

READY TO
WIN OVER
DEPRESSION

THELMA
WELLS



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The Truth About Depression

We're going to explore some practical, biblical ways to deal with depression. But first, what exactly is depression? If we've been sad for a long while, is that the same as being depressed? After all, most people don't mind so much if other people think we look a little sad. But if people assume we must be *depressed*, that's often a different matter entirely, isn't it?

Some people perceive a stigma associated with depression, so they're quite reluctant to admit they're depressed. This means they don't openly deal with it or seek help. They suppose everybody else is always upbeat and positive, so they must be the only one who's mixed up or feeling down.

Christians in particular are often afraid to acknowledge depression because they associate it with a spiritual breakdown or weakness. And this is despite knowing that several of our biblical heroes extolled in the pages of Scripture definitely showed evidence of depression.

I'm sure you know by now that believing in the Lord Jesus Christ doesn't mean all your problems are history. The fact is, depression is extremely common. At some point in our lives, almost all of us will either face a significant encounter with depression or see a family member or close friend struggle with it. Psychologists estimate that 20 percent of adults will experience *severe* depression at some point in their lives, and many of them more than once.

The most acute cases of depression, known as “clinical depression,” require professional help. Please don’t hesitate to see a counselor or physician if you recognize symptoms of severe depression in your life.

Although depression appears to be as old as humanity, there are indications that it’s growing more common today than in previous generations. Why is that? Here’s a disturbing explanation from Dr. Archibald D. Hart, a leading Christian psychologist and dean emeritus of the School of Psychology at Fuller Theological Seminary:

The frantic pace of modern life combined with a breakdown of traditional values is causing many to feel hopeless, uncertain and disappointed. This stress aggravates the genetic factors that predispose to biological depressions. It also sets the stage for an appalling sense of loss, which is the primary cause of psychological depressions. Demoralization is rampant in our modern culture and can turn an even minor setback into a major depression in a body overextended by stress.

Many losses in our modern world are tangible and material. More significant, however, in causing psychological depression are such losses as insecurity, uncertainty, rejection, lack of fulfillment in one’s vocation, and a general sense of the meaninglessness of life. These are losses that were not as prevalent in earlier times. As a culture, we may well have entered our own emotional “Great Depression.”¹

Notice what Dr. Hart said about *loss* as something that brings on depression. All of us experience our share of losses, don’t we? We’ll look more carefully at this in just a moment.

Who Gets Depressed?

Dr. Hart also observes that depression “is found with frightening regularity in ourselves, our relatives and our friends. There is hardly a family today that is not touched by depression’s tentacles.”² Depression affects people of all social classes, all races, and all cultures, but there’s one group that’s especially hard hit. Again Dr. Hart explains:

Women...are significantly at greater risk for depression than men (a two to one ratio). The reasons for this are twofold.

First, the reproductive biochemistry of the female body implicates depression more often. At various times during the menstrual cycle, as well as in the life cycle of reproduction, depression results from hormonal changes. Problems with depression just before menstruation (premenstrual syndrome) as well as later in life (menopausal depression) are extremely common.

Second, it is very clear that women today are under greater stress than men. Mothers often have to work a full-time job in addition to taking care of family needs. Their resources for coping are therefore pushed to the limits. The result is a greater propensity toward fatigue and depressions caused by adrenaline exhaustion.³

Dr. Hart also writes, “We are seeing an alarming increase in childhood depressions. In fact, the dramatic increase in depression in both the very young and the elderly is among the most frightening features of modern-day depression.”⁴

Isn't this tragic? I've been made aware especially of the growing prevalence of depression among teenagers. I asked my friend Freda McKissic Bush, MD, to give us some of her insights about depression, especially regarding teens:

“Alice,” a 19-year-old college student, came to me for a consultation because she'd missed her menstrual cycles after having been sexually active with her boyfriend until three months ago. Because she had gained weight and was sleeping more than normal, she thought she might be pregnant. A pregnancy test showed she was not.

As I completed her medical history and physical examination, she asked, “When will I get over having that abortion last year? I cry myself to sleep every night.” She wondered if the abortion had made her unable to get pregnant.

She said that besides breaking up with her boyfriend, her relations with her mother were strained, she had difficulty making decisions, she was doing poorly in school, and generally felt anxious and miserable. Although she denied having made plans for suicide, she admitted thinking she would be better off dead.

Alice showed classic signs of depression. Despite the medical reasons for her irregular cycles, the psychological ones could not be overlooked.

Depression affects all aspects of a person—body, mind, and spirit. It can happen to anyone, and it can happen at any age. However, statistics show that both boys and girls experimenting with sex were three times more likely to have symptoms of depression than their friends who have never had sex. . . Research indicates that sexually active girls ages 12 to 16 were over three times more likely to have attempted suicide as their virgin friends, while sexually active boys were eight times more likely to attempt suicide.⁵ Suicide is the third leading cause of death among adolescents ages 15 to 19.

Meanwhile, subsequent conversations and referral for counseling helped Alice recognize that some of her symptoms could be caused by her sexual behavior.

If you have had sex, you can choose to stop and wait until marriage to have sex again. The benefits are that you can regain your self-respect, reduce your risk for depression, and improve your success at a healthy lifestyle.

In our culture today, we all need to be increasingly aware of the many forces that are increasingly pushing people of every age over the edge of depression.⁶

Triggers...and Treatment

What causes depression? *Psychology Information Online*, which includes content provided by the National Institute on Mental Health, notes that “a depressive episode” can be triggered by “a serious loss,

chronic illness, relationship problems, work stress, family crisis, financial setback, or any unwelcome life change.” Whatever the cause of our depression, it needs to be faced and understood realistically—and then accepted for what it truly is.

Sometimes depression is brought on by an underlying disease or biochemical disorder. Fortunately, the medical field has made significant strides both in identifying these causes and in developing effective treatments for them. When it comes to taking antidepressants, Dr. Hart emphasizes that these “have far fewer side effects than earlier ones and are perfectly safe when taken under supervision for long periods of time.” He also notes that these newer medications “are not addicting. They may be taken without fear of becoming dependent on them.”

Psychology Information Online makes this point: “As a general rule, you should never take antidepressant medication alone, without also beginning psychotherapy, or at least seeing a psychologist for an evaluation.”⁷

Furthermore, Dr. Hart notes that “there is no medication to speak of” for treating the more common cases of situational depression (which he terms “reactive depression”). This kind of situational depression usually involves the loss of something significant. Following such a loss, the depression we experience “is essentially a call to let go of whatever it is we have lost.” Dr. Hart continues:

God has designed us for grief, so that whether the loss is the death of a loved one, the departure of our first child to college, getting fired from a job, or a business venture that has gone bad, we have to face this loss with courage and allow ourselves to grieve...This is what reactive depression is all about. It is a healing time to help us cope with loss.⁸

- ✿ Have you experienced a significant loss recently? Or if you experienced a loss not so recently, is it still affecting you? Write down what you lost and when.

- ✿ Now write down how that loss is affecting you emotionally. Also include any other ways it's affecting you. Have the effects changed over time?

Do you remember the words of Ecclesiastes 3:1? “For everything there is a season, and a time for every matter under heaven.” That includes “*a time to heal...* and a time to laugh; *a time to mourn*, and a time to dance” (verses 3 and 4). If you’ve experienced a significant loss that’s still affecting you, you may still be in the “time to mourn,” which is entirely appropriate and natural. Remember to give yourself time to heal. If you try to rush the process, suppress it, or take shortcuts, the emotions will eventually burst out...often in harmful ways.

- ✿ If you’re still in that time of grieving over a loss, talk to God about it. Ask Him to be with you and to heal you. Ask Him to be part of your grieving process. He wants to help! Write down what you want to tell Him about your situation.

- ✿ Who else can you talk to about this?

Less Severe Depression

Some of us are more prone to depression than others. The influences that bring us down in our spirits can come from many sources and directions. Depression can be a complex picture. But let's face it. The main reason we get despondent is simply because *life happens*. And nobody's life is a constant procession of uplifting, rejuvenating, invigorating experiences. Everybody's life has downers. We easily get off-balance in so many ways, and this hurts.

For most of us, the depression we typically encounter isn't in the severe category, medically speaking. The typical depression is *situational*. This doesn't mean they're painless or less important or harmless. Dr. Hart writes, "While these depressions are not usually as serious as the biological ones, they can be much more difficult to cope with." He goes on to say,

One of the most unfortunate secondary effects of depression is that it often causes the sufferer to be oblivious to the depression. Depression eludes recognition, especially in the less severe types. Some people can be depressed for a long time, therefore, and not realize it. Depression can also mask itself in irritability, fatigue, and workaholism. Many who overeat do so as a form of "self-medication" to ease their dejected state. Even when someone vaguely knows he or she is depressed, there is a tendency to deny the depression. Depression is often mistakenly viewed as a weakness, and people fear that even acknowledging their emotional pain to themselves is an admission of defeat.⁹

So we need to be sensitive to our condition and be able to identify the symptoms of depression. What are those symptoms?

Fatigue is certainly a common and prominent symptom, but many others have been identified as well. *Psychology Information Online* notes that depression's symptoms "may vary from person to person, and also depend on the severity of the depression." It lists a very wide range of symptoms, and summarizes them in the following four areas. (As you read, underline any words or phrases that describe you right now.)

- *Changes in Thinking*—You may experience problems with concentration and decision making. Some people report difficulty with short-term memory, forgetting things all the time. Negative thoughts are characteristic of depression. Pessimism, poor self-esteem, excessive guilt, and self-criticism are all common. Some people have self-destructive thoughts during a more serious depression.
- *Changes in Feelings*—You may feel sad for no reason at all. Some people report that they no longer enjoy activities that they once found pleasurable. You might lack motivation and become more apathetic. You might feel “slowed down” and tired all the time. Sometimes irritability is a problem, and you may have more difficulty controlling your temper. In the extreme, depression is characterized by feelings of helplessness and hopelessness.
- *Changes in Behavior*—Changes in behavior during depression are reflective of the negative emotions being experienced. You might act more apathetic because that’s how you feel. Some people do not feel comfortable with other people, so social withdrawal is common. You may experience a dramatic change in appetite, either eating more or less. Because of the chronic sadness, excessive crying is common. Some people complain about everything and act out their anger with temper outbursts. Sexual desire may disappear, resulting in lack of sexual activity. In the extreme, people may neglect their personal appearance, even neglecting basic hygiene. Needless to say, someone who is this depressed does not do very much, so work productivity and household responsibilities suffer. Some people even have trouble getting out of bed.
- *Changes in Physical Well-being*—Negative emotional feelings experienced during depression are coupled with negative physical emotions as well. Chronic fatigue, despite spending more time sleeping, is common. Some people can’t sleep, or

don't sleep soundly. These individuals lay awake for hours, or awaken many times during the night, and stare at the ceiling. Others sleep many hours, even most of the day, although they still feel tired. Many people lose their appetite, feel slowed down by depression, and complain of many aches and pains. Others are restless and can't sit still.¹⁰

Did you underline anything? If you did, it's time to pay attention to what you've noticed and seek help by talking to someone about the issues raised. I suggest you also find out if what you're experiencing has a physical cause, such as a hormonal or brain chemistry imbalance. Ask God to give you wisdom regarding how to move forward toward healing and peace...and then do it!

I often receive letters from people who are depressed that really grab me. Many include statements like these:

- Thelma, I feel like I'm losing my mind.
- Life is just too hard. I want out of here now.
- People are cruel to me.
- Nothing goes right for me.
- I can't think straight.
- I can't stop crying.
- Nothing brings me pleasure.
- My family doesn't even want to have anything to do with me.
- I can't keep relationships.
- When I talk to my friends, they tell me I need to see a counselor. I am not going to see a counselor 'cause I've seen a counselor, and it's the counselor who needs to be on the couch.
- I refuse to take medication. I absolutely refuse.
- I have to force myself out of the house.

- I just want to sleep my life away.
- Nobody cares anyway. I don't even think you care. You probably think I'm crazy.
- Help!

There are a number of reasons why people get depressed, and you may identify with much of what you just read. But let me assure you of one important thing: *You are not crazy*. Don't even think you might be crazy.

For the rest of this book we're going to specifically address situational depression, although the truths that we'll look at from Scripture will be rewarding and helpful for every one of us, even if the depression is primarily due to physical causes and biochemical imbalances. Again, I encourage you to seek professional help from a counselor or physician if you believe you might be battling severe depression.

Now, I don't want to lay a guilt trip on you. I certainly don't want to make your despondency any greater than it already is. But don't we sometimes make things worse by our responses to life's downers? We might even throw ourselves a pity party and say, "I *deserve* to be depressed. Just look at what all I've been through!" We will discover how to respond to situations in a better way. In the next chapter, we'll continue to keep thinking this through. As we do, let's open our hearts to the wisdom found in the Word of God.