

Open Minds

Internacional Journal

ISSN 2675-5157

vol. 2, n. 4, 2026

●●● ARTICLE 12

Acceptance date: 24/02/2026

SHARED IMAGE DISORDER (SID): AN EMERGING DIAGNOSTIC PROPOSAL STEMMING FROM THE CHILD'S EXPOSURE IN THE DIGITAL ENVIRONMENT

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Abstract: This paper proposes the conceptualization of Shared Image Disorder (SID), an emerging clinical condition that reflects the psychological impact of children's exposure in digital average by parents, guardians, and caregivers. Based on the clinical case report, observational evidence, and the critical analysis of digital behavior, SID is presented as a relational psychosocial disorder, characterized by harm to the child's psychic structure resulting from exposure. The article proposals preliminary diagnostic criteria and discusses its clinical and sociocultural implications.

Keywords: childhood, exposure, digital trauma

Introduction

When analyzing the psychological harm resulting from the exposure of children's images in digital environments, we observe that the child is being treated as a product.

According to Borges (2007), the modern world has transformed children's bodies into objects and reduced their psychic formation to the condition of manipulable puppets, performers deprived of the right to preserve their image. The body has become a virtual showcase.

As Borges (2007, p.94) states: *"At no other time has the body had so much visibility nor been the object of so much interest as today."*

By turning childhood into a spectacle, a subtle form of symbolic violence is normalized, one that directly affects the core of the becoming-human. According to Almeida et al. (2024, p.13): *"When subjected to such situations, all children involved in this*

'show' become susceptible to profound emotional and moral harm."

The contemporary subject and its psychic manifestations are the result of lived experience; when these experiences are artificially constructed from the very beginning of life, the formation of a healthy psyche is compromised (Silva & Dionísio, 2020).

In this scenario, madness is disguised as normality, and collective psychological illness, once perceived as dysfunction, is now assimilated to the part of everyday life, anesthetized by repetition and social acceptance. As Hannah Arendt (2020) notes:

"The human condition encompasses more than the conditions under which life was given to man. Men are conditioned beings, because everything they come into contact with immediately becomes a condition of their existence." (p.67)

As more individuals adhere to this way of existing, sharing the child's image, they impair the child's psychic development. What should be recognized as a problem becomes the norm, revealing a collective social symptom of childhood perversion. Children are shaped for public consumption, in the society that eliminates private space and the possibility of constructing a healthy psyche, while normalizing its illness.

Methodology

A descriptive approach was adopted, centered on the analysis of a clinical case. This methodology was chosen to outline the emerging characteristics of Shared Image Disorder.

Theoretical Foundation

In the 21st century, everyday life has become a stage for constant editing, recording, and exhibition—life has turned into a spectacle (Borges, 2007). Privacy, once safeguarded in intimate space, has been progressively dismantled, crossing individual boundaries and alarmingly affecting the child's psychological integrity.

According to Bueno and Cardin (2024): *“The term sharing is used to describe the practice of parents who excessively share photos, videos, and information about their underage children on social networks.”*

In Brazil, the jurisdiction of the State of Acre (Azevedo, TJAC – July 14, 2025) prohibited parents from excessively exposing their children on social networks, recognizing the practice as harmful to minors.

Exposure has resulted in psychological illness, culminating in an emerging clinical condition such to the Shared Image Disorder in children, whose origin is anchored in virtual exposure, compromising the healthy formation of personality. According to the DSM-5 (2023):

A mental disorder is a syndrome characterized by a clinically significant disturbance in an individual's cognition, emotion regulation, or behavior, reflecting a dysfunction in the psychological, biological, or developmental processes underlying mental functioning. (p.62)

Case Study

When analyzing the psychological harm resulting from the exposure of the child's image in digital environments, we

examined a case of a child subjected to such exposure.

Digital culture has profoundly transformed the way individuals handle intimacy, particularly regarding identity, privacy, and image. Privacy, however, remains essential.

To the Wagner and Veronese (2022) emphasize, the right to privacy is of significant importance for maintaining a person's dignity.

Children, due to their vulnerability and dependence, should be under parental protection. However, there are situations in which motherhood and/or fatherhood is transformed into an enterprise, exploiting the child's image to the the resource. It is crucial to note that the child cannot be reduced to the product of this business. Moreover, many guardians of not fully perceive the risks involved in exposure, as illustrated in the following case:

The mother reported that her son exhibited persecutory thoughts, anxiety, insomnia, and deep sadness. She explained that he had been a victim of exposure. She stated that images from his birth, highlighting the unique facial expression, were shared — and during preadolescence, these memories became a source of ridicule when circulated in a WhatsApp group of friends. Following continuous exposure, the boy began manifesting discomfort. When interviewed, he said: *I don't feel comfortable with that image. Any response in the group triggers the baby photo of me. It causes anguish because this image could be anywhere, causing me a lot of pain. I like feeling disappearing.”*

Any sharing on social networks can be manipulated. However, the child lacks the psychic capacity to handle the consequences of such exposure. In this case, anxiety and a

desire for digital erasure emerged. Whenever the sticker featuring his image was shared, triggers activated the digital trauma, also compounded by the possibility of the image being used for other purposes.

When psychic elaboration is insufficient, trauma becomes fixed, potentially triggering anxiety, behavioral inhibition, social withdrawal, or even dissociative symptoms. According to Maté (2023, p.35):

“When a wound does not heal on its own, one of two things will happen: it may remain open, or more commonly, be replaced by a thicker layer of tissue, a scar. If opened, the wound is a constant source of pain and a place where we can be repeatedly hurt, even by the slightest stimuli. This leads to constant vigilance – in a sense, we are always licking our wounds – limiting our ability to move flexibly and act with confidence due to fear of being hurt again.”

Herb tea (2023) further notes that trauma remains latent; however, triggers can reactivate it, causing pain, confusion, and sometimes emotional paralysis.

Virtual trauma constitutes the psychic wound in the same way to the trauma experienced in physical environments. Although dormant in the unconscious, exposure through sharing, likes, and comments places the child and future adolescent in suffering.

We can understand that repeated exposure transforms the child’s memories into multiple open wounds, reopened with each new viewing, comment, or involuntary recollection. As Maté (2023) notes, the past steals the present. If the past steals the present, this must also be observed in digital wounds, as the sharing of the child produces continuous digital trauma: childhood records become commodities, causing psy-

chological harm, which we define as Shared Image Disorder (SID).

When parents expose their children online, they lose control over their image (Schwartz, 2021).

Beyond the constant maintenance required by the constructed image, the child must follow a script, whether performing smoothly on camera, dancing provocatively, or modeling fashion. The audience consumes this performance, often unaware of participating in the corrosion of the child’s psyche (Almeida et al., 2024).

Childhood is a period marked by chronological stages, neurodevelopmental milestones, and complex relational conditioning from family psychodynamics (Lemos et al., 2018).

It is a phase in which the developing subject must be protected, especially regarding image rights and anonymity. Experiencing mistakes and correcting them are structuring experiences for the formation of the child’s psyche. Play fosters development, helps resolve conflicts, and mistakes are part of being human. In contemporary times, beyond image exposure, play has been replaced by phone screens. As Haidt (2024, p.82) observes:

However, childhood based on play has been replaced by childhood based on smartphones, with children and adolescents transferring their social life and free time to internet-connected devices.”

Technology has brought many advances, but also pathologies, such as ludopathy and nomophobia. Games can induce addictive behavior; as Lieberman (2023, p.64) notes: “*In some ways, they resemble casino games.*”

The chronicity of these symptoms, due to repeated breaches between private and public spaces during childhood, requires a new diagnostic category that recognizes this specific suffering. Unlike isolated traumas, SID constitutes the psychopathological condition derived from a family environment that symbolically violates childhood through scripting, depersonalization, and exposure.

Formalizing this disorder in the DSM-5 would not only allow clinical and social recognition but also the creation of intervention protocols, prevention strategies, and parental guidance.

Diagnostic Proposal: Shared Image Disorder (SID)

Shared Image Disorder (SID) is a psychosocial-based psychopathological condition, characterized by significant emotional suffering resulting from a child's exposure in digital environments mediated by parental figures or caregivers. This exposure directly compromises the formation of the self, interferes with identity development, and impacts emotional growth. The preliminary diagnostic criteria are:

- History of social media exposure.
- Need to script daily life.
- Negative emotional reactions to public records of one's own image.
- Rejection of one's own image or desire for digital erasure.
- Reports of exclusion, bullying, or humiliation due to shared content.
- Anxiety, depressive, or phobic symptoms related to overexposure.

- Feelings of invasion or loss of self-control.
- Trends toward self-negation, social withdrawal, or need for external validation.

Differential Diagnosis

- Social phobia (without exposure component).
- Generalized anxiety disorder (without exposure component).
- Childhood depressive disorder (without exposure component).

Conclusion

Building a healthy psychic structure requires that children experience the world without scripting, while being allowed to make mistakes without exposure, as error is part of the formative process.

When children are deprived of this experience, especially under constant external surveillance and judgment, there is a risk of forming a depersonalized subjectivity with a fragile sense of self. Numerous children are prematurely adultified, following rigid scripts that transform them into adults (Mezezes, 2016).

Eroticism is also present when children perform with clothing, music, and dance (Aguiar et al., 2019). Media often showboys and girls performing sexually charged acts, which is harmful for the development of both performers and viewers.

Children are often idealized as infallible, fostering a narcissistic illusion of omnipotence. However, such children share a vulnerability: they can become victims of

predators who may exploit their images (Almeida et al., 2024).

Personality formation requires constant revisions and learning to handle limits. Children trained only to succeed may fail to develop the psychic resources necessary to cope with frustration (Lemos et al., 2022). Consequently, they may construct heroic, invincible personas that mask vulnerability. This dynamic encourages histrionic traits and low frustration tolerance, hindering acceptance of loss and failure—paradoxically essential for emotional maturation.

THE childhood without respect for developmental stages and without opportunities to err harms the child (We read) et al., 2022). Children confined to rigid scripts struggle to experience unstructured environments such as schools, parks, or other uncontrolled spaces and feel discomfort when recognized by the public.

Viral videos often expose children, whether due to mistakes or embarrassing situations (Almeida et al., 2024). In some cases, parents exploit this audience, simulating failures that embed repeated failure to the an identity. This impact is not transient but tends to crystallize as an internalized state of shame and devaluation, resulting in SID.

It is increasingly common on social average for parents to intentionally elicit emotional reactions, exposing children to unexpected and potentially traumatic stimuli. For example, mothers filming themselves prompting children to smile if you want another mother” provoked intense emotional responses that children cannot handle. Another trend involved viral profanity challenges (Earth, 2024).

Today, children are treated to the products in the digital market; images, beha-

viors, and routines are widely shared without conscious consent or understanding of the consequences (Efing & Tavares, 2021). Healthy child development requires respecting developmental stages, privacy, cognitive stimulation, and loving dedication. Desmurget (2020, p.111) summarizes: “*To support a child’s development, the best approach is to dedicate time to human interactions, particularly intrafamilial, rather than to screens.*”

Shared Image Disorder constitutes a publicized, continuous trauma originating in childhood and extending into adolescence. Recognizing the child’s suffering is crucial, as exposure reactivates traumatic memories and perpetuates psychic distress. The digital trauma of shared childhood images may become, in the medium to long term, an exposed fracture for society, since these images can circulate globally. Thus, proposing the diagnosis of Shared Image Disorder is a way to protect children of the Alpha and Beta generations.

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