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"Vulnerable" and "At Risk"?: Confronting LGBTQ+ Youth Mental Health Through a Digital Ethnography of QueerTok

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Confronting LGBTQ+ Youth Mental Health Through a Digital Ethnography of QueerTok

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Introduction

Disparities in rates of mental health issues between heterosexual people and nonheterosexual people within the United States are well documented. According to the American Psychiatric Association's most recent published data regarding "Diversity and Health Equity", Lesbian, Gay, Bisexual, Transgender, and Queer/ Questioning (LGBTQ) individuals are "more than twice as likely as heterosexual men and women to have a mental health disorder in their lifetime." (APA 2017) Within the LGBTQ+ population, youth (people up to age 24) have been identified as especially vulnerable to poor mental health outcomes. According to The Trevor Project's 2022 National Survey on Youth Mental Health, 45% of LGBTQ youth seriously considered attempting suicide in the past year, including more than half of transgender and nonbinary youth. 73% of LGBTQ youth reported symptoms of generalized anxiety disorder in the past two weeks, including more than 3 in 4 transgender and nonbinary youth. 58% of LGBTQ youth reported symptoms of major depressive disorder in the past two weeks, including more than 2 in 3 transgender and nonbinary youth. Lastly, in the past year, 60% of LGBTQ youth have wanted counseling from a mental health professional but did not receive it. The final sample these statistics came from consisted of 44,828 LGBTQ+ youth between the ages of 13-24 residing in the United States after accounting for validity checks and race/ ethnicity quotas.

While quantitative data from public health organizations and LGBTQ+- centered nonprofits based on surveys paint a startling image of Queer youth in the United States' mental health, the image is often incomplete and reductive. This data and the discourse proliferated as a result of it, often leave out important sociocultural and political contexts of Queer youth's experiences and characterize them as vulnerable, at-risk, and passive victims. Data from the Trevor Project is widely cited and serves as an important metric for researchers, policymakers, and youth-serving organizations who aim to increase LGBTQ+ youth's mental well-being, but it

has also contributed to a narrative of Queer youth's experience as one entirely of suffering. Declarations of a "mental health crisis" among Queer youth, supported by statistics like the Trevor Project's, demand consideration of the social, cultural, and political contexts of mental health issues among LGBTQ+ youth and uplifting of LGBTQ+ youth's perception of their own experiences.

Social media sites like Twitter, Instagram, Youtube, and TikTok are forums through which generalized discourses regarding LGBTQ+ youth mental health are proliferated, but also sites through which LGBTQ+ youth can assert their own perspectives and individual experiences (Bryan 2017). TikTok is a particularly relevant field site to consider questions about the social context of high rates of mental health issues among Queer youth in the United States given its popularity among youth– 60% of TikTok's 139 million active users in the United States are ages 13-24– and the prevalence of "Queertok" and "Mentalhealthtok" sub-communities. "QueerTok" is a community comprised of LGBTQ+ Tik Tok users who create and/or interact with content from other LGBTQ+ users and "MentaHealthTok" is a community comprised of psychiatrists, therapists, mental health advocates, and ordinary individuals who create and/or interact with content related to mental health. I am interested in understanding how LGBTQ+ youth TikTok creators, occupying both subcommunities, depict mental health/ illness on the app and how LGBTQ+ youth might subvert or comply with dominant discourses of "vulnerability" and "at riskness" through their engagement with TikTok.

Anthropologists have been relatively slow to engage with digital media, but since the 90's a body of work has steadily grown. Ethnographies of digital media typically involve three distinct but overlapping themes of inquiry: work that examines how cultural identities are remade, subverted, communicated, and circulated through individual and collective engagement with digital technologies, work that explores the vernacular cultures of digital media, and lastly, work that examines how digital media shapes other kinds of social practices. (Coleman 2010) My work will engage with each of these broad areas of concern among ethnographies of digital

media. I intend to identify trends in discourse about mental health and queer identity from youth-presenting users on the app, as evidenced by vernacular cultures, and interrogate the potential material consequences of such discourse. I will also be attuned to Tik Tok posts as a form of self-making in a cultural context that paradoxically mirrors and subverts aspects of our non-digital, capitalist, heteropatriarchal society, (noting, by the way, that the two are not entirely separate entities). And finally, I will engage with mechanisms of community building and peer support found at the intersections of QueerTok and MentalHealthTok. I seek to answer the following questions: How do LGBTQ+ youth-presenting Tik Tok creators depict mental health/illness and their identities on the app? How might LGBTQ+ youth subvert or comply with discourses of "vulnerability" and "at riskness" through their engagement with TikTok?

Literature Review

Studies involving Queer youth's mental health often rely on overly-simplistic statistical accounts, that some scholars argue have led to the "vulnerabilization" of Queer youth, through the repetition and proliferation of statistics that give the impression that all queer youth are inherently vulnerable to suicidality and mental health disorders. (Cover 2012) School-based research is a key avenue to grasp the impact of discourses of vulnerabilization, victimhood, and "at riskness", highlighting the fact that initiatives focusing on protecting queer youth from harassment and violence in schools conceal the role schools themselves play in perpetuating heteronormative ideals and reproducing harmful social stratification. (Payne and Smith 2012 and Youdell 2004). Some anthropologists have highlighted how the hegemonic discourse centered around the suffering and tragedy of Queer youth exaggerates the extent to which suicidality and mental health issues are related to youth's self-identification as LGBTQ+ and therefore conceal other factors at play and reduce the LGBTQ+ population to a monolith. (Monk 2011, Bryan 2012). Additionally, these statistical accounts of youth experience and vulnerability/

victimization narratives often undermine or de-emphasize LGBTQ+ youths' agency by projecting a fallacious generalization of queer youth as a subject who needs to be saved by external (often institutional and adult) agents (Marshall 2010).

I argue that accounting for sociocultural contexts of LGBTQ+ youth mental health issues is important to avoid proliferating a narrative that pathologizes Queerness itself and engaging with Queer youth's own perceptions of mental health. Sociocultural contexts worth consideration include the question of: what exactly is a "mental health disorder" and "mental illness"? This question is of particular relevance to my work given that diagnostic criteria for mental health disorders were developed by an institution that historically regarded Queerness itself as an illness.

Madness

Research conducted on mental health within anthropology falls under the discipline's general concern with "madness" and offers a critical departure from psychology and psychiatry's medicalized understandings of human experience. Explorations of madness have been steadily increasing in the discipline with the most recent scholarship focused on psychiatry and related therapeutics, mental illness and mental health systems, and the social and political conditions that influence them. (Pinto 2020) While "madness" often shows up as an orienting term in the literature, many ethnographies dealing with psychiatry and psychology use language that is more relevant to the communities and experiences they document, which in the Western world might include "mental illness," "mental health conditions", "patient," "client," "person living under the sign of" a diagnosis, and other designations.

One of the earliest definitions of madness within anthropology is a label given to practices that defy cultural norms (Benedict 1934)-- but contemporary explorations use the term more broadly to theorize ritual, religion, and social process. By the 1960s, madness came to simultaneously represent the condition of existing outside of norms and the means through which those norms are instantiated (Douglas 1966, Turner 1967). The 70s marked the arrival of

psychological anthropology, which in dialogue with psychoanalytic theory, pursued "normative self-processes", different states of self that were understood in Freudian terms as revealing of culture as a symbolic process. (Obeyesekere 1981) While an anthropology of madness was developing, institutional care structures simultaneously emerged as a focus for social scientists theorizing power. Erving Goffman's foundational work "Asylums: Essays on the Social Situation of Mental Patients and Other Inmates" framed the asylum/ mental hospital as a form of "total institution", and argued that the most important part of what constitutes a "patient" is the institution they are in rather than illness. (Goffman 1973)

Similarly exploring institutional power, Michel Foucault's critical historiography of madness is perhaps the most influential work on the genealogy of the concept and in his seminal work *Madness and Civilization: A History of Insanity in the Age of Reason,* Foucault traces the history of madness and introduces key concepts that continue to be relevant: biopolitics/biopower, disciplinary power, knowledge-power, and discourse. Foucault argues that psychiatry as an institution is one of reason's disciplinary forms, a "moral tactic" productive of ways of being and knowing (Foucault 1973).

In 1981, Nancy Scheper-Hughes articulated connections between culture, social malaise, and mental illness in her ethnography of people with schizophrenia in a rural Irish community. Around the same time, Arthur Kleinman argued that culture informs illness and that illness can be a manifestation of social distress. Shortly thereafter, Sue Estroff's *Making it Crazy*, a groundbreaking ethnography of deinstitutionalized mental health care (Estroff 1985), argued the system itself produced "craziness" and linked experiences of insanity to structural conditions, institutional practice, and medical ideology. Theoretical perspectives on the process of "medicalization", which includes definitions of normal versus abnormal, and the connection between mind and body are also foundational to anthropological scholarship related to madness. Medicalization is the process by which human conditions and problems come to be defined and treated as medical conditions. According to Scheper-Huges and Lock (1987), the

process of medicalization treats negative social sentiments like rage or boredom as symptoms that can be shaped by doctors into new diseases. Scheper-Hughes and Lock have detailed how the process of medicalization affords people in power a great deal of control over populations, relating back to Foucault's notions of discipline and biopower.

Queerness

Shifting perceptions of Queerness by medical disciplines are a primary example of mental illness as a socially constructed phenomenon, as was suggested by anthropological accounts of madness. Throughout history, homosexuality, now referred to more frequently as Queerness or being LGBTQ+, has been viewed as a sin, a crime, and, most recently, as a mental illness (Morgan & Nerison 1993). It was only in 1973 that the American Psychiatric Association voted to take homosexuality out of the Diagnostic Statistical Manuel (DSM), the authoritative guide to diagnosing mental illness in the United States, and in 1992 that the World Health Organization declassified it as such too. According to the APA's Diversity and Health Equity Education guide for LGBTQ+ populations, all major professional mental health organizations have affirmed that homosexuality is not a mental disorder and being transgender or gender variant is not a mental illness and does not imply any impairment in judgment, stability, reliability, or general social or vocational capabilities. Now, rather than regarding LGBTQ+ identity as an illness, the APA and the disciplines of psychology and psychiatry view LGBTQ+ people as an oppressed group in need of special consideration because of their vulnerability to risk factors that predispose them to mental illness and suicidality. These risk factors include violence, victimization and bullying, rejection from family and subsequent homelessness, and high rates of drug and alcohol abuse. (Morgan & Nerison 1993, Platzer 2006). Some of the most informative literature has contextualized LGBTQ+ "vulnerability" by framing it within the heteronormative social climates and institutional cultures which presume heterosexuality, regulate and police gender variance or sexual non-conformity, and abnormalize

difference (Robinson 2012). Despite the APA's official declaration that homosexuality itself is not a pathology, many studies revealed that health practitioners still held homophobic beliefs and LGBTQ+ people still experienced their Queerness being treated as a mental illness or something to be cured (MacFarlane 1998).

Recent literature has also explored Queerness in relation to digital media. In a chapter of the text "Locating Queerness in the Media" Theresa Carelli articulates markers of a Queer-centric approach to studying media and outlines a "Queer Aesthetic", which refers to "those ways and manners in which LGBTQ community members are enculturated" and has one of more of the following features "is marked by "1) an appreciation for louder-than-life expression, such as the use of vibrant color or engaging performative storytelling, 2) a reflexive sense of humor about being "queer" that develops as a result of oppression, 3) a respect and admiration for camp and kitsch— both of which reflect a queer sensibility because of their over the -top quality, and 4) an appreciation for the arts." (Carrili 2017: 7)

Youth

While there is literature informed by anthropology documenting LGBTQ+ folks' experiences with and perceptions of mental health care at large, (Platzer 2006, Gaspar 2021) there is little attention to Queer *youth* specifically. Anthropological scholarship on youth, in general, is characterized by its attention to the agency of young people, its concern to document not just highly visible youth cultures but the entirety of youth cultural practice, and its interest in how identities emerge in new cultural formations that creatively combine elements of global capitalism, transnationalism, and local culture. (Bucholtz 2002). Zooming out to the more general field of Youth Studies, many researchers have engaged with Queer youth and inquired about their experiences and culture(s) in ways that acknowledge their vulnerabilities without proclaiming those vulnerabilities as the centerpiece of Queer youth's identity. In 2008, social scientist Susan Driver published a groundbreaking collection of essays, *Queer Youth Cultures*,

with the goal of "counter[ing] prescriptive and authoritative discourses that claim to know who Queer youth are and what they need and want" and "a refusal to reify youth as silent, passive victims" (Driver 2008:21) Of particular interest to my work is chapter 6, an essay by Anna Hickey-Moody, Mary Louise Rasmussen, and Valerie Harwood entitled "How to Be a Real Lesbian: The Pink Sofa and Some Fictions of Identity." They draw on ideas about public pedagogy to explore the production of a particular lesbian youth subculture on The Pink Sofa, a website described as a social platform for lesbian and Queer women in Australia looking for love and friendship. They characterize The Sofa as a kind of "public pedagogy" (Giroux 2004)' and a site of cultural production that facilitates a range of performances of "the real" lesbian identity, which, according to the Pink Sofa users, includes certain eye movements, jewelry, ways of moving, and gut feelings.

Notes on Language

Throughout my work, I use the terms "LGBTQ+" and "Queer" interchangeably, with the exception of references to other scholars' work that uses a specific term or reference to a Tik Tok user that lists another specific identity on their post or profile. LGBTQ+ is an acronym that refers to lesbian, gay, bisexual, transgender, queer, and/ or questioning, and the "+" encapsulates other sexual and gender identities within the community. While many anthropologists shy away from using the term "Queer" in their work because of its past as a derogatory slur used toward LGBTQ+ people I choose to use the word Queer because it has been reclaimed by LGBTQ+ people in recent generations, and also to acknowledge the presence of Queer theory in my work. Queer is both a noun, referring to one's sexual and gender identity, and a verb; to "Queer" something is to critique heteronormative ideals and reframe sexual and gender "difference" as something positive. Additionally, many members of the LGBTQ+ community exclusively identify as Queer, seeing categories of 'gay' and 'lesbian' as too restrictive to capture the scope of consensual desire that has historically been considered perverse. (Wilson 2019)

Definitions of youth vary cross-culturally and there is a need for a greater understanding of factors that delineate "youth" and otherwise. Still, for the purposes of this work, I will be using the definition of youth captured within the dominant quantitative representations of mental health in the Queer Youth population in the United States, like the Trevor Project's annual National Survey on Youth Mental Health, which posits youth as between the ages of 13 and 24.

Chapter 2: Methodology

Social media sites create virtual worlds, which Boellstorff (2015) argues include unique sets of socialities and forms of engagement worth anthropological study. TikTok is currently one of the most popular social media sites, with over 1 billion monthly active users worldwide and 139 million active users in the United States. 60% of Tik Tok's users fall between 16 and 24 and users are required to be a minimum of 13 years old. TikTok dominates youth culture and has become a fixture of everyday life for many young people. Users can post short videos from 15 seconds to 3 minutes long and video subjects range from lighthearted dance videos to educational material to disclosure of trauma. Like other social media platforms, TikTok features a variety of virtual communities centered around particular niches.

TikTok is a particularly relevant field site to consider questions about the social context of high rates of mental health issues among Queer youth in the United States given its popularity among youth and the prevalence of the communities: QueerTok and MentalHealthtok. The various communities on Tik Tok span a range of interests, affinities, locations, and lifestyles. There are no strict borders around these communities, rather, any TikTok produced by a Queer content creator dealing with "queer content" would be a contributor to the QueerTok community, and other tik tok users interacting with the content via likes, comments, saves, or sending posts to friends comprise the community as well. Communities also tend to form around individual creators, however, many of the queer content creators contributing to my community of interest do not consistently post content related to mental health. The same goes for "Mentalhealthtok" except it's less centered on personal identity, any Tik Tok dealing with the subject of mental health, whether by a mental health professional, a person experiencing mental health issues, or otherwise can be considered as part of MentalHealthTok.

Data Collection

I am interested in understanding how LGBTQ+ youth-presenting TikTok creators depict mental health/ illness on the app and how LGBTQ+ youth might subvert or comply with dominant discourses of "vulnerability" and "at risk ness" through their engagement with TikTok. Therefore, I will engage with the intersections of MentalHealthtok and QueerTok as my ethnographic field site. My chosen methodology is largely based on Bonilla and Rosen's (2015) conception of "hashtag ethnography", which they argue allows for analysis of distinct publics/ subcommunities given how hashtags function. Their work took place on Twitter, but nonetheless, TikTok hashtags work similarly. Searching the hashtags associated with Queertok and MentalHealthTok allows me to isolate content at the intersection of the two communities. Bonilla and Rosen detail substantial limitations to this technique including the fact that hashtags provide only a partial, filtered view, but given the fluidity of the communities and their location in a digital space, using hashtags as my search parameters is the best way to isolate and locate the content relevant to both communities tangibly. I am choosing to make my field site even smaller from there, narrowing my focus to posts from "youth-presenting users." I say "youth-presenting" because it is impossible to tell the age of a tik tok creator without them overtly saying it, or putting it in the bio section of their profile (which is pretty common, especially for minors). In describing posts and creators, I will be intentional about listing whether their youth status is known or an assumption on my part.

I conducted an ethnographic scroll (Roger and Lloyd-Evans 2021) of the top posts under combined hashtags of #lgbtq and #mentalhealth, #queer and #mental health, #lgbtq and #mentalillness, and #queer and #mental illness. I cataloged the top 10 posts under each of those combinations that were from youth-presenting users in the United States and took notes on the visible identities of the creator, general content, additional hashtags beyond my search purview, and communication in the comments section. I also took note of the audiovisual characteristics of the content, including the forms of sound (original, reused, song) and video

effects (filters, text annotation, photo montage, green screen, etc.). Hashtags are useful tools to sort and group content, but in order to provide "thick description" it is important to take into account individual contexts surrounding phenomena observed in the digital world, as opposed to taking the phenomena at face value. Thick description refers to a detailed description of not only the phenomena immediately in front of an ethnographer but an interpretation of the phenomena in the context of a broader web of social relations and meaning (Geertz 1973). For my work, this means taking note of the characteristics of individual content creators by looking at their profile pages and leaving space for nuance in my interpretation and analysis of content. Thick description also includes situating my depiction of youth content creators at the intersections of QueerTok and MentalHealthTok in the cultural context of both the "digital" and "physical" environments. Although I am making a distinction between the digital and the physical, the two are not mutually exclusive. TikTok presents opportunities for more descriptive interpretation than social media sites like Twitter and Instagram, given that posts are in a video format rather than merely texts and images.

While my methodology is nontraditional, it still relies on the cornerstone of ethnographic practice– participant observation. Participation involves self-immersion in the field site as a "consequential social actor" (Boellstorff et al.). In other words, participant observation requires some sort of intervention on the part of the ethnographer that creates a felt presence within the community. While my presence in my field site is not physical, my participation is still felt through my active engagement with the content–adding to the view count, saving the posts, liking the posts, and following some of the content creators whose posts fit into my communities of interest. Participant observation is an embodied endeavor and the experience is heavily shaped by the researcher's subject position as defined by various aspects of self-presentation and identity, namely gender, age, race, class, national origin, sexual orientation, religion, and occupation. In this case, my gender, age, sexual orientation, and neurodivergence are particularly salient.

I have actively engaged with QueerTok and MentalHealthTok as a youth user myself since mid-2020 when various posts tied to the communities came up on my "for you page," a personalized content page for users created by an algorithm that takes into account users' interests. My personal experiences cannot be neatly separated from the way I describe and analyze the phenomena I observe and engage with. Thinking specifically about the concept of situated knowledge(s) (Haraway 1988). I realize there is no neutral position or objective view untouched by materiality, context, and identity, which is why I feel it is vital to name aspects of my own subjectivity so explicitly. I am a figure among the quantitative statistics on LGBTQ+ mental health referenced previously– being bisexual, genderqueer, 22 years old, and therefore a youth by the definition I am adhering to, and living with diagnoses of bipolar disorder and posttraumatic stress disorder.

In their text *Principles and Practice of Digital Ethnography*, Pink et al. define the recognition of "the subjectivity of the research encounter" (Pink 2016:12) as reflexivity. Reflexivity is a central principle of my work because allows for acknowledgment of the collaboration between the researcher and the research subject in the process of knowledge-making. Especially considering the criticisms of representations of Queer youth I articulated in the introduction, acknowledging my own beliefs and positionality as a researcher is imperative so as not to contribute to the collection of prescriptive and authoritative discourse. Other principles outline by Pink et al. that characterize my methodology include multiplicity, non-digital centeredness, openness, and use of unorthodox methods. (Pink 2016) Multiplicity accounts for the fact that there are multiple ways to engage with the digital and that technologies are interdependent with the infrastructures of the "physical" world. Some videos I took note of in my data spreadsheet had been deleted between the time I wrote the analytical portion of my paper and the beginning of my fieldwork. I have since decided to download all of the videos on a secure device and intend to delete them after the completion of my research. This methodological struggle reflected the inseparability of the digital and the physical and

therefore of multiplicity and non-digital centeredness. Another significant marker of this

boundary's insignificance is the fact that TikTok has been under threat of being banned in the

United States, supposedly because of national security concerns. (López Restrepo 2023)

Publicly available data on social media provides unique insights into Queer youth culture

without as many ethical barriers associated with in-person fieldwork involving young people,

especially fieldwork related to subject matter as sensitive as mental health. However, no

research is remiss of ethical implications, especially that involving human subjects. Although the

data is public, much of the content I will engage with includes personal information about mental

health that users may not want to be eternalized through academic research. Therefore, I will

not be including any audiovisual footage of the Tik Toks themselves or the usernames of the

creators. My data is stored in a secure Microsoft Excel spreadsheet that features links to the

individual videos on the platform purely for the sake of my own review.

Chapter 3: Algorithmic Bias in Demographics/ Sample Characteristics

The majority of posts that came up with the search parameters "#queer and #mentalillness", "#lgbtq and #mentalillness" and "#lgbtq and #mentalhealth" were from youth-presenting users, making my data selection process simpler, as there were fewer posts to exclude. However, a search for "#queer and #mentalhealth" consisted mostly of young and middle-aged adults posting educational content. Nonetheless, I cataloged content only from youth-presenting users. Content among the 40 posts from youth-presenting users I cataloged included disclosure of mental illness/ trauma, advice, hospitalization/ treatment stories, and humor/inside jokes. Almost all of the posts regardless of their content featured white presenting users, and the majority were bisexual women who appeared to be cisgender. It is impossible to determine someone's gender identity from appearance alone; there is no one way to *look* transgender or nonbinary, yet I feel it is important to make assumptions in this case based on appearance and a lack of disclosure of trans identity given the fact that transgender youth are distinguished from cisgender youth and marked as more vulnerable to mental health concerns in the literature documenting LGBTQ+ youth mental health. Alarmingly, among the content I cataloged, only two content creators were not white/ white-presenting, and overall, the group of creators of the posts I cataloged was startlingly homogenous in terms of race and gender expression. TikTok's method of categorizing the top posts under each set of hashtags is unclear, as the videos that showed up for me were not sorted by any identifiable metrics such as likes, comments, or views. Even with my search parameters, it seems Tik Tok used data from my account and device to display content it believed would be most relevant to me, a process known as collaborative filtering which is done by a recommendation algorithm. The slice of the TikTok community I inhabited and describe in this work, therefore, should not be interpreted as an objective representation of Queer youth experiencing mental health concerns, or even of the intersection of MentalHealthTok and QueerTok, but my sample still offers key insight into the

first-hand experiences of LGBTQ+ youth making mental health-related content on the platform

and into the way the Tik Tok algorithm might privilege certain identities and types of content over

others.

It is difficult to determine concretely whether the demographics of my findings are the

result of people of color and men being simply less likely to create content for QueerTok or

MentalHealthTok, or if it is a result of the algorithm prioritizing posts that are most in line with my

own identities and what it perceives as being of most interest to me. While it is likely that youth

of color and youth presenting as men are genuinely less likely to contribute to QueerTok and

MentalhealthTok given that people of color and men are overall more likely to experience stigma

related to discussing mental health, it is also likely that any content folks with those identities

made is less likely to gain popularity in general. Despite its "public" reputation, TikTok is a digital

space that is not merely an open, unfiltered platform for discourse, rather, as Edwards and

Gelms (2018) explain in their discussion of "the rhetorics of platforms," TikTok, or its elusive

"algorithm" is a discursive practice in itself, producing "communities" and "publics" according to

private interests that ultimately shape society. In this case, the platform itself shapes views on

the experiences of Queerness and mental health among youth by privileging specific kinds of

content and demographics of content creators with the algorithm.

Because of intellectual property laws, there is not a lot of specific information about how

the algorithm is programmed or specifics about the way the algorithm functions. It is abundantly

clear, however, that the algorithm is inseparable from people and culture. Nick Seaver, an

anthropologist of technology, describes algorithms as "complex socio-technical systems" as

opposed to "autonomous technical objects" and argues for viewing algorithms as not just

informing culture, but as a part of culture in and of themselves. (Seaver 2017) Secrecy and

corporate barriers are a defining feature of the TikTok algorithm, but should not be cause for

lack of ethnographic engagement with it, especially given evidence of its uneven impact on

TikTok users from historically marginalized communities. Many creators have critiqued the

algorithm for biases related to race, gender, class, and general attractiveness. One report from researchers at Harvard Kennedy School found that recommendation algorithms on social media platforms like Tik Tok may "reduce the recommendation (and visibility) of content created by women and ethnic minorities or disproportionately penalize certain groups in algorithmic detection and demotion of harmful content." (M. Vidal Bustamante 2022) Additionally, A 2019 investigation revealed explicit evidence of algorithmic bias on Tik Tok specifically, finding that TikTok suppressed videos from disabled, queer, and conventionally unattractive creators citing cyberbullying concerns. (Biddle 2020) An artificial intelligence researcher from UC Berkeley, Marc Faddoul, also determined in early 2020 that TikTok's account recommendations were racially biased. Users' suggestions of which accounts to follow were creators with profile pictures that matched the same race, age, and facial characteristics as the accounts the user already followed. (Amarikwa 2023) TikTok denied that profile pictures are used in the recommendation algorithm but journalists were able to replicate Faddoul's experiment and findings. Seeing the algorithm as both a discursive practice and a complex socio-technical system allows for an understanding of the way biases like these manifest as a result of the algorithm both reflecting and reproducing "real-world" cultural ideals and social inequalities.

Chapter 4: Dominant Themes in Content; Discourse/ Content Analysis:

I identified the following key themes and content trends in 40 posts from youth-presenting users at the intersection of QueerTok and MentalHealthTok, none of which are mutually exclusive: family, identity un/certainty, homophobia and transphobia, hospitalization and behavioral health care, disclosure of diagnosis and/or active struggle, and inspiration/advice. The content of the posts is a form of discourse and analyzing it as such is a key step in determining the ways in which Queer youth depict their identities and experiences with mental health/ illness on TikTok. Once achieving a sense of what kinds of content and which users comprise QueerTok and MentalHealthTok, it is possible to draw comparisons between content and mainstream discourse from sources like the Trevor Project related to Queer youth vulnerability and also to determine not only "what" and "who" the community is, but how exactly creators and members interact with it, and what the effect of those interactions might be at both micro and macro levels. For each dominant theme, I attempt to situate the discourse within the "physical world" context and histories, as creators are undoubtedly influenced by both the physical and the virtual realms of society, and again, the two are impossible to neatly separate. I include a discourse analysis of two examples of posts I coded for each respective theme and position the discourse in relation to dominant narratives about LGBTQ youth's vulnerability to mental health issues.

Nuances of Family Support, or a Lack Thereof:

Reference to family is the most prevalent theme among the content, with thirteen posts of the forty I cataloged referencing family in some regard. None of the posts mentioned or alluded to family in a positive light. Family is a particularly interesting theme given that the dominant discourse about LGBTQ+ youth mental health references family support as both a potential risk and protective factor. One of the Trevor Project's key findings is that LGBTQ+

youth who felt high social support from their family reported attempting suicide at less than half the rate of those who felt low or moderate social support. (The Trevor Project 2022) Other studies conducted by psychologists and social workers have had similar findings, noting that parent and family rejection is strongly associated with mental health problems, substance use, and sexual risk. (Bouris 2010 and Simons 2013) Research posits that the stakes of family rejection are high, considering its links to suicidality and homelessness experienced by LGBTQ youth, particularly transgender youth, and youth of color. (Newcomb, 2019)

When discussing family support as a variable, it is usually discussed in reference to parents and family being homophobic or transphobic, although it is unclear what the operational definition of "family support" is, or whether support is in the form of supporting Queer identity or in addressing mental health concerns, or both. Regardless, the finding of a lack of family support as a factor in Queer mental health aligns with the content from Queer youth content creators on Tik Tok. Interestingly, however, the lack of family support indicated in many of the TikToks is not necessarily specific to Queer identity but to a lack of support for the creators' mental health concerns in general or a lack of support given a complete absence.

One example of an instance where toxicity or lack of support from family is not explicitly tied to acceptance, or lack thereof, of Queer identity, comes in the form of a skit in which a content creator reenacts their mother confronting them while they cry in the shower. Emmie presents as white, femme, and cisgender with long blonde hair, a silver hoop in their nostril, and silver hoop earrings in a black tank top. They are sitting in the shower with their knees pulled into their chest crying and there is a text overlay. "Me in the shower falling apart and trying to convince myself not to end it right then and there". The post transitions to Emmie walking down the hallway, this time in a red sweatshirt acting as their mother. The text overlay then reads: "My Mother "GET THE F$#K OUT OF THE SHOWER NOW!" while the content creator, acting as her mother, knocks hard on the bathroom door. The video then switches back to the creator in the

shower, mouthing the lyrics at the end of the song playing "I'll see you when I fall asleep," presumably hinting at suicide. The hashtags listed on the video are #trending #mentalhealth #toxicfamily #fyp #lgbt #toxicparent #fypシ and the video, posted in November of 2021, has 926 comments, 297.5k likes, 2034 shares, and 1.4 million plays/ views. The sound accompanying this video has 56.1 thousand other videos, most of which have similar skit-like structures and mention toxic, abusive, or near-death experiences. There is no indication of the creator's sexuality in the video itself, but they include #lgbt in the hashtags. From other videos of theirs, I know they identify as a "wlw" or woman-loving woman. It is common for videos with the #lgbt, #queer, (or its closely related terms) to be absent of any explicit mention of gender or sexuality.

On the other hand, although they are the minority of posts, there are examples of content that do reveal a lack of family support specifically related to the content creators' LGBTQ+ identity. Deviating from the skit-like format that dominates MentalHealthTok content, this user presents raw footage of what they consider "mental abuse" from their mother. The caption of their video says "Here's your proof guys, she does this daily." and the hashtags include #mentalhealth #fyp #lgbtq #abuse #mentalabuse #abuseisnotatrend #abused #suicideawareness. The post has 6.1 million views, 1.8 million likes, 15.4 thousand comments, and 15.3 thousand shares. In the top left corner of the video, there is text that reads "Volume up please", pointing viewers to pay attention to their mother's voice and a textbox over their head that says "A minute ago she told us she fu*cking hates us both and to fu*ck off". The mother says, transcribed to the best of my ability, "Fuck. I didn't raise assholes. One of yous wants to be a fucking lesbian the other one doesn't want to talk to me. I can't talk to either of yous. I spent my whole fucking life raising you and worrying about you and I can't even talk to either of yous. I can not believe this, what the fuck? Why do I deserve to fucking not be talked to? I can't believe any of this. I don't even have a fucking family and neither of you want to talk to me ever. All you do is treat me like shit I get no answers, I don't ever hardly get hugs. I don't deserve this." This lasts until 1:04 at which point the creator whispers directly to the camera "She's literally doing

the 'woe is me' thing right now because I said I wouldn't answer her about these questions she's asking me about my girlfriend. She was interrogating me about her and I said 'no, ask her, not me if you want to know' and this is what fucking happened. You want proof? Here you go."

Later videos on the user's account show them counting down the days until they move out of their mother's home, and experiencing homelessness for two weeks before finding stable housing. Posting raw, actual footage as opposed to acting out a skit seems to be an attempt at proving to viewers that the creator's experience of abuse is genuine, relating to a dominant culture of mistrust toward narratives of abuse from youth. Vegas' raw footage seems to directly parallel the experiences of Queer youth vulnerability depicted by the Trevor Project and discourse about a mental health crisis among LGBTQ youth.

Overall, Queer youth content creators on the app often reference or allude to family and provide nuance to a generalized finding among scholarship that a lack of family support is a risk factor specific to LGBTQ+ youth; even if families do approve of Queer identity, is it enough without being able to support them through emotional turmoil? Is family support or lack of linked to homophobia specifically or is it often more generalized abuse/ emotional neglect youth are experiencing? Another consideration is whether or not the algorithm privileged content that did not explicitly reference homophobia. Additionally, it is likely that Queer youth with homophobic or transphobic parents are less likely to make posts for QueerTok because of the risk of being outed, but then again, youth most likely do not wish for their parents to see the content they make referencing their families in general.

Rage versus Passivity in Response to Transphobia:

Occasionally overlapping with reference to family, various transgender youth-presenting content creators describe encounters with transphobia. Transphobia is fear, hatred, mistrust, or discomfort with people who are transgender, genderqueer, or don't follow traditional gender norms. Transphobia can occur at institutional, interpersonal, or internalized levels. Homophobia

and transphobia were referenced either directly or indirectly in four of the forty videos I cataloged and responses noted within the content varied from rage to passive acceptance. The Trevor Projects 2022 survey captured numbers of youth who have experienced discrimination based on homophobia and transphobia. Their findings state that 71% of transgender and nonbinary youth reported that they have experienced discrimination based on their gender identity, and 73% of LGBTQ youth reported that they have experienced discrimination based on their sexual orientation or gender identity at least once in their lifetime. (The Trevor Project 2022)

17-year-old Milo (he/they pronouns) posted a video to raise awareness about mental health issues among transgender youth, seemingly in support of statistical representations of Queer youth vulnerability and yet including a glimpse into his own personal experience as a transgender youth as well. His post reflects interpersonal transphobia at the level of family and also contains themes of identity and inspiration. The top of the video features a text overlay with "CW//tr@nsphobia, @bu$e, $u!c!de" with the text coded using various characters as a tactic to avoid TikTok hiding the video or it getting taken down for violating TikTok's guidelines. There is also a text overlay at the bottom of the video to start that reads "My parents have been very transphobic lately" and then transitions to "so I'm gonna paint a giant trans flag in my room :) And give you some trans statistics." Text containing statistics from the Trevor Project's 2022 survey that relate specifically to transgender youth is then shown on top of a video of Milo painting the transgender pride flag, consisting of five horizontal stripes: light blue, pink, white, pink, and light blue, on their bedroom wall. "Don't stay silent about trans youth and the reality of how difficult it still is to be trans today, especially with all the bills being passed in America right now" appears atop a still shot of their hand covered in paint, before the video transitions to a full view of the new art on his wall, which contains not only a transgender flag, but black painted text that says "NOT UR FUCKING DAUGHTER", "he/they", "trans women are women, trans men are men", and their TikTok username.

The energy of this video is reminiscent of the dominant organizing principle of many contemporary transgender activists—rage. In Queer theorist Susan Stryker's seminal work "My Words to Victor Frankenstein Above the Village of Chamounix: Performing Transgender Rage" she theorizes "transgender rage" as "a means for disidentification with compulsorily assigned subject positions" and argues that "through the operation of rage, stigma itself becomes the source of transformative power." (Stryker 2013) In this example, the creator's rage manifests as opposition to the compulsorily assigned subject position of "daughter". Milo's post could be considered an example of adherence to dominant characterizations of LGBTQ youth as vulnerable through direct reference to quantitative statistics from the Trevor Project. However, I read Milo's video as simultaneously resisting the homogenization of transgender youth through the insertion of a first-hand narrative and the making of political art infused with a performance of rage.

A less overt example of transphobia is presented in 19-year-old Caroline's video detailing her experience getting repeatedly misgendered at her job. She indicates that she uses she/her pronouns in the bio of her account and in the video she has blonde shoulder-length curly hair, subtle eye makeup, and bright red lipstick. She wears a light blue and green floral printed shirt with a collar and a pale pink blazer on top. Speaking directly to the camera, with no editing or effects, and in just one take, she says: "So the other day I was at work, I work at Starbucks, and people just kept calling me sir, misgendering me, and I was like okay probably just an honest mistake, maybe they just mixed it up a little, maybe it was the Adam's apple or something and they just weren't too nuanced with their review. So I was like okay it's fine, won't be too hard on myself, the perfect transition doesn't happen overnight. Anyway, I wash my apron, I take off the (she/her) pin on my apron, and the next time I go into work without it everyone calls me ma'am. So it turns out people didn't think I was a man, they were just misgendering me to be rude. And like I bring this up to my boss who is a mid-30s man with a

huge mustache–people have been calling him ma'am, and he has his little (he/him) pin on, so apparently, people are just awful." She captions the video: "so yea, you're probably passing just fine, people are apparently just mean #trans#lgbt#WeStickTogether#fyp#lgbtq#mentalhealth" and the post has accrued 76,000 likes, 1392 comments, and 383 shares, gaining a significant amount of visibility.

The caption positions her post as a source of inspiration or validation for other trans people. Additionally, although mental health is not mentioned explicitly, the use of #mentalhealth indicates her experiences of being misgendered impact her mental health, and in a broader context that experiences of misgendering are related to transgender youth's mental health at large. In contrast to Milo's bold assertion of his trans identity, Caroline's post suggests a desire to "pass" or to be indistinguishable from cisgender people. Her response to misgendering is immediately a questioning of her own gender presentation until she realizes patrons are misgendering her deliberately. She describes them as "mean" in her caption, and I am curious why she doesn't use the label "transphobic". She realizes that people were not reading her as a man, rather, they were just "being assholes" and using the wrong pronouns and gendered honorifics because she was wearing a pin with she/ her pronouns. Therefore, she concludes, other transgender people being misgendered are likely "passing just fine", as indicated in the caption. Her desire to "pass", and encourage other trans people/ youth through the declaration that they too, are likely passing as cisgender, signals an investment in embracing an "acceptable", "transnormative" subjectivity. Sociologist Austin Johnson introduced the concept of transnormativity as the set of standards that transgender people's presentations and experiences of gender are held to. Johnson argues that transnormativity should be understood alongside other normative ideologies for Queer subjects, including homonormativity and heteronormativity, as simultaneously empowering and constraining, allowing some trans folks a sense of legitimacy in their identity while others are marginalized or rendered invisible. (Johnson 2016)

Embracing Queer Identity and a "Queer Aesthetic":

Arguably, all of the 40 posts could be coded with "identity" given that at the very least, they reference Queer identity through a hashtag. However, for this theme, I coded content that explicitly mentioned attempts to define and label one's own identity as a Queer person or content that explicitly names supposed characteristics and traits of people who identify as Queer. 6 out of 40 posts were coded with this theme. This content contrasts with a large portion of the content I analyzed that features no explicit mention of the creator's LGBTQ identity aside from a hashtag.

One content creator, Maida, who presents as a youth but makes no direct reference to their age on their account, presents the process of trying to figure out their gender identity and sexual attraction as chaotic and stressful. They are a white presenting AFAB person with shoulder-length brown hair fashioned half-up half down. They are wearing a loose-fitting cream sweater with flared sleeves. The 59-second video is comprised of stitching brief shots of the creator in various positions and angles but they are at the center of the frame in each. A brief text annotation is on top of each shot, and the text walks us through their journey of trying to figure out their sexuality and gender identity. The text boxes include the following, in chronological order: Gender?!?!?, she/they, I wanna be a man, Noup I like being a girl, I wanna be a gay man, Ewww relationships, Could I be pansexual?, I want a girlfriend, she/her?!??, Maybe I'm a lesbian?, Nope wait I DO like men, Yes I'm asexual, WHY AM I NOT A GAY MAN, Aromantic? :D, Yep aro/ace, WHY AM I A GIRL, I want a girlfriend, No I want a boyfriend, Don't want a relationship, I wanna be a straight man now, WTF is going on, I want a boyfriend, "I am now gross" matches up with audio, "and watch this" matches up with audio, *sparkle emoji* GENDERFLUID *sparkle emoji*, But eww relationships GET AWAY FROM ME. The caption reads "A month and a half of my life #xyzbca #mentallyill #🏳️‍🌈 #lgbt" and the post has 501,800 likes, 7057 comments, and 7834 shares.

Judith Butler's theory of performativity accounts for the ways in which social realities and identities are not a given, but are continually created "through language, gesture, and all manner of symbolic social sign". (Butler 1988) From this perspective, gender, and even sex, are not necessarily givens, and an understanding of how these often-taken-for-granted identity categories are socially constructed explains the possibility for an experience like Maida's, in which their gender and sexuality are fluid and ever-evolving. I am intrigued by the use of the #mentallyill however, on a video solely capturing what appears to be a normal process of self-discovery in a society that has created many compulsory identity categories that are not universally applicable. The view that the experience of questioning gender identity is at all related to being "mentally ill" is likely linked to psychiatric institutions' history of pathologizing trans and gender non-conforming folks' experiences through the diagnosis of "gender identity disorder", which was a part of the DSM until 2013, and to what medical anthropologists Scheper-Hughes and Lock refer to as a process of "medicalization." According to Scheper-Huges and Lock (1987), the process of medicalization treats social sentiments like rage or boredom as symptoms that can be shaped by doctors into new diseases. In this case, the distress Maida experiences as a result of gender fluidity is linked to being "mentally ill" rather than to oppressive heteronormative structures that dictate gender as a binary.

In addition to perpetuating a view that distress related to incompatibility with heteronormative understandings of gender and sexuality is a symptom of illness, some content posits "mentally ill" as an identity of its own. Chris, a youth and masculine presenting AMAB person, posted a video participating in a Queer-tok specific audio trend (see trend chapter) that collapses "mentally ill" and "queer" into a single, mutually exclusive social identity. In the trend, content creators hold up their hand and put a finger up every time they relate to a characteristic mentioned in the audio, which says "no mentally ill queer person has all 5: a college or university education, their natural hair color, at least one parent who isn't abusive, the ability to differentiate between platonic, romantic, and sexual attraction, and a full-time job." We see the

Queer aesthetic feature of humorous reflexivity (Carilli 2017) in this trend, casually joking about common characteristics of being "Queer and mentally ill" which include an arbitrary physical characteristic and confusion about different forms of attraction but also serious markers of disadvantage– abusive parents, lack of higher-education, and unemployment.

Butler's theory of performativity can be used to conceptualize the meanings we associate with "Queer identity", to make sense of a phenomenon of youth on the app regarding mental illness as a part of their identity, and to understand the TikTok content like Chris' that collapses the two identities into one "mentally ill and queer" subject position. This Tik Tok trend is an example of language and gesture collapsing mental illness and queerness into a single category, and naming specific features that comprise this "mentally ill and queer identity". Interestingly, the trend does account for some known sociocultural factors that often are associated with mental illness, either as precursors or consequences of, like abusive parents, lack of higher education, and unemployment. However, collapsing the two experiences of mental illness and queerness into one and making it into a trend proliferates the notion that queer and mentally ill are inevitably enmeshed, ultimately furthering a discourse of LGBTQ+ at risk-ness.

Sinister and Humorous Critiques of Institutionalization/ Hospitalization:

Eight of the videos detail personal narratives of navigating behavioral health care systems, particularly of seeing a therapist and being hospitalized, or of being at risk of involuntary hospitalization. The "physical world" context behind posts of this subject matter is that many Queer youth are unable to access to behavioral health care. However, historically, LGBTQ folks, in the United States and the West at large, have been at heightened risk for hospitalization given the pathologization of Queer identity by psychiatry. I interpret all of the content under this theme as critique or fear of institutionalization through hospitalization, although the style of the content varies drastically, from humor and playfulness to sinister.

Perhaps the darkest of posts in this category comes from a 19-year-old masculine presenting person assigned female at birth. Their hair is in a top bun, they have a hoop ring in their nostril, a septum piercing, an eyebrow piercing, double earlobe piercings, a silver chain necklace, a black tank top and grey zip-up sweatshirt over it, and a moth tattoo on their chest. They also have a feeding tube going behind their ear and into their nose, taped to their face. The entire video has a purple filter over it, adding to a dark and ominous feeling. The creator is in frame from their chest up and the first half of the video features them avoiding eye contact with the camera and a text overlay "15 y/o me being admitted to the psych ward when all of the paramedics get up and leave me in the waiting room:" then transition to a closer shot of the creator, this time staring directly into the camera with their chin tilted downward giving a menacing vibe, with the text overlay "the 40 y/o patient they left me alone with:" and then a final transition back to the original shot style, with the creator shaking their head as the audio and a text overlay says "Something bad is bout to happen to me." Other videos using that audio give a clue as to the nature of the event the creator is referencing, although it is never explicitly confirmed, the video is most likely referencing the 40-year-old patient they were left alone with in the psychiatric hospital when they were 15 sexually assaulting or raping them.

The video is captioned with "worst moment of my life #fyp #foryou #lgbt #lgbtq #mentalhealth #trauma #OREOBdayStack" and was posted on March 6, 2022. The post has 519.6 thousand likes, 916 comments, 469 shares, and 2.7 million views. Although their LGBTQ identity is not explicitly mentioned in the video, they use two different hashtags referencing queerness, asserting their identity, and situating themselves within QueerTok. Many anthropologists have been critical of psychiatric institutions, including Erving Goffman who argued in his foundational work "Asylums: Essays on the Social Situation of Mental Patients and Other Inmates" that the asylum/ mental hospital is a form of "total institution", meaning an institution that creates a closed social system in which life is organized by strict norms, rules,

and schedules, and argued that the most important part of what constitutes a "patient" is the institution they are in rather than illness. (Goffman 1973) Goffman describes the process of a subject becoming a "patient" in a mental hospital as one that likely includes physical and social abuse. Although his work was in the early '70s, we see in this creators narrative that their experience in the psychiatric hospital is moreso defined by the failings of the staff and a structure that left them vulnerable to mistreatment from a much older, male patient, likely exacerbating the mental health concerns that brought them there in in the first place. Thus, while the overall darkness of the post might indicate a contribution to a narrative of suffering being central to Queer identity, I read the absence of a direct mention of their sexuality in the video itself as a separation between their Queer identity and the negative experiences they had within an inpatient psychiatric institution.

Contrary to the sinister energy of Danny's video, 20-year-old Tatum's is a humorous video, "ranking things that happened to them at the *grippy sock* place." *Grippy sock* place is a Gen-Z term for an inpatient psychiatric hospital, deriving from the fact that many inpatient psychiatric hospitals give out non-slip socks with rubber grips on the bottom to patients. A common phrase among various internet communities is "taking a grippy sock vacation," which is a term that has been criticized for trivializing the experience of hospitalization. The structure of the video follows a ranking trend that is reminiscent of an episode of Dance Moms, a show that debuted in 2011, that was notorious for its ruthlessness towards young girls who were aspiring dancers. Tatum identifies as a lesbian according to their bio but there is no reference to Queer identity in the content of the post itself, other than the hashtag.

They present androgynously, with short dirty blonde hair, a bare face, and thick eyebrows. They wear a grey and white baseball tee with what looks to be either a sports bra or binder underneath, a thick black grommet belt, and loose-fitting light-wash jeans. They start the video with only their upper body and face in the frame and say "hello and welcome to rating things that happened to me at the grippy sock place. It's only trauma if you don't make jokes

about it." The video then transitions to a shot of them standing in front of a chalkboard. Their bed is in the bottom of the frame and their cat can be seen grooming itself. They then describe each of the events and make a note on the chalkboard of where they "rank". Some of the events include: "a girl shoving her doo-doo down the shower drain", "peeing contest; the name of the game: peeing in the most irresponsible places, for the most points", "someone dipping their scrambled eggs into ketchup."

Their video was posted on November 10, 2022, has 3345 likes, 29 comments, and 8 shares. The caption says "the amount of these i could do is uncalled for #fypシ #lgbtq #grippysocks #mentalillness #yikes". Tatums post is another example where #lgbtq is used despite there being no direct mention of Queer identity in the video itself. The style of video, however, is very much in line with Carilli's tenets of a "Queer Aesthetic" within digital media, featuring "an appreciation for lounder than-life storytelling" and a "respect and admiration for camp and kitsch–both of which reflect a queer sensibility because of their over the top quality." (Carilli 2017) Danny's video provides no context as to the specifics of their individual mental health, rather, it focuses on the experience of actually receiving mental health treatment at in-patient setting. While their humor might trivialize the experience of being hospitalized, which is concerning given the long history between LGBTQ+ people and institutionalization, I ultimately read their post as a way of pointing out the ineffectiveness of existing treatment opportunities.

Advice/Inspiration for Fellow Queer Folk:

In direct contrast to the "doom and gloom" undertone present in all but one of the videos coded with the theme of disclosure, a significant portion of the content, seven videos, are in the form of hopeful inspiration and advice for other youth and TikTok users at large experiencing mental health issues. Some are specific to Queer youth, others to youth generally, and others to anyone struggling with their mental health. Some of the content embodying this theme exists within a larger trend of both laypeople and behavioral health professionals disseminating public

health and psychoeducational information. Others are less formal and educational and appear more as desperate pleas to " not give up" and to avoid attempting suicide or self-harming. Some are comprised of practical "tips and tricks" to manage mental health concerns like self-harm urges or suicidality derived from first-hand knowledge.

In honor of September being suicide prevention month, one Queer youth content creator posted a montage/ slide-show style video with assorted informal, seemingly random pictures, each with a text overlay of a short anecdotal lesson he has learned since coming out as transgender at age 12. The video accrued 4548 likes, 46 comments, and 12 reshares and was posted on September 16 2022. One of the photos is a Snapchat with the message "Kayden is getting his t-shot alone, Kayden is terrified" referencing gender-affirming care in the form of testosterone injections. Otherwise, the photos seem to be random, including a school lunch table, and a photo of Kayden at the zoo with a Koala bear. The text of the video is listed below, with each bullet point making up text on top of a single picture:

- "Things I've earned since coming out as trans at 12 *transgender pride flag*; "in honor of self-offing prevention month :)"
- -you're not unreasonable for wanting basic respect, you're allowed to speak up"
- "dysphoria does not mean you're undeserving of love, or self love"
- "do what makes you happy, not what pleases others"
- "its not your job to make people understand you"

The caption reads "the trans community has among the highest rates of self-offing, this is my take on this trend :) #transgender #ftm #dysphoria #transman #mentalheath #transmentalhealth #lgbtq #awareness"

In contrast to Milo's post referenced under the theme of transphobia earlier, Kayden references the fact that a disproportionate number of transgender people die by suicide without directly referencing quantitative statistics or even the word suicide. He speaks purely from his

own perspective with a positive and hopeful tone, indicated by the syntax of his written lessons, the audio of the video, and the use of the smiley face symbol in the caption. The overall positive and hopeful representation of life as a transgender youth counters homogenizing narratives of vulnerability for transgender youth that evoke pity and disdain.

While Kayden's post seeks to specifically inspire and provide affirmations/ advice to other trans youth using his own personal experience, many LGBTQ youth content creators make advice or inspirational content about mental health that applies to people experiencing mental health issues more generally, not just Queer youth. For example, 18-year-old Lane, who identifies as bisexual and does not indicate their pronouns on their account, posted a 3-minute-long video (Tik Tok's maximum length) providing advice and inspiration for people who currently self-harm or have self-harm scars.

They present as AFAB and androgynous with short, faded turquoise hair, a septum piercing, a black beaded necklace, and a black t-shirt. No audiovisual effects are used, and the video is in landscape orientation, meaning that the video appears sideways, which is very unusual for the platform. The entire video is a single shot of Lane talking directly to the camera about their journey of overcoming feelings of shame associated with their self-harm scars. Paraphrasing here, they speak about coming to recognize that they are not "a walking trigger" just because of their scars and that they are entitled to wear whatever they want even if it means their self-harm scars show, because "how other people react to it is not your problem". Their video was posted on July 12, 2022, and contains 6368 likes, 170 comments, and 42 shares. The caption says "I'm proud of you for being here and getting through it and you are beautiful. Let's talk about it #sh #shscars #fyp #fypシ #mentalillness #awareness #struggle #lgbtqia #lgbtq #alt #gay"

Self-harm, otherwise known as non-suicidal self-injury refers to the act of harming ones own body on purpose, such as through cutting, burning, or hitting oneself. It is an incredibly

stigmatized topic, captured by the feelings expressed of previously hiding or covering up their scars, and this user displays an extraordinary level of vulnerability in making this post. The Trevor Project did not measure the numbers of LGBTQ youth who experience self-harm urges or partake in self-harm but other mainstream sources like WebMD identify lesbian and gay youth as being at a higher risk of self-harm than heterosexual youth. Additionally, people who experience suicidal ideation often engage in self-harm although it is important to note that even if someone is experiencing suicidal ideation, the self-harm I am referencing is not with the intent of dying by suicide. According to research published on WebMD, a popular health-care information website, in 2019, an estimated 10%- 20% of heterosexual teens engaged in non-suicidal self-harm compared to between 38% and 53% of lesbian, gay, and bisexual teens. Self-harm, regardless of the themes I coded for, came up one other time in all 40 videos I cataloged. Although Lane uses the hashtags "#lgbtqia, #lgbtq, and #gay" they do not reference their queer identity at any point during their 3 minute video, subverting expectations formed by dominant discourse that their self-harm is directly related to their LGBTQ identity. Although, the hashtag links the two together as well, possibly indicating that they do view being LGBTQ as in some way related to their experience of self-harm.

Theme/ Content Conclusions:

The content at the intersection of QueerTok and MentalHealthTok created by youth presenting users encompasses a wide range of topics and concerns, namely family, identity, transphobia, hospitalization, diagnosis and inspiration/advice. Surprisingly, none of the content I cataloged referenced politics or any of the anti-trans/ homophobic laws coming out in the last couple of years, despite the Trevor Project referencing political atmosphere as a determinant of LGBTQ+ youth health. Specifically, their survey found: 93% of transgender and nonbinary youth

said that they have worried about transgender people being denied access to gender-affirming medical care due to state or local laws, 91% of transgender and nonbinary youth said that they have worried about transgender people being denied access to the bathroom due to state or local laws, and 83% of transgender and nonbinary youth said that they have worried about transgender people being denied the ability to play sports due to state or local laws.

There is a great deal of variation in the ways in which Queer youth on the app discuss and reference mental health, some of which mirrors dominant, homogenizing discourse, others of which subvert it, and some are hard to relate to the dominant discourse at all. Styles and format of content varied significantly, but the most apparent tone is sarcasm and humor. Overall, there is a recognition among creators that their experiences are not solely individual, and a sense of identification of experiences of mental illness and mental health issues as distinctly queer. Thus, Queer youth simultaneously instantiate the pathologization of their identity and give attention to various social and cultural factors at play in their mental health experiences. While aesthetics was not central to my analysis, I did observe trends in Queer youth presentation including colorful hair and piercings.

Chapter 5: Methods of Self-Making and Building Community

My work thus far has focused on conducting a discourse analysis of individual videos from content creators to determine what kind of youth-generated content comprises the intersection of QueerTok and MentalHealthTok and how the narratives articulated within the content might subvert or comply with dominant discourses about LGBTQ+ youth mental health. Now, I will turn my focus to assessing the methods Queer youth content creators use to gain or limit visibility and the strategies they employ to build their sub-communities with other content creators and users. As TikTok is a multimodal application, the features of TikTok "encourage users to mimic, parody, and produce creative variations on one another's work to appeal to a broader audience. (Hautea, 2021**)** Various techniques specific to Tik Tok, most notably audio and hashtags, amplify or complicate youth's representations of the relationship between mental health and LGBTQ+ identity and put Queer youth content creators into direct conversation with other users both in and out of their own communities.

MentalHealthTok and QueerTok, although distinct subcommunities comprised of minoritized subjects, are situated within a web of more privileged virtual communities such as BookTok and MoneyTalk, and audiovisual trends, such as dance challenges. Many of the Tik Toks I identified as being amidst the cross-section of MentalHealthTok and QueerTok feature attempts at participating in popular Tik Tok trends, particularly audio trends. Participating in an audio trend increases the chances of the algorithm pushing content to viewers outside of the relevant communities and of the post "going viral". A post "going viral" means that it receives a large number of views in a short amount of time, and there is no universal standard that determines when a video has gone viral, some online blogs say between 250,000-1 million views or more on TikTok counts as going viral. The elusive algorithm plays a major hand in the type of content being created and the visibility of the content to various populations. Every video on TikTok contains a sound that is listed underneath the video. The sound either comes from the

TikTok Sound library or is an "Original Audio" from the creator. Original audio can be reposted and ultimately become a part of the sound library. Queer TikTokers referencing mental health are thus rendered more visible when they participate in audio trends, as their videos reach heterosexual audiences and people not necessarily interested in mental health issues. Of the 40 videos I cataloged as part of my data, the majority used sounds from the TikTok sound library and some of these sounds were specific to MentalHealthTok or to QueerTok, and others were a part of "viral" trends.

One viral tik tok audio trend that is present at the intersection between QueerTok and MentalHealthTok is a two-part video to the sound "the joke is on you. Icarly" where the creator is in the frame the entire time, and the first half of the video features a fact or statement that then gets contrasted or debunked in the second half of the video after a dramatic transition. This particular audio has been used for 246,600 videos. The sound comes from the theme song of a Nickelodeon TV show that aired from 2007 to 2012. Its an upbeat and catchy tune, and the two lines from the song included in the audio are:

"It's an all-night party that we're getting into

If you think it's all over then the joke is on you"

One of the top videos under the combined hashtags of #lgbtq and #mentalhealth engages with this trend. The 14-second video, originally posted in July of 2022 was created by a white, femme-presenting person with half black, half-blonde shoulder-length hair split down the middle with a septum piercing, a long silver chain dangling from their right ear, winged eyeliner, a clear quartz crystal on a black cord necklace, and round glasses. Their bio indicates they are "Aroace" (aromatic and asexual) and 22 years old. The video starts with them looking away from the camera, making confused and inquisitive faces. This scene is overlaid with text reading "15-year-old me wondering why other teens couldn't act their age". Halfway through the video, the pace of the music picks up and the video transitions to the creator looking directly at the camera, and a slow zoom into their face occurs along with the text "they were acting their age I

was just *(sparkle emoji) traumatized*(sparkle emoji)". Hashtags include #mentalhealth #trauma #fyp #fypシ #alt #alttiktok #aroace #teenagers #teens #CVSPaperlessChallenge #lgbtq #lbgtqia #audiotrend #traumatized #therapy #toxic #darkhumor"

It seems the creator is seeking to gain popularity and visibility from a broad audience, referencing multiple hashtags and TikTok subcommunities along with "#fyp" a supposed hack to increase the chances of content being pushed to people's for you pages. They even use a hashtag for an unrelated viral challenge, the #CVSPaperlessChallenge, in order to gain more views and engagement with their post. At the time I cataloged the post, it contained 810,800 views, 248,200 likes, 1,945 comments, and 3,913 reshares. Erving Goffman's theory of impression management provides conceptual frameworks to understand how people adjust their self-presentation/performance of self in regard to social norms. Unlike some evidence from the few studies on LGBTQ identity on social media that suggests LGBTQ+ youth prefer to be "selectively visible" online, or in other words be "out" on their own terms and generally have their Queer identities be more visible to their LGTQ+ peers than cisgender and heterosexual individuals (Carrasco & Kerne, 2018), many Queer youth creators making mental-health content, like this particular user, do not attempt to limit their Tik Toks to other members of the LBTQ community or populations that might be more willing to accept them.

A similar audio trend exists to the "оригинальный звук - wetxz" audio. Like "The Joke is on You" audio trend, videos under this sound are two-part videos in which the creator is in the frame the entire time. There are 79,500 videos on TikTok using this sound.The first half of the videos contain a text overlay that details "Getting the ___ gene from my (mom/ dad/ other family member)" that then transitions to "Getting the ____ gene from my (other parent/ family member)". Typically, the first statement is positive or at least inoffensive, and the second is negative or jarring.

Another one of the top videos under the combined hashtags of #lgbtq and #mentalhealth is a video that fits this trend. The post is of a 13-year-old, white-presenting bisexual person with short brown hair, circular glasses, a black tank top, a chunky necklace with wooden beads, and silver dangly earrings with a cross charm. They showed their face with the text overlay "Getting the big lip gene from my dad" which then disappeared and turned into "getting every mental illness known to humankind from my mom" with upbeat music playing in the background. Hashtags include #fyp #lgbt #lgbtq #mentalhealth #mentalhealthmatters #mentalhealthawareness #mentalyill and the post received 992,900 views, 122,100 likes, and 334 shares. This creator disabled the comments on that video, presumably as a result of a conflict or controversy that erupted, perhaps from a case of what researcher dana boyd refers to as "context collapse" which occurs when when a social media platform, or in this case the elusive algorithm, "flattens multiple audiences into one." According to boyd, context collapses can be embarrassing and damaging, because they expose a performance, which is acceptable to some audience(s), to other audience(s) that find it unacceptable. (boyd, 2020)

An even more popular audio trend is to the sound of "Che La Luna - Louis Prima with Sam Butera & The Witnesses", which has 1,100,000 videos. The trend centers on the popular Italian hand gesture "Che vuoi", which roughly translates to "what?". The hand motion is also sometimes referred to as "pinched fingers" or a "finger purse". These videos feature a "Che voui" hand in the center of the frame, bouncing to the tune of the audio Examples of unrelated content fitting the trend include "things at my women's ONLY gym that just make sense"... gold sinks, tampons, pink showers, pink clips, pink walls and weights, lighting and mirrors, kids room…and most importantly, no men" and "things in my RICH best friends house that just make sense" and "things that *sparkly emoji* just make sense with a wobbly cat."

One Queer youth content creator, Indigo, adapted this trend to capture features of their "gay and mentally ill hall." The first shot is of the creator's hand in the "che vuoi" shape moving

down a hallway. They have on a purple and pink friendship bracelet and their fingernails are painted black. The text annotation in the first shot/ the cover of the video says "Things in our gay and mentally ill hall that *sparkly emoji* just make sense *sparkly emoji*." Then, the creators hand bounces up and down moving through the hall and into various rooms, showcasing various objects, each with a text overlay, in the following order: "a gay flag", "an upside down exit sign", "alligators [stickers] on the ceiling", "a leftover happy birthday sign", "whatever the fuck this is" (a sequence of paper circles forming a caterpillar on the wall, is my best guess), "a box of fidgets", "a box of hair dye supplies that just lives on the counter", refrigerator *sparkly emoji* art *sparkly emoji* (assorted crayon drawings), "gay letter board" (a rainbow board that reads "Bing Bong, Fuck Ya Life, 867-5309, he yeeith and he yoinkith"), "Audrey II" (a plastic venus fly trap toy), and "the emotional support cat" (a grey and white cat bobbing its head along to the music) .

The video is captioned with "His name is Applebees "the bees" #gay #queer #mentallyill #mentallyunstable #college #sound #gayandproud #gayandmentallyill" and has 10,400 likes, 90 comments, and 46 shares. Compared to other creators making content in line with viral trends, Indigo's chosen hashtags indicate an intention for selective visibility, wherein only Queer people, college students, and those who label themselves as mentally unstable or mentally ill have access to it. The comments on the video all appear to be from other Queer young people wanting to live there too and tagging their friends. It seems this video has only reached its intended audience.

Aside from the rainbow flag which is a well-known symbol of gay pride, understanding how many of these features "just make sense" for a "mentally ill and gay" dorm hall requires an understanding of both Gen-Z and Queer vernacular, that at this point I've internalized and can not necessarily locate the source of my understanding of. There is a new "language, gesture, and symbolic social sign" (Butler 1988) that comprise what it means to be "Queer" in each

generation and Tik Tok is an important medium through which these characteristics become instantiated in the culture. Some of the main defining features of Queerness I've observed from my engagement with this community include body modification (piercings, colored hair, tattoos) and sarcasm. Collapsing the two experiences of mental illness and queerness into one on behalf of a trend proliferates the notion that queer and mentally ill are inevitably enmeshed, ultimately furthering a discourse of LGBTQ+ at risk-ness.

Community-specific trends:

In contrast to users who queer (used as a verb here) viral audio trends, many of the posts I cataloged used original audio, and some used audio specific to QueerTok. In Chris's video, discussed under the theme of "Queer Identity" in Chapter 4, he uses as QueerTok specific recycled audio which goes ""no mentally ill queer person has all 5: a college or university education, their natural hair color, at least one parent who isn't abusive, the ability to differentiate between platonic, romantic, and sexual attraction, and a full-time job" There are 8812 videos featured under the sound, with Chris's video appearing as the 3rd in the list for me. The audio is simply "original sound" by "calvyn", and the first video with the sound was posted by someone who identifies as Queer and is 24 year old. Community specific trends intend to keep QueerTok siphoned and exclusive, which is important considering the implications of Queer trauma and mental illness becoming visible to the mainstream, heterosexual audiences. This trend is perhaps the most overtly indicative of the collapse of being queer with having a mental illness, describing individuals as occupying one "mentally ill queer" subject position. Like the Queered version of the "che vuoi" trend mentioned, this trend details specific "language, gesture, and symbolic social sign" that comprise the "Queer mentally ill" identity, all of which came up to some degree in my discourse analysis of 40 videos at the intersection of MentalHealthTok and QueerTok I discussed in chapter 3.

Conclusion

Lgbtq+ youth as a demographic are undoubtedly experiencing high rates of mental health issues and rates of suicidality, again, with the most comprehensive and recent survey data from the Trevor Project finding that 45% of LGBTQ youth seriously considered attempting suicide in the past year. Their survey also reported that 73% of LGBTQ youth reported symptoms of generalized anxiety disorder in the past two weeks, including more than 3 in 4 transgender and nonbinary youth. 58% of LGBTQ youth reported symptoms of major depressive disorder in the past two weeks, including more than 2 in 3 transgender and nonbinary youth. Intersectional analysis reveals LGBTQ+ youth of color are at even higher risk of suicdality and mental health problems. While 12% of white LGBTQ youth attempted suicide in the past year, the percentages for youth of color are the following: 21% of Native/Indigenous youth, 20% of Middle Eastern/Northern African youth, 19% of Black youth, 17% of Multiracial youth, 16%of Latinx youth and 12% of Asian American/Pacific Islander youth. (The Trevor Project 2022)

Many LGBTQ+ youth are turning to TikTok to describe their experiences with mental health and to be in a community with other LGBTQ+ youth with shared experiences, making it an especially relevant field site to engage with. In the context of statistically supported declarations of LGBTQ+ mental health as a public health crisis, I set out to add nuance to the discussion through a digital ethnography of youth's content at the intersection of QueerTok and MentalHealthTok. I engaged with the questions: How do LGBTQ+ youth-presenting Tik Tok creators depict mental health/illness and their identities on the app? How might LGBTQ+ youth subvert or comply with discourses of "vulnerability" and "at riskness" through their engagement with TikTok?

In Chapter 3, I detail the ways in which the TikTok platform and algorithm itself act as a "socio-technical system" (Seaver 2017) that generates discourse and constructs the

mostly-homogenous community of youth at the intersection of QueerTok and MentalHealthTok

that I engaged with. In Chapter 4, I describe various themes apparent in the 40 TIkToks I

analyzed, none of which are mutually exclusive, including family, identity un/certainty,

homophobia and transphobia, hospitalization and behavioral health care, disclosure of

diagnosis and/or active struggle, and inspiration/advice. Finally, in Chapter 5, I detail the

strategies LGBTQ+ youth use to build community on the app, which includes queering

mainstream audiovisual trends or participating in QueerTok-specific trends.

I conclude that at the cross-section of QueerTok and MentalHealthTok, Queer youth are

often mirroring dominant discourse and instantiating the pathologization of their identity through

a collapse of "mentally ill" and "Queer" social identities, while on the other hand, some youth are

giving attention to various social and cultural factors at play in their mental health experiences

that go beyond a reducing Queer identity itself to a risk factor. In addition to the proliferation of

various kinds of discourses and representations of the relationship between Queerness and

mental health within the content itself, LGBTQ+ youth appear to use the platform to support

each other, finding Queer kinship in the comments often in lieu of support from their own

biological/ nuclear families or people around them in the "physical" world.

By putting quantitative statistics in the context of Queer youth's perceptions of their own

experiences and acknowledging the various sociocultural forces underlying disproportionate

rates of mental health concerns for the population, I ascribe youth with intellectual authority and

problematize the pathologization of Queer identity itself. Discourse suggesting LGBTQ+ youth

are more vulnerable to mental health issues can easily be weaponized by those seeking to

eradicate Queer and trans existence, an especially pressing concern given the recent rise in

anti-transgender legislation across the United States. My work contributes to a growing body of

ethnographic research on Tik Tok and is one of the first to highlight content produced and

consumed on TikTok by Queer youth specifically. Future research should continue to uplift

Queer youth's own perspectives of their experiences with mental health/ illness as much as

possible, and highlight aspects of Queer youth experience beyond suffering and vulnerability. I hope to continue this work throughout my post-graduate career, incorporating semi-structured interviews directly with content creators to enable more thick description and to understand more fully both creators' and users' motivations and perceptions. I would also like to conduct a more thorough analysis of the comments sections of the videos because many more users are commenting as a form of engagement with the community than are posting videos as a form of engagement.

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