

‘There are few books on depression that draw together insights from the fields of pastoral care, biblical teaching and clinical psychiatry with such straightforward clarity and practical wisdom. Written with the everyday needs in mind of those who battle with this condition, *Encountering Depression* is a one-stop resource for both sufferers and carers and all those who seek to offer them pastoral counsel and support.’

Glynn Harrison MD FRCPsych, Emeritus Professor  
of Psychiatry, University of Bristol

‘Many therapists, myself included, have often found their depressed Christian clients among the most difficult to help. For such clients, it has often seemed that their belief system and the practice of their faith have proved impediments rather than aids to accepting the reality of their predicament and to finding through it a new humility, a hope which goes beyond despair and a freedom from destructive guilt and stubborn autonomy. Andrew and Elizabeth Procter’s book provides a powerful antidote to the false theology and the ingrained attitudes which intensify for many Christians the suffering which depression inevitably brings. In simple and direct language they address key questions, provide a mine of information, offer helpful guidance for both scripture reading and private meditation, and list a host of reliable resources. This is a book not only for Christians who know the burden of depression in their own lives but also for their relatives, friends, pastors and co-religionists. The Procters have provided a treasure house of wisdom which, if taken seriously, could transform many a congregation into a truly empathic community where God’s love could permeate into the darkest recesses of the depression experience.’

Brian Thorne, Emeritus Professor of Counselling,  
University of East Anglia, and Lay Canon of Norwich Cathedral

‘I just couldn’t put it down! This is a “must have” book and, almost frustratingly, I agreed with every word. Although written particularly for Christians wrestling with a depressive illness, this book will help all working in pastoral care, from immediate carers to church leaders. The insights brought by a very experienced priest and counsellor along with those of a gifted Christian psychiatrist (who happens to be his wife) bring a brilliantly complementary and illuminating approach. Many in depression will find hope for tomorrow and gain a confidence in the truth that the valley of a depressive illness will end. There is so much empathy and constructive help offered for the person who is depressed, their family and carers. Chapters are short, recognizing

concentration is limited. There are enjoyable therapeutic tasks to fulfil. The fear of failure and sense of guilt that depressed Christians inappropriately carry are addressed and lifted. The one who is unwell is put in the driving seat and empowered to make a difference. Difficult issues are tackled, such as “Where is God in this?”, “Is it the devil?” and “It must be my fault”, I hope this book will be a recommended read for all in ordained ministry and pastoral care and widely available through church bookstalls. I’ll see the Burrswood bookshop orders a good number right away!’

Dr Gareth Tuckwell, CEO of Burrswood Christian Hospital

‘When depression comes it can be hard to let God speak into our pain. But this book has short, very readable, chapters; it identifies with how those with this illness feel; and it offers Christian insights to address the many questions its sufferers are asking. It will help those who can only take a little at a time.’

The Rt Revd Graham Dow, former Bishop of Carlisle

‘This is an original approach to tackling depression which would help any Christian suffering from the illness or anyone caring for them. It shows real compassion and understanding and gives practical advice on how one’s faith will aid recovery.’

Sir Paul Britton, national trustee of Mind

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The Revd Andrew Procter, an ordained Church of England minister, is a member of his diocesan council for health and healing, and Bishop’s Advisor on the paranormal. A professionally qualified counsellor, with an MSc and senior accredited membership of the British Association for Counselling and Psychotherapy, he serves as a part-time counsellor in a local Christian counselling service. He is the author of *A Month Among the Vines* (Redemptorist Press, 2005) and co-author, with Elizabeth, of *Exploring God* (Kevin Mayhew Publishers, 2003).

Dr Elizabeth Procter specialized in child and adolescent psychiatry and has been a consultant psychiatrist for over ten years. She is the mother of four adult children and has four grandchildren. Together with Andrew, she has a vast experience of parish life, has led prayer counselling teams and is a member of her diocesan council for health and healing. She is a pastoral advisor to the bishop, helping to interview prospective ordinands, and has been a trustee of Burrswood Christian Hospital. She has had several articles published in medical journals and Christian magazines.

# ENCOUNTERING DEPRESSION

*Frequently asked questions  
answered for Christians*



Andrew and Elizabeth Procter

**SPCK**

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*This book is dedicated to all Christians  
who struggle with depression*



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# Introduction



Thank you for picking up this book. We hope that it helps you, especially if you are yourself suffering from depression. The fact that you have got so far as to begin reading this book shows that you have an intention to try to get better. This is terrific. It is the seed of your recovery. Do nurture it. We hope that using this book will provide good ground for that seed to grow in. Also that it will water that seed and feed it until it grows up into a full recovery. We are sure that with God's help you will win through to good health again.

The introduction gives guidance about who this book is for and how it can best be used, but first we ask you to read the following story from a GP friend of ours who has suffered depression.

## *My story of depression – Dr Andrew Hicks, retired GP*

I am a 60-year-old recently retired GP who has for many years had a special interest in mental health. As a Christian I have always seen my fellow beings as not just body and mind but also soul, and tried to treat them holistically. As most people in our village knew I was a churchgoer, this meant that consultations sometimes ended up exploring the spiritual dimensions of mental illness and depression. I am sure the usual issues of guilt, 'Why me, and why does God not heal me?' are discussed elsewhere in this book, so I am going to tell my own story of depression which illustrates some of the facets of depression for Christians and I hope will thereby help others.

The problem first started in the mid 1980s. I would have episodes where my long-suffering wife would say, 'Why are you so grumpy?' Life would seem a drag and I would feel tired. After a week or so it would settle and I would be my usual naturally cheerful self. Even then I hated winter greyness and cold and this would in later years develop into genuine seasonal affective disorder. In retrospect I was suffering from 'cyclothymia' – a subclinical form of cyclical depression.

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However, as the episodes of low mood were relatively short-lived I did not seek help and indeed did not really know that I had a problem. In about 1990, triggered by yet another reorganization of the NHS, I had a significant moderate depression where life seemed quite black, and I was about to seek help when one morning it had suddenly gone and so again I ignored it.

My cyclothymic episodes continued until the mid 1990s when problems in my work and family life combined to trigger my first really serious depression, and it hit me like an express train. I had had a few days of feeling stressed and miserable, and I was on a home visit with a patient who was telling me of her own problems when I suddenly found myself in uncontrollable floods of tears.

Clearly, I could not work in that condition, and within a few hours was feeling almost suicidal. Life seemed pointless, suicide seemed a genuine and quite logical option and I found myself looking at stairwells and working out how I would hang myself, or when driving would look at the trees and consider driving full speed into one of them. I talked to one of my GP partners, and she, bless her, although she was not my own GP, got straight in touch with a consultant psychiatrist. As a GP I was very lucky, because (due to the possibility of being in hospital with one of your own patients and the consequent loss of confidentiality) the NHS will pay for private hospital care for medical personnel. I agreed to admission, as I knew I was not safe at home.

My consultant was wonderful. You felt you wanted to record his words because he was so wise. With a mixture of medication, counselling and meditation, I was well enough to leave hospital after about three weeks, but it was another five months of outpatient sessions and stress-free living at home with the support of my family before I was able to cope with the rigours of work, particularly with my heavy workload of other people's psychiatric problems. Counselling techniques are many and varied, but the form that particularly worked for me was 'transactional analysis' because it addressed the underlying personality traits and relationships that had formed me and made me vulnerable. I also discovered that although neither of my parents admitted to having had depression, there was a family history of the illness in my maternal grandfather and great-grandfather.

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I was advised in view of my history of cyclothymia to stay on medication long-term, and have done so. This advice was wise, because when I have stopped it symptoms have returned within two to three weeks.

So how do I feel about this story? Initially, I felt angry with God for letting it happen, both the physical illness of depression and the life circumstances that triggered the acute attack. I was also angry with my family and friends who did not seem to understand what I was going through. As I recovered this changed. When you are depressed, you do not think rationally, but you think that you can. I came to understand that this was a physical, biochemical and genetic disorder, and that both God and my family and friends were actually supporting me through my illness. My prayers, and those of others, contributed to my recovery, I am sure. Nevertheless I am utterly convinced that medication and clinical counselling – both gifts given to humankind by God – were essential components of my recovery.

My advice, therefore, to other people with depression is:

- Seek medical advice early if possible with a GP who has an interest in psychiatry.
- Don't resist either medication or counselling. I believe the two work better together than either on its own.
- Keep praying and get others to pray for you.
- Don't be ashamed of how you feel. It is a physical illness just as much as something like diabetes.
- Guilt is a part of the illness even when you have nothing to feel guilty about. Try to understand that you cannot change the past but you can make the future.
- Christian spiritual healing may well help, but don't dump the more orthodox treatment suddenly. Medication in particular should be tailed off slowly and under medical supervision.
- Different medications suit different people and have different side effects, and take a while to start working. Persevere with the help of your physician.
- Recurrent attacks require long-term treatment. Even a single severe attack requires several months' treatment.

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- Remember God is on your side and at your side even when he seems far away, and even when you think he doesn't exist, because he loves us all individually.

Finally, I would say from my current perspective that my experience has actually made me better able to understand myself, and to use that understanding to help others going through similar circumstances. I am a happier, and hopefully kinder, person than I was before, with more self-respect and self-belief, and for that I thank my God. Perhaps my illness was a gift, something I had to undergo to make me what I am now. But, as it was for Job, it was awful at the time.

### *Who is this book for?*

It is mainly for Christian believers who are depressed. In our experience Christians can suffer in ways that non-Christians don't. When we are depressed as Christians we can feel the loss of many aspects of our Christian faith very keenly. We have held to our faith, often for most of our lives, as the most important thing in our lives. When depression comes to a Christian it can throw up all kinds of questions. We often feel we have lost our faith or failed God in some way. God usually seems very far away. This can add to the burden of depression very considerably. This book sets out to help with that.

We hope it will also be useful for other types of people. We hope it will help carers of depressed Christians, usually their families and friends. By using the book as if you were yourself a sufferer it will help you understand your loved one who is depressed. And we include a special chapter for carers.

Further, we hope the book will help fellow church members of the depressed. When depression comes to a Christian person, that person's whole experience of church often becomes very difficult. Depression sets a challenge for a Christian's church. How the depressed are treated by their church can make or break them. So we hope that ministers, pastors, home group leaders and ordinary church members might read this book with a view to being better equipped to care for those in their church who become depressed. We add a special chapter on this.

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Finally, we hope the book will help those who are not necessarily Christians, who are perhaps not sure quite what they do believe, who would like to understand how it is for depressed people who have a belief. They may be either depressed themselves or concerned for someone else who is depressed. There is, anyway, much in the book which applies to anyone, whatever their faith background.

### *How is the book designed to be used?*

There are 20 short chapters, each taking perhaps ten minutes to read. Each chapter answers a frequently asked question we often have on our minds if we are depressed. Each chapter stands on its own. The chapters can be read in any order, though there is a sense of flow from the early chapters to the later ones. At the end of the book various resources are given for those who wish to explore topics further.

### *How is each chapter made up?*

We begin with a section for **information**. This gives some basic information in answer to a common question depressed Christians often ask. We have kept this simple, though without cutting corners. We have avoided being technical. We hope it is instructive. We suggest you read it lightly, not getting too hung up on detail. If you want to go into something more deeply, we give a Resources section at the end of the book.

Next comes a section for **inspiration**. This gives either an uplifting story from a fellow sufferer, or a helpful quotation, or something interesting about an aspect of depression. It is put there to help you start thinking positively. You are not alone in your depression. Something like a quarter of all British people experience it. There are lots of examples of others who have battled with depression and overcome it.

Then we give a section for **meditation**. It might be that you feel so depressed you can't contemplate prayer or meditation or anything like that. If so, skip it and go on to the next section. But you may like to try meditating on a helpful piece of the Bible. We keep it short and

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always supportive. The Bible explores the very depths of depression. It can be a great resource when we are experiencing depression.

Last, there is a section for **perspiration**. We end each chapter with a suggestion of a simple exercise for you to have a go at. Actions speak louder than words. It is as we do things rather than as we read things that we will get better. The exercises are usually fun and easy to do. They aim to bring some pleasure and light into our lives. If we do them regularly they will build a pathway back to health.

### *How can I use each chapter?*

In lots of ways. You can read the book through in the order it is written. We try to make it flow in a progression from the first things on your mind when depression comes through to being ready to face normality again. But you may prefer to dip and mix and read the chapters in some other order. They all stand alone and can be used in any order.

You may prefer to concentrate on just parts of each chapter. You might want to read all the 'For information' sections, for instance. Or just do the meditations. That's fine too.

You might want to read some parts quickly and then go back and pick up the meditations or the perspiration exercises later. Both of these take a little time to do so this might suit you best.

Basically, you can dip and mix, read bits at a time, do things in any order you like and you won't be missing out. When we are depressed it often affects our concentration span and we prefer a 'butterfly' approach, alighting here and there rather haphazardly. This book is designed to allow you to be like that and still get the benefit of using it. You can pick it up and put it down again at will. You can jump about within it. You can skim through it or dwell on a part of it for a long time.

We suggest you make it work for you, in the way that seems to be best for you in your particular state of mind right now.

### *Two last tips*

Here are two last things we would like to suggest.

First, you might like to *find a nice place to read it in*. This could be anywhere – your sitting room, a seat in the local park, Starbucks,

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the bath. But we think you will get most out of it if you associate it with being in a good place that you find congenial. Furthermore, if you are going to attempt the meditations we give, then we suggest you have a regular place to do them: somewhere that is going to help you meditate the best. This will be somewhere you can be physically comfortable, where there is good light, which has pleasant surroundings, where you can be undisturbed, which you can use regularly and form a place of sanctuary which becomes special to you. You might like to have ways to mark it, like a vase of flowers or a candle or a pebble or a cross or piece of driftwood – anything that creates for you a place of safety and sanctuary.

Second, it is a really helpful thing to *keep a journal as you read the book*. Journalling is a recognized way of helping people get out of depression. By a journal we just mean a notebook of some sort or maybe some form of private blog (we don't recommend one on the web, but it's up to you). If it's a notebook, get a nice one, one you are attracted by. You can use it to write down your reactions to what you read. You can do some of the exercises in it. You can explore your feelings on paper. The journal can become a kind of companion, walking with you on your road to recovery. And you can keep it, to return to later and to add to when you have done with our book.



# 1

## *What is depression?*



### *For information*

Clinical depression is an illness, a medical condition. This means two things. First, we do not need to blame ourselves. Second, we can get better. Often, when we suffer with depression we blame ourselves and think that if only we tried more we would feel better, but that is as unlikely as if when we have a cough we tell ourselves to stop coughing. We might manage it for a minute or so but then the urge to cough becomes too great and we start again. All we can do is behave sensibly, take any medicine we have been given and wait for the cough to go. Similarly, with depression there are things we can sensibly do but the illness takes time to get better.

When we hear people say they feel depressed they are often meaning their mood is low, or they feel lacklustre or tired or unhappy and fed up. Usually such feelings go within hours or days and are often dependent on circumstances changing. That is not the illness of depression. A clinical depressive illness is not something we are able to snap out of, or where we can feel better and sustain that feeling. It is as though we are wrapped in a black cloud that will not disperse whatever we do.

We use the word ‘depression’ to talk about the weather. ‘There is a depression coming’ means that cloudy, wet and windy weather is on its way. The sun will be obscured, and the blue skies and sunny days are over. The sun is there but the clouds form a barrier between you and it, and all you see is the cloud and the drab, dull landscape. That is how it feels to be stuck in the illness of depression. We cannot see the sun ever, and all of life is sucked dry of its vibrancy.

