It Was all in My Head

(A Christian View of Depression)

by Kirby Smith

I lost my soul. At least that is how I felt. This is the best way I know to begin to describe what was for me a living hell on earth as I battled the beast of depression. St. John of the Cross spoke of the "dark night of the soul," and Martin Luther called it "anfectung" – a word that has no English equivalent. Luther's biographer Roland H. Bainton attempted to define anfectung (depression) this way, "it is all the doubt, turmoil, pang, tremor, panic, despair, desolation and desperation which invade the spirit of man."²

This I experienced. And I lost my soul. Or perhaps I should say that depression stole my soul and buried it so deeply that, with apologies to the apostle Paul, to live was not Christ at all, but to die most assuredly would have been gain.

The Bible teaches that "nothing can separate us from the love of God which is in Christ Jesus." I believe this. I know it is true. But I also know it is true that if a person sinks so deeply into the pit of depression that he becomes incapable of having a cognitive awareness of God's presence, his soul will also be lost.

I am a pastor of the Baptist persuasion, and have served churches in the Commonwealth of Virginia for over twenty-five years. I have battled depression for the past eighteen of those years. In the early 1990's I began to experience a loss of motivation for my life and work. When at home, all I wanted to do was sit on the back porch and stare into space. At work I had no desire to prepare sermons, visit the sick, or attend meetings. I mentioned my malaise to a colleague of mine. He told me it sounded like I was depressed. I ignored him. Not because I didn't want to admit I was depressed, but because I didn't have the foggiest idea what he was talking about. Clinical depression was not yet on my cognitive radar screen. In other words, I had never heard of it.

Things got worse. I began dreading going home in the evening. I had two small children who wanted to play with daddy. I loved them, but I dreaded seeing them. I had not the physical energy or the emotional strength to deal with their young exuberance. I began to cloister myself from my family and my church. All my energy and motivation were gone. Early to bed and late to rise became my sleeping pattern. An empty shell does not even begin to describe the nothingness inside me.

I spent much time in prayer during those days which turned into months then years. I took walks in our neighborhood and prayed. I sat in my office and prayed. I prayed in the sanctuary, the car, and on the back porch. I know what it is like to pray without ceasing, for that is all I knew to do. I read my Bible and devotionals every day. I pleaded with God to take away my darkness.

Once, while attending a conference at a mountain-top retreat center, I entered the chapel and prayed for three hours. I left under the same cloud of darkness with which I had entered. Didn't

Jesus say something about prayer moving mountains? I was literally praying on the summit of a mountain. Yet nothing happened. Nothing moved, neither on the mountain, nor within me.

At about this time, the mid 1990's, my doctor offered to put me on an antidepressant. I refused. Again, my refusal was not due to denial, it was due to ignorance. I still did not understand what I was fighting and I naively assumed that I simply had a spiritual problem that prayer and will power would conquer.

I was wrong. My depression had been with me for about four years and was slowly strengthening its death grip on my soul. Prayer and will power were not working. I agreed to take medication. Over the next few years my life was a roller coaster of feeling better, then worse.

In 2003 the bottom fell out. My depression flared with a vengeance. No gradual suffocation this time, rather a devastating body blow that sent my wife and me speeding to the emergency room.

I had arrived at my church office one beautiful spring morning in May around 8:30 a.m. The warm sun was shining. Flowers were blooming. Trees were budding. Birds were singing. A perfectly delightful morning. I was the first one at church. All was quiet and peaceful. Suddenly, for no perceivable external reason, I felt a physical panic begin to well up inside me. My entire body felt like it was burning up, yet a check of the thermometer would show no fever. Afraid to drive home and too physically and emotionally paralyzed to move, I called my wife to come get me. Hurry! Please! What's taking her so long? If ever anyone had a nervous breakdown, I was having one. Heart racing. Hyperventilating. Panic. Darkness descending. What if I pass out? Could I be having a heart attack? My God, My God, why have you forsaken me? All is lost.

At the hospital, the emergency room doctor talked to me for a few minutes and told me there was nothing wrong. He sent me home with the advice to relax and take deep slow breaths into a brown paper lunch bag. (At this point I was wondering if this doctor's medical degree was written on a brown paper lunch bag.) Neither the breathing nor the bag helped. My symptoms worsened. Two hours later, we returned to the ER. I was in an even worse state than before. The same doctor saw me again, and again he was convinced that there was nothing wrong that a little fresh air, a stiff upper lip, and the ubiquitous brown paper lunch bag, wouldn't cure. He prepared to send me home again. (To be followed in a few short days as I would soon discover by two hefty bills for his services, or lack thereof. Those lunch bags are expensive, you know.)

This time, however, I did not leave. Desperate times do call for desperate measures, and I was willing to do whatever I had to do to get help. I did. I made a scene. Putting it mildly, I became a dramatically uncooperative patient.

In short order, most likely due to my blunt references to the possibility of an untimely accident which might result in serious bodily harm, and which may have also left the good doctor open to unpleasant legal proceedings, I was soon referred to a psychiatrist and became acquainted with a number of antidepressant and anti-anxiety medications. I thank God for both the psychiatrist and the medications. In a couple of weeks I was feeling much better, and for about a year and a half all was well.

Then came 2005. My medications had become increasingly ineffective. By July I realized, as did the church I was serving, that I could no longer carry on my duties as pastor. I resigned my

position and went on disability. In October I had nine Electro Convulsive Treatments (ECTs) over a period of eighteen days.

Contrary to what many envision, ECTs can be, in fact, less an ordeal than *a* trip to the dentist, and they very often provide successful treatment. Today's ECT procedures are nothing like they were in past decades. A thoughtful and compassionate hospital staff, muscle relaxants, and anesthesia make the treatments most agreeable.

My treatments were successful by any standard of measurement, and by February 2006 I felt better than I had in years. Having spent 14 months on disability, I sent my résumé out. In November I assumed the duties in my current pastorate.

As I searched for a new pastoral position I know my story (and I was very honest about it) scared off some churches. That's okay. The church where God wanted *me and* my wife to serve (she is our Director of Music) is where we are. We landed squarely in the arms of a loving church that was just right for us, and we for them.

Praise be to God!

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"My soul is sorrowful even unto death."

Jesus said that. I am glad he did. It means I am not alone. It means Jesus and I have shared something in common. Jesus experienced his sorrow for reasons eternal. I experienced mine because at the time I would have rather died than lived. My sorrow was not identical to his. Jesus had the weight of the world on his shoulders, while I only had my own; yet, in a way I cannot explain, I know he shared in the pain of my suffering. I see that clearly now, though at the time, feeling I had lost my soul, I had no awareness of it.

In 1993 the late Jim Valvano, who won a national championship as the head coach of the North Carolina State men's basketball team, delivered a speech that to this day is widely remembered. Valvano, whose body was riddled with tumors and who was dying of cancer said this about his disease: "Cancer cannot touch my mind, it cannot touch my heart, it cannot touch my soul."

He was right. As terrible as cancer is, and as much suffering as it may cause, it is often powerless against the mind, heart, and soul. It is precisely this powerlessness that can make cancer a lesser foe than depression and its attendant mental illnesses. It is that same powerlessness that often makes *a* physical ailment an inferior adversary to severe mental illness, for it is precisely the mind, heart, and soul, where every other disease is benign, that mental illness is malignant.

Valvano was a powerful voice in the fight against cancer precisely because his disease did not affect the strength and integrity of his mind, heart, and soul. Cancer, as he stated, could not touch these.

It is not so with many who are mentally ill. For those who sink to the deepest levels, where darkness reigns and souls are deathly sorrowful, there is no mind, there is no heart, and there is no soul.

In his Divine Comedy, Dante Alighieri had these words written upon the gate of the entrance into hell, "All hope abandon, ye who enter here." For the severely mentally ill, hopelessness is life on a daily basis. Thus, a literal hell on earth weighs every moment upon the afflicted. He lives each day drowning in something akin to Bunyan's "slough of despond." Here there is no hope. There is no light. Nihilism reigns. How often does the depressive pray that physical death will come? The answer, I believe quite often, is the deeper the depression, the more often and more intense the prayer. Indeed, on many occasions this might very well be the answer to the "why?" question so often asked following a suicide.

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Having addressed the darkness and despair of depression, let us now turn to a more hopeful matter. Depression is not omnipotent. Recovery is possible. Healing can and often does frequently occur. To have the dawn break into the darkness of one's soul is a kind of salvation. For a depressive to have the curtain of darkness lifted is certainly cause for one to break forth into a personal ode to joy.

Today, I have experienced healing. I live on the other side of the valley of the shadow of death. I remember being there, but I am not there now. Yet, I know depression is an insidious and virulent enemy. It may attempt to return. Indeed, it may return. Like a cancer patient in remission, I realize my own dark night of the soul perhaps lies inert waiting to rise again. If it does, I will rejoin the battle. But I do not worry about it. It is not a part of my daily consciousness. No, today, and by God's grace forever, I am free.

My heart, mind, and soul are mine again. Thanks be to God!

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Mark Noll's 1994 The Scandal of the Evangelical Mind begins with this attention grabbing sentence: "The scandal of the evangelical mind is that there is not much of an evangelical mind." He goes on to assert that "despite dynamic success at a popular level, modern American evangelicals have failed notably in sustaining serious intellectual life." Noll's premise may easily be applied to much current evangelical literature concerning mental illness.

Having read much on depression and related mental illnesses, I have found that almost without exception the best material available to the general public today is clinical, medical, and . . . secular. There are many writers who speak to the fact that depression, though there may be many contributing factors, is at its core a physical illness, that it is the result of a chemical imbalance in the brain and that it is as much of a physical issue as is heart disease, diabetes, or cancer. These writers speak honestly and directly to the necessity of pursuing medical help not as a last resort, but a first step treatment. It is rare to find among these authors one who identifies himself as a distinctively Christian writer.

Unfortunately, at least from my personal reading, most evangelical writing on depression falls far short of offering an adequately helpful discussion. From my perspective, I believe it is fair to say that while most secular writers tend to offer a realistic and honest analysis of depression and its attendant variations, most evangelical writings are shallow, evasive, and frankly, uninformed.

The evangelical writing I have seen approaches the topic by spiritualizing mental illness while minimizing its horror. There is extensive talk of counseling, attending church, praying, and getting involved in "personally meaningful ministries," while medical treatment is often given only a cursory nod. The underlying message, though usually not specifically stated, seems to be that depression is primarily a spiritual not physical matter, and given enough prayer and faith God will bring healing. Though I certainly agree that there is a spiritual element involved (after all, depression took my soul), to deny or minimize the physical chemical imbalances within the brain that cause diseases such as depression and bi-polar disorder is not only misguided, it is wrong and even dangerous. In the vast majority of instances mental illness is a physical disorder not just a spiritual malady.

Understand, I am not saying that the depressive should not pray or seek other Christian avenues that might aid in healing. I did this myself. What I am saying is that depressed persons should avail themselves of all possible treatment options. Indeed, perhaps medical treatment *is* God's answer to the depressive's prayer. Hopefully, outside the evangelical tradition, other Christian writers are offering more helpful analyses.

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If you are a sufferer of mental illness, or know someone who is, there are some specific steps you can take to seek healing:

First, know that you can be made well. There are many treatments available today of which you can avail yourself. It is important, like with many other diseases, to diagnose and begin treatment at the earliest stage possible. Had I sought treatment several years earlier, it is likely that my depression could have been brought under control before it gained its debilitating hold upon my soul.

With this in mind, it is important to reach out for help as soon as one realizes that there is something wrong. Insist upon seeing a qualified psychiatrist. Nurse practitioners, primary care physicians, internists, or psychologists, are not fully trained to help you. See a psychiatrist and be prepared to describe your symptoms fully.

If your psychiatrist prescribes medications, take them. Even when you start feeling better do not stop. This can be the biggest mistake patients make. Relapse is rampant among the mentally ill who discontinue taking their medications after they begin to feel better.

Also, do not feel shame or guilt in seeking medical help. Yours is not a character flaw, moral weakness, or spiritual failure. You are not crazy. You are sick. You are not dealing with demons or a satanic attack. (Why is it that so many Christians blame Satan for mental illnesses yet never blame him for cancer, diabetes, baldness, constipation, acne, or a runny nose? Remember, people used to think that sneezes expelled evil spirits from the body. That is why we still "bless" someone when they sneeze. Such theology was common in medieval days, but would seem to be inexcusable today.)

Let me be clear. No rationally thinking person would ever accuse cancer patients of not being healed because they did not have a strong enough faith; neither would rational persons expect cancer patients to simply pray themselves well and shun available medical treatments. It is a terrible injustice, even a sin, to offer this very analysis to a person battling depression.

Mental illness is the result of chemical imbalances in the brain. Fix the brain. Fix the illness. In fact, I would suggest that we jettison the term "mental illness" altogether and replace it with the more accurate "brain disease." We refer to liver disease, heart disease, kidney disease, and lung disease when those organs fail to function properly. Why should we not also have an accurate designation when the brain does not function as it should? When the brain malfunctions we have brain disease, not mental illness. Often people will say to those afflicted with depression or anxiety "it's all in your head." They are right, just not in the way they mean it.

Along with psychiatric treatment, it has been shown that professional counseling (psychotherapy) can also be very helpful to the depressive's healing process. This is especially true for persons whose depression is situational and thus likely precipitated by a stress producing event or events. In these cases the psychotherapist can often help the client identify and understand what is causing the depression and through this awareness achieve healing without the use of medications. Typically these situations are more short-lived and less severe than the chronic depression we have been discussing thus far.

Another point worth noting is that for many depressives, whether chronic or short term, the most effective course of treatment may be a combination of both counseling and medication. Research has shown that a both/and approach to treatment can be much more efficacious than having to chose between one or the other. Taken together, counseling along with medication has met with many gratifying results.

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For those who find release from their illness, it is indeed a blessing for which we should praise God. Still, there is no cure-all. For some, the clouds of despair never lift. It is for these that we continue to offer our prayerful support and for whom scientific researchers continue their work.

The severely depressed or other brain diseased patients have this in common with Jesus: like him we also are sorrowful unto death. But there is something else we have in common with him as well. We are the recipients of his promise, "I will never leave you nor forsake you." That is truth, whether at any given moment in the depressive's life he is able to realize it or not.

To God be the glory!

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¹ The Dark Night of the Soul, treatise, St. John of the Cross, c. 1583

² Here I Stand, Roland H. Bainton, Meridian, 1995, p. 31

³ <u>The Divine Comedy</u>, Dante Alighieri, Universal Classics, p. 10

⁴ The Scandal of the Evangelical Mind, Mark A. Noll, William B. Eerdmans Publishing Company, 1994, p. 3