



# Dealing with Depression

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## FOREWORD

Although this booklet is about 'Depression' it is not a depressing book to read. It is not a booklet for the 'expert'. All of us will be able to recognise parts of ourselves and our own lives. Neither is it only about coping with depression, but about the experience of guilt and our attitudes to it; how we ought to behave when things go wrong and what we should do when faced with stress and anxiety.

Here is positive, practical, authoritative counsel firmly based on the application of scriptural principles to the personal experience of the writer.

The scripture used takes on a new, inspirational meaning and opens the way for a fresh appraisal of the relevance of the Word of God to the sometimes difficult, stressful circumstances of life.

This booklet is in every way a spiritual tonic.

Norman Fitchett

(for the Christadelphian Support Network Committee)

## PREFACE

Depression is, sadly, all too prevalent today and Christadelphians are not immune to this distressing condition. Sincere, whole-hearted commitment to Christ does not guarantee full mental or physical health, nor does depression necessarily indicate a lack of commitment. In fact, depression can be aggravated by the pressures and expectations of belonging to our community or by a misunderstanding of doctrines or by legalism or by inhibiting traditions. Our standards of behaviour are so high that some people are made to feel guilty if they fall short of perfection or experience strong emotions.

We need to recognise that Christians do not become Christ-like overnight but are engaged in a life-long process of refinement. During that process there may be mistakes, doubts, sins, difficulties and even crises to contend with. It is mostly our habit to repress such problems because it is felt unacceptable to admit them. We put on our Sunday faces and smile and say "I'm very well, thank you" while we may be crying inside. Let us accept our humanity and look with more compassion to our brothers and sisters for whom the struggle is greater. We should seek to understand and encourage each other rather than censure.

The Care Group has been approached by many who are plagued by depression and are desperate for understanding and help. Those close to them feel helpless and in need of advice. It was felt, therefore, that a booklet about depression written from the Christian point of view would be of value.

There are many books on the subject written by psychiatrists and professional counsellors. This is not one of them. This has been written by a sister who has suffered from recurrent depression over many years and who has moved towards recovery

and an understanding of the condition. She has written down her findings in the prayerful hope that others who suffer similarly will find relief and that those who seek to help them will gain an insight into the condition.

# DEALING WITH DEPRESSION

## RECOGNISING THE PROBLEM

Depression is a dis-ease of the whole person, a clinical state which may require treatment and must be taken seriously. It can affect an individual at any age.

We are not talking about weakness nor apathy, hypochondria nor moodiness. We are talking about an illness which can be - at its worst - deep, black, leaden, incapacitating, imprisoning, self-loathing despair. We are talking about being unable to function normally and needing to make a supreme effort of will just to speak or respond in any way to other people who are outside the prison. We are talking about the despondency that makes one want to hide away, to sleep and not to wake because the feelings of guilt, worthlessness and hopelessness are unbearable - and there seems no way out.

The black mood may be accompanied by some of the following symptoms: disturbed sleep (especially waking very early), fatigue, slowness and dullness of thought, inability to concentrate, loss of appetite, weight loss, or, conversely, compulsive eating and weight gain, lack of interest in usual activities, anxiety, withdrawal from people, variation of mood during the day (usually depression is worst in the morning), mild physical symptoms such as pain or burning sensations, suicidal thoughts and fear of madness.

Some depressives may also suffer from periods of mania - that is, they swing from the extreme of a depressed mood to an abnormal 'high' (euphoria) and become very talkative, overactive, intrusive and unrestrained. Such an episode is usually followed

by another depression. Such people tend to suffer persistent symptoms requiring medical treatment and supervision.

Clinical depression can, of course, vary in degree. It can be mild, miserable, dull emptiness and tearfulness, which can be hidden from others and through which an individual can continue to achieve day-to-day tasks, but with impaired ability to make decisions. Or it can be of totally incapacitating severity in which the individual is withdrawn (with or without anxiety) and quite unable to function normally - inactive, isolated, unable to cry, unresponsive, despairing and hopeless of any relief.

Sufferers from depression will recognise these descriptions, though experience will differ in degree in individual cases and at different times. Take heart. There is a way up and out from the darkness. This booklet discusses such a way, which has proved beneficial for many Christians.

Those who have never experienced depression find it hard to understand and, therefore, hard to live with and support someone close who may be depressed. I hope this booklet will give some insight into the very real suffering of the depressed and suggest how best to help.

We all experience periods of low spirits and of sadness and say we are depressed, but by saying so we devalue the word. There is a great gulf between being downhearted and being clinically depressed. Certainly the methods of coping with depression outlined here, if applied, would lift the spirits of any who felt low; but this work is written mainly for those for whom depression is a serious, maybe recurring, condition, and for those who seek to help them.

## CAUSES OF DEPRESSION

There are several different illnesses classified as 'mood disorders' and they fall into two broad categories - reactive and endogenous.

### 1 Reactive Depression

Depression can develop as a reaction to a recognisable precipitating event and is often accompanied by anxiety. It can follow the shock of experiencing an accident, a horrifying event or being diagnosed with a serious illness. It can be present in prolonged personal or family stress. It can accompany bereavement or any severe loss such as disablement, imprisonment, family separation or unemployment. The words of Job illustrate such a reaction, 'Why did not I perish at birth? (1)

'Why is light given to those in misery  
and life to the bitter of soul,  
to those who long for death that does not come ...  
for sighing comes to me instead of food,  
my groans pour out like water ... I have no peace,  
no quietness; I have no rest, but only turmoil'. (2)

It can follow apparently agreeable but unsettling changes of circumstance such as moving house, changing occupation or retirement.

It can result from efforts perceived as failure especially against the power of sin. Elijah felt like this on Mount Horeb, 'I have had enough, Lord; take my life. I am no better than my ancestors'. (3)



It can develop from guilt when a sin has been committed. David knew this feeling which he expressed in Psalm 32,

'When I kept silent, my bones wasted away  
through my groaning all day long;  
for day and night your hand was heavy upon me.

My strength was sapped as in the heat of summer ...' (4)

Depression commonly follows medical conditions such as debilitating illness, viral disease, pre-menstrual tension, childbirth, and menopause or as a result of tension, anxiety or chronic pain. Most of these causes are known and obvious, but the cause may also be hidden as with glandular or hormonal disturbance, allergy, anaemia or secret worry. Onset of the depression is usually gradual.

Many cases of reactive depression can be of limited duration and will recover by degrees, with support, (e.g. by a process of adjustment to changed circumstances). Usually the sufferer recognises the cause of the depression and expects to recover in time. Some cases can become prolonged (e.g. in pathological grief, debility in old age or terminal illness) and require treatment.

Of course, not everyone becomes depressed in adverse situations. There are studies which indicate that some people are genetically predisposed to developing depression or inclined to become easily depressed because of damaging early experiences. These are therefore vulnerable in stressful circumstances, even despite deep faith.

## 2 Endogenous Depression

In many cases there is no apparent reason for the depression, no outward precipitating cause. Life can appear full of blessings and trouble-free, yet acute depression can come, gradually or (more usually) suddenly, like a great enveloping darkness that blots out all joy and rational thought. Such depression is accompanied by sleep disturbance, variation of mood during the day, slowness and loss of normal interests, and is often more serious than reactive depression. This depression is called endogenous - that is, 'arising from within'.

Because there is no obvious cause, endogenous depression is often accompanied by powerful guilt feelings and self-recrimination. Sufferers feel that it is their entire fault and conclude that they are useless and worthless. They feel that they have become 'different' and despair of feeling normal again. Yet the misery can 'lift' as suddenly as it came, leaving just the fear of its return.

This type of depression is often recurrent; and recurrent cyclical endogenous depression over many years has been the writer's experience.

Research has produced evidence of biochemical causes in endogenous depression which, if not treated, can last for six to nine months and become chronic in the elderly (where other illness is present). Women are more likely to develop it than men, though depression in men can be very serious, and Christians are no more immune from depression than they are from diabetes or any other illness. In fact, believers who experience endogenous depression suffer acutely because they are racked with guilt and feel they have failed in their faith.

## TREATMENTS

The current attitude in our society is that all depression is psychiatric illness and therefore the province of the doctor and psychiatrist. If a doctor is consulted, he will usually prescribe drug treatment which he will himself supervise, or he will refer on, in acute cases, to a consultant psychiatrist.

The psychiatrist, according to which school of thought he may follow - and as a result of his assessment - may recommend drug treatment (the most common form of treatment), electro-convulsive therapy (ECT - still used effectively for some conditions) or (especially for reactive depression) he may refer on to a clinical psychologist for psychotherapy, psycho-analysis, group therapy, cognitive therapy, behaviour therapy or counselling.

Some of the assumptions on which psychiatrists and psychologists work are not necessarily shared by Christian believers (some will blame religious belief for the problem) but, because of the seriousness of depression and the very real risk of self-neglect or even suicide in some cases, accepting recommended treatment to alleviate the suffering in an acute phase is not to be discouraged. In the case of psychotherapy and counselling, it is wise to state one's firm beliefs at the outset and insist that they are sacrosanct. If possible seek out a Christian counsellor.

Anti-depressant medication (NOT tranquillisers) can give early relief, though it usually takes a couple of weeks to begin to take effect, It should be taken regularly AS PRESCRIBED for a limited time under strict supervision and needs to be reduced gradually. The tablets relieve the acute symptoms by correcting chemical imbalance in the brain, but they are not the total

solution. There is the danger that a person can become dependent on a drug and begin to think that it is impossible to cope long-term without it.

Long-term success in coping with depression can only be realised when the sufferer avoids becoming dependent upon any medication or person (be it doctor, psychiatrist, counsellor, spouse or anyone); ultimate success is possible only if, after the acute episode has passed, you begin to take responsibility for recovery upon yourself as part of your whole life before God.

Short-term treatment may be advisable and necessary; family and friends, brothers and sisters may be able to help significantly, but only you yourself, with God's help, can finally break out from the darkness.

## HOW OTHERS CAN HELP

This section is addressed to the many people who have contact with someone suffering from depression, and who would help if only they knew how. Although ultimately the depressive must take responsibility, that is not possible at first; in fact, the individual may have periods of absolute helplessness, when outside intervention is vital and urgent. If you really want to understand and to help, you must recognise and accept the reality of the person's suffering and be prepared for a long-term commitment.

(To avoid the clumsiness of having to repeat 'him or her' and 'his' or 'hers' I shall use the plural 'them' and 'their', although we all recognise that we are referring to individuals.)

## 1 What not to do

There are several important 'don'ts'.

In an acute phase, the individual may be unable to speak, completely dull and lacking in response, careless of dress and cleanliness, unable to eat or, conversely, unable to stop eating, negligent of self and of dependants.

**Don't** underestimate the pain because YOU cannot feel it.

**Don't** say, 'I know exactly how you feel' - you don't! Even if you have suffered from depression yourself at some time, you cannot know exactly how any other individual is feeling.

**Don't** chatter in an attempt to 'cheer them up'.

**Don't** say, 'You must pull yourself together' or 'You ought to count your blessings' or 'You just need to read your Bible and pray more'. Such expressions (and, yes, insensitive people really do say such things!) are dismissive, unfeeling and counter-productive. People would not be depressed if they could possibly help it; it is not laziness nor weak will nor lack of faith nor awkwardness. People in deep depression can no more control it at this stage than people with migraine or arthritis can dismiss their pain at will. The depressive is ill!

**Don't** expect the person to behave and react as you would, nor as he or she normally would.

**Don't** judge or admonish or criticise; the person's self-criticism is so extreme already that any more would deepen the depression. And it doesn't help to point out that there are other people worse off.

**Don't** over-sympathise or fuss; that would only add to the feelings of guilt and inadequacy. The person needs to be helped, but not taken over.

**Don't** dismiss the possibility of suicide. If necessary sensitively broach the subject and if suicidal thoughts are expressed treat them seriously and get expert help. The common view, that people who talk about suicide are not likely to carry it out, is not true. The danger point can be when the depression first begins to lift, thus enabling the person with suicidal thoughts to act upon them.

**Don't** give up and walk away; you are needed.

## 2 What you can do

**Do** establish that medical help has been sought. If not, advise it and accompany if necessary.

**Do** try to accept and try to understand. What is needed is not sympathy but empathy, that is, a 'sitting alongside and sharing'.

**Do**, in an acute phase, where there is a clear need, attend to obvious and immediate practical necessities. For instance, in the case of a young mother or lone parent, calmly and unobtrusively wash pots, attend to dependants (baby, dependant relative, etc) and arrange for necessary shopping and laundry. Make a cup of tea and, if need be, a nourishing snack - and share it.



**Do** try to get the person moving; take for a car ride, go for a walk together or tackle some task together. The bodily

movement itself will help, as will outside stimulation and your company.

**Do** then talk gently but positively. Express concern and affection, and give assurance of your help and support. Offer to work with rather than for the person. Talk of certain recovery, of an assurance that the depression will pass in time and express confidence in the individual. Praise recent achievements and signs of coping better. Reassurance will need to be given on many occasions, including assurance of the love of other people and of the love and the forgiveness and the grace of God. Depressives find it hard - in fact, almost impossible - to believe that God or any person could love them, because they feel so worthless and unlovable.

**Do** pray with the person. Seriously depressed people are usually unable to pray. They know that Christians should praise God and consider other people and, because they feel unable to do either, they feel guilty. They therefore feel unacceptable to God and unable to approach Him. It is a comfort - and sometimes achieves a breakthrough - to have a brother or sister pray aloud for them and with them. Also pray for them daily and let them know that you are doing so. It can be helpful to have a regular set time for such prayer and to let them know what that time is, maybe a time of the day that is particularly difficult for them. If they wake depressed early in the morning (as is commonly the case), it can be consoling for them to remember that prayers are being offered on their behalf at that very time. It may enable them to begin to pray for themselves and help them face the day.

When the person is able to talk, **do** encourage them to do so, and **do** listen. Forget yourself



(don't talk about your own experiences!) and really listen. If this is a reactive depression, let the person talk through the experience which caused it - several times if necessary - but you should caution individuals against revealing anything they might later regret disclosing. Otherwise, interrupt only to prompt or clarify..... 'Are you feeling angry about that?' .... 'Are you saying that ....?'

Gently counter negative and morbid expressions. Remind the person that these thoughts and feelings are temporary and a distortion of their usual thinking (though that will be hard for them to accept). Tenderly nourish more positive thinking and express hope and confidence.

It has to be said that there are some people who cannot talk about their feelings or who prefer not to. In that case, you can merely assure them of your concern and your availability - and be patient.



Discourage hasty decision making. More usually depressed people have difficulty making decisions - even minor ones - but sometimes they will make wild statements and rash decisions.....'I'm going to pack my job in...', 'No one here cares about me'; 'I'm going to move away...', etc. Advise delay. Remind them that they will feel differently about things when the depression lifts. Agree to discuss the matter again at a later date, if they will postpone action for a while.

Be patient - depression can persist for months. Be persevering (but not pushy), long-suffering and forgiving. The person may even berate you, but don't take it personally - it is misdirected anger. Be kind but firm. In a word, **LOVE** this suffering person.



The depressive feels worthless and unlovable. Sincere loving words and actions will help to restore normal self-esteem.



Maintain regular contact, but be alert to the danger of dependency. If the person becomes too dependent on you or makes unreasonable demands, you will need to be firm and may even need to hand over the care to someone else. Dependency will delay the depressive's recovery.

When the depression lifts, encourage the person to take more responsibility for their own self.

Express confidence in their ability to do so.

Encourage the person to plan each day, establish routines, take some physical exercise, to present a tidy appearance and attend to their general health and healthy eating.

Encourage attention to God's Word and to prayer, to begin to look outward, meet other people, try to recognise and to respond to other people's needs.

Stimulate lighter-heartedness - not to worry unduly about daily happenings, such as a broken plate, a rude shop assistant, spilled milk, etc. It is common for people who are depressed to get such small incidences hugely out of proportion, even to the point of paranoia.

Encourage a sense of humour. Christians are allowed to laugh - especially at themselves. It is often said that in some bad situations we must either laugh or cry. Those people who can cultivate the gift for laughing and finding humour in a situation are greatly blessed. For laughter can diffuse the tension and lessen the stress.

Gradually reduce active support, but give assurance of your care and continued availability if needed.

As I said, it is a long-term commitment.

## SELF-HELP

I am speaking now directly to you, if you are the one feeling depressed.

Depression is a multi-faceted illness. It is not like a simple fracture for which you passively depend upon people at the hospital to take an X-ray, set the bone and put it in plaster, and then wait until it heals. Depression involves your physical condition, your mental attitudes, your emotional state and your spiritual health. If you are to overcome it satisfactorily, you will need to consider - and maybe make some changes in - all of these areas.

You may need the help of your doctor, or your family and of a close friend - and when the symptoms are severe, DO ACCEPT HELP, including medical treatment, if advised. But as soon as you are able, take the initiative yourself for your further recovery. Care for your body's health, reconsider the ways you think and feel, and renew your spiritual life. You can, with God's help - and that help is readily available - alleviate your depression and lift up your head again.

Let's look at the four areas one at a time.

### 1 Your health

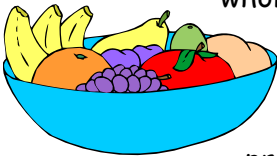
There is frequently an underlying physical factor in depression. So the first thing to do is to visit your doctor. Tell him (or her, of course) about the feelings of depression and describe ANY

OTHER SYMPTOMS you have. Ask him for a thorough medical examination to check for possible physical problems and be advised by him on the treatment of any condition that comes to light.

If he recommends anti-depressant medication (NOT tranquillisers), discuss it with him and decide together whether it is necessary. If you accept such medication, follow his directions meticulously. Once started DO NOT suddenly stop taking them, but, when the time is right, reduce the dose gradually under his supervision. Anti-depressant tablets help to restore the chemical balance in your brain, so they may lift your spirits sufficiently for you to be able to proceed with your self-help programme.

Now take a good look at your general fitness. Examine your diet. Have you fallen into the habit of missing meals, or of eating too many convenience foods, sweet things and 'junk' food? Then you can improve matters. Eat nutritious, natural and whole foods -

wholemeal bread and cereals, fresh vegetables, salads, fruit and fish, and meat, eggs and cheese (these last three in moderation). Cut down or avoid altogether 'refined' flour products, white sugar, convenience foods, sweets and stimulants such as tea, coffee and alcohol. Drink plenty of water.



If you are under or over weight, allow the improved diet to correct this gradually. Avoid 'crash' or 'fad' diets. Your health is more important than your shape at the moment, and the health of your body is dependent to a large extent upon the quality of nourishment it receives. If you fail to give the basic ingredients it needs and fill it instead with denourished food, chemicals,

colourings and sweets, it will be deficient. That makes sense doesn't it? Recovery is hastened if you supplement your diet with extra minerals and vitamins, especially the complete range of B vitamins and a general multi vitamin and mineral capsule.

If you are in doubt about what you should eat or what supplements are needed, learn more about good nutrition - there are plenty books on the subject - or consult an holistic, naturopathic practitioner or nutritionist. Also if there is any suspicion of an allergic reaction to any foods, this should be investigated by a practitioner.

Are you getting enough sleep? Staying up late can become a habit, especially since the advent of television. Gradually bring forward the time you go to bed. Even if you don't sleep straight away, you will still be resting. If you are not sleeping well (maybe you have difficulty getting to sleep; or perhaps you can get to sleep, but then wake in the early hours and are unable to get back to sleep), try not to be anxious about it. Rest when you can. Normal sleep patterns will return as you get better. Sleeping tablets are best avoided, though there are some mild herbal ones which may help and are harmless.



If tension has become a problem, learn the techniques of conscious relaxation (there are books, cassette tapes, CD's and videos available, or there may be a local class, or you could ask advice from your doctor). Relaxation isn't just a matter of flopping into a soft chair. It is a learned way of relaxing each muscle in turn and thus ridding the body of all tension. Pay particular attention to your level of breathing; if it is quick and shallow, make a deliberate effort to slow and deepen it.



Take some outdoor exercise every day if possible. Walking is very beneficial, or you may prefer cycling, running or gardening. If there is a sport you used to enjoy, consider taking it up again.

Attend to your appearance, if you have been neglecting it. Knowing you look smart will help to make you feel better about yourself. It will also help significantly if you plan each day and try to establish regular routines.

Improvement will be gradual, but improvement there will be. You will have made a good start.

## 2 Your emotional state

The area of feelings is difficult for it is the part of you which is the hardest to control, and individuals vary widely. Depression dulls one's feelings for other people and events, and makes one pre-occupied with bad and miserable feelings about oneself.

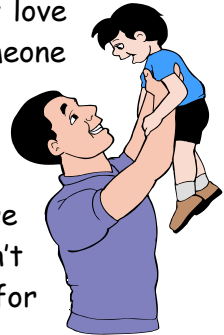
Low self-esteem and self-denigration seem to result in some Christians from their conviction of sin and feelings of guilt and worthlessness in the sight of God. But that is not what God wants. Don't confuse these feelings with humility. Humility is a healthy putting aside of pride and self-will and a giving of oneself in service to others. Self-hatred is over-preoccupation with oneself, which fails to recognise the power and grace of God to forgive and heal.

If this negative thinking is to be corrected, help may be needed from outside. Confide in a brother or sister you feel comfortable talking to, and who cares for you. Accept - take to yourself - believe in - your friend's love for you. Think of all the people who love and have loved you. You will not receive love

from everyone, of course - no one does. Accept that as a fact, not as a rejection. You cannot please everyone nor should you expect to.

Don't let another person's unfriendliness or criticism undermine your self-esteem. If you have deserved criticism (perhaps you have made a mistake or a wrong judgment), then apologise and make amends. If, however, you have done nothing to deserve the attack, then realise that the other person has made the error of judgment and don't take it to heart. The problem is theirs, not yours. Their misguided bad opinion of you cannot hurt you if you refuse to let it.

People who do love you do so not because you are perfect - you are not! (no one is); they love you not because of your looks or accomplishments, your brain or your status, but because you are YOU. You are a unique human being with good points, bad points, weaknesses, skills, peculiarities and faults. They love you, warts and all!. Well, do you cease to love someone because he is less than perfect? Do you cease to love a child when he does something wrong? Of course not. Then why think that you have forfeited the right to be loved because you are not all that you would like to be? Don't underestimate your friends. Accept their love for you, gladly.



And if imperfect human beings can love you, what of God? He loves you so much that He sent His Son to be your Saviour, not because you deserve it but because you need it. He is your loving Father, ready to welcome you, ready to forgive you, eager to give you all His blessings. Jesus loved you so much that he was prepared to surrender everything, even his life, to bring you

to His Father. In the depths of depression I know that you cannot perceive that God loves you, but your temporary inability to accept it doesn't make it any less true. You cannot see the sun on a cloudy day, but it is still shining.

Remember the Prodigal Son? He was stuck for a time in his guilt and misery. He went down until he could go no lower. Then he 'came to his senses' and threw himself on his father's mercy, wanting only to serve him; and it was then that he discovered how much his father loved him. His father had always loved him, but only now was he able to recognise and appreciate it; only now was he able to accept and reciprocate it.

I have spoken with many depressed people who speak of the sensation of sinking deeper and deeper into depression and of not being able to begin to come up until they have reached the very bottom. It has been compared to sinking down through deep water and not being able to start to come back to the surface until the feet touch bottom and push against it. So if you are sinking still, don't despair, the depression will 'bottom out'; and if you are at 'rock bottom', you can now begin to reach upwards. Look up to your heavenly Father and allow yourself to receive His love, not just as a broad Scriptural concept, but as a personal reality. His love has been there for you all the time - you just need to learn to recognise it, so that you can respond and begin to feel love again.



If we have been conditioned from childhood by parents, by the church, by teachers and by society not to give in to or even admit to our emotions, we will have learned to be over-inhibited. Adults, especially men, are expected to keep their emotions under control and avoid demonstrations of feeling. But, whoever

we are, crying with grief should be recognised as appropriate, as should admissions of doubt, anger or unhappiness. And at the other end of the spectrum we should feel free to laugh or sing for joy and to speak of love.

Try to share your feelings with someone close to you - your partner, family or close friend (though I appreciate that this can be difficult). Work on improving communications and relationships with them. It is recognised that people will vary in their desire and need for company. Some will be helped and stimulated by the society of others. Some will be better served by the restful presence of just one close companion. Even those who normally prefer solitude would be advised to allow themselves to accept the care of a sensitive friend while working through depression.

As you progress through your process of rehabilitation, be patient both with yourself and with those near you. They see you suffering but they find it hard to understand what you are going through and so they feel inadequate. They are having a bad time too. As your mood lifts, remember the tonic effect of smiles and shared laughter. Bring your sense of humour out for an airing and polish it up.

### 3 Mental attitudes

The mind, like the body, absorbs what is fed into it. Every day our sick society bombards us with evil, unsavoury and superficially attractive stimuli, and our minds take in what we hear and see and touch. Just as we can choose what we eat, so we can decide what we shall watch, listen to, read, visit and think about. You can make up your mind to be more consciously selective of the material you expose to your senses. You can, by



changing your habits if necessary, nourish your mind and purify your thoughts. Is it time for a de-clutter?

The Apostle Paul expressed it poetically when he wrote to the church at Philippi,

'Whatever is true, whatever is noble,  
whatever is right, whatever is pure, whatever is lovely,  
whatever is admirable - if anything is excellent  
and praiseworthy - think about such things'. (6)

The mind is easily led. We commonly blame other things and other people for our bad reactions. We say such things as, 'The children get on my nerves', 'The boss made me angry' or 'I got all worked up because the bus was late'. It is not true! We are responsible for our own actions and reactions in any situation.

Different people may react quite differently to the same situation. In, say, a traffic jam, one driver may switch off his engine and calmly read the newspaper, while the driver behind him revs his engine, fumes and snort and becomes thoroughly frustrated and angry. A third driver becomes agitated and worried by the delay. He imagines what dreadful consequences could result from his being late, and he becomes tense and anxious. A fourth driver reacts by blaming himself for not leaving earlier or 'failing' to take a different route and he soon feels annoyed with himself and very miserable. The circumstance for each is the same - the differences lie in their reactions, and to a large extent people can learn to control their reactions. I qualify it because there are obvious differences of



basic temperament, but the fact remains that we can rethink and modify our reactions.

Now examine your reactions. Do you become miserable, anxious, frustrated, angry, impatient or distraught when things go wrong or people about you behave badly towards you? You probably cannot change circumstances or other people, so try to change your reactions.

Think of a particular occasion recently when you became upset, miserable, angry or anxious. Ask yourself, 'Why did I feel like that?'; 'Could I have reacted differently?'; 'Would I have coped better with the situation if I had reacted more calmly and objectively?' Imagine how you might cope differently if the same circumstance were to arise again. Then the next time a similar situation occurs, try this: Relax your shoulders. Remind yourself that you can control how you behave. Detach yourself emotionally from the provocation. Consider it coolly and decide - it is in your power to do so - how you will react.

Please try this. It really does help. Understanding why you get upset or angry will help you to exercise control. You can, step by step, modify your attitudes and reactions and learn to restrain mood swings, anger, anxiety, frustration, or whatever is your particular tendency. Exercising this control will elevate your mood, reduce guilt, increase your self-confidence and convince you that you don't have to be a passive, helpless victim of circumstances or of your moods. I'm not saying this is easy, but you are not struggling alone. You are assured of understanding and help in the person of the Lord Jesus. He is at work in you to make you more like himself, and he was the master of every situation.

This process involves facing up to your weaknesses and acknowledging faults and pride. We are told clearly what to do about our faults: 'Confess your sins to each other', (7)

'If we confess our sins, He is faithful and just  
and will forgive us our sins  
and purify us from all unrighteousness'.(8)

Note that our responsibility is to confess; the removal of the sin and guilt is God's work, requiring from us acceptance and gratitude. So if we are conscious of a sin, we should not hold on to it until it weighs us down, but take it and lay it down repentantly before our Father.

Search your heart for feelings of resentment. If you bear any grudge or have failed to forgive someone, you need to deal with those feelings. First admit to them, then confess them to God and, if possible, to the person involved. Be reconciled, then LET GO of the bitterness and resentment. Put it behind you. God has.

If you have been the cause of offence, then seek forgiveness from and reconciliation with the one you have offended. If you harbour overactive human desires or pride, the instruction of Scripture is to take them to the Lord and seek His help in relinquishing them. 'The spirit in us tends toward envy ....

God opposes the proud, but gives grace to the humble.

Submit yourselves then to God ... Humble yourself  
before the Lord and He will lift you up'. (9)

This is not a once for all measure, but one that we need to do over and over again.

Accepting the forgiveness of God also requires us to forgive ourselves. There is a tendency in people who become depressed to generalise their failings. They regard one incident of failure (guilt) to mean that they must be total failures (false guilt). They think that because they have made one mistake they are totally useless. Consider a sportsman, say a tennis player; he does not win every point in a game, nor every game in a set, nor every set in a match. He may lose many points, several games and even a set or two - and still win the match. If after every lost point he concluded that he was a hopeless player he would lose confidence, his performance would suffer and he would probably lose. But a successful player has learned to accept that he will make errors and that he must not be discouraged but forget each mistake and put it out of his mind before tackling the next shot with full concentration, maximum effort and confidence. He is a realist, rather than an idealist.



So when you make a mistake, or succumb to temptation, or let someone down, or fail to achieve something you tried to do, don't let yourself be overwhelmed by self-blame and false guilt. Recognise the error or failure, admit to it, accept forgiveness when necessary, learn from the experience - then FORGET IT and MOVE ON. You fail to keep up to the high standard set by Jesus. Of course you do; you are an imperfect human being - that is why you need your Saviour. Trust him, learn from him, surrender to him each day and allow him to transform you little by little. You may need to forgive YOURSELF seventy times seven. For absolute perfection, you must wait for the coming of the King in his Kingdom.

Anxiety is not infrequently an accompaniment to depression, especially in reactive depression. Some people are more prone to anxiety than others and find it difficult to cope with. Not only do they react to particular circumstances by becoming worried (like the third driver in the traffic jam), but they also develop an almost constant state of anxiety about life in general.

May I tentatively suggest two ways of trying to improve this state of affairs - by changing behaviour and by changing outlook. Often a change of action will produce a change in attitude. Tackle the problem of physical tension by learning relaxation techniques and practising them regularly twice a day. These can be learned at relaxation classes or by oneself with the aid of a clearly illustrated book, video or CD on the subject. Mental and physical relaxation requires conscious effort and includes well-controlled breathing. Practising relaxation last thing at night can help induce restful sleep.

Secondly, when fearful thoughts arise, try to distract yourself by consciously paying attention to something else, and shutting off the anxious thought before it gets a strong grip on you. This is the same as turning away from a nasty, upsetting sight and looking at something pleasant instead. If you are worried about some future occasion (an exam, a hospital appointment, a difficult interview, etc.), write down in a diary or on a calendar, on the appropriate dates, the things you will need to do to make adequate preparation. Then resolve not to think about it again until those days arrive.

Jesus said, 'Do not worry about your life .... Do not worry, saying, "What shall we eat?" or "What shall we drink?" or "What shall we wear?" For the pagans run after all these things, and your heavenly Father knows that you need them.

But seek first His kingdom and His righteousness,  
and all these things will be given you as well.

Therefore do not worry about tomorrow,  
for tomorrow will worry about itself.

Each day has enough trouble of its own'. (10)

If you had been destitute and you were then given, by a reliable benefactor, a cash allowance each day sufficient to supply your needs, and if you were assured that the money would be sent every day, with more each time extra bills were due, you would gradually begin to feel secure and cease to worry about tomorrow, wouldn't you? Well, God has assured us of His daily care and love to meet all our needs. If we really believed Him, really trusted Him (and that is what He most wants from us), we would learn to feel not anxious about life but secure and thankful.

Stop to remind yourself of what God's love has provided for you - life, intelligence, a beautiful and colourful world, the senses to enjoy it, your health, your family, your faith, work, friends, His grace, His mercy and forgiveness, a sure hope ... (you will need to make your own detailed list - in fact, why don't you do that right now; think of at least one blessing, great or small, for each letter of the alphabet). If you put all these on the scales, wouldn't they heavily outweigh the problems and causes of complaint.

Read frequently the following verses:

'Commit your way to the Lord;

trust in Him and He will do this;

He will make your righteousness shine like the dawn ....

Be still before the Lord and wait patiently for Him ....  
Do not fret'. (11)

'The Lord is near. Do not be anxious about anything,  
but in everything, by prayer and petition,  
with thanksgiving, present your requests to God'. (12)

'Cast all your anxiety on Him because He cares for you'. (13)

Fear feeds on itself. If you allow your thoughts to dwell on fear, you will become more and more anxious. Instead take your fear to God, tell Him all about it, admit your difficulty in getting free from it and ask Him to take it away. Then try to lay it down and leave it with Him. It may cling and you will need to take it back to God many times. That's all right. God is long-suffering as well as merciful.

#### 4 Spiritual health

We have already ventured into the area of spiritual values. It is not possible to separate the emotions and the thoughts from our spiritual responses. Our heavenly Father knows how frail we are, how weak our flesh, how fickle our hearts and how loose our thoughts, and He has made provision for our guidance, correction and comfort. David, that great man of faith, overcame his weaknesses and his depression by meditating on God's Word. He said,

'I have hidden Your Word in my heart,  
that I might not sin against You .... Your Word  
is a lamp to my feet and a light for my path ....

The entrance of Your words gives light ....

Trouble and distress have come upon me,  
but Your commands are my delight ....

I have put my hope in Your Word'. (14)

The Apostle Paul too recognised the Scriptures as the source of strength. He wrote, 'Everything that was written in the past was written to teach us, so that through endurance and the encouragement of the Scriptures we might have hope'. (15)

Regular daily reading of the Scriptures is enjoined upon us because we need it, as we need our daily food. A loving Father has provided it and preserved it for us. The availability to us of the Scriptures in our own language is a priceless blessing. In many lands recently and in other ages, people have risked their lives and sacrificed all they had to acquire a Bible; all we have to do is reach out and take it from the shelf. Has its easy availability made it less precious to us? Can we not now say, 'I have treasured the words of His mouth more than my daily bread'? (16) Are you spiritually undernourished?

Equally accessible as the Scriptures, equally necessary and equally powerful is prayer. All the great en of faith are notable for their dependence upon God and for their frequent recourse to Him in prayer. Think of Abraham, Moses, Elijah, David, Daniel, the Apostles and, most of all, Jesus our Saviour. 'Look to the Lord and His strength; seek His face always'.(17) Jesus told his disciples they should 'pray, and not give up'. (18) 'Is any of you in trouble? He should pray'. (19)

However, prayer can be a problem for the depressed person. In fact, one of the greatest causes of despair in a depressed believer is frequently an inability to pray. If this is your experience, there are several things you can do. You can listen



to the prayers spoken at the meetings, you can read the prayers recorded in the Bible and try to identify with them, you can ask a very close brother or sister to pray for you and with you, and you can - you must - stop blaming yourself. Your inability to pray is not wilful sin.

As soon as you are able, you can help yourself to re-establish your prayer habit in the following way. Set aside a special time and place each day, which suits your schedule best, when you can be alone to present yourself before the Lord. It need be only for a few minutes to start with, but it must be every day and at a fixed time and place. Ideally, spend a few moments applying your mind. Two verses are particularly helpful: 'Open my eyes that I may see wonderful things in Your Law' (20) and 'May the words of my mouth and the meditation of my heart be pleasing in your sight, O Lord, my Rock and my Redeemer'. (21) Or you might find it conducive to worship to look at something of God's creating - trees or clouds or birds. Then read a few verses of Scripture - you may want to begin with the Psalms. Then talk to your Father and your Saviour.

On days when you are unable to pray, just read and meditate or maybe listen to a recording of hymns or readings. 'The Spirit helps us in our weakness. We do not know what we ought to pray, but the Spirit .... intercedes for us with groans that words cannot express'. (22) On the blackest days, when you cannot even read or lift up your head, go to your chosen place at the appointed time and just sit or prostrate yourself in your Father's presence and, truly, the very act of keeping your appointment with God, in spite of your abject misery and feelings of worthlessness, will be a consolation. 'Come near to God and He will come near to you'. (23) God sees. God knows.

God will not let go of you, as long as you don't turn away from Him in unbelief.

Gradually you will feel re-assured and be able again to read and pray. Then express your true feelings, praise Him for His faithfulness and constant love, confess your faults, voice all your grievances, worries and needs, and slowly you will find your questioning becoming acceptance, your resentment changing to praise, and your doubts becoming conviction that God is at work even in you.

Remember Job who, in his distress, cried out in anguish to God. He never doubted God's authority and righteousness but felt able to express his bitter complaints. God did not censure him but guided him to a better appreciation of his standing before Him. Then he restored Job and blessed him greatly.

Remember also Hannah who poured out her distress and frustration in tearful prayer. When she left the tabernacle, it is recorded that 'her face was no longer downcast'. (24) There is no indication that she knew at that point that she would have a child. The relief of her distress of mind came about because she had taken her burden to the Lord and left it there trustingly with Him.

Another provision that has been made for us is the act of remembrance. The Father knows that we are forgetful, that we need constantly to be reminded of the cost of our salvation, by focusing our minds on our crucified and risen Saviour; so He has commanded us to keep this simple, poignant, solemn, symbolic feast in communion with Jesus and with our brothers and sisters. We have been adopted into a family. We must not despise the provision of a loving Father.

Yes, there are times when you cannot converse with anyone, when the hymns distress you, when the exhortation doesn't penetrate, when you feel cut off from everyone; but do keep going to the meetings, enlisting the help of one close brother or sister. Staying away will make you feel even worse. Try to keep up your regular attendance - however sterile it seems - in the same way that you present yourself before God each day, even when you cannot pray. This can be one of the hardest things to do, because it requires an effort of will to meet other people. Along with every other part of you, your will-power is at a low ebb. That is why I suggest enlisting the help of one close person. It helps if someone calls to accompany you, or if you have to call to pick up someone else. It helps if you don't have to walk into the room alone nor sit alone. It helps to have an understanding person alongside if you are unable to make conversation or if you feel overwhelmed.

Hang on to the thought that this is a temporary phase. The depression will ease and you will become your normal self again. David shared your experience, and emerged because he hung on to his faith in God. 'Why are you downcast, O my soul? Why so disturbed within me? Put your hope in God, for I will yet praise Him'. (25)

Hope is the quality that can lift us out of despairing self-preoccupation and enable us to focus our minds on God. Hope is concerned not only with the future kingdom age but also with our present condition and our confidence in God's assurance of His presence with us now.

Doesn't the promise of His constant care affect your attitude to the depression itself? Do you regard depression as totally bad, hateful and destructive, something to be resisted and to be rid

of? Do you think that if only you were always well and cheerful you would be a better Christian? Before you say, 'Of course', consider what the Apostle Paul said, 'We know that in all things God works for the good of those who love Him, who have been called according to His purpose'. (26) It is hard to accept that your depression is 'working for your good'. It seems to be destroying you, diminishing you and hurting those around you. You feel that you would rather cope with anything other than this.

Don't you think that the man who broke his back feels just the same about his paralysis and his enforced dependence upon others for every personal need? Don't you think the blinded girl feels just the same about being plunged into a lifetime of not seeing anything? Don't you think the chronic arthritic and the person with terminal cancer feel just the same about the constant pain? Each individual's own particular suffering is an agony to him. Each one has to wrestle with his own sorrow and frustration, and come to accept - despite feeling hurt and not understanding why - the truth of that verse for himself. 'In all things' - the things we perceive as blessings and the things we perceive as trials - God works for the good of His beloved children.

If, then, the depression is within the merciful providence of God, then it cannot be right to resent and fight it. Whatever Paul's 'thorn in the flesh' was, it was hard for him to accept. He must have thought he could serve God better without it. He wrestled in prayer and pleaded for it to be removed, but he came to realise that it was necessary for him and he accepted God's answer and assurance. 'My grace is sufficient for you, for my power is made perfect in weakness.' (27)

Consider this. Your depression may be a constructive and necessary phase in your spiritual development.

Many of the greatest men in the Bible experienced periods of desolation, notably David, Elijah, Job and Jeremiah; and Jesus himself, 'although he was a son, he learned obedience from what he suffered'. (28) Meditate on the agony of mind which preceded 'not my will, but Yours be done'. (29) If Jesus accepted suffering (in many ways throughout his life on earth) as a necessary part of the price he paid for our salvation, should not we be prepared to accept suffering - yes, even the darkness of depression - if called upon to do so? Peter exhorts:

'Humble yourself therefore under God's mighty hand,  
in order that He may lift you up in due time'. (30)

There is a helpful analogy. The pain of childbirth is almost unbearable but it is productive. If the mother resists the contractions, the pain is intensified and the process of the birth is slowed down. The mother who understands what is happening and learns the technique of relaxing through it reduces the pain to a bearable level and allows the contractions to achieve the desired result. Depression can be regarded like that - painful but purposeful, more painful and prolonged when resisted, less painful and shorter when accepted. If you remove your fear of the depression and begin to hope in the refining process that will be achieved, you will cease to feel crushed by it and begin to view it in a more positive light. You will be able to praise God during the 'pain' (not for the pain, but for God's care of you) and, as you praise, the pain will lessen and you will be able to bear it.



There is a tendency to think that our salvation is our work and that we will achieve it by our determination. Certainly God requires us to live in obedience and faith in a loving response to His grace. But the work of salvation is the work of God, through His Son.

'It is God who works in you  
to will and act according to His good purpose'. (31)

'It is by grace you have been saved,  
through faith - and this not from yourself;  
it is the gift of God - not by works so that no one can boast.  
For we are God's workmanship, created in Christ Jesus.' (32)

We do not have to overcome all our weaknesses by sheer will-power - that is impossible - nor do we have to blame ourselves unduly and punish ourselves with morbid guilt every time we err. If we focus our attention more on the perfection of Jesus, and less on our own imperfection, then we will learn from him and God will purify our hearts and minds. We could say that it is only when we stop trying to do it all by ourselves and ask for God to rule our hearts that He can begin to work in us. God requires from us first total trust and then the surrender of our wills to His will and guidance.

'I pray  
that out of His glorious riches  
He may strengthen you with power

through His Spirit in your inner being,  
so that Christ may dwell in your hearts through faith.' (33)

## CONCLUSION

You will have noticed that one word which has occurred many times is *GRADUAL*. Because depression involves physical health, emotions, thought processes and spiritual values, your programme of self help is a long-term process. Depending on the causes and duration of the depression, the time span for improvement will vary from months to years. And it will not be a smooth upward progress. There will be set-backs. You will be discouraged. Do not despair. The episodes of depression will each pass and will become less often and less severe. Be patient with yourself. Rest in the Lord. When you are weak, His strength is demonstrated.

In the meanwhile, consider this: people who experience depression are often the more sensitive, conscientious and deep thinking people. Throughout history it has been the philosophers, artists, musicians and religious leaders who have felt the heaviness of the soul and who were also open to inspiration and spiritual insight.

Recall the great men of faith in Scripture who experienced depression. Some (Saul and Judas) turned away from God in their self-preoccupation and were destroyed. Most looked up to God for help, for forgiveness, for comfort and for hope, and they were sustained, forgiven, reassured and lifted up. They had their hope and trust justified and lived to praise and serve their God anew. Think of Joseph, David, Moses, Hannah, Elijah, Job, Jeremiah, Jonah, Peter and Mary.

Most of all meditate on the 'Man of sorrows', our Lord and our Saviour, Jesus the Christ, who endured such anguish and suffering for our sakes. Jesus overcame because of his total surrender to the will of his Father. He gave every part of himself. He demonstrated, as he preached, how to love God with all his heart, with all his mind, with all his soul and with all his strength. He brought all four aspects which we have examined - the body, emotions, thoughts and spiritual response - into harmony with the will of his Father, 'Therefore God exalted him to the highest place'. (34) He is our pattern.

Paul understood this so well and many times explained the necessity of experiencing things in the right order - sacrifice before victory, suffering before exaltation, humility before glory, death before resurrection.

'I want to know Christ and the power of his resurrection  
and the fellowship of sharing in his sufferings,  
becoming like to him in his death and so, somehow,  
to attain to the resurrection of the dead.' (35)

Finally we can view depression more sanguinely for another reason. Luther called it, 'the blessing of depression'. It seems strange to us that he should say so. Our perception of what is good and what is bad is influenced by the age and society in which we live. Ours is a prosperous and knowledgeable society in which people have high expectations of health and happiness, and seek to avoid anything unpleasant or painful or difficult. That is not in line with the Christian viewpoint. We are told to expect difficulties and suffering and 'the Lord's discipline'. (36) We are told not to seek gratification in the things of the world. So what our society perceives as 'good' may be bad for the Christian



and what our society perceives as 'bad' may be necessary and good for the Christian.

God is shaping us for His purpose. The shaping of a resistant material is not an easy or quick process. Avail yourself of God's provisions for His sons and daughters and you will emerge from your depression with a greater dependence upon Him, with a deeper appreciation of His love for you, with a new understanding of Jesus and of the purpose of suffering in the life of faith and with a finer sensitivity to the difficulties and needs of your fellows. The depression will have been turned to your good and you will become a blessing to others.

I waited patiently for the Lord  
He turned to me and heard my cry  
He lifted me out of the slimy pit  
Out of the mud and the mire;  
He set my feet on a rock  
And gave me a firm place to stand.  
He put a new song in my mouth  
A hymn of praise to our God.  
Many will see and fear  
And put their trust in the Lord

Psalm 40, 1-3

## INDEX TO SCRIPTURAL REFERENCES

All quotations are taken from the New International Version

1	Job 3.11	19	James 5.13
2	Job 3.20-26	20	Psalm 119.18
3	1 Kings 19.4	21	Psalm 19.14
4	Psalm 32.3-4	22	Romans 8.26
5	Luke 5.17	23	James 4.8
6	Philippians 4.8	24	1 Samuel 1.18
7	James 5.16	25	Psalm 42.5
8	1 John 1.9	26	Romans 8.28
9	James 4.5-7, 10	27	2 Corinthians 12.9
10	Matthew 6.25-34	28	Hebrews 5.8
11	Psalm 37, 5,6,7	29	Luke 22.42
12	Philippians 4.5-6	30	1 Peter 5.6
13	1 Peter 5.7	31	Philippians 2.13
14	Psalm	32	Ephesians 2.8-10
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15	Romans 15.4	34	Philippians 2.9
16	Job 23.12	35	Philippians 3.10-11
17	Psalm 117.4	36	Hebrews 12.5-11
18	Luke 18.1		