

CRACCUM

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Mental Health



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The People to Blame

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PAGE 8

TE AO MĀORI EDITOR
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Hot Takes From Two Snowflakes

This week, *Brian* and *Eda* start each day with 30-mins of Zoom yoga, courtesy of UoA.

CW: MENTIONS SUICIDE

Mental ill-health shouldn't be a competition, but the way we get support for it suggests otherwise.

In these times of long lockdowns, we are hearing of students whose mental health has deteriorated. When reaching out for the bare minimum of academic support, such as applying for Aegrotat or Compassionate Consideration, students are first faced with needing to evaluate whether or not their condition is worth the application fee. *Someone's always got it worse though*, you think. Or it's just simply not worth the hassle; the process can be demeaning, exhausting, and stressful.

This approach isn't unique to the University. Aotearoa suffers a lack of mental health care resources, leaving our precious mental health professionals as ambulances at the bottom of the cliff. In our experience with public mental health care, as soon as you aren't at risk of harming yourself or others, you are no longer a patient at a service provider. Rather than allowing our mauri to flourish, mental health care is about survival, if not about lip service. When people are turned away or put off from care because of reasons of cost, access, or that they don't present with conventional symptoms of ill health, that is how we lose over 600 people across the nation a year to suicide.

Needing to compete for support harbours the harmful mythology that struggling as a student is natural and that non-suicidal thoughts are not worth intervening. But the more we invalidate feelings and issues that

deserve acknowledgement, the deeper the hole we dig for ourselves. Generationally, young people's grievances are undermined by Facebook uncles calling us snowflakes. It is not necessarily that generations above us did not suffer, but we do believe that today we suffer different issues for which we have no simple solutions and literacies. Our ability to be sensitive and articulate about our feelings is no doubt a productive thing as well.

Unfortunately for our students, the University of Auckland leaves a lot to be desired in terms of meaningful support for mental health. While a lot of money is pumped into wellbeing and pastoral care teams, and they are staffed by well-meaning individuals, I don't think it's a surprise to anyone that a 30-minute Zoom yoga session doesn't address the inequities and isolation of remote learning. On that end, it is only the Senior Leadership team who can front up, and boy, have they failed.

Despite persistent campaigning by AUSA, and student petitioning, in one fell swoop, the University has rejected: a universal grade bump, fees-free retake, fees-free aegrotat and compassionate consideration. Essentially, name anything short of credit card transactions at Campus Store, and they'll reject it.

In all seriousness though, these decisions may not have been a surprise to some people. The University has made it known before that they do not want to see the universal grade bump return, likely due to its impact on postgraduate scholarships. However, when it gets to this level of bargaining for

removing administration fees on Aegrotat or Compassionate Consideration applications, it would be fundamentally misunderstanding the issues to say students are wanting to be graded in a lenient manner.

Students just want genuine acknowledgement for turbulent times. Until meaningful consultation is able to take place, there is a lot left to be desired in terms of mental health support for students.

Yours faithfully,

Brian Gu (he/him) & Eda Tang (she/her)
Co-editors of Craccum 2021

CW: THIS ISSUE IS THEMED AROUND MENTAL HEALTH AND MENTIONS TOPICS INCLUDING SUICIDE, DEPRESSION, AND DRUG-USE. PLEASE READ AT YOUR OWN DISCRETION AND IF THIS BRINGS UPON ANY DISTRESS OR DIFFICULT FEELINGS, TALK TO A PROFESSIONAL OR SOMEONE YOU TRUST.

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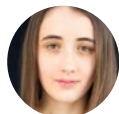
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What's Up: online chat (3pm-10pm) or 0800 WHATSUP / 0800 9428 787 helpline (12pm-10pm weekdays, 3pm-11pm weekends)

Recent Graduates Left out of 2021 Resident Visa



JESSICA HOPKINS

Recent graduates on short-term visas will not be eligible to apply for the Governors 2021 Resident Visa. A student launched petition is calling for international students graduating in 2021 to be included.

Last month, the Government announced a new one-off residence visa pathway for some temporary work and critical purpose visa holders currently in New Zealand to apply for residence. Immigration New Zealand (INZ) expects that 165,000 migrants will be eligible to become residents under this new category.

Students who have applied for, or have been granted a Post Study Work Visa, by September 29, 2021 may be eligible to apply for the 2021 Resident Visa. This visa allows graduates to work in New Zealand for up to three years after they finish their study. However, International student 2021 graduates are calling for INZ to allow recent tertiary graduates to be included under this new residence category.

A petition started by Psychology and Statistics student Kristen Dai has garnered over 2000 signatures. The petition argues that offshore graduates should have the opportunity to work and study in New Zealand. "I hope INZ can consider us new graduates, and allow more time for us to get our work visa so we can get a chance to work and live in NZ." In the petition, Dai argues that many students are being left behind, and face an uncertain future. "Being in NZ for more than three years I haven't got the chance to go home because of the pandemic. I was hoping there would be some chance or pathway to help me stay in NZ as I really love this country."

Haoze Du, a history and philosophy student who has been studying in New Zealand since he was in year 11 also hopes to stay in New Zealand after graduating. "For post-study, I am thinking of continuing my education to do a Master's, possibly PhD in Philosophy. I would love to work in a charity or academia or to become a high school teacher if possible."

Du told Craccum that his University experience was positive in first-year, giving a shout out to the Arts Scholars Programme he was a part of. But Du's experience was affected significantly after visiting his family in China at the end of 2019. "After the virus first broke out and flights between China and New Zealand were suspended, I still tried to get back to New Zealand as many students did."

Due to visa processing issues, Du wasn't able to return before the border closed. "There was a month, I stayed up till 3am to 5am in China to call immigration to check on the status of my visa application. But the process was slow, to put it nicely, those applications were left there for a good month, and no one cared for it." While studying offshore, Du says he missed out on key parts of his degree. "An arts degree is all about the tutorials and things got a bit messy in the second semester and first semester this year when the class in Auckland was in person. I didn't really have any tutorials, so there was a huge missing out there. But most of my lecturers did reach out to check on how I was doing."

The exclusion of students in his position, Du says, is disappointing, stating that International students have sacrificed a

lot in New Zealand's COVID-19 response. "International students' rights have been underrepresented for a long time. Living in New Zealand for almost five years and much of my teenage years, the exclusion of the policy is a huge slap in the face." He says that while it is reasonable for the Government to protect people from COVID-19, the sacrifice of many students in his position, and their contribution to New Zealand's economy needs to be acknowledged.



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Public Interest Journalism Fund Receives Largest Investment Yet



KARANAMA RURU NGĀTI RAUKAWA/NGĀTI MANIAPOTO

The Public Interest Journalism Fund, designed to be rolled out over a period of three years, has received its second round of funding, and its largest cash boost so far. For now however, student media seems to have been left out of this crucial support.

The Government has injected a further \$25 million into the fund, intending to support Aotearoa New Zealand's media further by bankrolling 110 journalism jobs across different media outlets around the country. The goal of the funding is to provide direct and targeted short-to-medium length support to public interest journalism. While a significant part of the fund is dedicated to help maintain the current status of New Zealand journalism, there is also a recognised need to develop a pool of future journalists, with the fund helping with upskilling and training programmes.

The upskilling and training of immediate and future generations of reporters is important, largely due to the sharp decline in journalism jobs. AUT's research centre for Journalism, Media and Democracy reported that over 600 journalism-based jobs disappeared in 2020 due to the pandemic. Newsroom states that this was nothing but the hastening of a long-term trend. Between 2006 and 2018, the number of journalists in Aotearoa New Zealand dropped by nearly fifty percent, from 4,284 to 2,061.

Tikanga Māori and the principles of Te Tiriti o Waitangi has been at the forefront of Governmental decisions regarding media funding lately. Te Rito, a collaboration between Māori Television, Newshub, NZME, and Pacific Media Network and 11 other supporting media organisations, aims to increase the number of Māori and diverse voices in the media; a sphere that has often been historically lacking in said perspectives.

The fund will also attempt to create longer, and more in-depth news pieces aimed to target a number of societal factors in New Zealand. These include combatting public health misinformation, supporting te reo and tikanga Māori, child poverty, and Pacific media.

Ultimately, there are three main pillars of the Public Interest Journalism Fund. Firstly, the scheme aims to aid development of clearly

defined news stories that are completed to a deadline. Secondly, as stated above, the fund will help support newsrooms for the employment of reporters. Industry development is also a prioritised goal of the fund, as recipients will be able to provide cadetships and upskilling initiatives for current employees.

While this funding has been largely welcomed by the media world of Aotearoa, this has not come without scrutiny, as journalists tend to do. The Government has stated that this is a one time offer, designed with the idea that media outlets have three years to find its own answers to the disruptions caused by the pandemic and decline of journalists. If they are unable to, they risk the rug of governmental support being pulled out from underneath them.

Another issue is paywalls, a scheme by media outlets designed to allow media consumers the option to pay for access to stories. Cabinet papers state that any content made from the fund has to be made freely available to the public. This however is contradictory, as NZ on Air, who are in control of the fund, are sympathetic to news outlets arguing for the continued use of paywalls and have stated that the fund should not damage these efforts.

Student media has been left out of the fund too. The University of Otago's student magazine *Critic Te Arohi* applied for the first round of funding, but were, however, denied. Critic Editor Erin Gourley told *Craccum* that they were disappointed with NZ on Air's decision. "I am disappointed that Critic Te Arohi has not received funding from the PIJF. We have strong readership within a population of young people who largely ignore traditional media."

Critic are the minds responsible behind the highly-successful six-month investigation into neo-nazi group Action Zealandia, a story that made it to national news and highlighted the actions and perspectives of the often mysterious white-supremacist group,



and a story that was very well acclaimed by individuals within and outside the media world.

Gourley believes that the denial of funding to Critic was not an issue limited only to them, but a wider dismissal of student media altogether. "Based on discussions with other student media outlets, this is not an issue limited to our magazine. It seems that student media has been largely brushed aside. The exception to that is Salient's project-based funding, which succeeded in Round 1. I was happy to see that. I hope that Salient's excellent use of that funding, in their Te Ao Mārama issue, proves that student media deserves more support from this fund."

The lack of feedback from NZ on Air was also an issue. "I was even more disappointed that we have received no feedback on our application. I understand that this was our first-ever application for funding, and we can't expect to be successful the first time around, but it would have been helpful to know where we could improve or what didn't meet the criteria."

The Public Interest Journalism Fund aims to ensure the stability and viability of New Zealand's media. Opportunities can be found here. *Craccum* is also a great place to start. If you have an article or story idea email us here.

COVID-19, The Downfall of Aotearoa's Tertiary Staff's Mental Health



CHARLIE PARKER

The 'Tertiary Lives' survey report details that 85% of tertiary staff in Aotearoa feel significant levels of stress, and that management of tertiary institutions expect an "unachievable workload" from staff.

Te Hautū Kahurangi, the Tertiary Education Union recently provided an insight into the impact of COVID-19 on those working in the tertiary education sector. Significant stress levels and an increase in workload have been reported by tertiary staff during the third iteration of the 2021 'Tertiary Lives' survey.

The April/May survey report included a total of 1,021 responses; 615 of these were from universities, 232 from polytechnics, 29 from Wānanga, and 15 from other tertiary institutions. It identifies that one of the key problems faced by tertiary staff is the constant restructuring of their institutions, which was noted to cause stress amongst employees as they felt they no longer had job security. Overall, 85% of tertiary staff involved in the study said they experience moderate to very high levels of stress. Within academics, 90% reported moderate to very high levels of stress, with 47% percent reporting high or very high levels.

A reduction in staff levels has been present throughout the COVID-19 pandemic, and has led to what the report describes as an "unachievable workload". Academics and administration reported that they have been expected to increase their work output despite there being less staff to share workload. Personal statements from the survey described physical exhaustion, burnout, and fear of asking for practical solutions as they did not want to criticise management. Staff across the country revealed that their jobs are under threat and that their working conditions are now a very negative experience.

Tina Smith, TEU Tumu Whakarae, stated in a media release that these issues are all caused by structural failings. "Sadly only 3% of respondents felt management was taking high stress levels seriously". The report

states that there is a disconnect between many management systems and their staff, interpreting their workloads incorrectly and not providing them with wellbeing resources. Smith argues that if sufficient resources cannot be provided to aid staff that allows them an ethical level of wellbeing, then universities may also suffer negative consequences. Smith also said that the processes of restructuring, lack of funding, and the competitive nature of tertiary institutes, were becoming "intertwined to produce a troubled sector".

The report revealed that the wellbeing of staff can affect student learning within tertiary institutions. When speaking with University of Auckland students, many noted that they could tell lecturers were under more pressure even just through how classes were running. Lecture 'recycling' by uploading previously recorded lectures, cancelled office hours, and very slow responses to emails were becoming common themes when

lecturers reported to students that it was a busier week for them.

Moving forward, the respondents wanted to see changes in the power hierarchy within institutions, and for management to take further steps to communicate with staff appropriately. Many called for sufficient funding and wellbeing resources to be made available to them to reduce their stress levels and improve work conditions during this lockdown period.





MMM: Māori Mental Health Matters



OMNI ARONA NGĀ PUHI, NGĀTI WAI

SHADOWS
BAR & EATERY
CONTRIBUTOR OF THE WEEK

CW: MENTIONS SUICIDE AND TORTURE

Kua hinga te tōtara i Te Waonui-a-Tāne (*the tōtara has fallen in the forest of Tāne*). Usually uttered with the passing of an important figure, the proverb accurately describes the state of our people. The totara, in this case, being the identity and mental state of our Māori men. It is in the nature of the tōtara to grow wide and tall, an analogy for the influence and respect a rangatira has over his people. To grow strong, inspire many and blossom collectively is in our history and creation. However, Ngai Māori currently exist in a state of survival. The historical and ongoing effects of colonisation place our people at the intersections of so many traumatic experiences. This is especially evident when looking at the state of our Māori men in Aotearoa. Their identities have been shattered through the inescapable

force of expansionism. We have since lost our identities with the onset of colonisation. Finding ways to decolonise Māori male identities is vital in our journeys as Māori towards a better future for our mokopuna.

Why are our tāne in so much pain

According to the Ministry of Health's suicide statistics, Māori occupy the highest rates of suicide in New Zealand, and these rates have only increased since 2009 (13.1 per 100,000 Māori population to 18.2 in 2018). If we factor in gender and age, young Maori men occupy one of the highest rates of suicide in the world. The numbers are abhorrent and gut-wrenching. Why are our tāne in

so much pain? The factors of influence are the consequences of pākehā expansionism and Eurocentric views on mental health. This includes the value Western societies place on individualism compared to collectivist cultures, as compared to Māori, who define their identity through community. I am tired of my brother's suffering. I am tired of racist trauma-inducing rhetoric towards our people, and I am sick of a health system that doesn't prioritise our most at-risk.

As a country, we need to understand the historical factors of influence that have led to the current indigenous mental health crisis. No matter how many times we try to dismiss its impact, colonisation has placed Māori at the intersections of racism, intergenerational trauma, land dispossession, poverty, and loss

For Māori, poverty and racism are a slow apocalypse, inexorable and generational.

of culture. These factors, coupled with the struggles of daily life mean Māori are more susceptible to lower states of emotional and social wellbeing. With Māori placed in this position, we are set on an inevitable course to future failure. For Māori, poverty and racism are a slow apocalypse, inexorable and generational. The effect of separating Māori from our heritage cuts through the heart that pumps life through our people.

Māori men continue to be seen through colonial perspectives. New Zealand is plagued by the sentiment that Māori are in the positions we are in because we're "lazy, stupid money-grubbers on the dole" and because we can't "pull ourselves up by our bootstraps". Tāne are thought of and represented by media as violent and savage. It has formed a normative and subconscious fear towards our men. Tāne are not blind. We sense this sentiment, and although it is not direct, we feel it and our identities become fractured. We begin to identify with these stereotypes. According to the Ministry of Education, this discourse distresses us even at adolescent ages, with colonial perspectives on tāne having a noted impact on suspension and expulsions in our education system. In this case, tāne begin to foster internalised racism through systemic bigotry from adolescence. This, coupled with a loss of culture, add to factors that have contributed to a Māori male identity crisis. We as tāne are capable of so much. We are more than what these stereotypes deem us to be. We can be intelligent, caring, and sensitive. We can be critical actors for social change and are capable of doing whatever we dream of.

The Māori experience before the arrival of pākehā informs us of possible solutions to this identity crisis. We were once a connected people that has become fractured and displaced due to colonisation. By looking back to pre-colonial Māori society, we can gain a sense of Māori male identity with our past informing our present, and hopefully, our future. Prior to colonisation,

Māori identity schemes were centred around our future capacity for growth and whanaungatanga (familial and social relationships through shared experience that fosters a sense of belonging). Our identities were solidified through an interconnected sense of wellbeing and our place in the world rooted in the land we whakapapa back to. Revitalising a sense of identity is vital in our whakaora (healing) journey as Māori. I also extend these ideas to our Pacific Island brothers. Although we are in different boats, we share the same river of life in our waka and you in your Va'a.

All these factors are exacerbated by the state of New Zealand's mental health system. August 2020 saw NZ's Chief Ombudsman release a call for action addressing current issues within our mental health institutions. Two mental health facilities were found to breach the United Nations convention against torture "and other cruel, inhuman, degrading treatment or punishment". The knowledge is there on how to improve our systems. Still, we are hindered by a lack of investment and Eurocentric perspectives on what mental health is. The system isn't equipped to deal with mental health, let alone the mental health of our indigenous people. Our healthcare system needs to continue to look towards Māori-centered primary health care community initiatives as examples in addressing their own inadequacies. To effectively treat our people, our systems need to display a reflection on Māori perspectives. This means health care that is carried, delivered, and controlled by Māori healthcare specialists. Our health care system shouldn't have to rely on community-funded initiatives because of government underfunding in its national healthcare schemes. The importance of addressing mental health according to one's culture cannot be overstated. Implementing cultural-based initiatives grounded in Māori values and perspectives means we can shift the intergenerational trauma of our people into intergenerational wellbeing.

We are in dire need of mental health reform. In my experience as a health care worker, mental health institutions are unequipped to handle this mass decline in our populations' mental health. As a health care assistant and therapeutic observer at North Shore Hospital, part of my mahi is interacting with mental health patients. It is immediately evident that our institutions are unable to handle the influx of complex mental health issues.

Beds at Waiatarau and He Puna inpatient units are frequently at full capacity leaving unequipped emergency departments to deal with patients in need of specialised care. Covid 19 has also put pressure on our health system, widening cracks that were always present. The development of the therapeutic observer role within North Shore Hospital's ED Department has shown great promise in accommodating MH patients in their healing journey and speaks to possible initiatives in the future of New Zealand health care.

Reconnecting with pre-colonial Māori concepts of self will shift our tāne towards positive identities. Up until this point, survival was winning for Māori. Now, we need to journey towards an Aotearoa where Māori exist, not in a state of survival, but in a state of healing. Healing from our intergenerational mamae and healing from the force of colonialism. Nothing will extinguish our mana as Māori. Supporting our tāne in healing will help our culture progress towards its decolonisation. Much like our voyage from Hawaiki to Aotearoa, the journey is long. But we've finished that journey before, and we will again.

Implementing cultural-based initiatives grounded in Māori values and perspectives means we can shift the intergenerational trauma of our people into intergenerational wellbeing.

Into the Cuckoo's Nest

Demystifying "Psychosis" and Paranoia



NAOMII SEAH

"It feels like you've been thrown into a room full of wolves," says Mark.

"Suddenly you're on edge about everything. You're in that fight or flight mode constantly. Your mind is running a million miles an hour through defence mechanisms. It's constant panic."

Mark is one of the 3 in 100 people who will experience "psychosis" at some stage in their life.

Dr Jim Geekie, a clinical psychologist at UoA who has worked "for many years" in early psychosis services both in Auckland and the U.K. notes that "psychosis" is not a universally agreed-upon term. However, it's generally used as an umbrella, "covering a broad range of experiences".

"The common thread is that how the person experiences reality [has] changed somewhat. That can be in the perceptual nature — the person may see or hear things other people can't — or it can be in the area of unusual beliefs that are sometimes out of character for the person, or an exaggeration of previous beliefs."

3% of the total population in New Zealand is roughly 150,000 people or 12% of the nearly 1 in 4 Kiwis who reported "poor" mental well-being in 2018. Keep in mind, mental health is a notoriously under-reported issue.

If you're reading this, chances are you are a young person, or know a great deal of young people at the University of Auckland. Jim notes that "generally, the vast majority [of people with psychosis symptoms] present under the age of 35." He went on to explain there is a type of psychosis that can occur in older adults, but it was best thought of as a different phenomenon, "rather than on a continuum with psychosis that develops in adolescence or young adulthood, which is by far the most common age to present."

So if you are a young person, or know a lot of young people, chances are you've heard stories of people you know and love presenting these symptoms. And the more I personally noticed psychosis symptoms in those around me, the more I realised I couldn't reconcile the media images of run-down people in straight-jackets with the

reality of what I was seeing. Human beings, friends, whānau — *people* — struggling with things I also struggled with, albeit to a larger degree.

"If you know about stress and distress, then you know what it is to experience mental distress," notes Debra Lampshire. Debra is an award-winning mental health worker, described by colleague Jim Geekie as an "expert by experience." She runs groups at the DHB for people who've had similar experiences to herself, and she also works for the University in their Mental Health Faculty for nursing.

"I hear voices that other people don't hear," said Debra. "That can be very alienating." For Debra, these symptoms started at a young age, but they didn't become a problem until she reached intermediate and high-school age. Debra noted that these times in our lives are often when we have the most pressures on us. Social pressures, academic pressures, and self-afflicted pressures. "While [academic spaces] are fertile ground for knowledge, [they're] also fertile ground for huge levels of stress," she says. "It's not so surprising what we see as a consequence of that."

"I tend to think that what we call 'mental illness' as such are actually coping strategies," says Debra. "Unfortunately we find some unhelpful or unhealthy coping strategies," she laughed. "52% of people who hear voices have been bullied at school," she told me. For Debra, that bullying was because she came from a poor, "notorious" area, and because she was seen as different.

She coped by isolating herself, but noted that it was a huge detriment to her mental health. "Generally we are social beings and crave social engagement," said Debra. "I saw my voice-hearing as a way to fill that void. I was hearing people and whilst they weren't physical beings, I had a strong sense of them as people. They became my friends and my enemies. They became a micro-community because I couldn't engage with the "real" community."

Mark's paranoia came from a similar place, though he didn't have an episode until his early twenties. "I was battling depression at the time," he said, "[and] my coping mechanism for depression was always to isolate

myself."

"I didn't want to deal with people, I didn't want to put on a happy face, and a lot of the time I didn't want to bring people down... I felt I was alone so much that I started making up reasons for people to be thinking about me," he said. Mark explained he developed the sense that everyone around him was trying to kill him, and he believed it came from the need for connection.

"It was almost a comfort to know [people] were thinking about me all the time. It made me feel that I was important and that I had worth... a bad relationship is still a relationship," he observed.

For Mark, "Weed was a massive trigger. I don't know why. I smoked for years and then one day, paranoia hit and it was never the same." He quit, knowing his relationship with the substance didn't serve him anymore.

But drug stigma is also real for those who experience psychosis or paranoia, and Jim notes that "it's not so cut and dried."

"If you took a random sample of young people from the streets of Auckland," he explained, "many of them would have



used substances recently. Of course, as we know, the vast majority of people who use, say cannabis, don't present to mental health services for psychosis. So there's the suggestion that for some people, there's a vulnerability that's triggered by a combination of factors including *but not limited to* substance use."

Additionally, he emphasised that increased drug use tends to be a response to increased levels of stress. "And it's well recognised that increased levels of stress can amplify any mental health difficulties, including the risk [of] presenting to psychosis services," notes Jim.

Above all, our interviewees stressed that psychosis is not a "big-bad," and the people who have these experiences are not fundamentally different from other people.

"Human experiences fall on a continuum, not in discrete boxes," says Jim. "What we call psychosis isn't a category of experience that is divorced from other human experience. We all have dreams every night, and that's a sort of fabricated reality that lasts for the duration of the dream. So there's a normalising framework [for psychosis] that I think is much more helpful than a pathologizing framework."

"People put mentally ill people and "regular" people into two different categories," said Mark, "but they're the *same* category... Mentally ill people are just hurt people. They're not freaks... They're regular people who need help."

So people experiencing mental illness are

not fundamentally different from people who are generally mentally-well. It's a spectrum of experience, as Jim says. And all experiences deserve respect.

And so Mark, Jim and Debra all stressed the importance of empathy, especially from friends and whānau of those having these experiences. "[Someone experiencing mental distress] is just a scared, vulnerable person who isn't able to express themselves," said Mark.

For him, that translated into a need to feel safe. And "what made me feel safe was being treated like a 'normal' person," said Mark. He said after being released from a period of institutional care — which he described as "horrid, the worst place on earth," — he was given responsibilities and structure by his family. They relied on him to do things no matter how he was feeling.

"I was treated like someone who was capable," said Mark, "and I started to become that again."

Similarly, after being institutionalised for 18 years, Debra said it was only after she was released into the community that "I started to think in a slightly different way, and... make a conscious effort to work on my voices and try to understand them."

Of course, if you or someone you know is experiencing early signs of psychosis, the first step should be to seek professional help. Jim recommends speaking to your GP, or contacting the local early psychosis service directly. If you're not the person directly affected by psychosis symptoms, contact on behalf of a loved one requires consent.

But given all the stigma associated with psychosis — the misrepresentation, the other-ing — it can be hard to know what to do to support people you love working through these symptoms.

The first and most important, said both Jim and Debra, was not to directly challenge their beliefs. "Generally speaking," said Jim, "when we have our beliefs directly challenged, they strengthen our conviction of the belief in the first place." Debra and Jim both noted that arguing with someone in this way is likely to fracture the relationship, especially because this person now believes they can't trust you. However, it's also important not to collude with their unusual beliefs (should they develop), thereby confirming them.

"What can be helpful," says Jim, "is recognising, whether you agree with the person's beliefs or not, the emotions that are

associated with that belief for the person are the same as they would be if the belief was true."

"If I believe my neighbours hate me, that's going to have an emotional impact on me regardless of whether the belief is true. So recognising and responding to the emotional impact in a supportive way can be helpful," says Jim.

Debra further stresses that most precipitations of psychosis are a result of extreme anxiety. Assurance that they have others to support them through their internal thoughts and feelings is often the most important thing. Debra and Jim also note that taking care of someone in this state, encouraging them to move away from triggering environments, constantly "bringing them back to the now," and focusing on the basics are the best things one can do to support loved ones. "It sounds stupid," says Debra, "but proper breathing... is so important." She goes on to specify deep breathing techniques, noting that physiological and psychological processes are linked.

Keeping an open dialogue is important too, stressed Jim. Hiding one's concern might cause you to seem suspicious to your loved one, further alienating them from a source of support.

Jim suggests taking an active role in pushing them towards activities they once enjoyed and making sure they feel safe (just ask how!). "Express curiosity in a supportive way," says Jim, "don't undermine or invalidate what the other person is experiencing... [but] be open with concern, and [provide them] an opportunity to share what's going on."

"There's a lot you can do," says Mark. "[They're] still the same person. Take them out, create safe spaces for them, safe spaces to express themselves. I'm a big fan of the late-night car chats myself," he laughed.

Evidently, although there is a lot one can do, there is also a point where professional help is required. And Jim notes that good professional help includes whānau, (not limited to blood-relations), alongside their loved one.

If you or a loved one are experiencing psychosis-like symptoms, or you would simply like more information, you can find help at: <https://www.healthpoint.co.nz/public/mental-health-specialty/early-psychosis-intervention-team-epit/>

For urgent support with psychosis symptoms contact 0800 775 222 or (09) 265 400 at any time. In case of emergency call 111.



You Are Not Your Algorithm



MADELEINE CRUTCHLEY

CW: MENTIONS DIETING AND BRIEFLY MENTIONS DOMESTIC ABUSE, SUICIDE, ANTI-SEMITISM

Like many NZ teens in the 2010s, I was pretty captured by the world of YouTube. I would spend hours scrolling and watching this 'free' content, watching Button Poetry, Zoella, and Sims Building videos. It was one of the first environments that allowed me to freely explore content that I chose, with no snatching of a TV remote or prying parental eyes. I was free to indulge my own interests in a private space. However, some of this content, in hindsight, had a pretty damaging impact on my mental health. YouTube, working off of their processes of data collection, started to supply me with very specific diet-based content.

The platform had deemed me a perfect target for the pretty and persuasive ideologies of the high-carb, low-fat vegan community. And YouTube was right: I was interested. The thumbnails of these videos often pictured thin white women posed in bikinis and activewear, next to their massive smoothie bowls and kūmara chips. For my deeply unhealthy mentality at the time, this type of content was intensely alluring. They were not qualified to provide any of this advice, but my recommendations were full of these videos promoting handfuls of harmful ideas about diet, health, and body image.

Unsurprisingly, constant consumption of this rhetoric was deeply harmful for my mental health and damaged my already-shaky

I'm still working to undo the damage of this diet and have to continuously challenge the harmful ideologies that this content praised in my daily life.

relationship to food. The extreme diet change also damaged my physical health, with my blood tests showing some cause for concern. I'm still working to undo the damage of this diet and have to continuously challenge the harmful ideologies that this content praised in my daily life. Part of this work has included an attempt to identify the factors that put me in this position. There's a long list, but one particularly worrying element is the role YouTube itself may have played.

The term 'filter bubble' was first coined by Eli Pariser, with the release of his book *The Filter Bubble: What the Internet Is Hiding from You* in 2011. A filter bubble, in Pariser's explanation, is the personal ecosystem of information that users experience due to the catering of algorithms. There are other phrases that are used in similar ways, including 'echo chamber'. Often, these terms are employed with reference to explicitly political content and growing polarisation. Pariser utilises differing results of a Google search of 'BP' to explain the concept: one user finds investment news for British Petroleum and another finds information about the tragic Deepwater Horizon oil spill. He explains that the results are determined by algorithms that present information based on the user's past browsing and interaction with different links.

Colloquially, we seem to be getting more and more familiar and comfortable talking about The Algorithm. It's not uncommon to see TikTok commenters, for example, lamenting the avenue that they feel stuck in (you guessed it, straight TikTok is alive and well). In a survey with 21 participants taken by *Craccum*, 85% of respondents reported that they felt as if their algorithms and social media had led them towards a particular perspective, type of content, or community, 10% said maybe, and 5% said no. There was a huge variety in the type of content that they identified as potentially leading to a particular perspective, viewpoint or community.

One respondent detailed their noticing of a shift in the past, explaining, "I was really into

Colloquially, we seem to be getting more and more familiar and comfortable talking about The Algorithm.

true crime and the paranormal, but this led into recommendations of Freemason and Illuminati conspiracies, to downright reptilian theories, and even very anti-Semitic content."

Another noted a potential algorithmic path they noticed, stating, "Somehow, fangirling communities led me towards feminism through suggested pins on Pinterest. Facebook groups have also been suggested to me based on my interests, that have gone to the more extreme ends (eg. anti-capitalist, abolitionist vegan)." In these cases, the respondents noted that they felt their engagements with content they were genuinely interested in had led to recommendations for more extreme content.

Other respondents found themselves noticing targeted advertising. One stated, "I'm Queer and I have seen on my Facebook Ad Interests that it has detected I'm interested in 'same sex relationships' and 'LGBT Community' — I often get ads now for, like, Gay Men's party clothing? But have also had ads for organisations like the New Zealand AIDS Foundation, Ending HIV, etc."

Another wondered about the information that was supplied to their ad targeting: "For at least the last half-year, my Audible ad recommendations on Facebook have been coming up with titles like 'How Not to Die Alone,' 'Difficult Mothers, Adult Daughters,' and 'Stop Picking Your Skin.' I do have a background of domestic abuse, particularly from my mum, and I have depression, so the

really niche ones are pretty uncomfortable. For other platforms, it's not too noticeable."

One respondent felt that these types of recommendations were especially notable when they were freshly generating a new set of data for the algorithmic filtering systems: "Whenever I reset my watch/search history or have started using a different Google account, I can tell that things I have watched, sought out, or even just hovered over in the case of Facebook, have an effect."

In this survey, respondents were also asked whether they came across content that made them uncomfortable, and what platforms they had seen this content on. Facebook, TikTok, and YouTube were the top three platforms where respondents noted seeing this content. The content included disturbing and graphic visuals, comments and discriminatory content, where people were sexist, racist, homophobic, or xenophobic, examples of 'body-checking,' anti-vaccination posts, conspiracy theories, and "hateful political shit."

Of course, so much of this information, including my own account, is anecdotal. They are retellings of potential links and educated guesses about how recommendation systems work, and, of course, confirmation bias is mixed in with our own perspectives. Unsurprisingly, researching how filter bubbles work, and the extent to which they affect users, is really difficult. It's incredibly tricky to account for any potential impacts beyond the individual accounts we have, as our algorithms are so incredibly personalised, so complex, and hidden from public view. The algorithmic systems are also constantly updated and changed, so long term observational studies can be tricky to apply. There have been attempts: one 2020 study from researchers at Virginia Tech has found evidence for a conspiracy theory filter bubble on YouTube. They determined that, once a

The algorithmic systems are also constantly updated and changed, so long term observational studies can be tricky to apply.

user has developed a particular watch history, the personalisation attributes of the platform affects the amount of misinformation in the recommendation systems.

However, as researchers waded through massive amounts of data to try to understand the potential impacts of algorithmic recommendation systems, users are still being shown misinformation and disturbing content. In the everyday use of social media, there remains a need to combat and navigate potentially unpleasant and distressing content. There are many community-driven ways to address the need for change here, such as teaching basic media literacy, further regulation, and local community engagements about potential misinformation. The survey respondents also reported some behaviours that they used to try to avoid certain content and redirect their algorithmic recommendations.

A few respondents explained that they would try to make their algorithms understand through their limited interaction with the content. One stated, "I scrolled past and tried to show the algorithm that I was not interested." Similarly, another explained, "I try to swipe as soon as I know so [the algorithm] knows I don't want them."

Others suggested they took a more direct approach: One said, "I click 'Not Interested,' or 'Hide All Content,' and if I see a video of someone getting seriously harmed (this has happened on Facebook), I report the video. I try my best to report fake news or videos which feel like hate speech." Another stated, "I have blocked certain kinds of ads (e.g. political ads and medical misinformation) and I have avoided certain social media platforms because I have seen content that has made me uncomfortable that originated on there... And in particular, on Facebook, I will unfollow/block anyone or any recommended pages who post disturbing content/misinformation." Another explained, "In TikTok's case, I usually click the 'Not Interested' button so that the algorithm filters those kinds of videos out of my For You page."

Some respondents also explained that they would just try to ignore disturbing content, or avoid certain social media platforms and forums where they believed unsavoury content was circulating.

There's a real need for these platforms to take responsibility for the distressing content and misinformation that is circulating, and for

Your algorithms are not representative of who you are, and are likely just a ploy to keep you scrolling on the platforms for as long as possible.

the potential damages of the filter bubbles that their secretive algorithms create. Social media *is* responsible for the content that they profit from sharing. However, to make our interaction with social media safer, we can make use of those tools, blocking and reporting misinformation. If you're finding yourself disturbed or concerned about the content you're being shown on social media, or unsure about the validity of the information you're seeing, reach out to friends and whānau, or to counselling services.

Your algorithms are not representative of who you are, and are likely just a ploy to keep you scrolling on the platforms for as long as possible. I mean, Google knows a bit about me, but it also thinks I'm an avid "gamer", who speaks Italian and likes baseball. It's wrong on all accounts.

Eslam Hussein, Perna Juneja, and Tanushree Mitra. 2020. Measuring Misinformation in Video Search Platforms: An Audit Study on YouTube. *Proc. ACM Hum.-Comput. Interact.* 4, CSCW1, Article 48 (May 2020), 27 pages. <https://doi.org/10.1145/3392854>

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HAVING SUICIDAL THOUGHTS?

UPDATED JUNE 2020

If you are having thoughts of suicide, you are not alone. There are lots of ways you can find support to get through this.

COVID-19 is causing a lot of worry and uncertainty for people. It's all right to feel anxious, angry, scared or sad right now. This is a normal reaction and many people will be feeling these things. If you are having thoughts of suicide, you are not alone. You won't always feel like this.



**NEED TO TALK?
FREE CALL OR TEXT 1737 TO CHAT
WITH A TRAINED COUNSELLOR.
IT'S CONFIDENTIAL AND THEY ARE
AVAILABLE AT ANY TIME.**

People from all backgrounds, with different experiences, can feel suicidal. Lots of people go through this and at the moment, things might feel especially difficult for some of us.

Having suicidal thoughts can be overwhelming and sometimes terrifying. It can be really hard to know what to do and how to cope.



**YOU CAN GET THROUGH THIS.
WE WILL GET THROUGH THIS
TOGETHER.**



**IF YOU ARE WORRIED ABOUT YOUR
IMMEDIATE SAFETY CALL YOUR LOCAL
MENTAL HEALTH CRISIS ASSESSMENT
TEAM. IF YOU ARE IN IMMEDIATE PHYSICAL
DANGER, CALL 111.**

TELL SOMEONE WHAT YOU ARE THINKING

As hard as it is, reaching out and talking about how you feel or what you're thinking with a trusted friend, whānau or family member can really make a difference. It's not a sign of weakness to ask for help, it's the bravest thing you can do.

THERE ARE LOTS OF WAYS YOU CAN FIND SUPPORT TO GET THROUGH THIS

- You can free call or text 1737 to have a chat with a trained counsellor. They're available day and night.
- Your GP, doctor or hauora service can help you access counselling and mental health services.
- Counsellors or psychologists are people who are trained to talk through the really hard stuff. During this time they can still communicate with people over the phone or using the internet. Your GP may be able to connect you with someone, your employer may have an EAP programme you could access or you can see the Mental Health Foundation's [guide to finding a counsellor](#).
- [Mental health crisis](#) teams can help in emergencies if you're feeling really unsafe.



COPING RIGHT NOW

People who have lived through suicidal thoughts and experiences have found the following ideas have given them hope and helped them recover from suicidal feelings:

- **Try to remember** that thoughts about killing yourself are just thoughts. You don't have to act on them. You won't always have these thoughts.
- **Connect with others.** Right now, this is really important. Reach out to someone you trust about what's on your mind.
- **Be kind to yourself.** You only have to cope with one day or one hour at a time.
- **Keep safe.** Get rid of anything you think you might use to hurt or kill yourself, or put it somewhere you can't access it. Make a safety plan so you know what to do if you feel really bad. You can [download a copy of this safety plan](#) and fill it out to keep near you when you need it.
- **Distract yourself.** Keep a list of things you can do to distract yourself, like watching a video, calling a friend, taking a walk around the block or listening to music.
- **Look after yourself.** Rest, eat regularly and get some physical activity. A walk around the block or doing some stretches at home can make a big difference. If you're taking prescription medicine don't stop taking it without talking to your doctor first.



**IF YOU ARE WORRIED ABOUT YOUR IMMEDIATE SAFETY
CALL YOUR LOCAL MENTAL HEALTH CRISIS ASSESSMENT TEAM.
IF YOU ARE IN IMMEDIATE PHYSICAL DANGER, CALL 111.**

**GETTING
THROUGH
TOGETHER**

WHĀIA E TĀTOU TE PAE TAWHITI

ALL RIGHT?

 **Mental Health Foundation**
mauri tū, mauri ora OF NEW ZEALAND

The Worst Mental Health Advice

If you're not laughing, you're crying. The *Craccum* community reveals the dumbest mental health advice they've received.

CRACCUM

CRACCUM CONTRIBUTORS

CW: SEXUAL ASSAULT, VIOLENCE.

Have you ever poured your heart out to someone, expecting a hug and a pat on the back, and instead received a "get over it, you big baby"? Yeah, same. Yet, we're resilient beings. Many, if not all of us, have experienced a big-oof like this. So come: read, share, discuss, laugh, cry, commiserate. We're not alone.

Respondent A

"I am currently dealing with obsessive compulsive disorder and mild anxiety. My dad told me to 'Just repress it. If you push everything down, then you never have to deal with it. Problem solved!' It would've been better if he'd just told me it's important to embrace 'feeling bad' in order to work through your stuff. Only by making yourself feel it can you come out the other side."

"Honestly, [I personally think] advice doesn't help nearly as much as just offering support. Letting someone know that [you're] struggling and [having that person] see how hard [you're trying is way more helpful than recommending they meditate (yay, sit with your obsessive thoughts in silence for ten minutes!) or some other cliché. The work has to come from you, so other people can't do it for you."

Respondent B

"I gave the HR department at this place I worked a 20 minute recording of my boss yelling at me as a bullying complaint. They said it wasn't enough to warrant intervention and gave me some generic mindfulness exercises."

Respondent C

"I was rediscovering traumatic memories from my childhood. I had never gone to therapy before so I decided to see the UoA counsellor. I asked for a female counsellor as I thought she might be understanding of

SA. I was just about to talk to her about my experience [when] she put her hand up in my face and said 'you need to stop there, here's a website where you can find other people to talk to about SA. Is there anything else?' I would rather she'd simply said: 'I'm very sorry you went through this as a child. I can refer you to a professional or someone who is more experienced in this matter?'"

Respondent D

"I had severe depression [at the time], and I went to a counsellor through EAP (Employee Assistance Programme) and they said 'sounds like you think too much. Have you tried just thinking less?' Literally anything would be better than that! Mental health advice *can* help a lot, but it needs to be from people who know what they're talking about, not just well-intentioned [by-standers]."

Respondent E

"I was overwhelmed with stress, struggling with balancing work and University after lockdown, and feeling unable to take care of myself in my day-to-day life due to a complete lack of motivation. A mental health nurse available for a same day appointment told me 'you've got good things going on in your life, so it doesn't look like you've got a lot to be stressed about.' I'd rather get *any* sort of support for lessening stress in my day-to-day life."

Respondent F

"My mental health was low, [I was] on variety of medication, [and my] doctor knew this was an ongoing problem.

I said I was getting headaches on top of everything else, so my doctor pointed out my weight and said that must be

the reason. Didn't talk about my medication, my anxiety, or ask about any recent changes. Basically [he] fat-shamed me and made me leave in tears, with my mental health much worse. I'd rather he'd given me some actual advice, [and] checked] on my mental health, and [had] some understanding that being bigger isn't always the root cause."

"Mental health is important to be aware of, but also be aware of how your mental health impacts others. Asking if people are in the right space to hear things, talking about issues, and addressing things in a supportive way makes all the difference."

Respondent G

"I had anxiety causing dizziness, panic attacks, and [a] very foggy brain. A GP told me 'you're a Type A person. You need time to chill.' [I] later found out about grounding techniques... through friends and social media. Those techniques are *extremely common* and actually addressed my symptoms instead of, you know, making me feel crap."

"I think that more drastic, radical change could come from upping the funding of mental health services and strengthening social security nets."

Respondent H

"I was an anxious mess. I just had my first panic attack and was very not cool at the time. [A] University counsellor said that I probably have anxiety but I don't need to come back. They told me that breathing exercises may help in the future. It would have been really nice if they could have told me what I could do to manage my anxiety [to be honest]. Like, it made me anxious [that] she told me I had [anxiety] and then I had no idea what to do next. I still don't and it's been several months. We need more therapists in NZ. And advice on how to actually find a therapist, and get diagnosed properly etc."

Respondent I

"My family had just experienced a murder-suicide of close family friends and I was really struggling to come to terms with it. The Uni Emergency Counsellor told me to try interpretive dancing to get through and process the images running through [my] head. [I'd] probably [have preferred] real ways to deal with intense trauma, or at least be pointed in the direction [of] someone who could help."

"Mental health advice, when given properly, saves lives. When mental health is dismissed, or judged, it can cause further lasting trauma. If the person isn't able to support you successfully, they should point you in the right direction and not just send you on your way."

Respondent J

"[My mood was] pretty low. [I was] struggling with daily tasks and looking after myself. I was living alone [during] lockdown in Melbourne last year. My mum and lots of friends told me I should just knock on people's doors and make friends if [I was] lonely [I lived in student accommodation that was self-sufficient so no shared spaces]."

"I think I just wanted people to stop giving me advice and talk to me as if we were actually hanging out together. Talk about random things we would normally talk about to feel a bit normal."

"I think the university could have done more to connect us with people and allowed for more interaction in student accommodation for students who couldn't go home. I get that there needs to be bubbles and safety but student accommodation is the most isolating thing when the amount of people is too much to create bubbles. I think in this situation advice [isn't] helpful, you can't do much about [lockdown] so more support [is needed] in other areas to connect people. "

Respondent K

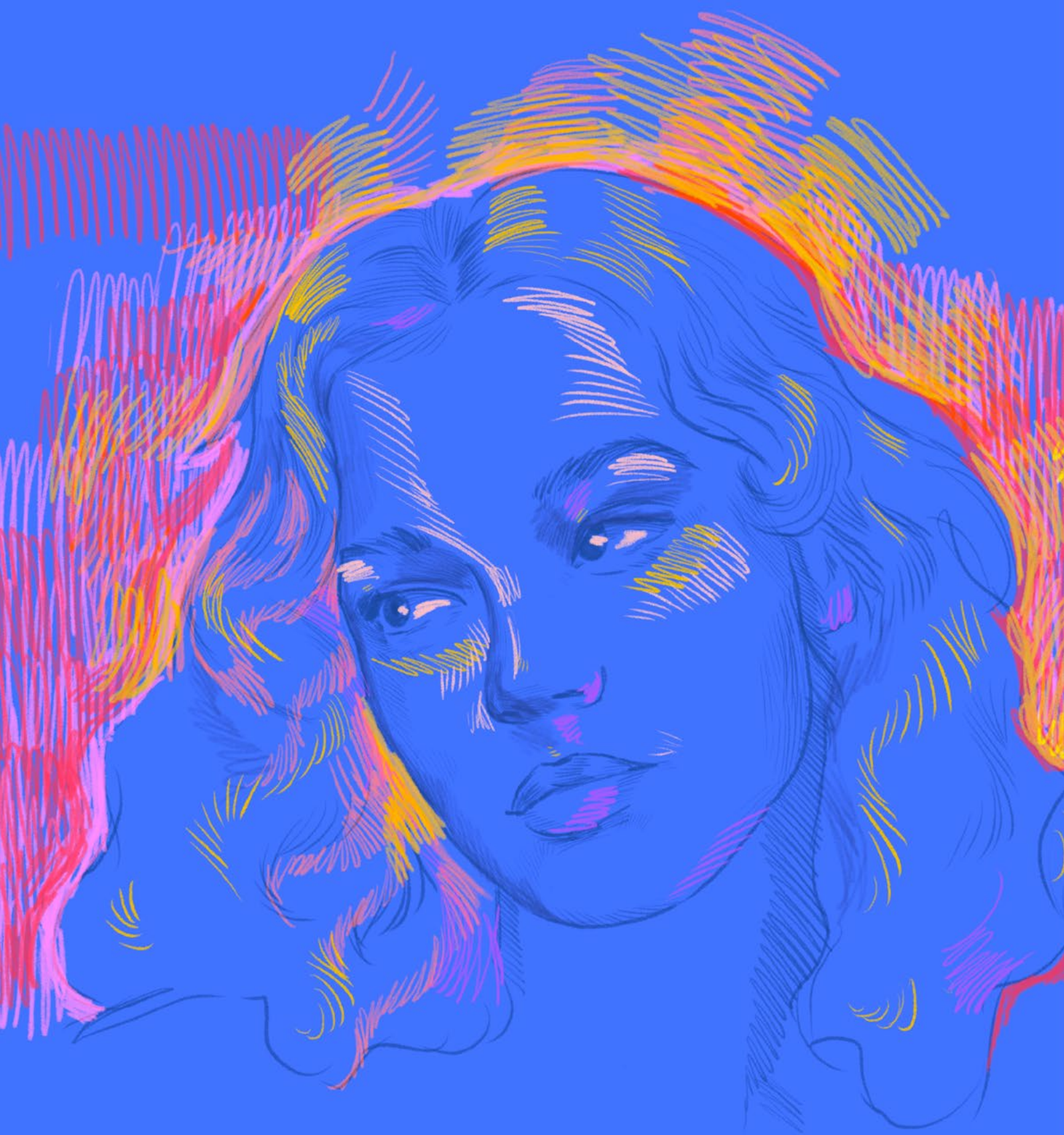
"I got yeeted by a car and was struggling with school and life. Uni health and counselling said 'A warm cup of tea before bed will help with your depression and anxiety around leaving the house.' I would've probably liked decent advice, not just: 'drink tea?' [Don't worry] I see a real psychologist now."

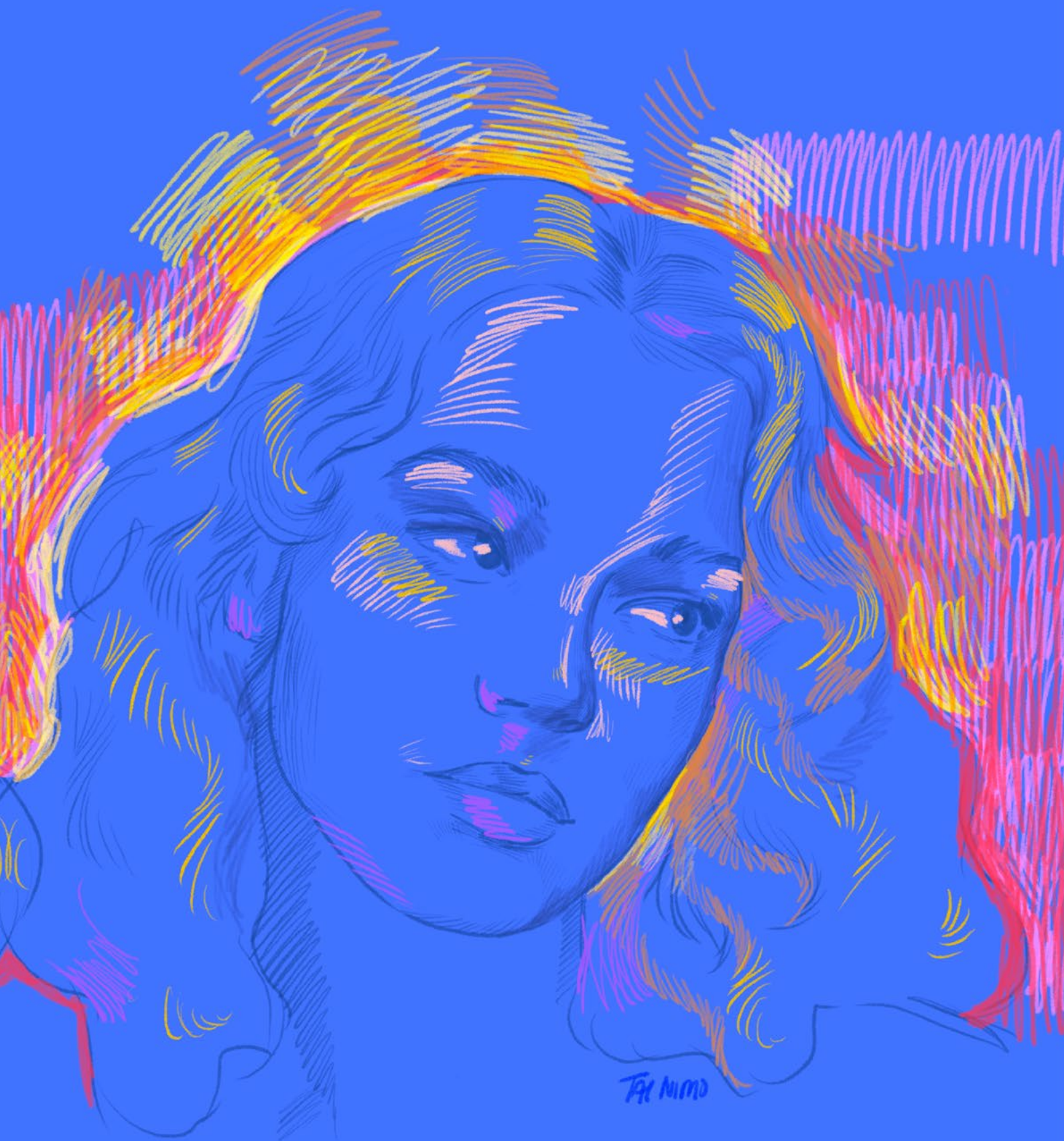
Respondent L

"I convinced myself I was a burden on the planet and was [a] waste of oxygen. AKA I had horrible self-esteem issues (due to childhood abandonment) and terrible eco-anxiety. I wanted to go to counselling to find advice to improve my self-esteem because I was struggling a lot. A high school counsellor said 'You've come here looking for quick solutions but this isn't something you can fix quickly, your self-esteem will improve as you get older.'"

"I wasn't looking for a quick fix, and I was very aware that self-esteem would be an ongoing focus in my life. I was also not willing to continue in constant sadness and anger until a hypothetical period where I would suddenly forget about it?? Very unlikely to happen."

I would have preferred some concrete ways to make small improvements to my self-esteem (which do exist!!!). And also a conversation about what circumstances led me to develop a core belief that I was worthless. Ultimately, anything other than the notion that there was nothing I can do, and that because everyone has self-esteem problems to some degree there was nothing I needed to fix."





Tai Nimo

"The vibrant colours in the background represent anxiety and over thinking, which sometimes takes over ourselves."



INNOVATE AT UNIVERSITY TODAY, DISRUPT THE WORLD TOMORROW

WHAT IS RED BULL BASEMENT?

Red Bull Basement empowers student innovators to kickstart their tech ideas. Submit your 60 second idea at: redbullbasement.com

WHAT TYPES OF IDEAS?



APPLY BY OCT 24TH

WHAT DO WE WIN IF OUR IDEA IS SELECTED?

The team selected will enter a week long incubator programme with Flume Agency, where they'll refine and commercialise your idea, develop your brand and create digital prototypes.

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- Return trip to Turkey to attend the Red Bull Basement Global Workshop*
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- Mentorship from Peter Gray, Senior Vice President, Advanced Technology - Sport for NTT Ltd
- Intel Laptop
- A Logitech Ultimate Productivity Pack
- Access to a shared space to work on your idea, or if you've already got a space, we'll upgrade it
- Free website design from Rocketspark
- Access to a global network of mentors

*TC's apply



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redbullbasement.com





HOW IT WORKS

TIMELINE:

SEP 1ST – OCT 24TH

APPLICATION & COMMUNITY SHOUT-OUTS

Brainstorm your idea and describe it in a max. 60-second video. Then upload the video on the website. A team can consist of one or two people. Make sure that everyone is at least 18, an enrolled student and able to speak English. The public can then give your idea a shout-out, so make sure to show that the world needs this idea, and get support from your friends, family and others around you.

OCT 26TH – NOV 1ST

SELECTION

A panel of local judges will select the finalists based on the criteria of feasibility, impact, creativity and community shout-outs.

NOV 2ND – DEC 9TH

DEVELOPMENT

This phase is all about bringing your idea to life! Each Finalist team, one from each participating country, will get access to a workspace, 1on1 sessions with international mentors in relevant fields, and a global network of innovators.

DEC 13TH – DEC 15TH

GLOBAL FINAL

This is it: three immersive days in Istanbul, Turkey with workshops, mentorship sessions and much more, culminating in the big Final Pitch. One idea will be declared Global Winner 2021, but everyone goes home with sharpened skills, fresh insights and an expanded network. Where will their ideas take them next?

MEET LAST YEAR'S WINNERS LAVA AQUA X FROM THE UK



The UK team with the top idea of 2020 created a revolutionary clothes-washing machine that recycles shower water: Lava Aqua X. The product uses a third of the water a regular washing machine uses and is faster. As reference, if every student in London were to use the Aqua X, we could save enough water to fill 700 Olympic-sized swimming pools a year!





TV

Ted Lasso Season 2



OMNI ARONA NGĀ PUHI, NGĀTI WAI

It is evident from its first season that *Ted Lasso* is more than just a football show. Initially, a character developed to promote the premier league in a series of American adverts, *Ted Lasso* becomes a complex and emotionally profound show. Its second season tackles subjects of mental illness, trauma, and anxiety. But most importantly, the journey of overcoming them.

In its essence, the show is human. Much like the main character, it is outwardly positive while realistically grounded in the struggles of human nature. The contagiously positive titular character, Ted Lasso, struggles with divorce, anxiety, trauma, and betrayal. He is initially hesitant to therapy, dismissing its use after the events of the first season — none too surprising for a middle-aged man from the American midwest. Never discouraged, and against the thought of giving up, Ted navigates his way through therapy after experiencing multiple panic attacks. Ted's holistic nature is challenged when everything comes crashing down. The complexities of the character have allowed **Jason Sudeikis** to display his full acting aptitude in a way we haven't seen from him before. So much in fact that he walked away from the Emmys with the award for Most Outstanding Lead Actor in a Comedy Series.

The introduction of sports psychologist

Sharon Fieldstone forces Ted to face his past trauma. Much like reality, if trauma is not addressed, it can manifest physically. This is displayed in Ted's recurring panic attacks. Mental health representation in the media is not always great. There aren't many shows that portray mental health struggles in a realistic form. Ted Lasso does it well by being conscious of an audience that may suffer from these symptoms. Unlike other shows, the show presents them in a healthy, non-stressful manner (cough, *13 Reasons Why*, cough). The symptoms of Ted's ailment are not sensationalised or glorified as character-defining qualities. Much like Ted, we are not defined by our conditions.

This season is an upgrade on the first, which says a lot about its quality. Ted's ethos and the sunny disposition of the first season are challenged by the harsh authentic situations of its second. The characters are hilarious and lovable, with much credit due to its cast. **Brett Goldstein** as hardman Roy Kent and **Hannah Waddingham** as boss ass bitch, Rebecca Welton, offer particularly stand out performances. The characters continue to develop in ways faithful to their psychology. Nathan Shelley, a self-hating nobody, turned egotist, begins his villain origin story. We are unsurprised when his character "goes for it" in the most recent episode. In this case, we already knew Nathan displayed the neurosis

of a person that could mistake kindness from women for romantic attention. Rebecca Welton also grows into her future self while healing through a divorce that overlaps with Ted's complications.

In an overtly cynical world, Ted Lasso offers refreshing positivity. The show exhibits quality humour with constant pop-culture references in its framing and dialogue. It subsides toxic tropes, and most situations resolve themselves in mature ways. The characters are not good for the sake of being good; they are good because they are just good people. It is a comfort show that eases your heart and mind.

One of the more memorable quotes is that "football is life." Not in the sense that football is the only thing that matters, but that much like football, you could be in a dreamland, and at any moment, it can all come crashing down. I've seen my team lose in the 95th minute, just as I've experienced emotionally painful moments that compose our lives. But I've also seen my team make dream runs to champions league finals, just as I've experienced life's moments of pure joy. In that sense, Ted Lasso offers metaphorical wisdom and heart in the simple narrative of a college grid-iron coach managing English football.



ONLINE THERAPY BETTERHELP

MADELEINE CRUTCHLEY

Yes, you guessed it, this review IS brought to you by BetterHelp. Special thanks to BetterHelp for sponsoring this issue of Craccum. Just kidding. Though we'd appreciate the cash.

If you're an avid podcast listener, or a YouTube fiend, it's highly likely that you've heard of BetterHelp. They are avid sponsors of a wide range of popular creators. Honestly, I could probably recite the copy from memory at this point. BetterHelp is an online counselling service that claims to connect users to licensed psychologists, therapists, social workers, and professional counsellors. However, over the years, the site has faced some controversies. There's been some wrestling with the confusing wording within terms and services about whether the contacts are licensed, concerns about the use of online counselling services in more severe cases, and claims about unfair pricing. There's also a clear distaste for the mode of marketing BetterHelp uses: paying creators to promote the service with their own stories of mental health struggles is bound to leave a bitter taste in the mouth. Within the Privacy Policy, BetterHelp also makes it clear that your information can be disclosed to third parties, for a wide variety of reasons including 'business purposes' and advertising. That's not to say online therapy should be avoided if you're interested. However, it's worth considering the environment that creates a need for a company and service like this, and important to consider what these services actually do with the sensitive information you might provide.

"Caution is the best policy."



CHATBOT AROHA

BRIAN GU

Aroha is a chatbot developed by researchers at UoA to help youth manage stress and isolation during COVID-19. Facing the stress of assignment deadlines, I thought I'd give chatting virtually with Aroha a try.

For those who haven't used chatbots, the experience is not akin to a real conversation. The neural paths are hardcoded, so the algorithm is not "smart" in the sense it cannot learn responses or conversation. Hence, the chatbot often loses the conversation, or asks for a direct response. However, suggestions are there to give some guidance.

Thus, chatbots mainly exist to disseminate information. After a chat with Aroha, I received several posters on reducing stress and remaining calm during lockdown. While some questions gauged how I was feeling, I would have preferred to see divergent paths to a customised stress-management plan. For instance, does the user prefer being active, or being quiet and relaxed, leading to suggesting working out or connecting with spirituality.

There was a bit of irony three responses in, when Aroha suggested "Maybe talking to a real person would help?" before our conversation had even begun. Also, there wasn't much to suggest it was targeted at young-adults, other than the spelling of 'sux' and excessive use of emojis.

As a tool in development, I probably wouldn't recommend it to others yet. There are definitely other channels for a free and confidential chat, such as Youthline, better for addressing individual needs. However, with further development, Aroha does have the potential for delivering simple yet effective strategies towards maintaining your wellbeing.



WEEKLY TOP TEN

1. SIX-OUT-OF-TEN FRIEND

Lunavela

2. INVISIBLE MAN

Reb Fountain

3. GOOEY

Leaping Tiger

4. SHE'S STRONG

The Biscuits

5. ANIMALE HORRIFIQUE

Christoph El Truento

6. LOVE WE'LL NEVER KNOW

Who Shot Scott

7. DRAG FEAT. JADE LEWIS

Reuben Hudson

8. IT'S YOUR BIRTHDAY

Vera Ellen

9. GREEN FEAT. TAMA

Mā

10. COREFLUTE

Goya

ILLUSTRATION BY NIRVANA HALDAR

Window Shopping

NATALIE WOOD

The windows of OGGB don't cast shadows, they cast reflections. Yet, like the Venetian blinds of film noir they too project a coded message, not hiding in the darkness but blinding in broad daylight. Its refractions — and factions — ricochet across its surrounding buildings but from the height of OGGB light can only bounce back on itself: blinding. In contrast, the Human Sciences Building stands as an ephemeral monument to what is no longer and what is not yet. Whilst the HSB is being torn down, leaving lecturers and students without offices, the Business School has sea views from leather seats available with swipe card access. One only has to look at the material buildings these departments occupy (or don't) to comprehend a disparity of funding and an ideology that universities are no longer places of critical thinking. In an excessive overidentification of colonial and capitalist ideologies, these 'monuments' leave nothing hidden but their normalisation. Looking closer then, at what lurks in between, it is not their materiality but the brightness of their shadows that is concerning. Their invisibility and intangibility offer a denial of an alternative as light beams embellish yet eclipse surrounding space. Anyone can walk into OGGB, but do students feel entitled to do so? Exploring these spaces as the student, come 'consumer'; one is window shopping for study spaces that are not accessible.

Their invisibility and intangibility offer a denial of an alternative as light beams embellish yet eclipse surrounding space.





CW: DEATH

I am an empty room filled with a cold mist that is dripping with loneliness

I feel it on every inch of my skin as it engulfs me longingly

I feel lonely like it grows on trees and hangs in the warm bitter air that flows through my lungs

I feel lonely like the distant sound of buses and cars that you hear walking down a side street late at night

But this lonely isn't an unbound freedom

This lonely makes me feel trapped

It makes my thoughts feel like a snake wrapping around me like I'm its prey

Like with every uneasy breath, the walls surrounding me close in just a little more

This lonely is the quickening of my pace as the sun draws beneath the horizon

Making me feel so alone that I flinch at the movement of every inconspicuous shadow lying deep in the back of my mind

My week has been a painful cry out of lonely

My lonely has been falling asleep in its just slightly uncomfortable bed in the room it should have cleaned worrying about all the little things

It takes its time to cross the road but wonders if even that is worth the effort

My lonely forgets to listen when others are talking, becoming an expert at guessing the answer to an unknown question

My lonely forgets to breathe

It forgets that if I don't stop thinking, my mind is going to implode on itself

But not before I lose it

My lonely sits in a classroom and stares at the wall so long it starts playing tricks on itself

My lonely eats and eats and eats so much it craves starving itself

My lonely wants to take a break from overthinking but can't because its thoughts are stuck on repeat on a CD that it can't take out

My lonely is feeling sorrow and heartbreak and terror when it smells a familiar smell or sees a familiar face

My lonely makes my skin an artwork- with my sadness the paintbrush

My lonely has me chained on the inside of my head and won't let me escape

My lonely can no longer trust anyone else because every time it has, it's only left me with more anguish, more regret

My lonely is crying out for help but its voice is just a faint scream under a stormy ocean

My lonely has had better days

ANONYMOUS

You've come at last my friend, my foe?

I can smell the wretched stench of your breath from miles afar.

Many times, I thought it was you at the door of my heart,

but now your sickly fingers have finally taken grasp.

I can feel your cool, calloused hands against the warm,
beating of my heart.

Your merciless, sharp nails poised. Ready to pierce.

So, this is what you came for?

My bloodied,

broken

heart.

But before you take what is mine,

let me say these last few words:

I've been waiting my whole life for you,

death my dear, old friend.

MARA



ARE YOU WORRIED SOMEONE IS THINKING OF SUICIDE?

UPDATED JUNE 2020

Many people may be experiencing increased feelings of worry, anxiety or sadness as the world responds to COVID-19 and Aotearoa enters recovery mode. Some people you know may be having thoughts or feelings about suicide. They might be feeling anxious, worried for their health (or the health of their whānau and friends), or struggling to cope with uncertainty about when things will go back to 'normal.'

People who feel suicidal often feel they are alone and their family, whānau and friends would be better off without them. Support from people who care about them, and connection with their own sense of culture, identity and purpose, can help them to find a way through.

If you're worried about someone, reach out to them. Trust your gut and get in touch if you're concerned. Go and visit, pick up the phone, send a text, contact them via social media and find out if they're okay. Let them know you're there and always will be.



NEED TO TALK? FREE CALL OR TEXT 1737 TO CHAT WITH A TRAINED COUNSELLOR. IT'S CONFIDENTIAL AND THEY ARE AVAILABLE AT ANY TIME.

If you're worried they may be thinking about suicide don't be afraid to ask them directly. If someone says they are having thoughts or feelings about suicide, it's important to take them seriously.

SIGNS TO LOOK FOR

While it can be tough to check in on someone when we're in self-isolation, there are some signs you might notice. These include:

- Changes to the way they talk
- Changes to how often they communicate with you or post on social media
- Talking or writing about suicide, or wanting to die
- Accessing things they could use to harm themselves
- Sudden changes in mood.

A person who is thinking about suicide might not ask for help, but that doesn't mean that help isn't wanted. They might feel whakamā or ashamed of how they're feeling, like they don't deserve help, or like no-one can help them. Lots of people feel suicidal at some time in their lives. It can feel impossible to have hope that things will get better.

Ask them directly about their thoughts of suicide and what they are planning. If they have a specific plan, they need help right away.

IF YOU'RE WORRIED ABOUT THEIR IMMEDIATE SAFETY, CALL YOUR LOCAL MENTAL HEALTH CRISIS ASSESSMENT TEAM. IF THEY ARE AN IMMEDIATE PHYSICAL DANGER TO THEMSELVES OR OTHERS, CALL 111.

Remember: āwhinatia (helping or assisting) and manaakitia (showing compassion) are important qualities for korero tahitia (listening and talking together). Give your time, words, presence and patience – even if you can't do it in person, connecting with others is really important.



WAYS TO SUPPORT SOMEONE

You can support someone by:

- Asking them if they would like to talk about what's going on for them with you or someone else. They might not want to open up straight away, but letting them know you are there for them is a big help.
- Checking on them regularly.
- Trying to stay calm, positive and hopeful that things can get better.
- Listening with compassion and without judgement.
- If they are comforted by prayer or karakia, invite them to pray with you.
- Help them to find and access the support they need from people they trust: friends, family, kaumātua, faith, community or cultural leaders, or professionals.
- Support them to access professional help, like a doctor or counsellor, as soon as possible.
- You don't need to have all the answers, or to offer advice. The best thing you can do is be there and listen.

LOOK AFTER YOUR OWN WELLBEING

Supporting someone when they're suicidal can be really difficult. Remember to look after yourself, too.

- Make sure you're getting enough sleep, eating properly and relaxing.
- Take time for yourself and do the things you enjoy.
- Know that you can't do everything and it's okay to ask for help.
- Involve other whānau and friends to support each other – don't try to do everything yourself.
- Remember, you can free call or text 1737 to chat with a trained counsellor at any time. They're there for you, too.

MAHI TAHITIA EXPRESSES THE VALUE OF WORKING TOGETHER TO DO THINGS THAT PROMOTE WELLNESS.

WE ARE ALL IN THIS TOGETHER SO LOOK OUT FOR PEOPLE IN YOUR WHĀNAU AND COMMUNITY THAT NEED EXTRA AROHA AND SUPPORT DURING THIS TIME.

NŌ REIRA, E HOA MĀ, KIA KAHA, KIA MĀIA, KIA MANAWANUI. KEEP STRONG, HAVE COURAGE, COMMITMENT AND DETERMINATION TO SUPPORT WHĀNAU AND FRIENDS THROUGH DIFFICULT TIMES.

[A range of free suicide prevention resources can be found here.](#)

All resources are free to download from the Mental Health Foundation's website.

**GETTING
THROUGH
TOGETHER**

WHĀIA E TĀTOU TE PAE TAWHITI

ALL RIGHT?

 **Mental Health Foundation**
mauri tū, mauri ora OF NEW ZEALAND

Commodification Blues

Megan Thee Stallion voice I'm on that self care shit, huh



NANCY GUO

Hey bestie! It's your fave lifestyle influence and certified life coach checking in! Heard shit has hit the fan and the old mental health game has plummeted to a new rock bottom... but no fear! Your lazy ass will be out of that musty bed pronto with the launch of my upcoming mentorship programme... Feeling down in the dumps? This \$10 lavender bath bomb will have those blues fizzling away in no time! Feeling like you're spiralling into a black hole of anxiety? My latest manifestation eBook will banish those silly feelings away forever!

None of us are strangers to the insufferable marketing ploy that self-care has become. Now a buzzword thrown around in aesthetically pleasing bubble fonts through Instagram "boutique" shop feeds, it's hard not to fall into the black hole of commercialised self-care. Products upon products are pushed down our throats, selling a "fix-all" fantasy cleverly engineered to prey on the very insecurities the same industry has helped to create. *Mental health, like every other thing on the planet at this point, has become commodified.*

Let's get one thing straight. I am not here to shit on self-care. Physically taking care of yourself is undoubtedly crucial for our mental health and general wellbeing. We should never feel guilty for allowing ourselves to indulge, whether that's in the form of buying yourself chocolate or lighting a nice candle. When times are not so great, anything that

I am not here to shit on self-care. Physically taking care of yourself is undoubtedly crucial for our mental health and general wellbeing.

helps you out of that Dreaded State of Ick should be utilised.

However, through the commercialisation of self-care, we've increasingly replaced our coping mechanisms with material items. This new wave of "wellbeing" consumerism can numb us from addressing the underlying problems behind certain behaviours. Capitalism is so damn sneaky sometimes! It sure isn't MY bestie. Confronting those deep-rooted issues is so much easier said than done, and honestly who isn't guilty of wanting to run away from those difficult emotions? Sometimes all I want to do is band-aid a surfacing mental breakdown with a face mask instead of unpacking the core reasons behind my self-sabotaging beliefs on a Tuesday night. That shit is exhausting. Not to mention inconvenient. Face masks will have to do until strategic scheduling of melt-downs on Google Calendar becomes a thing.

While I'm no mental health guru, self-care is fucking hard. Even simple tasks like drinking water, showering or even replying to messages can seem like impossible tasks on a bad week. It's also really boring. Forcing yourself to finally do your Leaning Tower of Pisa stack of laundry or just going outside for fresh air is hardly glamorous. Nor influencer morning routine worthy. But these terribly mundane things are so crucial for healthy human functioning — yet very rarely portrayed in media because they're not profitable or "pretty" to look at. This lack of representation only works to stigmatise mental health, propagating feelings of shame especially when it comes to productivity and achievement. We're all expected to be machines that are constantly turning out assignments, projects, social connections and new experiences. If your engine isn't chronically being overworked, you're wasting your life away. With all this mounting pressure it's no wonder that sometimes things just stop working.

The over-saturation of sparkly marketing

What if we all just cut ourselves some slack? What if we just stopped for a moment to let ourselves process and breathe?

gimmicks has also made self-care almost an obsessive obligation. We're expected to maintain nice skin, meditate daily or reach a certain number of steps on our Fitbit counter. But when you boil it all down, these self-care techniques only serve to provide the illusion of control in our lives, intensifying our preoccupations with failure and self-criticism. It's a relentless rinse and repeat cycle. We rotate through feeling shit about ourselves to finding some product or method that temporarily tranquilises our emotions, then after its effects inevitably wear off, we're left empty and numb.

What if we all just cut ourselves some slack? What if we just stopped for a moment to let ourselves process and breathe? It's scary that even self-care has evolved into elaborate cash-grabbing techniques deployed by corporations to suck us further into our goal-oriented and numbers-focused lifestyles. As tempting and easy it is to rely on products and personal growth methods for stress relief, we can only create long-term positive impacts on our wellbeing by tackling those root issues. I wish I could insert some type of poignant advice on how to achieve this — but like many others, this is still a work in progress. What I will say is that learning to care for yourself can be a long and difficult process that looks different for everyone. However, removing that pressure to constantly do and achieve more is definitely a step in the right direction.

Isolated Abroad

For the international student who feels alone.



MELINDA WONG

My most memorable struggle with mental health could only be described as a roller coaster of emotions that lasted for 18 months. At the peak, I was having panic attacks every two days. I felt so much shame around it. It certainly did not help that I was an international student in New Zealand without any family for support. I have always struggled with my mental health to varying degrees at various points in my life. But, this took the cake as one of my worst and longest struggles with mental health.

As an international student, you have a couple of challenges. One of the biggest challenges is navigating cultural nuances. It is easy to make friends but far more difficult to actually make a real connection. So, when bad things happen, you can feel incredibly alone and isolated. Within two weeks, I got cruelly dumped, my family dog back home died, and the handful of friends that I did make decided that a regular house party was better than celebrating my 21st birthday with me. I felt so alone and believed that no one cared for me and that I had nothing to contribute to the world. I also believed that, for all those reasons, I didn't deserve to be here. There were nights when I found myself sitting on the balcony of my apartment just gasping for air because the apartment felt so suffocating, and the world felt so suffocating.

Something needed to give, and I didn't want it to be me.

As I stood on my balcony and stared down towards the street, I decided that it was time to seek help. But, every step of the way, I had some kind of minor roadblock towards booking an appointment with university counselling which made me justify putting it off. You needed to know your health insurance number, which frankly I forgot when filling out the form, so that presented enough of a barrier for me to put it off for a couple of months. Then, the second time, I needed to wait until there was a spot for me. Booking it felt so pointless. I mean, I could get better in a few months, right? Wrong.

When I came home, my family, unaware of my struggles, started to think that I became unmotivated and lazy. And, I don't blame them. They didn't know I was depressed. Heck, I didn't even know. But, one day, as I was out doing errands for my family, I drove past a counselling centre. Upon setting my first appointment, I remember telling a close friend about it. And, though well-meaning, I found her response to it a little troubling. "Good on you, Mel. But, don't let going to therapy tell you that something is wrong with you.", she said. This made me realise: my actions and these words were a clear reflection of our culture when it came to mental health.

Food for thought: Why is it that we are quick to encourage other people to seek help and commend them for doing it? But somehow, when it comes to us, we would instead *avoid* confirmation of the issue via an official diagnosis and treat it. When it comes to issues around mental health, there's an apparent dichotomy between what we say we believe and what we actually believe. We seem to empower anybody else but ourselves.

As I sat there, I remember feeling like I could feel my heartbeat in my chest. *What if she judges me for this? My problems seemed so stupid.* But it wasn't anything like that. Dr. Yap

was kind and listened to every word I had to say whilst maximising on her tissue box. I was diagnosed with severe depression, anxiety, and panic disorder. We even set a schedule for me to go through Cognitive Behavioural Therapy which helped me heaps! I was able to look at managing my problems and eventually I did get better! And now, I am as happy and content as I can be living in New Zealand with an amazing set of friends who now feel like family.

And of course, as an international student from a conservative culture, I know how telling loved ones about these things is daunting. And, no matter how optimistic some sites can be, the honest truth is that sometimes the reaction you get can be very disheartening. But, if it offers any comfort at all, this is usually just an initial reaction. From my personal experience and others as well, any negative response is usually more about them than you. I am in no place to offer specific advice, but I do think time will heal.

If you're isolated and abroad, just know this: you're not alone. I've talked to plenty of people in the same situation as us. Some spend the better part of their first few years just crying every night. You can do this, and you're not alone.





Landlord's Weekly

Lockdown Edition

It's been a tough time... for us landlords. Week to week under this Taxinda clampdown, we've been living from other people's paychecks to other people's paychecks. How are we supposed to make do in this situation? We're barely doing anything for a living, and we're still only just making tens of thousands in profit. We're being left behind. And now the govt wants to make Covid a permanent immigrant in our country? No, that's just not right. Here at Landlord's Weekly, we're seeing the signs, and we're fighting back.

Languishing in Lockdown

As a landlord, I'm not used to the concept of friendship. When I open my eyes every morning, no one is by my side, my bed's wallpaper blisters in my presence. The human spirit, the joy that encourages companionship and communion over the joys of life, went out with the placenta at my birth. Plant life withers when I approach it and the smell of disintegration litters the air wherever I walk, for I bear the mark of Cain deep within what remains of my soul. Anyway, fellow landlords, are any others of you missing the random spot checks of your tenants? I sure am. When I would arrive to micromanage their existence, I would feel a stirring in the collection of ashes that make up my heart. Seeing their barely restrained loathing at my presence was the highlight of my week, as it was the closest I could get to the human connection. The loneliness was briefly over. Don't take these checks for granted, landlords! You don't know when you'll be able to get such a smile on your face again.

With fondness,
Edna Fibrosis

Tauranga Just Won't Be the Same

It's been a while since I've had to change locations, but with how Auckland is currently, I just can't afford to stay here once Level 3 ends. Dilip Patel, if you're reading this, you were the best landlord there ever was. I'm gonna miss you, man. I am sorry to be moving on. I won't ever forget your scowl when I dared to have some autonomy by informing you that the missus and I were expecting. You're a top bloke, and I hope our replacements learn to appreciate you for the irreplaceable guy you are.

Cheers,
Greg Clunge

The Cat Dilemma

The other day, my tenant of ten years asked me for permission to own a cat. They live alone, and promised to take care of them like any responsible pet owner. I'm still thinking about it. On one hand, in this increasingly atomised world, full of alienation, owning an animal is proven to lift one's spirits. On the other hand, that's not my problem! And what about the carpet? What if I wish to kick them out in two months and raise the price by \$100? These are the moral dilemmas of being a landlord, I tell you. No right answer.

Many decisions to make,

Boris Bunion

Quick Q+A

"Do my tenants have any legal right to resist if I were to turn their apartment complex into an interconnected abode to carry out my torture games of sadism and redemption through pain and complex machinery?"

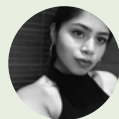
As long as the tenants are warned a month in advance of the tenancy ending, then no worries! Hope your games go well!

"Hey LW, chuck Some Piece of Shit in Manukau some advice real quick. I don't wanna give their deposit back, but I have some smart tenants that know all the usual tricks, and lockdown has sharpened their minds. However, I'm a real miserable cunt and have no intention of giving a single coin back, so I want to hear from the best: what last-ditch excuse can I use to fuck over these hard workers out of their rightful \$\$\$?"

Hi there! Our patented Ol' Reliable is to claim the bathroom tiles are permanently discoloured, especially if they are the intentionally awful kind with many interlocking pieces for grime to seep into. Even if they produce photo evidence claiming otherwise, the grooves connecting the tiles are so impossible to keep fully clean that you can reject their claims anyway. Wish you well!

Detached

Dragging on, dragging on, dragging on, dragging on...



SOPHIYA SABAPATHY

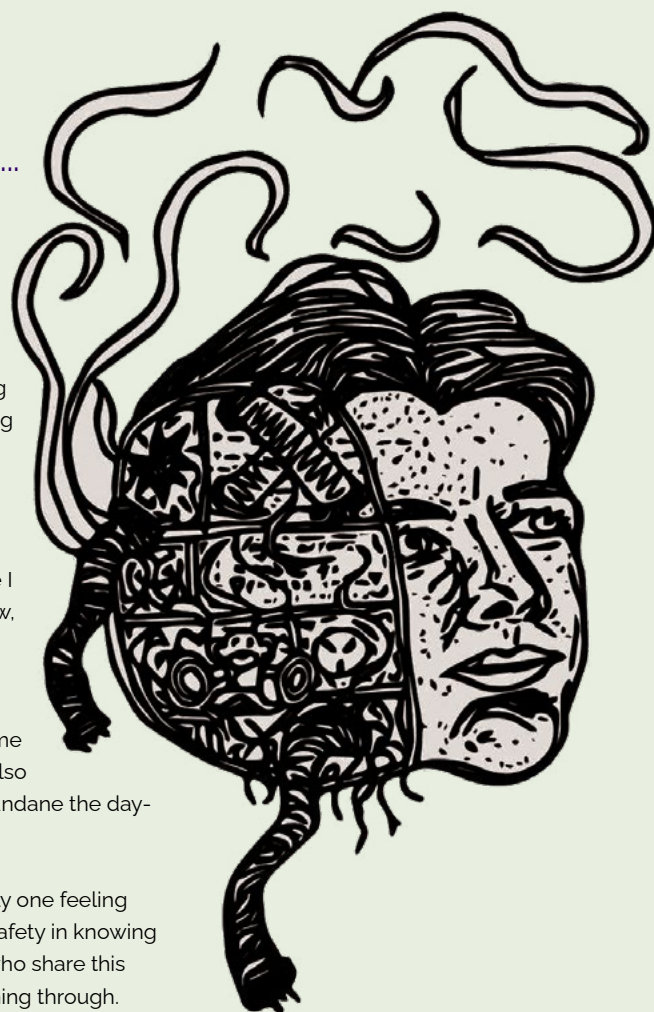
Weeks have passed by in lockdown and it is all too easy to feel like the days blur together and time has warped into one long day. Scratch that — it feels like years dragging on. No, surely it feels like one long day. Honestly, none of it feels real anymore. There's nothing to look forward to except Monday's 4pm announcement, which somehow is always a follow-up from a spike in cases over the weekend. Or in the most recent conferences, an announcement that has left people even more confused than before. How can I be expected to stay present and grounded when everything is so uncertain?

Being detached feels as though my body is in attendance, but my mind is in an entirely different dimension. I stare into the distance and allow my eyes to shift out of focus. I'm aware of its occurrence yet my mind stays empty. It's a strange comfort because everything becomes quiet. Everything becomes numb. The numbness isn't quite as comfortable as Pink Floyd claims once my eyes shift back into focus and I am overcome by a dense, concentrated energy that resides in my chest. Being surrounded by the same people every day also produces a similar feeling. Two branches stem from the familiarity of those around me. The first is the comfort and deeper bonds formed over this duration. The other only furthers the feeling

of things remaining still and stagnant. Everyone is dealing with their own demons during this time and I often feel guilty for not being able to support those around me in the way I usually know how. I listen in a passive way where I hear the words and somehow, on autopilot, I respond. My mind experiences a system overload of sorts. That's not only the reason I have become so detached, this feeling is also further propelled by how mundane the day-to-day has become.

I'd like to think I'm not the only one feeling this way. There's a sense of safety in knowing there are people out there who share this experience and are still pushing through. Being detached is a common experience whether those who are confronted with it are aware of what they're feeling or not. With any big change or time of precarity, our bodies find different ways to cope. It is important to feel what is needed, then eventually conjure up any amount of durability left inside us to tell ourselves to not be afraid of the uncertainty. As much as I'd like, it won't happen overnight. The process of accepting that our lives are floating in the air right now, alongside telling ourselves it will also be okay regardless, will help in time. Our journeys are not linear. There are occasions where escapism seems like the only viable option. This doesn't even need to be in the form of something wildly unhealthy. Wanting our favourite takeaways or buying that cute dress that is way out of budget will also take our minds off the emptiness. We certainly cannot guilt ourselves for doing this — because it does feel good. We are allowed to do what we can to feel good. Especially while we navigate this phase in our lives.

What helps me, and what I hope would help anyone that reads this, is sitting in my room with music that draws out a feeling. I'd just stare at the ceiling until I feel something. I have to push myself to, even if my body is



determined to resist. I call my best friends and reach out for help in ways that make me feel comfortable. Whether it's a video call where we just talk shit for hours, or even reading words of assurance that I will eventually be okay through text. It makes a world of difference. Find out what works for you, and the only way to do that is by making yourself feel absolutely anything. Once the heaviness of being numb is released, listen to what your gut is telling you. *What would make you feel better right now?* Only you know the right solution for yourself. Consequently, you can communicate to your loved ones how they can best support you.

A feeling might be common but lived experiences are unique to just you. I'm not here to say what has already been said in millions of articles all over the internet. Wake up early, have a routine, exercise, etc. I think we all know that stuff already, and it can often be hard to do all those things when there is an all-consuming (lack of) feeling that is being experienced. We do what we can to get by, and sometimes just listening to yourself — as simple as it sounds — can go a long way.

Everyone is dealing with their own demons during this time and I often feel guilty for not being able to support those around me in the way I usually know how.



WHO ASKED YOU?

Mental Health Edition

Here at Who Asked You, we pride ourselves on giving very bad advice. For one week only, instead of dishing it out, we're going to teach you how to **RESPOND** to it.

Here are the worst pieces of mental health advice that stupid motherfuckers will **NOT STOP GIVING**, and how to shut them down.

ADVICE #1: Just think about all the people who have it worse than you - that'll make you feel grateful!

RESPONSE: You're right Dr. Fuckhead! Thinking about all the misery and pain that exists in the world that's even **WORSE** than what's currently crippling me will make me feel heaps better! Here is your diploma in psychology, you wet sack of decaying clams! Spread your wisdom as far as you can, or better yet, sew your mouth shut with twine!

ADVICE #2: Go for a run! It'll get your endorphins going!

RESPONSE: Running was created by the devil to separate the liars from the truth tellers. Anyone who claims they enjoy it is going to hell for deceit. Running is responsible for more deaths than it has prevented, and if you give me this advice again I will just assume you want me dead and report you to the police for threatening my life. Enjoy jail, jackass.

ADVICE #3: Just try not to think about it. You'll feel better if you just choose not to fixate on it.

RESPONSE: Wow, you are as dumb as a bottle of nail polish. Hey, next time you have a cold, just don't think about your runny nose. That'll stop the snot running down your face and dripping onto your shirt, you hollowed-out watermelon full of expired mayonnaise.

ADVICE #4: See, you're smiling! It can't be that bad.

RESPONSE: The reason I've parted my lips is because I'm preparing to swallow you whole like a Burmese python. Get ready to meet my stomach acids.

ADVICE #5: Just think positively!

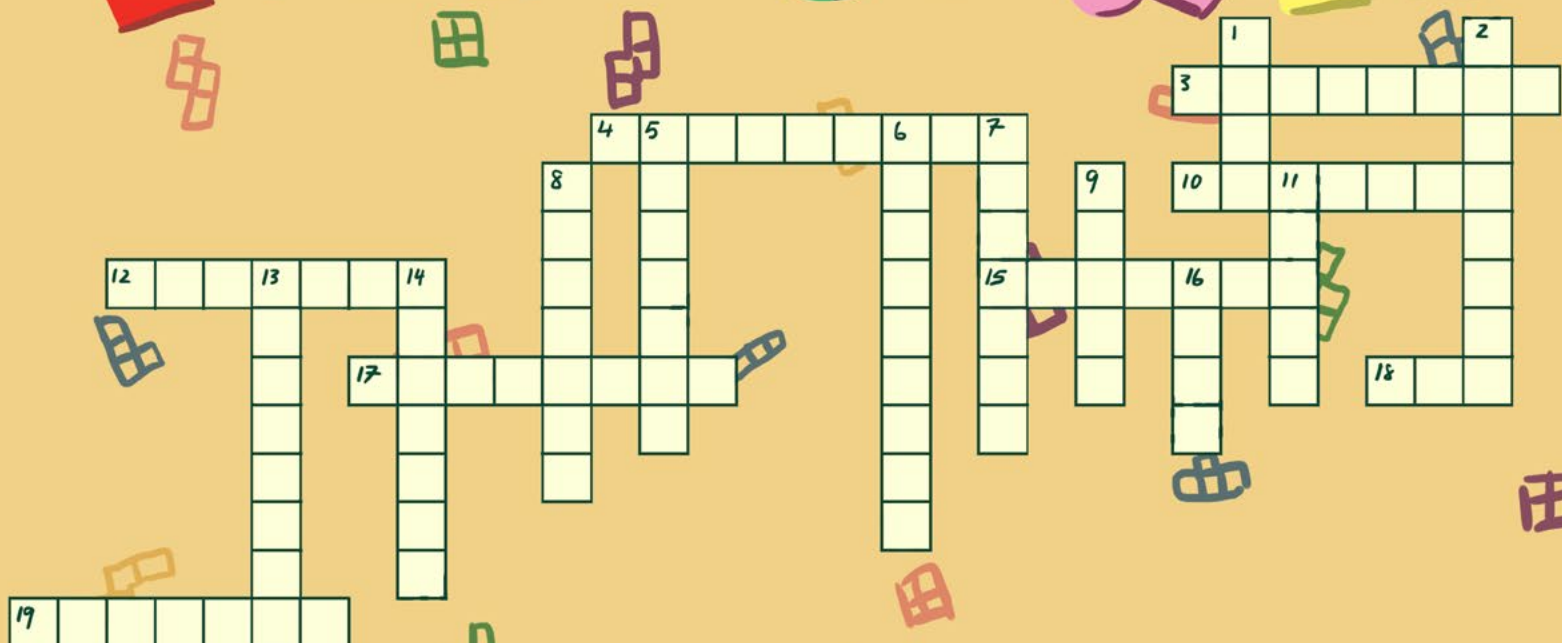
RESPONSE: Okay, I'm **positive** that you're the dumbest motherfucker since the guy who built the Hindenburg. I'm **positive** this is the worst advice that's been given since "*nah, Captain, I reckon we can go around that iceberg.*" I'm **positive** that you're going to find a severed horse head in your bed tonight, and I'm positive that I'm never going to speak to you again.

ADVICE #6: It's bad to be dependent on medication, you should learn to cope with your emotions naturally.

RESPONSE: You're absolutely right Samara*, you're dick-punchingly right with this take on my personal medical situation to which you are not privy. Hey, while we're at it, let's play piggy-in-the-middle with your insulin pump! Let's use a hammer to grind your allergy medication into a fine powder that we can blow away on the wind! Come, get in my car, I'm going to drive us passenger-side-first into a brick wall and hand you a goddamn protein shake when you scream for help with your shattered skull, you human incarnation of a Year 4 recorder recital. Don't worry about that hand I've wrapped around your throat, people are just *too dependent* on oxygen these days.

**Writer's Note: the person giving you this advice will definitely be called Samara.*

PUZZLES



Down

1. Medication usually comes in this form (4)
2. To abuse someone via tricking them into thinking they are crazy (8)
5. Tony (blank), mob boss who goes to therapy (6)
6. The good stuff that makes ya brain happy (9)
7. A type of therapy characterised by intense physical catharsis (7)
8. Characterised by manic and depressive shifts in mood/behaviour (7)
9. Powerful benzo often used recreationally, palindrome (5)
11. 2003 Beyoncé was so in love, she was this (5)
13. Movie where Ed Norton fakes having multiple personalities (6, 4)
14. Bird app guaranteed to make you mentally ill (7)
16. Selective serotonin reuptake inhibitors (4)

Across

3. Former psychiatric asylum, now home of Spookers (8)
4. One of the two main types of mental health diagnoses, begins with P (9)
10. Don't mix this and your medication (7)
12. Wellbeing Committee can provide this, rhymes with rapport (7)
15. Inability to recall, or occasionally, form memories (7)
17. Mental health support helpline, underfunded for many years (8)
18. Owning one of these is good for companionship and one's happiness :) (3)
19. She was freed recently! (7)

		7	9		2	1		
	1	2		6		9	3	
5								2
	6			4			2	
			8		3			
	2			5			4	
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	5	6		7		4	9	
		3	2		4	7		

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HOROSCOPES

Hellooooooooooooo nurse! *Delma Vinkley's* horoscopes are here to cure you of all your ills this week. Or not. Maybe she's on strike.

Aries (Mar 21 – Apr 19) *Lorazepam*

What are you nervous for? It's not like you have much going on, honestly. So what is there to stress about? Take this nothing period of your life as a moment to reset and get clear. Lucky numbers are 4 and 34.



Taurus (Apr 20 – May 20) *Ibuprofen*

You're gonna give yourself a headache if you keep stressing about the problems your brute force cannot change. Or keep doing it, I don't care. Not my problem, I warned you. Lucky numbers are 90 and 92.



Gemini (May 21 – Jun 20) *Tramadol*

Tramadol always makes me throw up, and well, you need to do that. Not literally, but all the negativity and bile piling up in you lately needs to be exorcised. Get rid of it, you're making me sick. Lucky numbers are 32 and 37.



Cancer (Jun 21 – Jul 22) *Prednisone*

You know what you need to be immune to? The need to correct others when they criticise you. You might look a little unrecognisable to others since before lockdown, but no one needs to know how you feel except you. Even then, you should always be wondering what you actually feel. Lucky numbers are 61 and 62.



Leo (Jul 23 – Aug 22) *Zopiclone*

You're up all night thinking about your mistakes, like all the people you could have charmed better. Your head hits the pillow, but the sweet embrace of the night doesn't come. It hurts to know that you're not perfect. But you need to calm down and get some sleep. What else can you do? Change yourself? Lol, good luck with that. Lucky numbers are 17 and 19.



Virgo (Aug 23 – Sep 22) *Panadeine*

Panadeine is such a cute name for a baby, oh my god? Gonna keep that one. I don't really have any advice for you now. Get pregnant, I guess? A baby could be some fun, god knows you need a break from *The Sims*. Lucky numbers are 70 and 80.



Libra (Sep 23 – Oct 23) *Valium*

It's time to stop living in a dream world, and contribute back to the people who have been metaphorically sponge bathing you, waiting for you to come back to reality. Wake up, Dorothy. No more distractions. Times are getting hard, and you're dragging your feet, trying to stay in your ethereal wonderland of no responsibilities. Enough! Lucky numbers are 66 and 99.



Scorpio (Oct 24 – Nov 21) *Fluanxol*

You know what? Fuck shit up. Get mad. Yell at someone today. Throw a brick into the tv. Delete someone's save file. Just really take a massive load on the floor, and blame it on the dog. Become primal. Absolutely lose your fucking mind. You know you want to. Give in to those urges. You deserve it. Lucky numbers are 0 and 100.



Sagittarius (Nov 22 – Dec 21) *Benadryl*

More, more, more. You just can't help but want it all, constantly. You want so much out of life, your expectations are crushing you, like a crab barely able to lift the boulder it lives under. Get out from under your dramatic dreams, or be crushed by them. Lucky numbers are 45 and 49.



Capricorn (Dec 22 – Jan 19) *Wellbutrin*

Well-well-wellbutrin! Look at you! You're one of the few of us really thriving lately. All your efforts are working out. Keep striving, we could all learn from you. Lucky numbers are 55 and 65.



Aquarius (Jan 20 – Feb 18) *Venlafaxine*

Hey you, look in the mirror. More like venla-foxy, right? Smmmmmoking! Don't know if the average Craccum reader has seen *The Mask*, but anyway. You're gorgeous this week. Appreciate it! Lucky numbers are 1 and 21.



Pisces (Feb 19 – Mar 20) *Citalopram*

We've been locked away for so long and your biggest fear is when we are free for good, you won't want to do anything. "Isn't that terrifying?" But idk, just chill out. Don't speak your future into action. Lucky numbers are 2 and 74.





**Student
Job Search**
Tauira Rapu Mahi
**Where
Talent Meets
Opportunity**

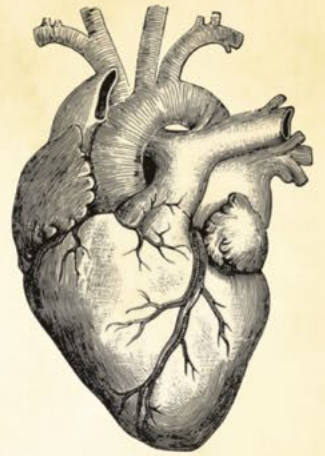
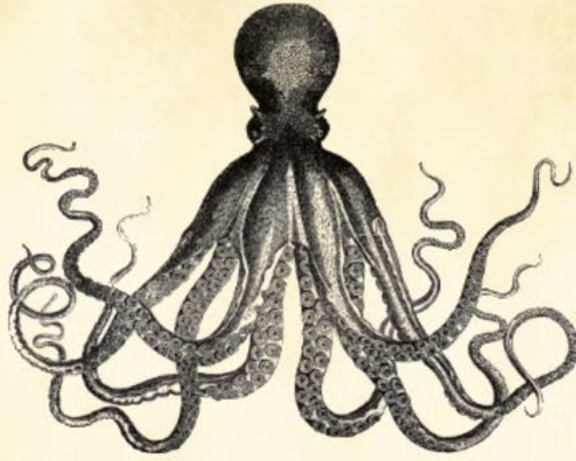


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with that.**

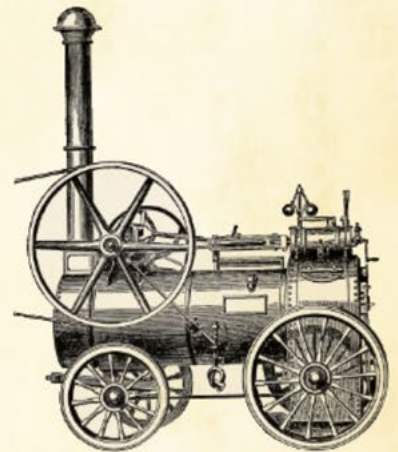
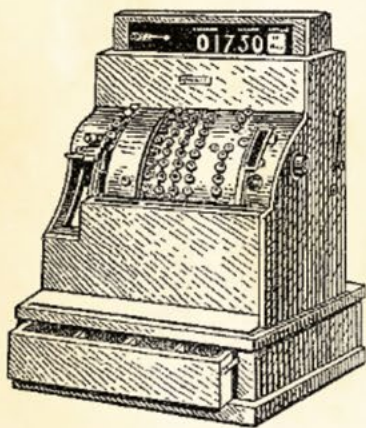
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