

### Supporters to say and do:

- No silence
- "Of course I'll help"
- Frequent (once a week may be enough?) check in
- "I'm here, it's gonna get better, I don't know what I can do but I'll do whatever I can"
- "You can be sad today I'll still love you and be here"
- It's ok if you don't want to talk, just be explicit about it
- Admitting you don't know how to help is helpful
- Good to be positive but not overly
- Not supportive: dismissing their struggles as normal
- Ask what support they would most appreciate
- Good support offers temporary relief and perspective
- Gentle call outs on bullshit is helpful
- "How can we get through the moment?"
- Can't be timid
- "How was your day" and other 'wholesome' interactions
- Send messages that you're thinking about them / were reminded of them
- "I can talk whenever you want; I'm not an expert"
- List out their to-dos with them
- See their jokes about it as reaching out but let them joke
- It's ok if you're busy, just offer another time
- Try your best not to make it weird with facial reactions
- Get on them for not reaching out for help
- Don't be afraid to consult those who know more
- Drop off favorite foods
- They may just be letting you know to feel safer and not looking for response
- Don't just say no
- Allow them to make light of the situation
- Take time to listen
- Just general human interaction may help - gets them out of their head
- Try to notice when you need to just make it safe for them to ride the wave versus helping them get out of the hole completely

### Vocabulary:

- "Disorder" is a bad word
- "Do you *need* help?" *want* is better
- "Stay strong" is hated
- Use the words they use don't use euphemisms. e.g. anxiety, panic attack
- Venting = they're fine, Reaching out for help = not fine
- "I can't imagine what you're going through" -> "Fuck you!!" (so don't say that)
- Some hate *brave* and *strong* - feels gross and sad
- Important to have words to better understand self
- Mental illness makes others' insightful comments a let down

What they may do (self-help):

- Checklisting - doing the smallest thing to do that will help
- Focus on the good things
- Start small on to do lists
- Exercise
- Finding things that make them happy like habits and hobbies
- Comedy
- Self kindness
- Mindfulness - being in the moment with 1 thing is calming
- Acting normal until they can pretend that the normalcy is real
- Uses MI to their advantage
- Ride the wave
- Music
- Caffeine

MI supporter vs non-MI supporter

Make more assumptions	Get frustrated when things they want to help don't
Easiest to talk to	Can't understand
Shooting from experience is better	Think it's worse than it actually is
Gives coping ideas (potentially detrimental)	Don't put as much power to their words
Easier to rely on	Someone said they're best though
More cathartic if they have shared experiences	
More credible	
Less rational	
Gatekeepers in the worst of times	

MI Perspectives:

- there's a funky period where the body adjusts to new meds before they work properly
- Didn't expect it to always be present; thought it would come in bursts
- MI needs more than one outside perspective
- It's harder to realize things are real when they're going on in someone else's head
- Can't use MI as an excuse for everything
- I don't give myself too much credit

- Brain is just being mean
- It's not something to be fixed // MI doesn't get solved
- Every MI is different
- MI affects more than just the sufferer
- Wish she knew mental health issues didn't entail MI
- There's layers to this shit (different amounts of anxiety)
- You need to make your MI work for you
- Medication is the dividing line of MI severity