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A Linguistic Investigation of Mental Health Discourse on Instagram: A Transitivity Approach

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ABSTRACT

Online discourse has contributed to the widespread dissemination of mental health awareness (MHA) worldwide. These mental health advocacies are mediated using discourse, also known as language in use. However, studies on online MHA, especially from the perspective of applied linguistics in Nigeria, appear to be few. Therefore, this study examined MHA discourse in two purposively selected Instagram platforms: Sanemind and the NEEM Sanctuary. The study's objective is to identify the discursive contents in the selected platforms and the lexical resources in the selected MHA texts using a mixed method of data analysis. The data were analysed using the transitivity strand of the systemic functional analysis. The data analysis and discussion of findings identified three main themes of diagnosis, treatment, and recovery communicated through the transitivity processes: material, mental, verbal, relational, behavioural, and existential processes. This study concludes that the material process of 'doing' and 'happening' are the most used verbs for communicating MHA, followed by the verbal process of 'saying' and the relational process of 'being', which indicates that mental health concerns are more prone to what people do, say and their relationship with self and others. The study recommends that online content creators must ensure the lexical resources employed in mental health awareness communications are accurate, concise, and clear to avoid misrepresentation and misunderstanding of their intended messages. Thus, they may require the services of language and linguistics experts to review their online content.

Keywords: Discourse; Mental Health Awareness Discourse; Online Discourse; Instagram; Transitivity

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1. Introduction

In applied linguistics, discourse refers to the patterns of speech and how language, dialects, and acceptable statements are used in a specific community [1]. In medicine, discourse is critical. Medical discourse (MD) is a type of discourse in and about healing, curing, or therapy; expressions of suffering; and relevant language ideologies in all language instances, written and spoken, face-to-face and mass-mediated. Mental Health Awareness Discourse (MHAD) is a component of MD, and MHAD focuses on discourses about people's and society's overall well-being [2]. Mental Health is part of general human health: spiritual, physical, financial, and social.

Researchers studying mental health awareness, both online and offline, aim to improve people's mental health by identifying uncommon mental health disorders and offering the appropriate therapy, treatment, or prevention. Despite the lack of research on the linguistic aspects of MHD, linguists are mainly interested in how language is used throughout the diagnosis, treatment, and recovery phases of the illness. The spread of online communities provides convenient access to a wide range of trustworthy resources and tools, including blogs, forums, and social media platforms like Facebook, Instagram, and X; formerly known as Twitter [3]. Through these platforms, people establish discussions, take part in dialogues, share personal stories, and create awareness of the diverse MH concerns [4–7].

Within mental health, "the accessible nature of the internet and the proliferation of social media and peer resources have allowed users to find and share experiential and anecdotal knowledge surrounding health and well-being" [8]. It makes it easy to find information about mental health, and mental health organisations have websites and Internet platforms that offer a variety of online resources and pertinent information about health-related issues. Online mental health assistance is also readily available for those in need. How health information is presented to the public online directly impacts how people behave and approach things [8–10].

However, in Nigeria, research has revealed a lack of mental health awareness, which leads to misinformation, stigmatisation, aggravation, and a lack of treatment for mental health issues. For example, Arinze-Umobi and Chi-weta-Oduah [11] noted that the mental health concept "has to an alarming degree been neglected, misconstrued, misinterpreted, and misrepresented by many" (p. 935). The problems attributed to the issue include financial factors, cultural attitudes, beliefs, neglect, ignorance of the notion of mental health, fear of stigmatisation, and poor portrayals in the mass media (films). Similarly, Mbamalu [12] stated that Nigeria has mental health issues, noting that one out of every four people has a mental illness, and treatment facilities are scarce. The Africa Polling Institute (API) and EpiAFRIC 2019 and 2020 mental health survey in Nigeria revealed a low level of mental health awareness in Nigeria [11,13].

Learning about the most prevalent categories of mental health disorders, like depression, post-traumatic stress disorder (PTSD), postpartum mental disorders, anxiety disorders, schizophrenia, and other psychosis, is one of the first steps toward achieving good mental health [14,15]. Thus, language is the medium by which mental health awareness practitioners can communicate the necessities for people's mental health across the diverse communities in Nigeria, both offline and online [16,17]. The study seeks to fill the information gap in the research literature from the language and linguistics perspective by investigating the dissemination of mental health awareness discourses in Nigeria on two selected Instagram platforms: Sanemind and the NEEM Sanctuary. The study addresses two questions:

i.   What are the discursive contents on the selected Instagram platforms?

ii.   What are the dominant lexical resources in the selected MHA text?

2. Materials and Methods

2.1. Research Design

The research design for the study is descriptive-qualitative for a comprehensive discussion of the data.

2.2. Source of Data

The data for this study were obtained from two purposively selected Instagram platforms: Sanemind and the NEEM Sanctuary. Google and Instagram searches for Mental Health in Nigeria, Mental Health Awareness in Ni-

geria, and Mental Health Awareness on social media were used to identify the two most effective Instagram platforms for data collection.

2.3. Method of Data Collection

The Instagram InSaver downloader and direct screenshots of posts were used to collect sample data from the two platforms selected.

2.4. Method of Data Analysis

Data analysis was conducted per the research objectives, and a two-step analysis was employed. The first step examined the discursive contents in the two selected platforms, and the second studied the transitivity analysis of sample data to identify the lexical resources used to create mental health awareness in the platforms. The data samples from each selected Instagram platform are discussed separately in different sections.

3. Results

3.1. Discursive Content in the Selected Instagram Pages

The discursive contents in the Sanemind and the NEEM Sanctuary [18,19] platforms focus on the discourse of diagnosis, treatment and therapy, and prevention and recovery, which are further categorised into ten sub-themes. The discourse of diagnosis covers the themes of introducing mental health, mental health issues, consequences, and parenting and mental health. Diagnosis addresses the meaning of mental health, identifying mental health issues, and identifying the consequences of delayed therapy or treatment of mental health issues, while parenting and

mental health specify the causes of mental health disorders and how parenting influences people's mental health from childhood. Treatment and therapy outline what to do after being diagnosed with a mental health condition, which includes seeking help, the journey to healing and daily motivations. The discourse of prevention and recovery encompasses language use and MH, prevention and self-care, and care for others. Prevention and recovery specify what people should and should not say and how self-care and caring for others prevent and aid recovery from mental health issues. These themes have been discussed in the works of mental health awareness scholars like [20] on mental health diagnosis, Bredström [21] and Bible et al. [22] on self-care as a therapy, prevention and recovery strategy in mental health discourse, as well as, caring for others, prioritise language choices in describing mental health conditions and the sufferers, thus reducing stigmatisation [23–25].

3.2. Lexical Resources in the Selected MHA Texts

Transitivity

This study adopts the transitivity model of Halliday's ideational metafunction of systemic functional linguistics for linguistic data analysis [26]. The transitivity analysis indicates how language use construes people's varied experiences of their environment and choices. These experiences are explained through verb processes: doing or happening, sensing, saying, being, behaving and existing. Transitivity is a complex linguistic concept deployed to account for meaning operations at the clausal level. Transitivity is a grammatical notion that deals with various process types contained in language structures and relates to particular syntactic formations at the clausal level of language. As seen in **Table 1**, the verbal processes, also known as transitivity processes, are divided into three components.

Table 1. Summary of Process Types and Participants in Transitivity.

Process Types	Process	Participants
Material	'doing, happening'	Actor, Goal, Target
Mental	'sensing'	Sensor, phenomenon
Relational	'being'	Carrier, Attribute, Identifier, Identified
Verbal	'saying'	Sayer, Receiver, Verbiage
Behavioural	'behaving'	Behaver
Existential	'existing'	Existent

Adapted from Halliday & Matthiessen (2014) [26].

In this study, the transitivity framework aids in the understanding of how language interprets the perceptions of mental health. It shows how linguistic choices represent various ideologies surrounding MHA and offers a structure for decoding how linguistic resources relate to meaning-making [27,28], in MHA advocacy. Highlighting how the different themes mentioned in Section 3.1 above are communicated in the selected Instagram platforms. The transitivity processes used at each stage, from diagnosis to recovery, have implications in mental awareness discourse. Price [29,30] argued that language mediates every aspect of MHA, identifying people's perception of mental health and shaping people's attitudes toward mental health discourses. This is evidenced in dictating language choices and actions, which include encouraging people to speak out about their mental health concerns, seek help, and care for themselves and others, thus reducing stigma and enhancing public engagement in mental health awareness campaigns [29–31].

3.2.1. Transitivity Process in Conveying Themes

Table 2 shows the frequency of each verbal process on pages based on the text retrieved from the two selected Instagram platforms. The table presents 227 instances of the six verbal processes, and the NEEM Sanctuary platform has the highest transitivity process (127 occurrences, 56%). This implies that more transitivity mechanisms were used in the NEEM page to convey mental health awareness discourse on Instagram.

Table 2. Frequency and Percentage of Occurrence of the Process Types Based on Sample Data from the Instagram Pages.

Instagram Pages	Process Types	Frequency	Percentage over 100%
Sanemind	Material	37	16.2%
	Mental	15	6.6%
	Verbal	19	8.3%
	Behavioural	6	2.6%
	Relational	22	9.6%
	Existential	1	0.4%
	Total	**100**	**44%**
NEEM	Material	51	22.4%
	Mental	22	9.6%
	Verbal	28	12.3%
	Behavioural	1	0.4%
	Relational	24	10.5%
	Existential	1	0.4%
	Total	**127**	**56%**
Overall Total		**227**	**100%**

Table 3 illustrates the overall usage of the six processes on both pages, and it shows that the material process is the predominant transitivity process used in conveying mental health awareness on both Instagram pages, accounting for 88 occurrences or 39% of the total usage. Thus, aligning with the findings of many scholars in the Transitivity school, including [32–34]. The dominance of the material process indicates that although mental health issues are considered mental, the processes that cause them are mostly associated with the verbs "doing" and "happening", and they include everything from diagnosis and treatment/therapy procedures to healing based on the physical activities or events carried out by either mentally challenged individuals or those around them. Similarly, the material process of doing and happening is the most effective at raising mental health awareness. The verbal process

is the second most applied process type, accounting for 47 occurrences or 21% of all verbal processes. Indicating that how language is used, that is, what people say to themselves and others, how, when, and where it is said, is critical to people's mental health. The third and fourth process- es are the relational and mental processes, which focus on people's relationship with themselves and others and what they sense or perceive cognitively as triggers to their mental health concerns.

Table 3. Frequency of the Overall Process Types.

Process Types	Frequency	Percentage over 100%
Material	88	39%
Verbal	47	21%
Relational	46	20%
Mental	37	16%
Behavioural	7	3%
Existential	2	1%
Total	227	100%

4. Discussion

4.1. Communicating Linguistic Style/Signals of Mental Health in Sanemind

Table 4 indicates that the material process is the dominant process, with 37 occurrences, employed to communicate mental health awareness on the Sanemind Instagram platform. The second dominant process is the verbal process, with 19 occurrences and then the mental process, with 15 occurrences. Also, the material process on the theme, seeking help, is predominantly featured in the sample texts, and the overall theme with the most occurrences of all the six transitivity processes is language use and MH, with the verbal process occurring more than others. The sample texts in **Table 5** illustrate the significance of the transitivity process in conveying mental health awareness on the Sanemind page.

Table 4. Frequency of Process Types on Sample Texts on Sanemind.

Process Types → Themes ↓	Material	Mental	Verbal	Behavioural	Relational	Existential	Total Frequency	Percentage
Introducing MH	2			1	2		5	5%
MH Issues	4			1	3		8	8%
Consequences	6	1			1		8	8%
Parenting & MH	4		1		1		6	6%
Seeking Help	8	4	1		1		14	14%
Journey to Healing	5	3	4	2	1		15	15%
Daily Motivations	1	2	3		2		8	8%
Language Use & MH	2	5	10	1	5	1	24	24%
Prevention & Self-care	1			1	3		5	5%
Care for Others	4				3		7	7%
Total	37	15	19	6	22	1	100	100%

Table 5. Sample Texts Extracted from the Sanemind Platform.

Text No.	Clause	Process	Type of Process	Text Source
SM1				Posted: 12/10/20, Extracted: 13/8/22
a.	Mental disorders among children affect how they learn, behave, or handle their emotions,	affects/learn/ behave	material/ behaviour	
b.	which cause distress and problems getting through the day.	cause/getting through	material	
SM2	Anxiety, Worries, and Fear: A Normal Part of Childhood	(is) be	behavioural/ relational	Posted: 5/5/21, Extracted: 13/8/22
SM3				Posted: 16/10/20, Extracted: 13/8/22
a.	Childhood traumas might go unnoticed,	go	material	
b.	but have a huge negative effect on life as an adult.	have	relational	
SM4	Are you and your spouse parenting on the same page?	are	relational	Posted: 30/8/20, Extracted: 13/8/22
SM5	Children too can have mental health problems.	have	relational	Posted: 28/10/19, Extracted: 13/8/22
a.	Children depend on adults to get help.	depend/ to get help	mental/material	
b.	But you can only seek help if you know the signs.	seek help/know	material/ mental	
c.	Do you know the signs?	know	mental	
d.	Would you help your child get help?	help	material	
SM6	Family bonding helps to boost a child's self-esteem	helps to boost	mental/relational	Posted: 26/7/21, Extracted: 13/8/22
SM7				Posted: 25/5/20, Extracted: 13/8/22
a.	Use this time together		relational	
b.	to reinforce positive thoughts in your child	reinforce	verbal/mental	
c.	I am smart, creative, brave, and strong	(saying)	verbal	
SM8	Your correction does not have to be abusive	Have to be/abusive	relational/verbal	Posted: 15/6/20, Extracted: 13/8/22
SM9				Posted: 16/11/21, Extracted: 13/8/22
a.	YOUR LIFE STRESSORS MAYBE THE REASON YOU ARE ALWAYS YELLING.	are/yelling	relational/ behavioural	
b.	Take care of yourself	take care	material	
SM10				Posted: 26/11/21, Extracted: 13/8/22
a.	Every experience a child goes through	goes	material	
b.	is built into their brain architecture.	built	material	
c.	Intentionally create positive experiences TODAY	create	material	

4.1.1. Diagnosis in Mental Health Awareness (Sanemind)

The focus of mental health awareness on Sanemind is mainly on children's mental health awareness discourse, illustrating that children also have mental health concerns, which aligns with the advocacy by UNICEF in *The State of the World's Children 2021: On My Mind--Promoting, Protecting and Caring for Children's Mental Health* [35]. The sample text, SM 1, is an explanatory text on the effect of mental health disorders on children; that is, *Mental*

disorders among children affects how they learn, behave, or handle their emotions, which cause distress and problems getting through the day. The text is mainly a mental clause consisting of other processes like material processes, 'affects', 'cause', and 'getting', mental process, 'learn' and 'handle', and behavioural process, 'behave'. The participants include 'mental health', 'children', 'they', and 'their emotions'. Likewise, SM 2 highlights the relation between childhood and mental health conditions, anxiety, worries and fear, which depict behavioural patterns with the Behaver being 'childhood'. SM 2 indicates an identifying relational process whereby the statement, if reversed, would read A Normal Part of Childhood is Anxiety, Worries, and Fear. In this context, the meaning of the clause is unchanged; 'childhood' could be considered the identified, the verb form (be) 'is' as the process, and 'anxiety, worries, and fear' are the identifiers. Furthermore, the circumstance answering the question 'What kind of childhood?' is the circumstance of manner, a normal part.

A depiction of the theme of the consequences of mental health issues in Sanemind, especially when the initial symptoms are not known, controlled, and treated, is illustrated in SM 3. The clause appears to stimulate people's attention towards the underlying causes of mental health issues, which first build up mentally before the physical manifestation, even to adulthood [36]. For instance, childhood traumas mentioned might go unnoticed but *have a huge negative effect on life as an adult*. The informative statement could be sub-categorised into two clauses connected by 'but'; that is, *Childhood traumas might go unnoticed and have a huge negative effect on life as an adult*. The first part represents a material clause signified by the verb 'go', indicating a motion or a movement; the actor is childhood trauma, and the goal is 'unnoticed'. The clause is also a statement of probability represented by the modal 'might', indicating the possibility of childhood trauma being ignored if children are not given proper attention. The second part of the text is a relational supporting clause and consists of the verb 'have', the Carrier, 'huge negative effect on life' (of childhood trauma) as the Attribute 'adult'.

Similarly, SM 4 illustrates *Parenting/family and mental health*. The sample text is relational, signified by 'are'. It communicates the threesome relationship in parenting involving spouses and their children. The text also carries the yes/no question type. The participants are 'you' and 'your spouse' as Carriers and 'parenting' as the Attribute; 'on the same page' indicates a circumstance of the manner of involvement by the parent.

4.1.2. Communicating Treatment/Therapy in Mental Health Awareness (Sanemind)

The first step towards treatment and therapy involves a mentally challenged person reaching out for help. The extracted texts from the Sanemind platform on the theme of 'seeking help' infer how parents and guardians look for solutions for their children or wards' mental health issues. For instance, in the sample text, SM 5, the clause, *Children too can have mental health problems* is aimed at informing the audience that children are not immune from mental health issues. The declarative clause functions as a relational process, whereby the possessive 'have' signified an attributive relational process, and 'mental health problems' are attributed to the Carrier 'children'. The emphasis is on 'too', specifying that children also suffer from mental health issues. To further bolster the statement, the other clauses in SM 5 communicate signs and the need to know the mental health issues associated with Children, which is the prerequisite for seeking help. The transitivity processes used to create the awareness are mainly relational attributive verbs (depend on), mental verbs (know), and material verbs (to get and seek help). Also, the supporting statements are both interrogatives: *Do you know the signs? Would you help your child get help?* Also, suggesting persuasion: *Would you help your child get help?* Ultimately, the overall meaning derived from the text centres on the need to discover and acknowledge the mental health needs and conditions of children, achieved by seeking help from professionals on how to help the children.

Treatment and therapy are processes leading to healing, and the healing journey of a child with mental health issues is dependent on their parents or guardians. SM 6 broadly links a child's mental health healing process to bonding time with the parent: *Family bonding helps boost a child's self-esteem*. The statement suggests material and relational processes involving an attributive relationship between *family bonding* and *a child's self-esteem*. However, the statement functions more explicitly as a material clause with the actor 'family bonding', material process 'helps to boost' and goal 'a child's self-esteem'. This ma-

terial clause encourages family bonding, which cuts across different physical actions that can impact a child mentally and physically.

Moreover, the bonding time mentioned in SM 6 is highlighted in SM 7 as an excellent time to motivate a child to aid their mental well-being. The transitivity variables identified are majorly verbal processes because the motivational clauses involve the process of 'saying' and the Sayer the child. The sample texts portray a relational process between a parent and a child: *Use this time together*, the process of being. Also, verbal processes, such as 'to reinforce' using words, the circumstance of manner indicating what kind of words, positive words which could trigger 'positive thoughts', and the identifying possessive relation 'your child'. Then, *I am smart, creative, brave, and strong*, signifies a child's positive words for self-motivation. 'I am' signifies the relationship with self and a positive self-description. The Carrier 'I' and Attribute 'smart, creative, brave, and strong' indicate a relational clause expressed through the process of saying. Thus, positive expressions and actions contribute to the mental well-being of Children.

4.1.3. Prevention/Recovery in Mental Health Awareness (Sanemind)

In transitivity, the processes of happening, doing, sensing, saying, being, or having construe experiences that bring transformation or change to the participants involved in the experience [20]. For instance, the theme 'Language Use and Mental Health' emphasises what to say, how to say it, and what not to say to people or someone with mental health challenges. The sample text SM 8, *Your correction does not have to be abusive*, is a declarative statement discouraging harsh ways of correcting children. The statement also functions as a relational attributive clause consisting of the Carrier 'your correction', process 'does not have to be', and Attribute 'abusive'. The issue of using abusive words on children is prevalent in the Nigerian context as further detailed by [37,38] and is discouraged in SM 8.

Furthermore, Prevention/Self-care involves saying, in this case, yelling, also mentioned in the works of [36,37]. The sample text in SM 9 highlights parental self-care, *your life stressors maybe the reason you are always yelling.* The clause is a statement of probability 'maybe' and an

identifying relational clause, giving a possible reason why a parent is always yelling, the Identifier 'your life stressors', relational process 'are', Identified 'yelling' and the circumstance of reason 'maybe the reason' and of duration 'always'. The supporting clause, *Take care of yourself* is a suggestive imperative; however, the decision to take the suggestion lies with the person who needs to take care of self. The process is material 'take care', and the abstract participant is 'you'. Alternatively, the statement could read 'you take care of yourself' with the goal 'yourself'. Thus, SM 9 suggests that a child's mental well-being depends on the parents' psychological and physical well-being and how they care for their children.

The discourse of 'Care for Others' in Sanemind focuses on how parents care for their children's mental health. Although the focus is on children, the message generally applies to principles of caring for others in mental health awareness discourse, as explored in the previous sections. The sample text, SM 10, signifies material clauses of doing and happening; for instance, what happens to a child, *Every experience a child goes through,* the actor is 'a child', the material process 'goes through', and the goal 'every experience'. Likewise, is built into their brain architecture, referring to 'every experience', 'built' as a material process of doing, 'their' (a child) as an actor and 'brain architecture' as the circumstance of location. Also, *Intentionally create positive experiences TODAY* indicates the action required to safeguard 'every experience'. The material clause consists of an abstract actor (the parent or guardian), the material process 'create', the goal 'positive experience', a circumstance of manner 'intentionally and a circumstance of time 'today'.

4.2. Communicating Linguistic Style/Signals of Mental Health in Neem Sanctuary

In **Table 6**, the data presented shows that the most used verbal process in the NEEM platform to convey mental health awareness is the material process. It suggests that the 51 occurrences representing 40% of the total frequency involve actions of doing and happening that are predominantly employed in mental health discourse. The data further shows that the material process is used to convey parenting and mental health themes more than other themes, with 25 material process verbs representing 49%

of the overall number of times the material process is employed in the data extracted from the NEEM platforms. Regarding the theme with the highest occurrence of all the six processes, parenting and mental health have the highest frequency with 43 occurrences, highest in material, mental and verbal processes, representing 33.9% of the total frequency of the transitivity process. This implies that parenting has a significant impact on the mental health of people right from childhood, and the discourse around parenting attracts the use of more process verbs.

Table 6. Frequency of Process Types on Sample Texts on Neem Sanctuary.

Process Types → Themes ↓	Material	Mental	Verbal	Behavioural	Relational	Existential	Total Frequency	Percentage
Introducing MH	4	1	2		1		8	6.3%
MH Issues		2			2		4	3.1%
Consequences	1	1	1		2		5	3.9%
Parenting & MH	25	8	9		1		43	33.9%
Seeking Help	3	3	6		1		13	10.2%
Journey to Healing	1	4			4		9	7.1%
Daily Motivations	2	1	1		1		5	3.9%
Language Use & MH			3	1	6	1	11	8.7%
Prevention & Self-care	7				4		11	8.7%
Care for Others	8	2	6		2		18	14.2%
Total	51	22	28	1	24	1	127	100%

4.2.1. Diagnosis in Mental Health Awareness (NEEM)

Mental health awareness discourse in the NEEM Instagram platform addresses the mental health of all genders and the relevance of mental health to the health of people, as shown in the sample texts in **Table 7** (NM1 - NM10). Thus, it emphasises that mental health is as fundamental as an individual's physical health, in line with the position of [39] in the Bulletin of the World Health Organisation, that there is "no physical health without mental health" (p. 1), which is the focus of the sample text NM 1 (in **Table 7**): *You can't talk about health without talking about mental health.* The text is a verbal clause signified by the verb process 'talk' and 'talking'; the participant is the Sayer, 'you' and the Verbiage, 'mental health'. The text is informative and instructional, emphasising the need to balance the mental and physical well-being of people, especially since mental health issues are considered cognitive and cannot be easily detected or diagnosed. For instance, *Psychological trauma is an emotional response to a terrible event like an accident, rape, or natural disaster* (NM 2). The text is an attributive relational clause, signified by the Carrier 'Psychological trauma', the process 'is' and Attribute 'emotional response to a terrible event like an accident, rape, or natural disaster'. The impact of psychological trauma can only be felt by the victims based on their experience, and thus, they must learn to deal with the mental issue, which, if not addressed, could lead to other severe mental health conditions.

Table 7. Sample Texts Extracted from the NEEM Platform.

Text No.	Clause	Process	Type of Process	Text Source
NM1	You can't talk about health without talking about mental health	talk/talking	verbal	Posted: 16/11/21, Extracted: 23/2/23
NM2	Psychological trauma is an emotional response to a terrible event like an accident, rape, or natural disaster.	is	relational	Posted: 20/8/21, Extracted: 23/2/23

Table 7. *Cont.*

Text No.	Clause	Process	Type of Process	Text Source
NM3	SAY NO TO RAPE. OUR SILENCE IS THEIR LICENCE.	say is	verbal relational	Posted: 13/2/19, Extracted: 23/2/23
NM4	Child Abuse	abuse	Verbal/material	Posted: 18/6/21, Extracted: 23/2/23
NM5	Tip 4: Seek help			Posted: 5/10/20, Extracted: 23/2/23
a.	Educate yourself on mental health first aid	educate	mental	
b.	Address the things that cause you to stress	address	material	
c.	Talk and vent, and also listen to others	talk/vent/listen	verbal/verbal/mental	
d.	Share your challenges and victories	share	verbal	
e.	Reach out for help when you need it	reach out	verbal/material	
NM6	HEALING IS NOT LINEAR	is	relational	Posted: 22/2/19, Extracted: 23/2/23
NM7	Don't watch the clock. Do what it does. Keep Going	watch do/going	material	Posted: 4/6/18, Extracted: 23/2/23
NM8	Like In The Game Of Hangman, A Wrong Word Can End A Life	like word	relational verbal	Posted: 24/1/19, Extracted: 23/2/23
NM9				Posted: 5/10/20, Extracted: 23/2/23
a.	Make time for yourself	make time	material	
b.	Adopt a healthy lifestyle (eat right & stay active)	adopt/eat/stay	material	
c.	Stay connected with your loved ones	stay connected	material	
d.	Do something you enjoy every day	do something	material	
e.	Take breaks	take breaks	material	
f.	Practice relaxation exercises	practice	material	
NM10	Look out for the "always happy" ones	look out	material	Posted: 17/9/21, Extracted: 23/2/23

In NM 2, rape is mentioned as one of the causes of psychological trauma, and majorly, rape victims are not encouraged to speak out; it is that silence that is discouraged in NM 3 because the consequence of silence is more rape and more victims of psychological traumas. *Say no to rape* is an imperative, inciting people to speak against rape. The clause is a verbal clause signified by the process 'say' (by the Sayer) and Verbiage 'no to rape'. Also, the second part of the text, *Silence Is Their Licence* is a relational clause; thus, silence is identified as the licence to more rape activities, so the identified is 'silence', the process 'is' and the Identifier 'licence'. Thus, the essence of the NM 3 is to encourage victims of rape to speak out, and expose the perpetrators, so that justice can be meted out. The discourse of rape, silence, injustice and the need for victims to speak out has been emphasised by some Nigerian researchers, including [40,41].

The focal subject of mental health awareness concerning parenting and mental health in NM 4 is child abuse. Child abuse could be verbal, physical, and emotional by 'saying' abusing, teasing, manipulating, and ridiculing a child as emphasised by [37,38]. The material process of 'doing' exposing a child to early marriage, rape, and slavery, among others; is the mental process of 'sensing' not listening to the child or allowing them to express their feelings.

4.2.2. Treatment/Therapy in Mental Health Awareness (NEEM)

The theme 'Seeking Help' from the NEEMS Instagram page illustrated in the sample text, NM 5, indicates tips on help-seeking. *Tip 4: Seek help,* is followed by five clauses describing a person's experiences that will cause them to seek help. The clauses are in the form of instructions depicting mental processes 'educate' and 'listen', materi-

al processes 'address' (deal with), verbal processes 'talk', 'vent' and 'share' and 'reach out' suggesting two processes. It could mean speaking out (verbal process), stretching your hand, and reaching out for help (material process). Also, the main participants are 'you' and 'yourself', and the abstract participant instructs with conditional circumstances 'that cause you to stress' and 'when you need it' (help). Until a mental health sufferer seeks help, speaks out or reaches out to receive help, the healing process cannot take place. The healing process involves treatment or therapy, and NM 6 specifies that *Healing Is Not Linear*. The declarative statement functions as an attributive relational clause with the properties 'healing' as the Carrier, 'is' as the relational process and 'not linear' as the Attribute. The relational clause indicates that healing is a process that is not straightforward and involves different stages and experiences, which a person going through healing must embrace.

Furthermore, the healing process, as earlier discussed in the previous sections, involves a daily motivation of the sufferer to encourage anyone going through issues like low self-esteem, inferiority complex, anxiety, depression, rejection, and many other mental health-related concerns. The sample text, NM 7, *Don't watch the clock. Do what it does. The statements are both instructional and imperative.* The material clause consists of the participant 'the clock' (as 'it') and verb processes 'watch', 'do' and 'keep going'.

4.2.3. Prevention/Recovery in Mental Health Awareness (NEEM)

Prevention/recovery strategies in NEEM, like Sanemind include language use and mental health, prevention and self-care, and care for others. Language use and mental health indicate the implication of language usage on someone with a mental health challenge, as well as triggering a mental health concern in someone who may never have experienced any mental health issue [42–44]. NM 8 is a declarative statement: *Like In The Game Of Hangman, A Wrong Word Can End A Life,* functioning as an identifying relational clause, when rephrased in reverse, it will read *A Wrong Word Can End A Life, Like In The Game Of Hangman.* The Identified is 'like in the game of Hangman', the Identifier 'a wrong word can end a life', and the comparison circumstance is 'like'. The clause also depicts a verbal

process; a wrong word indicates the verb 'say'.

NM 9 exemplifies some self-care tips to prevent mental health challenges. These tips are communicated majorly through the discourse of 'doing' signifying the material process and 'having or being' indicating the relational transitivity process. Thus, it gives the impression that self-care begins with physical activities a person engages in and a relationship with self even before interaction with others and the environment. The instructional clauses illustrate material processes: 'make time', 'adopt/eat/stay', 'stay connected', 'do something', 'take breaks', and 'practice'. The required abstract participant in the process can be anyone, and the circumstances identified are the circumstance of accompaniment realised by 'with' and the circumstance of frequency 'everyday'. Self-care in mental health awareness discourse is not complete without the care for others, which is recommended and established in the previous sections. In NM 10, the instruction is *look out for the "always happy"* ones, a material clause signified by the process of doing *look out* and *always happy ones* as the participant (goal) to look out for, and in the clause, the actor is abstract.

5. Conclusions

The study investigated the discursive contents and transitivity processes in selected mental health awareness discourses from the Sanemind and the NEEM Sanctuary Instagram pages. The findings identified three major discursive contents: diagnosis, therapy/treatment and prevention/recovery communicated using the material, mental, verbal, relational, behavioural, and existential processes of the transitivity system. This study suggests that the material process of 'doing' and 'happening' are the most used verbs for communicating MHA. It examined the discourse surrounding MHA in Nigeria and informs and extends theories on online health communication, social media, and mental health, shedding insight into the complex interplay between language, culture, and mental health. Furthermore, the study's results provide significant perspectives for future research on MHA in Nigeria and similar contexts, highlighting the need for culturally sensitive and inclusive approaches to mental health communication and paving the way for further exploration of social media's influence on mental health discourse and promoting positive

change in diverse cultural settings. To ensure that the linguistic and non-linguistic modes of communicating mental health are clear and convey the intended MHA messages, the study suggests that content creators engage language and linguistic experts to review the content on their platforms. It also recommends the need for further studies of the sample texts regarding grammar and mechanics.

Author Contributions

Conceptualization, S.A.A. methodology, S.A.A.; formal analysis, S.A.A.; writing—original draft preparation, S.A.A. and L.C.; writing—review and editing, S.A.A., L.C., A.E. and O.A.K; visualization, S.A.A.; supervision, L.C. and C.U.O.; project administration, S.A.A. and O.K.; funding acquisition, S.A.A. and L.C. All authors have read and agreed to the published version of the manuscript.

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Institutional Review Board Statement

This study strictly followed the selected Instagram platforms' privacy regulations and the formal approvals granted by the platforms' owners. The Covenant Health Research Ethics Committee (CHREC) also approved the study's conduct, with ethical clearance procedure number CHREC/335/2023.

Informed Consent Statement

Not applicable.

Data Availability Statement

Data can be found in Sanemind @sanemindng https://www.instagram.com/sanemindng/ and The Sanctuary (@neemsanctuary) https://www.instagram.com/neemsanctuary/ Intagram platforms

Conflicts of Interest

The authors declare no conflicts of interest.

References

[1] Ofica, D., 2018. An overview of medical discourse studies: Cultural variation across genres and registers. Available from: https://www.academia.edu/35705944/

[2] Shaji, H.S., Hebbani, S., 2021. Acupuncturist's perspective on psychological health. International Journal of Indian Psychology. 9(4), 1084–1097. DOI: https://doi.org/10.25215/0904.104

[3] O'Connor, S., De Gagne, J. C., Lee, J. J. J., Harris, R., Malone, M., Booth, R. G. 2025. Social media in nursing and midwifery education: A 20-year bibliometric analysis. Nurse Education in Practice, 86, 104411. https://doi.org/10.1016/j.nepr.2025.104411

[4] Amodu, L., Omojola, O., Okorie, N., et al., 2019. Potentials of Internet of Things for Effective Public Relations Activities: Are Professionals Ready? Edited by Len Tiu Wright. Cogent Business & Management. 6(1), 1683951. DOI: https://doi.org/10.1080/23311975.2019.1683951

[5] Igwebuike, E.E., Chimuanya, L., 2020. Legitimating falsehood in social media: A discourse analysis of political fake

[6] news. Discourse & Communication. 15(1), 42–58. DOI: https://doi.org/10.1177/1750481320961659

[7] Chiluwa, I.E., Chimuanya, L., Ajiboye, E., 2020. Communicating religious extremism in West Africa. In Themes in Religion and Human Security in Africa. Routledge: London, UK. pp. 166–179. DOI: https://doi.org/10.4324/9781003017080-12

[8] Awopetu, I., Chiluwa, I., 2023. Resistance in visual narratives: A multimodal CDA of images of the #EndSARS Protests in Nigeria. Visual Communication Quarterly. 30(3), 155–167. DOI: https://doi.org/10.1080/15551393.2023.2232296

[9] Bussey, L.G., Sillence, E., 2019. The role of Internet resources in health decision-making: A qualitative study. Digital Health. 5. DOI: https://doi.org/10.1177/2055207619888073

[10] Vaghefi, M.S., Beheshti, N., Jain, H., 2024. Dissemination of health messages in online social network: A study of healthcare providers' content generation and dissemination on Twitter. Information & Management. 61(2), 103925. https://doi.org/10.1016/j.im.2024.103925

[11] Wu, P., Zhang, R., 2022. Exploring the effects of health information seeking on e-satisfaction in online health communities: an empirical investigation. BMC Medical Informatics and Decision Making. 22, 332.

DOI: https://doi.org/10.1186/s12911-022-02079-y

[12] Arinze-Umobi, D.S.O., Chiweta-Oduah, O., 2022. Mental Health Perceptions in Nigeria: The Role of Mass Media. Available from: https://gsarpublishers.com/wp-content/uploads/2022/12/GJAHSS2362022-Gellary-script.pdf

[13] Mbamalu, S., 2019. Nigeria has a mental health problem. Available from: https://www.aljazeera.com/economy/2019/10/2/nigeria-has-a-mental-health-problem

[14] Wada, Y.H., Rajwani, L., Anyam, E., et al. 2021. Mental health in Nigeria: A Neglected issue in Public Health. Public Health in Practice. 2, 100166. DOI: https://doi.org/10.1016/j.puhip.2021.100166

[15] Nwokolo, C., 2019. 5 Common Mental Health Problems in Nigeria. Available from: https://healthguide.ng/mental-health-problems-in-nigeria/

[16] Jidong, D.E., Tarela, J.I., Tribe, J., et al., 2022. Berom cultural beliefs and attitudes towards mental health problems in Nigeria: a mixed-methods study, Mental Health, Religion & Culture. 25(5), 504–518. DOI: https://doi.org/10.1080/13674676.2021.2019205

[17] Okunola, A., 2021. Meet activist Victor Ugo, who's changing the narrative around mental health in Nigeria. Available from: https://www.globalcitizen.org/en/content/victor-ugo-mani-mental-health-nigeria-impacter/

[18] Akinkurolere, S.O., 2022. Towards patient-centred style of communication: A cultural-pragmatic study of doctor-patient consultative encounters at general hospital, Ile-Oluji, Ondo State, Nigeria. Cogent Arts & Humanities. 9(1), 2124724.

[19] Sanemind @sanemindng. Available from: https://www.instagram.com/sanemindng/

[20] The Sanctuary (@neemsanctuary). Available from: https://www.instagram.com/neemsanctuary/

[21] Bredström, A., 2019. Culture and Context in Mental Health Diagnosing: Scrutinising the DSM-5 Revision. Journal of Medical Humanities. 40, 347–363. DOI: https://doi.org/10.1007/s10912-017-9501-1

[22] Bible, L.J., Casper, K.A., Seifert, J.L., et al., 2017. Assessment of self-care and medication adherence in individuals with mental health conditions. Journal of the American Pharmacists Association. 57(3), S203–S210.e3. DOI: https://doi.org/10.1016/j.japh.2017.02.023

[23] Riegel, B., Dunbar, S.B., Fitzsimons, D., et al., 2021. Self-care research: Where are we now? Where are we going? International Journal of Nursing Studies. 116, 103402. DOI: https://doi.org/10.1016/j.ijnurstu.2019.103402

[24] Tay, D.Z., 2019. Language in Mental Health Disorders. In: Aronoff, M. (Ed.), Oxford Bibliographies in Linguistics. DOI: https://doi.org/10.1093/obo/9780199772810-0246

[25] Mittal, S., De Choudhury, M., 2023. Moral Framing of Mental Health Discourse and Its Relationship to Stigma: A Comparison of Social Media and News. In Proceedings of the 2023 CHI Conference on Human Factors in Computing Systems (CHI '23), Hamburg, Germany, 23–28 April 2023. ACM: New York, NY, USA. 19p. DOI: https://doi.org/10.1145/3544548.3580834

[26] Zayts-Spence, O., Edmonds, D., Fortune, Z., 2023. Mental Health, Discourse and Stigma. BMC Psychology. 11, 180. DOI: https://doi.org/10.1186/s40359-023-01210-6

[27] Halliday, M.A.K., Matthiessen, C.M.I.M., 2014. Halliday's Introduction to Functional Grammar. Routledge: London, UK.

[28] Bartley, L.V., 2018. Putting transitivity to the test: A review of the Sydney and Cardiff models. Functional Linguistics. 5(1), 1–21. DOI: https://doi.org/10.1186/s40554-018-0056-x

[29] Martin, J., Quiroz, B., Wang, P., 2023. Systemic Functional Grammar. Cambridge University Press: New York, NY, USA. DOI: https://doi.org/10.1017/9781009284950

[30] Price, H., 2022. The Language of Mental Illness: Corpus Linguistics and the Construction of Mental Illness in the Press. Cambridge University Press: New York, NY, USA. DOI: https://doi.org/10.1017/9781108991278

[31] Price, H., 2023. Public engagement via consultancy: Communicating the language of Mental Illness. In: Price, H., McIntyre, D. Communicating Linguistics: Language, Community and Public Engagement, 1st ed. Routledge: New York, NY, USA. DOI: https://doi.org/10.4324/9781003096078

[32] Tanvir, F.A., Mitu, M.I. 2024. Language and Mental Health: Investigating the Relationship between Linguistic Expression and Psychological Well-being. International Journal of Health Sciences. 7(3), 57–63. DOI: https://doi.org/10.47941/ijhs.1922

[33] Sawirman, S., Ridhwani, N.H., 2020. Experiences around the Clauses: A transitivity analysis of four famous people's suicide notes. Vivid Journal of Language and Literature. 9(1), 12. DOI: https://doi.org/10.25077/vj.9.1.12-17.2020

[34] Fadilah, R., Kuswoyo, H., 2021. Transitivity Analysis of Presidential Debate Between Trump and Biden in 2020. Linguistics and Literature Journal. 2(2), 98–107. DOI: https://doi.org/10.33365/llj.v2i2.1374

[35] Anake, S.A., Chimuanya, L., Ogbulogo, C.U., 2025. A Transitivity Analysis of Mental Health Awareness Discourse on Instagram. WORD. 71(2), 75–95. https://doi.org/10.1080/00437956.2025.2499340

[36] Keeley, B., 2021. The State of the World's Children 2021: On My Mind--Promoting, Protecting and Caring for Children's Mental Health. UNICEF. Available from: https://files.eric.ed.gov/fulltext/ED615261.pdf

[37] Mulraney, M., Coghill, D., Bishop, C., et al., 2021. A systematic review of the persistence of childhood mental health problems into adulthood. Neuroscience & Biobehavioral Reviews. 129, 182–205. DOI: https://doi.org/10.1016/j.neubiorev.2021.07.030

[38] Simon, M.T., Uwaoma, N.C., Iwuala, C.C., 2024. Influence of Parental Verbal Abuse, Domiciliation, Gender and Age on Emotional Intelligence Among Secondary School Students in Owerri, Nigeria. African Journal of Social and Behavioural Sciences. 14(2). Available from: https://journals.aphriapub.com/index.php/AJSBS/article/view/2568

[39] Okide, U.J., 2022. Child Abuse in the Igbo Family: An Analysis of Osuagwuâ€Tms Nwa Ngwii Puo Eze. Nigerian Journal of African Studies (NJAS). Available from: https://www.nigerianjournalsonline.com/index.php/NJAS/article/view/2610

[40] Kolappa, K., Henderson, D.C., Kishore, S.P., 2013. No physical health without mental health: lessons unlearned? Bulletin of the World Health Organisation. 91(1), 3–3A. DOI: https://doi.org/10.2471/blt.12.115063

[41] Adewuyi, T., Sulaiman, A., 2009. Socio-legal factors that influence the perpetuation of rape in Nigeria. Procedia –

[42] Social and Behavioral Sciences. 5, 1760–1764. DOI: https://doi.org/10.1016/j.sbspro.2010.07.360

[43] Njideka, N.C., 2020. The Menace of Rape in the Present Day Nigerian Society and The Effect on Its Victims: The Way Forward. Available from: https://ssrn.com/abstract=3675618

[44] Lyons, M., Aksayli, N.D., Brewer, G., 2018. Mental distress and language use: Linguistic analysis of discussion forum posts. Computers in Human Behavior. 87, 207–211. DOI: https://doi.org/10.1016/j.chb.2018.05.035

[45] Richards, V., 2018. The importance of language in mental health care. The Lancet Psychiatry. 5(6), 460–461. DOI: https://doi.org/10.1016/s2215-0366(18)30042-7