

Self-Disclosure of Mental Health via Deepfakes: Testing the Effects of Self-Deepfakes on Affective Resistance and Intentions to Seek Mental Health Support

Keywords: Synthetic media, deepfake, self-disclosure, mental health, affective resistance

Extended Abstract

The Impact of Work

The advancement of artificial intelligence (AI)-enabled deepfake technology, which digitally manipulates a person's appearance, becomes a double-edged sword. The ability of deepfake technology to create highly realistic content has raised concerns among scholars due to the heightened risk of deception and false information (e.g., Lee and Shin, 2022; Lee et al., 2023; Pantserev, 2020), yet this same realism holds promising potential for positive applications, such as in healthcare. For example, personalized visualizations through deepfake technology can motivate users to pursue physical improvements and enhance their performance in tailored training programs (Clarke et al., 2023). These applications underscore the potential of deepfake technology as an effective tool for addressing health-related challenges, a potential that can be explained through the self-referencing effect. According to this perspective, information becomes easier to process and more persuasive when it is personally relevant, as referred to the self-referencing effect (Burnkrant and Unnava, 1989; Rogers et al., 1977).

Despite the potential of deepfake technology to be used in healthcare applications, the current scholarship calls for more nuanced research on the use of deepfake technology, as its application has been noted to evoke feelings of eeriness or discomfort rooted in uncanny valley perceptions (Weisman and Peña, 2021). These unsettling emotions can trigger affective resistance, where negative emotional reactions—such as discomfort or distrust—lead individuals to disengage from the health message (Appel, 2022), which can diminish the effectiveness of health interventions. Against this backdrop, this study investigates the emotional barriers linked to uncanny valley effects in health messaging by various messengers, including deepfake versions of oneself (herein referred to as self-deepfakes), deepfakes of well-known celebrities, and virtual agents, for self-disclosure in mental health messages, frequently referred to as the “talking cure” (Corcoran, 2000). In the context of mental health, self-disclosure is essential for fostering self-efficacy and enhancing coping strategies, including promoting intentions to seek mental health support (Rüsch et al., 2011; Wu et al., 2022).

This study addresses the boundaries where individuals may emotionally resist mental health messages that incorporate self-disclosure, potentially limiting their effectiveness in fostering intentions to seek mental health support as a coping strategy. In light of existing research demonstrating the positive impact of celebrity and virtual agent endorsements in raising public awareness of mental health through online help-seeking interventions (Gronholm and Thornicroft, 2022; Kim, 2024), this lab-based experiment provides evidence on the potential effects of using deepfakes in such interventions, highlighting their personalized nature and potential downsides, in comparison to more traditional approaches to addressing self-disclosure about mental health.

Main Theoretical Contribution

Theoretically, the current study revisits traditional video self-modeling approaches, which leverage the self-referencing effect to enhance engagement, within the context of deepfake technology by integrating the self-referencing effect and the uncanny valley effect. This study reveals that the synthesized nature of self-representations in deepfakes introduces artificiality that triggers discomfort, thereby increasing resistance to mental health self-disclosure messages. This discomfort underscores a significant limitation of deepfake technology in sensitive contexts, as individuals—especially those with higher baseline levels of mental health who find greater relevance to the topic—may be reluctant to engage with messages that present uncanny or distorted self-representations. Our findings emphasize the importance of future research to systematically investigate the boundaries of self-referencing in AI-driven synthetic media, focusing on how the degree of resemblance influences perceptions of personal relevance, evokes emotional resistance, and varies across individual differences. Furthermore, as deepfake technology finds its way into the healthcare sector, practitioners must remain mindful that while it offers innovative possibilities, it may also stir emotional resistance.

Data and Methods

This lab-based study employed a one-way within-subjects experimental design with three conditions: self-deepfake video, celebrity deepfake video, and virtual agent video. The results of a prior power analysis conducted using G*Power, assuming a large effect size ($f = 0.4$), 80% power, and a two-sided 5% significance level for a within-subjects analysis, indicated a minimum required sample size of $N = 12$. Participants were recruited from a private university in South Korea and were required to complete both a pre-test (Wave 1) and a post-test (Wave 2) survey, with a one-week interval to allow AI experts to produce high-quality deepfake stimuli personalized for each participant. Given the resource-intensive method of creating personalized deepfakes for each participant, we relied on a higher-powered within-subjects design to allow for a smaller, more manageable sample size. Of the 24 participants who initially enrolled, 21 completed both phases of the study.

Taking an interdisciplinary methodological approach, authors with AI engineering backgrounds created the stimuli using deep learning algorithms. To produce the deepfake video, we utilized the open-source FaceFusion tool, which facilitates seamless facial exchanges within video content. For the celebrity video, we created a deepfake of a South Korean female celebrity (Song Hye-kyo) delivering a self-disclosure message about mental health. To achieve this, we generated additional audio using voice cloning with Speechify, which recreated the celebrity's voice for script reading through text-to-speech conversion. Diff2lip (Mukhopadhyay et al., 2024) was employed to synchronize lip movements with the voice-cloned audio. In the virtual agent video condition, participants viewed a video featuring a virtual human developed using DeepBrainAI, designed to closely resemble a real person. In this condition, as with the other groups, the virtual human discussed their own experiences with mental health issues, as well as their seeking out help from mental health professionals. The video duration was approximately 90 seconds. See Figure 1 for the screenshots of the stimuli.

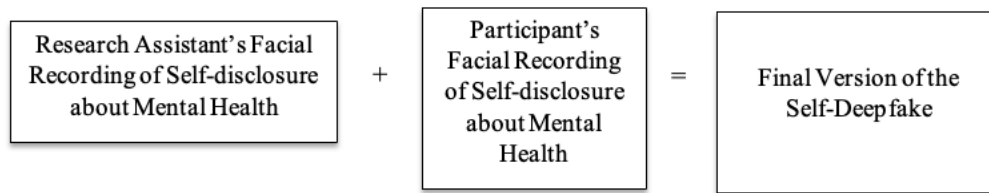
Findings

The findings show that self-deepfakes elicited greater affective resistance than celebrity videos, reducing help-seeking intentions, while no significant differences emerged between self-deepfakes and virtual agents. Furthermore, analysis showed that participants with poorer baseline mental health demonstrated significantly greater affective resistance to self-disclosing videos featuring deepfaked versions of themselves, whereas no such difference was observed in responses to virtual agent videos, regardless of mental health levels. These findings suggest that using deepfakes of oneself in personal health self-disclosure messaging may provoke resistance, warranting a more cautious and thoughtful approach is recommended when applying deepfake technology for health-related purposes.

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[Self-Deepfake]



[Celebrity Deepfake]



[Virtual Agent Video]



Figure 1. Three types of video representations of self-disclosure about mental health