

A part of the problem: An exploration of YouTube videos about depression

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Abstract

In recent years, ordinary individuals with diverse health conditions have increasingly turned to social media platforms to share their experiences with illness. This trend has raised concerns regarding the informational value of these expressions, as well as the motivations behind them and their impact on viewers. This article is a critical examination of the textual characteristics and potential appeal of YouTube videos about depression uploaded by young Norwegian women who have personally experienced the disease. The discussion is grounded in a multimodal analysis of six videos. Utilizing Norman Fairclough's concept of media discourse, the article explores three dimensions of these video blogs (vlogs): the representation of depression, their interaction with viewers and the identities of the vloggers. The analysis reveals that the vloggers do not disseminate misinformation about the symptoms of depression. Their statements align with clinical discourse. However, they remain vague about the disease's underlying causes and do not reflect upon how social structures might influence their mental life. The relationship between the vloggers and their audience is characterized by intimacy and mutual support. Regarding their identities, the vloggers present themselves as nurturing women who aim to combat stigma and assist viewers in overcoming their mental challenges. However, their personas are not strictly maternal; rather, they exude a more glamorous appearance with makeup and long eyelashes. As potential role models for their audience, they inadvertently contribute to the societal pressure of maintaining a flawless image, a pressure that has intensified in the era of social media. Notably, research consistently indicates that young women often grapple with negative body image, which frequently intersects with depression. In other words, the depression vlogs are potentially part of the problem they try to solve.

Keywords: YouTube, depression, young women, text analysis, vlogging, health communication, social media

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Introduction

Today, the learning ecosystems and the opportunities presented by lifelong learning are swiftly evolving and growing more intricate, largely due to the influence of modern technologies. Particularly noteworthy in this evolving context is the digitization of the media landscape. The advent of digital technology has fundamentally altered the production, distribution, and consumption of media texts. Moreover, the emergence of social media platforms has streamlined the process of crafting and sharing textual and visual content to a potentially global audience, a process now within reach for anyone with a smartphone. Web-based media has many advantages compared to mainstream media: its content is easy and fast to find, it can be accessed anytime from anywhere, and it is effortlessly shared. This is probably why people with diverse health conditions have turned increasingly to social media to share their illness experiences or seek advice from others with similar health concerns (H. Andreassen et al., 2007; H. K. Andreassen et al., 2006; Fergie et al., 2013).

This underscores the importance of investigating how creators of social media content communicate about their respective conditions, encompassing both content and mode of address. In an endeavor to shed light on a modest segment within this expansive and captivating domain, this article delves into the realm of personal YouTube vlogs centering around depression. These vlogs are crafted by young Norwegian women who have themselves suffered from the disease. The objective of this article is to address the following research question: What distinct attributes define personal YouTube vlogs centered around depression as a form of textual practice? Drawing inspiration from Norman Fairclough's seminal work *Media Discourse* (Fairclough, 1995), this discussion centers on three distinct textual dimensions within these vlogs:

Their representation of depression.

The dynamics shaping the relationship between the vloggers and their audience.

The identities or roles embodied by the vloggers.

The choice to focus on vlogs about depression made by young women, is closely tied to the prevalence of depression as the most common mental illness globally. According to a report from the World Health Organization and the World Bank Group, depression accounts for fully 10 percent of the total non-fatal disease burden in the world (Mnookin, Seth, 2016, p. 4). Furthermore, it is a prevailing global trend that women experience higher rates of depression than men (Salk et al., 2017), a pattern mirrored in Norway. Norwegian studies indicate that between 15 and 25 per cent of all women are affected by serious depression during their lifetime, as opposed to 7 to 12 per cent of all men (Norwegian Health Information, 2019). Moreover, among young women between the aged 16 to 24, there has been there has been an uptick in the proportion reporting significant mental disorders during the period 1998 to 2012 (Norsk helseinformatikk AS, 2021). This statistic alone serves as a compelling rationale for researchers to dedicate particular attention to the way depressed young women express themselves on the internet.

Health concerns are communicated on several internet platforms, but YouTube is a distinctive choice because of its tremendous popularity. Founded in 2005 and bought by Google a year later, this free video-sharing platform had 2.3 billion users worldwide in 2021 (Degenhard, 2021),

A part of the problem

making it the second most-popular platform after Facebook. In Norway, 95 per cent of young people between the age of nine and eighteen use YouTube, and more than 3,6 million Norwegians visit the platform monthly or more often, with young adults between the ages of eighteen and twenty-nine being the most frequent users (Ipsos, 2021). This popularity has turned YouTube into an important advertising and communication tool for businesses and government agencies, including health professionals (Mohsin, 2021). The ability of YouTube to visually represent processes and practical tasks is of course an important reason for the popularity. Video messages are often better than written texts at eliciting attention and emotional engagement. A Norwegian project studying how diabetic patients responded to relevant health information published on Twitter, Facebook, and Instagram, respectively, concluded that posts with videos and emojis were met with the most enthusiasm and were the most frequently shared. The patients who participated in the project also preferred personal stories to factual health advice (Gabarron et al., 2020). A limitation of the YouTube publishing platform is the length of the videos. Ordinary users cannot upload a clip that is longer than 15 minutes. However, this is considerably more than the maximum clip length of platforms like TikTok, Facebook and Instagram, making YouTube the better tool for communicating complex messages.

Background

Few researchers have addressed the exact topic of the present article, yet there is an abundance of studies concerning YouTube and health information in a broader sense. Topics which are frequently considered in this field include (1) YouTube and information accuracy, (2) the experiences of the vloggers and (3) health vlogging genres and aesthetics. In addition, some themes tend to be discussed rather than researched, such as (4) the glamourization/romanticization of depression and (5) monetization of posts about depression. The forthcoming paragraphs will elaborate on these five areas while paying closest attention to the articles aligned best with the research questions addressed here.

Theme 1: Information accuracy

YouTube and other video-sharing sites are not generally considered reliable sources because anyone can upload video clips with little editorial oversight. A review article analysing eighteen videos addressing healthcare information available on YouTube concludes, 'YouTube contains misleading information, primarily anecdotal, that contradicts the reference standards and the probability of the lay user finding such content is relatively high'. It cautions that YouTube is a medium for promoting unscientific therapies and drugs, though it also underlines that 'videos from government organizations and professional associations contained trustworthy and high quality information' (Madathil et al., 2015).

Another article concerned with information accuracy and depression on YouTube involves a content analysis of seventy-seven personal accounts which investigates the extent to which the videos and their comment sections refer to youth, suicide, and self-harm, as well as medication. It finds that the videos and their comment sections mention youth, suicide, and medication frequently. While they also mention clinical treatment, few advocated for seeking it (Gaus et al., 2021). The article concludes that researchers must look at the ways in which young viewers, to

A part of the problem

whom of the videos are addressed, are influenced by them. They must also consider developing safety guidelines for creators of videos presenting severe mental illnesses.

Theme 2: The experiences of the vloggers

It is common knowledge that hate speech flourishes on internet platforms, and YouTube has recently made it possible for content creators to manage their comment sections and thereby protecting themselves from hurtful statements (YouTube Creator Academy, 2021). However, research about the experiences of YouTube vloggers with severe mental problems shows that they are happy with the outcome of their vlogging. It functions as a form of therapy which serves to diminish intrusive thoughts and anxieties; it gives them an opportunity to fight stigma; it mitigates their feelings of isolation; and—perhaps surprisingly—the comment sections offer social support and can be a tool for community building (Liu et al., 2013; Sangeorzan et al., 2019). Another article which summarizes current research about the potential benefits and challenges of social media for mental health patients (it does not include YouTube, however) mentions three benefits: it facilitates social interaction; it provides access to a peer-support network; and it promotes engagement and retention in treatment services. It also mentions three challenges: the negative impact on symptoms arising from too much screen time; the possibility of facing hostile interactions; and concerns about privacy (Naslund et al., 2014). The study concludes that at this point in time ‘it is premature to view the benefits of social media as outweighing the possible harms’ (Naslund et al., 2020, s. 251).

Theme 3: Health vlogging genres and aesthetics

One study of the aesthetics of personal YouTube vlogs about HIV, diabetes and cancer distinguishes between four different vlog genres: (1) teaching vlogs attempting to give viewers information about illness and its management; (2) personal journals focusing on the current emotional and physical status of the illness trajectories of the vloggers; (3) self-documentaries capturing situated, in-the-moment information; and (4) compilations presenting video portraits of people sending positive messages (Liu et al., 2013). The same study also examines the ways in which vloggers attempt to make connections with viewers through nonverbal visual cues such as pausing, crying, or making various facial expressions. Humour was also used to build rapport with viewers, as was more direct contact such as requesting and responding to comments and questions and providing links to vlogger accounts on Facebook, Twitter or email, for example.

While comparing vlogger communication with broadcast talk, Tolson (2010) argues that YouTube is a form of post-television offering conversational talk marked by its direct address to viewers, colloquialisms, power symmetry, ordinariness and self-referentiality in tandem with traditional speech genres associated with monologic expert talk. He then observes that the fresh and spontaneous look of many vlogs cannot disguise the fact they are promotional discourses ‘ranging from the use of YouTube for purposes of viral marketing, to the activity of self-branding’ seen by commentators as a distinct kind of labour characteristic of a neoliberal consumer economy based on flexible accumulation’ (Tolson, 2010, p. 286)

Theme 4: The glamourization and romanticization of depression

In recent years, considerable effort has been invested in raising public consciousness about mental health problems to reduce stigma and discrimination. This effort has included social media campaigns encouraging people to speak about their mental health. Several movie stars and celebrities have come forward to talk about their struggles with anxiety and depression, and an increasing number of films and TV programs has addressed the topic as well, quite often in a visually appealing manner using physically attractive actors. This new openness has in turn prompted discussion regarding whether the media constructs a glamourised and romantic image of mental illness, and whether expressing emotional distress online has become a superficial gesture rather than a meaningful trend (Christ, 2019; Jadayel & Medlej, 2017; Jhaveri, 2021). This issue has been more discussed than researched, unfortunately, and at the moment it remains unclear whether such romanticisation is helpful to reducing societal stigma or rather simply papers over the severity and life-threatening aspects of depression.

When one studies young girls/women who are publishing their confessional texts on social media, it is hard to miss the negative, condescending way in which the popular press frames them. This has particularly been the case with the so-called pink bloggers—young, often beautiful female bloggers who generally write about clothes and makeup. Many find them to be naive, ignorant, and superficial, though a few acknowledge that some are competent entrepreneurs making a decent income from their social media activities. One of the most well-known Norwegian examples is the blogger Sofie Elise Isachsen, who in 2017, at age twenty-three, earned 2,5 million NOK and reported a personal fortune of 7,5 million NOK (Westeng, 2018). This leads to the next topic, monetisation.

Theme 5: Monetisation

YouTube is not just a platform enabling user creativity, participation, and community building. It is also a commercial enterprise which offer individuals the opportunity to generate income and potentially establish careers. To qualify for earnings via a YouTube channel, a vlogger must amass a minimum of 500 subscribers and accumulate 3000 public watch hours in a twelve-month period (Teach Me, 2023). Naturally, meeting this threshold, necessitates that the vloggers tap into subjects that pique the interest of a broad viewership and inspire a desire for further explorations. While health vlogs might not be the best way to make a YouTube career, it is worth noting that certain social media influencers have faced public accusations of exploiting mental illness for profit on the platform. An illustrative case involves a U.S.-based influencer who shared intimate and poignant videos about his battles with depression. These videos featured links to a support organization, and each click on the link contributed to him earning money (Lorenz, 2018).

The very fact that vlogging can be a source of income generates suspicion from the start. Are the vloggers really who they say they are? Are their stories true? Are the views and comments fake? Vloggers do not have the same opportunity as bloggers to lie about their age or gender, because they deliver their messages in person on camera. However, their stories can still be more fiction than fact. Clearly, sensitive issues like depression can generate more followers online, thereby increasing the money-making potential of the vlogging. This, in turn, can tempt vloggers to

A part of the problem

construct false stories about mental problems, as research has confirmed (Keller, 2018). However, the present article will not dwell upon this aspect of vlogging.

Method: Analytical approach and the selection of vlogs

Personal YouTube vlogs represent a relatively novel approach to gaining insights into health-related matters. As previously highlighted, the central objective of this article is to scrutinize the communicative attributes inherent in this specific category of vlogs. However, an analysis of YouTube vlogs poses challenges due to their intricate nature, encompassing diverse elements such as imagery, audio, written content, as well as approval indicators like thumbs up and thumbs down. Moreover, vlogs are dynamic and subject to shifts over time, influenced by factors like viewer interactions with the thumbs buttons and contributions in the comment section. The analysis presented in this article is limited to a study of the videos and of the comment section on a particular day.

As mentioned in the introduction, the analysis focuses on three dimensions of the selected vlogs: representation, relations, and identities. According to Norman Fairclough these dimensions are inherent in all texts (Fairclough, 1995, s. 5). In the context of the depression vlogs, it is important to investigate how the vloggers portray the illness, particularly in the light of the previously mentioned accusations of misinformation. This segment of the analysis aims to juxtapose the vloggers' statements with medical professionals' delineation of the condition. Furthermore, Fairclough contends that although most accounts of media impact stress representational issues, he posits that the implicit messages conveyed by media texts concerning relationships and identities are of even greater significance (Fairclough, 1995, s. 127). In this article the dimension of relation studies how the vloggers address their viewers in terms of aesthetic choices and verbal performance. This dimension also considers the audience's responses within the comment sections. Given that the vloggers potentially serve as role models for their audience, it is also interesting to examine the identities they project while in front of the cameras. This dimension is closely intertwined with the aspect of relation yet shifts the attention to how the vloggers appear in front of the cameras as well as exploring their stated motivations for creating videos about their personal experiences with depression.

To underscore key points within the three dimensions, the analysis employs concepts drawn from neo-Marxist text theories, feminist film theory and conversation analysis. The final discussion of the article includes ideas from TV-theory. Some of these concepts add a critical perspective to the analysis, and, for the sake of clarity, they are elucidated in the text at the junctures where they are applied.

During April and May 2021, searches were conducted on YouTube.com using the Norwegian word 'depresjon'. Most of the videos generated by these searches had been uploaded by various medical professionals but interspersed among them was a limited number of videos fitting the study's inclusion criteria: young females talking about their own experiences with depression. The first six videos to turn up—all by different vloggers—were downloaded for analyses. To gauge each vlogger's emphasis on the topic of depression, the other videos on their channels were briefly reviewed for their subject matter.

A part of the problem

It is important to have in mind that the search results are recommendations made by the YouTube algorithm. It prioritizes three main elements when ranking the search results: The first one is relevance which is determined by factors such as title and video content. The second one is engagement based on signal from users such as watch time and number of views. The third one is quality which is about identifying signals that can help to determine which channels demonstrates expertise and trustworthiness. In addition, the YouTube algorithm also takes into account the individual user's search and watch history. This means that the same query might give different results for individual viewers. It is also the case that YouTube is concerned with prioritizing content from authoritative sources when it's appropriate to do so. This probably explains why most of the videos based on the search word 'depression' were uploaded by medical professionals (Southern, 2020)

Researching YouTube videos introduces specific ethical challenges related to privacy, consent, and confidentiality (Sangeorzan et al., 2019). The vloggers studied for this article were not specifically approached for permission to include their videos in the research project. This is due to the fact that the chosen vlogs are publicly accessible and not password protected. Additionally, within the realm of the humanities, there exists limited precedent for seeking consent from the creators of publicly available content prior to conducting analyses on it. Nonetheless, there's been contention that individuals termed "micro-celebrities" operating on platforms like YouTube and other social media should not be treated in the same manner as traditional celebrities or established artists (Harris, 2016, s. 68). Thus, in this article, the vloggers' identities have been concealed to the fullest extent feasible. Their usernames and video titles have been anonymized, and no screenshots or video clips are employed as illustrative material. Furthermore, it's essential to note that the content on YouTube undergoes continuous change with the upload of new videos. Consequently, using the search term "depression" may not necessarily yield results that precisely align with the discussion at hand.

The six vloggers examined in this article are all women in their twenties, here assigned the pseudonyms Ellen, Sara, Rita, Jenny, Randi and Nanna. In terms of genre, the videos represent a combination of personal confessions about living with depression and words of advice about how to manage the condition.

Ellen started her YouTube channel in 2012, and it had, when the analysis was performed, 94 000 subscribers. She is a diligent YouTuber, typically publishing at least one video a week, and in all her videos had been watched 26 487 778 times at the time of the analysis. Ellen is not a typical pink blogger/vlogger focusing on looks, clothes and make up; instead, she talks about situations in her daily life: 'I am refurbishing my room'; 'I have a boyfriend'; '30 things which annoy me'; 'my first appointment with a gynaecologist', and so on. She also makes videos based on letters from her followers who willingly expose their own secrets about, for example, menstruation. Several of her videos focus on mental problems, and she has a series wherein she reads aloud letters from her followers (no names are mentioned) who have written to her about their mental problems, and the ways in which they have learned to cope with them.

Sara, on the other hand, is not a very active YouTuber and boasts only fifty-three followers. She published her first video in 2014 and has since made only seven more which have received altogether 6 340 views. Her second video, analysed below, is a personal account of living with depression. The other videos are mostly about her travels.

A part of the problem

Rita joined YouTube in 2017 and has, as of this writing, 2940 followers and 286 081 views. Compared to Ellen and Sara, she appears to be a more traditional pink vlogger who primarily produces videos about makeup and shopping, interspersed with videos introducing her boyfriend or talking about her trips abroad. She shows little interest in mental health apart from the single video included in this study.

Jenny became an active YouTuber in 2015. She has 9890 subscribers and a total of 1 279 139 views. Her videos represent a mix of stories about her personal life, including boyfriends, hospitalizations, commentary on other YouTube videos she does not like, and reviews of clothes and makeup, plus one video, analysed here, about her mental health problems.

Randi became part of the YouTube community in 2018. She has 5730 followers and her videos have been viewed 775 696 times. She is a lifestyle vlogger who publishes about food and exercise, in addition to a few features about her everyday life.

Nanna started her YouTube career in 2018 as well. She has 16300 followers and her videos have been viewed 1 652 646 times. Compared to the others, her vlogs are rather more sensationalist, addressing topics like sugar daddies, being stalked by her ex-boyfriend, and taking drug tests as well as food and makeup. She also talks about being adopted and having cancer.

Analysis

The ensuing section of the article delves into the three vlog dimensions outlined in the analytical approach and correlates the findings with the prior research concerning health communication on YouTube listed above.

Representations: Defining depression

The process of defining depression encompasses the vloggers' discussions regarding its symptoms, treatability, and underlying causes. As mentioned earlier, research has illuminated the potential hazards of relying on YouTube as a component of personal illness management due to the presence of misleading content within some videos. Psychiatrists utilize a set of symptoms to diagnose depression, including persistent sadness; feelings of hopelessness and helplessness; diminished self-esteem; tearfulness, guilt, or irritability; lack of interest in activities; difficulty in decision-making; reduced pleasure in life; increased anxiety; and thoughts of suicide or self-harm. Moreover, medical practitioners differentiate between various degrees of depression based on its severity: mild depression exerts some influence on the patient's daily life, moderate depression poses a more substantial impact, while severe depression severely impairs the individual's capacity to function in day-to-day activities.(Norsk helseinformatikk AS, 2021).

The analysis unveiled that the vloggers describe depression in a way that recall the commonly acknowledged symptoms mentioned above. In essence, the vlogs do not misrepresent the condition when compared to medical discourses. However, the vloggers do not merely present a list of symptoms; they vividly narrate how depression actively impacts their day-to-day existence. Ellen says: 'I want to have it dark and sleep. I can do nothing . . . I feel that I am wasting my life. I want to give up everything. Sara states that getting out of bed can be the highlight of her day. Jenny talks about her lack of feelings apart from an overwhelming sadness: 'It is like all my feelings are passive, apart from the feeling of having a bad time. She also mentions that when she was

A part of the problem

depressed, she had no appetite and suffered constant nausea. Jenny, who continually reminds her viewers that people can experience depression very differently, adds the symptoms of moving and talking very slowly or feeling restless. She also talks about depression's negative consequences for one's memory: 'I, for example, can hardly remember anything from the years I was depressed. Even when I got better, I still remember very, very poorly'.

Like medical professionals the vloggers are also careful to underline that depression is something different from being bored or sad. Ellen says: 'There is something called "low spirited" — depression is more than that'. Jenny is especially concerned with this: 'People think they are depressed because they are going through a tough period . . . then at least you believe it is going to pass. This is not the case with seriously depressed people. They think that this is how the rest of my life is going to be, or I am going to take my own life'. Rita describes her suffering with depression in this way: 'For me depression was a nightmare—it was like a demon, a voice, a shadow which was inside my head, which controlled me . . . took over my thoughts and said ugly things to me . . . now you must jump from the ninth floor, now you must speed up and drive into this trailer . . . It was a living hell on earth. However, unlike the YouTube videos studied by Gaus et. al (2021) the vloggers in this analysis are also eager to underline that it is possible to get help for depression: Three of them mention that they have received treatment and support from BUP, an outpatient specialist mental health service for children and young people living in Norway. Others underline their positive experiences with receiving professional psychiatric treatment in their own homes. Rita and Jenny urge their viewers to seek professional help if they feel depressed for some time and provide links to places they can go to.

Vloggers have been accused of 'promoting unscientific therapies and drugs', making it relevant to look at what the vloggers have to say about medication as well. In general, the vloggers maintain a nuanced relationship with medication. Jenny has not taken antidepressants herself and advocates talking therapy instead. She thinks that taking drugs gives you a false feeling of improvement but does underline that, if the depression is severe, it might be necessary to do so. Rita, whose depression was very acute and combined with ME, says she was happy to take pills for her sleeplessness as well as antidepressants in combination with talking therapy. Ellen tells her followers that she refused medication at first because she was not comfortable with being someone with an official mental health condition. However, after an especially difficult stretch, she accepted the medication, which made her feel better and less angry though not especially happy as such. Nanna does not mention medication at all, and one of her commenters, Vanessa, says that she has never taken drugs either.

In addition to attending to the explicit content of a text, a critical text analysis is equally concerned with its unspoken elements, often referred to as 'structuring absences' (Cahiers du cinema, 2008). This term is analogous to the notion of the "elephant in the room" – an issue that everyone is aware of but deliberately avoids discussing. The depression vlogs examined in this article possess such structuring absences, particularly in relation to how the vloggers address the etiology of depression. In sum, the vloggers believe that their depression is due mainly to a bad home environment, bullying at school or physical illnesses of various kinds. Ellen talks about a difficult childhood with a single mother with mental problems, very little contact with her father, and problems at school concerning an ADHD diagnosis. Rita believes that her severe depression is related to her ME (myalgisk encefalomielitt) diagnosis, which meant that for over four years she

A part of the problem

did not function very well and was unable to do things she had easily managed before. Nanna thinks that her depression started when she was very young, and that bullying and exclusion in her school environment triggered her severe self-doubt. The structuring absence in this context, is that none of the vloggers mention the role of social pressures—such as appearance, physical fitness, and academic/work performance—in their experience of depressive thoughts. Furthermore, they do not reference social media as a potential contributing factor to such problems. This is surprising given that these factors are frequently highlighted in research reports where young women discuss their reasons for experiencing depression (Eriksen, 2020). There are several explanations for these omissions. One explanation is, of course, that due to their involvement in the vlogging business, they choose to not address these issues. Another rationale could be that the vloggers themselves do not perceive the pressure to maintain an impeccable appearance as distressing, and they might generally be content with their personal accomplishments. A third possible explanation is that, given that some of the vloggers have undergone treatment from psychiatrists, their comprehension of depression are heavily influenced by the medical discourse. It is infrequent for medical interactions between patients and doctors to incorporate aspects of social critique. As Waitzkin asserts, doctors endeavor to assist their patients by identifying ways to adapt to challenging societal conditions through therapeutic measures or medications. (Waitzkin, 1989, s. 220).

The relationship between the vlogger and their viewers

Vlogs are characterised by an intimate, confessional aesthetic that involves a talking head, the extensive use of closeups, direct address straight into the camera, a static or handheld camera, a mise-en-scene of domestic space, no (or very little) postproduction and the impression of an individual shooting alone. This simple, 'homemade' approach is intended to create an atmosphere of authenticity. As Strangelove states in *Watching YouTube: Extraordinary Videos by Ordinary People* (Strangelove, 2010, ss. 64–65): 'If you could name a core value on YouTube, its authenticity. The strongest critique is to say that you are hiding behind something or you're not being real. This rawness of YouTube videos has inspired John Corner to call YouTube punk television. Punk rock is characterized by a lack of technical sophistication and acts as a challenge to the glossy fakeness'.

This aesthetic resonates with the videos examined here. For the most part, the videos are recorded in the home (and usually the bedroom) of the vlogger. When Ellen begins her video about what it is like to live with depression for a week, she is lying in her bed in a dark room while talking to the camera. Randi is also in her bedroom, wearing a white dressing gown while she advises her viewers. Jenny is in her room too, dressed in a white T-shirt, while Rita sits in her kitchen, dressed in a black sweater. The image quality is generally good. Below some of the videos, the name of the camera appears, possibly indicating that the vlogger is sponsored. There are just a few signs of editing in the videos. The smoothness of the editing varies, but in general it takes the form of jump cuts.

The authenticity of the setting is furthermore enhanced by the way in which the vloggers talk to the camera. Some of them speak without any script, while others utilize notes, yet they ensure to maintain direct eye contact with their viewers, glancing at their notes only once or twice during the video. The vloggers predominantly adopt a relaxed, conversational style, often beginning by updating the viewers on their activities since their last video. On occasion, they make self-

A part of the problem

reflective comments about their content; for instance, expressing hopes that the video's length is reasonable, or asking viewers to stop watching if the content exacerbates their depression. Furthermore, all the vloggers employ what is termed 'positive politeness' in conversation analysis (Svennevig et al., 1995, ss. 103–105). The primary intent of this mode of address is to enhance the positivity of the relation between vlogger and viewer by suggesting a symmetry rather than an asymmetry of power in the dynamic. This is achieved through a friendly tone and informal language. Positive politeness also involves acknowledging the existence of the viewers—several of the vloggers, for example, begin their videos by directly addressing their viewers and discussing post in the comments section. Jenny, for instance, acknowledges that several of her followers have asked her to talk about depression, and she assures viewers of her commitment to honouring their requests. Nanna expresses gratitude for the trust her followers place in her and offer her support to those in need: 'I am rooting for you. When I get an apartment, just come to me and I cook for you, period'.

Interestingly, the comments that the vlogs receive are, with one exception, totally and unambiguously positive. The viewers express how much they admire the vloggers for sharing their problems, and how important their videos are. This supports research mentioned in the section of this article called 'The experiences of the vloggers'. Nanna's videos have twelve comments. One says: 'O, I love you so much, Nanna. I want to be hugged by you. You are an amazing person'. However, Nanna is the one who receives the only negative comment. It makes fun of her false eyelashes, but another follower is quick to point out that the criticism is inappropriate. Ellen is a very popular vlogger, and the comment section under her video about her mental diagnosis received 787 comments, including these very supportive examples: 'You are an incredible strong person. You are a person who is an inspiration for all of us. Don't give up. You are the strongest person I have heard of'; 'I recognize myself in so many of the things you talk about, but I cannot imagine all of the things you have gone through. Have to say that it is unbelievably fine that you share this. It is probably important for lots of people on this site. I am so moved and impressed by you. I dig you'.

Jenny's video, which have been watched 2698 times, received twenty-eight constructive comments: 'Finally someone who understands and really explains what it is all about. Thank you very much. It really helps'. Rita's very powerful story about her severe depression has only eight encouraging comments, but it has been watched 2 819 times. Sara's video was clicked on 4 042 times and is accompanied by twelve positive comments, while Randi's 's video was watched 1508 times and has thirteen positive comments.

The substantial overall viewership of the videos clearly indicates that depression is a sought-after topic, and several of the vloggers say up front that they were asked by their followers to make videos about the disease. The vloggers also say that if they mention their mental problems in their videos, the response is always massive. In other words, talking about depression is partly about self-confession and fighting the stigma but also partly about giving the viewers what they want. It therefore leads to more followers and increases the money-making potential (and potential for criticism) of the vlogging. One vlogger is acutely aware of the attractiveness of depression confessions and clarifies that she is in no way telling her story about depression to become more popular.

The identity of the vloggers

As mentioned earlier, research has shown that vloggers with mental problems find their vlogging beneficial and meaningful because it gives them an opportunity to fight stigma and help other people to overcome their problems. The analysis of the six vloggers, show that their most important motivation for creating videos about their depression is to help others who also suffer from the disease. Both Rita and Jenny stress that they want to be the voice they themselves needed when they were depressed. Others claim that they want to fight taboos and give the condition a face and a voice. Ellen notes that it has become easier to speak about depression than it used to be, but for outsiders it can still be difficult to understand what it is like to live with the diagnosis. This distance inspired her to make a video about how depression influenced her actions and thought processes for an entire week.

The vloggers also have in common that they play a role that can be described as a mix of friend and life coach. The videos that Sara and Nanna published are intended to give viewers advice to help them cope with depression. This guidance is not identical to that typically provided by medical professionals, but it can hardly be described as harmful. Sara's eight recommendations do indicate that her depression is not especially severe. She suggests the potentially depressed viewers should treat themselves to a home spa, freshen up their hair and makeup situations, write down the things for which they are grateful, go for a walk, exercise, be creative, and tidy their rooms. Nanna's advice emerges from a more serious condition. She encourages her viewers to change psychologists if they seem uninterested and indifferent or make their patients uncomfortable. She has done so five times, she admits: 'Don't be afraid, they are used to it . . . not all people can talk with each other in a good way, and I do not think they will take it as an offense'. She furthermore emphasises that if you are depressed, you should not sit at home watching depressing videos about how to commit suicide and so on: 'You have to change your mindset and say to yourself: I am good, I am good, fake it till you make it . . . On the other hand, you have to let your feelings out, but when you are carrying five kilos of depression you should not cry five kilos of tears—you can let loose some of them, but if you let all of them out, negative energies are created in the room which immerse you'. Nanna encourages viewers 'to call a friend who is in the same situation as yourself. It is not guaranteed that a psychiatrist in a privileged situation and with a lot of education can understand how you are. . . You have to convince yourself that you can be better—that you can fight the depression'.

In addition to their dedication to motivating viewers to confront their illnesses and treatments, the vloggers also appear to be highly conscious of their own role as visual objects. None of the vloggers are without make up, but they are slightly different in terms of their choices. Nanna, the second most popular of the group, is in this respect the most extreme—she wears a lot of foundation and dramatic, very long false eyelashes. Jenny also wears a lot of makeup, but less than Nanna—she comes across more like a model at a photo shoot and she clearly uses a filter to get a smooth skin. Ellen, by far the most active and popular of the vloggers, has the most natural look apart from her false eyelashes, which she even keeps on in bed. In other words, all the vloggers, although to a different extent, connote to-be-looked-at-ness to use a phrase coined by the feminist film theorist Laura Mulvey (Mulvey, 1975). She contends that this an outcome of living in a patriarchal society wherein women are first and foremost constructed as objects of visual pleasure. Nevertheless, the emphasis the vloggers place on their appearance is not solely a

A part of the problem

product of patriarchal influences. They are also embedded in a consumer culture where advertisers adeptly exploit the vulnerabilities within female identities to create a market for products like cosmetics and clothing. In his work “Society of the Spectacle,” Guy Debord argues that the profusion of images (TV, advertising, film, entertainment) within our consumer-driven society transcends being mere adornments added to reality. These images have absorbed reality itself and have become the prevailing model of the world – the spectacle. This shift has altered interpersonal dynamics, where status is increasingly linked to possessing the right appearance. This transformation has negatively impacted our body images and rendered us more susceptible to the solutions offered by the consumer society. (Debord, 1983). However, in the context of YouTube vlogging, it is important to have in mind that the female vloggers are not just victims of patriarchal and consumeristic ideologies. Their preoccupation with their appearance is also a strategy for constructing themselves as a desirable commodity, as individuals that the viewers feel attracted to and inclined to follow. In essence, they use their expertise in areas like to make-up and clothing to carve out a distinct presence for themselves in the public sphere.

Final discussion

In recent years, the internet, including social media platforms such as YouTube, has become a major source of health information. People search it for information about symptoms, diagnosis and treatments, but they do so at their peril—it has been noted that many websites promote or contain inaccurate, biased and misleading information (Karlsen et al., 2017). Videos uploaded by professional health organisations are usually regarded as most trustworthy, and as mentioned earlier, the YouTube algorithm privileges such vlogs. Consequently, the five first videos generated by the search word ‘depresjon’ were the work of medical professionals like the Norwegian Psychology Association, St. Olavs University Hospital in Trondheim, Norway, and Norwegian University of Science and Technology. In short, it appears to be relatively easy to find professional advice about depression on YouTube.

Clearly, however, there is also a market for videos posted by young women who openly discuss their personal experiences with depression, as we have observed. This leads us to question: What drives the appeal of these videos, and do the vloggers offer pertinent information? The analysis reveals that the six personal depression vlogs examined in this article adhere to a standardized structure, exhibiting only minor variations between them. All the vloggers address depression in a respectful, earnest, and competent manner, vividly conveying how it impacts their daily lives in a very negative way. It seems improbable that their narratives aim to romanticize the condition at the cost of precision. Notably, in the comment section one viewer expresses that she finally have met somebody who truly understands depression. However, when discussing the origins of their depression, the vloggers often remain vague and tend to steer clear of political matters, refraining from referencing social pressures as triggers for their depressive thoughts.

The medical competence of the vloggers, however, is probably not the primary reason for their popularity. Such information is readily available elsewhere as indicated above. Far more important is the way in which the vloggers talk to the audience. The closeups of their faces talking intensely about their experience with depression, inspire feelings of sympathy, and admiration, as is demonstrated by the comment sections below the videos. Depression videos uploaded by medical professionals also communicate with viewers using primarily closeups of faces, but these typically

A part of the problem

middle-aged authority figures do not express the same vulnerability as the young faces of the vloggers as they share their personal accounts. There is in other words an element of risk taking involved in publishing personal confessional videos on YouTube which adds another dimension to the viewer's emotional engagement with the vlog.

The vloggers' active engagement with their viewers is yet another element of attraction. They meet their viewers with care, gratitude, and respect. They welcome the viewers into the 'conversation' by discussing their comments or letters, moving the focus back and forth between their personal narratives and the wellbeing of their viewers and followers. This feeling of intimacy and friendship persists across many of the YouTube videos directed at girls and young women in particular, and researchers since the 1950s have labelled it a parasocial relation (the notion originally described the relation between a TV/radio/film personality and the viewer) (Horton & Richard Wohl, 1956). More recently, it has been argued that YouTube and social media in general have intensified the parasocial phenomenon, because vloggers actively encourage this form of viewer engagement and because the interactive nature of the platform makes it easier to both establish and sustain such connections (Kurtin et al., 2018). The character of female friendships might also be relevant to the prosocial dynamic. Whereas male to male friendships is commonly stereotyped as side-by-side and fostered and maintained through shared activity, female to female friendships is usually described as face-to-face and fostered and maintained through intimacy, communication, and support (Bates-Duford, 2018). The friendship dimension is furthermore strengthened by the fact that the depression videos are only a part of the relationship between the vloggers and their followers.

The parasocial relation represents a twofold opportunity for the vloggers examined in this study. On the one hand, they receive a substantial positive response for their online confessions, providing them with a sense of support, purpose and meaning in their own struggles and social lives. On the other hand, their reputations (and, in some cases, businesses) grow alongside the popularity of their videos, whether about depression or something else. Ellen, the most prolific and popular vlogger in the selected group, has seen her popularity generate several public assignments as well as a published book about her life story.

Furthermore, vlogging can be perceived as a means of empowerment for these young women, affording them an opportunity to step out of the shadows and into the public space sharing their experiences with depression, and it cannot be ignored that talking about mental problems in this way is courageous. Simultaneously, there's a paradox inherent in the communication process within the vlogs: On the verbal level, the vloggers express, as we have seen, a profound desire to assist viewers dealing with depression. However, on the visual level they exhibit a conspicuous focus on their appearance. While their model-like looks likely aids in accruing followers, it also contributes to social pressure regarding appearance. In this way, they reinforce an aspect of consumer society that many women experience as a source of feelings of inadequacy and depression: the beauty myth – the demand to look good at all times (Watts, 2015). Unfortunately, this makes them part of the problem they try to solve.

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