

Depression: Causes and Cures

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The Crisis
The Complexity
The Condition
The Causes
The Cures

PART 1 THE CRISIS

Mental illness is a term that covers a large number of complex conditions. So, before we proceed any further, I would like to state what aspects of mental illness I am going to focus on in this series of addresses. The area I am particularly concerned with is the most common mental illness – depression. As anxiety and panic attacks are also very commonly associated with depression (so much so that doctors are increasingly using the term “depression-anxiety” when referring to depression), we will look at these distressing conditions also.

But firstly, why should we study this subject, depression? Here are eight reasons.

1. Because the Bible speaks about it

There are numerous Bible verses which refer to depression and severe anxiety – its causes, its consequences, and its cures. The Bible does not address every cause, every consequence or provide every cure. But, as we shall see in later addresses, it does have an important role to play in the treatment of Christians who are suffering from depression and anxiety.

It must be admitted that the Bible never states that “Bible Character X had mental illness,” or “Bible Character Y was depressed.” However, it does frequently describe men and women who manifested many of the symptoms of depression and anxiety. In some cases, it is not clear whether these symptoms reflect long-term mental illness or simply a temporary dip in the person’s mental health, which everyone goes through from time to time. For example, symptoms of depression/anxiety can be seen in Moses (Num.11:14), Hannah (1 Sam.1:7,16), and Jeremiah (Jer.20:14-18; Lam.3:1-6). In these cases it is difficult to say whether the symptoms reflect a depression or a dip. Martin Lloyd-Jones argues from biblical evidence that Timothy suffered from near-paralyzing anxiety. A more persuasive case for depressive illness can be made for Elijah (1 Kings 17:7-24), Job (Job.6:2-3, 14, 7:11), and various Psalmists (Ps.42:1-3, 9a; Ps.88).

“The Psalms treat depression more realistically than many of today’s popular books on Christianity and psychology. David and other psalmists often found themselves deeply depressed for various reasons. They did not, however, apologize for what they were feeling, nor did they confess it as sin. It was a legitimate part of their relationship with God. They interacted with Him through the context of their depression.”

Another significant verse is Proverbs 18:14, “The spirit of a man will sustain his infirmity; but a wounded spirit who can bear?” The human spirit can help people through all kinds of sickness. However, when the healing mechanism is what needs healing, then even more serious problems arise.

2. Because it is so common

1 in 5 people experience depression, and 1 in 10 experience a panic attack, at one stage in their lives. An estimated 121 million people suffer from depression. 5.8 % of men and 9.5% of women will experience a

depressive episode in any given year. Suicide, often the end result of depression, is the leading cause of violent deaths worldwide, accounting for 49.1% of all violent deaths compared with 18.6% in war and 31.3% by homicide.

It is also common in Christians. Indeed, these days there would appear to be an epidemic of depression, anxiety, and panic attacks among Christians – both young and old. This is at least partly because of the depressing state of the Church and of the Nation. Every few days there is discouraging news about Church splits or problems, and Christians backsliding or falling into temptation. Then there is the secular and anti-Christian direction of the Government as it continues to dismantle the Judeo-Christian laws and standards that our civilization was built upon, and as it attacks and undermines family life. On top of this, there is the relentless audio-visual misrepresentation and persecution of Christians through the print and broadcast media. To top it all there seems to be an unceasing diet of bad news on the international stage, with wars, terrorism, and “natural” disasters ever before us.

In these conditions, it is therefore little wonder that Christians react adversely, and get depressed and anxious about themselves, their families, their Church, and the world they live in.

3. Because it impacts our spiritual life

We might say that there are three main elements in our make-up that affect our overall well-being: our body, our soul, and our mind (our thoughts). These are not three watertight and disconnected entities. There is considerable overlap and connectivity. When our body breaks down, it affects our spiritual life and our thinking processes. When our spiritual life is in poor condition, our thoughts are affected, and often our bodily health and functions also. It is therefore no surprise that when our mental health is poor, when our thinking processes go awry, that there are detrimental physical and spiritual consequences.

The depressed believer cannot concentrate to read or pray. He doesn't want to meet people and so may avoid church and fellowships. He often feels God has abandoned him.

Moreover, it is often the case that faith, instead of being a help, can actually cause extra problems in dealing with depression. There is, for instance, the false guilt associated with the false conclusion, “Real Christians don't get depressed.” There is also the usually mistaken tendency to locate the cause of mental illness in our spiritual life, our relationship with God, which also increases false guilt and feelings of worthlessness.

4. Because it may be prevented or mitigated

Many people have a genetic pre-disposition to depression, perhaps traceable to their parents' genes, which increases the likelihood of suffering it themselves. However, even in these cases, knowledge of some of the other factors which may be involved in causing depression can sometimes help prevent it, or at least mitigate and shorten it. Others, with no genetic pre-disposition to depression can also fall into it, often as a reaction to traumatic life-events. And, again, having some knowledge of mental health strategies and techniques can be especially useful in preventing or mitigating and shortening the illness.

One great benefit of having some knowledge about depression is that it will prevent the dangerous and damaging misunderstanding which often leads people, especially Christians, to view medication as a rejection of God and His grace, rather than a provision of God and His grace.

5. Because it will open doors of usefulness

Increased understanding of depression will make us more sympathetic and useful to people suffering from it. This is taught by the converse truth in Proverbs 25:20, “As he that taketh away a garment in cold weather, *and as vinegar upon nitre*, so *is* he that singeth songs to an heavy heart.” If we saw someone fighting for life in the midst of a freezing blizzard, the last thing we would do is take his coat away. Such an action would be cruel and heartless, and could easily lead to death. But, says the Bible, similar dangerous heartlessness is displayed by the person who tries to help their depressed friend with superficial humor and insensitive exhortations to “Cheer up!”

6. Because it is so misunderstood

“Being depressed is bad enough in itself, but being a depressed Christian is worse. And being a depressed Christian in a church full of people who do not understand depression is like a little taste of hell.”

As we all know there is a terrible stigma attached to mental illness. This is the result of widespread misunderstanding about its causes, its symptoms, and the “cures” available. Some of the misunderstanding is understandable. Unlike cancer or heart disease or arthritis, there is no scan or test which can visibly demonstrate the existence of depression/anxiety. It is a largely “invisible” disease. We want to be able to point to something and say, “There’s the problem!” When we can’t, we often wrongly conclude, “There is no problem!” Or, if we are Christians, we may, usually wrongly, conclude, “My spiritual life is the problem!”

This misunderstanding is addressed in the excellent book, *I’m not supposed to feel like this* (a book written by a Christian pastor, a Christian psychiatrist, and a Christian lecturer in psychiatry). Near the beginning of the book, they summarize what they believe and what they do not believe about depression:

“What we believe: We believe that all Christians can experience worry, fear, upset and depression. We also believe that being a Christian does not prevent us or our loved ones from experiencing upsetting and challenging problems such as illness, unemployment, or relationship and other practical difficulties.
What we do not believe; Although at times we all choose to act in ways that are wrong and this can lead to bad consequences for us and for others, we do not see anxiety and depression as always being the result of sin; neither do we believe that mental health problems are the result of a lack of faith.”

It is absolutely vital for Christians to understand and accept that while mental illness usually has serious consequences for our spiritual life, mental illness is rarely caused by problems in our spiritual life.

7. Because it is a talent to be invested for God

Like all affliction in the lives of Christians, mental illness should be viewed as a “talent” (Matt.25:14ff) which can be invested in such a way that it brings benefit to us and others, as well as glory to God.

Dr James Dobson, the Christian psychologist, observed that “nothing is wasted in God’s economy.” That “nothing” includes mental illness.

Mind over Mood, while not written from a Christian perspective, illustrates the possible “benefits” of depression thus:

“An oyster creates a pearl out of a grain of sand. The grain of sand is an irritant to the oyster. In response to the discomfort, the oyster creates a smooth, protective coating that encases the sand and provides relief. The result is a beautiful pearl. For an oyster, an irritant becomes the seed for something new. Similarly, *Mind Over Mood* will help you develop something valuable from your current discomfort. The skills taught in this book will help you feel better and will continue to have value in your life long after your original problems are gone.”

It is usually broken people that God uses most. In *Passion and Purity*, Elisabeth Elliot quoted Ruth Stull of Peru:

“If my life is broken when given to Jesus it is because pieces will feed a multitude, while a loaf will satisfy only a little lad.”

8. Because we can all improve our mental health

Most Christians try to take preventative (and curative) measures to enjoy good physical health and spiritual life. However, there is less consciousness of the similar effort required to maintain or recover mental health. There is much less awareness of the biblical strategies and sound mental techniques that can be used to achieve good mental health, which obviously has beneficial consequences for our bodies and our souls.

I have never been diagnosed with any kind of mental illness. However, like most people, and especially like most ministers, I have had low points in my life. My thinking processes have gone wrong, causing times of mild depression, and anxiety.

What I now know about improving and maintaining mental health, and what I hope to communicate in later addresses, would have greatly helped me in these low periods. What I have learned is helping me on a daily basis to overcome disappointment and handle stressful situations without my mental health suffering as much as before.

As I look around me, and especially as I look around the Church, I can see many people who have not been diagnosed with depression, and who are not disabled with it, but who are experiencing long-term, low-level depression/anxiety which is having its own knock-on effect on their bodily health and the spiritual lives.

I believe that it would not be too difficult for them to learn some sound strategies and techniques which will improve mental health, and consequently their bodily and spiritual health.

We will here propose two principles which should condition all our thoughts and the expression of them in studying depression.

References

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PART 2 - THE COMPLEXITY

I. LET US AVOID DOGMATISM AND SEEK HUMILITY

Firstly, let there be an absence of dogmatism. Where the Word of God is dogmatic the preacher must be dogmatic. He must clearly and boldly declare God's Word with all authority. He must have no hesitation or equivocation. He must not make mere suggestions or proposals. He must pronounce, "Thus saith the Lord..."

Unfortunately, Christian preachers and writers have often taken a dogmatic attitude into areas where the Word of God is not dogmatic. One such area is that of mental illness. In researching these addresses, I

have been frequently shocked by the almost *ex cathedra* infallibility assumed by Christian writers and speakers when writing or speaking about mental illness. This dangerous dogmatism often reflects not the principles of the Word of God but their own prejudices and experiences.

It must be admitted that confident, sweeping dogmatic certainty appeals to the writer or preacher, and also to the hearer who craves simplicity in a confusing world. However, it is highly damaging in this complex area of mental illness which requires careful, balanced, and sensitive thinking and speaking.

When we look back on the treatments which used to be offered for bodily diseases we shudder with horror at the frequently crude and unsuitable advice and potions which were confidently given to patients. With the advances in medical research such advice and medicines now look ridiculous. It is very likely that in the years to come, with increased research into mental illness and also increased understanding of the Bible's teaching, that much of the confident certainty which presently masquerades as biblical or medical expertise will then also look ridiculous, cruel, and even horrifying.

In our study, and in our contact with those suffering from mental illness, let us avoid unfounded and unwarranted dogmatism; and let us study, listen and speak with humility and an awareness of our own ignorance and insufficiency when faced with the complex and often mysterious causes and consequences of mental illness.

II. LET US AVOID EXTREMES AND SEEK BALANCE

There are three simplistic extremes which we should avoid when considering the causes of depression. Firstly, that it is all physical. Secondly, that it is all spiritual. Thirdly, that it is all mental. Let us examine these three propositions in turn.

1. Depression is all "physical"

For many years, the foundational presupposition behind the largely drug-driven solutions offered by many doctors and psychiatrists has been that depression has purely physical roots – one of which is that of chemical imbalances in the brain. And, if the presupposition of a physical cause is correct (chemical deficiency), then the prescription of antidepressants (chemical correction) is a logical conclusion. This is often called the "medical model". It can also be called the "drug-treatment model"

There is, undoubtedly, much scientific evidence to support the "drug-treatment model". Studies have shown that the brains of depressed patients have a different chemistry compared to people with good mental health. To put it simply, the brain needs chemicals to move our thoughts through the brain, and when these are depleted, as they often are in cases of depression, then the whole process slows down, or even stops in certain areas.

Obviously, the "drug-treatment model" or the "all-physical model" for depression is supported by those who wish to deny the existence of a non-physical, or spiritual element to human beings. However, there are Christians who also take the "drug-treatment model" approach. An example of this is found in the book *Broken Minds* by Steve and Robyn Bloem. Steve is a Christian pastor who has struggled with serious depression throughout his ministry. His book, co-written with his wife, gives a deeply moving account of his life threatening battle with mental illness. There is no book I know of which gives such an honest and hard-hitting insight into the pain and distress which the mentally ill and their families have to endure. If you wish to increase your sympathy and compassion for sufferers and their loved ones, then this heart-rending and tear-jerking book is for you.

However, the book's greater usefulness is limited by the adoption of the purely "drug treatment model" approach to causes and cures. As we have said, there is unquestionably a physical element to most depressions, often requiring medication. And, in Steve Bloem's case, there would appear to have been a very large and serious physical problem, which required necessary and life-saving medication. However, it is far too big a step to move from this to proposing the "drug-treatment model" as the only model in every case, and medication as the only solution to every case. In this complex area, it is a big mistake to use one's own experience as the "norm" for everyone else.

In some ways, the Bloem's "all-physical" position is understandable. For far too long, Christian writers and speakers in this area have been over-influenced by the Jay Adams extreme position of "all-spiritual" in both causes and cures (see below). However, we must not over-react to one unhelpful extreme ("it's all spiritual") by going to another ("it's all physical").

2. Depression is all "spiritual"

This extreme position takes two forms. We shall look at the first briefly, as it is not so common in our circles, and then we shall look in more detail at the second. Thirdly, we shall consider the rare situations when depression does have a sole spiritual cause.

a. Mental illness is caused by demonic possession and therefore exorcism is required

This idea is associated with some Pentecostal and Charismatic Churches which place a large emphasis on "spiritual warfare". The "spiritual warfare" movement takes the view that mental illness (just like alcoholism and immorality) is usually due to the demonization of the believer – either demonic oppression or possession. The "treatment" therefore is to effect "deliverance" from or expulsion of these demons.

As we have already highlighted, there is substantial scientific evidence that connects mental illness with physical causes, a fact confirmed by the success of medications in relieving many of the symptoms.

Hopefully, such dangerous views and practices will eventually be swept away by the increased knowledge of medical research, just like advances in research and increased education of the public eventually swept away the once-common view that epilepsy was caused by demons.

b. Mental illness is caused by sin and therefore rebuke, repentance and confession are required

This idea is widespread in the Evangelical church, largely as a result of the writings of the American Christian counselor, Jay Adams, and those who follow him.

We shall, firstly, summarize Adams' approach. Secondly, we shall highlight the strengths of Adam's reasoning. And, thirdly, we shall look at the weaknesses.

(i) Summary

Like the Bloems, Jay Adams' approach is founded on his own personal experience of mental illness, in his case as he encountered it at two treatment centers in Illinois. He summarized his experience-based conclusion as follows:

"Apart from those who had organic problems like brain damage, the people I met in the two institutions in Illinois were there because of *their own failure to meet life's problems*. To put it simply, they were there because of their unforgiven and unaltered sinful behavior"

On the basis of this he argues in another place:

"The hope for the depressed persons, as elsewhere, lies in this: the depression is the result of the counselee's sin."

If this diagnosis is correct, then we would expect the logical prescription to be "rebuke and repentance", or counseling with a view to conviction and conversion, and that is exactly what we find in Adams' writings. He describes his counseling method as "nouthetic counseling". The word "nouthetic" is from the Greek noun *nouthesia* and verb *noutheteo*, to admonish, correct or instruct (Rom.15:14).

Following on logically from Adams' belief that bad feelings are the result of bad actions, is the usual nouthetic remedy of, "If you do right, you feel right." If you get depressed because of sinful behavior, then, obviously, you get better by righteous behavior.

(ii) Strengths

Adams was reacting against the humanistic view which explained sinful addictions like alcoholism as "sickness", or which attributed immoral behavior to one's genes, and so tried to remove people's guilt feelings by encouraging them to deny personal responsibility for their actions and simply accept themselves as they were. Adams' emphasis on the need to accept personal responsibility in these situations was very much needed.

Also, Adams' approach is correct and pastorally useful in situations where the problem is everyday mood swings and simply "feeling down". There are times in all of our lives when, often in response to difficult personal situations, we allow ourselves to wallow in hopeless self-pity and slip into blaming everybody else for our problems. At such times, nouthetic counseling is exactly what we need. We need to be confronted with the sinfulness of our reactions and to be encouraged to get on with our daily duties and responsibilities.

In addition, though he has gone too far in saying "mental illness is all spiritual", Adams has shown the need for the spiritual dimension of mental illness to be addressed, and therefore has secured the role of Christian pastors and counselors in treatments.

Finally, though we disagree with Adams' argument that depression is almost always caused by sin, we must accept that sometimes, as a result of depression, people can adopt unhelpful attitudes and sinful behavior patterns which should be sympathetically addressed and corrected.

(iii) Weaknesses

While Adams is to be commended for giving an important place to personal responsibility, he greatly errs in placing all responsibility on the patient.

The fundamental weakness of Adams' approach is that he fails to appreciate the significant difference in kind between bad moods or short-term depressions of spirit, which are sometimes sinful and to be repented of, and the far deeper kinds of "depression" which have far more complex causes than the sinful choices of individuals. When comparing "feeling down" with "depression", Adams says:

"This movement from down (not depression) to down and out (depression) occurs whenever one handles down feelings sinfully (thus incurring guilt and more guilt feelings), by following them rather than his responsibilities before God."

In *Broken Minds* the Bloems comment, "This is not Christianity, but the good old American pioneer, self-sufficient spirit."

To always put all the blame for depression on the individual is wrong, damaging and dangerous, as it can only increase the feelings of guilt and worthlessness. Such mistaken views have been around for a long time. Almost 150 years ago the depressed Charles Spurgeon said:

"It is all very well for those who are in robust health and full of spirits to blame those whose lives are sicklied or covered with the pale cast of melancholy, but the [malady] is as real as a gaping wound, and all the more hard to bear because it lies so much in the region of the soul that to the inexperienced it appears to be a mere matter of fancy and diseased imagination. Reader, never ridicule the nervous and hypochondrichal, their pain is real; though much of the [malady] lies in the imagination it is not imaginary."

Let us, for a moment, allow that Adams' diagnosis is correct in some situations. Here is a person who has major depression as a result of his sinful handling of down feelings or his sinful reactions to difficult life

events. A knock-on effect is that his brain chemicals are now imbalanced and his thought circuits are malfunctioning. He is at the bottom of the black hole of depression. He cannot do and he can hardly think. The last thing he needs is a preacher telling him to repent and shouting down the hole, "Do right and you will feel right." He needs someone to shine a light and throw down a rope. Medicine can play this role. It can restore the chemicals required to help a person think. And then, if required, repentance can take place.

As we noted above, the nouthetic counseling movement grew out of a frustration at the way in which secular doctors and psychiatrists squeezed Christian pastors and counselors out of any role in the treatment of mental illness. However, in the valiant and commendable attempt to secure a much-needed place for Christian pastors and counselors in the treatment of mental illness, the nouthetic counseling movement has often gone to the opposite extreme in attempting to exclude doctors and psychiatrists from the treatment process. In both cases the sufferer is the one who loses out.

A much more balanced view is reflected in the book *I'm not supposed to feel like this*:

"Being a Christian does not inoculate us from the possibility of experiencing anxiety or depression; many Christians have experienced quite severe depressive illnesses. This is true in the same way that being a Christian does not prevent you from becoming ill or falling victim to crime or assault."

Finally the Adams remedy of do right and you will feel right fails to address the faulty thought processes which have contributed to or have even caused the depression. Such superficial behavioristic solutions will often fail in the long-term.

c. Mental illness can sometimes be caused by sin

When a Christian becomes depressed, the first conclusion he usually jumps to is that the cause is spiritual, that his relationship with God, or poverty of it, is all to blame. While almost every depressed Christian will feel that their relationship with God is all wrong and all to blame, this overly-self-critical feeling is usually one of the fruits of depression and, therefore, is usually wrong. It is important for the Christian in such situations to doubt, question and even challenge the accuracy of their feelings as they rarely reflect the facts.

Having said that, however, it is important to acknowledge the occasional possibility of a primarily spiritual cause. The Psalms of lament describe the depressed feelings of the Psalmists which were usually no fault of their own. However, we do have Psalm 32 and 51 which clearly link the traumatic physical and mental symptoms of depression with David's sins of murder and adultery.

In later addresses we will examine how to decide if depression has spiritual causes or simply spiritual consequences. However, I agree with the general stance taken by the authors of *I'm not supposed to feel like this*, that we should, in general, reassure Christians suffering with depression that most often their damaged spiritual relationships and feelings are not the cause of their depression but the consequence of it.

3. Depression is all mental ("in the mind")

"It's all in the mind" can mean two very different things. Some people who say it, may be correctly identifying the seat of the depression – the chemical imbalances in the brain. However, most people who say it are incorrectly alleging that the depression is a fiction, a delusion, something made up. Usually implicit, and sometimes explicit, in this view is the idea that the depressed person is someone with a weak and fragile mind.

Charles Spurgeon, who suffered from frequent deep depression and anxiety, and who could hardly be accused of mental weakness, addressed this fallacy in the quote we looked at previously. He said:

“Reader, never ridicule the nervous and hypochondrichal, their pain is real; though much of the [malady] lies in the imagination it is not imaginary.”

Mental illnesses, such as depression, afflict the strong and the weak, the clever and the simple, those of a happy temperament and those of a melancholy temperament. Never was the caution so much needed, “Let him that thinketh he standeth, take heed lest he fall” (1 Cor.10:12)

CONCLUSION

Let us try to recognize the exceeding complexity of mental illness and resist the temptation to propose and accept simple analysis and solutions. Just as no two hearts are identically diseased, and just as no two cancers are the same, no two mental illnesses are the same in cause, symptoms, depth, duration and cure. Therefore, we must avoid making our own experience the norm for others.

The body, the soul, and the mind are extremely complicated entities and the inter-relation of the physical, the spiritual, and the mental is even more complicated. Unraveling the sequence of what went wrong in a depressed person’s brain, soul, or thoughts is usually a humanly impossible task. Analysis of the mental, physical, and spiritual contributions to the situation is equally difficult.

Consequently, the prescription of solutions is often a matter that takes much time and even trial and error. There are no quick fixes. For Christians there will need to be a balance between medicine for the brain, counsel for the mind, and spiritual encouragement for the soul. Recovery will usually take patient perseverance over a period of many months, even years.

Great care is therefore required in coming to conclusions about our condition or that of others. We finish by underlining our two main principles. Avoid dogmatism and seek humility. Avoid extremes and seek balance.

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PART 3 - THE CONDITION

I. LIFE SITUATION

Life in this world is full of ups and downs. Our providence can change so rapidly from smooth and happy to rough and upsetting. It is important to recognize how providential changes (e.g.

bereavement, loss of job, family difficulties, relationship problems) can seriously damage our mental health. A person may feel very down and yet never link such experiences with such life events. Therefore,

one of the first steps to treating depression is to take time to examine our lives and, with God's help, to trace back our present depressed thoughts and feelings to events in our lives.

This can be a painful process of self-discovery. Although we are frail and weak creatures, we like to think that we can cope with everything that life throws at us. We are, therefore, often reluctant to link our depressed thoughts or anxiety to life situations, because such a link exposes our weakness and frailty. As a result, there is often a desperate search for a purely physical cause (e.g. a virus) behind our lack of well-being because that will enable us to keep viewing ourselves as "mentally strong" or as a "coper".

This is not to deny that there are usually, to one degree or another, physical factors involved in causing depression (see previous lecture). Indeed, in some people, there is undoubtedly an inherited genetic tendency to depression. However, there is almost always a providential trigger involved to some degree. Just because we coped with great stresses at some time in our lives, does not guarantee that we will cope with lesser stresses at other points in our lives. We age, our hormones and brain chemistry change, responsibility increases as marriage and children come along. Sometimes the adverse reaction to life events will be delayed, even for some years.

Consequently, we often need an objective view of our lives; an independent person such as a doctor, or counselor, or minister, who can help us look at our lives more objectively. It is often the case that when we are helped to review our lives, we begin to see the real and significant effects our problems or difficulties have had on us, and the extent to which they may have contributed to the trigger for our depression or anxiety.

II. THOUGHTS

Perhaps, the most obvious symptoms of depression are the unhelpful patterns of thinking which tend to distort a depressed person's view of reality in a false and negative way, and so add to the depression or anxiety.

While we often cannot change the providences we have passed through, or are passing through, we can change the way we think about them so as to present to ourselves a more accurate and positive view of our lives, and so lift our spirits.

We will focus on ten false thought patterns which reflect and also contribute to the symptoms of depression. We will summarize each thought habit, and look at three examples of each, one from ordinary life, another from our spiritual life, and another from the Bible. The Biblical examples are not necessarily examples of depressed person but they are examples of false thinking often present in depression.

It is important to see how our depressed thought patterns affect our ordinary life; and even more important to see how that is then carried into our spiritual life. It is almost always that order in which our thoughts are transferred – false thinking in ordinary life is eventually transferred into our spiritual life.

1. False extremes

This is a tendency to evaluate our personal qualities in extreme, black or white categories – shades of grey do not exist. This is sometimes called "all-or-nothing thinking".

Life example: You make one mistake in cooking a meal, and conclude you are a total disaster.

Spiritual example: You have a sinful thought in prayer, and conclude that you are an apostate.

Biblical example: Despite most of his life being characterized by God's blessing and prosperity, when Job passed through a time of suffering he decided he must be an enemy of God (Job 13:24; 33:10)

2. False generalization

This happens when, after experiencing one unpleasant event, we conclude that the same thing will happen to us again and again.

Life example: If a young man's feelings for a young woman are rebuffed, he concludes that this will always happen to him and that he will never marry any woman

Spiritual example: When you try to witness to someone you are mocked, and you conclude that this will always happen to you and that you will never win a soul for Christ.

Biblical example: At a low point in his own life Jacob deduced that because Joseph was dead, and Simeon was captive in Egypt, that Benjamin would also be taken from him. (Gen.42:36). "All these things are against me," he generalized.

3. False filter

When depressed we tend to pick out the negative detail in any situation and dwell on it exclusively. We filter out anything positive and so decide everything is negative.

Life example: You get 90% in an exam but all you can think about is the 10% you got wrong.

Spiritual example: You heard something in a sermon you did not like or agree with, and went home thinking and talking only about that part of the service.

Biblical example: Despite having just seen God's mighty and miraculous intervention on Mt Carmel, Elijah filtered out all the positives and focused only on the continued opposition of Ahab and Jezebel (1 Kings 19:10).

4. False transformation

Another aspect of depression is that we transform neutral or positive experiences into negative ones. Positive experiences are not ignored but are disqualified or turned into their opposite.

Life example: If someone compliments you, you conclude that they are just being hypocritical, or that they are trying to get something from you.

Spiritual example: When you receive a blessing from a verse or a sermon, you decide that it is just the devil trying to deceive you.

Biblical example: Jonah saw many Ninevites repent in response to his preaching. But, instead of rejoicing in this positive experience his mood slumped so low that he angrily asked God to take away his life (Jonah 4:3-4).

5. False mind-reading

We may often jump to negative conclusions which are not justified by the facts of the situations.

Life example: A friend may pass you without stopping to talk because, unknown to you, he is late for a meeting. But you conclude that he no longer likes you.

Spiritual example: Someone who used to talk to you at church now passes you with hardly a word, and so you decide that you have fallen out of her favor. But, unknown to you, the person's marriage is in deep trouble and they are too embarrassed to risk talking to anyone.

Biblical example: The Psalmist one day concluded that all men were liars, a judgment which on reflection he admitted to be over-hasty (Ps.116:11)

6. False fortune-telling

This occurs when we feel so strongly that things will turn out badly, our feelings-based prediction becomes like an already-established fact.

Life example: You feel sure that you will always be depressed and that you will never be better again. This, despite the evidence that almost everybody eventually recovers.

Spiritual example: You are convinced that you will never be able to pray in public. Again, this despite the evidence that though difficult at first, with practice almost everybody manages it.

Biblical Example: Anticipating the opposition that Jesus would face in Bethany, Thomas falsely predicted not only his own death there but also that of the Lord and the other disciples (John 11:16).

7. False lens

This is when we view our fears, errors, mistakes through a magnifying glass, and so deduce catastrophic consequences. Everything then is out of proportion.

Life example: When you make a mistake at work, you conclude, "I'm going to be sacked!"

Spiritual example: You focus on your sins from the distant past in a way that leads to continued feelings of guilt, self-condemnation, and fear of punishment.

Biblical example: When Peter sinfully denied the Lord, he not only wept bitterly but decided that as his mistake was so spiritually catastrophic, there was no alternative but to forget about preaching Christ and go back to catching fish (Jn.21:3).

8. False feelings-based reasoning

In depression we tend to take our emotions as evidence for the truth. We let our feelings determine the facts.

Life example: You feel bad, therefore conclude that you are bad.

Spiritual example: You feel unforgiven, therefore conclude you are unforgiven. You feel cut off from God and so conclude that you are cut off from God.

Biblical example: At one of his low points, David felt and so hastily concluded that he was cut off from God. "I said in my haste, I am cut off from before thine eyes" (Ps.31:22).

9. False "shoulds"

Our lives may be dominated by "shoulds..." or "oughts", applied to ourselves or others. This heaps pressure on us and others to reach certain unattainable standards and causes frustration and resentment when we or others fail.

Life example: The busy mother who tries to keep as tidy and orderly a house as when there were no children is putting herself under undue pressure to reach unattainable standards.

Spiritual example: The conscientious Christian who feels that despite being responsible for meals and raising children, that she ought to be at every prayer meeting and service of worship, and also reading good books and feeling close to God.

Biblical example: Martha felt deep frustration that Mary was not fulfilling what she felt were her obligations and complained bitterly about it (Luke 10:40-42).

10. False responsibility

This is when we assume responsibility for a negative outcome, even when there is no basis for it.

Life example: When your child does not get “A” grades you conclude that you are an awful mother. The reason may be instead that your child has a poor teacher or that his gifts are not of an academic nature.

Spiritual example: When your child turns against the Lord and turns his back on the church you assume that, despite doing everything you humanly could to bring him up for the Lord, it is all your fault.

Biblical example: Moses felt responsible for the negative reactions of Israel to God’s providence and was so cast down about this that he prayed for death (Num.11:14-15).

IMPORTANT

1. False thinking patterns are compatible with being a Christian.
2. False thinking patterns will have a detrimental effect on our feelings, our bodies, our behavior, and our souls; usually in that order.

“For Christians, depression hardly ever has a spiritual cause...In Christians, spiritual effects follow from the depression, and seldom the other way around.”

3. One of the first steps in getting better is recognizing these false thinking patterns which do not reflect reality.
4. While we can do little if anything to change our providence (our life situation), we can change the false way we may think about our providence.

III. FEELINGS

Obviously, these unhelpful false thought patterns are going to give you unhelpful emotions and feelings. If you are always thinking about problems and negatives, or imagine the future is hopeless, or think everyone hates you, etc., then you are going to feel down very quickly. Your **feelings** about ordinary life and your spiritual life are going to reflect what you **think** in each arena (Prov.23:7).

Here, we shall briefly look at some of the emotional symptoms of depression. And, as with the area of our thoughts, let us honestly examine the area of our feelings in order to consider whether our emotions are related to a depressive tendency or illness. Also, as with the area of our thoughts, in this area of feelings we shall also highlight Biblical examples of true believers also experiencing such emotions, in order to show that such feelings are compatible with being a true believer.

1. Do you feel overwhelming sadness?

Everyone feels sad and down from time to time, but depression-related sadness is overwhelming and long-term. It often results in tearfulness and prolonged bouts of unstoppable sobbing.

Biblical Examples: Job (Job 3:20; 6:2-3; 16:6, 16), David (Ps.42:3,7).

2. Do you feel angry with God or with others?

A common characteristic of depression, especially in men, is a deep-seated and often irrational irritability and anger.

Biblical Example: Jonah (Jonah 4:4,9), Moses (Num.20:10-11).

3. Do you feel your life is worthless?

It may be that despite your life being highly valued by others, and despite you being useful to others and to the Lord, that because of your distorted view of yourself you feel your life is worthless. Indeed you may feel your life is just a burden to and blight upon others.

Biblical Example: Job (Job 3:3ff), Jeremiah (Jer.20:14-18)

4. Do you feel extreme anxiety or panic?

“In anxiety, the person often *overestimates* the threat or danger they are facing, and at the same time usually *underestimates* their own capacity to cope with the problem.”

Biblical Example: David (1 Samuel 21:12), disciples (Matt.8:25)

5. Do you feel God hates you and is far from you?

Although to any outside observer your past and your present may be replete with examples of God's good favor towards you, you feel that God has either become your enemy or else has given up on you. You feel as if you are in spiritual darkness

Biblical Examples Job (6:4; 13:24; 16:11; 19:11; 30:19-23, 26), Jeremiah (Lam.3:1-3).

6. Do you feel suicidal or do you have a longing to die?

Biblical Examples: Job (Job.3:20-22; 6:9; 7:15-16), Moses (Num.11:14), Elijah (1 Kings 19:4)

These deeply depressed feelings are movingly articulated for us by the depressed Charles Spurgeon, when commenting on the experience of Heman in Psalm 88.

“He felt as if he must die. Indeed he felt himself half dead already. All his life was going, his spiritual life declined, his mental life decayed, his bodily life flickered; he was nearer dead than alive. Some of us can enter into this experience for many a time have we traversed this valley of death shade, and dwelt in it by the month together. Really to die and to be with Christ will be a gala day's enjoyment compared with our misery when a worse than physical death has cast its dreadful shadow over us. Death would be welcome as a relief by those whose depressed spirits make their existence a living death. Are good men ever permitted to suffer thus? Indeed they are; and some of them are even all their lifetime subject to bondage.....It is a sad case when our only hope lies in the direction of death, our only liberty of spirit amid the congenial horrors of corruption.... He felt as if he were utterly forgotten as those whose carcasses are left to rot on the battle field. As when a soldier, mortally wounded, bleeds unheeded amid the heaps of slain, and remains to his last expiring groan, unpitied and unsuccored, so did Heman sigh out his soul in loneliest sorrow, feeling as if even God Himself had quite forgotten him. How low the spirits of good and brave man will sometimes sink. Under the influence of certain disorders everything will wear a somber aspect, and the heart will dive into the profoundest deeps of misery.

IV. BODILY SYMPTOMS

“A merry heart doeth good *like* a medicine: but a broken spirit drieth the bones” (Prov.17:22). Thus does the Bible confirm for us the link between distorted thoughts or emotions and many of our bodily ailments. Every day, doctors are faced with patients complaining of various physical symptoms whose root problem is their depressed thoughts and feelings.

These bodily symptoms include abnormal sleep patterns (Job 7:4, 13-15), fatigue and loss of energy (Ps.6:6, 69:3), weight fluctuations (Job 17:7; 19:20), digestive problems (Lam.3:5), loss of appetite (Ps.102:4; 42:3), pain in various parts of the body (Ps.32:3-4 31:10; 38:3), choking feelings and suffocating breathlessness (Ps.9:18; 42:7; 69: 1-2) . In Psalm 32:3-4 the Psalmist describes the bodily consequences of true guilt, but the same can also be the result of false guilt.

V. BEHAVIOUR AND ACTIVITY

As we might expect, the impact of depression on our thoughts, feelings and bodies will inevitably have an effect on our behavior and activity. This is usually seen in two ways. Firstly, we may stop doing things we enjoyed or that we were good at, or that were good for us. This may involve no longer going to church or fellowships, not contacting family and friends, or the cessation of hobbies and other beneficial leisure interests. Secondly, we may start doing things that make us feel worse like staying indoors, drinking alcohol, or pushing away people who care.

CONCLUSION

1. Assess the five areas of your life as outlined above, perhaps with the help of a trained professional, and try make an honest judgment about yourself. Remember that even one false thought pattern will have an adverse effect on your feelings, physical health, and activity patterns.
2. Try to remain open to the possibility that physical symptoms may well be related to depressed thoughts and feelings.
3. Seek medical advice regarding the suitability of anti-depressants for you.
4. Focus particularly on the area of your thoughts and try, with God's help, to reverse false thinking patterns and recover and maintain a true view of God, of yourself, and of others.
5. Pray for yourself and others. Tell the Lord exactly how you feel. Neither Job, David, Elijah or Jeremiah "hid" their feelings from God.
6. Seek the sympathy of Christ. The words used to describe his mental sufferings in Mark 14:33 and Matthew 26:37 may be translated "surrounded with sadness" or "deeply depressed". Charles Spurgeon wrote:
"When our Lord bore in His own person the terrible curse which was due sin, He was so cast down as to be like a prisoner in a deep, dark, fearful dungeon, amid whose horrible glooms the captive heard a noise as of rushing torrents, while overhead resounded the tramp of furious foes. Our Lord in His anguish was like a captive in the dungeons, forgotten of all mankind, immured amid horror, darkness, and desolation."
7. Believe the depression is part of the "all things" that are working together for your good (Rom.8:28).

If He had said, 'Go out and preach ...', you'd have gone. If He'd said, 'I want you to be a missionary', you'd have gone (possibly reluctantly, depending upon your own hopes and desires!). But because He has said, 'Sit there and be depressed for a bit, it will teach you some important lessons', you don't feel that it is God calling you at all ... *do you?* Do you remember Naaman, who wanted to be cured of his leprosy? (See 2 Kings 5.) If he had been asked to do something glorious he would have been happy. Because he was asked to bathe in the murky old Jordan he wasn't so keen - yet this was God's plan for him, and it cured him. God has better plans for us than we have for ourselves - unfortunately, as we can't see into the future, we don't always appreciate just *why* God's plans are better. With hindsight it's somewhat easier! However strange it may seem to you, *God wants you to go through this depression* - so look at it positively, not negatively. What does He want you to learn from it? What can you gain from going through it? When you begin to think in this fashion your guilt feelings start to drop away. You can begin to understand that what is happening is part of God's plan for you - and *so your depression is not a punishment from God*. You are actually where God wants you to be, even if it is emotionally painful. To put it another way, if God wants you to go through this it would be wrong for you to avoid it, wouldn't it?

PART 4 THE CAUSES

Depression is often divided into two main categories – reactive or endogenous. Reactive depression is usually traced to some obvious trigger – perhaps a stressful life event or unhelpful thought patterns. Endogenous depression is the name usually given to depressions which seem to have no obvious trigger and are often traced to genetic pre-disposition. For no obvious reason, the brain chemistry becomes unbalanced and a person becomes depressed. However, this distinction between reactive and endogenous is not as clear-cut as it once was, as skilled investigation of many so-called endogenous depressions will often reveal a “trigger event”, though a genetic pre-disposition may mean that the trigger is relatively small. We will consider four triggers of depression: stress, psychology, sin, and sovereignty.

1. Stress

When you stretch a piece of elastic, you can often extend it to two or even three times its size. However, the further you stretch it, the greater the tension on the rubber, the less flexible it becomes, and the greater the danger of it eventually snapping. Like rubber bands, we are all “stretched” from time to time. We are stretched by life events, which we have little control over, and by our lifestyle which we do have considerable control of. Let’s look at each of these stretching forces.

a. Life events

Life events include marriage, moving house, exams, bereavement, illness, unemployment, birth of children, etc. Each of these events put a strain upon us, to one degree or another. When we are “stretched” in this way, our body and brain chemistry changes, and one of the results is often a dip in or lowering of our mood. This is normal. And, as the stressful events pass, our chemistry usually returns to normal along with our mood.

Sometimes, however, these stressful experiences can continue over a lengthy period, or they can occur one on top of another, or they can affect us more seriously than other people. The result is that our brain chemistry remains abnormal and so also does our mood. We just can’t “pick ourselves up”, no matter how many people urge us to. This is depression. At the very worst, like an elastic band, we can “snap”, sometimes unexpectedly. This is what some call a “nervous breakdown”.

Changes in brain chemistry greatly affect our ability to think and feel in a balanced way. Stressful events make our minds go into overdrive, exhausting and depleting the chemicals we need to think and feel in a normal and helpful way. Think of a computer with too many programs open and working at the same time, and how this slows down all the processes until eventually the machine “crashes”.

b. Lifestyle

While we have little if any control over life events, we do have substantial control over our lifestyle – the proportion of time and energy we give to work, socializing, shopping, travelling, recreation, exercise, rest, sleep, etc. Much of the increase in depression and anxiety today is largely the result of an unbalanced lifestyle where people are on the one hand working too hard and spending too much, and on the other hand are exercising, resting, and sleeping too little. This deliberate overstretch

beyond our capacities and abilities is not glorifying God in our body and spirit (1 Cor.6:20). It is also in breach of the sixth commandment which requires us to take “all lawful endeavors to preserve our own life” (Shorter Catechism 68). The effects and result of a stressful lifestyle will often be the same as that of stressful life events – depression.

2. Psychology (the way we think)

In Lecture 3 we looked at 10 false thinking patterns which contribute to depression. It cannot be emphasized enough how vital it is to learn to recognize these unhelpful thoughts by prayerful self examination. It is also important and useful to note that some of these habits of thinking may be involuntarily absorbed or learned in early life and so may be deeply ingrained. When we feel down, or when we are stressed, these latent false thinking patterns tend to occur more frequently and tend to dominate. This can often lead to depression, worsen an existing depression, and, if persisted in, make

recovery from depression so much harder. Sometimes, the Church can reinforce or add to false thinking patterns by over-emphasis on the negatives in the Bible and in people's lives, or by setting standards of commitment which may discourage or depress those who are unable to attain them.

3. Sin

A non-Christian may be depressed because of their sin, in which case the cure is repentance and faith in Jesus Christ. Sadly, many depressed unbelievers are being treated with chemicals when what they need is conversion. If you are unconverted and depressed then seriously consider whether your depression is related to a guilty conscience and conviction of sin. If so, then what you need is repentance from sin and faith in Jesus Christ. There are many Christians who will testify that this was the key to relieving their depression.

While sin may be the last thing an unconverted person may think is causing their depression, the opposite is true for Christians. When a Christian becomes depressed, there are often spiritual consequences, and so the depressed believer jumps to the conclusion that there is also a spiritual cause – usually their own sins or hypocrisy or failures of one kind or another. Skilled and experienced Christian pastors, doctors, and psychiatrists unite in affirming that depression in Christians is not usually caused by problems with their spiritual life. In Christians, depression is usually caused by stressful life events and lifestyles, or unhelpful thought patterns (see 1 and 2 above). Here are some sample quotations from various experienced Christian pastors, psychiatrists, counselors, and doctors to prove this point:

“For Christians, depression hardly ever has a spiritual cause...In Christians, spiritual

effects follow from the depression, and seldom the other way around.”

“True spiritual causes of depression are not common. Most Christians with an apparently religious content to their depression in fact have one of the mental/emotional causes rather than a true spiritual cause. I cannot emphasize enough that solely spiritual causes of depression are infrequent in Christians.”

David and other psalmists often found themselves deeply depressed for various reasons. They did not, however, apologize for what they were feeling, nor did they confess it as sin. It was a legitimate part of their relationship with God. They interacted with Him through the context of their depression.”

“We completely agree that there are always spiritual aspects to anxiety and depression (as there are in everything in life for a Christian). However, we see these as being a secondary consequence of the emotional distress that is part of these illnesses. Strong claims that all anxiety and depression is spiritual in origin are unhelpful because they miss the point that the actual problem is anxiety and depression.”

I emphasize this point again and again because blaming our depression on our sin is not only usually wrong, it is also very harmful. It is harmful because it increases false guilt and deepens feelings of failure. It also makes depressed Christians seek a spiritual solution to a problem which is actually being caused by life events, lifestyle, or unhelpful thinking patterns. However, having said all that, we must still leave open the possibility that the depression may sometimes be the result of specific sin or sins (e.g. Ps.32). The Westminster Confession of Faith says: “The most wise, righteous, and gracious God doth oftentimes leave, for a season, His own children to manifold temptations, and the corruption of their own hearts, to chastise them for their former sins...” (WCF 5.5).

How then does a Christian know if his depression has a spiritual cause or simply spiritual consequences. The *Practical Handbook for Depressed Christians* puts it like this: “For the Christian, *truly spiritual* causes of depression usually involve behavior which the Christian knows to be wrong, but which he still deliberately and arrogantly persists in...I am not talking about repeated sins that the Christian wishes he could control but can't...but a deliberate and continued rebellion against God...”

4. Sovereignty

One final cause of depression in the Christian is the sovereignty of God. Hard though it may be to accept, the ultimate cause may be, "It pleased God." This however is not some sheer arbitrary, sadistic and pointless infliction of suffering. Not at all. God has wise and loving motives and aims in all His dealings with his children. The *Westminster Confession of Faith* proposes another reason why God will sometimes allow his children to descend into the depths of depression. It is "to discover unto them the hidden strength of corruption and deceitfulness of their hearts, that they may be humbled; and, to raise them to a more close and constant dependence for their support upon Himself, and to make them more watchful against all future occasions of sin, and for sundry other just and holy ends (5.5)".

A well known example of this is Job. A lesser known example is Hezekiah. "God left him, to try him, that he might know all that was in his heart" (2 Chronicles 32:31). This does not mean that God actually left Hezekiah. God will never leave nor forsake His people. This, then, is not an objective leaving, but a subjective leaving. God withdrew Himself from Hezekiah's spiritual feelings, so that he lost his feelings of God's presence, protection, and favor. So, Hezekiah felt God had left him. But God had a wise and loving purpose in this. It was to test Hezekiah and to reveal to Hezekiah what was in his heart when God's felt presence was withdrawn.

Sometimes we can take God's presence in our lives for granted. We forget what we might be without him. And so He wisely, temporarily, and proportionately withdraws the sense of his favor and presence to remind us of our state without Him and to lead us to greater thankfulness and appreciation for Him

Dr John Lockley, *A Practical Workbook for the Depressed Christian* (Bucks: Authentic Media, 1991), 53-54.

S & R Bloem, *Broken Minds* (Grand Rapids: Kregel, 2005), 204.

C Williams, P Richards, I Whitton, *I'm not supposed to feel like this*, (London: Hodder & Stoughton, 2002), 121.

Dr John Lockley, *A Practical Workbook for the Depressed Christian* (Bucks: Authentic Media, 1991), 57

PART 5 THE CURES

At first glance it may seem like a silly question. Surely every sick person wants to be made whole! However, Christ's question may imply that the man was not making use of all the means available to get better. Or, perhaps he had given up hope of getting better. These are common scenarios with depression. Doctors and pastors are often faced with the frustrating situation of people who need the help they can give, and yet who are not taking the steps required to benefit from this help. Perhaps they have just learned to live with their illness. Perhaps they have given up hope of getting better. Perhaps they lack the will to play their part in the healing process. Perhaps they are frightened of all the responsibilities of life which would come upon them should they be viewed as "well" again. Perhaps they would miss the attention and sympathy which being ill may generate. These are all possibilities. So, if you are depressed, the first searching question you must ask yourself is "Do I want to be made whole?"

You have no hope of recovery from depression unless you want to recover and are, therefore, prepared to play your own significant part in the recovery process. We will look at four measures which should be considered as part of a "package" of healing.

1. Correct your lifestyle

It is vital to lead a balanced lifestyle in order to reduce the "stretch" that threatens our physical, mental, emotional and spiritual well-being. Some of the practical points made here also apply to depressions resulting from stressful life events.

a. Routine

One of the keys to a balanced lifestyle is regular routine. This is also one of the first things to fall by the wayside when someone becomes depressed. The depressed person often finds it very difficult to resist being guided by their feelings. When a person feels down they will often only do what they feel like doing and avoid what they don't feel like doing. For example, if we don't feel like getting up, we won't. If we don't feel like working, we won't. If we don't feel like doing the ironing, we won't. If we feel we want to drink or eat to excess, we do it. A positive step in recovering from depression is to restore order and discipline in our lives. Regular and orderly sleeping, eating, and working patterns will rebuild a sense of usefulness and healthy self-esteem. It is also glorifying to God who is a God of order, not of confusion (1 Cor.14:33).

b. Relaxation

We need to build times of relaxation into our lives. This may involve finding a quiet spot at various times throughout the day to simply stop, pause, calm down, and seek the peace of God in our lives. Jesus recognized and provided for this need in his disciples when he took them "apart into a desert place to rest a while" (Mark 6:31). Also, moderate physical exercise helps to expel unhelpful chemicals from our system and stimulates the production of helpful chemicals.

c. Rest

Regular sleep patterns enable the body and mind to repair and re-charge. The Sabbath Day was graciously made for us (Mark 2:27), partly to ease the tension of our busy overstretched lives.

d. Re-prioritize

Examine your life and see what you can do to reduce your commitments and obligations. Areas to consider are your family, your work, your church, your neighbors and travel. Once you are better you may be able to pick up some of these activities again. But the priority is to get better.

2. Correct your false thoughts

As we have noted throughout these lectures, one of the most common contributory factors to depression is wrong and unhelpful thoughts. Many Christians, who wouldn't dream of viewing God's Word in a false way, yet view God's world in a false way. As they view themselves, their situations, and their relationships with others, they tend to dwell on and magnify the negatives and exclude the positives. This distorted view of reality inevitably distorts and depresses their mood. Christians are obliged to challenge falsehood and distortions of reality, especially when found in themselves. In the appendix to this lecture you will find two questionnaires to help you do this. The first is to help you examine your thoughts, and the second is to help you challenge your false and unhelpful thoughts. Questionnaires such as these are recommended for use by many Christian and non-Christian psychiatrists. They may look a bit strange to you, and you may wonder, "Is this not all just psychological mumbo-jumbo?" However, I would like to show you here how each step is grounded in Biblical Christian experience. In Psalm 77 we have a perfect example of Asaph investigating and challenging his thoughts with God's help, in order to raise his mood and spirits. There are also slightly more abbreviated versions of the same biblical strategy in Psalm 42, Psalm 73, Job 19, Habakkuk 3, etc. So, this is not "psychological mumbo-jumbo", but true Bible-based Christian experience. Let us look at Psalm 77 to prove this.

Download the following file :

asaph.pdf

3. Correct your brain chemistry

This is not an area I have any expertise in and so I shall keep my comments to a minimum. I would refer you to sympathetic and trained medical personnel for diagnosis and prescription of appropriate medication. Even a low dose of anti-depressants is sometimes enough just to begin to restore depleted

brain chemicals and so pick up your mood sufficiently to enable you to begin to take the steps necessary to correct your lifestyle, thoughts, etc. However, more serious depressions sometimes require medication for 2-5 years in order to permanently restore the brain's chemistry and processes. There are a number of myths and false ideas about anti-depressants which have lodged in the public mind.

Here are some examples: "If I take anti-depressants I won't be my true self...there will be horrible side-effects...I might get addicted...people will look down on me...it will mean I am crazy." Your doctor should be able to refute these myths and reassure you. However, as mentioned above, anti-depressants don't replace the need for you to identify and work at changing false and unhelpful thinking and harmful behavior.

4. Correct your spiritual life

a. Correct the spiritual consequences

We have tried to emphasize that for Christians their depression is usually not caused by spiritual factors. However, there are spiritual consequences in all depressions. There are a number of steps a depressed Christian can take to help reverse at least some of the spiritual consequences. You may find Martyn Lloyd-Jones' book *Spiritual Depression* to be helpful in this regard – although he can be a bit sweeping and dogmatic in his generalizations. Here are some practical things you can do to help address the spiritual consequences of depression.

(i) Accept that being depressed is not a sin and indeed is compatible with Christianity. Many Bible characters and many of the greatest Christians passed through times of depression.

(ii) Try to understand that your loss of spiritual feelings is not the cause of your depression, but rather the depression has caused a general loss of feeling in all parts of your life, your spiritual life included.

(iii) Patiently wait for the corrections in your lifestyle, thinking, or brain chemistry to have an effect on your feelings as a whole and your spiritual life will pick up at the same time also.

(iv) Have a set time for reading your Bible and praying. Depressed Christians may either give up reading and praying, or they may try to read and pray "excessively" in order to try and bring back their spiritual feelings. Both approaches are unhelpful. Instead, set aside a regular time each day to read and pray. If concentration is a problem, keep things short (5-10 minutes) until you feel better. Depression will only be deepened by setting unrealistic spiritual goals.

(v) Bring objective truth to mind (e.g.: the doctrine of justification, or the atonement), especially "positive" verses which set forth God's love, mercy and grace for sinners (e.g.: Rom.8:1; 8:38-39; 1 Jn.4:9-10; 1 Jn.1:9). You may want to write out a verse and carry it around with you. When negative thoughts overwhelm you, bring out the verse and meditate upon it.

(vi) When you pray, tell God exactly how you feel. Be totally honest. Ask God to help you with your doubts and fears and to restore to you the joy of salvation. Thank Him for loving you and being with you even though you do not feel His love or presence. Praying for others who suffer can also help to turn your thoughts away from yourself for a time.

(vii) Keep going to church and seek out the fellowship of one or two sympathetic Christians you can confide in, and ask them to pray with you and for you. Be careful about who you talk to. Sadly, some Christians cannot keep confidences, and others will have little understanding of or sympathy for your condition.

(viii) Remember God loves you as you are, not as you would like to be.

b. Correct the spiritual causes

In the lecture on the causes of depression, we mentioned the possibility that a Christian's depression may be the result of some specific sin or sins. If having examined your life you find that there is a sin which you are deliberately and stubbornly persisting in, or grave sins which you have never really repented of, it is time to fall on your knees and seek God's pardon for the sin, and God's power over the sin. See Psalm 32 and Psalm 51 for examples of how to do this.

Depression (major depressive disorder) is a common and serious medical illness that negatively affects how you feel, the way you think and how you act. Fortunately, it is also treatable. Depression causes feelings of sadness and/or a loss of interest in activities you once enjoyed. It can lead to a variety of emotional and physical problems and can decrease your ability to function at work and at home. Depression symptoms can vary from mild to severe and can include: Feeling sad or having a depressed mood. Loss of interest or pleasure in activities once enjoyed. Depression is the main cause of disability worldwide, according to the World Health Organization (WHO). It can affect adults, adolescents, and children. In this article, learn what depression is and what causes it. We also describe the types, their treatments, and more.

Definition. A person with depression may experience persistent sadness. Depression is a mood disorder that involves a persistent feeling of sadness and loss of interest. It is different from the mood fluctuations that people regularly experience as a part of life. While there is no cure for depression, there are effective treatments that help with recovery. The earlier treatment starts, the more successful it may be. Many people with depression recover after following a treatment plan. Depression can be genetic, but certain medical conditions, substance use, sex hormones, and other factors can also play a role.

Causes and Risk Factors of Depression. By. Nancy Schimelpfening. Nancy Schimelpfening, MS is the administrator for the non-profit depression support group Depression Sanctuary. Nancy has a lifetime of experience with depression, experiencing firsthand how devastating this illness can be. Learn about our editorial process. Nancy Schimelpfening. **What Causes Depression?** Depression is caused due to hormonal fluctuations. Imbalance in serotonin levels triggers psychological and physical reactions in the brain. This causes mood disturbances, eventually leading to depression. Other causes: Low estrogen levels due to thyroid problems, menopause, or other conditions. Genetic factors. **Symptoms of Depression:** Not just physical but depression also affects emotions, thoughts, and behaviors. Symptoms are: [table not found /]. Depression can be classified into mild, moderate and severe based on the severity of the symptoms. **Risk Factors of D...** **Prevention and Cure for Depression:** Depression can be preventable by following some lifestyle modifications. They are