When the Prescription for Teens is More Social Media, Not Less

Nate Miller, 17, says social media helped him recover from anxiety and depression. He gets a confidence boost from the supportive comments from his followers on Instagram.

By Andrea Petersen
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Psychologists have a new directive for anxious teens: Post selfies on Instagram and Snapchat.

Most teens, it can seem to grown-ups, need to be pulled away from social media. Teens with anxiety disorders, however, may need to be pushed toward it. Social media and texting can be a minefield for any teen, but it is particularly daunting for those who struggle with anxiety: They might worry excessively about posting the
“right” picture or comment, count the number of likes on their posts, or negatively compare their Saturday night at home with their peers’ festive party pictures.

Some anxious children may avoid social media altogether. While this might sound great to concerned parents eager to get their children off their smartphones, teens who dodge digital communication may lose opportunities to make important social connections.

“You miss out on conversations, on invitations or knowing what’s going on on the weekend,” says Lauren Hoffman, a clinical psychologist at the Columbia University Clinic for Anxiety and Related Disorders. “This is how teenagers are communicating.”

Anxiety disorders are remarkably common among teens in the U.S.: Nearly a third of them will have an anxiety disorder by age 18, according to a study published in 2010 in the Journal of the American Academy of Child & Adolescent Psychiatry—and girls are more at risk. So, increasingly, programs that treat teens for anxiety and depression are addressing social media and other types of digital communication. Psychologists are having teens practice texting, posting selfies to Instagram and Snapchat and “liking” and commenting on the posts of their friends. The techniques are usually part of cognitive behavioral therapy, a type of talk therapy that focuses on changing thoughts that fuel anxiety and exposing yourself to the situations you’re afraid of. CBT is the most evidence-based nondrug treatment for anxiety disorders.

Nate at home in Chevy Chase, Maryland with his mother Jessica Miller, who says he’s doing well after treatment. PHOTO: MATT ROTH FOR THE WALL STREET JOURNAL
During a week-long boot camp for teens with social anxiety at the Child Mind Institute in New York over the summer, psychologist Amanda Mintzer worked with patients on texting: Anxious children can find it difficult to initiate texts or speak up in group texts. “They are typically falling into thinking traps, or worst-case scenarios, ‘they are going to think I’m weird or this is going to sound really pushy,’ ” says Dr. Mintzer. “We’ll divide the children into different rooms and have them text each other and practice having a conversation,” she says. Eventually she’ll have them text their real-life friends. Dr. Mintzer also created a private Instagram group for the program and required patients to post selfies and leave comments on others’ posts.

Xavier Martinez, a 17-year-old high school junior in New York City who attended the boot camp, said his anxiety was preventing him from meeting up with friends. He would often make plans and then cancel them. He also feared ordering for himself at restaurants. He avoided posting on the Instagram page he’d had since middle school—even though he really wanted to. “I just wished I was able to post the things I like and me and my family. I just couldn’t,” Xavier says. He worried “how I looked, what face I was making and how I didn’t know how to take a picture correctly.”

As part of his treatment for social anxiety, Xavier Martinez, 17, had to post selfies to an Instagram group. With practice, posting became easier. PHOTO: CYNTHIA MARTINEZ

During the boot camp, posting selfies on the group’s Instagram page was difficult for Xavier at first. But he said it gradually became easier with practice. He posted
photos with his dog, a Bichon Frise named Whitney. Counselors and group members commented. “They would mostly say ‘nice work’ or ‘good to see you having fun,’ ” Xavier says. “It made me feel pretty good.” Xavier also practiced ordering food at restaurants and making—and keeping—plans with friends.

Since the camp, Xavier says he still struggles with anxiety, but he’s able to order for himself and is hanging out with friends more. He’s also posting on his own Instagram page, including a photo of himself at Comic Con earlier this month. “It’s a fun way to communicate with your friends,” he says.

Research on the impact of social media on teen mental health is inconclusive. Some research has found a link between social-media use and anxiety and depression. But it is difficult to discern if social media is causing mental health problems or whether depressed and anxious children are turning to social media for solace. Other studies have found no link between social media and an increased risk of anxiety and depression. Some researchers believe that it depends on what the person is using social media for: Connecting with like-minded people could be good for mental health, particularly for teens who may have a hard time doing so in real life. But evaluating your social standing and comparing yourself to others may be detrimental, says Laurence Steinberg, a professor of psychology at Temple University in Philadelphia. “A lot of it depends on what’s in your head before you actually open the app,” he says.

Some 70% of teens say they use social media multiple times a day, up from 34% in 2012, according to a 2018 survey of more than 1,100 13- to 17-year-olds from Common Sense Media. (Sixteen percent say they use it “almost constantly.”) The percentage of children who prefer to communicate with their friends in person has slid markedly during that time, too, from 49% in 2012 to 32% in 2018. Now more children, 35%, prefer texting their friends over seeing them in real life.

Nate Miller, 17, believes social media helped him recover from the anxiety disorder he has long struggled with and the depression he was diagnosed with two years ago. (He also regularly sees a therapist.) Nate, who lives in Chevy Chase, Md., turned to
Instagram and Snapchat to post selfies that highlight his love of fashion and rap music. As his follower count climbed to nearly 17,000 on Instagram, the “ur so cute” messages and heart emojis from strangers boosted his confidence. “There are people on Instagram that unconditionally support me. I love that,” he says. While he does get the occasional nasty message, he shakes those off with a policy of “block or ignore always.”

He’s more careful with TikTok, the app where users share short videos. While he likes to post his own, checking out the videos the app highlights “can make you doubt your own self worth,” he says. “Very attractive people like models are always getting famous on TikTok.”

Therapists spend a lot of time helping teens challenge their negative expectations around social media. Anxious teens think, “People are going to make fun of me. Friends will say, why are you posting that?” says Anne Marie Albano, a professor of medical psychology in psychiatry at Columbia University Irving Medical Center.
She’ll help teens challenge those thoughts, asking them what evidence they have and how likely they really think something terrible will happen. Then they’ll test the thoughts by posting. “Generally what happens is their negative belief is disconfirmed.” And if teens do get negative feedback, she teaches them skills to handle it, like ignoring it or blocking the person. (Cyberbullying, of course, is real. And no child should be subjected to that.) Sometimes Dr. Albano will open up the Twitter feeds of people she follows, to show children how common it is for people to get a range of responses—positive and negative—and to see how the negative ones are generally ignored.

Some anxious young people with perfectionist tendencies spend far too much time on social media, editing comments, adding filters to photos and obsessively tweaking posts to make them just right. Shane Owens, assistant director of campus mental health services at Farmingdale State College in New York, has these patients deliberately misspell words or “post something that is not perfect in their mind,” he says. Dr. Hoffman will give these teens a two-minute time limit to take a photo, edit it and post it.

Sometimes the most difficult response to deal with is no response at all. No likes. No comments. Or the dread of being left “on read,” when someone has clearly read your text, but not answered it. Anxious children may spiral into thinking, “I’ll never have any friends,” when that happens, says Columbia’s Dr. Hoffman. So she coaches children to see that there could be other reasons why someone hasn’t responded, “Their phone died. They’re busy. They’ll get back to you later,” she says. And, if the nonresponse continues, she’ll help children move onto other potential friends.

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