

Podcast transcript with Lisa Endersby and Kristen Abell

Kristen: At the beginning of this last month - this April - I asked a bunch of friends and family members and coworkers to talk about, I guess, to write about/to talk about mental illness. Specifically *my* mental illness and how interacting with me has, what that looks like for our relationship and all sorts of good stuff like that. Anyways, you mentioned wanting to have a conversation with me about it, so, what do you want to talk about?

Lisa: Yeah. Sorry, I'm thinking, and thinking is a lot harder to do and demonstrate simply through audio. I think it's a fascinating question, and I think - quite narcissistically - it's particularly fascinating for you and I - maybe I'm only narcissistic in my own right. I think it's particularly fascinating because when I think about our relationship, our friendship, and how much of it is based around, or the tools that we use are primarily technology, and we don't often see each other, even virtually, right? Like so much of our conversation is text based.

Kristen: Yeah. So Lisa - I should fill in - Lisa and I talk almost daily.

Lisa: I think it's also just fascinating that when you think about the nuances of mental illness or just mental health, using text-based technologies to have relationships with someone who identifies as having a mental illness *and* to talk about mental health using text-based technologies. I mean, if I wasn't already neck-deep in my own Ph.D. research I might switch to something like that because I find that just so fascinating. Uniquely vulnerable, but also a really interesting place where we can go to hide, in the same respect. And, in all of that, a lot of our conversations - as long as my boss may not listen to this - but a lot of our conversations are during business hours. Because we often have unique stressors and challenges that come as a part of the culture that we work in or the types of jobs that we have. It's interesting, and I wouldn't say we filter relationships in spite or despite of that, but I will say that I think that has uniquely colored our relationship and how we've supported each other. And that's uniquely very fascinating to me.

Kristen: You mentioned that sometimes we go to those places to hide. Can you expand on that? What does that mean?

Lisa: Yeah, so I remember thinking about this when it came to things like being in a long-distance relationship. You know, because I've vented about this to you a bazillion times, and you were my friend through all of that wonderful time. And it was wonderful - I'm being sarcastic, but it was also quite wonderful. That I was in a long-distance relationship with my partner, and in those long-distance relationships - or long-distance friendships even like you and I have - this type of asynchronous text-based communication - for me, I'll speak for me - removes some of the things that allows me to feel like a vulnerable conversation is safer. So, I can see your face, I can talk to you synchronously, I have more to go on than the words you say and how many exclamation marks you use or didn't use. Or whether "sounds good" has an exclamation mark at the end of it or not or whether there's a smiley face at the end of your

statement. And that all sounds somewhat facetious, but when you are in a space where your mental illness or the challenges associated with your mental illness take hold - for me again - my level of interpretation, and probably very false interpretation, ratchets up. So without some of those cues, it's challenging sometimes to have those types of conversations. Or to even have a, quote/unquote more typical conversation. But on the other hand, I can also hide some of how I'm feeling because it's strictly text-based and sometimes asynchronous. If I'm having a crappy day, I can just type, "I'm having a crappy day." But the nuance of how crappy it is, why it's crappy, maybe it's not just crappy, maybe it's shitty. You know, on the continuum from bad to shitty, maybe it's actually shitty, not just crappy. So it's a way that I can create some distance, whether I want to or not. But it does feel like hiding. And, again, I can only speak for myself, but it's a strange place to be and where you certainly are reaching out and wanting that vulnerable, authentic connection. But at the same time, I've become so well-trained at times in hiding my anxiety, it's just a natural habit to fall into. "No, it's fine." Maybe it's not even hiding, maybe it's diminishing, or deemphasizing, as a habit, even though I don't feel I need or want to do that with you.

Kristen: Gotcha. So I think, I mean, one of the things that's kind-of unique about our relationship is that I feel like we've been pretty honest with each other from the start about where we stand on our mental illness spectrum, I guess? I don't know if it's a spectrum. So yeah, some of the people that I've talked to didn't find out until later in our relationship that I experience depression and anxiety. Whereas I *think*, when we first started talking, you knew that about me. Does that sound about right?

Lisa: Yeah. I mean I think I knew that...I guess when we first started becoming friends or having conversations, it was so interesting, right? Because I knew, I don't actually remember you ever disclosing? Like it was never really a, "Hi, I'm Kristen. I have a mental illness" conversation. In part I knew you, as I've come to know some other great friends on social media, through their Twitter profiles and the tweets they were sharing and the conversations they were having. And we knew each other through professional associations. So what I knew about you was that you were a very passionate, vocal, strong advocate in talking about mental illness. And you also very much personalized that conversation. So it was, to me, right on the same level of, oh, I know she works as a webmaster. Oh, and also she experiences mental illness. It was just something else. Like it was never abnormal, it was never an, "Oh! I had no idea!" It destigmatized it right away. Of course, I come from a space where it was never a stigma for me, in part because I've experienced it. It just was a very natural thing, like, "Oh yeah, I know all of these things about Kristen." And that was just one other thing. So yeah, it was weird. I never felt like you - or I - had to say like, "Oh, by the way..." Just, we knew. It was a very natural part of our relationship, and I think that's one thing we definitely bonded over, too, right? When you find someone who's willing to talk about it in the way we're willing to talk about it? It's different than, "I also love dogs," right? That level of commonality brings a different tone to the relationship. In a good way.

Kristen: Yeah, absolutely. Absolutely. I mean, I think that definitely, you're starting from a different place, maybe? Than just, you know, "I like the color purple, too." Like, you know, like you said, or whatever. That you're starting from a shared experience, really, in a way. And I think it - I won't say colors, that's not the right word - but it changes how we talk to each other on a daily basis, too. That there's more of a, when we say, "How are you?" it's not, we're not expecting, "Oh, I'm good. And you?" You know, we're expecting, we want to know, really, no, where are we at today?

Lisa: M-hm. And that, too, is a cool part of the friendship that we've developed, and the conversations that we've been having because I think the idea of, like you said, that very loaded question, "How are you?" As much as we expect a particular response, it's an interesting negotiation for me, and you and I, you know, talk about the spoons that we have, or don't have on a particular day. And it's almost like we know that we'll always have a spoon for each other. Right? Like no matter how many spoons it took to get out of bed, no matter how many spoons it took to make it to work, or how many spoons I just, like, threw on the floor after that particular meeting at work. There is still a space. There's like, the one secret spoon, which I now need to make into a book title.

Kristen: (laughing) The Secret Spoon.

Lisa: Oooh, The Life and Times. But that's also just such an interesting interplay. Like for us, there are days where so much exhausts us, and so much depletes us. But there is still this strength that comes from talking about things that in other situations or with other people could be - is that even a thing? Depleting spoons? Like, I can imagine there are some friends that you have, and you and I have even talked about this, friends or just people in our lives if you want to get very anonymous. But people in our lives who, when they share similar concerns, or have similar conversations, they can be more spoon-depleting.

Kristen: Right.

Lisa: They approach challenges or have conversations with us or, you know I've mentioned to you before the sort-of drive-by friendship conversations? Like, "Hey! This happened! Okay, bye!"

Kristen: Right, like, what just happened to me?

Lisa: There's a lot to unpack there. Yeah, like you get weird emotional whiplash. But I think we've become very good at reading each other, again, which is fascinating through simply Google chat. But because we also have that sort of intimate knowledge of what it could be like for each other in our own brains, because we have some experience and idea...

Kristen: Right.

Lisa: That we can read that, *and* we know to be able to ask for space if we need it. And I'm not going to get mad at you because I don't talk to you all day. I mean, it'll *suck* because I miss you, but it's cool, I get it. If you need to step away, or like, I can't engage right now, or like, this is what's going on.

Kristen: Right, we're able to say that.

Lisa: And we have that level of understanding. Yeah. And I love that because I think it's a model for a lot of relationships, whether you identify with a mental illness or not, right? That you negotiate the good days and the bad days and the good moments and the bad moments, and that you - it's uniquely personal but you also depersonalize enough that it's not about you. Where like, if someone's having a crappy day, it's not about you. To be honest, it's gotten in the way of some other friendships. Like even when, and you and I do this to each other, but we'll say like, "Can I help?" And if the answer is no, I still don't think any less of you or any less of our relationship or think any less of me.

Kristen: Right.

Lisa: Which has been different with other friends, and I've had to work on it with partners, too. Like, don't try to fix it!

Kristen: (laughing) Right.

Lisa: Let's just talk about it, and if you can't fix it, or even if you can't talk about it, that's still okay. Yeah, it's an interesting-to-me, almost, dare I say, ideal - and I know that's a strong word - what a healthy relationship could look like for some people who may have a slightly unhealthy mind.

Kristen: Right. Yeah, no, I mean I think one of the things that I appreciate about some of the friends that I've made from Twitter - especially those in the world of student affairs or higher ed - has just been the willingness to acknowledge it and then - it's not like, "Oh, yeah, you're, you have depression, but you're not really depressed." Right? There's still a, "Yeah, you have depression, how are you *doing* today?" But I also don't feel like it's constantly at the top of their mind. But they don't ever fully dismiss it, either. And so it's that fine balance, you know? There's really a balance in there that is important. To acknowledge that somebody has an illness and *is* experiencing that and does need, you know, those extra spoons or whatever, while at the same time knowing that that illness is *not* them.

Lisa: Yeah.

Kristen: So anyways, I just, I mean I think that, I mean, one of the other things that you and I have talked about is the difference between...I don't feel like when we talk about stigma, for

example, in higher ed, I don't necessarily feel like people are as open about it as they used to be? But there's this silence around it.

Lisa: Mm-hmm. Yeah.

Kristen: And when you get silence, and you're already somebody who struggles with anxiety, like, how much more anxiety-inducing is that? You know?

Lisa: Oh my gosh, yeah. Yeah, yeah. I mean, silence is like the most loaded type of comparison fuel, the most loaded type of anxiety fuel *ever*.

Kristen: Mm-hm.

Lisa: I mean, sometimes, to be honest, like, a short text message can be worse, but absolutely, yeah. But it's cool that you were saying like, you know, stigma and the conversation is more open/more silent about this, too. But I use the terms, like authentic and vulnerable, like those have deep meaning to me. I still continue to worship at the altar of Brene Brown. Like, I take her definitions. *But*, there's a weird use, or perhaps I will be somewhat controversial and say misuse of authenticity, maybe in our field specifically, but more broadly. That it still gets conflated with vulnerability. It still gets conflated with - Brene kind-of refers to "floodlighting," or "spotlighting." Like even authenticity is becoming inauthentic to me.

Kristen: Right.

Lisa: And that does not take away from the people who stand up and disclose or share or discuss really powerful, important, personal things. But when the conversation happens around it, it's almost like, "Look! I'm having this conversation! Look how authentic I can be! I'm talking about this with you! I'm tweeting about it! I'm hashtagging #SACommits! Oh my god, I'm so in touch!"

Kristen: (laughs)

Lisa: You know? And it's just weird because I don't want to make it seem like well, if you haven't experienced it, then you wouldn't know. Because I would not wish this on anyone, and I don't want it to be like a secret club that we're all in, and you're not a part of, so *you* wouldn't understand.

Kristen: Right, right.

Lisa: 'Cause that kind-of defeats the purpose of what we're trying to do. But I don't know. It's weird, like when you talk about the silence, I often worry more about what's being said. Right? Like what are we talking about, why are we talking about it, why are we choosing to share it on these particular platforms. You know, 'cause then it's the conversations like - I love all the little

comics of like they do the four or five panels of someone's got a broken leg, and they're really nice. And then, "Oh, I'm feeling depressed today," and it's like, "Oh, whatever, you're not really depressed."

Kristen: Right.

Lisa: It's the difference between being medical and other types of illness. That and the conversation around it is *still* very much like, yes, we're talking about it more, which is good, and we're talking about the lack of you know, the stigma and the challenges with that. But the prevailing narratives even in talking about trying to destigmatize mental illness, it still brings up so many conversations about the stigma of mental illness.

Kristen: Yeah.

Lisa: Like the way people are talking about it, it's just interesting. Like, you know, well, "I thought they were crazy," and now I'm like okay. I don't know, it's hard to explain. I just feel like when you and I talk about it or we talk about it with our friends, maybe it's because those conversations aren't shared publicly? That they feel more authentic and valuable to me. And then there's the challenge of I would like - and this is why I wanted to have this conversation with you, and record it and post it and share it - because I think it's valuable to talk about these things in public and in public spaces where other people listen and hear and engage in dialogue, but those very same platforms make authenticity look *really* different. And there's still this need to appear a certain way on Twitter or, you know, act a certain way on Facebook, or whichever. That's still - I think it's going away? But it still colors a lot of these things. So, and you know silence doesn't necessarily mean nothing's happening. It means nothing's happening publicly, and there's not, they're not hashtagging about it...

Kristen: Right.

Lisa: But I walk that line - I'm still with that. There's a lot of gray there for me of like, public is important, but sometimes private is better, but I want it to be public, why is it public...And then I just end up talking to you on a Tuesday night, and it all makes sense.

Kristen: (laughing) Right, right. Well, I do think - that there's a couple things you said there that I thought were interesting. The idea that there's still a lot of stuff being said that you're like, wait, what? What did you just say? Like, how, what does that mean? And those sorts of things. Like I've seen, particularly one of the things that I've seen is this, oh, in one breath, "Well no, I totally support people with mental illness." And in then in the next, "That person is *crazy*." Like, you know, and so it's like there's this weird disconnect from the idea that, you know, I can support somebody with mental illness who presents as "normal," - I'm making air quotes. You can't see that on the podcast, but I'm making air quotes here - as "normal," but then acknowledges that they have a mental illness versus somebody who really genuinely struggles and - not that the

person who presents as “normal” isn’t struggling, but that the struggle is more external and visible for people. And what that looks like.

Lisa: Well, and also, yeah, and I’m just thinking about when you say presenting as normal, but I’m also thinking about these conversations around how glamorous mental illness appears to be to some people some of the time.

Kristen: (sounds of disgust) Yeah. The idea of the depressed creative or the anxious creative and stuff like that, I - and it’s also fascinating to me, like among people who actually experience mental illness, this idea that none of them - because their mental illness isn’t “*that* serious,” that they’re not - it’s a weird, I’m trying to think how to describe it because it’s something that I deal with when we’re recruiting writers for The Committed Project. And I’ll say to somebody, “Oh, you should write for us.” “Oh well, but, yeah, I have mental illness, but it’s not, it’s not as serious as yours so I don’t know if my post would be any good.” Like it’s not a, it’s like a discounting of their own experience, and I’m like, you know, there’s no contest. We’re not, there’s no blue ribbon at the end for being the *most* depressed. Like, right? But I think for those of us who experience it, we are, we’re constantly measuring ourselves against other people and saying, well, either I’m not as bad as them, so that’s a good thing, or I’m not as bad as them, and so maybe I’m not as mentally ill, and I don’t deserve as much grace, you know, around my mental illness, as they do.

Lisa: Yeah. Well, and that’s - the whole idea of comparison is, as you know - you and I have talked about this ad nauseum - the idea of comparison as anxiety fuel, depression fuel, but also then really digging into - especially over the past couple years for me - what I’m actually comparing myself to or comparing myself against. Like when you said, oh, my illness isn’t as serious, like what’s your marker for serious, and what’s your marker for not serious? Like, well, you know, I got out of bed every day, so I guess that makes it less serious. Yet some may argue the other way. But that notion of comparison and this ideal, that honestly is like one of the huge things - for lack of a better medical term - in my anxiety symptom - in my anxiety. Like, this idea of an ideal that I can’t reach, and I get mad at myself and this is not where I need to be or not where I want to be, or I’m not who I want to be. And of course, the fun factor of the pedestal keeps growing or the criteria keeps shifting, and they only shift in your own mind. And we’re really just doing ourselves a disservice with all of that comparison. Perhaps the need to be compared - I guess, if you want to call it that - well, today is a better day, perhaps, or you know comparing against now than I was two years ago because I can certainly say that for myself. But, I don’t know, there’s this strange notion of idealism and, you know, what we’re comparing against to - that is particularly challenging to me. Especially when, again, going back to glamorizing or talking about depression and anxiety and other mental illnesses - you know, wow, I’m definitely not as creative or as well-put-together as that depressed person on TV. Or wow, when they’re manic, they still get to do these things. Or, you know, the other fun one is the weird, sort-of quirky person, I’m like “Oh they’re just quirky and fun and awkward. I wish *I* was quirky and fun and awkward.”

Kristen: Mm-hm.

Lisa: You know like it, takes away from, people's specific characters. But then we compare ourselves to those characters, and we want to be them because at least they look like on screen that they're having a better time with it. And they have a better wardrobe, at least.

Kristen: Right, right.

Lisa: Yeah, weird. *Really* weird. I find that so fascinating just how it's portrayed. But then you go to the other extreme - some shows that have been on recently that I'm sure you - you and I haven't talked about this much - but you know, some of the shows that are Netflix recently that do want to talk about this, and all the challenges that have come up around it...where they want to be more, real, I guess? For lack of a better term. And just how challenging that is to attempt to portray that.

Kristen: Right.

Lisa: And all the now heavy lifting and emotional labor that has to go in to counter that. My friend and I had a good conversation about that 'cause she and I've struggled at various points. You know, is there a line? Or what is the line between I want this to be a more vulnerable, real treatment of what's going on, but I also don't want it to be so vulnerable and so real that it becomes a challenge rather than a lesson.

Kristen: Right. Yeah, it's interesting, The Mighty - I don't know if you follow them or not - but The Mighty posts stuff all the time like asking questions of people, and then they create little videos using some of the responses. And one of the questions recently was shortly after Prince Harry started talking about mental illness, and so it was like - the question was, "How do you feel when celebrities come out about their mental illness?" And I was like, okay, I'm gonna respond to that one - I don't always respond, but I actually, first of all, saw it before they'd actually created the video, which never happens. Second of all, I have a lot of very conflicting thoughts about this because first, I'm kind-of grateful about it? But then I'm also kind-of frustrated because I'm like, why does it take somebody like that to talk about their mental illness for people to take it seriously, or for people to recognize that there's a problem? Like, why isn't enough that I'm talking about it and saying there's a problem? You know, like it's this...

Lisa: Yeah, yeah, yeah. Well, and they seem to have, in a weird way, so much less to lose? Even though the prevailing narrative is just how darn courageous they are?

Kristen: Right.

Lisa: You know, if it doesn't work out for them, they can hide behind their millions of dollars - or, for Harry, a lot more.

Kristen: Right, right! In a, you know, small palace.

Lisa: Right, like, and I will totally own my bias that many people know me, know I have a not-so-secret crush on that man.

Kristen: Right (laughing).

Lisa: And feel like, just, he just needs to meet me. You know?

Kristen: Right, of course.

Lisa: I'm not an actress, and I'm not a humanitarian, and I'm not the whatever the perfect thing that she is, but, you know, we have a birthday about a week apart, we both have red hair, that's gotta be enough for at least a long-lasting relationship.

Kristen: I would think so.

Lisa: I've been working on that for years. I sent him a letter a long time ago...anywho - it was a whole thing. He's so - he's a pretty man! He's made some questionable mistakes, some questionable choices.

Kristen: Who hasn't?

Lisa: His are just more public. Yeah - what were we talking about? Prince Harry? I find that so fascinating that it's like, oh, they're so courageous. Well, I guess, but, they're *actors* - is that part of it? Like, how long has this...anyways. But it's just also they have a lot less to lose in some respects. I mean, I'm sure I'm painting a very broad brush, and there may be actors and actresses, you know, where it takes away from their narrative, or it challenges people's perceptions of them, and etc., etc. Like, the whole idea of, you know, all the, those who identify as dudes in the big action movies and this whole notion of fragile masculinity. If like, Matt Damon came out and said that he had depression, suddenly they worry the Bourne franchise is going to look different because you can't have a depressed action hero. They have to be tough in all respects. I mean, I suppose if you expand that, somewhat facetiously, it's possible, but yeah, I agree with you. It should be more than enough. Like we talk about it all the time. But I guess they just have the benefit of a ready-made platform.

Kristen: Right.

Lisa: Or their influence, perhaps, rightly or wrongly, is greater. So I agree with you. Like, I'm happy that it's being talked about? But when it takes that to make it happen - I think also because of our, just, culture of celebrity - "Wow, they're so brave," and then we move on to the next millionaire thing.

Kristen: Right, right, no. Absolutely.

Lisa: Or then, you know we hyper-promote nervous breakdowns and such-and-such an actor's gained a lot of weight or so-and-so was committed. And *that* becomes sensationalized. Yet on the other hand, oh look, this other person is brave. Like, you can only talk about it or be a celebrity with a mental illness if you're doing it in a very composed, controlled, like, "Let me have a conversation with you about my depression." As opposed to, we found this person, they hadn't left their house in five days.

Kristen: Right. Oh no no, there's been a lot of - it's been interesting - Katy Perry was talking recently about having a bit of a breakdown. And while she did it, she like, made fun of the fact that she didn't "go all Britney." And I'm like, okay, wait, what? Like you can't, in the same breath that you're talking about having mental illness, you're mocking somebody else for having it? And so it's that, it's that same thing that I was talking about earlier where it's okay if it's controlled and, and I can still identify with the person who has it to a certain extent, but the minute they step outside that box, and do something slightly different, I - like, we're done. I can't think like them.

Lisa: Yeah, yeah. Well, I mean we're the ones that put the celebrity on such a high pedestal - you know, foreshadowing or not foreshadowing, I guess alluding to the TEDTalk I gave a long time ago about this - but you put them on such a high pedestal, that it's so narrow at the top that the slightest thing blows them over. So it seems like they realize - rightly or wrongly - and that conversation is very carefully scripted.

Kristen: Mm-hm.

Lisa: And I wonder about that with Harry, too, because I know - I wouldn't go so far as to say unprecedented, but it isn't *normal* for people in his family or in that sort of society to talk about this so openly. So I think it's impressive that he is choosing to do that regardless.

Kristen: Right.

Lisa: But he is still managed - I assume - managed by so many people that it was still calculated. So he does still have that safety?

Kristen: Oh yeah.

Lisa: Which makes me less attracted to that vulnerability, but the fact that he did it at all makes me attracted to some level of that vulnerability.

Kristen: Right.

Lisa: But yeah, yeah, it's just *weird*. But I think you were right - it does go back to that notion of, you know, the celebrity or the treatment of them because that's where our information comes

from. That's where our language comes from, where our assumptions come from, and it's just so much easier to talk about when it's the safe, open conversation, rather than the real mess that, you know, you and I talk about on a daily basis.

Kristen: Right. That I feel like I *am* on a daily basis, yes.

Lisa: (laughing) *Right?* Oh my gosh, so totally. Yeah, like the ones who are presenting, like, "Oh yeah, I've suffered from depression for many years, but I've got these great stylists and these people who take pictures.

Kristen: Right! Can I borrow their stylist?

Lisa: And I wonder about that, too. Like, if people then respond to those narratives - which is another one of my favorites - "Well, how *could* you be depressed? You have everything in order. You have the best of everything." So really these celebrities are damned if they do and damned if they don't.

Kristen: Yeah.

Lisa: They can talk about it, and then you and I will rip into them - rightly so - for not *really* being as authentic and vulnerable. But at the same time, you know, whatever they do, you know they say they're depressed, and then someone says, "Well, you've got millions of dollars. *I* wouldn't be depressed if I had millions of dollars."

Kristen: Right. Although, I have heard the flip side of that, which is my gosh, if this person who has millions of dollars is depressed, well, then it's okay that I'm depressed, too, you know?

Lisa: Yeah, yeah, I could see that, too. I just, maybe for me that's - I've never heard that as much...

Kristen: Yeah?

Lisa: in conversation, I guess. But I could see that, too. There's certainly some level of - it's not normalizing, that's not the right word - but it does make it more of a shared experience. We're not, you know, separating people emotionally based on the amount of money in their bank account.

Kristen: Mm-hm. Right.

Lisa: Yeah.

Kristen: Yeah, it's complex. I mean, obviously.

Lisa: Mm-hm (laughing). Yeah. But do you find, so then we've been talking about this whole idea of celebrity, so I'll throw this in here, too, to bring it back to sort-of our world...

Kristen: Sure.

Lisa: Our sub-worlds of, you know, higher ed and student affairs. And you and I've had these conversations, too, about sort-of celebrities in the field of student affairs, or celebrities in higher ed. You know, and like when your name starts getting recognized or people know who you are. You know when I sum it up facetiously I went up to someone at a conference, and they said, "Oh, you're Lisa, right?" And I didn't know who they were. And like "I follow you on Twitter" is the same thing as, "Can I get your autograph?" now. You know, and I wonder about what that means for our field and even for the work you're doing with The Committed Project. Like, when certain people write or share things that have this weird celebrity status - earned or otherwise - and again, the whole idea of how we earn - "earn," I'm doing air quotes again, just like you were doing that no one can see - but "earned" celebrity status, does that change the narrative? We've talked about it sort-of like with global celebrities like Katy Perry, but I wonder about like, the Katy Perry's of student affairs - not to compare someone to Katy Perry. I mean, that's an unfair comparison of the wrong celebrity, but does that change the narrative or sort of conversation? Have you thought about that? Or like where does that fit with talking about it in higher ed?

Kristen: I think - so I think there's two kind-of pieces to that for me. Obviously, there's the online celebrity, who I always appreciate when they're willing to write for us because it raises the recognition of what we're doing. But there's also - so we have these two hierarchies going on - we have an online hierarchy, which is the celebrity piece of it, but we've got the hierarchy of higher ed - the people who are like the senior student affairs officers or VPs or whatever who don't acknowledge the online hierarchy as much. Right? And so, and who don't really, I suspect, even know what we're doing for the most part. I mean, I think there's a few of them, but most of them don't. And wouldn't approve of it, necessarily. I mean, I think that's where some of that silence comes in, as well. Although some of them have been more vocal about what they think is okay and not okay for their staff to talk about. And so, you know, I always struggle with that because I - we've had a couple kind-of senior folks write for us, but by and large that has been an area that just hasn't responded. And we've been looking for ways to engage them and to try to get them to talk about it, but there's still a *major* reluctance to do so, I think. And I, I mean I get it. And one of the things I always try to share with people when they write for us is, like, look, I'm in a safe place. I've been out about this enough, my boss knows about it, my boss's boss, and my boss's boss's boss knows about it. You know, like, people know about it. I can keep writing about it. I'm not going to lose my job. I'm not going to be at risk here, right? And frankly, I'm at a point, I'm also at a point in my life where even if I do search, there's certain things that need to be in place for me to consider a different job. Or a different workplace. And I can afford to do that, right? A young professional does not necessarily have those same kind of safety nets set up. And so I'm always very cautious when we get stuff from new professionals, younger professionals, who are just starting their job search because - do I want the world to be a better place and accept all of that? Absolutely! Do I think it is? No, I don't. And so it's, the more of

those celebrities that we have write about it, the more it does actually get to be that place, though, you know? And so that's one of those things where - I mean, I guess that's the whole point of, you know, not - *real* celebrities, not just higher ed celebrities sharing their stories that makes me, that I appreciate because the more they do that, the more people start to acknowledge that that's - that mental illness is a real issue and is a real thing and lots of people experience it, and it's not something they need to be afraid of. And yeah, so, I mean it - I don't know, I think it's - you know, one of the things that's fascinating is this, there was a - several years ago there was this *huge*, kind-of sweeping movement through student affairs about being physically healthy, right? I don't know, does that still go on? I don't know, I'm not as, uh...

Lisa: It's kind-of going? I mean, that Facebook group, I'm still a part of it and I see a couple - like not the fit one, but the runners group is still really active.

Kristen: Yeah.

Lisa: But the overall fitness one is not as active - that I've seen anyway.

Kristen: Right. Somebody added me to that runners group ages ago, and I'm like dude, I don't run unless something's chasing me, sooooo...

Lisa: (laughing)

Kristen: Like I'm gonna just remove myself from that group. But - I've tried many many times to run. It's not, it's not my thing. But it was just fascinating to me to see people focus on this so much, and then the minute I mention, "What about mental health?" there was like dead silence. People were like - I'm like, that's actually part of it. Like, your physical health is so tied to your mental health, and your mental health is so tied to your physical health. And like, not acknowledging...

Lisa: And my physical stuff is a coping mechanism for my mental health.

Kristen: Right. And not acknowledging that, like, part of the reason you run or that you do whatever is because it gives you a mental high even? That's like - ding ding ding - that's mental health, folx. Like that's, you know, and so really trying to get people to understand that and take it to that next step. And I mean I think a few people really did. I know Ed Cabellon started including mental health when he started talking about his physical health, as well, understanding that that's an important area, and you can't neglect that.

Lisa: Yeah. And I think you're right - going back a couple of steps - the idea that when these "celebrities" or just people that we know or even people who are celebrity by status, I suppose, in terms of role or position, and I remember reading some of the blogs or posts even that they shared. And, to me, story and narrative are so powerful for so many reasons, for good or not so good. But knowing the story beyond - again, especially for these people who I know primarily

through social media - and knowing the story used to present on social media was perhaps the most impactful for me. Like it was so interesting to invalidate the assumptions that I made when my comparison drive was really high. You know, and of course, that's the other challenge - a whole other podcast, a whole other conversation about social media and mental health - but, you know, scrolling through Facebook is, you know, in one way it's certainly a numbing mechanism? Thank you, Brene Brown - I can scroll through Facebook as a way to numb myself. But I can also use it to do the exact opposite. I see certain posts or see certain things, and I'll wonder, "Why aren't I doing that?" And "Oh, I haven't traveled at all this week to do a speaking engagement." And "What am I doing with my life?" But to see some of those same people - and it doesn't - you know, people used to talk about, oh, the fall from grace, like "Oh, they were so powerful, and now they're just like us." Like I would hate to think that just because someone discloses something like that to use terminology like "falling" or "less than" or, you know, "removes something from them." Like, to me it's additive. Like it makes such a better, bigger picture of who this person is. They become like an actual person, not just a figment of whatever collection of social media photos and posts they are. And I'm thinking about a couple posts in particular, but it's just seeing - you know you always sort-of see these people as like, wow, they have all these professional accomplishments, they're president of this association, you know, and they have this Ph.D., and they're teaching and they have a partner and they're doing all these great things with their lives. And then, to me, it's such a valuable addition to the picture I have of them. That I may still compare myself to them in one form or another, but I do so with more complete information. It doesn't even have to be mental illness all the time. It could just be a bad day, or they're struggling with things I'm struggling with. It doesn't have to be a more complete picture because now they have depression. It could be a more complete picture because they can say, "You know, the job that I work at, I've got some major challenges going on. It's not all sunshine and rainbows that you see when I do, like #LoveMyJob all the time. It actually isn't." A more complete picture of people.

Kristen: Yeah.

Lisa: I'm a big fan. And that comes like, you and I got to know each other a lot better and filled in a lot of puzzle pieces and made a more complete picture of each other.

Kristen: Absolutely.

Lisa: And meeting social media friends in person, you know, when I post - relationships - "Wow, you're really cool, you're doing all this neat stuff!" And it was like, you are *and* you also have these challenges. Again it's that "and" that's really important, it's like you're doing all these cool things, *but*... I forget who said it - and it wasn't me - in the book I told you about, that *Reasons to Stay Alive* book?

Kristen: Yeah, yeah.

Lisa: He had this whole short chapter about the difference between achieving something *in spite* of your depression or doing something *because* of it. And I think that's the larger piece for me. Like that more integrative you do this *and* you have depression, and like the color purple. It all just fits into a more complete, authentic picture.

Kristen: Yeah, absolutely.

Lisa: To me, when I see that, *that's* destigmatizing for me. Not oh they can really achieve despite being really depressed, but it's who they are, and we're having this conversation. Just like physical challenges, they have mental challenges. And they're still rocking and rolling and being great people.

Kristen: Right.

Lisa: If only we could make those narratives the same - that's the big dream, right?

Kristen: Right. Well yeah, that's one that I'm constantly pushing out there. You know that, look, I have asthma, and sometimes I can't exercise as much as I want to, or I can't walk up that flight of stairs because I'm having a bad day with my asthma. Like it's the same sort of stuff. Sometimes I can't go to that meeting today because I'm having a bad day because of my depression or my anxiety.

Lisa: Yeah. And that - I love that it brings it back to the exercise metaphor, and the physical health metaphors are the ones that have been most powerful to me - even with understanding my own experiences. Like, before you and I started the chat thing tonight, and the yoga series that I do, like she's really good about like modifications. Like, you may not be able to do this, and that's totally cool. Why don't you try this instead? Like, it's so normal with the exception of some fitness people I've been around where it's all like, 'Work it out till you hurt yourself...'

Kristen: Right.

Lisa: Those people were a bit too serious, but you know, like in yoga or other classes, they will say, "This is a modification. If today you can't do this, maybe tomorrow will look different or - dare I say it - 'normal'." But just as you said, like, I may not be in my best in this meeting today because I was struggling with anxiety last night. Which somehow is harder for us to say than I was having trouble paying attention in the meeting because I hurt my leg when I was, you know, running that 5k.

Kristen: Right.

Lisa: That's acceptable, but not the - not being able to sleep because your mind's running a thousand miles a minute is somehow very different. It's weird.

Kristen: Absolutely. Well, we've gotten a long chat in here. I'm looking - we're almost at 50 minutes, so...(laughing)

Lisa: Wow. I'm hoping that people have listened all the way to the end. It should be one of those things like if you listen to the end, we're going to give you a code word, and that'll go to where if you put that in this website there will be a special prize.

Kristen: Right. Or there'll be like a super-secret reveal or something.

Lisa: I mean, obviously marketing is not my field, nor will it ever be.

Kristen: (laughing) I can tell assessment is. What did you say earlier, something about - oh that measuring how serious something is - what's the mark for serious?

Lisa: Oh yeah.

Kristen: You're like, I need the - what's the mark for serious? What does it mean to be serious? It's like...

Lisa: I need some data! But not just any data - how did you collect that data? Where did that come from? What type of instrument did you use? What are your outcomes? Oh...trust me. That pain in the butt when I do my quantitative in July - outside of crying over SPSS, which I'm *sure* will also happen. I will definitely be the nitpicky one about data, for sure.

Kristen: Absolutely.

Lisa: I'm a rare breed in that way.

Kristen: Well, thanks for joining me tonight, Lisa. I appreciate it.

Lisa: Yeah! Thanks for having me! I love that we get to talk about this again. And obviously, selfishly it was just nice to do this. We don't get to talk using our voices very much. We type.

Kristen: We do. We both think in *lots* of words, so that works for us, too sometimes.

Lisa: That's right. Well, yeah, I'm glad we got to have this conversation, and if I haven't said it before, I so appreciate you, friend. I mean, this all started from one tweet, and now here we are. And knowing that I have found in you a safe space to do this is pretty cool.

Kristen: Well, I feel the same way. Thanks, lady.

Lisa: No prob. Right back at ya.