satisfy our desire of affiliation by connecting with others like ourselves. This sense of affiliation can be highly positive as in the case of those fighting illnesses, who can a safe place in online communities to self-disclose, seek information and ask for support (Maestre et al., 2018). On the other hand, these otherwise uncomfortable conversations that are being had in social networks can also act as a type of activism, protest or civic participation (Androutsopoulos, 2013), highlighting power imbalances (Sainsbury, 2021) and challenging stereotypes (Vivienne & Burgess, 2012 quoted by Sainsbury, 2021). According to Androutsopoulos (2013), this online participatory culture increases the chances that "within a specific discourse, contributions from below will be heard and potentially play a role in the unfolding of discourse" (p.49).

2.2.1 TikTok

An example is found in Sainsbury's (2021) study on LGBTQ activism on TikTok. She states that when users share private details of their own lives, other users like them can find comfort, while outsiders can sympathize and be educated, and perpetrators can be confronted. Also, she found that those creators who share their experiences believe they are making small changes in society by helping others.

Hautea et al. (2021) on the other hand, focused on climate activism on TikTok and mention how it is a complex social medium, where those actually seeking to make activism have to compete for attention with others who only talk about this issue in a jokingly manner or to gain popularity. However, these studies demonstrate that TikTok is a space where discussions on serious matters can be held and people can go to get informed.

TikTok is a relatively new video-sharing social media app created by the Chinese company ByteDance, which launched in 2016 (Doyle, 2021 quoted by Carson, 2021). The platform allows users to create their own videos and share them. These videos can go from 15 seconds to 3 minutes and they can use their own sounds by recording themselves or make use of music or other users' audios. Users can include pictures, filters, text, GIFs and other elements to edit their videos. These videos can be 'dueted', 'stitched' or replied to with another video. There are, as in most of social media, the functions to like and comment as part of the audience. There are challenges and trends created by the users that are then replicated by other users or changed to their own versions.

The complexity of these interactions, along with the social relationships that can take place within the IMPs, are the main characteristics of this new phase, which is distinctive of the 21st century (Demata et al., 2018). However, TikTok had not taken as seriously in research and was seen as an app exclusively for very young users, mostly teenagers (Carson, 2021). This could be a benefit for this study since research indicates that people with mental illnesses use social media more than the rest of the population and it is during adolescence or early adulthood that mental health issues usually begin (Budenz et al., (2019), Lachmar et al. (2017)).

Nevertheless, the app saw a rise in users of all ages during the lockdown period in 2020, when people were looking for forms of entertainment and connection (Parivudhiphongs, 2020 quoted by Sainsbury, 2021). I was one of those users who joined during this period and from the beginning, I could notice 'unfiltered' and 'unapologetic' nature of the app, which, according to Slater (2022) is what has allowed the culture of oversharing to thrive. Creators discuss many taboo topics, for example those related to the LGBTQ+ community, sexual, emotional and physical abuse, climate change, mental health, sexual education and different political ideologies.

2.3 Representations, relationships and identities.

There are three main domains of social life that are constituted by discourse: world representations, social relationships and people's identities (Fairclough et al. 2011). These three can be identified in online discourse found on social networks. The former, world representations, refer to the social constructions of reality. If we see social life through a constructivist lens, it is clear that modes of thought, modes of discourse and modes of action are interconnected (Mehan, 1996). Every event and object in the world depend on the representation people have of them and since concepts are constructed by cultural conventions, this results in having a variety of representations (Mehan, 1996). That is why a set of symptoms will eventually become a diagnosis or a medical term, which according to the person's perception, will have a negative or positive representation. Mehan (1996) mentions that these representations will result in labels or categories, which will not only influence the way we think about what is being represented, but ultimately will influence the way we act or behave towards it.

The second domain is perhaps the main purpose of the use of social media, connecting with others and constructing relationships. Androutsopoulos (2014) mentions that researchers have discussed how recognizing and recontextualizing quotes from media creates common ground that allows people to become part of a community. This is

something that happens also with online and social media, as users seek to participate and be part of online communities. This can be done through different language practices such as: group specific vocabulary, forms of non-verbal communication, genres and humor (Baym, 2003 quoted by Androutsopoulos, 2006), which can also infiltrate into offline contexts. As an example, Rymes (2012), noticed how YouTube influenced the communicative choices of kids, and how these phrases and other elements helped them with affiliation and engagement with each other and the digital world.

As for the latter domain constituted by discourse, identity, it is constructed by the different semiotic and linguistic resources available to us (Blommaert, 2009). Of course, every social media platform offers different ways to share aspects of our lives and these differences result in different social practices, as well as differences in the construction of identities online (Page et al. 2014). According to Androutsopoulos (2014), in the 'acts of identity' theory developed by Le Page and Tabouret-Keller, speakers will adopt certain linguistic features attempting to identify with a certain group. Additionally, this theory indicates that face-to-face contact is not necessary for affiliation to happen, therefore applying to online interaction.

However, Blommaert (2009) mentions that regardless of wanting to be part of a community or not, one will most likely be categorized. This is a process called othering. Because we as humans are part of different contexts in our lives, it is possible to be attributed different categorical identities depending on the person who attributes them or the environment we are in. According to Blommaert (2009), globalization intensifies this phenomenon, since group identities change and become blurry for those categorizing. The creation of social media identities or the social practices that enable us to be part of a certain community are probably further intensifying these shifts in categorizations.

2.4 Recontextualization

According to Calsamiglia & van Dijk (2004), *popularization* is "a vast class of various types of communicative events or genres that involve the transformation of specialized knowledge into 'everyday' or 'lay' knowledge, as well as a recontextualization of scientific discourse, for instance, in the realm of the public discourses of the mass media or other institutions" (p. 370).

In this social process, discursive practices in mass media and the internet are modified with the purpose of spreading knowledge to the public (Calsamiglia & van Dijk, 2004) and language is remodeled for a new audience (Gotti, 2014). Unfortunately, the spread of this knowledge includes also non-scientific information spread through mass media (Calsamiglia and van Dijk, 2004) and nowadays, the internet and social media. This lay knowledge is broadcasted, then shared among communities and spread into the language.

Recontextualizing happens whenever a social practice is written or spoken about (De Rycker, 2014). It involves taking a part of a text or discourse and fitting it into another context, text or discourse, including: expressions, concepts, arguments, stories, ways of thinking, actual wordings, attitudes, patterns, etc. (Linell, 1998). This process is

transformational and when it occurs, the recontextualized element may bring with it functions and meanings from its previous contexts (Bauman & Briggs, 1990). Therefore, there is the risk of having original meanings modified and used for other purposes (Calsamiglia, 2003).

Of course, context plays a big role in this process of reformulation, as no discourse is possible without a context (Linell, 1998). Bauman & Briggs (1990) mention that many writers see contexts as not determined by the social environment but rather by the negotiations between participants in the interaction. Theo Van Leeuwen (2008) sees all texts as interactions and representations of social practices. For him, social practices combine text and context and discourses are shaped by social practices. However, it is also important to take into account that texts "both shape and are shaped by the situational contexts in which they are produced" (Bauman & Briggs, 1990) (p. 76).

Aside from contexts, linguistic patterns also lead to linguistic changes whenever they are rearranged for certain purposes; these changes can be either formal, functional, structural or semantic (von Mengden & Kuhle, 2020; Androutsopoulos, 2014). Since meanings are created and transmitted through discursive practices (Wodak, 2014), it is possible for a discourse that is politically incorrect and makes assumptions to become common knowledge (Fairclough et al., 2011), as may be the case for many psychiatric terms and diagnoses. Eventually, the result will be a combination of correct and incorrect knowledge (Calsamiglia and van Dijk, 2004).

2.4.1 Framing

The properties found in context that help the participants understand discourse include prior discourse, prior knowledge, the people and their relationships with them, the environment, the topics discussed, the frames used, etc. (Linell, 1998). According to Entman (1993), when we use a frame, we are choosing and highlighting some aspects of a perceived reality to promote an interpretation or evaluation for what is being defined.

Frames depend on the speaker, the text, the receiver and the culture and can be manifested through the use of keywords, phrases, images, stereotypes, etc. or lack thereof (Entman, 1993). These elements connote certain facts or judgements and guide the way people process information, so what is omitted is just as relevant as what is being included, since they can cause different reactions (Entman, 1993).

On the other hand, when recontextualizing an element of discourse, one of the strategies that can be used to transform it, is framing (Bauman & Briggs, 1990). Framing can make a term be widely accepted and a meaning become the dominant one and these meanings can form the general opinion of the public. Thus, the case of psychological discourse, framing is what allows diagnosis and treatment, but it is also what can create a negative concept in the general public. (Entman, 1993).

Clearly, this phenomenon of recontextualizing, transforming and reframing discourse and transferring it into other fields occurs in many areas and with many topics, but it seems to be happening faster and more frequently due to the immediacy of digital media. When a topic becomes "viral", it produces more posts about it and more interactions among users, increasing the chances of it being used in a wider variety of

contexts by people with a variety of experiences and expectations. These widely circulating topics can become part of people's linguistic repertoire and therefore, of their interactions offline (Rymes, 2012). Therefore, discourses and topics can both coexist in the same context, transfer into different fields, or be linked to one another (Wodak, 2014).

2.5 Psy Discourse

A discourse that has seen an increase in usage on social media is the one related to mental health. This is not surprising to see as there has been an increase influence on "psy" discourses (psychology, psychiatry, psychotherapy) on the lives of people of the 21st century, due to the great amount of information at our disposal, the growing production of self-help resources and the need of humans to explain their problems (Rimke & Brock, 2012). Additionally, one in four people worldwide will suffer from a mental illness at some point (WHO, 2011 quoted by Hwang & Hollingshead, 2016) and there has been a growing interest in psychiatry since the 1990s which has resulted in mass media discussing related topics, often resorting to sensationalism to increase ratings (Nesseler, 2011).

Mental illnesses have been framed negatively for many decades. Those suffering with mental illnesses were considered abnormal and experimented exclusion throughout time (Nesseler, 2011). Due to the exploitation of this topic in mass media, it is logical to think that conceptions about mental illness come mainly from this source. Androutsopoulos (2014) mentions that television fostered the multiplication of linguistic trends which may have started in interpersonal language but that ultimately were broadcasted. Mass media, according to Nesseler (2011), present narratives that tend to project "subjective notions and perceptions, fascinations and fears" (p. 127).

However, aside from mass media, other factors influencing our conceptions are social communication, outside environments, our inner circles and our own experiences (Link et al., 2011 quoted by Pavelko & Myrick, 2015 & Devendorf et al., (2020)). Still, these disseminated negative portrayals is what ultimately lead to stereotyping. According to Wang & Liu (2016), stereotypes make generalizations which influence cognitions and behaviors. They mention other researchers have found that some of these stereotypes against people with mental illness are that they are dangerous, violent, dysfunctional or incompetent. The use of stereotypes fosters the stigmatization of the illnesses and those who have them. Stigma can result from the use of labels, which oversimplify the symptoms and are usually used negatively (Link and Phelan, 2001, quoted by Joseph et al., 2015).

In an attempt to destigmatize these illnesses, users online have resorted to sharing their experiences in hopes of spreading awareness and increasing normalization. Normalization, as defined by Krzyżanowski (2020), occurs when "new norms and ideas of social order, strategically constructed in discourse become – or are strategically assumed to become – part and parcel of mainstream or common thinking" (p. 435). Austermuehl (2020), analyzed how Donald Trump's discourse normalized exclusion through different discursive strategies that were considered unacceptable in the past. Some of them are the creation of fear, discrimination, stigmatization, scapegoating,

victimization and othering (Austermuehl, 2020), all of which can also be applied to the negative discourse that surrounds many mental illnesses.

One of the central aspects of normalization is making others visible through the power of classification (Krzyżanowski, 2020) and that is what users online aim to do, bring visibility to these diagnoses that once set them apart from society. Rimke and Brock (2012) state that classifications alter our behavior, affecting classification itself, and that these classifications do not exist only in language but in everyday culture, shaping our views. The representation that users provide online "normalizes diversity and challenge restrictive views" (Caldeira, De Ridder & Van Bauwel, 2018, p. 25 quoted by Sainsbury, 2021).

However, it can be both beneficial and detrimental to have social media platforms and the publications made through functioning as the main sources for the public understanding of mental health (Budenz et al. 2019). As we mentioned earlier, mental health advocates can use these media to educate the general public about how common mental illness is (Pavelko & Myrick, 2015). An example is found in Twitter, where there have been awareness campaigns to fight against stigma. Makita et al. (2021), made a study on these campaigns on Twitter, and how users reveal their own experiences to end the relationship that this topic has with negative discourses.

Approaching mental health topics more openly is a social change that can be observed in media such as music, as many of the lyrics of the most popular songs in the United States contain references to mental health issues (Kresovich, 2020). However, since mental health is being discussed more frequently, psychiatric terms have been seeping into the public vernacular and have undergone a process of trivialization. This occurs in three different ways: "the oversimplification of symptoms, skepticism about severity, and overuse of humor to describe the condition" (Pavelko & Myrick, 2015, p. 251). Pavelko & Myrick (2015) observed the hashtag #OCD being misused to indicate non-clinical behaviors related to organization and cleanliness, misrepresenting the disease or making it seem less severe than it is. Although this misrepresentation may seem harmless, when it becomes part of the public vernacular, it affects the way in which the illness is understood. Language and therefore, the word choices we make, are essential for making sense and talking about illnesses (Makita et al., 2021, Hwang & Hollingshead, 2016).

Another interesting aspect that Pavelko & Myrick (2015) found in their results was that those self-identifying with having the condition were many times admired for it. Although, this supports the idea of social networks being safe spaces, this can also be connected to the aforementioned trivialization. The illness can be taken as something light and be understood as a positive thing, since social media expression is usually positively biased or overrepresenting positive experiences (Reinecke & Trepte, 2013, quoted by Budenz et al. (2019)). This positivity was also seen in Budenz et al. (2019) study in which they analyzed tweets about bipolar disorder and how the condition is conceived overall. They found that most tweets were empathetic and supportive.

Nevertheless, some mental illnesses are still more connected to negative conceptions than others. In a study by Joseph et al. (2015), they decided to compare how the words 'schizophrenia' and 'diabetes' were used in Twitter. Their results show that

there is still a dual meaning to 'schizophrenia', the linguistic and the clinical use. They claimed that it is still far from the appropriate clinical usage as a consequence of lack of education and awareness, despite the access of information through the internet.

Therefore, in order to counteract trivialization, we should be aware of the clinical meanings, as they focus on real patients (Pavelko & Myrick, 2015). Clinical language contains symptoms, is used by professionals, aims to provide treatment. However, Rimke and Brock (2012) say that the language of psychiatry is not that neutral or objective, and it also make judgements about what is good and bad. Lolas (1997) mentions that when this language is taken outside of its field, it acquires negative meaning. He says that this discourse has illocutionary and performative functions, as every diagnosis represents possible treatments and course of action for the patient (Lolas, 1997). All mental illnesses are classified in the DSM (Diagnostic and Statistic Manual of Mental Disorders), and these classifications have consequences that we are not aware of (Rimke & Brock, 2012).

However, like any other type of discourse, psychiatric discourse has seen changes overtime. These changes have impacted the diagnostic categories and have been eliminated from the DSM (Cooksey & Brown, 1998 quoted by Hamilton & Manias, 2006). These changes have been the result of social changes, demonstrating that social construction of ideas affects language, as well as how we identify ourselves and others (Hamilton & Manias, 2006). Also, the fact that mental health discourse has been introduced into the popular vernacular shows a change in society, the openness to this topic, the disinhibition online. Wodak (2011) states that discourse constitutes society and is shaped by society, constituting "situations, objects of knowledge and the social identities of and relationships between people and groups of people." (p.39). According to Page (2011) social media highlights social aspects such as interaction and personal and group identity, which confirms the connection between society and language.

3. Methodology

This section presents the analytical framework, methods for data collection and analysis used in this study. It discusses the affordances of TikTok as a social media platform, the way in which videos were found, selected and interpreted and how the results were organized for a better analysis.

3.1 Analytical Framework

This is a qualitative, constructivist, discourse analytic study interested in social practices online with implications of stigmatization and awareness-raising around mental health topics on TikTok. For the discourse analysis, corpus linguistic tools were used. It is also informed by critical discourse analysis. According to Biber et al. (1998), when studying language in use there are two research goals: assessing to what degree a pattern occurs and analyzing the contextual factors. In this study, I will be seeking patterns and

observing the contexts in which they occur, which contribute to changes in usage and meaning.

These changes are a result of the process of recontextualization, which refers to moving a linguistic element from its original context into a new one. However, in my analysis of the data I also make use of the concepts of *popularization, normalization* and *trivialization*, as they seem to be all connected when analyzing the change in meaning for psy discourse. Referring to the literature above, I understand popularization as the increase in usage in the popular vernacular, normalization as the acceptance of a concept or term that was considered as unacceptable before and trivialization as decreasing the seriousness of the illnesses through its misuse.

In order to observe in detail the recontextualization of a term, I decided to create a corpus. As Biber et al. (1998) mention, corpus linguistics can aid in identifying the meaning of words by looking at how they occur in natural contexts, the words that usually occur with these particular words and the senses and used of word and how they occur, among others.

3.2 TikTok

I chose TikTok since I aim to complement the findings of other studies performed with other platforms and since it provides both spoken and written samples. The following is a simplified summary of the affordances of TikTok in order to understand how the data looks for those unfamiliar with the platform.

TikTok's home page is called the 'for you page' and it is catered by an algorithm which learns from the videos the user watches, likes, comments on and shares. The videos on TikTok are very short and therefore users tend to either be concise with the message or resort to making several parts or a series on a topic. These series make followers and other users who encounter the videos in their 'for you page' wait or search for the previous or subsequent videos, attracting more traffic to their profiles. The videos can be also classified into playlists as many users talk about different lengthy topics that may be difficult to find in their profiles.

TikTok allows users to create and edit their own videos. Audios from other users, songs, images, videos, GIFs, filters, among other elements can be added for the editing of these videos in order for the user to deliver the meaning they aim for. Many of these elements can be recontextualized/edited to fit into the user's experience/opinion and thus to be able to participate in the conversation within the platform.

TikTok allows a more direct participation between users in comparison to other social media platforms which only use comments as they allow the functions of 'duets' and 'stitches' which are video responses connected directly to the original video they are reacting to. Many of the original videos represent prompts for others to participate with their own opinions or ideas, and these can become a popular prompt to the point that they are called a 'trend' within the platform. Like many other social media platforms, different topics can be found by using a hashtag, but TikTok can also use songs and sounds as a search tool.

3.2.1 Ethical Considerations

The videos posted on TikTok are available online and for the general public. Therefore, no permissions are required for using the posts for research. Particulars on the identities of the users were not taken into consideration for this study and thus are not mentioned. Additionally, this study shows no identifying information or images in order to protect the users' identity and privacy.

3.3 Data Collection and Sampling

3.3.1 Selection of Terms

Since there are many psychiatric diagnoses and other terms within the field, the scope of the study had to be narrowed. I decided to choose five terms that were official diagnoses whose definitions and symptoms could be consulted in the DSM-V (American Psychiatric Association, 2013). However, TikTok does not allow the use of certain hashtags related to mental health, such as #depression, so this diagnosis could not be included. Other popular ones like #anxiety are used as hashtags to attract views but are not related to the topic, therefore they were not useful to this particular study. I created a long list of terms I had encountered while using the application and finally chose *sociopath, narcissist, bipolar* and *OCD*. The fifth one, although not a diagnosis but mostly part of the diagnostic criteria for certain diagnosis, is *trauma*, which sparked my interest due to how often it is used in a non-clinical sense in Spanish, my native language, and I wished to observe it in use in English, as well.

3.3.2 Hashtags

The aforementioned words acted as the hashtags used to find the relevant videos on TikTok for the data collection. Hashtags were used as they are keywords of metadata that refer to the topic of the video, they indicate the intention of the creator to classify their video under this category and increases the 'findability' of their discourse (Zappavigna, 2011). According to Zappavigna (2011), this ability to search discourse, also increases the possibility of gaining followers and increase affiliation.

3.3.3 Material

In order to look for the videos without the results of the search being influenced by the algorithm, a new account was created. In total, 150 videos and over 15,000 words were compiled. These videos can go from 15 seconds to 3 minutes, and they all varied in length when transcribed. The period of time in which all videos were collected was a week, from March 7th to March 12th, 2022. For each search, 'all time' was selected instead of a particular period of time like 'last month' or 'this week.' Likes were not a criterion for the selection of videos in order to avoid getting solely videos by famous influencers or celebrities. Therefore, every search was sorted by 'relevance' instead of 'number of likes.'

3.3.3.1 Video Selection

The method used for selecting the videos was influenced by Page et al.'s (2014) criteria for selecting social media data for qualitative research and designed taking into account my own previous personal experience using the application. The first thirty videos that appeared for the hashtag search of each of these words that complied with the following characteristics, some inspired in the work of Herrick et al. (2021), qualified for the sample:

- Videos were found using hashtags of the words selected.
- Videos should be in English.
- Videos should be publicly accessible and have the option to be downloaded.
- Videos should actually be related to the topic that the hashtag indicates.
- Videos should include language either in written or spoken form.

If two or more videos by the same user were found among the first thirty eligible ones, only one was included. This was decided so that there would be a greater variety of discourses in the sample.

3.3.3.2 Researcher Bias

It is important to consider that the author had already made observations of her own on the use of psychiatric language as a user of this social media platform before starting this study and this may have biased the selection of terms and videos.

3.4 Data Analysis
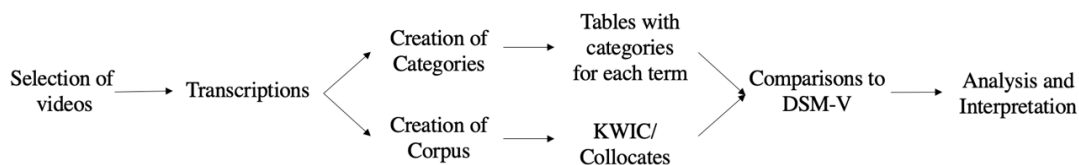
Figure 1. Diagram describing the methods used for the study.

In order to answer the first research question: "*Are these psychiatric terms used in a clinical sense on TikTok?*" I resorted to investigate the official definitions, descriptions or diagnostic features of the selected terms or diagnosis given in the Diagnostic and Statistical Manual of Mental Disorders (DSM-V) (American Psychiatric Association, 2013). These definitions would be then compared to the way in which the terms are used in the videos, making annotations on whether they are being appropriately used or not regardless of the context. In order to qualify as 'appropriately used', the post would have to show the usage of the psychiatric term in a way in which it does not deviate from the clinical sense.

According to the DSM-V (American Psychiatric Association, 2013), the patient needs to have four or more of the diagnostic criteria for a diagnosis. Taking into consideration that the purpose of this study is not diagnosing but rather analyzing the sense giving to psychiatric terms, I am focusing not on the number of criteria met by users or their descriptions of others, but how accurate or close they are to what is described in these medical criteria. For example, if a person uses 'sociopath' to describe someone with eccentric behaviors or if 'traumatizing' is used to describe something jarring, although these may be normalized uses in the popular vernacular, they do not coincide with the DSM-V definitions and therefore are considered as not appropriately used in the clinical sense.

The videos were selected, downloaded and the audio was transcribed manually or with help of the automatically-generated subtitles some of them had. These transcripts were revised for accuracy by the author. Since many of the videos included the word or extra information about the context in the caption or description of the video, these were also included in the transcripts. As van Dijk (1998, quoted by Wodak, 2014), titles (or in this case, captions) can summarize the content, give signals about what will be discussed or shown and it make the audience interested. Many users seem to be aware of this and provide important information in them.

In order to answer the second research question: "*What are the new contexts in which they are being used and has this recontextualization changed their meaning?*", two methods were used:

3.4.1 Coding

The first method for answering the second research question was coding. Following Page et al.'s (2014) guide for researching language on social media, I watched the videos and selected significant themes in my data and coded them, creating classifications and gathering relevant examples of patterns or phenomena. The coding was inspired by Joseph et al.'s (2015) three dimensions of linguistic use for illnesses, which were: 1) medical appropriateness, 2) negative valence and 3) humor sentiment. The first inspired my first research question and the other two my second research question.

However, when realizing a big portion of the videos used the psychiatric terms in a way that they were aiming to share information and facts and educate others, it was necessary to create a new category. Therefore, my data was divided into three main categories of contexts: *Educational, Evaluative* and *Humorous*. By looking at the variety of content and contexts in each video, there was a need to develop subcategories in order to analyze these words uses in greater detail. It is also important to mention that a video could fit into several of these at the same time.

Although most of them are self-explanatory, I would like to indicate the differences in the subcategories within the educational category, as they may not be clear from just mentioning them. Content refers to the term being used in an educational context, however, the user using the word is not diagnosed with it, neither are they a mental health professional and are just sharing information with the purpose of creating content for their profile. Role of Mental Health Professional is when the term is used in

an educational context exclusively by a user who is a mental health professional, which includes psychiatrists, psychologists or therapists, but not life coaches. As for experiential, it refers to the use of the term in an educational context but coming from the personal experience of someone who claims to suffer with the illness and seeks to inform on how it manifests in their daily lives. Table 1 shows the categories and subcategories of contexts and examples where the terms were used:

Table 1. Table of categories and subcategories of contexts with examples from data.

Category	Subcategory	Example
Educational	Content	Which ones describe you? Follow to learn how to heal What unhealed *trauma* con look like as an adult: Anxiety, people pleasing, lack of boundaries, perfectionism, fear of abandonment, self-blame…
	Role of Mental Health Professional	People who have *obsessive compulsive disorder*, and this has been published about 200 times in the medical literature, their frontal lobe work too hard…
	Experiential	How I shower with severe *OCD*. Meet my worst enemy: the shower. It usually starts by me thinking I'm not turning the faucet right. Even though my fave number is four, I'll probably end up doing it eighty times…
Evaluative	Positive	I just walked down the beach to get a drink in a thong bikini on my OWN in addition to my missing limb swinging out in the open KNOWING everyone was staring at one or the other and I did not give a single fuck like a damn *sociopath*!
	Negative	How to tell if someone is a *narcissist* How to tell if a person is evil If you want to spot an evil person, they will fuck up tremendously and then come out right afterwards and be like, sorry, guys, whoops, it was an accident…
	Self	The day I accepted my *bipolar* disorder and learned to channel mania into power was the day my life changed forever. I'm crazy but that's the best part about me.
	Others	A *narcissist* will work so hard to impress a stranger while treating the people they claim they love!!! Like monster!!!
Humorous	Irony or Sarcasm	"What is your biggest secret?" "I dip my Oreos in water" "And I shit in the shower, and brush my teeth in the toilet, I cook my steak in the sink, I refrigerate my ice cream in the oven. Christ." *Sociopathic* tendencies
	Hyperbole	Guys whatever you do, do not download episode, I am *traumatized*

	Mockery or Self-Mockery	I have depression, anxiety, ADHD, PTSD, BDP, BED, CPTSD but at least I don't have *OCD* My psychiatrist: I'm sorry but you also have *OCD* Gotta catch 'em all!

In order to organize the information and have a visual representation of the uses of each term and the contexts of the videos, tables for each term were created. These tables included the hashtag under which it appeared, the URL, a description of the actions in the video, the caption, whether it conforms to the DSM-V definition of the term and the different categories in which it applied. These tables are helpful to visualize and compare the uses and variety of contexts from term to term and identify patterns. Their summarized versions are attached in the Appendix as Tables A1 through A5. Percentages were calculated for the uses in different contexts, as well as for the clinical and non-clinical uses.

3.4.2 Corpus

The second method to answer the second research question were corpus analysis methods. A corpus was created from the transcripts of the videos and AntConc was the software chosen for the analysis of this corpus. Different software tools for corpora have different ways of displaying results, in this case, the most relevant functions for this study were Key Word in Context (KWIC) and Collocates. The former is a concordance which show the surrounding context of each chosen word, highlighting words occurring before and/or after it. The latter show the words that are most likely to co-occur with the chosen word (Biber et al., 1998).

The classification and coding of the videos was done firstly and not based on the corpus. However, corpus analysis was integrated into the methodology to act as an objective confirmation of what was being observed about context and senses from the coding and classification of the videos in the previous stage. By looking at the contexts and the related words, it becomes easier to identify the meanings that may be related to a particular word and realize if it has changed in comparison to its original clinical sense.

For collocates, the settings included four words to the left and four words to the right. Two terms were searched for in their singular and plural form ('narcissist' and 'sociopath'), while 'trauma' was also looked for as an adjective (traumatized, traumatizing and traumatic). The results of the collocates were copied from the software and put into tables for their analysis. As for the KWIC function, the settings were highlighting two words to the right and one to the left. In this case, each term was searched for to observe the contexts in which they occur, thus notes were taken on relevant observations. These observations were then compared to the results of the coding and interpreted throughout the discussion section.

Finally, the third research question in this study: "*What does the recontextualization of these terms in social media demonstrate about modern communication and social*

practices online?" was answered by analyzing and interpreting the discourse found in the videos in relation to the affordances of the application, the social elements that come into play in online interactions, the participatory and oversharing culture found on social media and the way in which this connects to the way society functions in this modern era. This interpretation and analysis would be made in light of the literature and previous findings, mainly informed by Critical Discourse Analysis (CDA). These perspectives were adopted since critically approaching discourse is a reflection of what characterizes contemporary life and modern society (Fairclough et al. 2011) and because "there is no such thing as a 'non-social' use of discourse" (Blommaert, 2005, p.4).

3.5 Limitations

Finally, some of the limitations of this study are detailed below. Firstly, a greater sample would always be beneficial to elucidate on this research topic, however, due to time limitations, this study had to resort to only focusing on a limited number of terms and a limited number of videos.

Secondly, the interest of this study was to find real life examples where these terms would be used and even though social media is a great source to find naturally-occurring discourse, it is difficult to find videos in which these terms are used without using hashtags. Finding examples of conversations that are completely unrelated to mental health topics but that nonetheless include these terms would take a long time. On the one hand, hashtags are a great way to find what we are looking for, but on the other, it may limit the width of contexts in which the terms are used, as people would not always use hashtags or just use the terms without talking about mental health.

Thirdly, the interpretation of a term can vary a lot depending on the context and the audience, as well as their beliefs, values, feelings and knowledge (Fairclough et al., 2011). Thus, it seems relevant to consider the way in which a linguistic element is framed within the interaction, as it influences the ways in which people react to it and if it is attached to stereotypes and previous knowledge. However, it is not possible to know about the audience's interpretation, previous knowledge or ideas they have in relation to these terms through social media posts themselves.

4. Results and Discussion

This section answers the three research questions for the five different psychiatric terms under investigation.

A reminder for the reader in the following section is that context refers to the negotiations made in interactions as defined in the study by Bauman & Briggs (1990), and not the environment or location per se. I am assuming that it if a term is not used in a clinical or professional context (i.e. conferences, consultations, research) it is being used outside the medical context and it is being recontextualized. Therefore, every case in which the term is used on TikTok is a case of recontextualization.

Also, when I refer to a term being used in a clinical sense, I refer to the overall definition constructed by the information found in the diagnostic psychiatric literature (DSM-V). When I refer to a term being used in a non-clinical sense, it refers to any other sense outside the one agreed by in the diagnostic psychiatric literature, regardless of the context.

4.1 Research Question 1: *Are the psychiatric terms bipolar, narcissist, sociopath, OCD and trauma used in a clinical sense on TikTok?*

In order to answer this first question, I consulted different chapters found in the DSM-V (American Psychiatric Association, 2013) and compared the information contained there to the way users on TikTok used each of the psychiatric terms investigated in this study. Many of these videos are done by people who do not have these illnesses, but just talk about them. However, many others claim to be diagnosed with them, and it is not possible to prove the official diagnosis of the user (or the person they are referring to) issued by a psychiatrist by observing a video online. Therefore, no claims are being made on whether the claims on the videos are true or not, but rather if they are being used in the clinical sense, as being diagnosed does not automatically mean the term is being applied appropriately, especially when undergoing recontextualization.

The following paragraphs explain in a very general manner how each of the terms investigated in this study are defined by the DSM-V and what resulted from comparing these definitions with the uses in TikTok. The following table summarizes and compares the usages according to the clinical sense against those in a non-clinical sense.

Table 2. Usage of Psychiatric Terms in Clinical vs. Non-Clinical Sense on TikTok

	Clinical Sense		Non-Clinical Sense	
Bipolar	**24/30**	**80%**	**6/30**	**20%**
Narcissist	**16/30**	**53.3%**	**14/30**	**46.6%**
Sociopath	**6/30**	**20%**	**24/30**	**80%**
OCD	**23/30**	**76.6%**	**7/30**	**23.3%**
Trauma	**9/30**	**30%**	**21/30**	**70%**
TOTAL	**78/150**		**72/150**	
	52%		**48%**	

4.1.1 Bipolar

In the chapter about bipolar disorder (p.123-132), the main characteristic of Bipolar I Disorder, or manic-depressive disorder, is to have manic episodes followed by major

depressive episodes. Then, the diagnostic criteria for manic episodes and major depressive episodes are described. For the former, symptoms such as increase in energy, irritable mood, racing thoughts, distractibility, involvement in activities with serious consequences, inflated self-esteem, among others, are mentioned. For the latter, the following are mentioned: depressed mood, loss of interest, insomnia, fatigue, feelings of guilt, thoughts of death, etc. The diagnostic features are the following, in summary: engaging in different new projects, self-grandiose, loudness, disorganized speech.

Therefore, when looking at the diagnostic criteria and diagnostic features described for Bipolar I disorder and comparing these medical texts to the uses and recontextualizations of the word 'bipolar' on TikTok, it was found out that 24 videos made a clinically-appropriate use of the word, while 6 made an inappropriate one. This means that 80% of the videos made use of the term in the clinical sense, adhering to the diagnostic features of the DSM-V, while 20% indicated a non-clinical use. It is important to mention that out of the 30 videos, only one was used by a mental health professional, which means that 96.7% of the videos in my data showcased the use of this word by layman. However, most of them seemed to be informed uses that adhere to the definition established by the DSM-V.

In contrast, in: "She's so bipolar still love her tho" a user refers to his girlfriend and shows how she changes mood throughout the day and uses bipolar as an adjective to describe her personality. This use does not reflect the episodes of depression and mania described in the diagnostic features of the DSM-V. On the other hand, in: "When your bipolar husband breaks out a "hobby" he had during his last manic episode", a user is talking about one of the symptoms that lets them know their husband may be having a manic episode. According to the DSM-V diagnostic features, engaging in new projects is included in the symptoms.

4.1.2 Narcissist

In the chapter of the DSM-V on personality disorders, the section on narcissistic personality disorder was consulted (p.669-672), as the word 'narcissist' refers to this disorder. The diagnostic criteria mentioned include the following: grandiosity, arrogance, lack of empathy, entitlement, need for admiration, fantasies of success, power, beauty and love, believing to be special, being exploitative, etc. In the diagnostic features, the narcissist is described as someone who is only concerned about their own wellbeing and about how others perceive them. They are seen as emotionally cold and sensible to criticism.

When comparing these diagnostic features and criteria with the uses found in the discourse of TikTok users, it could be observed that there is an almost equal divide between the use in the clinical sense and the use in the non-clinical sense. 53.3% of the videos used it in a clinical sense, while 46.6% in a non-clinical sense. Out of the 30 videos, nine were done by a mental health professional, resulting in 30% of the videos, the highest percent out of the five terms investigated herein.

An example of this term being used in the clinical sense is: "In a relationship with a narcissist, their most important thing is not you but their ego." This example

matches with the DSM-V diagnostic features on their lack of empathy and their concern for how others see them. On the contrary, an example of a non-clinical sense is: "Narcissist at its finest!! NARCISSIST!! He got mad because I went through his phone and see that he was texting other women." This example is one of many in which mostly women would refer to their current or previous partners as narcissistic, using the term to describe anyone who behaves inappropriately or is abusive.

4.1.3 Sociopath

'Sociopath' is the short word used to describe someone with antisocial personality disorder. The DSM-V mentions the following diagnostic criteria for this disorder (p.659-663):

1. Patterns of violation of the rights of others, which is shown by having three of more of the following: lawful behaviors, deceitfulness, impulsivity, irritability, aggressiveness, recklessness, irresponsibility, lack of remorse.

2. Being at least 18 years old.

3. These disordered behaviors occurred before the age of 15.

4. Not having these behaviors occur while having schizophrenia or bipolar disorder.

For the diagnostic features, conduct disorder is heavily discussed. This contemplates being aggressive to animals and people, destroying property, lying and stealing, harassing, violating rules in general. They make very spontaneous decisions and engage in dangerous activities. They are known for being manipulative for their own benefit.

Also, other way in which the DSM-V indicates people may refer to antisocial personality disorder was 'psychopathy', which is a term that people in my data used along with 'sociopath' and 'narcissist' almost as if interchangeable. Interestingly, in many of the videos found under 'sociopath', the word 'narcissist' was also mentioned, however none of the videos for 'narcissist' mentioned the word 'sociopath'. Although both diagnoses share some diagnostic features, it seems that in many cases people assume that people diagnosed with one have the other by default, or they use them as synonyms.

When comparing these characteristics with the ways users used the word 'sociopath', an astounding 80% of the users use it in a non-clinical sense, while 20% in a clinically appropriate way. Unfortunately, not much awareness is brought from the mental health professionals, as only 1 out of 30 videos was made by one. This means that 97% of the videos are examples of the word being used by non-professionals.

An example of a use of this term in the clinical sense is: "A sociopath also is somebody who as a child had something called conduct disorder", which is a sentence found in someone's video about the differences between a narcissist and a sociopath, and seems to be based on the previous diagnostic features and criteria consulted for this study. On the other hand, an example of the use of the term in a non-clinical sense is: "Just over here at the gym in Miami because my friends are sociopaths" where someone is complaining about their friends forcing them to exercise on vacation, referring more to a preference or behavior other people may find unusual.

4.1.4 OCD

According to the chapter on Obsessive-Compulsive and Related Disorders of the DSM-V (p.235-242), obsessive-compulsive disorder, or OCD for short, is mainly characterized by 'the presence of obsessions, compulsions or both' (p.237). The DSM-V defines obsessions as recurrent and persistent thoughts that are unwanted and cause anxiety. Trying to ignore these thoughts cause certain actions which are known as compulsions. These compulsions are repetitive behaviors that have the purpose of reducing that anxiety caused by obsessions. Obsessions can cause impairment in many areas of the patient's life and compulsions can become uncontrollable.

As for the diagnostic features, they mention OCD is characterized by: exaggerated sense of responsibility, perfectionism, overestimating threats, need to control thoughts, not being able to tolerate uncertainty, performing compulsions for relief rather than for pleasure. Interestingly, this section of the chapter also mentions that there are common themes for those with this illness: cleaning and contamination, symmetry, forbidden or taboo thoughts and harm. From these common themes, it seems that most people relate OCD with the first two, and it was observed that many of the videos were actually aiming at informing the public on the other two types (as well as many others) of obsessions and compulsions.

Out of the total of 30 videos, 23 percent used them in the clinical sense, resulting in 76%. On the other hand, only 7, meaning 23%, made a clinically-inappropriate use of the term. Three out of thirty videos were produced from the perspective of a mental health professional. However, as it was mentioned before, many of these videos aimed to educate the public, resulting in 18 out of 30, making up for 60% of the videos.

An example of a clinical usage of the term is the following: "Everyone has intrusive thoughts; these are random thought that pop up and just kind of float on by. Someone with OCD… that thought gets stuck and just start nagging at them" which explains obsessions in accordance to the DSM-V. Instead, the use of the term in "OCD Worse nightmare" when pointing to one blue ball in a pit full of yellow balls, was perpetuating the idea that OCD is only related to being uncomfortable with any kind of asymmetry.

4.1.5 Trauma

Although the word 'trauma' itself is not a diagnosis and it is not found as such in the DSM-V, it refers to a *traumatic event*, which is determining of other disorders or diagnosis within the manual. This traumatic event is defined under the diagnostic features of Post-Traumatic Stress Disorder (PTSD) (p.271-280) as any event or events that may cause or threaten death, serious injury or sexual violence to an individual, a close family member or a close friend. According to the Criterion A of the section on PTSD's diagnostic criteria, some of these are examples of traumatic events: exposure to war, sexual violence, kidnapping, terrorist attack, torture, incarceration, natural disasters, motor vehicle accidents, suicide, serious injuries, etc.

In my data, 70% of the uses of the word 'trauma' were not used according to the clinical definition, while 30% were. None of the occurrences of this word in the corpus came from a mental health professional. Also, one of these videos was made by a person suffering from a medical condition, describing the trauma that it entails. However, as of 2013, within the fifth edition of this manual, life-threatening illnesses or debilitating medical conditions are not considered traumatic events, although medical catastrophic events are (American Psychiatric Association, 2013). Also, the emotional reactions to the traumatic event, such as fear, are also not part of the definition (American Psychiatric Association, 2013). Therefore, although it appeared as if the user was using the word in a clinical sense, this had to be considered as non-clinically used.

An example of the word 'traumatized' used in a clinical sense in accordance to the DSM-V is: "My classmates were crying because they were traumatized bcuz of the sounds of the bombs so I tried to calm them down" since experiencing a bombing is a traumatic event that threatens someone's life. On the other hand, the majority of examples used the term to describe harmless situations that may be uncomfortable, for example: "Me trying to film a normal vid: Seeing my parents having sex:'). I'm traumatized."

Overall, taking into consideration the discussion above as well as the numbers, the answer to the first research question could be summarized as follows: seeing at the terms altogether, almost half of the users used the terms in the clinical sense, while the other half used them in a non-clinical sense. However, there are notable differences when looking at a psychiatric term specifically, as some seem to be taken out of the original medical context (recontextualization) more than others, and their functions for conversation seem to greatly vary. This last statement will be observed more closely in the following section.

4.2 Research Question 2: *If not, what are the new contexts in which they are being used and has this recontextualization changed their meaning?*

When trying to identify the different contexts in which these terms are used, I made use of the categories and subcategories mentioned in the methodology section. Tables A1 to A5 in the Appendix are referenced throughout the following text in order for the reader to consult them and get a better understanding of the patterns of recontextualization that happened for each of the terms. Of course, every video varies in the purpose with which they were produced: talking about memories/anecdotes, sharing reflections, telling jokes, giving opinions, complaining about everyday happenings, providing medical information. However, the breakdown of the usage of each term is seen in terms of what function they serve in this context and if this function has deviated their meaning from the original clinical sense.

The classification of the videos into categories helps to answer the first part of the question, which is identifying the new contexts in which they are applied. Then, in order to get a sense of the meaning that is implied when using each of the psychiatric

terms, I include the results of the collocations and some observations that were relevant when looking at these terms in the concordance (KWIC). These two tools from the corpus software aid in identifying patterns and senses and supporting the classifications and uses observed beforehand. The meanings are then compared to the clinical usage discussed above to see how it has changed, if at all.

4.2.1 Bipolar

Overall, the term 'bipolar' shows that there is an interesting phenomenon happening with its recontextualization. Its meaning in the uses on TikTok does not seem to deviate much from the clinical sense. The term on TikTok seems to be mostly used by those who want to destigmatize the illness through education, but when combining it with humor, they can contribute to its trivialization. On the other hand, the term is not being used as a descriptor for things, as it was expected. This opens new questions about the evolution of the term and the effects that de-stigmatization campaigns online actually have on language.

4.2.1.1 Recontextualization

Table A1 illustrates the categories in which each of the videos under the hashtag #bipolar belong. This table serves as a visual aid for us to realize which of the categories seem to dominate each of the words. In this case, we can see that the term 'bipolar' seems to be used in a lot of different contexts, but mostly in the educational and humorous ones.

When looking at the educational category, it is easy to realize that all except two come from the user's own experience with the disease. Some of the users tried to bring a real image of what it is like to have it, no matter how crude this reality is, admitting to reckless behaviors and negative thoughts. Others talked about symptoms in order for others to identify it more easily. Nevertheless, most of these same educational videos fall into the mockery/self-mockery subcategory within the humorous category. This people are accurate in their descriptions of the illness, its symptoms, their struggles in everyday life with it, yet they tend to give it a humorous, light-hearted turn, fulfilling both functions in the same post. An example is seen below, from a comedian with bipolar explaining the illness in their performance:

> (1) I actually have bipolar. For anyone who doesn't know what bipolar is, it's the one where you go up and down all the time. And it's not like somedays I'm happy, somedays I'm sad. It's a bit more intense than that. It's more like for like months on end I'll be like: "Ugh, I should probably kill myself" right? but then for weeks I'll be like: "I! CAN'T! DIE!" So, you know, swings and roundabouts, I guess.

Although this can function as a coping mechanism for those with the illness, we must remember that some of the ways for an illness to be trivialized, is through the overuse of humor to describe the condition and the oversimplification of symptoms. So, in an attempt to educate others, users may also be contributing to the trivialization of the illness.

4.2.1.2 Meaning in Context

When searching for collocates of this term in my corpus, it indicated four words that were most likely to appear next to 'bipolar', both before and after:

Table 3 Collocates found in corpus for 'Bipolar' ordered by Left and Right Frequency

	Bipolar	Rank	FreqLR
1	Disorder	1	8
2	Being	2	5
3	Classic	3	4
4	Atypical	4	3

Also, when looking at the contexts in the corpus, most of the sentences seem to use the word in order to talk about the disease itself, and not as a negative descriptor for an unrelated topic. Most of the occurrences of the word 'bipolar' in the corpus are succeeded by 'disorder' or preceded (aside from 'classic' 'atypical' and 'being') by 'my' and 'am', showing the experiential or anecdotal context in which these were produced, aside from the informed sense that comes from mental health professionals. This only further confirms the tendency of the users in TikTok to use the clinical sense for 'bipolar' in their posts, despite taking it away from the medical context.

The following is an interesting example found in my data: "Pov your handwriting is actually bipolar". This user uses the acronym 'POV' which stands for 'point of view' in which users describe how a situation looks like so others which have not experience it can have an idea of what it is like. This user used this text along with images of their handwriting in different occasions, looking very different every time. Surprisingly, this was one of only a few examples showing the use of bipolar for negative evaluation that appeared in my data. This was surprising since due to my personal observations of the use of the word 'bipolar' in everyday speech. I expected a non-clinical use of it with the purpose describing of trivial unstable or changing things, such as the weather.

4.2.2 Narcissist

In my data, users tend to give a negative connotation to the word 'narcissist' and use it to describe others in a pejorative way. From observing the context in which they are used, users utilize it more as an adjective for someone with inappropriate or hurtful behaviors. Although many of the diagnostic criteria and features outlined in the DSM-V may be considered as morally unacceptable by many, these are very specific behaviors which have to coincide with other symptoms for it to reveal an actual diagnosis. In the usage of this term online, this word is used more to convey emotional force when referring to partners (Dewaele, 2004 quoted by Raras and Sudarwati, 2021). This usage has made it

undergo into popularization for conversations about relationships and it has increased its stigmatization, relating it to words like 'evil', which are not part of the clinical sense.

The users also relate the term to other diagnosis that carry the same negative stigma, antisocial personality disorder, to which 'sociopath' and 'psychopath' refer to. Although users seem to use these three terms interchangeably, they are indeed different diagnosis with differences between them. Also, it seems as if 'narcissist' is being used in a more serious way than 'sociopath', as there was only one instance where it was used for humor, in contrast to 22 instances (73%) for 'sociopath.' The reasons behind this difference will be discussed and explained in more detail in the section for 'sociopath', however, it suggests a difference in the degrees of normalization and trivialization for each of the terms, despite being regarded as synonyms.

4.2.2.1 Recontextualization

By looking at Table A2, it is evident that most of the videos produced in relation to the word 'narcissist' on TikTok, have been in the context of educating others. Within the evaluative category, the uses of this term are distributed almost evenly among the three subcategories: *content, role of mental health professional* and *experiential.* Actually, this term was the one that had the most videos categorized under content and role of mental health professional, among the five terms analyzed in this study. This suggests that this is a term that is being talked about by doctors and therapists almost as much as by users who want to bring awareness or talk about their own experiences. The fact that mental health professionals are so involved in the use of this psychiatric term within this social platform, seems to be influencing the use and meaning of it, as a less drastic difference is shown between the clinical and non-clinical uses as with other terms.

However, about half of the users that utilized the term 'narcissist' in their videos not accordingly to the clinical definition, were using it in a derogatory context to describe others. With 'bipolar' there were some examples where it was used to evaluate a person, but it varied in whether it was positively or negatively, as well as if it was to themselves or others. In the case of 'narcissist', it only showed negative evaluations of others. Although generalizations cannot be made due to the size of this sample, this result suggests that there is still a negative connotation attached to this word. This becomes especially evident if the main context of these videos, which is warning others about how those with this diagnosis behave in order to prevent abuse, toxic relationships and other consequences, is observed. Some examples of the uses where this stigma can be seen are:

(2) How to tell if someone is a narcissist. How to tell if a person is evil.

(3) Narcissists have secret lives. They lie effortlessly. They are two faced appearing with a perfect public image that most people believe but in the shadows, when no one is looking, they do tremendous damage to their family members, especially their children.

4.2.2.2 Meaning in Context

As for the results of the corpus, the tables below show the collocates shown for both 'narcissist' and its plural form 'narcissists':

Table 4.1 Collocates found in corpus for 'Narcissist' ordered by Left and Right Frequency

	Narcissist	*Rank*	FreqLR
1	A	1	44
2	Narcissist	2	10
3	How	3	9
4	Will	4	8
5	Texts	5	3
6	Attention	6	2
7	Finest	6	2

Table 4.2 Collocates found in corpus for 'Narcissists' ordered by Left and Right Frequency

	Narcissist	Rank	FreqLR
1	Sociopaths	1	8
2	Covert	2	5
3	Narcissists	3	4
4	Much	4	3
5	Language	5	2
6	Secrets	5	2
7	Careful	5	2
8	Particular	5	2
9	Psychopaths	5	2

Most of the words shown here create an image of fear towards those with narcissist personality disorder ('careful'), focusing on the fact that they can be deceitful ('secrets', 'covert'). In the column for the singular form of the word, 'will' is one of the most common collocates. This word was easily noticed when looking at the word in context with the concordance. Most of the sentences where the word occurs, follow the same structure: "A narcissist will…" followed by a verb. The verbs that succeed 'will' add to the idea of narcissist manipulation and deceit: *will choose you, will pretend to be, will treat you, will use, will work*, etc. If they are not using will, they will use a verb in the

present tense, as they are describing a person and they take these descriptions as facts, and usually these verbs also add to this dark image they are trying to convey through their video: *accuses, believes, preys, decides, treats, sees,* etc.

4.2.3 Sociopath

The results described below show an interesting contradiction. With the word 'narcissist' many people tried to use it in a clinical way, despite it being highly popular and normalized. One would expect the same to happen with 'sociopath', as people treat them as equals in meaning. However, it seems that 'sociopath' has been used in more playful and non-serious contexts, fulfilling a different function.

During the time the videos were collected, a song by American singer Olivia Rodrigo, called 'good 4 u' was extremely popular among young people, which make up a big part of TikTok's users. The song talks about a breakup and the ability of the other to move on from the relationship. One of the lines of this song reads: 'like a damn sociopath', and people decided to use that part of the song and use it as a meme for describing situations in which they thought someone else's behavior was unacceptable, even though it had nothing to do with the original theme of the song. This resulted in a popular TikTok trend.

A trend comes to be when a user decides to contribute with own opinion, perspective or interpretation on something others are commenting on, usually using the same format as the creator of the original idea did, reusing elements like audio, performances, gestures and images. This trend, and therefore this specific use of this psychiatric term, went on for months and that is why many of these videos were still found in the search, despite the song releasing a year prior.

4.2.3.1 Recontextualization

Table A3 provides a clear image of how this third psychiatric term is barely used in the educational context, with most of them occurring in the evaluative and humorous context, due to the popularity of the aforementioned song. The behaviors they refer to do not seem to touch on serious matters, unlike it did for other terms.

The memes including this song mostly include everyday harmless situations but which can cause disagreement or controversy in casual conversations. Therefore, most of them are using the term 'sociopath' in the song as hyperbole but also as an evaluative tool for describing someone negatively. Some of the examples of situations in which this term was used were wearing one's uniform after school, saying water has no taste, finding denim jeans comfortable, among others. The text below is an example of this trend:

(4)-"What are you drinking your vodka with?"

-"I'm just drinking it like this"

-"What's your mixer, though"

-"I'm just drinking it out the bottle"

-Like a damn sociopath

Although the line 'like a damn sociopath' was not really uttered by the users nor was it the users' original idea, I included these videos for several reasons. Firstly, they reflect the complexities of the affordances of TikTok and how users communicate in this platform. Secondly, trends are a very important side of TikTok and it is impossible to make an investigation on this social medium without encountering contributions to trends. Thirdly, Olivia Rodrigo's lyrics themselves are recontextualizing the term 'sociopath' and due to the popularity of her song, this term became highly popularized among her audience and resulted in a myriad of recontextualizations on TikTok. Finally, Kresovich (2020) believes that a sort of normalization is taking place in the English language as a result of songs that talk about mental health.

However, it is important to take into consideration that if this trend had not been included in this study's data, perhaps the results shown in this section would be different. Out of the 30 videos collected for 'sociopath', 36% were participations on this trend. However, out of the 30, 73% use 'sociopath' as a hyperbole for humor and 70% as a negative evaluation, demonstrating that is not only those participating in the trend the ones that use this term in these contexts. This term was the one that had more instances where the term was used to evaluate oneself, as well as when the user would believe they were doing something unacceptable.

Contrastingly, the few videos (20%) that used the term in a clinical sense, used the term in an educational context. These educational videos talked more about the careers of sociopaths and their selfish actions rather than focusing on relationships. This was interesting as people using the word 'narcissist' would pair it with 'sociopath' and mostly use the term to talk about romantic relationships.

4.2.3.2 Meaning in Context

Table 5.1 Collocates found in corpus for 'Sociopath' ordered by Left and Right Frequency

	Sociopath	Rank	FreqLR
1	A	1	36
2	Like	2	14
3	Damn	3	13
4	Pewdiepie	4	3

Table 5.2 Collocates found in corpus for 'Sociopaths' ordered by Left and Right Frequency

	Sociopath	Rank	FreqLR
1	Sociopaths	1	8
2	Narcissists	2	8
3	are	3	7
4	Psychopaths	4	2
5	Operate	4	2

As Tables 3.1 and 3.2 above show, most of the collocates for 'sociopath' are related to the line in Olivia Rodrigo's song. As for the plural form, 'sociopaths', it shows just as the previous table for 'narcissists' that people tend to see the terms 'sociopath', 'psychopath' and 'narcissist' as synonyms.

As for the concordance search for both the singular and plural forms of this psychiatric term, it seems to be used in general as a descriptor. There are similar examples to those of 'narcissist', were verbs like 'is' and 'are' are used since people try to describe sociopaths to the public, but as it was mentioned before, there are only a few instances. For example: "They (sociopaths) really are emotional vampires."

4.2.4 OCD

An interesting phenomenon I observed in this category in particular was that most of these educational videos were fighting against the trivialization of this term. The users did this by educating on what OCD is not, solely being tidy and organized, and what OCD actually is, focusing on everyday struggles and intrusive thoughts. Many of them reenacted real-life conversations where they educated people on the clinical use of the term, informed by their own diagnosis or the definition found in medical contexts.

It is possible that this kind of discourse in defense of the clinical sense of the term exists to counteract the popularization of the term in previous years and the trivialization that came with it. Now, people have more access to information and as we know, they are open to sharing their own personal stories and intimate details about their lives. This openness helps those with OCD to raise their voice and educate others. By having people participating in this new movement to stick to the clinical meaning, a change in meaning similar to the one illustrated in bipolar, where it seems to return to the original sense can be expected.

4.2.4.1 Recontextualization

The usage of the word of OCD was one of the terms that was applied clinically the most on the users' everyday language. Out of the 30 videos, 60% used the term OCD for educational purposes. As with the results for 'bipolar,' most of these videos were also using 'OCD' in a humorous context, mostly under the category of self-mockery/mockery. Although most of the language used in these videos was very clinical and showed how the illness deeply affects their everyday functioning, they all had a comedic tone.

Similarly, although this may help the users to deal with their diagnosis, it may also contribute to the trivialization of the term, as they take away some of the seriousness that comes with any illness.

Although only 23% of the sample for 'OCD' was using the term in a different way to what is described in the DSM-V, most of those videos entered the context of evaluation, all in a negative way but in this case, towards one-self. Ironically, most of these also fit the category of humor, but using the term as a hyperbole, not as self-deprecating humorous tool. In all of these cases, it is evident that the use of the term is very brief and light-hearted and not to be taken very seriously. This fact makes these videos greatly contrast with the educational ones, were people dealt with heavy topics and struggles. Here is a comparison to illustrate this:

(5) Omg can you fix your hoodie I'm so OCD about that

Vs.

(6) In life there will be things to question, for me that question has always remained constant: why is my brain broken? My first time experiencing what would be a lifelong battle with obsessive compulsive disorder I was 10 years old. I obsessively tapped my childhood bedroom doorknob in increments of four hoping my mom wouldn't get into a fatal car crush due to my ritualistic patterns. Fast forward to being nineteen in Los Angeles, I associated techno beats with those of gunshots and that I would somehow get shot the next time I was at the grocery store. I wouldn't eat anything but a $12 smoothie with three ingredients because our foods were processed and therefore GMOs slowly would make me go crazy. I couldn't clean my apartment because I associated objects with memories and chemicals and cleaners would make me black out and destroy my brain. My friends wouldn't hear from me for weeks because texting was too permanent. My whole life I was scared to speak out about my disorder, thinking people wouldn't get it because honestly most people wont and most people haven't. It took me being bedridden for months and on the verge of applying for disability and still people won't get the severity of this mental illness. This is OCD and I'll keep fighting for the kids who never got the proper diagnosis, treatment and for the kids who deserve access to affordable resources.

Examples like the latter are consistent with the trend I observed of fighting against trivialization brought by examples like the former. The posts in which users used 'OCD' in a clinical sense, counteract the posts that only show positive experiences or "romanticize" the illness, and create skepticism about its severity, which is one of the main causes of trivialization.

4.2.4.2 Meaning in Context

When looking for 'OCD' in the corpus, most of the contexts in which it appeared were sentences that explained aspects of the illness, demonstrating the educational context in which it was used. Verbs like *is, looks like, stands for* are common after this word, and other clinically-related words like *intrusive, manifest, repulsion, compulsion* are examples of others found in the same sentence. These are objective terms and are in accordance to what is mentioned throughout the DSM-V diagnostic criteria and features.

As for the words usually found immediately before 'OCD' most of the are: *have, with, what, not, my*. This again, shows there is a fight for awareness especially from those who have been diagnosed with it. The collocates found for this psychiatric term were only four, though. However, I decided to also look for the long version (obsessive-compulsive disorder) to see if it provided different results. Although 'obsessive-compulsive disorder' did not show a high frequency in its collocates, it seemed relevant to include them, as it seems as a very well-summarized description of the definitions provided by the users when talking about their own experiences with the illness.

Table 6.1 Collocates found in corpus for 'OCD' ordered by Left and Right Frequency

	OCD	Rank	FreqLR
1	Have	1	15
2	Talk	2	4
3	Telling	2	4
4	Pure	2	4

Table 6.2 Collocates found in corpus for 'Obsessive Compulsive Disorder' ordered by Left and Right Frequency

	Obsessive-Compulsive Disorder	Rank	FreqLR
1	Quiet	1	1
2	Lifelong	1	1
3	Battle	1	1

4.2.5 Trauma

As it was mentioned on the answers to research question one, trauma's definition has changed in the medical field itself. It is now more limited in the events that classify as traumatizing. However, trauma was one of the psychiatric terms analyzed in this study which was used the most in a non-clinical way. Additionally, it very frequently was used from a first-person perspective, in contrast to the rest of the terms which were mainly used to give descriptions of others or inform on non-personal experiences.

The majority of the uses of the word 'trauma' and its variants (traumatized, traumatic, traumatizing) was in a humorous context. This suggests that a long process of trivialization has been taking place. People seem to be skeptic about the severity of this concept and have a collective oversimplified definition of the word. It has become so normalized in our language that it has lost its seriousness and changed its meaning to be a synonym of 'distressing' or 'disturbing'. Therefore, the way in which the term 'trauma' is framed in everyday conversation will surely have a very different reaction from the word being used in the medical context.

4.2.5.1 Recontextualization

The few users that applied the term 'trauma' in a clinical sense did it in an educational context, coming from their perspective and usually also using humor through self-mockery. However, most of the videos (87%) used the term in a humorous context, and the majority of the humorous usages fitted in the subcategory of 'hyperbole', which was the expected result.

There is a difference with this humorous context and the one discussed in the previous sections dealing with the results for other terms. With other terms, people seem to be using humor in order to make their situation easier to deal with, whereas in this case 'trauma' seems to be used in a non-clinical sense to refer to any life event that made someone uncomfortable or disgusted, as in the example below:

(7) I am traumatized.

My dog woke me up at 3 AM to let him out. He brought me something to throw.

I threw it twice. It was a frozen turd.

4.2.5.2 Meaning in Context

When looking for the term 'trauma' in the corpus, it was found that it was common to use a possessive before the word (*my, your*). Many times, it was accompanied by an adjective (*unhealed trauma, good trauma, childhood trauma*) with 'trauma' acting as a noun, while others it acted as an adjective with nouns after it (*trauma dump, trauma bond, trauma joke*). Different versions of the word were also searched for: *traumatic, traumatizing, traumatized*. For 'traumatic' and 'traumatizing', they are usually within a sentence in past tense, when talking about memories (*was, were*). On the contrary, for 'traumatized', most people use it in present tense (*I am traumatized, I am still traumatized, me being traumatized*, etc.). Also, many of these terms related to trauma are used with a degree modifier (*slightly, most, so, low-key*).

When looking for collocates, only trauma and traumatizing were included as the other terms could not find collocates under these settings, since they were not as common in the corpus as these were.

Table 7.1 Collocates found in corpus for 'Trauma' ordered by Left and Right Frequency

	Trauma	Rank	FreqLR
1	Strong	1	2
2	Made	1	2

Table 7.2 Collocates found in corpus for 'Traumatizing' ordered by Left and Right Frequency

	Traumatizing	Rank	FreqLR
1	Was	1	4

It is interesting to note, that all of these collocates appear in one of the only exceptions in which the person applied 'trauma' in a way closer to the DSM-V diagnostic features of PTSD, and the effects mentioned in criterion D related to an inability to remember the traumatic event: ""Your trauma made you strong" No! My trauma made me forget my childhood, I don't remember a damn thing!" However, it is not found in any other example, which indicates that there were not many pairs of words that tended to cooccur in this corpus with 'trauma'.

4.3 Research Question 3: *What does the recontextualization of these terms in social media demonstrate about modern communication and social practices online?*

When watching the collected videos and analyzing the way in which the users decided to use a certain psychiatric term and in which context, three major themes stood out about the way in which we communicate in this day and age and how we relate to others. Firstly, the recontextualization of psychiatric terms is not a linear process, and the reasons and consequences of their new uses are different in each case. We are able to use social media to move the term a step forward or a step back in the process. Secondly, social media allows us to find spaces with people who are similar to us or have similar interests. After decades of categorizing or 'othering' those with mental health issues, they can find and build a community through the free use of this vocabulary online. Thirdly, the affordances of social media platforms allow us to create or show a version of ourselves. However, these identities online may not showcase the reality of illnesses and continue to propagate a misunderstanding of these terms. These three themes are connected to the areas that are constituted by discourse according to Fairclough et al. (2011): world representations, social relationships and people's identities. These themes are discussed in greater detail below.

4.3.1 Recontextualization

The concept of recontextualization may appear simple from the literature, referring only to the process of taking an element out of its original context. However, by observing the contexts, different perceptions, levels of popularity, normalization and stigma of psychiatric terms in social media, I see recontextualization not only as a process itself, but as part of another larger process. This larger process explains changes in meaning and a term can come full-circle or get stuck in a stage for a while, depending on the circumstances. The data of this study act as a snapshot in time of this process.

An example of a term going through different stages of this process is *homosexuality*. Although clinical literature like the DSM-V is used to reduce subjectivity and establish agreed-upon definitions, psychiatric terms have also seen changes in meaning in the clinical sense overtime. Homosexuality was considered a mental illness

in the first edition of the DSM but eventually was removed from it in 1973 (Drescher, 2015). This act of 'de-pathologizing' the term led to de-stigmatization and a change in how people viewed those who claimed to be homosexual. Cultural attitudes changed, viewing homosexuality as normal (Drescher, 2015). The expulsion of the term from the clinical context led to the recontextualization, normalization and de-stigmatization and ultimately changed its meaning. In Figure 2, I try to illustrate the process, explaining its different stages and giving examples from my own data below.
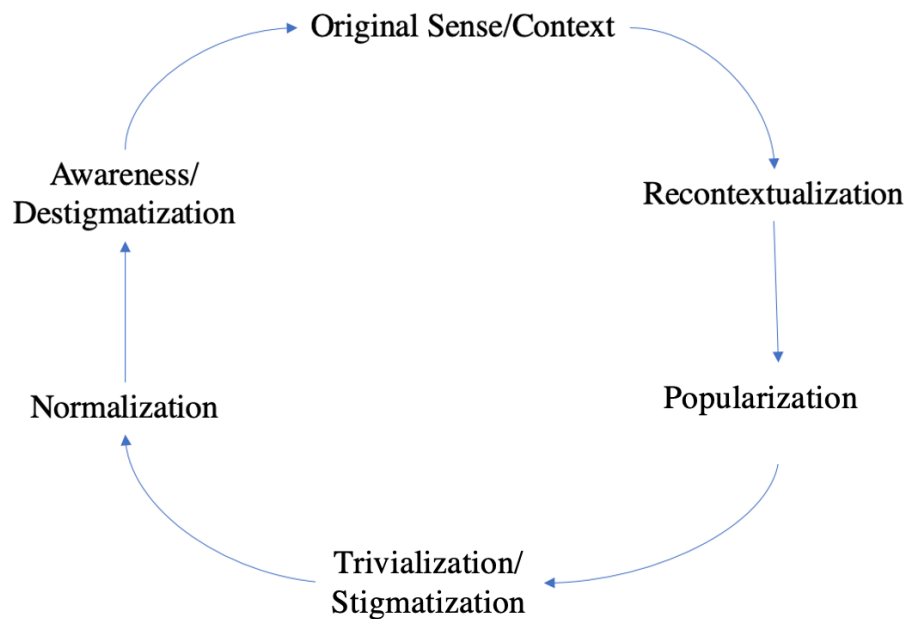
Figure 2. Diagram describing the process of sense change through recontextualization.

The data showed that the action of recontextualizing a term often leads to popularization. An example is the word 'trauma' which has been popular way longer than 'sociopath' which has gained popularity in social media not so long ago. When looking for these hashtags on TikTok, 'trauma' had been used 8.7 billion times, while sociopath 524.7 million times (as of April 28, 2022). Of course, popularization coming from the recontextualization of a term is not a quick process and it could be expected to see an increase of popularity for sociopath with the passage of time.

In the case of psychiatric terms, the popular use of the term in this new variety of unrelated contexts online (and offline) very possibly results in the trivialization and/or stigmatization of the illness. When people use a term such as 'bipolar' to describe a person who changed their mood, it downplays the seriousness of the illness. When they use 'sociopath' as a negative term to describe people, it stigmatizes it and create a new connotation of repulse or fear that is attached to the word. An example in the data is:

(8) "If you want to talk about sociopathic vibes just see what he tried to do to the best man in his wedding. He told his former partner the best man at his wedding that he was going to staple him against a wall and burn him alive."

Because these psychiatric terms do not carry the seriousness or accuracy they once had, they become normalized in everyday speech and used in ways which they were not meant to be used in the first place. For example: "I'm a sociopath. Red flags in my apartment: Weed pillow, Peppa pig coloring book, 3 water bottles by the bed "just in case," single chair. Wtf." or "Kid gonna grow up traumatized by strawberry lemonade." In the first example, it is shown how sociopath has now been normalized for using to describe someone silly or strange, while also being accepted for using to describe someone who can be deemed as wrongful. From the second example, referring to a child who had lemonade poured down on him by accident, we can observe that trauma is used very lightly, mainly to refer to situations that may be easy to remember because of the level of discomfort they brought.

Then, people realize how these terms are being normalized and misused and they begin campaigning and educating others looking for the awareness and de-stigmatization of the illness. This can be clearly seen with the usage of 'OCD' in my data, where many people dedicated their posts to talk about what OCD is and is not. An example is the following:

(9) "So let's first talk about what OCD isn't. While the media like tv and movies and social media tends to portray it as this love of cleaning and organizing, so that's the first sign if somebody loves doing it, it's probably not OCD, because it's not enjoyable, it's actually highly distressing and debilitating and exhausting. It's also not just wanting thing a certain way, like having preferences. "Oh, I like to have my closet color-coordinated", which I do, or "I like having everything on my bookshelf alphabetical", that is also not OCD. Again, if you like it, probably not OCD."

If these awareness campaigns are successful, they will result in people using the original sense, despite the terms already being spread into contexts different from the medical. This can be seen with 'bipolar' which was mostly used in the clinical sense, with vocabulary related to the diagnostic features and accurately describing their experiences in accordance to the psychiatric literature. For example:

(10) "Being bipolar is such a joy. Remember, when you're in a depressive low episode and nothing gets done bc just being alive seems to much…there's a manic high episode right around the corner & it'll all get done"

It is possible that other psychiatric terms like the ones investigated here can have a similar destiny to the one mentioned above for 'homosexuality', when realizing how influential language in social media and de-stigmatization campaigns can be. By framing the illnesses differently, the cycle presented above on Figure 2 could then be broken and it would be possible to create a new meaning and take the concept into a new kind of normalization.

4.3.2 Affiliation

TikTok users use the affordances of this social media platform to participate in trends and contribute with their own experiences and opinions. This results in the recontextualization and popularization of these terms within the platform. However, it is important to remember that the main reason for these participation in the conversation on mental health is caused by a desire to build and belong to a community. This desire for community building will be referred to as affiliation, as per Zappavigna (2011).

From the collected data, it is evident that many of these users sought for affiliation through their posts. All of them were found through hashtags, which is a sort of coding (McCosker & Gerrard, 2021) but also can act as a collaborative act (Zappavigna, 2013) so others can find others akin to them in an easier and faster way. To have even more possibilities of social connection, most of those who used the word 'sociopath' were participating in a trend using a popular song. Due to TikTok's affordances, it is possible to take the existing audio and use it as prompt for others to contribute with their own versions, reproducing it as an "audio meme" (Hautea et al., 2021).

Memes usually are a big contributing element of affiliation, as they act as a sort of inside joke and they can become very specific depending on the community they are created for. What was observed in the videos for 'sociopath' is a meme that could be more generally applied to a variety of groups.

Other humorous strategies when talking about these difficult topics through dancing, acting, sarcasm, mockery, etc. were observed in these videos. This type of humor used in social media is called 'gallows humor' and it is used to maintain group affiliations but also as coping mechanisms for those reliving their experiences through language (Herrick et al., 2021). For example: "Me giving examples of taboo intrusive thoughts to someone without OCD. And I think to myself…what the f…?!" or "Me coming out of a manic episode with a doubled body count, chlamydia, 5k missing and a kitten…a kitten!" As McCulloch (2019) say, jokes about shares struggles convey the message of 'we are all in this together' while jokes that are politically incorrect can perpetuate stereotyping. However, as it was discussed before, the overuse of these humorous tools and memes can actually contribute to trivializing the terms.

Affiliation does not only contribute to the relationships and connections with others, but it also helps to negotiate the meanings of words within genres (Zappavigna, 2011), in this case, the TikTok video. Many of the users in these videos used these terms for the positive or negative evaluation of others or themselves. In the case of psychiatric terms, users bring out certain aspects, in this case mostly negative, to promote certain interpretations of the illnesses and those who are diagnosed with them, as in the case of 'sociopath' and 'narcissist'.

When users continue to promote a frame, this can become the dominant meaning. Although a person of either gender can be diagnosed with narcissistic personality disorder, it has been framed to refer almost exclusively to men who abused their partners on TikTok. A good example is the following:

(11) The texting cycle of the narcissist. How the narcissist texts you during the love bombing
phase.They are training you to crave this high level of affection from them. How the narcissist
texts as they subtly start to withhold affection. You start to question whether they're acting "off"
or if you're imagining it. How the narcissists texts during the full-blown devaluing stage. They
make you feel crazy for wanting the affection they showed you when they wore the mask in the
beginning.

The framing of these terms, although not beneficial for the fight against stigma, create safe spaces for people who have been through similar experiences to listen and be listened to. They can look for an aspect of their lives online and share the journey with others.

Interestingly, women seem to be the ones who discuss mental health the most on social media. 109 out of the total 150 videos (73%) were posted by women. In a study by Page (2011), where she studied online cancer support groups, she observed that women were more prone to express emotion and look for as well as give support to others, while men only used the groups to find information and it was not common for them to participate with their own experiences. Although this can indicate that women are more involved in the promotion of awareness and normalization online, it can also mean that most of the changes in meaning for these psychiatric terms have been caused by women more than by men. After all, according to McCulloch (2019) women are way ahead of men when we talk about changes in language.

4.3.3 Identity

Although the affiliation in social media sites can bring benefits for those who struggle with mental health, as it brings a sense of understanding, it can also be detrimental as it shows only certain sides of the illnesses. Many of the social media users that participate in the conversation on mental health do so in a way that can spark interest from other users. McCosker and Gerrard (2021), found that many users who used hashtags related to depression on Instagram showed patterns of "deliberative profile management, careful aesthetic curation and affiliation practices through memetic content." The same can be said for TikTok, after all, users can manipulate their posts and profiles to show a certain image or establish relations with certain users. When they use psy discourse, they are able to pick the meaning and context they will be applying, as it is a video of their own creation. An example of this issue can be seen below, where a user with bipolar see a pleasingly aesthetic version of it on TikTok and is questioning her own symptoms:

What's up girlbosses, I have chronic hypomania that means I am manic every God forsaken day
of my silly little life. I would rather be depressed because I can feel something for once and
sleep is nice. Who started this trend? Why do you all look so great during your mania? Where's
my great???

Of course, the way in which we speak about illness, our identity or others, come from the people and the power dynamics around us, as well as our need to align ourselves with those we deem as powerful or 'cool' (McCulloch, 2019). Many of this people who use these psychiatric terms online may be in fact influenced by those they follow and their use of language. This indicates that their linguistic choices may not even come from a

place of previous experience and adopted stereotyping or stigma, but just influence and a sense to belong or trying to create an identity similar to that of others they admire.

When users online adopt mental illnesses as part of their online persona or identity in order to spark interest and viewership, they are forgetting about the stigma and stereotypes those diagnosed with them are living with and fighting against. This is a similar case to how terms related to African-American music have become popularized but those who created them are still being stigmatized for the way in which they talk (McCulloch, 2019).

Thus, by adopting this online persona with a diagnosis, many young people seem to 'romanticize' having a mental illness, seeing it as something interesting or even desirable. Additionally, many celebrities talk about their own mental struggles online (Kresovich, 2020). This can also be due to the unrealistic portrayal of the mentally ill in social media and in Hollywood, which can also glamourize it or make it seem fascinating (Dunn, 2017). One of the users even started their video by saying: "Hey, I am going to un-romanticize bipolar disorder and bpd by giving a list of things I've done in episodes." She continued to talk about the topic in an educational but sarcastic manner, with the purpose of not only bringing light into what a manic or depressive episode can look like in reality, but also discouraging those who want to make of these diagnoses part of their identity or one of their personality traits.

4. Conclusion

The present study had three main purposes: firstly, to compare the meaning users give to psychiatric terms to the clinical one described in the medical literature; secondly, to observe in which contexts outside the medical one are these terms being used and how that usage in that context may or may have not changed their meaning; thirdly, to connect these findings to the affordances of the medium of TikTok and the ways in which its users communicate and use these terms for their social practices.

The results show that it is expected for users to use the clinical sense of a psychiatric term as much as it is expected for them to use it in a non-clinical way. When talking about psychiatric terms, it is important to remember that first and foremost, they are categories used by medical professionals in order to identify a certain group of symptoms. However, psy discourse can be problematic because of its ambiguity, lack of evidence, conflicting data or subjective notions of what is considered 'normal' or 'abnormal' (Rimke & Brock, 2012). Many of these subjective notions were notable in the results of this data: users used words like 'evil' to describe those diagnosed with antisocial personality disorder and used the word 'narcissist' when referring to those who behaved poorly towards them.

The way in which users, as layman, apply these terms is different to the way in which mental health professionals use them. Mehan (1996) mention that institutional officials speak with technical vocabulary that comes from professional expertise while common people speak in a common vernacular that comes from personal experience. This becomes evident when observing the terms that were used in an educational context,

where people spoke mainly from experience with the illness or with knowing someone with the illness, as with 'bipolar', 'OCD' and 'sociopath'. However, the same terms could be used in a light-hearted humorous context. This relates to the Van Leeuwen's (2008 quoted by De Rycker, 2014) concept of the 'plurality of discourses.' Within the same platform, where users are using the same term or the same hashtag, different discourses coexist and intertwine, especially when they reach a wide variety of people through trends and memes. This relates to what Wodak (2014) stated about different discourses coexisting in the same context or moving into different fields.

The results also showed, in regards to the second aim, that users tend to take psy discourse out of the medical context and mostly into three other contexts: educational, evaluative and humorous. These recontextualizations have led to the popularization of some of the terms, which have led to them increasing in stigma. Because of this, many users are now using TikTok's affordances to try and educate others on the clinical use and the consequences of misusing the term. However, terms like 'sociopath', 'narcissist', 'trauma' are still seeing changes in meaning.

As for the third aim, these linguistic changes are coming from social changes and changes in language practices (Androutsopoulos, 2014). Androutsopoulos (2014) sees language as "a set of resources and practices, integrating change in language use and ideology with processes of socio-cultural change such as globalization, commodification and mediatization" (p.7). All of the aforementioned social changes are seen in the internet era of social media and contribute to the recontextualization, popularization and normalization of psy discourse and its change in meanings. These words are not only used for diagnosis but for affiliation, for humor, for defining our identity. The affordances of social media platforms like Tiktok allow users to be more disinhibited, and they change the boundaries between private and public discourse (Androutsopoulos, 2014).

Aside from the limitations outlined in the methodology section of this study, it is relevant to consider the fact that language is in constant change, especially online language due to the nature of social media and the rapidity with which information travels. The results on this study may vary if the study were to be reproduced in the future, as social media activism continues to bring awareness on the correct use of these terms. However, the results of this study can help to gain some insight into the functioning of this relatively new application and the changes in vocabulary that have been occurring in there because of their users' forms of communication and expression.

A relevant implication of this study is that social media does play a role in the evolution of meanings and the recontextualization of discourse. The results of this study show that users participate in different ways to change the sense in which psychiatric terms are used: some participate in memes and erroneous evaluations, while others inform and advice against using the non-clinical senses. From this conclusion, it would be interesting and relevant to continue studying the ways in which other psychiatric terms are used in social media platforms and how we as users contribute to their changes in meaning through ignorance of the clinical senses and their recontextualization.

Further research on this area could focus on other mental health topics or psychiatric terms, the recontextualization of other kind of discourses and its connection

to social media communication. With a greater span of time, a bigger study could be made in order to identify the main psychiatric terms used on TikTok by collecting videos without hashtags and creating a bigger corpus. Also, a diachronic study could be done, comparing the influence that traditional media had versus social media and the internet in the framing and construction of meanings for psychiatric terms.

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Appendix A

Table 1. Categorization of videos found under #bipolar.

DSM-V	Educational	Content	Role of MH professional	Experiential	Evaluative	Positive	Negative	Self	Others	Humorous	Irony/ Sarcasm	Hyperbole	Mockery/ Self-mockery
Yes	■			■									
Yes										■			■
Yes										■	■		
Yes										■			■
Yes	■			■						■			■
No					■		■		■				
Yes										■			
Yes	■			■						■	■		
Yes	■			■						■		■	
No					■		■	■					
Yes										■			■
Yes										■			■
Yes	■									■			■
Yes	■			■						■			
Yes										■			
No					■		■	■		■		■	
No										■	■		
Yes	■			■	■	■		■		■			
Yes	■			■									
Yes										■	■		
Yes										■			■
Yes										■			
Yes	■			■									
Yes	■			■									
Yes	■			■						■	■		
Yes	■	■											
No										■			■
Yes	■			■									
Yes	■		■		■		■	■					
No										■		■	

47

Table 2. Categorization of videos found under #narcissist.

DSM-V	**Educational**	Content	Role of MH professional	Experiential	**Evaluative**	Positive	Negative	Self	Others	**Humorous**	Irony/ Sarcasm	Hyperbole	Mockery/ Self-mockery
No	▓	▓											
Yes	▓			▓									
No	▓			▓									
Yes	▓			▓									
No	▓	▓											
Yes	▓		▓										
Yes	▓			▓									
Yes	▓		▓										
Yes	▓		▓										
No	▓			▓									
No	▓		▓										
No	▓			▓									
No	▓			▓									
No	▓			▓									
Yes	▓			▓									
Yes	▓		▓										
No				▓	▓		▓		▓				
Yes	▓		▓										
Yes	▓	▓											
Yes	▓		▓										
Yes	▓		▓										
No	▓	▓											
No					▓		▓		▓				
No					▓		▓		▓	▓		▓	
Yes	▓	▓											
Yes	▓	▓											
Yes	▓	▓											
No	▓			▓									
No					▓		▓		▓				
No					▓		▓		▓				

48

Table 3. Categorization of videos found under #sociopath.

DSM-V	Educational	Content	Role of MH professional	Experiential	Evaluative	Positive	Negative	Self	Others	Humorous	Irony/ Sarcasm	Hyperbole	Mockery/ Self-mockery
No					▓		▓		░	▓	▓		
No					▓		▓		░	▓	▓		
No					▓		▓		░	▓	▓		
No					▓		▓		░	▓	▓		
No					▓		▓		░	▓	▓		
No					▓		▓		░	▓	▓		
No					▓		▓		░	▓	▓		
No					▓		▓		░	▓	▓		
Yes	▓	▓											
Yes	▓		░										
No					▓		▓	▓		▓	▓		
Yes	▓			░									
No										▓	▓		
No					▓		▓		░				
Yes	▓	▓											
No										▓	▓		
No					▓		▓	▓		▓		░	
No					▓		▓		░	▓		░	
No					▓		▓	▓		▓		░	
Yes	▓	▓											
No										▓		░	
No	▓	▓											
No					▓		▓		░	▓		░	
No					▓		▓			▓		░	
No					▓		▓		░		▓		
No					▓		▓		░	▓		░	
No					▓	░		░		▓		░	
Yes					▓		▓	▓		▓			░
No					▓		▓	░		▓		░	

Table 4. Categorization of videos found under #OCD.

Videos	Educational	Content	Role of MH professional	Experiential	Evaluative	Positive	Negative	Self	Others	Humorous	Irony/ Sarcasm	Hyperbole	Mockery/ Self-mockery
Yes	X			X						X			X
Yes	X		X										
Yes	X	X											
Yes	X			X	X		X	X		X			X
Yes										X			X
Yes	X			X									
Yes										X	X		X
Yes	X			X									
Yes	X			X						X			X
Yes	X			X									
Yes	X		X										
Yes	X			X									
Yes	X			X									
Yes	X												
No					X		X	X		X		X	
Yes										X	X		X
Yes	X			X									
Yes	X		X										
No										X		X	
Yes	X			X									
No					X		X		X	X		X	
Yes	X	X											
Yes	X												
No										X		X	
No										X			X
Yes	X			X									
No										X		X	
Yes										X			X
No					X		X	X					
Yes										X			X

Table 5. Categorization of videos found under #trauma.

DSM-V	Educational	Content	Role of MH professional	Experiential	Evaluative	Positive	Negative	Self	Others	Humorous	Irony/ Sarcasm	Hyperbole	Mockery/ Self-mockery
No										■		■	
No										■		■	
Yes										■	■		
Yes	■			■						■			■
No										■			■
Yes										■	■		
Yes	■			■						■			■
Yes	■			■									
Yes	■	■											
No										■	■		
No					■		■		■	■		■	
Yes	■			■									
No										■		■	
No										■			■
No										■		■	
No										■		■	
Yes										■			■
No										■		■	
No										■		■	
Yes	■			■									
No										■		■	
Yes										■			■
No										■		■	
No										■		■	
No										■		■	
No										■		■	
No										■		■	
No										■		■	
No										■		■	