

# CHRISTIANS GET DEPRESSED TOO

Hope and Help for  
Depressed People

by

DAVID P. MURRAY



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*Christians Get Depressed Too*

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# PREFACE

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Perhaps you picked up this small book out of desperation. Perhaps, like many Christians, you are secretly suffering from mental or emotional distress—maybe depression or panic attacks—and you have tried many remedies but are growing no better, only worse. Or perhaps someone in your family is suffering in this way and you just don't know how to respond or help. Or possibly you are a pastor who feels helpless when you know that one of your beloved sheep suffers from mental distress. Whatever your reason for opening this book, I hope you will find something in these pages that will either help you in your suffering or that will help you in ministering to the suffering.

My choice of title, *Christians Get Depressed Too*, is intended to oppose and correct a very common Christian response to Christians suffering from depression: “But *Christians* don't get depressed!” How many times have you thought that, said that, or heard that? How many times have Christian pastors and counselors made this claim, or at least implied it? If it is true that

Christians don't get depressed, it must mean either that the Christian suffering from depression is not truly depressed, or he is not a true Christian. But if this notion is false, what extra and unnecessary pain and guilt are heaped upon an already darkened mind and broken heart!

This book will argue that some Christians *do* get depressed! In the first chapter we will consider *why* we should study depression. In the second we will ask, "How should we study depression?" Third, we will look at what depression is. Then we will look at the different approaches to helping people with depression. We will look at what the sufferer can do, what caregivers can do, and what the church can do.

Before we go on, though, perhaps you are wondering what qualifies me to write about this subject. That is a valid question, which I will answer in four ways. First, let me make clear that I am not a medical doctor. I have, however, checked all the contents with an experienced medical doctor and a Christian psychologist, both of whom have long and firsthand experience in treating many patients with depression.

Second, I was a pastor for twelve years in the northwest of Scotland, both in Wester Ross and the Outer Hebrides, areas with some of the highest rates of depression in the world. I have had multiple contacts with people who suffer from depression and also with some who have committed suicide. My motivation and methodology in writing, then, is not academic

but practical. I desperately want to help sufferers and those who minister to them. That is why this book is short and simple. Depressed people cannot read hundreds of pages. They need short, simple, yet substantive instruction and advice. I hope these pages meet that need both for them and their loved ones. So you might want to view these pages as “Depression 101,” or maybe, more accurately, “Depression 911.” It is an emergency guide, a brief explanation of the condition, the causes, and the cures for both the sufferers and the caregivers. In the last chapter, I will recommend some books on depression that are more comprehensive and exhaustive. I’ve also included an appendix on the sufficiency of Scripture.

Third, I have had close and painful experience with depression, anxiety, and panic attacks among friends and some of those I love most in this world. We have been through many deep waters together, and we have arrived on the shores of God’s persevering and preserving grace again. We bear the scars of battle, but we also have real-life stories to tell.

Fourth, I believe that God has given me a burden to write on this subject, a burden that I cannot ignore any longer. And I trust that with the God-given burden will come the God-given wisdom to write in such a way that will minister to God’s suffering people.

There are many different kinds of mental and emotional suffering. The area I am particularly concerned with here is the most common—depression. As anxiety and panic attacks are also commonly associated with depression (so much so that doctors are increasingly using the term *depression-anxiety* when referring to depression), much of what I write will apply to these distressing conditions also.

But why should we study this subject at all? Here are eight reasons.

### **Because the Bible Speaks about It**

There are numerous Bible verses that refer to the causes, consequences, and cures of depression and severe anxiety. The Bible does not address every cause and consequence. Nor does it point to every cure. But, as we shall see later, the Bible does have an important role to play in the treatment of Christians who are suffering from depression and anxiety.

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 and emotional 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.<sup>1</sup> A more persuasive case for a depression diagnosis can be made for Elijah (1 Kings 19:1–18), Job (Job 6:2–3, 14; 7:11), and various psalmists (Ps. 42:1–3, 9; Ps. 88). Steve Bloem, a pastor who has passed through deep and dark depressions, writes:

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

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1. *Spiritual Depression* (London: Pickering & Inglis, 1965), 93ff.



sin. It was a legitimate part of their relationship with God. They interacted with Him through the context of their depression.<sup>2</sup>

Another significant verse is, “The spirit of a man will sustain his infirmity; but a wounded spirit who can bear?” (Prov. 18:14). The human spirit can help people through all kinds of bodily sickness. However, as Steve Bloem points out, “When the healing mechanism is what needs to be healed, that’s a serious problem.”<sup>3</sup>

### **Because It Is So Common**

One in five people experiences depression, and one in ten experiences a panic attack at some stage in his life. An estimated 121 million people worldwide suffer from depression. Studies show that 5.8 percent of men and 9.5 percent of women will experience a depressive episode in any given year. Suicide, sometimes the end result of depression, is the leading cause of violent deaths worldwide, accounting for 49.1 percent of all violent deaths compared with 18.6 percent in war and 31.3 percent by homicide.<sup>4</sup>

It is also not uncommon among professing Christians. Indeed, these days there would appear to be an

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2. Steve and Robyn Bloem, *Broken Minds* (Grand Rapids: Kregel, 2005), 204.

3. *Ibid.*, 205.

4. *Ibid.*, 54–55.

epidemic of depression, anxiety, and panic attacks among Christians—both young and old. This is partly because of the depressing state of the church and the nation. Frequently we hear discouraging news about church splits or problems and about Christians backsliding or falling into temptation. Then there is the secular and anti-Christian direction of many governments as they continue to dismantle the Judeo-Christian laws and standards that our civilization was built upon and as they attack and undermine family life. 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.

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.

### **Because It Impacts Our Spiritual Life**

We are made up of body and soul. However, there is a third dimension that links or overlaps these two elements, which we can also view as our thoughts and feelings. When our body is sick, even with a common cold, often our spiritual life and our thinking and feeling processes are affected as well. When our spiritual life is in poor condition, our thoughts and

feelings are affected, and sometimes our bodily health and functions also. It is, therefore, no surprise that when our mental and emotional health is poor and when our thinking and feeling processes go awry, there are detrimental physical and spiritual consequences. The depressed believer cannot concentrate to read or pray. As she doesn't want to meet people, she may avoid church and fellowship. She often feels God has abandoned her.

Faith, instead of being a help, can sometimes cause extra problems in dealing with depression. There is, for instance, the false guilt associated with the false conclusion that real Christians don't get depressed. There is also the oft-mistaken tendency to locate the cause of our mental suffering in our spiritual life, in our relationship with God, which also increases false guilt and feelings of worthlessness.

### **Because It May Be Prevented or Mitigated**

Many people have a genetic predisposition 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 that may be involved in causing depression can sometimes help prevent it, or at least mitigate and shorten it.

Others, with no genetic predisposition to depression, can fall into it, often as a reaction to traumatic life events. Again, having some knowledge of mental

and emotional health strategies and techniques can be especially useful in preventing, mitigating, or shortening the illness.

An additional benefit of having some knowledge about depression is that it will prevent the dangerous and damaging misunderstanding that 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.

### **Because It Will Open Doors of Usefulness**

Increased understanding of depression will make us more sympathetic and useful to people suffering from it. 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, the Bible says, we are effectively doing the same thing if we try to help a depressed friend with superficial humor and insensitive exhortations to cheer up (Prov. 25:20).

In later chapters we will look in more detail at what friends and caregivers should say to and do for those suffering from depression and anxiety. However, the general rule is that those who listen most and speak least will be the most useful to sufferers.

### **Because It Is So Misunderstood**

John Lockley writes: “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.”<sup>5</sup>

There is a terrible stigma attached to depression. This is the result of widespread misunderstanding about its causes, its symptoms, and the cures available. Some of the misunderstanding is understandable. Unlike cancer, heart disease, or arthritis, there is no scan or test that can visibly demonstrate the existence of depression-anxiety.<sup>6</sup> 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 that there is no problem. Or, if we are Christians, we may often wrongly conclude that our spiritual life is the problem.

This misunderstanding is addressed in the excellent book *I’m Not Supposed to Feel Like This*, written by a Christian pastor, a Christian psychiatrist, and a Christian lecturer in psychiatry. Near the beginning of the book, the authors summarize what they do and 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

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5. *A Practical Workbook for the Depressed Christian* (Bucks: Authentic Media, 1991), 14.

6. It looks like the increasing sophistication of MRI and PET scanning will make such tests possible in the near future.

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.<sup>7</sup>

It is absolutely vital for Christians to understand and accept that while depression usually has serious consequences for our spiritual life, it is not necessarily caused by problems in our spiritual life.

### **Because It Is a Talent to Be Invested for God**

Like all affliction in the lives of Christians, depression should be viewed as a talent (Matt. 25:14–30) that can be invested in such a way that it brings benefit to us and others as well as glory to God. Christian psychologist James Dobson observed, “Nothing is wasted in God’s economy.” That “nothing” includes depression.

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

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7. Chris Williams, Paul Richards, Ingrid Whitton, *I’m Not Supposed to Feel Like This* (London: Hodder & Stoughton, 2002), 10.

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.<sup>8</sup>

God often uses broken people. In *Passion and Purity*, Elisabeth Elliot quotes 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 (39).”

### **Because We Can All Improve Our Mental and Emotional Health**

Most Christians try to take preventative (and curative) measures to enjoy a good, healthy physical 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 proven techniques that can be

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8. Dennis Greenberger and Christine Padesky, *Mind over Mood* (New York: Guilford, 1995), 1.

used to achieve good mental and emotional health, with beneficial side effects for our bodies and souls.

I have never been diagnosed with any kind of mental illness. However, like most people, and especially like most pastors, I have had low points in my life, times of mild to moderate depression and anxiety. Sometimes this was brought on by bodily pain and illness and sometimes by my thinking processes going wrong. What I now know about improving and maintaining mental and emotional health and what I hope to communicate in the following chapters 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 and emotional 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 by it, but who are experiencing long-term, low-level depression-anxiety, which is having its own side effect on their bodily health and spiritual lives. It would not be too difficult for them to learn some sound strategies and techniques that will improve mental health and, consequently, their bodily and spiritual health. Some of these are covered in this book.

In the next chapter, we will consider the attitude and spirit in which we should study depression.