

CRACCU M

THE UNIVERSITY OF AUCKLAND STUDENT MAGAZINE

ISSUE 23, 2020



The Mental Health Edition

This week's edition focuses on mental health and wellbeing. Students who have struggled with mental wellbeing open up about their experiences, and share their advice.

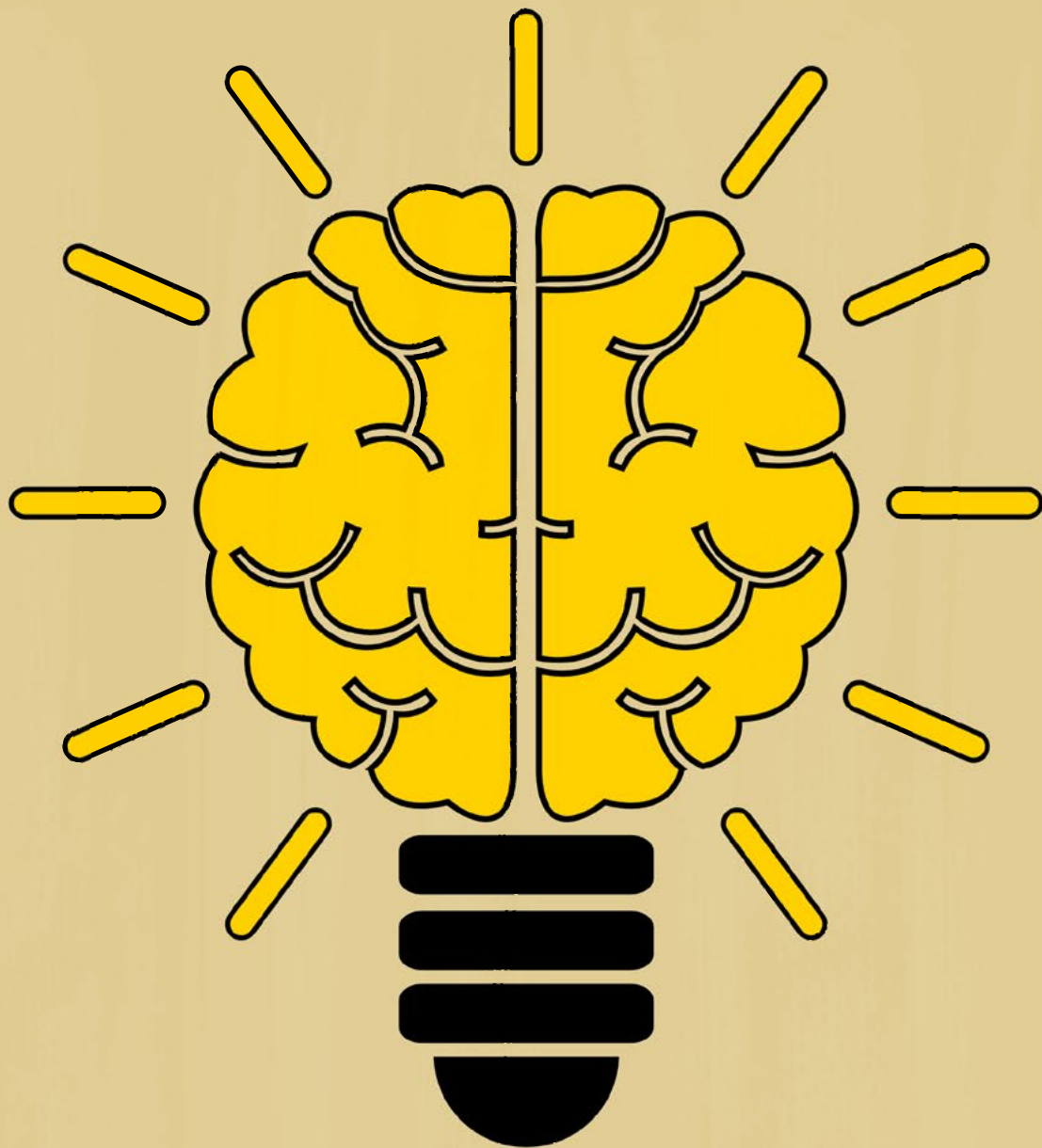
Dawn Freshwater Offers to Sell House

Dawn Freshwater has offered to sell her \$5 million home to help pay back the university's debts. Send-off flat-warming, anyone?

PAGE 07.

University Tracks Students on Social Media

Documents released under the Official Information Act show the university has been tracking students on social media. Better be careful with those nudes, eh? PAGE 06.



AUSA PRESENTS

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SHADOWS
BAR & EATERY



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Mental Health

Cam says:

This week is Craccum's mental health issue and we've truly been inundated with contributors who want to write about and share their mental health experiences. We are proud to contribute to efforts to share mental health stories and continue to open the conversation - particularly in a year where people's mental wellbeing has largely worsened as a result of the world around us.

The University recognises that good mental health is key to student wellbeing. There are initiatives in place to support mental health, but the University can always do more - especially when students are overwhelmingly expressing that mental health is worsening across our cohort. So this week, my message is plain and simple: The University can do more to support mental health. It's a sweeping statement but it's true.

I want to discuss something important: Improving mental health is about holistically supporting students and creating an environment where good mental health can flourish and poor mental health can be treated. This reaches beyond health and counselling and into all areas of the University. Any way in which student mental health can be strengthened and supported makes a difference. It's reducing barriers to accessing resources where needed, it's removing compassionate consideration fees, helping financially where possible and being open to having creative and practical ways to support student wellbeing.

Students must feel that the university is standing alongside them and in solidarity with their struggles - whatever they are and however they are contributing to their health.

The University is trying, but there is always more to do.

Take care,
Cam



Dan says:

I want to use this opportunity to talk about an issue related to mental health - compassionate consideration application (CCA) fees.

For those of you who aren't aware, the CCA fee is a small fee a student is charged if they fail to sit an exam because they are sick, mentally unwell, or have suffered an accident. Students who miss exams have to pay the fee, or risk having their exam marked as a DNF, which could potentially cause them to fail their papers.

I hate these fees with a passion. That's because they prevent students suffering from mental health issues from accessing the support they need, when they need it most.

The fees are stupid on the face of them - they're little more than extortion, a 'pay this or you will fail your class' fee the university charges students who are sick or mentally unwell. Worse than that, from what I understand, the fees aren't even used to cover any costs. Most of the process for lodging a CCA is automated, so there aren't any real monetary costs involved. Instead, the fee is only there to dissuade students from using the service unless they have a 'real issue'.

I detest that logic.

The CCA fees, in their current form, exist because the university assumes that any student who is sick or suffers from a mental illness must be lying. They are a real, financial barrier students face to getting help for their illnesses. Worse than that, they're a mental barrier too - because the existence of the fee implies the university doesn't believe its students, and because the application itself often requires students to spend hours and hours of their time proving they are ill (at a time when they are at their lowest).

The university has always said it is serious about tackling mental health issues among students. The university has done a lot of good work in this area. But there's still a lot of room for improvement.

That improvement could start with the university removing compassionate consideration fees. Not just for this semester, but for every semester. They're an unnecessary expense the university foists on students who are suffering because they are sick or mentally unwell. They're pointless. And they should be scrapped.

Thanks,
Dan

Craccum Wins Big at the Aotearoa Student Press Awards

ELLA MORGAN

Craccum Magazine won a number of categories at this year's Aotearoa Student Press Awards, taking first place in five categories, and placing second or third in an additional five categories.

The awards, judged by a number of media industry professionals, highlight the quality of student media across a number of categories. *Craccum* writers took out the Best Photography, Best Sports Reporting, Best Reviewer, Best Student Politics Reporter and Best Headline categories. The magazine also placed third in the race for Best Publication.

Critic Te Arohi from the University of Otago and *Salient* from Victoria University of Wellington were also clear frontrunners on the day, with the three magazines taking out a large proportion of the awards. *Critic*

ultimately won the Best Publication category, taking it out for the fourth year in a row.

The event was held in Christchurch this year, with representatives from five different magazines in attendance out of the eight that were nominated for various awards. In a particularly moving moment, *Critic* editor Sinead Gill used her Best Publication acceptance speech to highlight the need for greater funding for student media in New Zealand.

The full selection of Aotearoa Student Press Award winning *Craccum* articles will be available to read in *Craccum's* "Best Of" edition - a special, one-off edition highlighting the best articles of the year which will appear on *Craccum* stands throughout the exam period.

Documents Reveal Flawed Student Consultation Processes in Developing the University's COVID-19 Response

ELLA MORGAN

Documents obtained under the Official Information Act have raised questions around the university's consultation with students and the Auckland University Students' Association (AUSA) in forming its COVID-19 policies.

An email from the university claimed it had informally consulted with students and the AUSA regarding on-campus and online learning.

The majority of information that aided the university's response was shown to be qualitative, including consultative forums with students, some of whom were said to "express a desire" for returning to campus for practical components of their courses.

From this, the university took the view that students preferred returning to campus as soon as possible, despite AUSA's student survey showing that only 10% of students felt comfortable returning to in-person classes under Alert Level 2.

The university's plans were ultimately disrupted by Director-General of Health Dr Ashley Bloomfield making it clear that universities were not exempt from Level 2 guidelines on mass gatherings. Learning activities subsequently remained online until Auckland returned to Alert Level 1.

Some signs point to the AUSA having a say in decisions around how to operate at each alert level. In a Google document outlining the university's approach to learning at different COVID-19 alert levels, it was detailed that exams would be conducted over 24 hours at Alert Level 4.



However, acting AUSA President Emma Rogers commented "Take this out - I wouldn't commit to 24 hours" regarding this policy.

The university's current approach, listed on its website, does not include 24 hour exams under Level 4, and only states that exams would be conducted online. This may mean the AUSA was successful in changing this policy.

Earlier this semester, the AUSA criticised the university's COVID-19 response, saying that it had misrepresented what AUSA advocated for and has not adopted AUSA recommendations, such as preparing for exams to be held online and applying a universal grade bump policy for Semester Two.

University Employees Have Been Tracking Students on Social Media, May Have Been Posting Anonymously

DANIEL MEECH

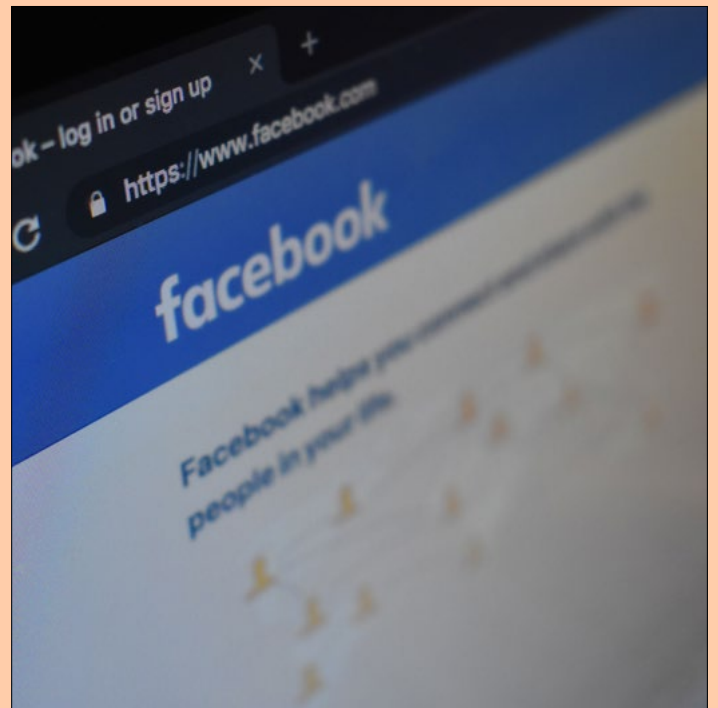
Documents released under the Official Information Act show that the university has been tracking students on social media for several months. The university appears to have used this information to gain an insight into how students were reacting to online learning, and how students would react to new information from the university. The documents also suggest a university employee may have anonymously posted on student media sites more than once to stimulate discussion and provide information.

The documents show that the university began tracking Craccum's print and online articles, AUSA's social media pages, UoA: Meaningful Confessions, r/UniversityofAuckland, Overheard@UoA, and TrueOverheard@UoA on the 30th of March – a few days after Craccum began leaking internal university emails onto Facebook.

The university recorded student activity on social media on a google document, which it updated throughout the year on an almost-daily basis. It made note of articles and posts which were “snippy”, and recorded how students reacted in the comments section to various pieces of information and news.

For the most part, student names were not recorded in the document. However, the document did name some students, and several notes included links to student profiles on social media websites such as Instagram. Screenshots of some posts were also taken. No effort was made to remove the names of the posters from these screenshots. The document also directly quoted students who commented on posts and articles online. Although the quotes in the document were taken anonymously, Craccum was able to find the name of several of the people quoted, by searching for the quote on the Facebook page from which it was taken.

The notes taken were very basic at first. The first note in the document (taken on the 30th of March) did not mention any of the student media pages by name (except for AUSA) and commented very generally on how students were reacting to online learning. It was around 180 words long.



However, as the year went on, and the university began monitoring more and more social media pages, the notes became more detailed. By early September, the notes were around 800 words long. Each note contained several hundred words on individual student media pages – Craccum, AUSA, UoA: Meaningful Confessions, Reddit, and more – and comments from students were often grouped together by topic (e.g. posts and comments to do with graduation, posts and comments to do with exams, etc). Notes frequently included links to memes made by students, and they often contained information about seemingly irrelevant posts – among other things, the document analysed Craccum erotica articles, anonymous posts about the price of muffins, posts about the benefits of having a Sugar Daddy, rap videos published by lecturers, TikTok videos made by students, an article published about making money through Only Fans, and more.

One note left on the 13th of May suggests that the university may have done more than simply monitor online student media. It suggests they might have been posting anonymously online to stimulate discussion and provide information. "Started a Reddit post on being pre-med", it reads, "no comments yet, 20 upvotes".

Craccum was able to find that Reddit post online. "Noticed that every second post here is something to do with medicine at the University of Auckland, so I made a new subreddit which is specifically for discussion of anything premed," the post states.

Craccum tracked the Reddit account which made the post and found the same account had been used multiple times to post information relating to the university. "REMINDER: APPLY NOW for 2021 entry into clinical programmes," one post left by the account reads. "Important update regarding the impacts of COVID-19 on clinical programme entry for 2021 (CST)," another post reads. Another post gives "MBChB admissions information". The Reddit account used to make these posts was created only a few days before the person monitoring student media noted they had "started a Reddit post".

Craccum is unable to confirm whether the same person who monitored online media created this account to post university information anonymously on Reddit. However, the wording of the note left on the 13th of May ("started a Reddit post"), the timing of the creation of the Reddit account, and the Reddit account's subsequent history of posting university information all seem to indicate this may have happened.

The person taking notes also occasionally passed judgement on various posts, comments, and articles. In a note made on the 31st of March, they said they were generally happy with Craccum's latest edition, but didn't like the article about flirting over zoom. In a May note, they noted they had found a "very strange erotica style article" in the latest Craccum. The article they described featured a student having sex with their online exams. In another note, the person monitoring online media said the Law Society Meme Page was "fun" and "going strong". On the other hand, they thought the university hall confession pages - which they had only just found that day - were irrelevant and not worth tracking.

The UoA: Meaningful Confessions dumping war features in notes made by the university, as does the "ongoing saga" of "the punch in Albert Park" ("there was no conversation about a wallet and she takes back the apology," one note reads). Memes about Dawn Freshwater, Ashley Bloomfield, Stuart McCutcheon, COVID-19, the university, and more appear linked within the document. TikToks about the university are commented on, as is a Craccum article about making money through Only Fans (a "porn site", as the person reading the article noted). Videos made by bloggers about the university are linked within the document, as well as a "funny video of a rap by Professor Roger Booth".

Craccum is hopeful this article will appear in the document too.

Dawn Freshwater Offers to Sell House

DANIEL MEECH

Vice-Chancellor Dawn Freshwater says she has asked the Chancellor and University Council to "reconsider" the decision to buy her a house to live in. She is asking the university to sell the house instead to help reduce some of the university's debt. Freshwater also says the decision to buy the house is currently being reviewed by the Controller and Auditor-General of New Zealand, a public official tasked with investigating public institutions to make sure they are not mispending money.

Earlier this year, the university announced it had purchased a \$5 million home in Parnell for Dawn Freshwater to live in. The decision was controversial, with students and the New Zealand Union of Students Associations appearing in news articles to call the decision to purchase the house (which featured a lap pool and manicured gardens) "frivolous". The university defended the purchase by arguing the house had dual functions: it would provide Freshwater with somewhere to live while she worked, and it would serve as a venue to hold university functions. Freshwater was expected to pay rent while living in the home.

However, in a recent email to staff, Freshwater noted that COVID-19 had "significantly frustrated" any plans to use the house as a function area. Because of this Freshwater has asked the university to consider selling the house. "I consider it beneficial for the capital value of this university property to be returned so that it can reduce our debts," she wrote.

Freshwater briefly noted in her email that the Controller and Auditor-General of New Zealand was reviewing the university's decision to buy the house. The Controller and Auditor-General is responsible for investigating allegations of abuse of public money, mispending, misappropriation of funds, and more. The Auditor-General is expected to keep public entities (such as the university) accountable, by auditing their financial statements. The position is currently held by John Ryan.

This is the first *Craccum* has heard about Ryan investigating the university for the purchase of the house. *Craccum* was unable to find any information about the Auditor-General's review on the Auditor-General's website; we have begun the process of submitting an Official Information Act request to understand more.

WHAKARONGO MAI! / LISTEN UP!

How do Auckland students look after their mental wellbeing?

ELLA MORGAN

For our mental health themed edition, Craccum caught up with six students to find out what they do to look after their mental wellbeing.

Emma, 21, Arts

"I look after my mental wellbeing by making time to exercise. I love to go for long walks, or head to a reformer pilates studio for a class if I want to feel boujee. When you exercise, it takes your mind off whatever you are stressing about and you're forced to live in the moment. I always feel better afterwards, and am better placed to face whatever challenges there might be ahead for me. I especially love walking because it gives me time to appreciate the beauty of our natural environment and notice all the little things I would usually miss if I'm rushing off to uni or the supermarket."

John, 28, Arts

"The best thing I've learnt to do is organise and plan out my time. Having a million assignments due and exams for all of your courses might seem daunting, but separating out your study and personal time gives you a clear plan of attack and also ensures that you have some time for yourself and don't get bogged down in coursework. I recommend using a diary or google calendar. Also, I've learnt that preparing for your assignments well in advance helps you feel so much better than cramming at the last minute. Easier said than done!"

Leah, 21, Commerce

"You know yourself better than anyone else, and it's important to recognise when you aren't really coping well and seek help. It feels so much better when you do reach out, whether that's to your friends, whānau or professionals like doctors or counsellors. If you are struggling there are people that are there to help you. If I'm in that position I know I have friends I can count on to be there for me."

Dan, 22, Law

"This is going to sound so lame, but going for walks really helps me relax. I'm a serial over-committer - I have a weird habit where I constantly burden myself with loads of different projects and promises and tasks until I have no free time left. For the most part, I like staying busy, but it does sometimes get to the point where I feel like I'm drowning myself in too many commitments. Going for a walk really helps to relax me because its time where I can't be productive. It's 30-60 minutes of the day where I can listen to music, chat with friends, or just unwind without feeling like I'm wasting my time."

Billy, 24, Arts

"It sounds so... banal, but there is really nothing better for forcing myself to calm down than putting on a podcast, and opening the Bubble Cloud app on my phone. It's like a more frustrating Bejeweled, and it requires perfect concentration after the first 20 levels. Hearing the person in my headphones drone on about the Elder Scrolls or the Iraq War or whatever - when combined with Bubble Cloud, it just sends me off to a different place than where I currently am."

Rose, 21, Arts

"Food is my main way of coping with stress. I find baking and cooking for myself really relaxing, but I also love to reward myself for getting through the stressful times with my favourite foods. When I have two thousand words to write and two days to do it, the only way I get through it is knowing that I can have a Big Mac for dinner. Also, I do that thing where you get a piece of your favourite candy for every 200 words you write. It makes the whole thing way more relaxing. There's nothing better than a delicious dinner with friends (or in a darkened room with no witnesses) to de-stress you in the busy season."

Names have been changed to protect students' identities.

MaKarongo 3 Mai!

You know yourself better than anyone else, and it's important to recognise when you aren't really coping well and seek help.

I've learnt that preparing for your assignments well in advance helps you feel so much better than cramming at the last minute. Easier said than done!

Having a million assignments due and exams for all of your courses might seem daunting, but separating out your study and personal time gives you a clear plan of attack and also ensures that you have some time for yourself and don't get bogged down in coursework.

When you exercise, it takes your mind off whatever you are stressing about and you're forced to live in the moment.



@juliaaazhu



Students Allege Mistreatment Working in the Hospitality Industry

ELLA MORGAN

University of Auckland students have alleged widespread experiences of mistreatment and exploitation while working in the hospitality industry.

Two workers, who are past and current employees of a popular Auckland nightclub frequented by students, have spoken to *Craccum* about their experiences. Both described similar experiences in dealing with management, and reported an all-round negative work environment.

The first student, who worked at the nightclub in her first year of university, said that the club's manager regularly talked to employees in a way she deemed disrespectful and dismissive. On one occasion, she notified her manager she was sick and he responded by telling her to confirm if she was still sick later,

and come into work.

The second employee reported "bullying-type behaviour" within the workplace, issues with receiving pay and in some cases, being charged for minor issues such as broken glasses.

Another student, who works at a different hospitality venue, reported more concerning experiences of mistreatment. This ranged from being undertrained and shifts being regularly understaffed, to verbal abuse by senior management.

"You aren't given a break, when I started you'd get a five minute break but after a while in my shift (10pm until 6am) I wouldn't get a break. If I asked they said we weren't allowed breaks anymore," says the student.

"Managers don't know how to talk to their staff in a respectful way. I called in sick once and I was literally hung up on my manager after I said I couldn't come in - I rang at 11am and my shift wasn't until 10pm."

The student also reported that a culture of bullying behaviour was facilitated among staff at the nightclub.

A fourth student, who works at a separate Auckland city nightclub, told *Craccum* of their

experiences with bullying and harassment in the workplace.

"I certainly do not feel safe at work. The bouncers, who are meant to help us if we are being abused by customers, are known as being creepy and I've felt harassed by a lot of their comments to me," the student says. "It's bad enough dealing with drunk people and the things they say, let alone getting this from the people who are meant to be there to help you."

The experiences of these four students seem to point to underlying problems with the culture of the industry, and relationships between staff and managers. All four reported at some point felt disrespected by another staff member, usually in an authority position within their workplace.

These allegations come at a time when the industry is increasingly feeling the effects of the COVID-19 pandemic. Businesses have reported a shortage of workers due to the sector's reliance on migrant workers to fill many positions, and many have reported an economic downturn since the onset of COVID-19.

This year, a new non-profit mental health organisation was established that aims at providing education and support for

hospitality workers. 'From the Pass' has already raised at least \$40,000 through fundraising, and is currently organising more fundraising events to assist in its launch. A description from one of their online fundraising page states that they aim at "creating a positive and encouraging workplace, through education, compassion, and awareness".

Other initiatives have aimed at addressing some of the issues within the hospitality industry. The Restaurant Association of New Zealand makes a number of resources available to members and non-members around topics from day-to-day hospitality to workplace health and safety and mental health.

Data from the Restaurant Association of New Zealand shows that in 2018, more than 17,000 hospitality businesses were operating, with increasing numbers of new businesses being opened in centres like Auckland and Christchurch. As New Zealanders and the hospitality industry grapple with the effects of COVID-19, taking action to address issues of bullying, harassment and workplace relations is likely to become even more important to those working in the sector.

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Exam Distress? Time to Destress with Top Tips from Health Experts

CHARLOTTE PARKER

Exam season is rapidly approaching for students. With the exam period often contributing to an incredible amount of stress and negative emotions, it is easy to forget to take care of your mental health.

In light of the COVID-19 pandemic, one of the most important aspects of your mental health to stimulate is your connection to others. Clinical psychologist Desiree Dickonson promotes the idea of group study but also notes that it is worthwhile to just listen and engage with people as a whole. The group doesn't need to be focussed the entire session; purely chatting with one another can increase your general state of wellbeing.

Building a routine for not only studying, but also within your day to day life, can help to relax the mind. Dickonson explains that routine helps us divide work time from self time, allowing for a higher level of relaxation and clarity when we take time for ourselves. Study routines, such as the Pomodoro Technique discovered by Francesco Cirillo, where you have a certain time frame of study and then a certain time frame for a break can also be implemented for a blend of productivity and enjoyment.

According to Adam Moore and colleagues of Liverpool John Moores University, the daily practicing of short periods of mindful meditation can improve concentration. It was found performing breathing exercises for 10 minutes was able to increase focus, whilst being a manageable skill that you can fit into study breaks or travel time. Dickonson further attributes meditation and mindfulness to gaining a feeling of control within uncertain times.

Physiological symptoms of stress are not ones to be forgotten, with Southern Cross listing a few as low energy levels, change in appetite and muscle tension/pain. They suggest exercising in order to release tension and stress build up within the body, further clearing your headspace of frivolous worries. Psychological Health Care, Perth, says a nutritional diet rich in vitamins, minerals and healthy fats will keep your body feeling refreshed and rejuvenated.

Psychosocial rehabilitation specialist Kendra Cherry states that test-anxiety can also come through in cognitive symptoms such as self-doubt or negative self-talk. Practicing positive self-talk and praising yourself for little achievements can provide a basis for self-belief and reassurance during an exam.



The NHS's "Tips on surviving exams" also suggests forgetting about the exam once it is done. The work you put in during the exam cannot be changed once you leave the exam room, so it is best to simply forget about how you did and enjoy the time you have.

Exams commence on Thursday 5th November. Remember to check your exam timetable on Student Services Online to ensure you are aware of all your exam dates, times and locations (when made available).

The University of Auckland provides a counselling service for anyone who is struggling with these or further issues. Students in need of mental health support during this time are encouraged to contact the University Health and Counselling team on 0800 698 427.

If you need support, you can call or text 1737 for 24/7 support from trained counsellors. Other helplines include Youthline's free call line at 0800-376-633, or free-texting 234.

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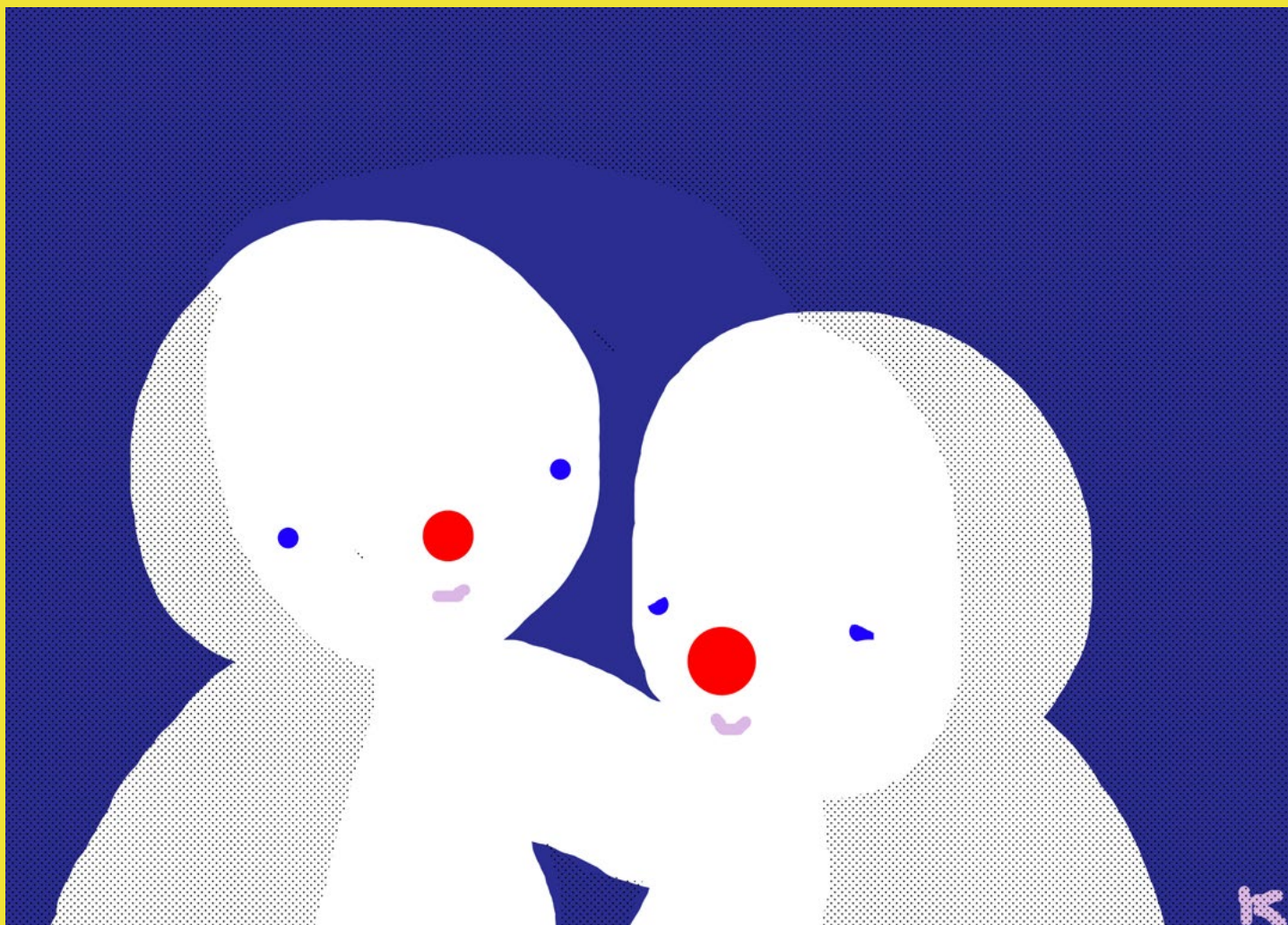
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Dissociated

MADELEINE CRUTCHLEY (IN CONVERSATION WITH DR. JUDY LIGHTSTONE)

Trigger Warning: Dissociation, anxiety, depression, eating disorders and trauma.

Madeleine Crutchley speaks to Dr Judy Lightstone about dissociation, a disorder which can appear when people are stressed or anxious.

At the beginning of this year, I felt pretty familiar with most of my anxiety symptoms. They were still scary, and definitely among my least favourite physical sensations to experience, but I had developed ways to cope with them and ride out any intense waves of panic. However, after a particularly bad infection that sent my health into a momentary spiral, I began to experience some more distressing symptoms.

I had vertigo and dizziness, which were accompanied by short episodes where I felt that I was not really in my body. That latter symptom was one I had quite a bit of difficulty explaining to those around me. I felt detached from my movements, and my senses really dulled, as if I was watching myself move through a screen. It was especially noticeable when I looked at my hands; I felt as if someone else was moving them and I was

watching passively from inside or outside my head. When that sensation would come over me, I found myself rubbing my hands together, stamping my feet against the ground or jumping to clutch something. Everytime I would attempt to describe the physical sensation (or lack of physical sensation), I would trail off, feeling conscious of how bizarre it sounded.

When those symptoms persisted, causing me even more anxiety, I dropped in to see my doctor who has become quite familiar with my symptoms. After a few tests, he confirmed that the dizziness was a textbook anxiety symptom and that what I was feeling was an 'out-of-body' experience. He gave me a bit of information about depersonalization, derealization and 'grounding' and then sent me on my way (telling me these episodes were a mild case of dissociation). The techniques of grounding that he mentioned to me largely focused on stimulating my physical senses; he told me to taste and smell strong flavours, have someone else touch my arm, and list out the things I could see in my surroundings. Since my doctor gave me that reassurance and those techniques, those symptoms have largely subsided and I feel pretty well equipped to deal with the short episodes. However, I was surprised that I hadn't known about these cases of mild dissociation; he outlined that they were quite common in people suffering from anxiety.

In the effort to find out a bit more about dissociation, I spoke to Dr. Judy Lightstone. Dr. Lightstone has worked in the field for 40 years and was most recently the Director of the Auckland PSI Institute. She is no longer accepting clients, but has offered her expertise in this interview, to hopefully dispel some of that Google misinformation.

Can you explain the different types of dissociative disorders? What are symptoms that make up derealization/depersonalization?

Dissociation occurs, in my opinion, on a continuum. It might start with one traumatic incident that would cause a very simple split where the person has a part of the self that deals with the day to day issues and another part of the self that re-experiences

the trauma. That part is vulnerable to be triggered by things in the environment that set off memories of the trauma. When that happens the person goes into what we might call a dissociative state, where they regress, relive the trauma, forget that they're in the present for a little while and not function very clearly. You could also say that both states are dissociative because in order to be functioning very well in the present and acting as if everything is fine you've got to split off the trauma. That would be considered very basic dissociation.

Then there are more complex types of dissociation, where the trauma occurs younger. If there's more than one trauma or ongoing trauma (such as child abuse), there can be different parts of self re-experiencing different types of abuse. Different parts of self can be triggered in the environment by a lot more things. The most extreme form of dissociation is caused by very early and extreme trauma. That's when you get the more dramatic stuff that you'll see in the movies. There are parts of self that are functioning in the present, but they might be dissociated from other parts; one might go to work, another that deals with relationships, another that's a student, and another that's a parent. Depending on how dissociated those parts are from each other, in extreme cases, they might not even know about each other and have loss of memory for day to day events.

Derealization and depersonalization are symptoms. Depersonalization can also be considered a disorder, and in order to qualify

you need to have a certain number of ongoing symptoms. The symptom of depersonalization can be quite common, as in when you don't experience yourself as being fully in your body. When it's a disorder, the person might walk around and feel as though their hands don't belong to them, or their body doesn't belong to them or that they're a robot and so on. It's very common with eating disorders to split off the sense of your body from yourself, where you cut off your sense of hunger, pain or satiation for example. Derealization is the experience of the external world not being real. Most type of trauma come with some aspect of derealization. Often, when something really horrific happens, the first thing we'll say is 'this can't be real.' When that experience is repeated over and over again the world feels like it's not real. Some people might feel as if they're not real, or that they're martians or robots, which can be very frightening and hallucinatory in quality.

It's interesting that you say most people will experience depersonalization and derealization at some point.

When really bad things happen, it can feel like the world isn't real. For instance, when COVID-19 started to spread, people continuously said 'this can't be real.' In a way, it's integrated into our language. Both symptoms are really common reactions to trauma. Depersonalization becomes a disorder when it doesn't go away, when the person walks around in that state all the time, which is really upsetting.

“Depersonalization becomes a disorder when it doesn't go away, when the person walks around in that state all the time, which is really upsetting.”

feature.

Can the pop cultural representations that you've mentioned be helpful or harmful in the attempt to continue public education?

I might disagree with some other experts, but, for example, there was a show called *The United States of Tara*. That was under the advice from one of the top people in the field. I found the show annoying because it's very, very rare that you would see anything that extreme. She changes her outfits, changes her hair. These cases are usually more subtle. People who dissociate, even people with DID, don't know they have it and their friends don't know they have it. The shifts in state are internal, much more than external. On TV, you'll see these extreme cases, so people think they understand what DID and dissociation are, and won't question, perhaps, their own state.

You've already mentioned that symptoms of dissociation can accompany eating disorders. What other mental health issues can dissociation accompany?

Almost all mental health disorders have some aspect of dissociation. For example, there is a kind of dissociative depression, which includes being in a state where nothing feels real and you're numb. There can be feelings that you're living in the trauma, which can also make you feel very depressed and anxious. Really, a lot of mental health issues are related to dissociation and trauma; anxiety, depression, phobias, panic attacks, just about anything you can think of.

How do you distinguish these mild cases from more severe ones?

Severe cases are more chronic, long lasting and no longer episodic. Using language we use in the field, it becomes a trait rather than a state. Being able to get yourself out of the state is very different to when it becomes a trait that is part of your life all the time.

What does the long term treatment process look like for dissociative disorders?

There are three accepted stages of treatment. The first is stabilization, where you work to help the person become stabilized in the present as much as possible, helping them develop resources that will help them to feel grounded physically in the present. They can also start to imagine parts of themselves that will take care of the traumatised parts. You help them figure out, if they are lurching from crisis to crisis like many do and replicating patterns of chaos, how to create more stable connections. In treatment you want to be grounded for then and they should begin to internalise that. As they start to feel more safe, you might start to work with some of the trauma, but you don't want to introduce that too early. The third stage is integration, where they've worked through a lot of the trauma processes and they can integrate them into their daily life, dealing with relationships and so forth.

The social world is very important through all three of these steps, especially the first and third. You want to help them build a network of support, which is part of grounding and stabilising. After they've worked through the trauma, they may need to repair the relationships they might have damaged and learn ways of sustaining those relationships.

Could you explain the process of 'grounding' further? Many resources online talk about grounding as being primarily physical. Are these methods of grounding helpful for working through dissociation?

Physical grounding focuses on attempting to counteract the depersonalization. You want the person to experience the body and you need to do that very gradually because a lot of trauma occurs in the body. When they return to the body they will re-experience the trauma, so it needs to be done very gently and very carefully (which is an endless balancing act). Grounding is about getting people to notice physical bodily sensations and orienting is about helping them to notice the here and now - to come back to the present.

When a person is in a state of trauma they tend to go inwards and try to block out the world. If they are alert and watching out for danger, they can't be in that internal state because they wouldn't survive. One of the grounding techniques is to have the person look around the room and say what they see out loud, which should bring them into the present. There's also breathing techniques, which can be triggering for some trauma survivors. There isn't a magic bullet for all, each case is very different. In the process of grounding through stable relationships, I've brought in support people to sessions, so that they can better understand what it is like for the person experiencing dissociation and reliving trauma. Unfortunately, in NZ (with the exception of Māori approaches which do focus on whānau), people are not trained to bring in and consult with the family, which is quite a tricky skill. There needs to be more training that focuses on working with trauma as well the support system that surrounds a patient.

What are the major issues that need to be addressed within our system so that we can better treat dissociative disorders?

ACC has created an enormous need, without, in any way, adequately supplying that need. Most ACC counsellors are burnt out and they won't take new clients. They aren't trained, they don't get adequate support and they don't get adequate supervision. There's all of this money that's available and there's all of this free therapy that's available, but they can't find therapists who are willing to do it because they aren't supported. It's a burnout job, it's very hard work. The funding is not there for the training. It's not made a priority. There also needs to be some lessening of the bureaucracy, because part of the reason people don't want to take ACC clients is that there's too many reports within the current insurance system. It shouldn't be about proving, it should just be about healing. The public system also needs to show more focus on prevention, instead of waiting for the worst case scenarios. I just don't see where the funding is going.

A Lifetime Commitment to Myself

EMMA COOPER-WILLIAMS

Trigger Warning: Anxiety, PTSD, bipolar, suicide.

I am a fourth year student, and I have been dealing with mental health challenges for over half my life. I have been engaged in the mental health system since I was 14 and have experienced anxiety and posttraumatic stress disorder from an assault that happened when I was 17. My experiences have changed a lot over time when it comes to mental health, and I finally feel like I am in a space where my concerns are validated and heard by mental health professionals.

I have dealt with a range of mental health challenges which have changed throughout my life, some of which became particularly severe in my first couple of years at university. The first week of my second year of my Bachelor of Arts degree, I was diagnosed with bipolar type 2 disorder. This is the type of bipolar which has less extreme 'highs' or mania, and more prolonged periods of depression. I didn't take this news particularly well and could not see myself coping with a degree for another two years (at least), and the next week I attempted suicide, ending up with some very serious injuries. Fortunately for me, after I survived this ordeal, the medication I had started began to work. I could see a future in which I could cope with university and the other pressures in life. The preceding six months I had tried many times to end my life and had been let down by a failing mental health system which was reluctant to label me with a diagnosis that ultimately saved my life.

Going through university, I felt like I was the only person who had bipolar. Sometimes when a topic around mental health came up, I felt like I was the elephant in the room! After surviving such a traumatic experience in 2018, I spent the next year and a half learning how to use my new coping skills, but I was always worried about how this would affect my university work. I felt like there were huge

risks in trying to live a normal life and being able to balance my mental health as well as university work; it seemed like a never-ending struggle.

In 2019, I had a job that I was working alongside the university and was learning how I could finally be a functioning adult. During this year, there were a lot of experimental coping mechanisms used, and while I had my slip ups, I ultimately had a far more positive year than the one before. Due to being on several medications, including mood stabilisers, antidepressants and antipsychotics, I was quite tired all the time and found it hard to get out of bed before 11am to go to class. I maintained my place in a flat, however I was withdrawn a lot of the time even while feeling like I was in a better space.

2020 has been a difficult year for most students, with COVID 19 undoubtedly having an impact on many students' mental health. Fortunately for me, this year has been my most positive year yet. While having to move back in with family due to financial issues, I remained in a good space mentally and did not feel distressed by the changes that were taking place. I am a person who likes to get out of the house and feel like it is a good self-care strategy for me, so staying in the neighbourhood is probably what challenged my mental health the most during this time.

Having mental health struggles, and even a diagnosis, should not stop you from studying. It could indicate that it is a good idea to pace yourself, however I have maintained a positive recovery journey over the last two and a half years while still studying, even getting a degree during this time. I have received support from mental health advisors in Student Disability Services even if it is just to check in regularly. This is something that has contributed to my success in studying during the last four years. It is useful to have someone on your side before you get into a space of stress and more intense struggles, so I have used their support to request extensions for assignments where I have needed them.

University is such an intense experience, and I think that attempting to be kind to myself is one of the best decisions that I've made during this time. I have recognised that recovery is possible and that a diagnosis is not a death sentence, or an indication that you will not be successful in an endeavour such as studying. Mental health is something we should all strive to look after constantly, because it is something that we all experience and enables us to cope better with the challenges that crop up over a lifetime.

Mahi a Atua
Expressive arts pūrākau
Kāpāhaka waiata Kāhaka Mīrimiri
Pōngi

HAUORA
WELL-BEING

MENTAL & EMOTIONAL

PHYSICAL

SOCIAL

SPIRITUAL

My husband is
a therapist, so,
Kia ora

@Juliaaazhu

Mahi a Atua: A Māori Approach to Mental Health

CAMERON LEAKEY AND MADELEINE CRUTCHLEY

Craccum speaks to Dr. Diana Kopua - director of Te Whare Wananga o Te Kurahuna and practitioner of Mahi a Atua: an indigenous approach to mental health that incorporates mātauranga Māori and Te Ao Māori.

Can you explain how Māori approaches to treating mental health issues differ from Western approaches? What is Mahi a Atua?

Māori approaches draw from a system of knowledge that is referred to as mātauranga Māori. It is a completely separate system of knowledge from western knowledge. Western approaches to human suffering have dominated our global understanding of how to understand and control human suffering. Mental health services therefore have been shaped and funded based on western approaches that prioritise western ideologies such as individualism. Mahi a Atua promotes the need to value indigenous ways of knowing whilst ensuring we remain critical thinkers and responsive to feedback. Mahi a Atua calls for epistemic justice.

Mahi A Atua can be viewed in three ways:

Mahi a Atua as a philosophy

Mahi a Atua has been referred to as a 'worldview', a Māori paradigm, an ontological transformation. As a collective, those who engage in collective conversations using Mahi a Atua principles, are reclaiming their right to indigenising a unique way of 'studying' wisdom. Our Māori creation and custom stories are the foundation from which we question, discuss and debate ideas about existence, knowledge, values, mind and language. We promote the inherent rights of indigenous peoples to indigenise all the spaces we occupy.

Mahi a Atua as an indigenous strategic framework

Considered by some to be a transformative model of care, Mahi a Atua is deliberately grounded in indigenous knowledge, active learning and feedback. A Mahi a Atua worldview inspires success in achieving systemic change within services.

Mahi a Atua as an intervention

This approach involves facilitating hui with Māori whānau and sharing traditional narratives, Māori creation stories (pūrākau), to connect with and liberate our people. It is ancestral healing, drawing from the creation and custom stories of Māori atua (gods), to better understand how our ancestors made sense of their realities.

How have Māori traditional healing practices been affected in the ongoing process of colonisation?

Colonisation was justified by the idea that Māori were primitive and less rational than their European conquerors. Colonisation was not about a dialogue between cultures but rather involved a monological imposition of one way of seeing and speaking about the world, and the elimination of our Māori traditional healing practices was the expected consequence. Legislation such as the Tohunga Suppression Act 1907 would contribute to the demise of tohunga skilled in both the arts and healing practices. Māori who have reinstated traditional practices are often confronted by beliefs that the western knowledge system is the default system for

“Colonisation was not about a dialogue between cultures but rather involved a monological imposition of one way of seeing and speaking about the world, and the elimination of our Māori traditional healing practices was the expected consequence.”

feature.

all. Many efforts to promote Māori healing practices are considered secondary to the 'mainstream'.

In what ways do Western approaches to mental health treatment play a role in colonisation?

Psychiatry's history, assumptions and practices have impacted many people across the globe and in particular indigenous peoples. Simply put, colonisation involved Europeans believing that their way of understanding distress and how to manage it was superior to indigenous peoples ways of knowing. This continues today and although we understand that evidence based practices are important, many of the practices used in mental health services are based on assumptions and misinformation that is not generalisable, reliable or proven to work for Māori in general. Regardless of the dismal statistics for Maori, many mental health services continue to believe the issue is a resourcing issue as opposed to an ideological issue.

Is our current mental health system responsive to Māori? Are practices like Mahi a Atua integrated into the health system and what are the obstacles in providing this care?

No, the mental health system is not responsive to Māori.

Regardless of a formal evaluation showing true progress when Mahi a Atua was embedded in a heavily Māori populated mainstream service, it has not been supported by the Ministry of Health to scale across the country. Instead, an overseas models has been adapted and funded across Aotearoa to implement significant change. I would say that this is a prime example of institutional racism. The final say about the control of the design of mental health services is in the hands of those who refuse to give Maori funding authority.

As a psychiatrist and the director of a small indigenous where wananga, our focus is on training individuals and teams to become Mataora; specialists in Mahi a Atua. We also transform services that are serious about addressing Māori inequity. We have integrated Mahi a Atua into a number of services now and the outcomes are positive.

How has the mental health of Māori been affected in the months since COVID hit the shores of Aotearoa?

I do not have the most up to date information about how COVID impacted Māori across the country. The following are my perspectives based on what I understand.

Firstly however, Māori inequity prior to COVID was a serious issue that had been largely ignored within mental health services. The crisis in mental health was already known before COVID. There was a lack of capacity, poor staff morale with significant recruitment and retention issues, and patient outcomes particularly for Māori were concerning. There was an international call from the United Nations for mental health reform. The Mental Health and Addictions report in 2018 also highlighted the need for change but lacked severe criticism of systemic racism and in fact the Māori report that accompanied the review was withheld. Inside that Māori report (Whakamanawa) was significant support for a Mahi a Atua system – Te Kuwatawata, but it was ignored. It is hard to talk about the COVID crisis when there was already a huge crisis.

What Te Roopu Whakakaupapa Urutaa informed us of is that if COVID was to reach Māori communities then that would worsen the Māori inequity in health overall.

The Ministry of Health and the work to address mental health inequity for Māori was put on hold during COVID and therefore putea for the expansion of Kaupapa Māori mental health services, a new primary mental health services, and other contracts, were delayed. This meant that organisations needed to delay any systemic change required.

Despite this, Te Korowai Hauora o Hauraki acknowledged that there was already a significant crisis that needed addressing – racism. They committed to transforming their organisation without any ministry funding and COVID offered an opportunity to do things differently immediately. Leaders in the organisation were already meeting twice a day for regular COVID updates and so this forged the space for transformation. They agreed to invest in the Mahi a Atua model and a second Te Kuwatawata service was

“Simply put, colonisation involved Europeans believing that their way of understanding distress and how to manage it was superior to indigenous peoples ways of knowing.”

established on the 1st April 2020, in the midst of lockdown.

Meanwhile in other 'usual care' services some mental health professionals were unable to see whānau in person during COVID and were worried about the lack of ability to properly engage with whānau via virtual appointments.

At one particular primary mental health service there was a significant increase of referrals for assessment and treatment but the number of Māori referred were low, which is not in line with what statistics tell us about Māori and mental health. I believe that even though organisations believed they did not have enough resources, that increasing resources would not address the real issue – which is how to develop systems that Māori want to use when in distress.

One of the hypotheses I have is that when COVID lockdown forced whānau to stay home, there was less racism experienced at the systems interface. Whānau were able to spend time with loved ones and many of those with significant social needs were responded to by organisations who were quick to adapt and mobilise their resources accordingly. Many Māori were already struggling with low household incomes so spending time with whānau without societal pressures was for many a breath of fresh air. The Mental Health and Work report that was released in Dec 2018 highlighted the impact of substandard employee mental health policies. This being the case, several Maori were likely enjoying time away from a stressful environment. Of the many recommendations from the report, which was very supportive of indigenous frameworks to improve mental wellbeing of employees, one of the recommendations was to explore the expansion of both whānau ora workers and Mataora – Mahi a Atua specialists.

The other noticeable observation for me during COVID was the promoting of western approaches for the public in distress. But that didn't stop Māori who had access to facebook in tuning in by the hundreds to Facebook wananga forums where many of us who are promoting mātauranga Māori were offering frequent live feeds. These involved spiritualists, Māori meditation, Maramataka

Māori, political forums, waiata, karakia, Mahi a Atua and many many more. Māori community members were also taking active roles in their community by setting up roadblocks to prevent COVID entering their 'vulnerable' communities. Others were getting stuck in to providing kai to their communities. There was a community vibe happening in many pockets of Aotearoa.

When we look at mental health we need to look at the whole community and not just whether one individual has symptoms consistent with what are referred to as psychiatric disorders. COVID was to many Māori, an opportunity for our earth to breathe again. While I do understand that this was not the experience for everyone the point I am trying to make is that regardless of the racism Māori are continuing to fight for the right for epistemic justice!

How might Mahi a Atua be used to treat these issues?

The real issue is systemic racism. That is what needs our attention. The education system is failing Māori but is slow to shift its behaviour and attitudes. If we cannot inspire our Māori children in their learning then we will end up with more clogged up mental health systems, who are also struggling with the issue of racism. Mahi a Atua takes this issue extremely seriously while having fun and getting creative as a collective. We

deliberately reinstate our stories as allegories to shift the collective mindset of Aotearoa. It is this shift that we believe is needed so that those in privileged positions learn to unlearn their privilege.

What can we do to support further equity and funding for Māori within our health system?

In general, we all have a responsibility to understand Aotearoa history and to become an anti-racist society.

The real issue and maybe the question that needs to be asked is, how do we change the attitudes and behaviours that continue to perpetuate racism? We need bold leaders who can challenge the status quo and prioritise the need to address the inequity for Māori. But we also need the average New Zealander to also speak up and say no to racism.

Whilst the Ministry of Health is wanting to fund Māori services, we must not accept a colonised model with a Maori name. There is a lack of openness to establish alongside the services, an indigenous workforce development and training arm. We must acknowledge that indigenous knowledge is as important, and we believe in many cases, more important in working toward a balanced society.

"If we cannot inspire our Māori children in their learning then we will end up with more clogged up mental health systems, who are also struggling with the issue of racism."

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HEALTH BITES

Medical Student Musings on Mental Health

PATRICK MACASKILL-WEBB

Three ways brains are really normal:

1. Neuroplasticity is a pretty sweet idea. It's the brain responding to the patterns of thought and action we do and feel. This seems eerily similar to the bones in our body, which have their own plasticity. They do not form their strength out of nowhere, the bone tissue must be loaded (not like \$\$\$ loaded, but walked on with body weight, loaded) to grow into the right shape and function. Similarly, we must load our brains with the right tasks to be given the right mental strength to get through adulthood okay.



2. If you're sad one moment and happy the next, relaxed in one moment and stressed in another, then you are not necessarily LESS healthy than someone who is always happy. There is a positivity trap to mental health that says that the goal of a good brain is to be consistently happy. Our stomach also gets stuck in a trap of too much of a good thing... we get used to being full of food almost all the time! There can be benefits to putting your body through discomforts that initially feel crazy but actually have significant upsides.

3. It's totally normal to get addicted to the fruits of the 21st century. It's not a weakness of your whole character to be stuck on a TikTok scroll, or addicted to sugar, or

addicted to porn. There are things in this world that can exploit your attention. If *The Social Dilemma* hammered anything home, it's that technology has not yet overcome human strengths, but somewhere along the way it has gained the ability to overcome human weaknesses. That doesn't make you weak by any means! It's a normal brain responding to things in the world that are not normal. Which brings us to...

Three ways the world is not normal for our brains:

1. When was the last time you were truly bored? Literally nothing to do, nothing stimulating you, nothing immediately in front of you. Like a true blissful holiday, not some PoS online lockdown? Not nearly as much as I think we should (that's the answer I'm getting at). Being bored might be lame, but it used to be much more common. To be without boredom is NOT normal. Constant stimulation is NOT normal. Truly relaxing can take bravery and vulnerability. This is when physical stillness, mental stillness, and the most coveted 'value stillness' engage in healing.

2. Being closer than we ever have to easily accessible pleasure is also not normal. The dopamine-reward system in your brain has an appetite and the anticipation can be greater than the pleasure itself! A fact that anyone who has experienced intimacy with other humans would understand (sorry Engineering students, just ask a med student what that's like when we crash your Revue in a few days). Being so close to pleasurable YouTube clips and Instagram hotties at any moment on our phones lowers the threshold at which we excite the dopamine-reward system which stokes a fire seeking hot novelty. In a world so close to pleasurable stimulus our brains

can be pushed further out into weirder and weirder novelty seeking kinks.

3. One last thing... a sugary sweet stimulating world understandably can make the brain sick when it has indulged beyond capacity. This is one reason why I choose to believe there is a mental health epidemic in the world's wealthiest countries. If you do not give yourself the same sympathy, spare a moment to think that diabetes comes from a similar mechanism as mental ill-health; when we over fuel ourselves with sugar, the biology that sought out that sugar is overwhelmed, at which point the body becomes chronically dysregulated in terms of sugar. Have you overfuelled yourself with mental stimulation? Has the biology in your brain been overwhelmed? Have you become chronically dysregulated in your focus, i.e. procrastinating by reading a student magazine...? Please just go and study.



ILLUSTRATION BY IY XU

The Surgeon

SHIVANI KERSHAW

Trigger Warning

There's an echo of sadness within me,
And I feel empty whenever it travels out of my lips.
So I keep it within my oesophagus,
And swallow it every day before I speak.

This is what it's like to be in recovery.

It is having a mouth
Formed from golf-ball-sized indentations
From all the chewing-gum trauma I've tucked between the crevices of my cheeks.

I'm thirsty to wash it all away,
But my fingers are the one that purge these memories from under my tongue -
Of a little brown girl starving her Barbie doll
Of blood-dotted tissues flushing down the toilet.

My body wants to regurgitate all that is left of me
Onto the alter of forgotten self-empathy.

But when I go to pray,
The gelatine latches
-like a stubborn child-
On the tips of my lips.
No one wants to reach their fingers down and tug the sadness out -
All bleeding and rotting,
A metastasising, corroding, mess of a woman.

Have you ever had to lie down on the ground,
On your back
Arms flat to the carpet
Pound your chest
So that your lungs begin to work
Your diaphragm begins to move?

Have you ever had to resurrect your self?

I do this every night.
A prayer.
A routine.

Can you tell me you feel the same?
Can you tell me you can relate?



Can you tell you have echoes that have evolved into tornadoes?
Has it been damaging your organs from the inside like mine?
Has it been twisting your veins until your blue and purple like mine?
Has it wheedled its way into your heart and left it in ruins like mine?

Will the media cover this?

Breaking News:
Intestines torn from 19-year-old girl's body after a tornado of depressive blues in her internal system.

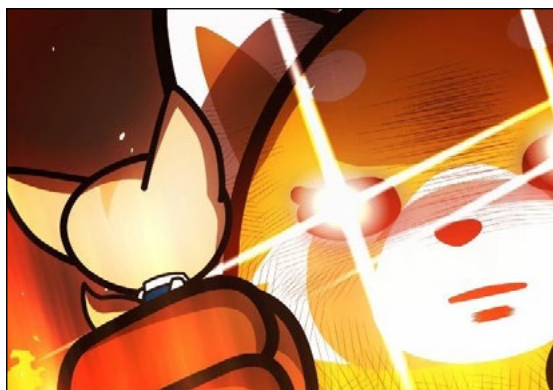
Who will read about my destruction?
Who will hear about my devastation?
Who will write back
With a bundle of empathy,
And clasp it between my hands?

I need to speak,
But all I get are echoes exiting out of me -
I ache when I sigh,
Not even my breathe can sustain me.

Still,
I keep a first-aid kit under my bed.
Dress myself under the moonlight in rags.
Perform open surgery on my lips.
Make incisions on the golf-ball sized indentations
Erase the sadness away for just one day.

I stitch together the burn marks of my agony,
And wrap myself in linen like a baby just born.

I feel empty,
Everyday.
But I feel lighter,
Able to swallow without crying
Able to speak
Like nothing can silence me,
Not even an echo.



AGGRETSUKO

CHANTAL DALEBROUX

7.5/10: took me a little bit of adjusting but easy to get into enjoying.

Admittedly, if I was going to pick a Netflix genre to spend my evening on, anime wouldn't usually be it. But *Aggretsuko* had me entering a binge session. Covering 3 sessions so far and renewed for a fourth, the show mixes comedy and music to create a wholesome show which is easily relatable to the 21st century. It revolves around Retsuko, a red panda accountant working for a trade firm. Honestly, so cute! Her social anxiety and working struggles are aspects which many can say they have experienced, and the show does an amazing job of making these lighthearted yet accurate.

With an average 15-23 minutes per episode running time, it won't use up much time to get through a season, and is sure to generate emotion as her character is hard to not sympathise with. Retsuko has her roots in Sanrio, the people behind Hello Kitty, so... big names are involved.

I found it particularly wholesome that the show title means "Aggressive Retsuko" as this anthropomorphic protagonist enjoys singing death metal karaoke in her spare time to deal with her anxiety. Truly, a mood. Who doesn't enjoy some loud music to destress? For a venture into anime, this is a great little show. The way the creators have integrated modern struggles is genius. I think I'll keep watching, and for a non anime person, that's an achievement. I recommend you dive into this one too!

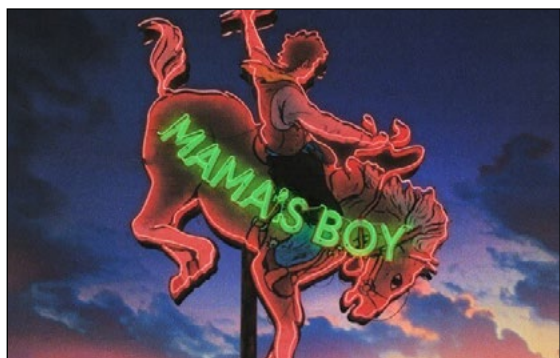


ELIZA

LACHLAN MITCHELL

Eliza is a very 2010s game - it is an interactive visual novel centred around the development of a faceless and distinctly corporatised therapy process (the titular *Eliza*), the grief & mental health struggles of its creator Evelyn, and how her renewed relationships with those around her impact on the clients of the therapy service. So, you know, it's not exactly *Who Framed Roger Rabbit*. It's framed in 'realism'. Conversation isn't full of snippy quotes, and the universe is displayed in dour lighting and sadness. It's a game for those who have experienced therapy, or have experienced a particular form of mental illness - one that encourages isolation.

Maybe I'm not doing the best job of selling it. It's a tough task. Evelyn acting as a proxy for all the characters to talk about all their failures over and over is not something you present at E3. But I think it is an interesting and ultimately worthwhile game to play; while it can appear like a rather melodramatic and navel-gazing look at the mental health process, Evelyn's journey is less about the therapy process and more about what it means to feel parts of life again, and just maybe, how those around her can also feel the same way. For those critical of the ideology of therapy, it is more even-handed than one would expect; self-empowerment outside of the medical profession's strict guidelines is given great focus, while the benefits many find in a distinctly clinical environment are also given fair consideration. Give the game a go, honestly.



MAMA'S BOY - LANY

GABBIE DE BARON

2/10: Sad straight boys said they're valid and LANY is their spokesperson!

I'll make this quaint, **LANY** has always sounded like how it felt to watch pouring purple and pink paint on an empty sheet of paper (yes, *visuals have their sounds*)... you can't tell if it's hypnotic or if it's just a pretty facade. Their 2020 album named *mama's boy* was a 14 track collection that had one sound... and I literally mean *one* sound. All the songs sounded the same, and in terms of its writing: most songs felt like they were inscribed by the same writers of CW's *Riverdale*.

Theoretically, one reason why it even appealed to an audience was probably because of the ever so present guitar and drumbeat. *Must be so unique*. The sad part is, LANY had a really strong 2016 EP with *kinda's* genuine writing and seductive beats. I lived through that in high school; listening to it again *now* the lyrics definitely had a better diction and the semantics of each song made so much more sense than *mama's boy*. From "you!" all the way to "good guys", the songs are just eargasm, good try on the lyrics though! But it's in "bad news" where the album drove off a cliff. It just felt like a Youtube parody that was cloaked in their usual synth-pop color, hence appealed to their fans.

It could be because I always felt they knew how to work a launchpad, but there's something about this album that screams glum... not the 'yearning'-kind the 'oh dear God we get it dude'-kind.



LOOK AT THIS MESS I'VE MADE (EP) - LOVELEO

CHANTAL DALEBROUX

9/10: also earning him points is his earrings collection - it's quite snazzy.

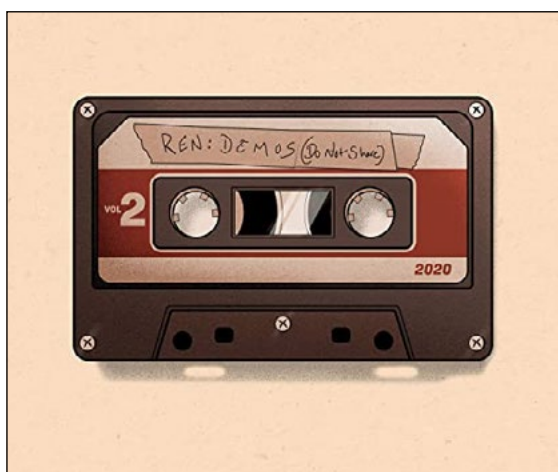
If anyone had been asked if they knew who **LoveLeo** was last December, the answer would have been an unequivocal no. But since then, **Leo Reilly**, known by his stage name LoveLeo, has taken off.

When his first song 'BOYFREN', a catchy bedroom-made song full of charm, and a lot of whistling, went viral on Tiktok at the end of last year, it kickstarted his current journey into increasing fame. The video features Leo's head on an egg, a common music video object, which he mentioned in an interview just, "thought it would be visually appealing to crack an egg with his face." The line perfectly sums up his out there and quirky personality that shines through in his tunes. July saw the release of *LOOK AT THIS MESS I'VE MADE* covering a total of eight tracks. The album's dancy vibe makes you want to kick off your shoes and boogie around your room - it's perfect for days when you're feeling energised and excitable.

The album starts with "RECENTLY DELETED" in which he explores deleting photos of people who have left your life from your devices, landing them in the digital trash. It's a relatable moment tbh. It's followed by the viral "BOYFREN" and "AHHHHHHHHH." I don't know about you but in quarantine, that second song title was extremely relevant. It covers being too nice for your own good, and serves as a smooth transition into the song Leo describes as being his favourite ever written, "HEAD OVER HEELS." Very wholesome and exudes vibes of being deeply in love to the point where your head spins and your world is upside down. Probably my favourite on the album too.

"ROSIE", also his second single release, has a similarly crazy video to "BOYFREN" and one of the catchiest choruses I've ever heard which is its remake of the "Ring a Ring o' Rosie" song children sing. Particularly feeling the vibes of 'pockets full of I don't care.' What a LYRIC! "LEMONS" another single, reinvents something else you've probably heard - when life gives you lemons make lemonade. But as Leo says, what if you're not a lemonade fan? The album rounds off with 'BABYFREEZE' and the track Leo most anticipated upon release, 'ROCKBOTTOM.' It's a disco vibe piece with some, as always, funky vocals, and ends the EP on a high.

Throughout his entire tracklist, Leo comes across as relatable, original and possessing a now-signature spark of magic as he journeys across song styles and inserts himself into the hearts of many. And while he has said he is taking it one day at a time (and understandably so, considering everything that's happening) fingers crossed we get more soon from this up and coming star. There is no doubt he is destined for great heights within the industry, and I can't wait to hear it.



DEMOS [DO NOT SHARE] VOL. II - REN

MADELINE ION-ROBINSON

Taking a so-honest-it-hurts approach to music, British rapper/singer/songwriter **Ren** is having a busy year. Releasing two EPs, as well as music with his band **The Big Push**, and collaborating with **Sam Tompkins**, there's a wealth of new music to explore. His latest release, the EP *Demos [Do Not Share] Vol. II* continues the artist's trend of being both emotionally intelligent and confrontational.

The first three songs, "Ready For You", "Diazepam" and "Heretic" all deal with themes of depression and isolation. Sounding soft one second and harsh the next, they feature expressive vocals, eclectic sounds, and haunting lyrics. Although strong independently, together they form an interesting and intense trilogy.

After three songs musing on mental health it's almost jarring to move onto "Crucify Your Culture", an angry political indictment. Provocative, if not controversial, the song manages to critique greed, capitalism and democracy in just under three minutes. In the same vein "Money Game Part 2", released earlier this year, explains economics better than my year eleven business class ever could. The EP's finale song, "Everybody Drops", is my personal favourite. Probably the most intimate and specific song, it details the artist's struggle with Lyme disease. Capturing feelings of frustration and desperation, it's worth googling the lyrics.

Almost functioning like a diary, Ren's music is as poetic as it is personal, as expressive as it is explicit, with this latest EP working well as an entrance into the artist's impressive discography. At least someone is having a productive year.

LACHLAN MITCHELL

In this article, Lachlan Mitchell asks us all to spend just a little more time thinking about being vulnerable on social media, and what that entails.

The beauty of the internet is that it is anonymous as you want it to be. Well, so long as you factor in tailored advertising, data breaches, seemingly mandatory usage of Facebook and LinkedIn for anything remotely professional, and so on. The beauty of the internet is that it *can* feel anonymous, I suppose. This ability to cleanly slip off your flesh prison like a pair of socks and just exist as a profile picture of, say, Mike Wazowski? It has its benefits. With the illusion of anonymity, there is an implied loosening of social boundaries, as there is nothing but the algorithm and the report button to slow you down. You are Neo, the decider of what can or cannot be perceived. The spoon is not real!

Whether or not you choose to be a 'different person', the internet gives us the ability to say as much as we want, for as long as we want,

[illegible]

Without a flesh prison to tie us down, it is

easy to slip the surly bonds of presumed social boundaries and dance the timeline on pixelated wings - the great filters of the physical, another person's watchful eyes, are not here to remind us of the immediate impact of our words. Oversharing, for those with an average social skill set, is naturally put to an end by the grimace of another. For many, the removal of this element is a blessing; especially for those neurodivergent folk that struggle with body language and reading tone to begin with. By doing this dance, we can say whatever we feel like, and the only way to hold us accountable is to mute or block our asses. And for many, becoming one with the abyss is the only way to feel like we can talk to others sometimes - God knows the amount of cry-text on a locked account that's seemed so correct at the time. To share is to feel acknowledged, and social

media is designed to draw out pathological FOMO, so letting the world hold a little of you each time becomes natural. For people who feel isolated because of mental illness, it so often becomes therapeutic to scream without limits into a void that is, by design, incapable of reacting. But without boundaries, sharing as a cathartic process, a replacement for the perceived clinical environment of therapy, becomes constricting.

I just want to share some advice as someone who has seemingly incurable Internet Brain. I don't want to do some wanking off over how the internet isn't a replacement for real people. Obviously, duh. That's, like, article number fucking one in every mental health piece since World of Warcraft first began. Right below the current-day cautionary tales of watching your best friend get redpilled into, I don't know, believing Jacinda consumes 1080 on plates made of the chopped off foreskin of immigrant babies. However, sometimes I think we read so much about how the internet/social media isn't a replacement, that we actually just filter out that idea entirely. We think we already know, we've had the idea bombarded into our skulls since 2004, so we let our defenses down. Being aware of Internet Brain isn't the same as actively working on managing it. It's like when you feel bad about your looks. Maybe you think you have a listless Kia Picanto ass instead of a massive, juicy Hydrema 922F dumptruck of a rear end. A caring figure bombards you with compliments that are intended to perk you up and change your mind, but you only push those words away - you *know* they mean well, but it only serves to confuse you and cling even tighter to your ideas. Internet Brain relies on this subversion of common sense, it relies on you to know better but to feel guilty over that fact. And look, I'm sympathetic. I get it.

Vulnerability is a wonderful thing, especially when paired with the feeling of healing all that mental trauma. That feeling of letting someone else know the stirrings of your spirit is something that can't be imitated - how could it be, as it tickles the ego so nicely? But vulnerability is not an answer to your troubles. It's not enough to simply be open, you have to be open to the right people, at the right

times. Openness is a gift, not a default; to own yourself means creating limits to who can own a bit of your presence. To overshare yourself is to spread your inner workings thin, to confuse the embrace of the void with the desire for companionship. It leaves you empty and fragile, as you've spent so much energy tying your heart and soul to every acquaintance and passerby. And when people inevitably don't match up to your constant need for matched emotions, matched validity, you become resentful and sink back into yourself, losing the focus for why you even wanted other people to know you. Your pain encourages you to see yourself as nothing but your pain.

The internet, by its very nature, encourages all this. While not designed to facilitate sickness and self-doubt, there has been little effort in rectifying what it facilitates nonetheless. The nature of social media is to encourage spreading yourself to as many communication nodes as possible, fuck the consequences. It encourages disposability, both for your own emotions and the feelings of those around you. It doesn't encourage permanence, it

only encourages More and More and More. It encourages the mental health journey as an inherently and involuntarily interactive matter. And I mean, this can sometimes help. As mentioned earlier, for those who are less inclined towards the troubles of physical interactions, the way the internet helps you not see people as people but as faceless faces... for many, this is worth the trade off.

And I don't think it's all bad. But you can't trade one medium for another and expect to come out entirely clean, and we still haven't learned that lesson despite all our supposed 'digital generation' bullshit. However, I understand. Oversharing can feel like therapy, especially when access to more traditional forms of therapy, clinical or communal, is so stratified these days. I don't think purely advocating a distinctly clinical idea of therapy is the answer either, though I have heard good things about somatic therapy. Learning to live with yourself can take the form of so many answers. But learning to keep a part of yourself *just* to yourself... I've found so much good in that. Depeche Mode had it right: enjoy the silence.

“The nature of social media is to encourage spreading yourself to as many communication nodes as possible, fuck the consequences. It encourages disposability, both for your own emotions and the feelings of those around you.”



ILLUSTRATION BY DAPHNE ZHENG

turn your head to the left and breathe

trigger warning: OCD and Anxiety

The writer reflects on family, their experience with mental health when it comes to being an athlete, and how to take the first step towards recovering.

When writing a piece on mental health, the imperative is that a certain level of empathy and sensitivity must come to being. I was never formally diagnosed with Over-Compulsive Disorder, but I grew up with a dad who had been, plus, my grandmother and great uncle too. There must be an understanding that OCD is not synonymous to germophobia or predatory actions. It's a disorder that is partitioned in bifold: one feels a 'pattern of unwanted thoughts and fears' which then convolutes to a 'repetitive behaviour'; obsessions and compulsions, respectively. And the thing is, these obsessions range from fear of contamination to anxieties induced by the lack of order to unpleasant sexual thoughts.

My father had the 'routine' kind - if one were to try to categorise it - and therefore

compulsions such as peeling off the skin from the finger and over-doing everything he did until he reached what he felt deemed "excellent". He would always be writing or in thought, never stopping, but he was loving. I grew up with only him around and I always admired the behaviour but sometimes, when you deem these as 'goals' and 'positive obsessions', the outcome is burning out.

I started swimming lessons when I was three. I was competitive at ten and got into the Philippine National team at twelve, but burned out at fifteen. Most days then, it felt like the world would be shrouding on me. It was lonesome, to pulverise anxieties on your own. I knew I could never disappoint my dad; my troubles were: I had the obsession with only progressing towards having no peer on my athletic level. I'd see obscene visions of being

obsolete if I felt like I were less... and I realised he had the same. Through the process, my dad would just exercise overwhelming positivity whilst disregarding mental fatigue. Don't get me wrong, he was always supportive but he probably never fully got around to dealing with it. When the pattern was spotted in me, he dealt with me the way he did with himself. I never told him everything that was going on in my brain, but he could see how I was acting. He coped through emotional repression and finger-skin picking until it bled. I never paid attention to it, then it started happening to me.

The grind of swimming extorted me physically and mentally. Vaguely, sport is deemed to deal with the physicality of a human, but athleticism is when mentality is challenged. What most folks don't see

is that being an athlete is 20% fitness and 80% mentality. I was at the top of my game physically, but I've never felt so void and fearful at the same time. I was in a loop. Symptoms of emotional repression have become a routine. I was brushing my teeth one night and I just started tearing up.

I was crying, but my body's immediate response was to stop the tears. I had a drill that I was never aware of. As soon as my tear ducts would feel heavy, my lungs would expand. I would stop breathing; my face formed a smile until the pain went to my cheeks and felt a spasm in my chest, so that my body would attend to that discomfort and not to the resurgence of feeling. Most of the time, I didn't remember why I cried but it felt like a snowball of being strained in all dimensions: physically, emotionally, and mentally. Being an athlete, brings out a hybrid-human: a performer to be a 'good sport', an experiment by coercing your body's animalism, whilst a teenager who has to navigate trepidation of life becoming your own. It physically hurt to cry. Then I noticed my fingers looked like my dad's, callused and blood clot-filled

The thing about being a student athlete

is that mental health was always second since I had 'no time' to attend to it. I always used to see myself as a quitter for stopping swimming when I was on top. *Could I just not handle the pressure? If so, I could've reacted better...* but it's that cycle of noxious positivity that engulfs you. It turns into naïveté and creates an idealist that forges one off reality. It misleads mental health as merely "a concept". I told my dad about everything. He told me about his OCD. He couldn't identify all his compulsions, but I guess it's easier to see them when you're

the one on the bleachers. I never wanted to get checked; I feared that I might use it as an excuse, for days where I feel one-step behind. Though, peace confided: the obsessions and the compulsions of excessive-orderliness belong to a human. So I'm booking an appointment and took the cathart this piece. Most days my stream of consciousness never rests, but she'll be alright. No feeling is final: it's never an immediate resolution but by just recognising, it's a step beyond fear and a dive into mettle.

"The thing about being a student athlete is that mental health was always second since I had 'no time' to attend to it."



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Support

FLORA XIE

Undeniably, support is hard to give. However, it's an incredibly important part of our relationships with others. Stable and supportive relationships are desirable: they can buffer impacts of stress, promote better health, and foster personal growth. But, we've probably all experienced (and provided), bad support before. Support is not always perceived as positive, so it's important to know how we can most effectively provide meaningful support to others.

People are most happy when their support provider's response to their need for support matched their own behaviour. For example, if you disclosed to your friend that you were going through a rough time and are visibly distressed, and your friend responded by giving you a hug and told you that they're always here for you, that would be a matching behaviour and response.

People are less happy when the response they receive does not match what they wanted, like if instead, your friend responded to you with a ton of information telling you exactly what you should do. However, people are the least happy when support providers respond negatively when any type of support is sought.

Matching response to the behaviour isn't the only thing to consider. Support visibility is a vital part of providing good support. Support can be visible or invisible, and they have their own benefits and costs.

Visible support is what you would typically regard as support: offering advice, lending someone your shoulder to cry on, or helping someone with their assignment. It can boost

closeness and satisfaction of the relationship with the person providing it, and allows the recipient to feel supported.

However, visible support may lead to the recipient feeling like they have an obligation to reciprocate the support, they may feel like a burden, and when there is too much visible support, the recipient may feel incompetent and this could undermine their coping abilities.

For example, if you asked your friend to help you figure out how to do a maths equation or how to write a part of your essay, and your friend just does the whole thing for you, that may leave you feeling more incapable of doing the task than if they had thoroughly explained how to do it or gave you a vague response.

Invisible support includes things like tidying up around the house or cooking for your flatmates without being asked to. It could be giving indirect advice, like saying how someone you know also went through the same thing as the support recipient, and telling the support recipient how that person got through the

problem. This shifts the focus away from the recipient, and onto common experiences.

If you have friends who are super independent and don't like people helping them, this is the type of support that you could use. Invisible support gets around the issues that visible support has, because it is not processed as support. It allows the individual to feel more capable on their own because it seems like they are supporting themselves.

There are still costs to invisible support, namely the risk of not providing enough emotional support when it's really needed, or coming off as uncaring. When people are visibly distressed, visible support is generally the most valuable.

As always, context is key. Generally, there is no single type of support that will be effective for all situations and people. You should find out exactly how the person seeking support wants to be supported, and sometimes asking the person before you provide support is better than assuming and risking providing the wrong type of support.



ILLUSTRATION BY KAY RUSCOE

ADHD; A Discussion.

RODOLFO VILLANUEVA

Rodolfo Villanueva, interviews fellow UoA students in the Attention-Deficit/Hyperactivity Disorder (ADHD) Hangout Group: an open, free, and student-led peer support group for students with ADHD.

Disclaimer: The experiences here do not claim universal narratives about ADHD, but speak to the particular stories unique to the individuals. What will follow is not a substitute for medical or professional advice nor does it reflect the best pathway to your own betterment.

What do you study and how did you find out you had ADHD?

Deborah: I'm finishing up my honours in Social Anthropology. I had gone to university for the first time a few years ago, but struggled to work out what I was doing or what I wanted to do, so I took some time off [and] did some other stuff. When I came back, I started an undergraduate in Psychology and I was just *really* having a hard time. I knew that I understood the stuff I was reading and I understood the stuff being taught in the classroom, but I was just really struggling to translate that into a good grade or to understand how things worked at uni. I could see that I was putting in just a *lot* more effort than many of the other kids in my class. I ended up going to a psychologist here at the uni who eventually asked me for permission to discuss my case with a health psychologist colleague. In the following session, she said, 'Well, I think you might have ADHD.' I didn't even know what ADHD was. It wasn't in my realm of possibilities. So I went home and Googled it and was like, 'Oh!'

Shaun: I'm studying for a Bachelor of Science, majoring in Psychology. Middle child of three children, all boys. I may or may not have middle-child syndrome. Looking at all my school reports, my teachers were always saying, 'Shaun is a lovely student. He's a lovely boy, but if he could just focus and apply himself more he could reach his potential.' And for as long as I could remember, that



DEBORAH

was always normal to me. It didn't cross my family's mind that I might have ADHD because I was never like the other kids who had it, who were very, very hyperactive. I just loved sport and was always an energetic kid.

A few years ago, after a series of concussions from rugby and other things, I had to take a year off and recover. I started my degree in 2018 and it was the first academic thing I wanted to do. But, for the life of me, I couldn't really concentrate. During that time, I had a lot of mental health issues that I was seeing a psychologist and psychiatrist for. I talked to my psychiatrist about not being able to focus and he ran some assessments. As far as ADHD goes, I passed with flying colours.

What are some of your biggest challenges with having ADHD?

D: It can be needing to move a lot, not being able to pay attention, needing to look at

other things, needing to listen to music at the same time you're doing stuff—because your brain is constantly looking for dopamine [a neurochemical associated with rewards]. For me, I don't have an internal hierarchical organisation structure. I don't see a bunch of things and go, 'Okay, that's the most important and this is the next important.' I look at a pile of things and *all* of those things are just as important as everything else so it takes a lot of work to figure out how to organise your life—particularly for the purposes of succeeding at university. We thrive in contexts where there are immediate rewards. And university, while extremely important if you choose it to be so, doesn't always activate immediate rewards because you're looking at these much bigger, broader concepts and concerns. I don't think there's any way to trick my brain into believing that the one assignment I'm working on is going to change somebody's life or save the world. I have to find some other kind of long-term way of getting pleasure or satisfaction from it and I think it's harder to do that for me.

S: Having conversations with people. I used to think it was normal to be talking to somebody and then have some abstract idea pop up where I start thinking about it. I miss half the conversation.

Growing up, my parents would always say, 'Oh you know Shaun is always talking.' I'm just always blurting. There'd be situations where I might interpret something different or I might say something that is inappropriate; it's not until after that I realise that it wasn't the right thing to say or do at that time. So then I start being over analytical about myself and make sure I'm not doing anything inappropriate.

There's also a lot of guilt. Other people are working jobs while studying, and I'm sitting at home asking myself, 'Why can't I do that?' The education system is not built for people with ADHD, and we're forced to work around that—put in a lot of hours, make sacrifices, and adapt to fit the university system, which is challenging. I have to put in a lot of hours and make sacrifices, which is a struggle. I've also gotten the whole, 'Oh yeah he only gets good grades because he is on medication.' It feels like you really can't win.

What are some of your biggest benefits of having ADHD?

D: I think it's in those small immediate tasks where you get feedback. Everything's really clear cut; you don't need to make conceptual decisions. That's also the case with emergencies. I'm really good at emergencies. I keep a really clear head [and] just figure out what needs to be done. Also, I think that if you've grown up in a world or in environments where things haven't come really easily or naturally to you, then that gives you more of a sense of empathy; understanding other people's issues and problems because you don't see anything as straightforward or simple—you can appreciate other people's difficulties.

I find that people with ADHD can make connections that other people might not be able to see. They're lateral thinkers who think about systems and networks and how things relate to other things and that stuff is really useful.

S: I would just have energy all the time. You know, I was the kid in school that would get up at six every morning and I'd be at school



SHAUN

by seven kicking a ball around. I'd be itching just to go run around in class. If we're doing work, I'm just sitting there trying to crack jokes with people. I think a big positive [is that] it has made me more aware, and I think understanding, of other people. The fact that I assess myself so much with the whole, 'Is this the right thing to say here? Should I say that now? Don't say that!' has made me think about that perspective for other people as well.

For students who are reading this—who know or think they have ADHD—what is your message to them?

D: I started getting better grades when I started developing closer relationships with my teachers. They could see how much work I was putting in and they put a little bit more effort into looking at my work and finding the parts that made sense. That's a relationship thing, that's a human universal; once you have a relationship with someone, it becomes reciprocal in some way and they think of you as a human rather than a number or a bum in a seat.

Go to office hours, ask questions at the beginning of the semester, tell them you have some issues with things and that if they checked in with you once [in] a while, it would be really helpful, because that external accountability means a thousand times more than your own internal accountability, or your

parent or whoever telling you that you should do some work.

One of the things I want to point out is that ADHD isn't really a problem with you. It's that the system; in particular, *the university system isn't designed for people that think like you and that it's cool to get help and there is some help available.*

I think that a lot of people at university who have different experiences of neurodiversity think, 'I'm not keeping up or I'm not smart enough,' but what I want to point out is that *you've made it this far.* There is *nothing* about this system which is made to make it easier or even relatively comfortable for somebody who doesn't fit into the model of neurodiversity; the imaginary model of neurodiversity that the university is constructed around.

S: If you're at uni and struggling to learn and struggling to pass/get good grades, don't wait till it's too late. Just come seek the support that you can. If you're just discovering it [while] just starting uni, [or] if you're in your third year and you're just discovering it, go to the Inclusive Learning, [as well as] talk to your lecturers.

For students with ADHD wanting support, please visit the University of Auckland's Inclusive Learning and Student Disability Services websites. In order to join the ADHD Hangout Group, students must be registered with Inclusive Learning



Revenge of the Tiger Cub: How to Resist Parental Expectations and Live Your Truth

KEEARA OFREN

Content Warning: Domestic Abuse

Doctor, lawyer, engineer. This is the edict of Asian parents played for laughs worldwide; the three career choices for the children of the diaspora, in addition to continuing a business with their parents. And choices which are synonymous for an unspoken truth of pain, pressure and pushed dreams.

I will never forget the first day of a Part II Law class where we were asked why we chose law school. Almost all chose the degree because

either their parents made them or because law was their choice to get out of what had been chosen for them.

I was the latter of the two. As I went on university, I realised that the practice of pressuring adult children into parents' choices was a phenomenon across cultures, whether it be for chasing an image of prestige or upholding a generational occupation.

One of the greatest debates in parenting is the concept of the Tiger Parent. 'Tiger Parenting', is a form of parenting common in Asian cultures and is considered by academics and adult children as including deciding on behalf of an adult child's career and academic future. The question arises then, how can one choose their own degree in a situation where they feel pressured by outside forces?

ILLUSTRATION BY IVY XU

This is my story of how I was able to follow my own path, and how you can too. I was a 'tiger cub'; a product of these experiences. Growing up, my future was marked with a mental ironbrand of a pathway in medicine as well as many expectations of the person I was to become.

What is Tiger Parenting?

Tiger Parenting was made infamous by Amy Chua in her book, 'The Battle Hymn of the Tiger Mother'. Common experiences from this parenting include parents expecting total obedience, lessons of 'tough love' through belittling, fear or lack of praise, encouraging a sense of competition between the child and their peers and dictating an education and career path with the child as a source of pride for the family.

When parents come from a background of hardship or strong cultural tradition, they may enforce their will over adult children for a sense of security to address fears of perceived lack of success or financial instability.

High levels of control however, diminishes the autonomy of the adult child and their ability to develop emotional maturity.

Victory is Empty Without a Wider Vision: How to choose what you want

I was a prizegiving student in science subjects and had my mind set on being a paediatrician, but the more I advanced with science and life, I knew deep down that this was wrong, that this was not my life. I felt like curiosity and motivation for success was not natural and that my drive for learning was limited to only getting a certain grade. My motivation was not passion, but rather wanting to avoid being scolded at Parent Teacher Interviews and in the Countdown Meadowbank carpark for only getting an 'Achieved'. Hence, my work ethic was not born from achievement but humiliation.

It was so difficult to find my passion when medicine was all that was fed to me. So how did I find my calling?

When you think about all you love and enjoy, did you ever have a gut feeling whenever someone spoke of a job or life direction? I was happiest when I was reading about the world, doing debating, volunteering at community radio and when doing English and History assessments. I did not choose my talents in these areas, these are what occurred by learning and accident. I remember Chris' words in 'Stand By Me', "It's like God gave you something, man, all those stories you can make up. And He said, 'This is what we got for you, kid. Try not to lose it'".

Japanese culture has a concept of 'ikigai': a direction of one's life which combines monetary fulfilment, hobby, skill and vocation, or a sense of service. There is no cut and paste template for a career pipeline, but one way to decide is to find your ikigai, or take subjects you truly enjoy as opposed to for keeping options open or to please another.

The Path of Least Resistance Leads to Crooked Waters: How to build courage to confront family with the truth

In order to resist family pressures and expectations, build a strong emotional wellbeing bank of positive, independent activities to cultivate your sense of self. These were all things to refer to when my self-esteem was injured by something my parents had said. My bank consisted of listening to music, watching films by myself, blogging and writing in journals.

Like any struggle, powerful allies, resources and knowing thy enemy can make the difference between escape and remaining stuck.

Find internal and external allies, inside and outside the family. Divisions within the family can create doubt to seemingly ironclad family shaming, thus making parents question their actions.

Part of an Emotional Bank is a support network; you will need them prior to any confrontations with your family to make you feel validated and strong behind the scenes. This can be friends, teachers and community leaders.

Remember that anyone's Emotional Bank is based on their own sense of self. If your parents base their sense of emotional wellbeing, happiness and fulfilment in you being 'perfect', this is co-dependence and unhealthy for any relationship.

Know why your parents are resistant to your academic choices and anticipate rebuttals. This means your view will appear thought out. With the stress of a confrontational situation, you will be more familiar with what you will say and won't trip over your own lines, meaning you can approach the situation calmer.

You can still feel proud of your culture and learn from it whilst being able to critique it for the betterment of everyone.

Recognising Emotional Abuse

If any of what I said resonates with you, know that you are not alone.

Tiger parenting, while common, has been compared to emotional abuse, and for good reason. If you have been threatened, isolated from your peers, monitored extensively, deprived of basic needs, physically harmed, made frightened with extensive shouting/swearing, experienced emotional manipulation and/or made to suppress yourself, know that these and many more are indicators of abuse. Domestic abuse is illegal. In these situations, it is not the responsibility of the survivor to make their abuser reform. The power imbalance and danger may be too great to attempt any reasonable conversation.

Please consider speaking to an authority you trust, including your support network and university support staff. Even if you may not consider leaving home, these people can support you to help boost self-confidence and positive assertiveness skills.

To take destiny by the reins can be a painful and lonely journey, but what matters is that you were independent, tried your best and followed your heart. To grasp my identity back cost me my relationship with my family, but I can say now that I am brave, independent and resilient. And I know you are too.

Horoscopes

IN HONOUR OF MENTAL HEALTH WEEK... BREATHE. STRESS LEVELS ARE RISING HIGH THIS WEEK, WHICH MEANS MISS FORTUNE HAS SENSED YOUR MISFORTUNES IN THE FINAL RACE TO FINISH THOSE ASSIGNMENTS.

ARIES (MARCH 21 – APRIL 19)



This week, you'll be charging full speed ahead. There's no time to rest as you carve your way through piles of work, but you're on a roll! You'll find that people will be coming to you for guidance, asking what's your secret? Your answer; Red Bull. Lots of it. Don't forget to look after yourself! Your number is 5.

CANCER (JUNE 21 – JULY 22)



Having yet to return to campus, you remain home and under blankets. Fair play. This week, that place is not what you need right now, and as always, self-care comes first. Get some coffee and get some chocolate as you have a lot of work to do! It's not going to do itself. Your lucky number is 6.

LIBRA (SEPTEMBER 23 – OCTOBER 22)



Just like the scales, I think you'll find yourself pleasantly balanced this week. Between work and study, you've still managed to be social. I mean, you've done the impossible. You deserve a break, so take this Friday night to reward yourself before the exams roll around. Your number is 7

CAPRICORN (DECEMBER 22 – JANUARY 19)



Stop. And take a breath. Embody the spirit of your sign, the sea goat. How? you might ask. By scaling the nearest mountain and breathing the air fuelled by grassy knolls OR run to the beachside and look upon the sea. S.E.A.G.O.A.T. Ruler of water and land... The point is, you need to reset, so do whatever you please. Your number is 1.

TAURUS (APRIL 20 – MAY 20)



It's time to bring out the Lush goods and pour out a bath, you deserve it. This week, your anxiety will heighten as work and assignments collide like bulls in the ring, so I suggest to take a moment to step back. In honour of time, you have the lucky number 2 for the number of hours needed to preserve your sanity.

LEO (JULY 23 – AUGUST 22)



Stress levels are riding high this week, although I get the feeling you're only adding to it. Stop it. It's not helping anyone. Instead, I suggest that you start focusing on yourself because you might find that you're also in their shoes. Feeling the stress yet? If so, don't sweat it... you're clearly not alone. Your number is 0.

SCORPIO (OCTOBER 23 – NOVEMBER 21)



You're feeling a little like Pluto this week; alone and forgotten. Keep in mind that this is a crazy time of year and people are thinking about themselves, as they should be. Here are two options; 1. Make the first move and reach out! You never know, they could be feeling the same. 2. Buckle down and ride the month out. Before long, exams will be over and you'll be basking in summertime sun. Your number is 3.

AQUARIUS (JANUARY 20 – FEBRUARY 18)



This week, you're sick of the rules. You've had enough of being told what to do and it's really grating on your emotions. So, screw 'em. Do something for yourself, and something that you'll remember. Yes, it sucks following rules, but it's all about pleasing yourself within the confines of society. You'll feel emancipated pushing it to the limit. Your number is 11.

GEMINI (MAY 21 – JUNE 20)



This week, you'll do good to call your twin as you'll be needing some extra motivation. More than ever, you're struggling to retain your usual vibrant self. But that's ok. Perhaps see if you can spread the load by talking to some familiar faces. Before you know it, you'll be back on top and unstoppable. Your lucky number is 10.

VIRGO (AUGUST 23 – SEPTEMBER 22)



This week, you'll find yourself particularly aware of others' digital silence. What does this mean? Take the time out of your busy schedule and contact a friend. Tag them in a meme, ask how they're doing, or comment *fire* on their Insta? That oughta do it. Either way, they could use some of that Virgo loving. Your number is 8.

SAGITTARIUS (NOVEMBER 22 – DECEMBER 21)



This week, your anticipation for summer will be consuming you as you've had enough of 2020. You'll soon be ready to "Thank you, next" her negativity into next year, but that's not before she messes with you a little while longer. Just hold on and buckle in. Your number is 12.

PISCES (FEBRUARY 19 – MARCH 20)



Coffee. You need coffee ASAP.

This week, you're feeling numb to what's around you, and can no longer pretend that your sanity is holding together. Only a few more weeks to go, you tell yourself. No. Have a coffee and you may as well get a cake to go with that. You only live once, so try to find pleasure in the little things. We're with you. Your lucky number is 9.

the people to blame.

CONTRIBUTORS

*Ella Morgan, Charlotte Parker,
Daniel Meech, Madeleine Crutchley,
Patrick Macaskill-Webb, Cameron Leakey,
Shivani Kershaw, Madeline Ion-Robinson,
Chantal Dalebroux, Lachlan Mitchell,
Gabbie De Baron, Rodolfo Villanueva,
Keeara Ofren, Flora Xie, Louise Barnes*

COVER ARTIST

Kaye Kennedy

ILLUSTRATORS

*Gabbie De Baron (@artbygabbie),
Grace Wang, Julia Zhu, Ivy Xu, Kiki Hall,
Kaye Kennedy, Sophie Sun, Eda Tang*

EDITORIAL OFFICE

*4 Alfred Street,
Private Bag 92019
Auckland*

ADVERTISING

*Aaron Haugh
marketing@ausa.org.nz*

EDITORS

EDITORS IN CHIEF

CAMERON LEAKEY AND DANIEL MEECH

SUBEDITOR

TALIA PARKER

DESIGNER

NICK WITHERS

NEWS EDITOR

ELLA MORGAN

FEATURES EDITOR

MADELEINE CRUTCHLEY

ARTS EDITOR

LACHLAN MITCHELL

LIFESTYLE EDITOR

BRIAN GU

VISUAL ARTS EDITOR

EDA TANG

STAFF WRITER

JUSTIN WONG

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