

Wir sind UP – der Podcast

Guest: Lena

Transcription:

Intro

Welcome everyone. In our podcast, we introduce students, teachers, and administrative staff from the University of Potsdam. They are individuals with and without disabilities, and we want to explore how inclusive the University of Potsdam is as a place of study and as an employer.

[00:00:29.780] - Erika

Hello and a warm welcome to everyone to our today's episode of We are UP. I'm Erika, a student and student assistant at the University of Potsdam, and today I have Lena as our guest. Lena is also a student here at the university, and she'll tell us more about herself shortly. But first, an important note for you all. Today, we're discussing a sensitive topic, so here's a trigger warning in advance. We'll be discussing what it's like to study with depression. As many of you may know, most illnesses are invisible and thus not immediately apparent. It's even more important to make visible those who are affected by such invisible illnesses, disabilities, or mental disorders. On one hand, to destigmatize and demystify the topic of mental disorders, and on the other hand, to sensitize everyone else on how to deal with it. Moreover, by discussing and making it visible, we can firstly show other affected individuals that they are not alone, and secondly, show them the possibilities and ways to cope, or what specific options and rights they have here at the University of Potsdam if they are studying with a diagnosed illness. For example, accommodations. So, now over to you, Lena, please introduce yourself briefly.

[00:01:49.180] - Lena

Thank you very much for the introduction. I am a student at the University of Potsdam in the master's program. I completed my bachelor's at another university and during that time, I experienced a depressive episode and received the diagnosis of recurrent depressive disorder and... Exactly.

[00:02:07.420] - Erika

Thank you. Let's dive straight into our question round. Here's how it works: I'll ask you a few questions, and you can choose to answer them if you wish. And if a question doesn't appeal to you, you don't have to answer it, of course. My first question is: What factors led to the development of depression in your case, and what did your study routine look like before?

[00:02:29.800] - Lena

I'll start with my study routine. So, I started my bachelor's degree, which was a very demanding program, and that brought a certain amount of pressure with it. And of course, I also found it exciting to make the most of everything the program had to offer, whether it was engagement, trying out various side jobs, or participating in sports and meeting new people, going to parties – everything that was exciting. And at some points, I may have forgotten where I was and to be present with myself. And that's where I might have overwhelmed myself a bit. And that was a factor that could have led to the onset of depression. On the other hand, I also had a relationship that took up a lot of time and could have contributed to the development of depression due to certain events. And then, of course, there's COVID. COVID provided the space to step away from all these activities, and at that moment, the crash came for me. From that point on, everything changed.

[00:03:46.970] - Erika

So, a lot going on in life. Studying, relationships, Corona. Wow. Studying with a mental disorder means that student life is simply not always easy. Of course, it isn't for anyone, but when you have a mental disorder, there are additional difficulties and challenges. But before we really get into talking specifically about university, I'd just like to know, what was the first decisive impulse for you to recognize that something wasn't right or was different?

[00:04:22.640] - Lena

Actually, the first impulse came quite late because striving and functioning were always at the forefront. I thought to myself, as long as I achieve good grades and manage to handle things, everything is fine. Even if everything goes downhill, as long as I somehow... offer what I also expect from myself, then it works. And I already had symptoms in a way, such as: I cried a lot, I had no energy, but outwardly, I always functioned and showed that everything was fine. But at a certain point, it didn't work anymore. And during Corona, there was an exam phase, and despite things happening in the relationship at that time, I tried to study. I studied, studied, studied, and I went to an exam, and I got a grade of 4.0 in that exam, which was a bad grade for me. For some, that might be the goal. It's okay, depending on the course of study. And then I had that grade invalidated. That was an absolute failure for me, and I didn't take any of the other exams afterward. From there, I developed some exam anxiety, and that semester didn't go well for me, and that was an absolute feeling of failure for me, which was also an impulse for me that something was not right.

[00:05:47.720] - Erika

And how did your depression manifest itself? You briefly mentioned crying and not being able to get things together properly. But can you describe in detail how it was for you? Because, as we know, depression can have many different faces, and symptoms can vary greatly. What was it like for you?

[00:06:12.480] - Lena

Exactly. So ultimately, crying or failing in the exam, in my view, those were my primary symptoms. I would say that my depression manifested itself in a way that I lost myself. I had no sense of what was normal, what was good, what was not good. I felt empty inside continuously and experienced my emotions as real. That means I could completely detach myself from thoughts like everything is meaningless, everything is transient, everything is overwhelming, everything is unbearable. For me, it was just... I always felt like I couldn't go on, and so for me, it was always a feeling of I must perform, I have to function. But I can't. And this feeling of, I can't go on, and it's tearing me apart inside. I think I also had such a deep despair in me, and you must imagine, maybe, how it manifested in me. I had many panic attacks. I was still caught up in these obligations that I had somehow created for myself. And despite COVID, there were still online meetings or other fixed appointments that were going on. But most of the time, before those, I was crying, mostly in conflict with my ex-boyfriend, and I would run away. Behaviors that were not visible to anyone else in that context. I isolated myself a lot. It was easy to do during Corona. You could say you didn't want to meet anyone. That wasn't a problem at that time, to withdraw for those reasons. I lived alone. I was extremely dependent on my partner, with whom I spent most of my time because of Corona. And I think, at that moment, everything was just gray, and I really thought that's how the world was.

[00:08:20.620] - Erika

Okay. And how did you then decide to seek help? And how was your social environment involved?

[00:08:29.920] - Lena

Exactly, my social environment, as I said, mostly didn't notice much, except my boyfriend at the time. Of course, friends could sense something, but they couldn't quite grasp it. I had already opened up,

but for me, it was like this: I didn't show the emotion. I only talked about what happened or how I was feeling, quite matter-of-factly. Maybe at that point, many people don't take it seriously, but that also shows how much weight words carry at certain points compared to facial expressions or gestures. And maybe you can't even show it because... I used to describe it like floating on a lake. And if you somehow put your head underwater, then you fall into a very, very deep black hole. And that means I always stayed on the surface, for other people, those I didn't trust so much at the time, my partner was the person to whom I opened up. And now I've lost track a bit.

[00:09:35.320] - Erika

How did you then come to the point of seeking help?

[00:09:38.480] - Lena

Exactly, how I came to that. So ultimately, I tried to cope with it for a year and also to accept the help from my boyfriend at that time and actively write down all the things and reflect and confront myself because I somehow didn't really understand that it was depression. For me, it was somehow everything else, somehow too much stress. So, I didn't perceive it as a disorder at that time. And after a year, I had a moment where I completely broke down again and was confronted again with the whole past year. And then my ex-boyfriend at the time said it might be a good idea if I sought professional help, and that was absolutely right of him. And it was intended as part of couples therapy, but then I actually went to a therapist. I wrote two emails, only two because I thought, "I don't need that. And I'm fine. There are people who are much worse off." So, I wrote two emails. I received a reply to one email, saying, "If it's urgent, please let us know again; we currently have no available slots." And I didn't follow up on that, and then, one or two months later, I received an email saying, "A new colleague has joined us."

[00:11:13.540] - Erika

What luck. It's so difficult to get an appointment.

[00:11:13.540] - Lena

Exactly, it was incredible luck. I had the initial consultation, I also went to another therapist for an initial consultation, and that was great for me. I wrote down everything that had happened to me and what I had experienced. It was quite difficult for me because I hadn't really seen the problem. I saw that I wasn't doing well, but I couldn't grasp it. And because I couldn't grasp it, I just told everything. My whole life.

[00:11:56.740] - Erika

That's good. Therapists can work well with that.

[00:12:00.180] - Lena

Exactly. And then they told me that it was a good situation to start therapy, especially while studying, when I was still quite young. A spot was also offered to me, and it was stated as a tentative diagnosis, a mild depressive disorder due to overload.

[00:12:21.130] - Erika

Okay, thank you. What measures or strategies did you then take to find yourself again parallel to your study routine?

[00:12:34.470] - Lena

Exactly. So, in addition to the therapy, which I've been doing for quite some time, or maybe based on the therapy, I understood, or yes, maybe it's easier to put it this way: I learned to be more present

with myself. Ultimately, being present means recognizing warning signs early, communicating early, and seeking help early. And that requires a lot of mindfulness for one's own symptoms in case of minor stressors. Of course, it must be said that depression can look very different. For me, it was about overload, but often it can be other causes. But having a feeling for oneself, in what way - something is going wrong. Right now, somehow, I can't focus on core thoughts. Now, I'm diving into work to distract myself from my emotions. Such issues. And what also helped me a lot was, of course, to reflect on how I was doing, and to lower the expectation that everything always must be perfect. Everything must be great. I must have a great event, I must work great, I must give 100% everywhere. And to return from that to this "It's good enough". And I realized that "good enough" doesn't just apply to what I deliver but also how I feel about things. If I just have a relaxed Sunday and those waves don't hit so strongly anymore, then I feel better overall. And I think that's something that often happens to people, always striving for those special moments, that event, and making it so important. And finding the beauty in the everyday, to say for oneself: "I only do as much in a day as I can recover from the next day, or even better, on the same day."

[00:12:31.470] - Erika

Uh, very good.

[00:12:31.470] - Lena

Those are the lessons I've learned and also the open exchange, actually. Otherwise, I probably wouldn't be here.

[00:14:37.890] - Erika

Talking about it, yes.

[00:14:40.980] - Lena

Exactly, talking about it. But above all, also not to perceive a diagnosis as identifying. I mean, I might not fit into the stereotype one imagines of depression, but still, it can happen that one takes one's own suffering as an explanation, and it took me a long time to get out of that. Of course, it can be external circumstances that somehow lead you there, but actually, you are responsible for what you make of these circumstances and how you get out of that situation. So, what helped me the most was taking care of myself and taking responsibility for myself.

[00:15:21.170] - Erika

Very nice. What do you think, which offerings from the University ... Or what do you think, "think" is the wrong word, what do you know, which offerings from the University of Potsdam can support in such a case? So what can maybe also prevent and help?

[00:15:39.790] - Lena

So maybe what helps me, preventively now, just as a concrete example, I really enjoy doing yoga, also through the university sports program. It's enormously enriching for my life. It's as enriching for me as therapy. That's incredible. So, especially going in meditative directions, often focusing on the breath, to see what's actually happening with my body. That's happened to me often during yoga, that I even had a tear in my eye because often in everyday life, you sit, you're tense, and you don't even notice how much stress is actually in the body. And I've learned that the best way to reach the mind is through the body. Exactly. And of course, what the University of Potsdam offers is also the Feel Good Campus. That's also a great institution that ultimately offers many opportunities. I believe you can always turn to them. And generally, just ask, they can also refer you, as I said, I wasn't actively seeking help when I started studying here. Accordingly, we hadn't actively sought help, but

just entering "University of Potsdam counseling center" into Google, there's the psychological counseling center.

Ultimately, just go there, and then you can still say or you get the feedback: "You can go here and there." That's the worst thing that can happen. And in the best case, as with me, I thought it wasn't worth being treated, but it's somehow worth it to experience the appropriate support. From a psychological point of view, it's said that the level of suffering must be high. If the personal level of suffering is too high, it cannot be compared with others. And so just reach out, whether it's at the Feel Good Campus or the psychological counseling center, or maybe just to colleagues or fellow students who might have some support and actively ask for help, whether they can help out if you're feeling [unintelligible].

[00:17:49.960] - Erika

Very good. Have you also been in contact with the Accessibility Team at the University of Potsdam, for example, for accommodations? I have to ask, of course. I'm familiar with it because I work in the Central Study Department, also in the Accessibility Team, and we advise mainly on the topic of accommodations. If you have a diagnosed condition and also have a mental illness or disorder, you can offset the disadvantage through an official accommodation. Have you availed yourself of such services?

[00:18:19.530] - Lena

I haven't availed myself of that. It should also be noted that during the times of my depression, I never felt that they actively hindered my performance because I am such a high-functioning person. Of course, it can look different. However, I did have exam anxiety, and I still do in relation to exams where I need to be present and memorize things. Right now, things are going so well. I am obviously in my master's program. However, my therapist recommended it to me or offered it to me. Recommended might be the wrong word. She offered to write a letter stating that I could receive accommodations. So, I know that it's possible if you are in therapy... I think it's best to inquire with you if you have any questions. In my case, that wasn't necessary, but I can imagine that you can get an appropriate response there, whatever you may need.

[00:19:21.170] - Erika

You definitely need a specialist's report or a test from a specialist or psychotherapist and fill out a very open, comprehensive application stating what you need. Many students, for example, who study with ADHD or autism, can get their own room for taking exams, where they have peace and are separated from the many other students. Some may need to write on a computer; for example, those with visual impairments need technical support or extra time for exams, or they may need to be exempted from deadlines, so they can enroll and deregister from events or exams outside of deadlines. You can establish such accommodations in the request for accommodations, and once it's approved, you have it. You don't have to use it. So, the application is one thing: once it's approved, you have it on hand, but you don't have to use it because no one knows you have it. Even the instructors don't know who has an accommodation. So, only when you want to use the accommodation can you tell the instructors, "Hey, for this and that exam, I would like to use my approved accommodation. I need my own room or extra time or something like that." Exactly. And only then can you use it. So, you can also, if you are eligible, as a precaution, submit the application, then you have it approved and have it on reserve as a resource for security if you ever need it. I know students who had an accommodation but never used it.

[00:21:14.150] - Lena

I can imagine that it provides incredible security. For example, I wasn't aware that extending registration deadlines could also play a role. I think that's primarily something that can help with

depression, and one can say, of course, depression often goes hand in hand with [unintelligible], whether it's anxiety disorders or something else, or sometimes even ADHD. It's nice to know that this option of security exists, and I also think anonymity is important, knowing that no matter where you turn, you have the opportunity. What also comes to mind as a supplement is the topic of hardship application. I'm not sure if that's how it works, but that's also something that might be relevant to depression because you might struggle to pass on the third attempt. Then you need the possibility. Exactly.

[00:22:06.870] - Erika

You can also get advice from the University of Potsdam, either from Robert Meile, the representative for students with disabilities or chronic illnesses, or from the Central Student Advisory Service. Exactly. Let me continue with my next question: Do you talk to others nowadays about your studies in connection with depression, and what's the response like? How do people react to that?

[00:22:29.660] - Lena

Actually, that's sometimes the frightening part. I have a diagnosed depression, yet I feel it's not taken seriously. And I talk about it, I talk very openly about it, that's why I'm here too. I mean, I mentioned it casually in conversation. And I still don't talk very emotionally about it because it's something I've worked through. Very often, for example, I hear the phrase: "But you seem so cheerful, how can it be that you've always had a lesson?"

[00:23:05.270] - Erika

The classic, yes.

[00:23:07.790] - Lena

Exactly. That's why I think it's important to talk about it. The weirdest thing I've ever heard was: "You don't meet the criteria for depression."

[00:23:16.690] - Erika

And that was probably said by someone who is a clinical psychologist. Probably not.

[00:23:24.670] - Lena

No, I encountered that during my studies, and it made me realize... I mean, I'm not in the acute phase anymore, but especially at that moment, those who hear such things should really listen. Words sometimes mean so much more, especially with high-functioning people who function a lot but don't necessarily show it. Of course, there's not only that reaction, but one should also be a bit prepared for it to be a sensitive issue. But there are also many, many other people who react very understandingly, who still say to me: "Oh, you've done well." That's also a funny reaction. So what I mean is, I understand the fear that maybe you don't necessarily want to confide in everyone, but you can turn to people who are knowledgeable, to appropriate counseling centers. Or you have the opportunity to confide in someone in your circle of friends whom you really like. And I think that's somehow my recommendation, to first address the topic with the people you know won't judge you and then gradually approach it when you are acutely affected. Because it can be a setback if you then encounter a person who has and [unintelligible].

[00:24:51.510] - Erika

...then reacts insensitively. Exactly.

[00:24:52.150] - Lena

Yes, one should be aware of that. That also carries a bit of one's own responsibility, how one opens up. But I didn't want to scare anyone. It's funny because it's still treated as a sensitive issue. And at this point, I also want to give a bit of advice not only to the person experiencing depression but also to everyone else.

[00:25:13.150] - Erika

For everyone else who listens or becomes aware of it.

[00:25:15.860] - Lena

If someone says they're feeling a bit depressed, it might not just be a joke; it might also be serious.

[00:25:24.100] - Erika

So, be vigilant, yes. Now, that was already a very good transition to my next and final question: If there are people listening right now who are dealing with similar challenges but aren't sure where to turn, what would be the most important advice you would give to them?

[00:25:48.390] - Lena

I have a lot of advice. I've already mentioned quite a few. What might be a good piece of advice overall is a mix of distraction and confrontation. I think confronting one's own emotions is very important and, in that process, being honest with oneself. And if one isn't feeling well, then one should acknowledge that and seek help. As we've already mentioned, whether it's applying for accommodations, taking the first step towards psychotherapy... taking care of oneself, turning to one's best friend, mom, dad, or closest support persons. These are all options, and above all, taking care of oneself.

[00:26:29.220] - Erika

Not staying alone with it either.

[00:26:30.840] - Lena

Exactly, not staying alone and even if you're lying in bed and nothing makes sense anymore, maybe try doing what you enjoy the most in that moment. And if it's tidying up, if it's pursuing a hobby. You have to imagine you're the older sister and then see what you would do for yourself to feel better. And ultimately, just be careful, careful about how you let yourself be treated, careful about what you allow to happen to yourself, and try to stand up for yourself. And I always say nicely, "You're not alone, but you also have to demand help." You have to take the step, and then things will get better. And especially, I know it's very easy to stay in this situation because it also gives you security. You can use it as an excuse, as a justification for many things. Maybe it even feels somehow good in a strange way, but you don't know how much better it can be. And what's interesting is that this healing, so to speak, is not continuous. It happens on many levels, and it may be that after two months you say, "Wow, I've really accomplished a lot now, and things are much better for me." And for me, there were fewer and fewer, but still occasional steps where I thought, "Wow, I'm feeling better, and what happened back then was reality." And what I mean by that is that it doesn't stop just because you take the first step. You have to keep going and integrate it into your life, and only then can you heal and reach a point that is much better than before.

[00:28:07.860] - Erika

A very nice closing statement. Lena, thank you very much for being so open with me about such a difficult topic, and thank you for being here. And by the way, you'll find important links to support and counseling services here at the University of Potsdam, as well as outside the university, in the description of this podcast episode if you're affected by mental disorders yourself or just want to

learn more. It's never too late to get the help you need and deserve. Thanks again, Lena, for being here, and thanks to all the listeners for tuning in. Goodbye, take care.

[00:28:50.480] - Lena

Goodbye.