Pebbles in my pocket

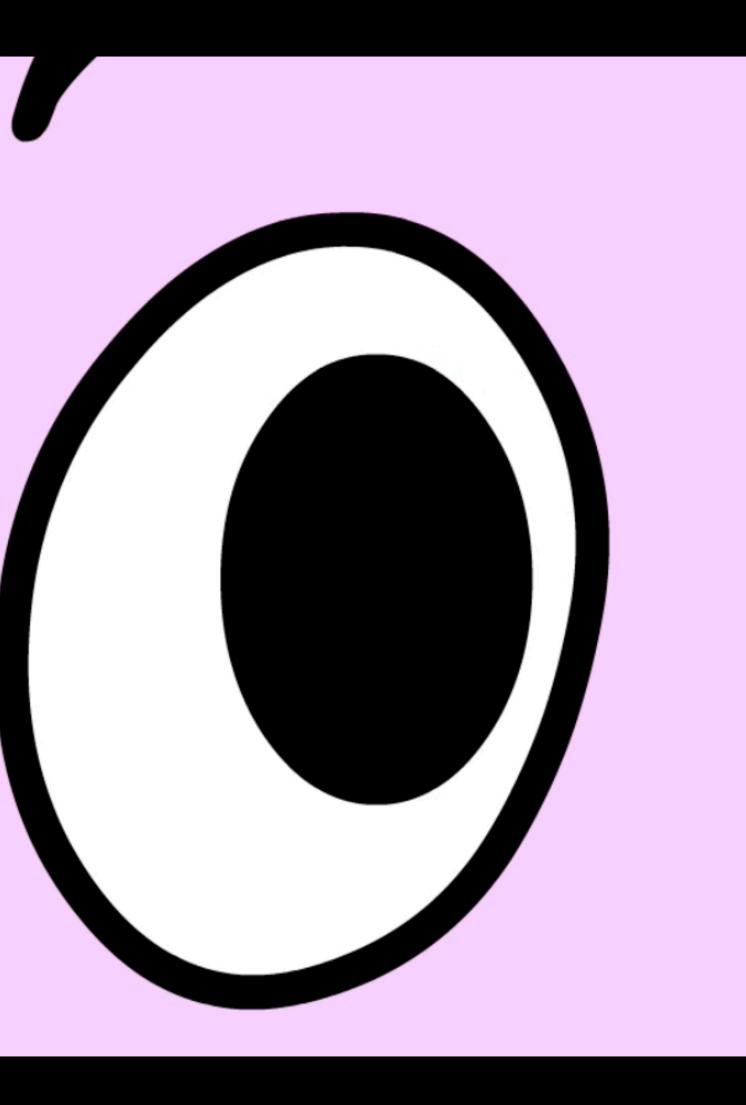
By Frida-Tim Otterbeck

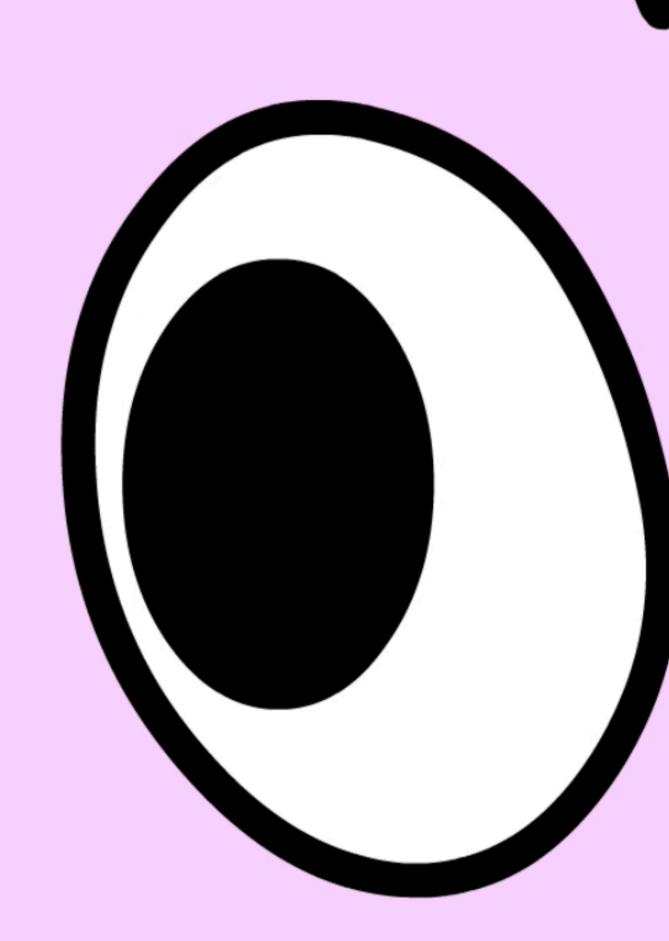
Vaccine for

Depression is

Information







Pebbles in my pocket

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Chillderen at Aktiv ungdom Malmö

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Abstract

Depression is one of the most prevalent illnesses in our society, claiming approximately 1200-1500 lives every year in Sweden alone. The key solution lies in information: raising awareness about the illness before it takes its toll.

This project revolves around depression and its aim to educate young people about it. By conducting medical research, surveys, and studying biographies, I have endeavored and achieved the creation of an animated informational video series. My hope is that this series will contribute to the ongoing efforts to destignatize mental health and reduce suicide rates.

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Brief

Utilize the words of individuals who have personally experienced depression to create relatable information that can be effectively spread to teenagers, ultimately aiming to prevent long-lasting, untreated depression and reduce the risk of suicides.













Motivation

Some things cannot be understood unless experienced firsthand, and some things cannot be learned without personal involvement or years of dedicated study. Depression falls into this category. It is exceedingly difficult for those who have not experienced depression to comprehend its impact. Overcoming depression is a challenging journey that requires time and the discovery of techniques that work for each individual. However, the earlier one begins seeking help, the easier it becomes to find suitable assistance.

Depression affects approximately 5% to 20% of the global population, making it an illness we must address proactively before it takes hold. Just as one does not need to have a sexually transmitted infection or be sexually active to receive sex education, there should be no requirement to be depressed in order to receive mental health education. Just as we develop vaccines to combat diseases, the only vaccine for depression is information. It is imperative that we educate our youth about this illness, how to cope with it, and where to seek help, as depression can be fatal. In Sweden alone, it claims the lives of around 1,200 individuals every year (Folkhälsomyndigheten, 2022).

This project is driven by the desire to develop a metaphorical vaccine for depression. It aims to gather information from individuals who have personally experienced depression and present it to teenagers between the ages of 13 and 18, when depression typically begins to manifest. The objective is to provide early assistance for individuals experiencing depression and reduce the number of suicides among our youth.

This project is named "Pebbles in My Pocket." This phrase symbolizes how I used to describe my experience with depression. I saw every obstacle as a stone, unable to distinguish between the big rocks and the small pebbles. Regardless of their size, I would pick up and carry each obstacle in my pocket, allowing the accumulation of small, insignificant things to weigh me down just as heavily as the larger ones. It took me years to learn not only to empty my pockets of these pebbles but also to pause and evaluate when encountering a new pebble, deciding whether to discard it instead of adding it to my burden.

Method

In my research, I decided to gather knowledge from three different research groups:

Group A - Medical research and professional psychologists

They have extensive training in their area of expertise. They have encountered many people who have experienced depression and have studied the human brain. The research they provide offers the best understanding of the physical effects and causes of the illness.

Group B - Individuals with personal experience of depression

This group is crucial due to their emotional connection to the illness. Even with extensive studies, it can be challenging to truly comprehend that connection. Group B consists of individuals with diverse experiences, and I aim to capture the emotions experienced during depression. This serves both to compare with the insights from medical experts and to give a voice to those who have overcome this illness.

Group C - Children between 13-18 (My target group)

This group is the primary focus of the project. It is important to involve them in the process and hear their perspectives since it is easy to forget what it is like in the mind of a thirteen-year-old. Their insights are pivotal to this project.

To acquire knowledge from all these sources, I utilized four different methods:

1. Conducting medical research through internet resources and books.

- 2. Conducting surveys to gather information on the words and metaphors used by individuals with depression.
- 3. Reading biographies where authors discuss their experiences with depression.
- 4. Conducting group interviews and collecting feedback from children aged 13-18.

Method 1: Medical Research

During my research, I studied books and articles written by professionals, as well as visited websites that provided information specifically tailored to the general public.

Books

Nilzon, K.R. (1995). Barn och depression,

Dahlström, C. (2014). Panikångest & depression: frågor och svar om två av våra vanligaste folksjukdomar.

Websites

hjarnfonden.se, 1177.se, internetmedA-icin.se, bup.se, umo.se, folkohelsomyn-digheten.se

Method 2: Survey

I had eight questions and an option to express interest for further interviews in my survey. The survey was created using Sunset Survey and published on Facebook, including my personal feed, the IKDC school group, and a group for EDS (Ehlers Danlos Syndrome) patients. I received 58 responses, out of which 55 were usable.

1. Do you have or have had depression? Yes/No

I asked this question to determine whether the subsequent answers would be usable, as I specifically sought responses from individuals who have personally experienced depression.

2. How old were you when you got your diagnosis? Don't know/ I have no diagnosis/0-9/10-13/14-16/17-19/20-25/25+ In this question, I wanted to ascertain whether my theory about most depressions beginning during one's teenage years was correct.

3. With your own words: What words would you use to describe your depression?

Here, I aimed to gather the words that individuals use to describe their depression, as it constitutes a significant part of my project.

4. In your own words: Do you use any metaphors or similes when you speak about your depression? In which case, what are they?

Here, my intention was to achieve the same objective but with metaphors and similes.

5. In your opinion: Do any of the following words fit in on your depression? Mörk/Tung/Trött/Seg/Klibbig/Skugga/Kallt/Varmt/Tomt/Ingen passa in

These words were ones that I, people around me, and professionals associate with depression, and I wanted to determine if they were accurate.

6. In your opinion: Do any of the following metaphors or similes fit in on your depression?

En ryggsäck full med stenar/En tung kappa/Ett lakan över ögonen/Fickorna fulla med småsten/Tunga skor/Förföljs av en mörk skugga/Har ett svart moln över huvudet/Kroppen känns tung som bly/Ett monster förföljer mig/Ett svart hål i bröstet/Tungt hjärta/Famla i mörkret/Instängd/Det är dåligt väder/Ingen passa in

Here, my goal was to achieve the same outcome as the previous question, but with metaphors and similes.

7. Mark the organizations you have heard of. UMO - Ungdomsmottagning-en/RFSL - Riksförbundet för homosexuellas, bisexuellas, transpersoners, queeras och intersexpersoners rättigheter/BUP - Barn och ungdomspsykiatrin/Vuxenpsykiatrin/1177/MUCF- Myndigheten för ungdoms- och civilsamhällesfrågor/RSMH - Riksförbundet för social och mental hälsa/Transammans

This question aimed to provide me with a better understanding of where people seek help and also assess the level of awareness regarding certain helplines.

8. What is something that would have helped you in the beginning of your depression if you had known it then?" This question was intended to validate or invalidate the necessity of this project. If everyone received what they needed and no further improvements were required, then my project would not be necessary.

9. Thank you for participating! If you are interested and available for a further interview please leave your email. (Not obligatory)

This was asked to enable further interviews.

Method 3: Biographies

To better understand people's journeys and discover words that describe their personal experiences, I have read biographies written by Swedish authors in Swedish. I specifically selected these books based on their ratings and recommendations from psychologist Johanna at Umo. The books I have read include:

Ångestens mamma by Christian Dalström (2021)

Ut ur mörkret by miki agerberg (2011)

Storm i den pelare som bär by Andreas Lundberg (2016)

Att nudda vid botten by Sally Brampton (2009).

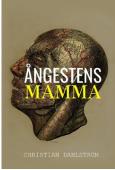
Jag vill inte dö, jag vill bara inte leva by Ann Heberlein (2008).

Kalla mig galen by Christian Dahlström (2017)

aoutcome

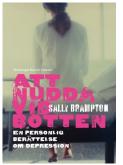
Method 4: Talk To Youth

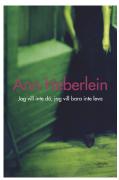
In preparation to speak with the children, I had a conversation with Agneta Gulz Agneta Gulz, Professor in Cognitive Science. We discussed the ethical dilemmas surrounding conducting studies on minors. Since depression is a sensitive topic for many, and some parents may be hesitant about their children receiving education on it, but the children themselves may have a different perspective. My plan was to find children, obtain their informed consent, and also seek consent from their parents.













Research

Medical Research

During my research, several things became clear. One of these was that the exact cause of depression is not fully understood by scientists. Currently, it is believed to be a combination of genetic, hormonal, and external factors.

One aspect that I couldn't find a clear answer to was the percentage of the population affected by depression. The numbers I encountered ranged from 5% to 20%. From my interpretation, approximately 5% of Sweden's population is currently experiencing depression, while around 20% have had a depressive episode at some point in their lives.

Ouestion One

Fifty-five participants answered yes, and two answered no. Those who responded no to this question were not considered for the subsequent questions.

Ouestion Two

This question yielded a slightly different answer than I had anticipated. It revealed that nearly 30% of the participants in my study received their diagnosis when they were between 20 and 25 years old. This doesn't imply that their difficulties didn't begin earlier, but it was still older than I had expected.

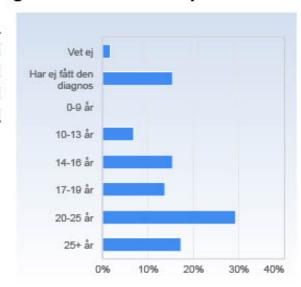
However, this result did not invalidate the need for my project. Providing information to individuals at a younger age can assist them in seeking help earlier or when they need it later in life.

Survey Answers

The responses from the survey provided me with the desired information.

Hur gamal var du när du blev diagnostiserad med depression?

Hur gamal var du när du blev diagnostiserad med depression?	Antal svar
Vet ei	1 (1,7%)
Har ej fått den diagnos	9 (15,5%)
0-9 år	0 (0,0%)
10-13 år	4 (6,9%)
14-16 år	9 (15,5%)
17-19 år	8 (13,8%)
20-25 ar	17 (29,3%)
25+ år	10 (17,2%)
Summa	58 (100.0%)

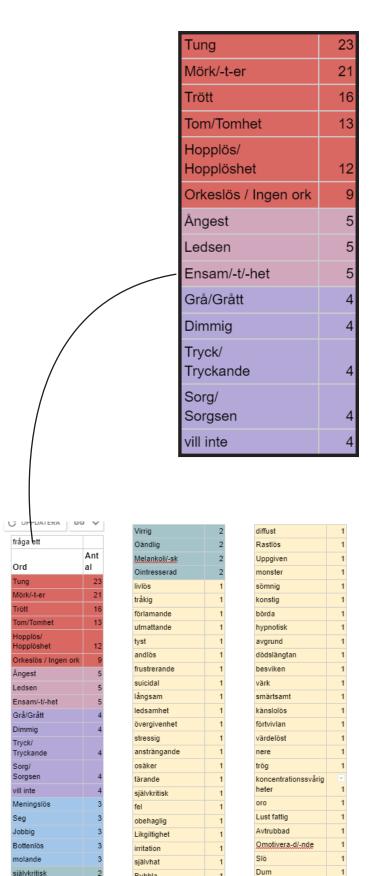


Question Three

Question three yielded exactly what I desired, although it was challenging to process the answers. Eventually, I compiled a list of words and their frequency of use. However, the top two words were examples that I had provided (a mistake on my part). Nonetheless, the other top four words were the participants' own and were used repeatedly. An unexpected insight from this question was the significant number of unique words used. This further emphasized the individuality of depression from person to person.

Question Four

When inquiring about metaphors, I received a variety of responses. Some participants mentioned not using metaphors much, while others provided numerous examples. On the next page, you will find a poster displaying some of the metaphors shared by the survey participants. The variation in metaphors and similes reinforced my understanding of the diverse experiences of depression. Additionally, since individuals employ these metaphors, they likely attempted to explain their depression to others using these analogies, believing it would facilitate better comprehension of their emotions and struggles.



Statistic of answers from survey

Bubbla

kyla

arg

kall

tunnelseende

stillastående

ansträngande osäker

känslomässig

hjärtlöst

tärande

utan framtidstro

Isolera/-d/-nde

trötthet

gråt

håglös

värdelös

energi

omotiverad

Förvirra-d/-nde

energilös/ingen

kvävande

"Kroppen är för stor. Som "Eller kanske som en färgglad Hål i bröstethandskar, leva i ett skal." "Kyla i bröstetg" dröm som helt plötsligt bl svartvit och obehaglig, en dröm du inte kan vakna ifrån som du heller vara under jägKäan känna det "Bottenlös sorg. "Il se mer avatten, men då och då lyckas som en svart gegga Skomma upptoch få luft." "En våt filt som klibbar vara i en mörk dimma o "Det är som no bords". dåliga fast mot kroppen. Filten tappa bort sig själv." är kantad av massa gupp, gör en kall och sjuk's en tomhet i hjärtat.'vägen tar aldrig slut." man vill inte släppa taget och vill äta upp mitt hjärtt ha huvuder fulle ined kriet örschlig eller om filtenefökändestivet känns värre att ha en "Ett mörkt moln ? Hela ditt liv förgiftas." skugga inte sova, vill inte vara vaken, vill "Ett vått tungt brslöja över mig inte att nästa dag ska börja." gråtť täcke. stampa på sam-"Sjunkonstantas" ner i ett" Kroppen kändesn slitit ut ens sjä ma ställe, o sjunka djupare Jag kände att jag "Bottenlös avgrung ibland." rivit sönder den och sen "En ovälkommen återkommilhete den." marken ju mer jag var i en bubbla, att mitt egna skinn och inte s vill i livet finns längre ville vara. Jag ville Ett "Svartmörkt hål. vara och kände som Ett "Svartmörkt hål. linieutanför bubblan vara, en gas och kände som trang, kar o merk ginan Jag sover men fortfarande är medveten." "Ett ok att bära, kortbara ill och jag kan nå det jag stod utanför min Ibland liknar det ett träsk, ibland är det som Taget al kall aget utmattande sätt som saktaldrig kan ta av."

"En ryggsäck som man."

Ett hav, stort, djupt utan någon syn "Ett hav, stort, djupt utan någon syn på land, och liksom hav när deprespå land, och liksom hav när depresner mig och håller mig tillbaka från allt man vill av med. ". "Som en konstant dimma som pp och her lika illa är havet lugnt. och borde göra i livet." ligger över dig. Du kan se genom vågorna är så stora att jag inte ser den och du kan fortfarande röra vad som är bakom dem." dig, men den går inte bort." Det är som två tunga bojor sin egen kropp drar ner "Präglas "Vikten mörk dimma "Som att leva i en bubbla"s energi i jorden." "Som ett mörkt filter för som kom och lade sig ögonen i hur man ser världen." "Somattiblodetlse genom "Dementorer och fängelset som sitter på ena axeln var fyllt med bly" skriker och tar över allt azkaban i harry potter är dike jag ibland glider ner i. enda tankeutrymme i huvu-"sättet att ta sig upp ur diket är att fortockså en bra porträttering det och Som goda rösten att ta sig fram i sirap ställe orkar bara viska. där sluttningen är mindre brant och av depression och ångest" "Mörker. Djupt hål."man kan ta sig upp på vägen igen." "Ett mörkt hål i mitt huvud och i störa det lilla Somi att bli en annan person." mitt hjärta som bara sög mig in." "Ett monster i magen."

Question Five & Question Six

There was a significant variation in the words and metaphors that the participants agreed with. When it came to the words, there was definitely a similarity between the words people had used themselves and the suggestions.

Question Seven

When asked about organizations, the most well-known ones were Umo, Bup, 1177, and the adult psychiatric ward.

Question Eight

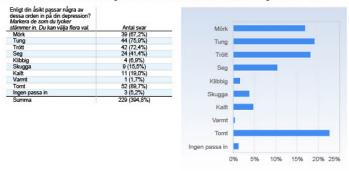
The answers I received for this question validated my belief and my project. Several individuals expressed a desire for more information, when they where young, both about what was happening and where to seek help. Others mentioned the need for a space to discuss their experiences, as it would have made them feel less alone. Some answers broke my heart. For example, one response stated, "That depression is so much more than just being sad and low. It would have been helpful to know that it can manifest in so many different ways and that panic/anxiety attacks can take various forms. Resources that explain to people what depression entails, both mentally and physically, and the consequences it has in the short and long term. The risks involved if it is not managed and treated properly, and how it impacts both the affected individual and society at large."

Ouestion Nine

A few, but not many, participants provided their email addresses, which made me wonder if it was due to a lack of interest in spending more time on the survey or because they were uncomfortable revealing their identities.

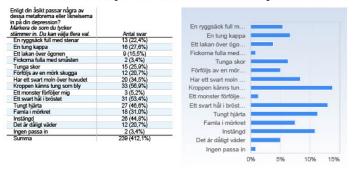
Enligt din åsikt passar några av dessa orden in på din depression?

Markera de som du tycker stämmer in. Du kan välja flera val.

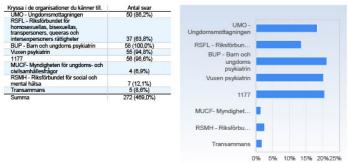


Enligt din åsikt passar några av dessa metaforerna eller liknelserna in på din depression?

Markera de som du tycker stämmer in. Du kan välja flera val.



Kryssa i de organisationer du känner till.



Statistic of answers from survey

Biographies

Each book I read was different and gave me unique perspectives into the lives of the authors. I appreciated that there were so many who wanted to speak up about their story, and it seemed like everyone had a common goal: spreading awareness. Their stories inspired me to continue with this project and to also tell my own story at a later date.

Talk To Youth

As I had anticipated, it was difficult to find children to participate in the study, and often organizations stood in the way. Through my own connections, I found volunteers at Aktive ungdom Malmö who helped me. They were involved in the development of the characters and also watched the final video to provide their input. The children were very interested and happy to help, considering it an important project and subject. I asked questions to see if they had grasped any of the information, and each individual had something different to say. From my observation, they seemed attentive throughout the entire video, and when asked, they said they liked the length of the video, finding it neither too long nor needing it to be shorter. They all mentioned that they learned something new, even if it meant clarifying something they already had some knowledge about. When asked if they could explain what depression was in a sentence, they struggled to provide answers, and one child said, "It needs more than a sentence to explain." I completely agree. I believe that depression is complex, and that's why I will be making several videos to explain all its intricate aspects.

Idea Generation

Now I had gathered all the information I needed, and I was ready to design it in a way that children between 13-18 could comprehend and benefit from.

I brainstormed different mediums and researched what was out there, both in terms of information about depression and unique learning methods for other subjects.

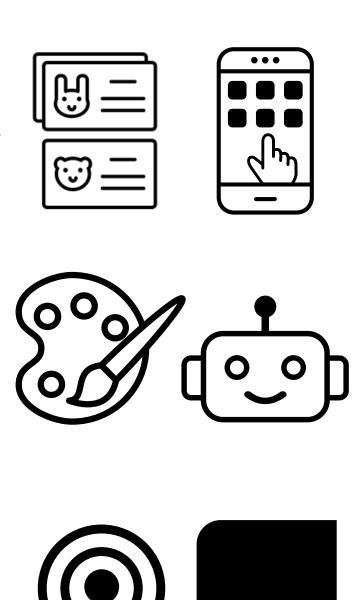
The eight mediums I decided to explore were: game, apps, art, AI, podcast, book, video, and audio book. I'll briefly go through my reasoning and then discuss my results.

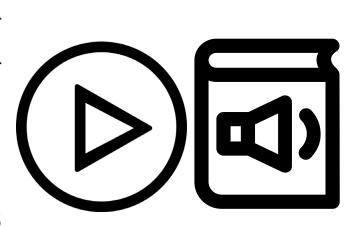
Game

In this category, I included both video and board games. However, I quickly dismissed this medium since I did not have the skill set to create games. I am not a game designer, and I know it takes years to create good games. Nevertheless, several games have been developed for learning purposes, such as "Tyck till" by Bertil Lindgren and Torgny Wirén, which is a pedagogical game designed to facilitate discussions about preferences, prejudices, and other sensitive subjects in a lighthearted way (2002).

App

The phone is probably the most widely used device today, but it can also be a source of stress for many. According to a study conducted by BMC Public Health, excessive use of mobile devices can, in some cases, lead to depression and worsened health (2011).





Art

Art is a powerful tool, regardless of its form—painting, photography, sculpture, theater, music, dance, etc. However, art is meant to be experienced and emotionally connect with its viewers. I believe that experiential design is important to make information interesting. Raw information alone doesn't usually pique the interest of those who aren't actively seeking it. Experiencing art about depression can be quite heavy. I have seen and heard several artworks about depression, and while I think they are important for raising awareness, I believe that most art forms allow for a lot of interpretation, and some things need to be expressed in words. In a discussion with Johanna, psychologist at Umo, we talked about the importance of a safe space and how not everyone may benefit or be able to absorb the necessary information in a large space with many people.

Lastly, I felt there was a need to be able to go back and revisit the information, something that might not be possible with experiential design that disappears after it's performed. Of course, it could preserved in other ways, but that could-potentially alter the art itself.

AI or Robot

Although the idea of having 24-hour access to artificial help seemed intriguing, I decided against it for a couple of reasons. First, AI has its limitations. As AI currently stands, it can do a lot, but it may not understand misspelled words or misplaced modifiers, leading to incorrect information or consistently responding with "I'm sorry, I do not understand," which would be frustrating. There are some AI programs available for mental

helth, I've tried some but never found one that worked for me. They are often in the form of apps, which I had already decided against. In this case, I believe that chat helplines are superior, even considering the possibility of human error or misinterpretation. In my opinion, human connection is something that cannot be replaced by AI. Another reson is that I lack the skills to program an AI.

Podcast, Audiobook, Book

I have grouped podcasts, books, and audiobooks together because they all primarily use one or two mediums. Podcasts and audiobooks use sound, while books rely on text and perhaps pictures. I believe that learning is best facilitated through multiple media that complement each other. Many people find it challenging to gather information from reading or listening alone.

Video

Video was the original form I thought of when I first imagined this project around 2018. However, as soon as I started working on the project this year, I took a step back from this medium and allowed myself to explore other ways. But after exploring the others, I find myself back at video. The use of sound, pictures, and text provides an efficient and multimedia way of spreading information. Videos can be shared, accessed, and revisited from anywhere through the World Wide Web. There is no learning curve like there would be with a game since most of Sweden is already familiar with the medium. Additionally, videos can be viewed safely from the comfort of one's home or in smaller groups to initiate discussions.

Chosen Concept

A video series with short episodes explaining depression to the audience using sound, pictures, and friendly humanoid comic characters.

I knew that choosing this medium was not an original idea. During my own experience with depression, I watched similar videos to gain understanding of my illness, but they were in English. I believe it is crucial to have these videos available in one's native language as it creates a stronger emotional connection to the content.

Market Research

When I made the decision to create a video, I turned to the internet to search for existing videos about depression. As I mentioned earlier, I found several in English, and after thorough searching, I also found some in Swedish. However, they seemed hidden and difficult to find, which poses a problem, especially for young adults or teenagers who may not know what to search for. Additionally, the videos content did not exactly meet my specific requirements or expectations.

Bup has some great videos, but they primarily focus on what Bup has to offer rather than providing a comprehensive understanding of depression. Nevertheless, I believe they are excellent and highly recommend watching them if you ever have questions about treatment. (Bup, n.d, web) Some other places that have videoas in swedish are Mind youtube channel (2014,web) and Film och skola (2017, web) however there sign in is requiered.



Samtalsbehandling

I samtalsbehandling pratar du med en behandlare om det som är jobbigt.

Se filmen om samtalsbehandling



Familjesamtal

I ett familjesamtal samlas familjen för att prata om vad ni kan göra för att förstå varandra bättre. Då blir det lättare att förstå hur andra i familjen tänker.

Se filmen om familjesamtal



Psykoedukation

Psykoedukation innebär att lära sig mer om svårigheter och diagnoser.

<u>Se filmen om psykoedukation</u>



Samverkan

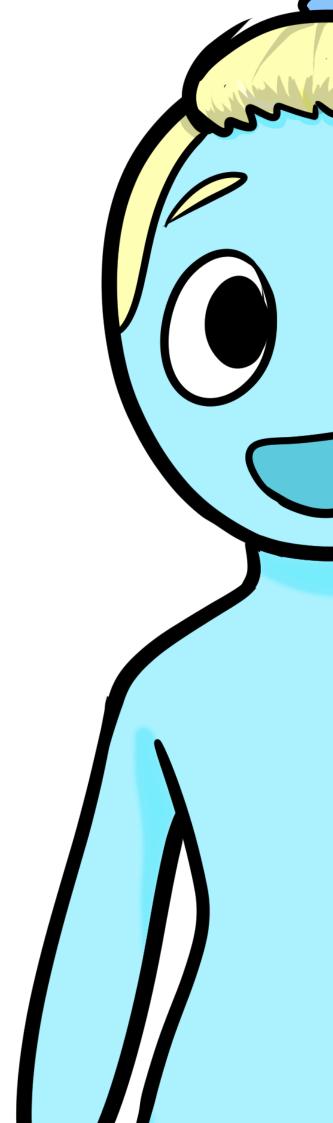
Samverkan innebär att personer från olika ställen – till exempel BUP, socialtjänst och skola – träffas med dig och dina vårdnadshavare.

Se filmen om samverkan

Bup videos

Characters

A big part of my project were the animated characters. It was important that they came across as friendly but still not ridiculous or too childish. To create these characters, I looked at others' and my own art and had feedback sessions with both children and adults.



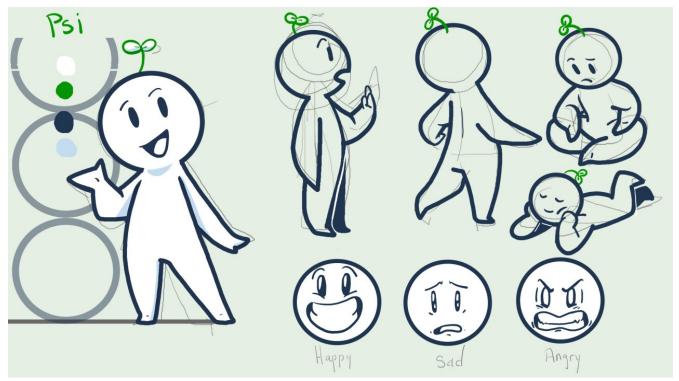
Inspiration

Form

When designing my characters, I wanted to make humanoid, ungendered characters that everyone could see themselves in. I took inspiration from other videos about depression, like Psych2Go (web) which publishes short animations on YouTube about mental health.



Psych2go logo



Art by Cristina Benavides Highlight for Psych2gotv

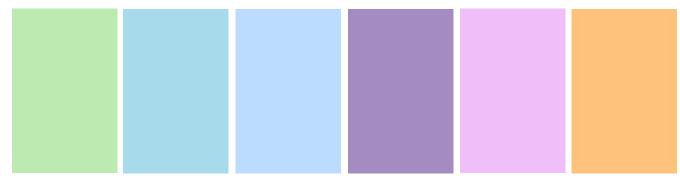
Color

I was also inspired by the Barbapapa series created by Annette Tison and Talus Taylor, where the easy use of color and small accessories make the same form into different characters.

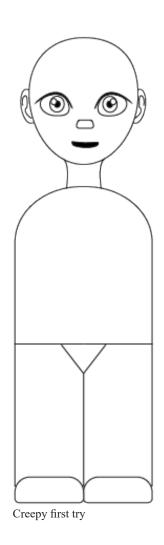
I did, however, decide to go for a slightly lighter color palette.

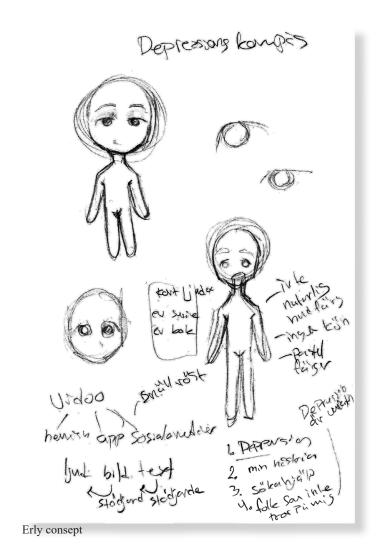


Barbapappa logo



My color pallette



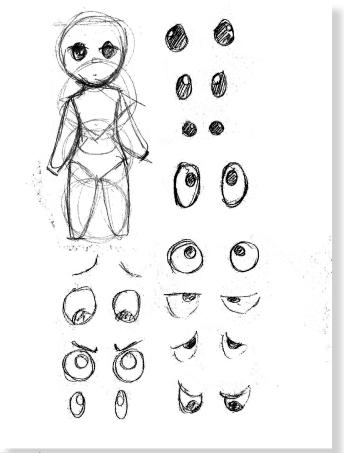


Early Concept Art

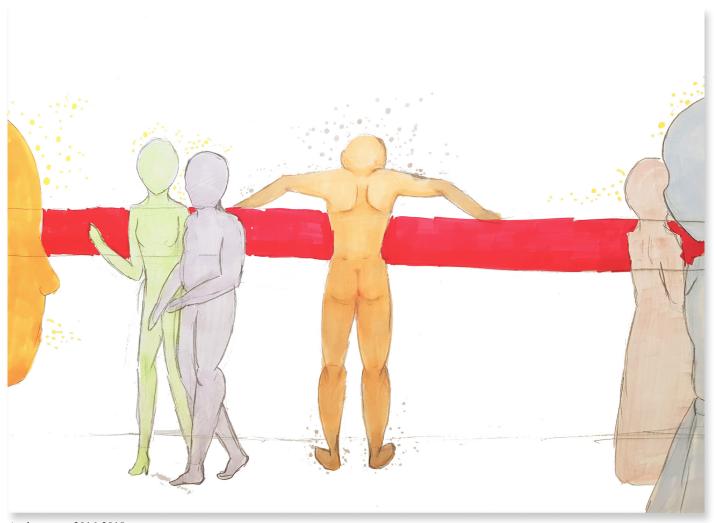
During the character creation process, I made a few sketches but quickly realized the need to keep it simple with minimal features.

I've Done This Before

Upon finalizing the character design, I had a sense of familiarity and recalled my previous artworks, which also featured simplistic humans in pastel colors. While there are notable differences, such as the older art being more realistically proportioned and the newer characters in a "Chibi" form (web, 2023). The erlier art also delt with the subject of mental helth.



Eye study

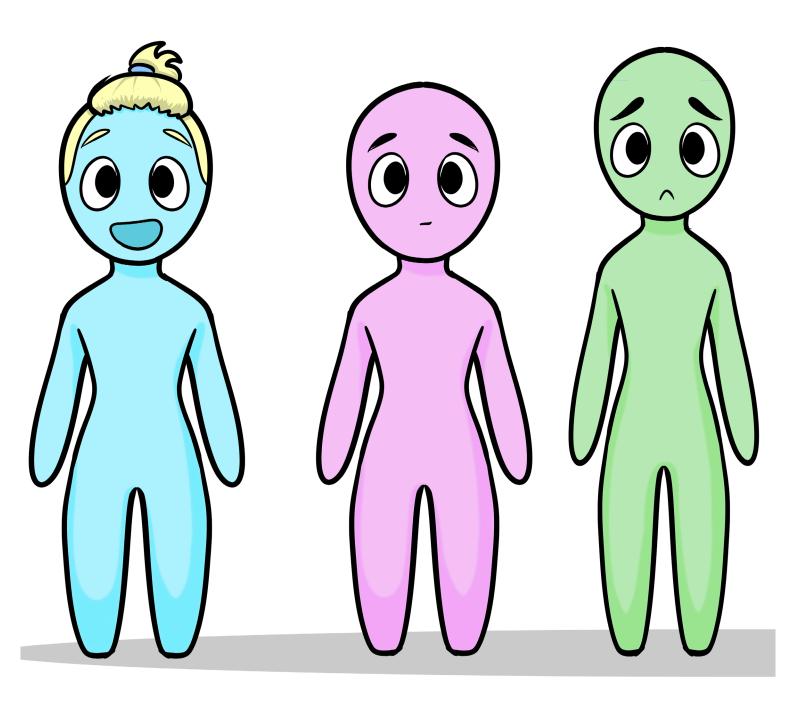


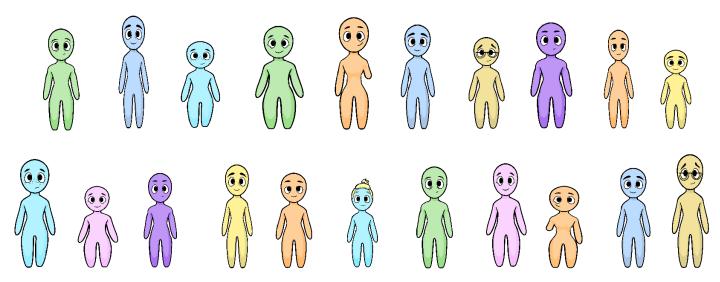
Art by me ca 2016-2018



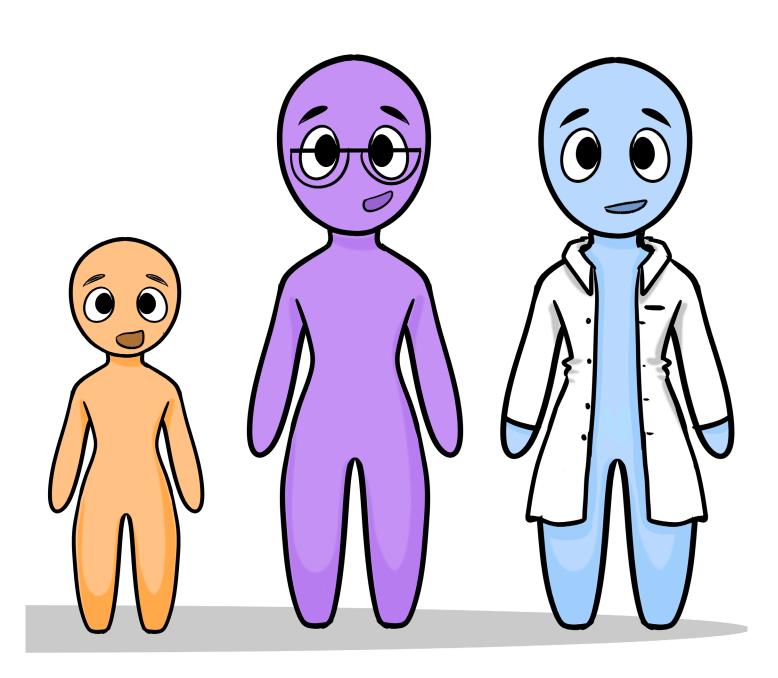
Final Characters

The first character I made was the pink one, which would serve as the main character. By mixing size, form, color, and adding an 's,' I was able to make several more. There are six main characters portrayed on this and the next page. I also created several background characters that can be seen on the next page.

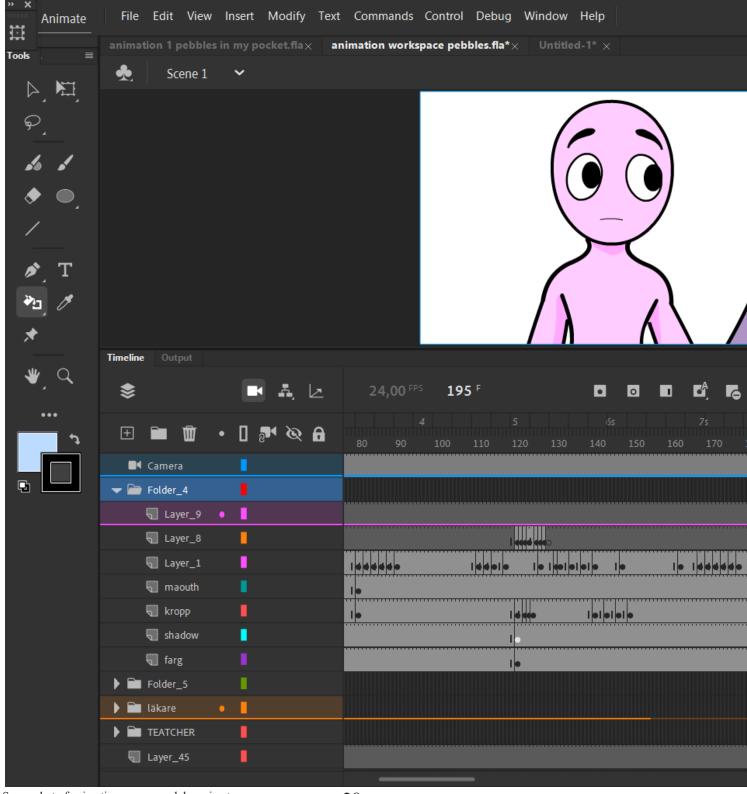


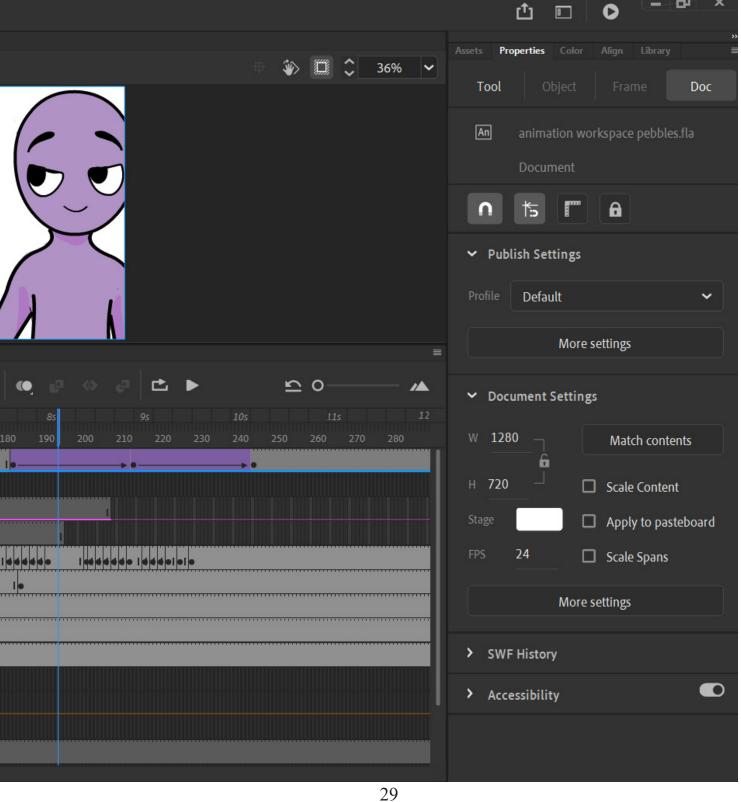


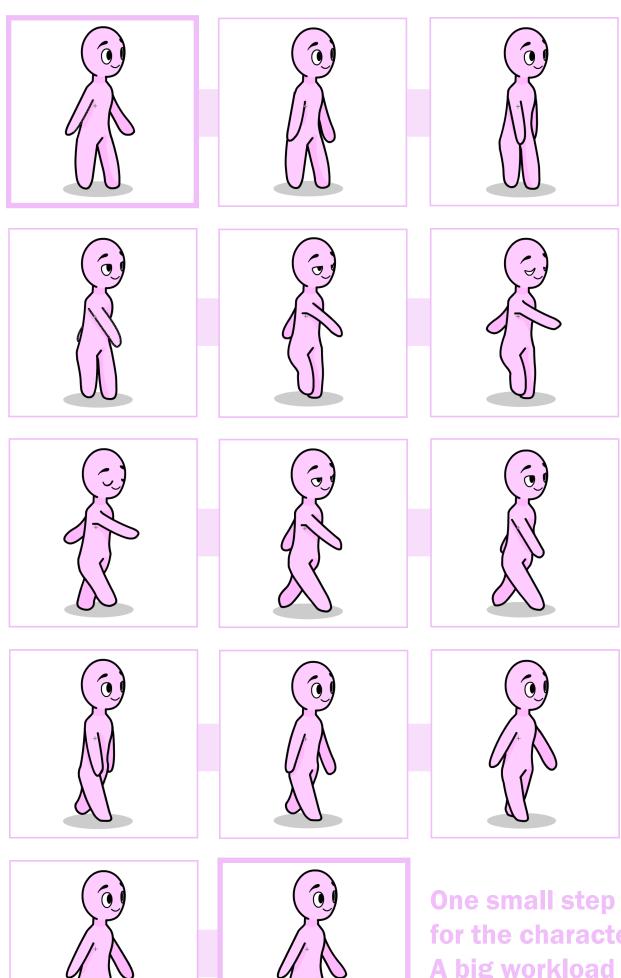
Background characters



Animation

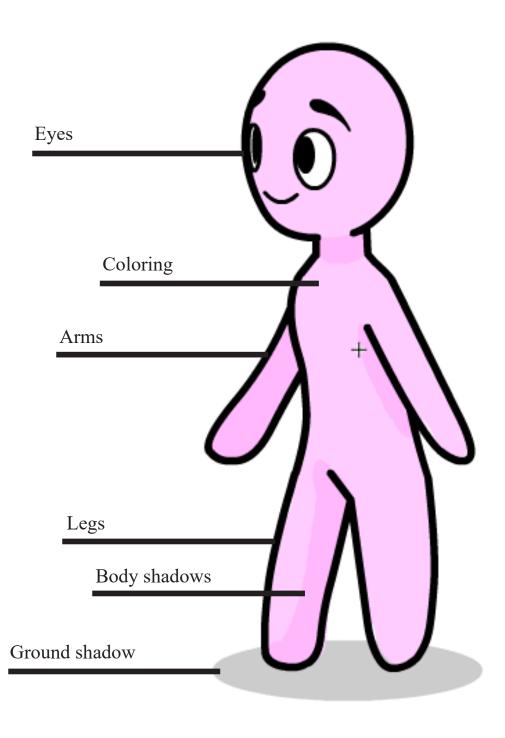






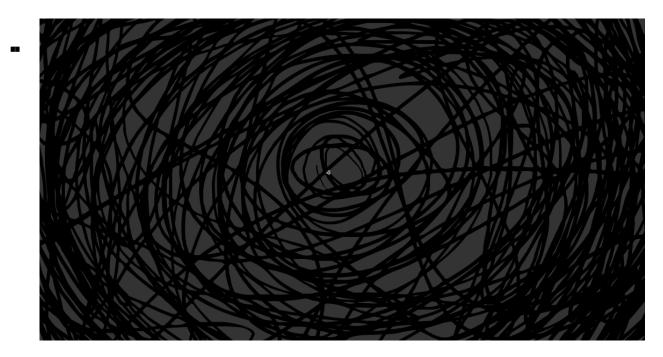
for the character. A big workload for the animator

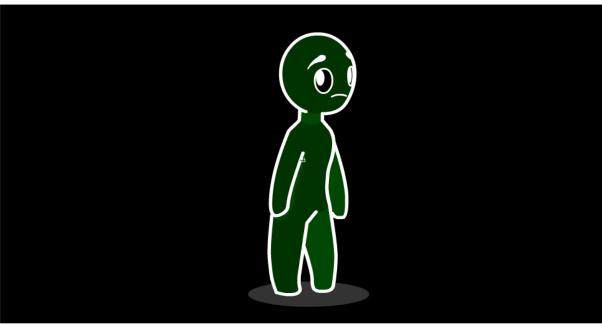
Even simple animation takes time. A lot of time. The small animation on the previous page took me around two hours to complete and is just over a second long. There were several character elements that needed to be animated separately and then merged to create a smooth and seemless animation. This process needs to be repeated for all characters.



Portray Deppression

When portraying depression in the animation, I incorporated a lot of my personal expression. As an artist, I have frequently addressed depression in my work and used art to depict my own experiences with it.





Portrait of depression in pilot episode: Pebbles in my pocket

Manuscript

The manuscript is the script for the voice-over that narrates the video. It is based on all the information I've gathered from my own interviews, biographies, and published studies.

I have written and rewritten the text many times, trying to include everything I want to say in the pilot without making it too long or too heavy.

You can find the manuscript in Swedish on the following two pages.

The manuscript has been fact-checked by Fredrik Lecerof, psychologist and department head at Region Skåne, and Johanna, psychologist at UMO.

Manus: Småsten i min ficka, Pilot

Frida-Tim Otterbeck 2023

Ett mörkt moln, en dimma, en tyngd eller en slöja som hänger ner framför ögonen. Dessa är sätt som olika människor beskriver sin upplevelse av sjukdomen depression.

Depression är en vanlig sjukdom som en stor del av världens befolkning insjuknar i. Ofta finns det ingen enkel förklaring. Det kan handla om stress, en traumatisk händelse eller situation men det kan också bara ha att göra med hormonbalans. Oftast så är det en blandning av flera faktorer.

Depression är en lurig sjukdom som ofta missuppfattas som något annat och det kan vara svårt att inse vad den egentligen är innan den gjort sig hemma inom dig och då kan det kännas svårt att söka hjälp.

Därför finns den här video-serien, (så att du kan lära dig känna igen depression i dess tidiga stadie och att känna igen symtomen. Detta kan göra det lättare för dig att söka hjälp själv eller att hjälpa någon annan att söka den hjälp dom behöver.

SYMPTOM

Depression är ofta olika från person till person och därför kan symtomen skilja sig. Men det finns några vanliga symptom som många med depression upplever. (möjligt vända på)

Några av dom vanligaste symtomen(upprepning) är trötthet och nedstämdhet. Du känner dig trött hela tiden, tung i kroppen och det kan också kännas som om att du rör dig genom seg, kladdig tjära.

Du kan känna dig tom och sånt som du har älskat eller tyckt varit kul, har du inte längre någon ork eller intresse för. Du kan också ha svårt att känna dig glad eller känna några känslor alls.

Ett annat vanligt symptom är att du drar dig undan. Du vill kanske inte vara lika mycket med kompisar längre eller spendera tid med din familj.

Sömnstörningar är något annat som många med depression går igenom. Det kan handla om att du har svårt att somna och tusentals tankar virrar runt i ditt huvud. Du kan ha mardrömmar eller sova fler timmar än vanligt men fortfarande känna dig utmattad.

Depression kan väcka många tankar och känslor. Du kan känna dig arg, ledsen, värdelös och ibland kan du kanske känna att du faktiskt inte vill leva längre.

Alla dessa tankar och symptom är okej att ha men det är viktigt att veta att de bara är tankar och inte sanningar. Det kan vara läskigt att be om hjälp, att öppna ögonen och inse att man behöver den hjälpen, men även om det kan kännas hopplöst (så behöver du lita på att det) finns det folk runt omkring dig som älskar dig och är redo att hjälpa till.

Det kan vara en kompis eller ett syskon, Kanske en förälder eller lärare. Och om det känns som om dom inte kan hjälpa finns det professionella som kan. Det kan vara en kurator eller skolsyster eller annan läkare.

Det är viktigt att veta att du inte är ensam även om det kan kännas så ibland. Men sanningen är att en dryg femtedel av befolkningen går igenom depression någon gång i sitt liv. Och även om det ibland kan vara svårt att se på utsidan så finns det folk runt omkring dig som går igenom samma eller liknande motgångar.

Så vart du än är, vem du än är, om du just nu eller i framtiden känner igen dig i detta så finns vi här för att hjälpa dig. Ju tidigare i din sjukdom som du får hjälp desto större är sannolikheten att din depression blir kortvarig och mildare. Depression är en botbar sjukdom och du är inte ensam.

Vill du veta mer om depression eller vart du ska vända dig för att få hjälp kan du besöka vår hemsida (www.smosteniminficka.se) Där kommer finnas fler videos om depression och även hemsidor där du kan söka hjälp.

Om det är akut eller en livsfarlig situation så ring 112 eller självmords linjen 90101.

Tills vi ses igen, ta hand om dig.

Soundtrack

Voiceover

When deciding who would do my voiceover, I considered people in my surroundings, listened to other videos, and tried to find what sounded nice. I recorded a take myself and found that my own voice was quite calming and pleasant. I played it for several of my classmates, who all agreed that my voice was suitable. Since I have an education in musical theatre, I decided to do the voiceover myself.

I think that if I continue with this project, I will either keep voicing them myself but hire someone with a bit more experience to handle the animations. Or I might hire a voice actor aswell.

Soundscape

I created the soundscape after recording the voiceover and while envisioning the animation. I used sounds from royalty-free websites.





Sound studio setup



Story Board

When beginning to illustrate the story and thinking of how I wanted to convey information, I used my education in comic design and looked at the storyboard as a comic strip. Where a few pictures tell a story and convey emotions. However, in movies and animation, I have to take it one step further, creating moving pictures.

Thankfully, my mind is ideal for such a task. I am a visual thinker and fall under the description of "Real picture thinkers" (web, 2023). All my memories are firmly set as images in my mind. Together with my imagination, I have the ability to create pictures in my mind and imagine those pictures moving.

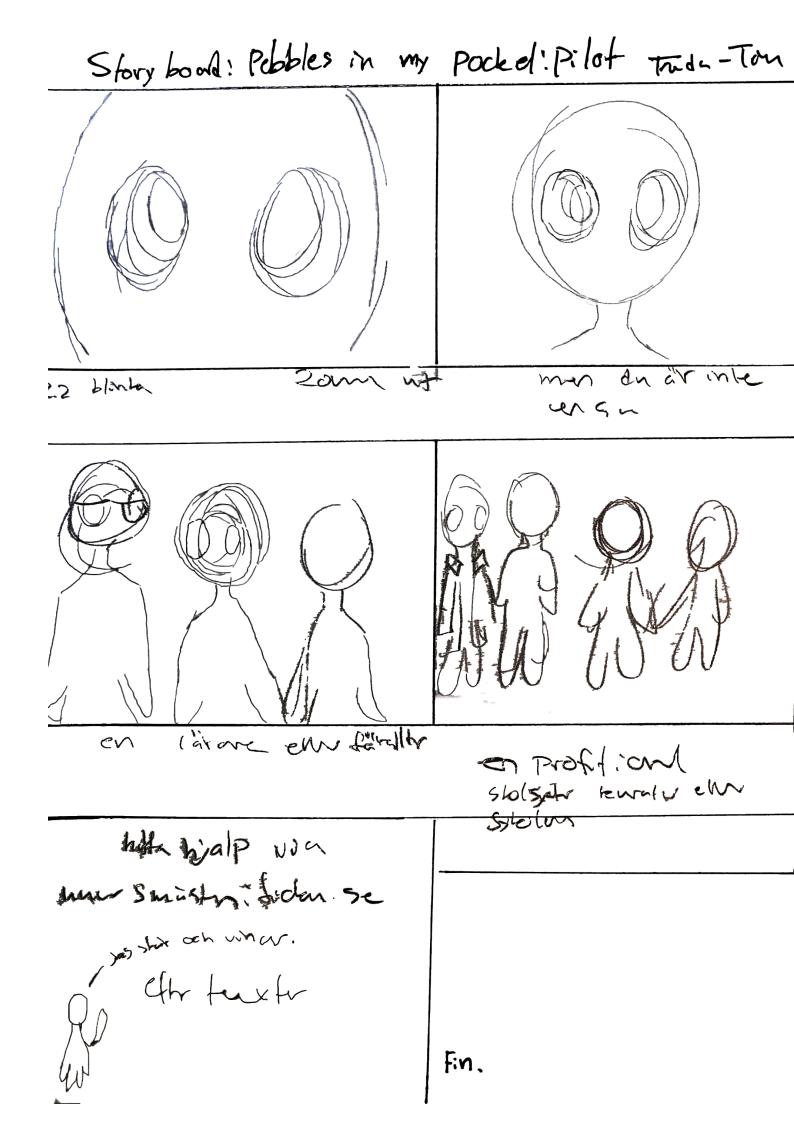
In the beginning stages, I went through a few different ideas on how to efficiently portray all the scenes. But I did so all in my head. I played the movie over and over again in my mind, tweaking the scenes and order until I finally settled and penciled down the following storyboard, which you can find on the following pages.

I have adhered to this board throughout the animation process. Some minor changes were made since the voice-over was longer than the animation, and I had to fill it out."



Story bond! Peloteds in my Pockart: Pilot. Forther-Tim 2. Blinka Depression 5. hunsvan Besteven deprisons tanihle Zom M ASH ON kniper Thop ogon

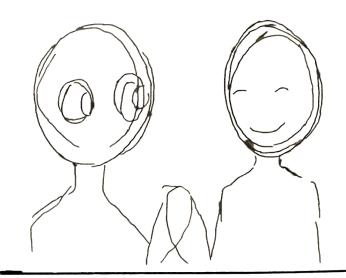
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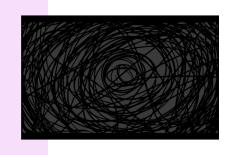
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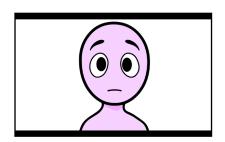
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man det syns inte vid Arafa anblikke men vet da år me

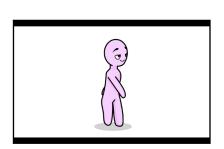
Final Result

The final design was an animated video pilot that was 5 minutes long with voiceover, soundtrack, and animation. Due to a lack of time, one scenes is not yet fully animated at the time of documentation but is works in progress (WIP). On this and the following page, you can see the animated scenes in order.







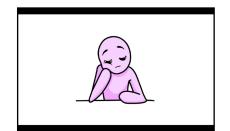


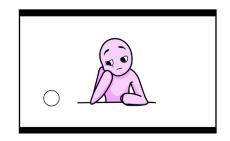


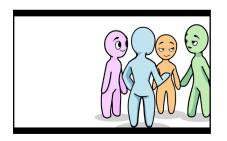


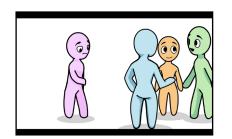


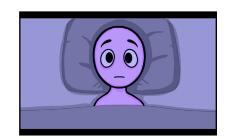








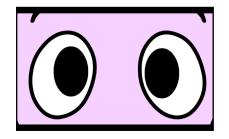


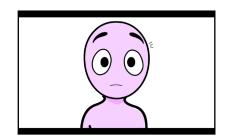


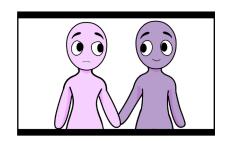


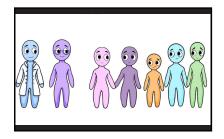


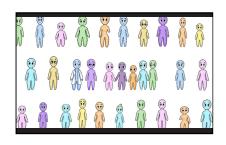


















Småsten i min ficka

Tack

Johanna Umo- Psykolog

Fredrik Lecerof Reg skåne- Psykolog

Sofia Otterbeck Pedagog

Ungdomar Aktiv ungdom

Website

The concept design for the website was made by me, and I sought the help of Hå-kan Dören to create a demo website.

I chose to create a website because I wanted it to be accessible to everyone, regardless of their location. Some school computers disable websites like YouTube or TikTok, and some children are not allowed on any social media platforms. Therefore, I aimed for a website that could fly under the radar. The name "Pebbles in My Pocket" doesn't raise suspicion if seen in internet history, making it safer for children to visit without sharing it with their families or others around them. Another reason for not primarily using YouTube is the risk of it appearing on your "For You" page, which could be seen by others if you share the same account. Although it may not always be a problem, due to societal stigma and the personal nature of the subject, it feels safer to keep it personal.

Upon entering www.småsteniminficka. se, you will be directed to the homepage where the character Tim welcomes you, along with the pilot episode.

In the navigation bar above, you will find several options:

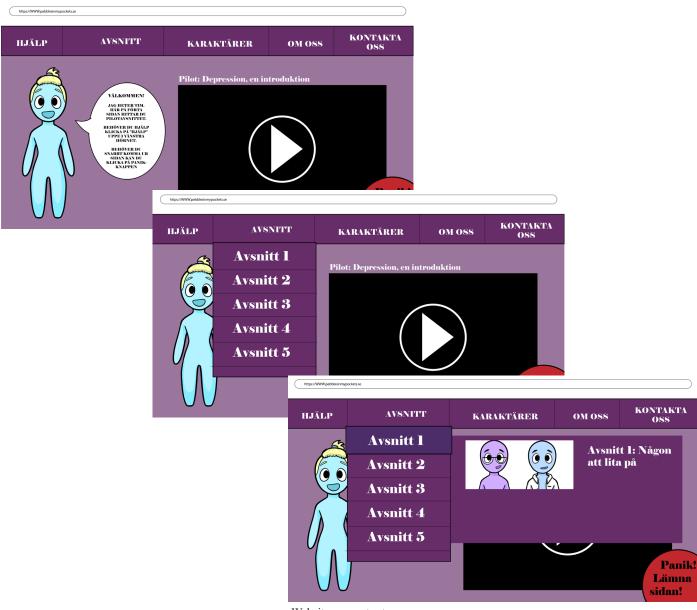
Help (Hjälp) - This section provides information about immediate and long-term assistance, including contact details for helplines and suicide hotlines. It emphasizes calling 112 in life-threatening situations or if you are about to or have harmed yourself. It also provides contact information for booking appointments at places like UMO.

Episodes (Avsnitt) - Here, you can access all available episodes along with brief descriptions of their content.

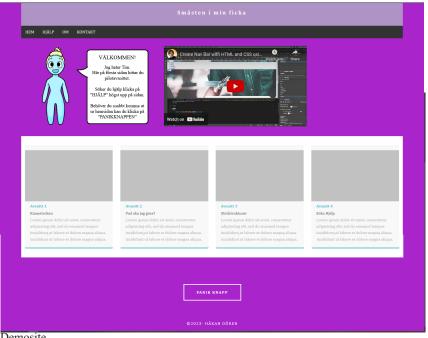
Characters (Karaktärer) - This section offers a brief introduction to each character.

About us (Om oss) - This section contains information about me and the project, as well as potential partners.

Contact us (Kontakta oss) - This section provides contact information.



Website consept art



Demosite

Summary

Depression is a mental health condition that the video aims to address. The video can be used in schools for both individual viewership and as a tool to initiate conversations about mental health with teachers or other students.

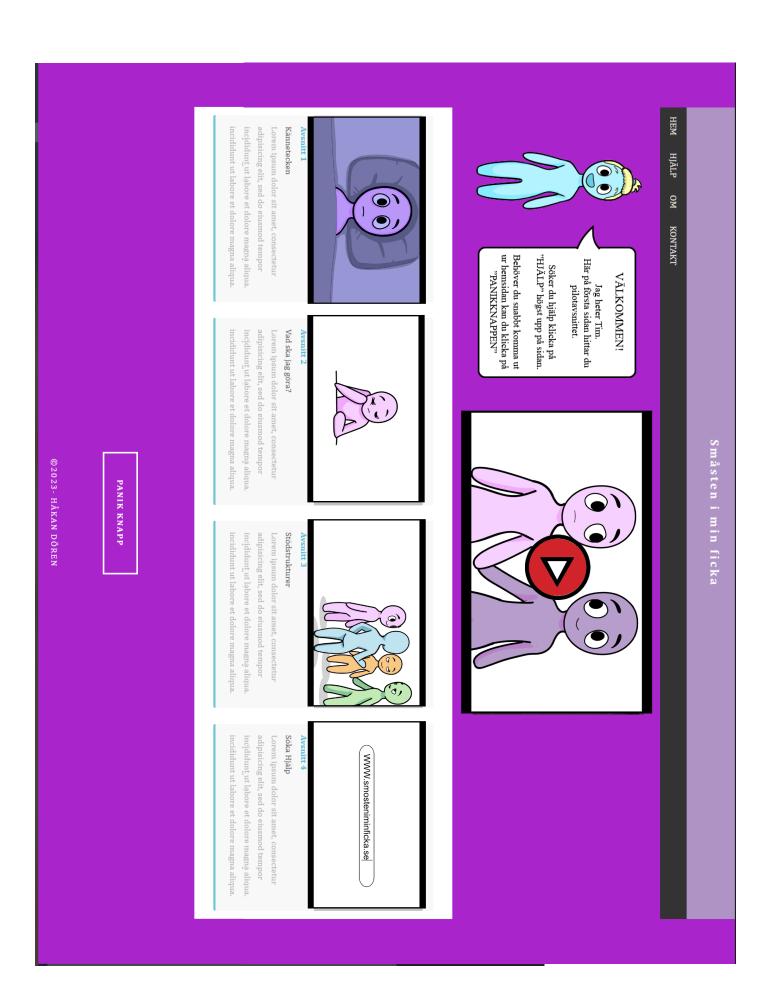
It will also serve as a resource for individuals seeking information about depression, whether for themselves or someone they know. By visiting the website, they will have unrestricted access to all videos and links to websites where they can seek direct help through chat or appointments. Additionally, there will be resources available for reading about depression for those who prefer written content over videos.











Reflection

The end result of this project turned out great, and I am proud of it. However, it did turn out smaller than first intended since I had to scale down the project early in the process due to lack of time.

In the beginning, I had planned to not only do more than one episode but also create a fully functioning website. But I realized I could not animate everything in time.

During the process, I realized I had not planned for something that took a lot of time: getting bored of my project. It is a natural part of the process for me to get stuck and lose the drive for a week somewhere in the middle. I had plainly said forgotten to plan my break. That is something I will definitely plan for in the future because it is so much easier and

becomes so much better if you have a passion or interest in the project throughout the entire process.

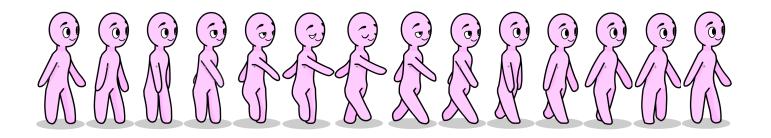
I have gained a lot of skills from this project, the biggest, of course, being animation. But I have also learned more about depression, both my own and others'.

Things I'd change in my process, except for time management of my breaks, is the research method I used. I did not, in the project, use an existing analytical method, and that is something I would have used if I would have done the project again.

Future Development

I believe that this project has potential, and for future development, I would like to expand it into a year-long project. I plan to apply for grant money and collaborate with professionals in the Swedish medical field. I envision hiring an animator, movie director, voice actor, and working closely with child psychologists and children of different ages.

I wholeheartedly believe that providing children with timely information about mental health and well-being will equip them with valuable tools to navigate depression and potentially have a milder and shorter illness. To help me achieve this goal, I encourage you to engage in conversations about mental health and educate those around you about depression. By sharing your experiences, you may help someone who is just beginning to face similar challenges. Our would is a little like an animation It migth only be a small change or step but it can take forever to create.



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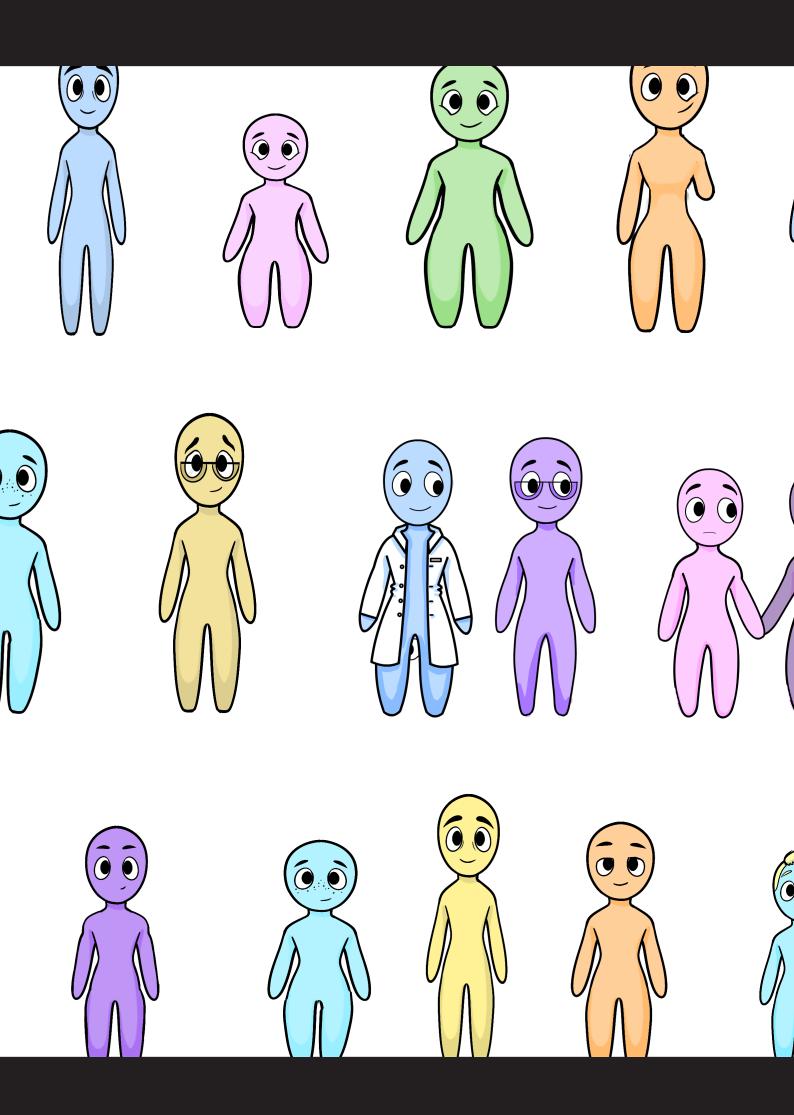
Apendix

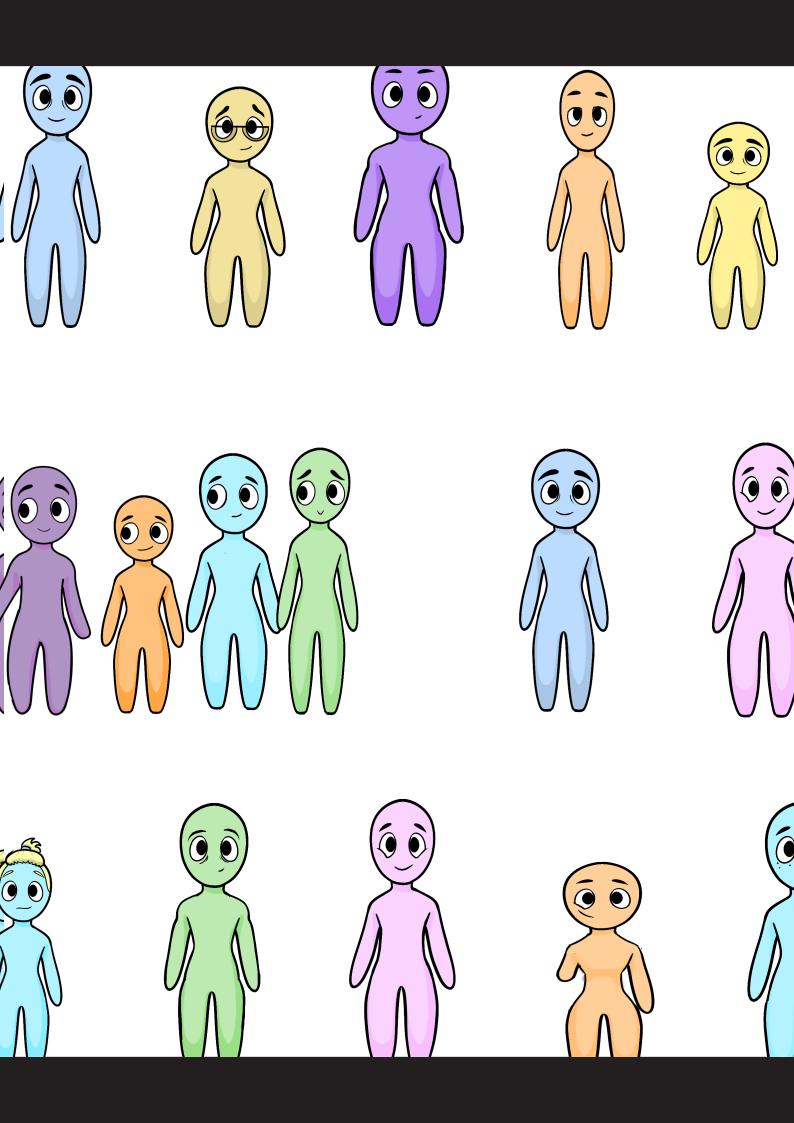
Survay

Q1	Har du eller har du haft depression?
	○ Ja
	○ Nej
Q3	
✓	2. Hur gamal var du när du blev diagnostiserad med depression?
	○ Vet ej
	Har ej fått den diagnos
	○ 0-9 år
	○ 10-13 år
	○ 14-16 år
	○ 17-19 år
	20-25 år
	25+ år
Q5 V	3. Med dina egna ord: Vilka ord skulle du använda för att beskriva din depression? Till exempel: Tung, dimmig, mörk osv Skriv gärna flera ord 4. I dina egna ord: Använder du någon metafor eller liknelse när du talar om din depression? I så fall vad är
	det? Till exempel: Det är som ett monster, det är som att ha ryggsäcken full med stenar osv

Q7 ✓	5. Enligt din åsikt passar några av dessa orden in på din depression? Markera de som du tycker stämmer in. Du kan välja flera val.						
	Mörk						
	Tung						
	Trött						
	Seg						
	Klibbig						
	Skugga						
	Kallt						
	Varmt						
	Tomt						
	Ingen passa in						
	Markera de som du tycker stämmer in. Du kan välja flera val. En ryggsäck full med stenar En tung kappa Ett lakan över ögonen Fickorna fulla med småsten Tunga skor Förföljs av en mörk skugga Har ett svart moln över huvudet Kroppen känns tung som bly						
	Ett monster förföljer mig						
	Ett svart hål i bröstet						
	Tungt hjärta						
	Famla i mörkret						
	☐ Instängd						
	Det är dåligt väder						
	Ingen passa in						

UMO - Ungdomsmottagningen						
RSFL - Riksförbundet för homosexuellas, bisexuellas, transpersoners, queeras och intersexpersoners rättigheter						
	BUP - Barn och ungdoms psykiatrin					
	Vuxen psykiatrin					
	1177					
	MUCF- Myndigheten för ungdoms- och civilsamhällesfrågor					
	RSMH - Riksförbundet för social och mental hälsa					
	Transammans					
	Tack för din medverkan! Om du skulle vara beredd att vara med på en intervju där vi diskuterar dina s kan du skriva din mail address här, (Det är inget måste och helt frivilligt!)					







Frida-Tim Otterbeck Email: tim.otterbeck00@gmail.com School of industrial design Bachelor's degree project 2023