

Reflection on the Virginia Tech Shootings

We moved our household this weekend, so I had not heard anything about the shootings at Virginia Tech until that same night. Next morning, I began reading articles to bring myself up to speed. The situation hurts. It was a student at the university, not some outsider. The gunman was 23, only three years younger than me.

Another person from my generation lashing out in violence; this is not the first time it's happened. This situation brings to mind several other recent occurrences, both locally and nationally. On a personal level, I recently found out that a guy from my high school who also graduated from my alma mater, University of Texas at Dallas (UTD), committed suicide recently. He was 26, an accomplished musician, national merit scholar, and earned a computer science degree.

During my junior year at UTD, a friend of mine at a Christian university came home for Christmas. While she was in Dallas, she received word that her dormitory roommate had committed suicide. She was a bright girl with a promising future and was apparently from a Christian family.

A month after I had graduated UTD, a news report came out that a student drugged, raped, and assaulted another student—during an exam study session.

Lastly, while reading about the Virginia Tech gunman's angst that finally snapped into a violent rage, I could not help but remember the Columbine shootings. That report came out my senior year in high school. The two teenage perpetrators were my age.

With all of these cases of violent crimes on campuses among young, educated people, I have to wonder, *What is wrong with*

my generation? Why are these twenty-somethings breaking like this? Crime and violence are a part of the fallen world that we live in, but the inordinate amount of violent and sexual crimes on campuses is staggering.

My generation has received the most “information” from media than any other. We have seen the rise of technological advances that only Gene Rodenberry (*Star Trek*) could dream of. We have grown up thinking that every opportunity and possibility is at our fingertips (or at the click of a mouse). We have some of the fastest, most efficient cars, the biggest malls, and some of the best plastic surgery that money can buy. The nation is rich, and although material resources may not satisfy us in the long run, they sure feel good right now. We have medications for nearly everything, and beauty products for everything else. But apparently all of the riches, technology, beauty, and opportunities still leave us in despair—for some, despair to the point of death. Why? Is this an artifact for only this generation, or does the Bible speak to the despair plaguing us?

Consider the words of Solomon:

“I made great works. I built houses and planted vineyards for myself... I bought male and female slaves, and had slaves who were born in my house. I had also great possessions of herds and flocks, more than any who had been before me in Jerusalem. I also gathered for myself silver and gold and the treasure of kings and provinces... Also whatever my eyes desired I did not keep from them. I kept my heart from no pleasure... Then I considered all that my hands had done and the toil I had expended in doing it, and behold, all was vanity and a striving after wind, and there was nothing to be gained under the sun” (Ecclesiastes 2:4,7-8,10-11).

Just as Solomon was blessed and lived in a time of education, materialism, and plenty, I think his hopelessness rings true

of my generation as well. Compared to prior generations, we have it all, and yet it only fills us with despair that is really no different. There is a void that only God can fill. At the end of Ecclesiastes, Solomon concludes that the end of the matter is to fear the Lord and keep his commandments (12:13). In other words, when all is said and done, no amount of education, riches, or technology can compare to knowing the Lord through His Son Jesus Christ.

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Deadly College Shootings in U.S.

Some deadly shootings at U.S. colleges or universities, listed by number of fatalities:

April 16, 2007

A gunman kills 32 people in a dorm and a classroom building at Virginia Tech in Blacksburg, Va. The suspect then dies by gunshot himself.

Aug. 1, 1966

Charles Whitman points a rifle from the observation deck of the University of Texas at Austin's Tower and begins shooting in a homicidal rampage that goes on for 96 minutes. Sixteen people are killed, 31 wounded.

July 12, 1976

Edward Charles Allaway, a custodian in the library of California State University, Fullerton, fatally shoots seven fellow employees and wounds two others. Mentally ill, Allaway believed his colleagues were pornographers and were forcing

his estranged wife to appear in their movies. A judge found him innocent by reason of insanity in 1977 after a jury was unable to reach a verdict and he was committed to the state mental health system.

Nov. 1, 1991

Gang Lu, 28, a graduate student in physics from China, reportedly upset because he was passed over for an academic honor, opens fire in two buildings on the University of Iowa campus. Five University of Iowa employees killed, including four members of the physics department, one other person is wounded. The student fatally shoots himself.

May 4, 1970

Four students were killed and nine wounded by National Guard troops called in to quell anti-war protests on the campus of Kent State University in Ohio.

Oct. 28, 2002

Failing University of Arizona Nursing College student and Gulf War veteran Robert Flores, 40, walks into an instructor's office and fatally shoots her. A few minutes later, armed with five guns, he enters one of his nursing classrooms and kills two more of his instructors before fatally shooting himself.

Sept. 2, 2006

Douglas W. Pennington, 49, kills himself and his two sons, Logan P. Pennington, 26, and Benjamin M. Pennington, 24, during a visit to the campus of Shepherd University in Shepherdstown, W.Va.

Jan. 16, 2002

Graduate student Peter Odighizuwa, 42, recently dismissed from Virginia's Appalachian School of Law, returns to campus and kills the dean, a professor and a student before being tackled

by students. The attack also wounds three female students.

Aug. 15, 1996

Frederick Martin Davidson, 36, a graduate engineering student at San Diego State, is defending his thesis before a faculty committee when he pulls out a handgun and kills three professors.

Jan. 26, 1995

Former law student Wendell Williamson shoots two men to death and injures a police officer in Chapel Hill, N.C.

April 2, 2007

University of Washington researcher Rebecca Griego, 26, is shot to death in her office by former boyfriend Jonathan Rowan who then turned the gun on himself.

Aug. 28, 2000

James Easton Kelly, 36, a University of Arkansas graduate student recently dropped from a doctoral program after a decade of study and John Locke, 67, the English professor overseeing his coursework, are shot to death in an apparent murder-suicide.

Source: Associated Press

Accessed Apr. 17, 2007 © 2007 MSNBC.com
<http://www.msnbc.msn.com/id/18137414/>

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&mdashas 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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