

Speaking from Experience Bipolar Disorder

Transcript for chapter 7 of 9: Management strategies

Carole (21 years since diagnosis): Well, I think there are basic coping strategies that I think are very important, and that's just keep well, eat properly, you have a proper diet. Exercise is a big one in mental illness. You may not feel motivated, but you really need to push yourself to exercise, say at least four or five hours a week, if not more. And of course sleeping, which is another difficult one to do. I mean, I've gone through many, many years of not being able to sleep properly. And you do adapt eventually.

Eva (6 years since diagnosis): There are certainly things that can be done. I think a major thing, and something I don't do enough myself really, but I've just started – and that's exercise, regular exercise. It has been proven to help with depression, and I think just generally it helps in wellbeing. It can also, I think, if you're very manic, it helps you to work off that energy and get a good night's sleep, which is very important.

Richard (18 years since diagnosis): A couple of things that can help a lot involve doing creative things. One of the things I have found that has been quite therapeutic, much more so in some ways than just talking about a dream or taking about how I've felt in the last twenty-four hours at work, and all of that sort of stuff, is making something that is very slow, but it's individual and it's creative. Now, one of the things you can do there, and it's pretty hard to do this badly because no one can really objectively say that you've done that really badly, is making mosaics. I've found that with a lot of the time that I've spent doing that just in the last couple of years, it certainly has helped.

David and <u>Donné</u> (2 years since Donné's diagnosis): In general, I think joining a group – you know, whether it be a general group for mental disorders or a specific group – is a worthwhile thing to do.

Eva: Before that, my parents had actually researched, if you like, a psychiatrist, and that's when they found the psychiatrist that I later ended up going to. They took me to see him and talked about what had been going on. I listened to it all and it was clear that I needed to see someone, and he said, "I think you need to talk to me, or someone else." And I said, "I do *not* need a psychiatrist." That was the end of that, because there's no point if you're not prepared to talk about things.