

The Christian and Mental Health:

Part 4: Depression

Depression is sometimes referred to as the “common cold” of mental illness. In terms of its prevalence, this isn’t inappropriate – nearly 1 in 5 adults in the UK are currently taking antidepressants, and depression is estimated to result in over 109 million lost work days and a cost of £9 billion to the economy every year.

However, in terms of its severity, the description is very misleading: a common cold, although unpleasant, is trivial; depression can be chronic, crippling and crushing. It is therefore of vital importance for Christians to think carefully about this topic, and for the church to be a safe place for people with depression to find help.

A) What is depression?

Since **Genesis 3** our world has been broken by sin. Whilst in God’s goodness we do enjoy times of joy and laughter, it is also true that every human has to contend with times of sorrow and sadness. This is ordinary human experience in a fallen world. Everyone feels depressed from time to time; clinical depression, however, is different. It is an illness of the mind, not merely the normal fluctuation of emotion.

Whilst it is impossible to draw an exact line between “feeling depressed” and “being clinically depressed”, depression is often associated with a range of other symptoms, such as difficulty with sleeping and eating, loss of desire and motivation for tasks that would ordinarily bring joy, avoidance of other people, increased anxiety, and so on.

A “text-book” definition of depression would use words like “persistent low mood”, but this doesn’t really convey the depth of feeling experienced by those who have it. **Psalm 88** in the Bible is one of the bleakest of the Psalms of lament, and it powerfully expresses some of the emotion of depression, concluding with the despairing cry, “*darkness is my closest friend.*” Another example in Scripture of depression is in the life of Elijah from **1 Kings 19**.

B) What causes depression?

There can be multiple causes and contributors to depression, and it is not always simple to pinpoint a precise cause. We can think of these causes/contributors in terms of three broad camps.

Physical factors – Depression is associated with an imbalance in brain chemistry, particularly a lack of serotonin. This could be due to illness, a side-effect of other medicines or treatment, genetic factors or hormonal imbalance (a common example being post-natal depression in women who have recently given birth).

But other physical causes or contributors relate to lifestyle choices. Lack of sleep, poor diet and inadequate exercise are all known to be associated with low mood.

Situational factors – Our life circumstances have a significant impact upon our mental wellbeing. Bereavement is not the same as depression, but one can lead to the other. Intense distress of some form of trauma (whether ongoing or in the past), problems in relationships, loneliness and loss of productivity (such as from redundancy or ill health) are all known to exacerbate mental illness.

Spiritual factors – As Christians we recognise that there is a spiritual reality to this world and that this impacts all aspects of life. Satan is known to afflict people with physical illness (see [Luke 13:16](#)) so there is no reason to doubt that he could also afflict with mental illness. The world's influence and ideologies can present us with great harm and distress. And the sin nature within us can lead us into sinful behaviours that harm our relationship with God and cause us grief.

Often a combination of factors will be behind instances of depression. For instance, in the life of Elijah there is a combination of physical exhaustion, hunger, intense distress and loneliness.

C) How is depression treated?

There are three broad camps of treatments commonly available.

Psychiatric treatments – These include medicines (the most common of which are Selective Serotonin Reuptake Inhibitors) as well as electro-convulsive therapy (in severe cases). Some Christians struggle with the concept of taking medicine that can affect the mind. However, this is much the same principle at work as in the drinking of alcohol, which is clearly not prohibited in Scripture (see **Psalm 104:15**, for example). Both medicines and ECT are well attested to be effective.

Psychological treatments – These include talking therapies such as counselling or CBT (cognitive behavioural therapy), which is a process designed to help people change their thinking and behaviour, so that they are no longer controlled by their feelings.

Wholistic treatments – What many would consider common sense is being increasingly stressed as essential for human wellbeing – that our overall lifestyles have a significant impact upon our mental health. Thus alongside whatever other treatments are offered, mental health practitioners are likely to explore regular patterns of sleep, diet, exercise and so on.

God's response towards the depression of Elijah (**1 Kings 19**) demonstrates a multifaceted approach – He provides the struggling prophet with sleep (v. **5, 6**), food (v. **6-8**), an opportunity to unburden himself through talking (v. **9, 13**) and then encouraging truth to reassure him (v. **15-18**).

D) How does the gospel speak to depression

Many Christians throughout church history have struggled with depression, and the church is very well placed to offer real and lasting help to those in need.

To the depressed Christian – it is important to stress that experiencing depression is not sinful, that taking antidepressant medication is not a sign of failure and that calling out to God in anguish and confusion is not a lack of faith. Because Jesus is the “*man of sorrows*” who bore “*our griefs and carried our sorrows*”, He understands our anguish from the inside out. He is with His people in the midst of the darkest valleys. And because Jesus is the risen Lord who has defeated sin and death, we have the certain guarantee that one day depression will be entirely forgotten.

Whilst it is natural for us to seek to be no longer in pain and sorrow, all situations of difficulty give us the opportunity to reflect upon ourselves and the condition of our lives. In His wise and good sovereignty, God has brought this about (**Romans 8:28**) and now may be a good time for some spiritual diagnostics.

To the Christian supporting someone with depression – depression is an illness, so it is important to remember that the person being helped cannot merely shrug themselves out of it. Instead, God’s approach with Elijah in **1 Kings 19** is enormously instructive.

Firstly, God shows love for the whole person. Elijah is given time to sleep and eat. Time and care are essential ingredients to providing real help.

Secondly, God invites Elijah to speak uninterrupted, and once he has finished He gives him the opportunity to do so again. We must cultivate the skill of being a good listener if we are to help those with depression.

Thirdly, God spoke encouraging truth to help Elijah. This wasn’t an accusation but focussed on the new tasks that God was giving Elijah, along with the reassurance that he wasn’t alone.

Caring for someone with depression can be costly and demanding, so it is important to establish wise boundaries. Ultimately, Jesus is their Saviour, not you. Providing support in the context of a loving community protects carers from being unhealthily burdened and the local church provides an ideal context for this.

E) Conclusion

Depression is a terrible reality for many people, including Christians. In a fallen world it may have many causes or contributors. There are numerous effective treatments available, but the church has tremendous scope to contribute to long-term help and change, as we bring the light of Jesus Christ.

F) Useful Resources

Collins, Sarah & Haynes, Jayne *“Dealing with depression”*