**Disability History Month: Our Stories.**

**Video transcript: Casper.**

I feel like, especially with mental health, you can have changing diagnoses and you can go through good patches and bad patches and it becomes less about disclosing: maybe I have depression or I have this, and more about disclosing experiences you've had. It's not so much like these are some things I go through and maybe could you accommodate them but more:

This is my history and these are things that have happened to me that aren't necessarily normal, but they're part of my life and part of what's happened during it. I've noticed, especially the last couple years, depression and anxiety have entered the mainstream and it seems everyone's very happy to talk about: I don't feel like going out today, I'm really anxious or I got up late because I was depressed. And it's a lot easier to talk about these things and most of the symptoms that people associate with these are the symptoms of avoidance: not coming in or staying in bed when there's really so many other ones that are constantly going on in the back

of your mind every single day. But there's certain things that are less, less common or less talked about - stigmatised even. I like to bring up things I've been through when it becomes relevant, because I want to raise awareness and I want people to know that these things happen and they don't make you a crazy person that needs to be on a ward for their entire life.

So I try and make a point to tell people about them to normalise it, but I still get really intense reactions, people acting really shocked and saying: Oh my God, I'm so sorry. But like with depression and anxiety and not getting out of bed and all those, it's just another of those things that is part of my life. I wish people had more than a surface level knowledge.

I don't have OCD, but that's a common one that people still get wrong and don't understand. When if they Googled it, they would see exactly what it was about and then be able to respond in an appropriate way. The kind of unique things that I've been through: severe dissociation and psychosis, and those are both highly misunderstood, stigmatised. People don't understand what brings them on or what kind of people will experience them.

I used to have really extended periods of dissociation. One lasted, I want to say, close to a year. I think that was when I was in school choosing my, doing my university applications and I remember coming out of it really suddenly when I listened to a song, and I remember listening to this song and being like: Oh, this is what music sounds like!

But the next day I went and I told my mum, kind of: I'm back. I'm no longer out of my body. Like, what have I missed? Because you can get amnesia with it as well. And my mum had no idea what I was talking about. She said: What do you mean, you were gone? We talk every day.

You go to school, we cook. How, how can you have not been in your body? It can be difficult to explain and complicated, but I wasn't there; I was just on autopilot. I remember looking at my university applications and thinking, why did I choose these subjects? I'm not even interested in these. It was just me on autopilot, making all the decisions that were easiest to make, just going through life, doing all the things that were expected of me without thinking or knowing what I was doing in any way.

Dissociation is very common and people experience it every day just walking or driving to work. You can blink in and out and you're where you were supposed to be without remembering your journey. But if you go through stress or trauma, severe depression, this dissociation can be triggered when it's not supposed to be triggered. It can last as I've said... years even.

It can last a couple of minutes. There’s methods you can learn to get out of it. So I haven't experienced it now in maybe four or five years because I know the signs, but it's still something that I have to be aware of every day. I have to notice my emotional state, how my body's feeling. So I'm aware when I'm in danger of slipping into one of these states.

Psychosis is similar to dissociation where it's, can be triggered by trauma or stress. A lot of people think psychosis is only experienced by people with schizophrenia, but it's experienced by people with bipolar, severe depression, anxiety, borderline personality disorder. It can really be triggered in anyone. It's not. I think it being associated with certain diagnoses and conditions is harmful because people see psychosis, delusions and hallucinations as something crazy.

It's not talked about. And when it is, it's often in a very alien way. But psychosis - psychosis usually takes one of two forms or both. You have hallucinations. They can be visual, auditory, anything, and you can have delusions which are fake beliefs. I've rarely had hallucinations, but I've had delusions that lasted months long and it can be very difficult for people to understand.

People see mental illness as events that happen, such as with depression: staying at home; with schizophrenia: having a psychotic break. But you can live with these things and still go about a normal life, like with dissociation and being on autopilot. I've had paranoid delusions that people were after me, I was in a simulation and I'd just be going about my life like normal.

I'd be going to school, talking to my family, trying really hard to act normal, even because I thought that if this is hard to explain, if you're having paranoid delusions, you're constantly afraid of the people around you and what they might do to you. So the symptoms include feeling as if you're outside of your body, feeling as if reality is blurred.

There's a derealisation which is where nothing feels quite real and depersonalisation, which is when you don't feel inside your body or your self. These can be really disorienting. Sometimes I've just been on autopilot for a while and it's kind of been fine when I come back. I remember one time coming out of a dissociative state when I was in the middle of London.

I grew up in London, and I had no idea where I was or what I was doing. I knew where my home was and I was about a three or four hour walk and I decided I was just going to do the walk and figure out who I was on the walk home. If you're taking medication, it must mean something is really wrong with you.

But medication is normal. You take medication when you have a headache and you also take it when you have chronic pain. There's different levels, different dosages. With things like depression, there's so many medications. It can take a long time to find one that works. I take Quetiapine, which is an antipsychotic, but I take it mainly because of insomnia.

It's a kind of off-label prescription and it helps me get to sleep every night. Without it, I wouldn't sleep at all. But one of the side effects is I'm always tired. Depression already makes you tired all the time. Because I take this medication, I'm tired constantly. It's a struggle to get out of bed. It's a struggle to move around.

I have to summon energy to do everything, but it's something that I'm happy to live with because it means I can sleep at night and it means I can go about my day in a normal-ish way.