Fake depression on social media

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Abstract

In the digital age, social media has emerged as a powerful platform for self-expression, providing individuals with the space to share personal experiences, seek support, and connect with others. However, it has also given rise to a concerning phenomenon: the portrayal of fake depression for the sake of validation or attention. This research paper explores the complex interplay between validation and vulnerability in the context of social media, investigating the motivations behind users who claim to suffer from depression, despite lacking genuine symptoms. By examining the prevalence of inauthentic posts related to mental health, the study aims to understand whether these behaviors are driven by a genuine desire for social support or by the need for external validation in the form of likes, comments, and followers.

Through a mixed-method approach that combines quantitative surveys and qualitative interviews, this study delves into the perceptions of social media users regarding the authenticity of mental health content. It seeks to uncover the psychological and societal impact of fake depression posts, particularly how they may diminish the experiences of those with real mental health struggles. Additionally, the research explores whether such posts contribute to the stigma surrounding mental health or trivialize genuine cries for help. The findings of this study are intended to shed light on the ethical responsibilities of social media platforms in regulating mental health content while balancing the need to provide a safe space for those who genuinely seek support. Ultimately, this research highlights the importance of discerning between cries for help and calls for attention in an era where digital validation often blurs the line between authenticity and artifice.

Keywords

Fake Depression, Social Media Validation, Psychological Impact, Online Authenticity, Ethical Social Media Usage

Introduction

Social media platforms such as Instagram, Twitter, and TikTok have rapidly evolved into critical avenues for emotional expression, peer interaction, and mental health advocacy. These platforms have made it easier for individuals, especially adolescents and young adults, to share their experiences with mental health openly. By fostering communities around shared emotional experiences, social media has contributed positively to reducing stigma and encouraging conversation around topics like depression and anxiety.

However, the openness and public nature of these platforms have also facilitated problematic behaviors. One such emerging trend is the portrayal of "fake depression," where individuals fabricate or exaggerate symptoms of mental distress for attention, sympathy, or social rewards such as likes and followers. This behavior complicates the landscape of digital mental health support, raising ethical concerns and potentially undermining the authenticity of those genuinely seeking help.

Relevance of the Study and Justification As social media platforms become integral to adolescent development and identity formation, their influence on mental health discourse is becoming increasingly significant. While these platforms



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offer avenues for connection and support, they also present unique challenges. One such challenge is the rise of the "fake depression" phenomenon, where individuals either exaggerate or fabricate depressive symptoms to gain attention, validation, or manipulate others. This behavior undermines the authenticity of mental health conversations online and contributes to growing public skepticism toward mental health disclosures. Understanding the motivations behind fake depression and its broader societal consequences is critical, especially in the context of escalating mental health crises among youth and the increasing reliance on social media.

1. The Role of Social Media in Adolescent Identity Formation

- Identity Development and Social Media: Adolescents use social media as a tool for exploring and solidifying their identities. Platforms such as Instagram, TikTok, and Twitter expose young people to various narratives about mental health, both accurate and distorted. This makes it essential to understand how these platforms shape their perceptions and behaviors regarding mental health.
- Social Media's Dual Influence: Research by the American Psychological Association (APA) suggests that social media can have both positive and negative effects. While it can offer support, it can also perpetuate harmful behaviors or unrealistic depictions of mental health.

2. Understanding the Phenomenon of Fake Depression

- Exaggeration and Fabrication of Symptoms: The "fake depression" phenomenon manifests in various ways, including exaggerating symptoms for sympathy, creating false narratives for personal gain, or manipulating others for attention. These behaviors can range from cries for help to deliberate attempts to influence others.
- Impact of Social Media Metrics: Studies, including one published in *Cyberpsychology, Behavior, and Social Networking*, have found that posts about mental health often garner more interaction than other content, encouraging some individuals to post exaggerated or false depictions of their mental health struggles for increased engagement and validation.

3. Implications for Mental Health Discourse

- **Erosion of Credible Advocacy**: The widespread presence of fake depression on social media can dilute the impact of legitimate mental health advocacy. As fabricated posts increase, the public's ability to discern real mental health issues becomes blurred, undermining empathy and support for those genuinely struggling.
- Confusion and Diminished Impact: The National Institute of Mental Health notes that distinguishing between real and exaggerated mental health issues can be challenging for both peers and professionals, which may result in reduced willingness to engage in meaningful support.

4. Consequences for Public Perception and Trust

- Growing Skepticism: The rise of fake depression leads to increased skepticism toward online mental health disclosures. Over time, people may become less likely to offer support or believe individuals who share their struggles, impacting the overall willingness of users to engage in mental health conversations online.
- **Help-Seeking Behaviors**: According to a *Mental Health America* survey, over 50% of young people expressed hesitance in discussing their mental health on social media due to fear of judgment or being dismissed as attention-seeking. This highlights the negative impact of fake depression on legitimate help-seeking behaviors.

5. Social Media's Role in Normalizing Mental Health Conversations

• **Educational Potential**: Despite the challenges posed by fake depression, social media has the potential to normalize mental health discussions and reduce stigma. Initiatives such as #BellLetsTalk and #MentalHealthMatters have shown how social media can foster understanding and raise awareness.



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• Balancing Positive Impact and Negative Consequences: However, the success of such initiatives may be hindered by the growing presence of fake depression. Efforts to destignatize mental health issues may lose effectiveness if online platforms are seen as unreliable spaces for discussing mental health.

6. The Need for Ethical Guidelines and Further Research

- **Establishing Ethical Standards**: There is an urgent need for social media platforms to develop ethical guidelines surrounding mental health discussions. These guidelines should aim to promote responsible, accurate, and supportive content while discouraging the spread of misleading or exaggerated mental health posts.
- Ongoing Research: Further research is essential to fully understand the scope of the fake depression phenomenon and its impact on youth mental health, social dynamics, and the efficacy of digital mental health interventions. This study is crucial to providing a deeper understanding of how social media is shaping perceptions of mental health and how best to address the challenges posed by fake depression.

Theoretical Framework of the Research

This study adopts social constructionism as its primary theoretical framework to investigate the phenomenon of fake depression on social media. Social constructionism argues that reality is not inherently objective but rather co-constructed through social processes, cultural symbols, and shared meanings that evolve over time. What we come to understand as "truth" or "authenticity" in a particular context—such as mental health—is often shaped by the narratives and interactions within that environment. In the context of digital spaces, particularly social media platforms, this constructed reality is deeply influenced by trends, language, peer behavior, and user engagement.

Social media platforms serve not just as communication tools but as interactive arenas where identity and personal narratives are actively constructed, performed, and validated. On these platforms, users do not merely express themselves—they curate and manage impressions in real-time. Within this performative environment, discussions surrounding mental health are shaped by metrics such as likes, comments, shares, and algorithmic visibility. As such, authenticity itself becomes performative and is judged largely through the lens of audience reaction. Posts that receive greater engagement are often seen as more "real" or valid, regardless of the actual emotional or psychological state of the user.

In addition to social constructionism, the study integrates psychological theories on validation-seeking behavior and digital narcissism to further contextualize user motivations. Validation-seeking behavior, especially prominent during adolescence and early adulthood, refers to the psychological drive to obtain approval, attention, or reassurance from others. In digital environments, this often manifests as frequent posting, emotional oversharing, or dramatizing personal experiences to gain likes and comments. For many young individuals, social validation is tightly linked to self-esteem and identity stability.

Closely related is the concept of digital narcissism, a term derived from classical narcissism but tailored to reflect behavior patterns in online contexts. Digital narcissism describes a heightened focus on self-image, status, and admiration in virtual spaces. Individuals high in digital narcissism may manipulate emotional content—such as fabricated or exaggerated mental health issues—not necessarily out of malicious intent, but as a way to maintain relevance and garner attention in highly competitive social ecosystems. This dynamic creates a fertile ground for inauthentic expressions of emotional distress, such as fake depression, where performative behavior is inadvertently rewarded by the architecture of social platforms.

By combining these theoretical approaches—social constructionism, validation-seeking, and digital narcissism—the study develops a multidimensional framework. This framework enables a deeper understanding of how fake depression is not



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merely an individual act of deception but a socially reinforced behavior influenced by cultural norms, peer dynamics, and platform design.

Significance of the Study

The significance of this research lies in its exploration of a critical and underexamined phenomenon that has far-reaching consequences for digital communication, youth behavior, and public health discourse. In an era where social media is a primary venue for sharing personal experiences and seeking support, the credibility of mental health conversations is of paramount importance. This study addresses the emerging and socially impactful behavior of fake depression, which threatens the integrity and trustworthiness of these conversations. By doing so, it fills a critical gap in the existing literature and contributes to a more nuanced understanding of online mental health narratives.

First and foremost, the research highlights how performative expressions of mental health issues—driven by the need for validation or digital attention—can distort public understanding of genuine mental illness. When audiences encounter numerous inauthentic posts mimicking depressive symptoms, they may become desensitized or skeptical toward all online expressions of distress, including those that are real and serious. This not only undermines public empathy but also reduces the effectiveness of social media as a space for authentic emotional support and mental health advocacy.

Second, the study sheds light on the role of platform algorithms and social validation mechanisms in encouraging such behaviors. Because engagement metrics often determine visibility, content that elicits strong emotional reactions—regardless of its truthfulness—is rewarded with greater reach. This system creates an incentive structure where performative vulnerability is amplified, while quieter or more nuanced expressions of genuine mental distress are often overlooked. The research thus provides valuable insight into how digital platform design intersects with human psychology, potentially enabling the spread of misinformation or manipulative content.

Third, the findings carry practical implications for several key stakeholders, including platform moderators, policy-makers, educators, parents, and mental health professionals. Understanding the psychological and social dynamics behind fake depression can help inform the development of platform moderation policies that are more attuned to distinguishing between harmful manipulation and genuine cries for help. Additionally, this research can support the design of digital literacy programs that educate youth on the ethical and emotional responsibilities of sharing mental health content online, while also equipping them to critically evaluate what they see.

Finally, by offering empirical evidence and a grounded theoretical approach, this study can guide interventions aimed at promoting healthier online behavior and stronger offline support systems. It encourages a collective rethinking of how mental health should be represented, discussed, and responded to in digital spaces. This can ultimately contribute to reducing stigma, fostering empathy, and ensuring that those experiencing real psychological distress are not overlooked or invalidated due to the actions of a few.

Objective

- To investigate the motivations behind fake depression posts on social media.
- To understand the psychosocial profiles of individuals engaging in such behaviors.
- To assess the impact on perceptions of authentic mental health issues.
- To evaluate the role of social media platforms in amplifying or mitigating this trend.
- To analyze the psychological effects on users exposed to fake depression posts.



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To recommend strategies for promoting genuine mental health advocacy online.

Hypothesis

- 1. Individuals who post fake depression content are primarily motivated by a desire for social validation and recognition.
- 2. The prevalence of fake depression content negatively affects the credibility and visibility of genuine mental health disclosures.
- 3. Exposure to fake depression content on social media platforms increases emotional confusion and distress among vulnerable users.

Literature Review

Existing research reveals a nuanced relationship between social media and mental health. For instance, De Choudhury et al. (2013) demonstrate that depressive language and sentiment can be detected through text analysis of social media posts, though such approaches are susceptible to deception. Griffiths et al. (2020) explore how narcissism and body objectification influence self-presentation online, linking these traits to validation-seeking behaviors. Steggals et al. (2020) highlight how communicative self-injury on social platforms can be interpreted both as a plea for help and as attention-seeking.

The literature also critiques the ethical complications of sharing mental health content online, especially when narratives are exaggerated or misleading. Performative vulnerability—publicly sharing emotional content for engagement—has become increasingly normalized. This review underscores the urgent need to differentiate between authentic expressions of mental health and manipulative performances that exploit the issue for social capital.

Research Methodology

This study employs a mixed-methods design:

- Quantitative: Surveys using Likert-scale items measured social media usage and perceptions of mental health content among adolescents aged 12-18.
- Qualitative: Semi-structured interviews and open-ended survey responses explored participants' emotional experiences and perceptions of fake depression.
- Tools: Google Forms for data collection; statistical analysis for quantifiable results; thematic analysis for openended responses.

Result and Interpretation

age	group *
	below 18
	18-25
	26-35
0	36 or above
hov	v often do you use social media? *
	several times a day
	once in a day
	few times a week



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111		
Have you ever come across posts where people discuss their e	xperiences with depression? *	
O yes		
○ No		
Do you believe some people exaggerate or fake depression on s	social media for attention or	*
validation?	social friedia for attention of	
validation:		
strongly agree		
J3/-3		
slightly agree		
strongly disagree		
S		
 slightly disagree 		
3	.0	CONTRACTOR OF THE PARTY OF THE
gender		Copy chart
9 responses		
	male	
88.7%	Female	
00,19	Prefer not to say	
33.3%		
33.376		
age group		Copy chart
9 responses		
	below 1818-25	
	© 26-35	
	36 or above	
100%		

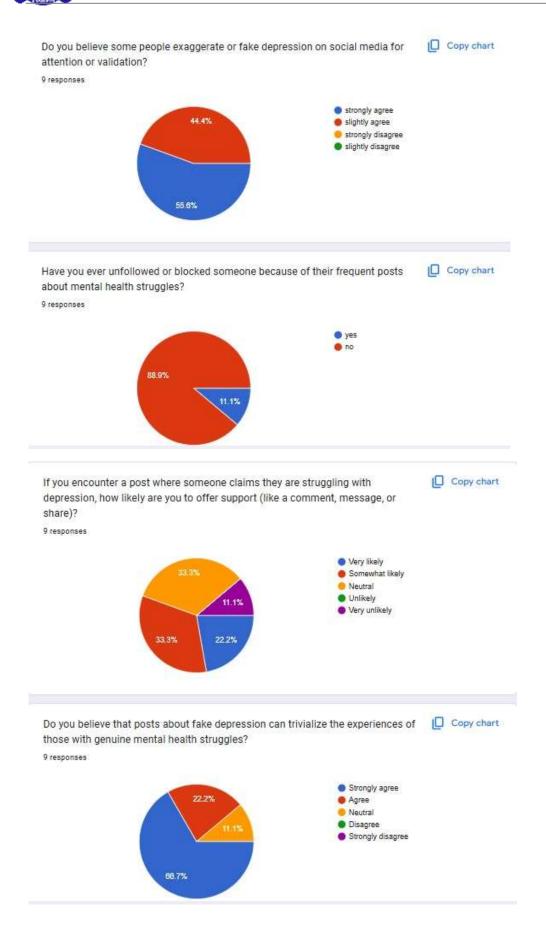


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Do you believe that posts about fake depression can trivialize the experiences of those with genuine mental health struggles?				
Strongly agree				
Agree				
○ Neutral				
○ Disagree				
Strongly disagree				
have the development and the	I□ Copy	chart		
how often do you use social media? 9 responses	<u>г</u> сору	Chart		
88.9%	 several times a day once in a day few times a week 			
Have you ever come across posts where people discus depression? 9 responses	s their experiences with Copy	chart		
11.1%	yes No			



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Survey findings:

- 66.7% of respondents were female; age group: 18-25.
- 88.9% use social media multiple times daily.
- 55.6% believe fake depression is prevalent; 44.4% slightly agree.
- 66.7% strongly agree that fake depression trivializes genuine struggles.
- 88.9% do not confront or block such users, while 11.1% do.

Interpretation: The results affirm that fake depression is recognized and perceived negatively, yet users remain largely passive. A significant number of participants view these behaviors as harmful to authentic mental health narratives.

Conclusion

This study concludes that fake depression on social media is driven by a constellation of complex psychological needs, with the pursuit of social validation and recognition emerging as the primary motivators. Individuals, especially adolescents, may engage in such behaviors due to deep-seated insecurities, the influence of peer culture, or the allure of online popularity. These performative actions distort the digital narrative surrounding mental health and create a significant barrier for those with genuine struggles, making it difficult for them to be taken seriously or receive timely support.

The presence of fake depression content compromises the authenticity and trustworthiness of mental health dialogue, particularly within youth-centric digital spaces where impressionable minds are forming their emotional and social identities. This phenomenon also contributes to emotional desensitization among users, eroding empathy and fostering skepticism toward all expressions of distress online. The implications are far-reaching, affecting not only individual users but also broader public health efforts and the credibility of online mental health advocacy.

In light of these findings, there is an urgent need for multi-stakeholder involvement. Social media platforms must adopt more robust moderation tools, incorporating advanced AI systems alongside human oversight to distinguish between authentic mental health disclosures and manipulative content. Concurrently, educators, parents, mental health professionals, and digital literacy advocates should work collaboratively to foster responsible digital behavior. Promoting ethical sharing practices and digital empathy is crucial to ensuring that social media continues to serve as a platform for authentic connection, support, and healing.

Limitations

- Small sample size limits generalizability.
- Data primarily from self-reported surveys, which may introduce bias.
- Focused mostly on youth aged 12-25, not capturing broader demographic insights.



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• Lacks longitudinal data to assess long-term behavioral impacts.

Suggestions

- 1. Platforms should employ AI tools to flag suspicious mental health content for further review.
- 2. Educational campaigns must raise awareness about the consequences of faking mental health issues.
- 3. Influencers should be encouraged to promote authenticity and mental health literacy.
- 4. Mental health support systems should consider digital behavior as part of psychological evaluation.

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