Depression

Jerry Solomon offers a compassionate, holistic examination of depression from a Christian perspective, with helpful suggestions for those who long to help.

One Person's Story

Depression—a word that is used frequently in our time. Does it apply to you, someone you love, or someone you know? Since 17 percent of the population suffers from major depression at some point in their lives,{1} it is probable you have been touched by it in some way. Perhaps the following account will "ring true" in light of your experiences. (This story really happened, but the name of the character has been changed.)

For many years Stan, an evangelical Christian, struggled with varying degrees of depression. These bouts were incapacitating on occasion, irritating or highly frustrating sometimes, but always persistent in their visits. Eventually the struggle came to a crisis point. He was not able to respond to any emotional stimulus that was offered; he had totally isolated himself from family, friends, and work. In retrospect he realized this isolation was done purposefully. The true causes of his struggle had never been addressed, and he was tired of pulling himself out of one depressed state only to find another staring him in the face. So he refused to repeat the pattern that had plagued him for so many years. It was time to find the root causes, instead of repeatedly dodging them.

After talking with a good friend who was a counselor, he decided he should consider admitting himself to a psychiatric hospital. He immediately contacted such a place and entered the "first phase," or initial analysis prior to admittance. This analysis indicated he should become a patient. The next day he became part of an extraordinary program of discovery that was to last more than three weeks. In fact, those weeks

were so extraordinary, he will tell you they provided the impetus for dramatic, positive change in his life and thought.

During those days of concentration, Stan dealt with several important issues that subsequently have led to a more stable life. First, he faced the trauma of abuse he had experienced. Second, through the ministry of a compassionate chaplain and a counselor, he realized he was weary of learning about God, without at the same time knowing God in the personal way the Bible frequently indicates. He was hungry to couple Biblical precepts with personal experience. Third, the sense of community among those in the hospital with him led him to consider the social "games" he had been playing in his evangelical Christian setting outside the hospital. Even though many of the patients were not Christians, that did not deter them from intimacy, trust, and truth. There were no hidden agendas, no political posturing, no hypocritical fronts. They listened to one another, cried together, encouraged one another, challenged one another, laughed together, and even disciplined one another. Fourth, Stan was challenged to consider whether he should take medication in light of his trust in God's healing power. He was put on medication that is still part of his life after eight years. Fifth, he was led to consider his thought life, especially as it applied to expectations he had of himself.

Unfortunately, there are many Christians who continue to wrestle with what Winston Churchill called the "black dog" of depression. They struggle without finding help. This essay is offered with the hope that it will encourage those who need help, and that it will prompt many to respond with patience and love to those who are depressed.

Who Suffers with Depression?

Some have said depression is "the common cold of emotional disorders, and it appears to be on the rise. People of both genders get depressed, although women are twice as likely as

men to suffer from major depressive disorders."{2} Who are these people? As we will see, they are both famous and infamous people; they are normal people; they are even people we know from the Bible.

Depression can be described as "a condition of general emotional dejection and withdrawal; sadness greater and more prolonged than that warranted by any objective reason."{3} Dejection, withdrawal, sadness, and other similar terms are familiar to many. Vincent Van Gogh, Abraham Lincoln, Edgar Allen Poe, Marilyn Monroe, Rod Steiger, Mike Wallace, and many other notable people have struggled with depression. In 1972 Senator Thomas Eagleton acknowledged his depression, and the Democrats dropped him as the Vice Presidential candidate. In 1995 Alma Powell, the wife of General Colin Powell, revealed her history of depression, and her husband urged others to get help.{4} Martin Luther and Charles Spurgeon, two great men in the history of the church, frequently lived with the dark shadow of despondency.

Even some great biblical characters wrestled with depression. At one point in his life, Moses wanted to die (Exodus 32:32). While struggling with his suffering, Job "cursed the day of his birth" (3:1). He said, "I will speak in the anguish of my spirit, I will complain in the bitterness of my soul" (7:11). In addition, he cried, "My spirit is broken, my days are extinguished, the grave is ready for me" (17:1). Elijah was incapacitated with depression soon after he had been an integral player in one of the great demonstrations of God's power (I Kings 19). After Jonah witnessed the astounding grace of God among the wicked Ninevites, he angrily said, "Death is better to me than life" (Jonah 4:3). The great prophet Jeremiah declared, "Why did I ever come forth from the womb to look on trouble and sorrow?" (Jeremiah 20:18)

The amazing prophecy of Isaiah 53:3 states that the Suffering Servant, the Lord Jesus, was "a man of sorrows, and acquainted with grief." *Sorrows* and *grief* can refer to both physical and

mental pain, which could include depression.{5} Consider the thoughts of Lydia Child, the 19th century abolitionist, in light of Isaiah 53:

Whatever is highest and holiest is tinged with melancholy. The eye of genius has always a plaintive expression, and its natural language is pathos. A prophet is sadder than other men; and He who was greater than all the prophets was "a man of sorrows and acquainted with grief."{6}

A well-known spiritual says, "No one knows the trouble I've seen," a sentiment that is understood by those who are depressed. J.B. Phillips, author of the classic *Your God is Too Small*, dealt with depression all his life. In one of his many letters, he offered these comments to one who also was struggling: "As far as you can, and God knows how difficult this is, try to relax in and upon Him. As far as my experience goes, to get even a breath of God's peace in the midst of pain is infinitely worth having."{7}

We have seen that depression has been experienced since ancient times. No one is immune, but, praise God, those in His family are not alone. The Lord Himself is with us.

Depression: Symptoms and Explanations

- *I feel so tired!*
- *I feel weak; my arms are heavy.*
- *I feel so agitated!*
- *I feel anxious about everything, it seems.*
- *I feel so fearful—of death, of tomorrow, of people.*
- *I can't concentrate!*
- *I can't remember things I used to remember.*
- *I can't face people; I want to be alone.*
- *I'm not interested in sex anymore.*
- *I can't sleep!*
- *I sleep to escape!*
- *I only eat because I have to.{8}* • *I hate myself!*

- *I feel angry all the time!*
- *Everything and everyone is stupid!*

Such comments are familiar to those who are dealing with depression. Usually these phrases are not descriptive of what is objectively true, but they are descriptive of how a depressed person is responding to his predicament. One who hears them can be tempted to dismiss the one who made the statements with well-meaning but trite responses that betray a lack of understanding. It often is difficult for someone who has not wrestled with depression to understand.

So how can we understand? Why does a person get depressed? There is no simple answer to this question, contrary to what some people think. As Dr. John White has written, "Depression has many faces. It cannot be relieved on the basis of one simple formula, arising as it does by numerous and complex mechanisms, and plummeting sometimes to depths where its victims are beyond the reach of verbal communication. There are mysteries about it which remain unsolved. No one theoretical framework is adequate to describe it."{9} It is meaningful for a Christian to understand this. Sometimes a response to the depressed can focus on a principle without regard for the person. For example, the 17th century English bishop Jeremy Taylor wrote: "It is impossible for that man to despair who remembers that his Helper is omnipotent."{10} This assumes that remembering something will automatically change one's thoughts and feelings. The person who is depressed doesn't necessarily make that connection. Mentally healthy people have reasonable thought processes, but they are not the norm in a depressed person's clouded life. "Mental health is like physical health. We are all vulnerable to its loss."{11} A truly depressed person is not mentally healthy.

As we have stated, there is no one all-encompassing answer to the "Why?" of depression. But there are a number of models that suggest answers.

- Aggression turned inward, or unexpressed anger.
- Object loss, as in the loss of a parent.
- Loss of self-esteem.
- Incorrect thinking.
- Learned helplessness, or inability to respond to unpleasant experiences.
- Loss of reinforcement, as in lack of sympathy.
- Loss of role status, as in loss of power or prestige.
- Loss of meaning of existence.
- Impairment of brain chemistry, as in neurotransmitters.
- Neurophysiological malfunction of brain cells.{12}

When we ponder these models in the light of a Christian worldview, we find that none of them can stand alone. Each one taken separately reduces us to only one element, whereas a Christian worldview sees man holistically. Man is not to be seen solely as a product of his past, his thought life, his societal conditioning, or his biology. The one who is depressed should be approached as Christ would: as a whole person made in God's image.

Depression and the Whole Person

"What is man, that you are mindful of him, the son of man that you care for him?" These memorable phrases from Psalm 8 pose crucial questions in regard to the subject of depression. The answers we give to such questions will provide a beginning point for responding to those who are depressed. As Leslie Stevenson has written, "The prescription for a problem depends on the diagnosis of the basic cause."{13} A Christian is challenged to consider a prescription for depression that sees both the material and immaterial aspects of a total person. Such considerations lead to concerns as to whether one should take medication, submit to some type of psychological analysis, or simply trust God to provide healing. Or, as a prominent Christian psychiatrist asks, "Is [depression] a disease of the mind or of the body?"{14} Is it both/and, or

either/or? These are issues that tend to stir controversy among Christians. Too frequently the controversy is focused on "clumsy clichés, …subtly damning exhortations, breezy banalities, and the latest idiocy in pop psychology. Or else…unnecessary pills."{15}

The history of the church demonstrates that one of the reasons for such a response is found in an ancient struggle between Greek and Hebrew influences. More often than not we tend to side with the Greeks and divide humans "into a less important physical part (body and brain) and a more important immaterial part (mind and soul)."{16} This unbiblical division creates problems, because "just as music is more than the orchestra that plays it, so I am more than my body."{17} I am also more than my mind and soul.

When this unity of human nature is ignored two extreme views can be found among Christians. "One is that we submit to all suffering, sickness, pain&mdashwhether mental or physical—as from God."{18} The other asserts that "through the exercise of faith and by the power of Jesus' name we can banish every sickness, every difficulty. Sickness, tragedy, pain must be resisted, for all come from Satan. Unhappiness is a sign of defeat and unbelief."{19} This means that seeking help from physicians, psychologists, or psychiatrists "is a tacit admission that the resources in Christ and the Scripture are inadequate."{20} Both of these views are too simplistic, but there are certainly elements of the truth in them. How can we reconcile them?

Quite simply and obviously, the one who is depressed should be treated as a whole person. Consider the statements of John White, a practicing Christian psychiatrist, author of a thought-provoking book on depression and suicide entitled *The Masks of Melancholy*, and many other books. He wrote:

> I will no more treat mind as distinct from body than body as distinct from mind. By the grace of God I will treat

> persons, not pathology, sinners rather than syndromes, and individuals rather than illnesses. And however primitive our weapons may be, there are effective weapons and we must use them.{21}

As one who has fought with depression, I have come to realize the wisdom of Dr. White's comments. The treatment I have received has come from family, friends, physicians, psychologists, and psychiatrists who understand how God has created us. Their compassionate, godly responses to my struggle have been instrumental in my recovery. To paraphrase the apostle Paul, "I thank my God in all my remembrance of [them]" (Philippians 1:3). They were the Lord's servants in my time of need.

Responding to Depression

Sarah's husband has been isolating himself from her for several weeks. He won't communicate with her. He doesn't eat much. He shows no emotion other than a sense of sadness and gloom. He sits in the dark for hours. He has called his office several days to report he is taking a sick day. He does none of the things he once did that gave him a sense of joy and accomplishment. He shows no interest in making love with her. He has disappeared for hours in his car and will not say where he has been. Sarah wonders if she has done something to upset him and is desperate to get him to talk with her so she can discover what is happening.

Perhaps this scenario is familiar to you or someone you know. How can we respond to such a crisis? How can we help the one who is depressed?

First, understand the difference between someone who is sad or disheartened and someone who is truly depressed. Sadness or a "blue mood" are experienced by most of us. Depression is much more debilitating and long-lasting. There are at least three levels of depression. One can be called *major depression*,

which “is manifested by a combination of symptoms that interfere with the ability to work, sleep, eat, and enjoy once pleasurable activities.” Another, called *dysthymia*, is less severe but keeps one “from functioning at ‘full steam’ or from feeling good.” The third level is called *manic-depressive*, or bipolar depression. This “involves cycles of depression and elation or mania.”{22}

Second, if you believe someone is struggling continually with depression, encourage him or her to seek help. Suggest that your friend see a trusted pastor, counselor, or physician. The earlier you can suggest this, the better.

Third, at the first sign of depression, encourage conversation and then listen carefully. The deeper a person sinks into a depressed state, the more difficult it is to talk with anyone, even those she loves most. Make yourself available and gently pursue communication as often as you can. But leave time for silence when you are with her.

Fourth, give emotional support that indicates you are taking the person seriously. “Do not accuse the depressed person of faking illness or of laziness, or expect him or her ‘to snap out of it’.”{23}

Fifth, be an encourager. Affirm the one who is depressed with statements of truth about his character and abilities, as well as your love for him.

Sixth, if he will let you, pray for him in his presence.

Seventh, if you hear remarks about suicide, take them seriously and seek advice from an expert.

Eighth, act as a “mental mirror.” She probably isn’t thinking reasonably and is in need of gentle reminders of a clearer image of the world and herself.

Ninth, don’t chastise him if he expresses anger, even anger at

God. Listen carefully to discover why he is angry and help him begin to think how he can best express that anger.

Tenth, on a larger scale, do what you can to develop an atmosphere in your church that allows one who is depressed to find trust, truth, and compassion.

These ten suggestions, as helpful as they can be, do not constitute the ultimate response to the depressed. We need to remember that ultimate healing rests in the hands of our loving God, who makes all things new.

Notes

1. Clark E. Barshinger, Lojan E. LaRowe, and Andres Tapia, "The Gospel According to Prozac," *Christianity Today* (14 August, 1995), 35.
2. Siang-Yang Tan, "The ABCs of Depression: A Review of the Basics," *Christian Counseling Today* (Fall 1995), 10.
3. *The Random House Unabridged Dictionary*, 1967.
4. "Fighting the Stigma," *Newsweek* (20 May 1996), 22-23.
5. F. Duane Lindsey, *The Servant Songs* (Chicago: Moody, 1985), 116.
6. The New Dictionary of Thoughts, 1936 ed., s.v. "Melancholy."
7. Vera Phillips and Edwin Roberstson, *J.B. Phillips: The Wounded Healer* (Grand Rapids, MI: Eerdmans, 1984), 110.
8. John White, *The Masks of Melancholy* (Downers Grove, IL: InterVarsity, 1982), 77-82.
9. Ibid., 18.
10. The New Dictionary of Thoughts, s.v. "Despair."
11. White, 25.
12. Ibid., 103-125.
13. Leslie Stevenson, *Seven Theories of Human Nature* (New York: Oxford, 1987), 6.
14. White, 53.

15. Ibid.
16. Ibid., 41.
17. Ibid., 45.
18. Ibid., 47.
19. Ibid., 49.
20. Ibid.
21. Ibid., 220.
22. National Institute of Mental Health, “Depression: What you need to know” (Indianapolis: Eli Lilly, n.d.), 1-3.
23. Ibid., 9.

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