

## Depression and Pastoral Care

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Depression is classified as one of the main “killer” diseases in the contemporary world. [Statistics from WHO reveal that about 150 million people are affected by this worldwide. In the last 45 years suicide rates have increased by 60%.](#) Approximately one million people will commit suicide annually.

There is a Chinese proverb which says: *Instead of cursing the darkness, light a candle.* While those who are in a state of depression curse their lot and may cause others to do the same with them, Christian faith and trust in life invites us to help them to light a candle of hope, because hope is a strong antidote against depression and a powerful cure for it. For Christians, this pastoral care is an important, nay indispensable, accompaniment to other treatments such as medication, therapy, counseling and loving moral support of near and dear ones, and it can help to bring true solace and relief to persons subject to depression.

The Holy Bible abounds in episodes of people who could have become depressed, but which had a happy ending thanks to the strength received from God. Many of the episodes concern cases which happen even today and often lead to depression, viz. the lack of an offspring, or a rebellion against one’s leadership, a cold shoulder from subordinates, ill treatment from one’s near and dear ones, a sinful life, a terminal illness, unhealed memories, false accusations, etc. Here are some flashes into the *Old Testament*.

☞☞ [Cain](#) who murdered his brother, Abel, and was sunk in despair. God punished him, but did not reject him (Gen4:8-16)

☞☞ [Abraham](#) had no offspring. Rather than plunging into depression, a perplexed and bewildered Abraham believed in God’s promise with “hope against all hope” and Isaac, the son of promise, was born (Gen 12:1-21:7).

☞☞ [Moses](#) to whom God entrusted his chosen people. During their forty-year wandering in the desert the people forgot God’s many wonders in their favor against the Pharaohs of Egypt and rebelled against Moses, criticized his leadership, made difficult demands like asking for food and water in the desert, worshipped idols of their own making, and led Moses almost to despair. Yet, Moses was not depressed: rather he resorted to the Lord and faced each of those challenges successfully (Ex 3:1 -14:30).

☞☞ [Tobit](#) was a man who walked in the ways of truth and righteousness, did heroic acts of charity giving bread to the hungry and clothes to the naked, spending his nights burying the dead notwithstanding his neighbors scoffing at him. At the age of fifty-eight he was blinded by the droppings of a sparrow. He could have lamented: “Why me, Lord?” But he didn’t. He

endured his lot with patience for eight long years until God sent the archangel Raphael to cure him (Tob 1:3-14:15).

✍✍ *Job* was known for his piety, honesty and patience, and yet he suffered the loss of his material possessions and the death of his sons and daughters. He even lost the sympathy of his wife and close friends. At first, he resisted bravely to such misfortunes saying: “The Lord has given, the Lord has taken away: blessed be His holy name”. But after some time his patience ran out and he succumbed to depression and “cursed the day he was born”. God challenged him and made him see how shallow his protests were. Job repented, overcame his depression and was rewarded with many more possessions than those he had lost (Job 1:1-42:16).

✍✍ In the *New Testament* too we have many episodes which could help persons who are subject to depression or tempted to commit suicide. In the first place, there is the Blessed Virgin *Mary, the Mother of Jesus*, who boldly weathered the storms of Joseph her husband’s doubts about her integrity, the wrath of King Herod who sought to kill Jesus soon after His birth, the anguish of losing her son for three days in Jerusalem when He was twelve years old, the opposition of the Scribes and Pharisees to Jesus’ salvific mission and the cruelty of His unjust condemnation and death on the cross. As the proverbial *mulier fortis* in the Bible, Mary, far from being depressed, met each challenge with an indomitable faith and an amazing trust in God.

✍✍ There were *Mary of Magdala* (Mt 26:6-13), the *Samaritan woman* (Jn 4:5-26), *Zaccheus* (Lk 19: 2-10), the *woman caught in adultery* (Jn 8:1-11) and others who were steeped in vices and low in people’s reputation, and yet in Jesus’ company they found peace, forgiveness and respectability. In him they found someone who did not condemn, but who understood, forgave and healed.

✍✍ Among the Apostles there was *Judas* who betrayed Jesus and *Peter* who denied Him three times. Both of them had played foul and surely had a sense of guilt for the way they had treated Him whom a few hours before at the Last Supper they had acclaimed as their Lord and Master. Judas got depressed because his conscience nagged him for betraying an innocent person and he was driven to suicide, while Peter shed tears of repentance and was confirmed by Jesus as the future leader of His Church: “Feed My lambs, feed My sheep” (Mt 27: 3-5).

Such quotations and episodes with a happy ending from the Bible can help pastoral agents when they assist persons who are on the brink of depression or are drowned in their cup of woes. They can help to raise their morale and to encourage them to lift up their eyes to heaven from where comes hope, joy and peace.

Of course, both in the Old and New Testaments there are instances of frustration and depression which have ended badly: as, for instance, *King Saul* who had himself killed when he was defeated in battle on the hills of Gilboa (1 Sam

31:1-12), and - as we mentioned before - the Apostle **Judas Iscariot** who, after he had betrayed the Master, felt remorse and committed suicide (Mt 27:3-5). But these cases are rather exceptions than the rule in the Bible, which encourages everyone to have faith and trust in God. The Bible, in fact, is a “book of hope” centered on Jesus Christ, the Son of God who became man and died an ignominious death on the cross in order “to give life in abundance” (Jn 10:10) to every man, woman and child.

### **Some Pastoral Observations**

Depression, according to experts, is an illness of the emotions and its classification as a mental illness does not make it any less real or painful. It is a disturbance characterized by varying degrees of fluctuations in moods, viz. sadness, disappointment, loneliness, hopelessness, self-doubt, and guilt. These feelings can be quite intense and last for a long period of time. Daily activities may become more difficult, but the individual may still be able to cope with them. It is at this level, however, that feelings of hopelessness can become so intense that suicide may seem to be the only solution. A person going through severe depression may even experience a desire for complete withdrawal from daily routine and/or the outside world. Experts in fact tell us that depressed persons live in a closed world and feel that no one can help them. At times, even God is dismissed from their lives. And - as the proverb goes - “when you shut God out of your life, you shut yourself in, i.e. in the dungeon of your emotional chaos”.

The return of a depressed person to a balanced mental and emotional state is not an overnight process, and it may be very painful. There could be leftover baggage of hurts suffered, wrong attitudes, incorrect information and so on. This can slow down the process of recovery. On the other hand, depression is nothing to be ashamed of, and is not a sign of weakness. It is a common ailment and anyone, even the strongest in character, can be faced with situations which would lead to depression. Depression is treatable, whether by medication, by therapy and counseling. Persistent prayer of close relatives and friends for and with the depressed person will facilitate the process of emotional healing. **One need not, therefore, feel guilty about being depressed. Past failures can become stepping stones to a brighter future.**

As a general rule, therefore, pastoral agents dealing with depressed people should have a particular sensitivity to their feelings and be firmly convinced that, no matter how difficult the case may be, they can bring them relief. **This optimism is the first requisite of those who are called to assist depressed persons.** Pastoral agents must be persons of deep faith and hope. I would like to mention some areas to which they must be especially alert.

1. **Importance of forgiveness.** A person may get into a severe depression because he is full of resentments and hurt feelings, and he finds it difficult, almost impossible, to forgive those who have hurt him. **In order to get such a depressed person back to normal he must be led to forgive those who were the cause of such hurt feelings.** Depressed persons often close themselves in self-pity and self-

justification, they lick their wounds, so to speak. They must be taught and helped to overcome this hurdle. The example of Christ on the cross forgiving those who had unjustly tortured and crucified him can be an invitation and an inspiration to do the same.

We must be wary of a half-hearted forgiveness, viz. one given with the lips, but not from the heart. Everyone knows the [story of Coreen ten Boom](#), a Dutch lady who lost her parents and many relatives and friends at the hands of the Nazis during World War II, just because they were Jews. She and her sister were shunted from one concentration camp to another in Germany. It was only by God's providence that she was released from the camp at Ravensbrück, a week after her sister died there. As a Christian, Coreen realized that she had to forgive those who had harmed her near and dear ones. She felt a deep peace when she made the act of forgiveness. She then traveled the world over giving this message of love and forgiveness as taught by Our Lord in the *Our Father* and concluded with these words: "If you do not forgive others, then neither will my Father in heaven forgive you". But one day in Germany Coreen met face to face with the one who had ill-treated her and her sister so badly in the concentration camp. The guard from Ravensbrück held out his hand begging for pardon and reconciliation. All the bitter memories and the traumas she had suffered flashed back to Coreen's mind, and she felt completely paralyzed. After a couple of minutes, however - she tells us in her book *Tramp for the Lord* - the grace of God overwhelmed her and she embraced her former Nazi persecutor. That was the time she forgave completely, and experienced God's peace which never left her again.

2. ***Correct priorities.*** A person may have gone into depression because of false or mistaken priorities, when - for example - one's professional career has taken precedence over one's family's well-being or when worldly pursuits eclipse one's personal pursuit of holiness. Unbalanced priorities can often be the cause of constant friction and depression. They must be set aright before healing can take place.

3. ***Thought of death.*** Some people get depressed with the thought of death: their own or that of their near and dear ones. [Christian faith and hope will help them to look far beyond the barriers of death](#) to the assurance of their bodily resurrection. Jesus gave us a foretaste of His divine power when He rose up Jairus' daughter (Lk 8:41-56) and a widow's only son from the dead (Lk 7:11-17), when he brought Lazarus back to life after he had been dead for four days (Jn 11:1-44), and when He himself rose from the dead the third day after his death on the cross. Jesus is a God to whom nothing is impossible, who found his way out of a grave, and who has pledged to raise up our mortal bodies on the last day "when every tear will be wiped away and death shall be no more" (Apoc 21:4).

4. ***Good Friday is a prelude to Easter Sunday.*** Jesus taught this while walking with His disciples to Emmaus (Lk 24:13-35). The pastoral care of the depressed should therefore highlight the value of the cross of Jesus Christ and the Christian meaning of suffering. There can be no Easter Sunday without a

preceding Good Friday. Very often, spiritual benefits follow from depression, and seldom the other way around.

5. **Dark night of the soul.** It will be wise to say a word here of the possibility of a mystical meaning to depression in some cases. I am referring to the “dark night of the soul” experienced by so many mystics: St. John of the Cross, St. Theresa of Avila, St. Bernadette, and others. The recently beatified Mother Teresa of Calcutta too lived under a continuous mystical experience she called “the darkness”. It was only after her death that this heroic aspect of her life was revealed. Hidden from all eyes, even from those closest to her, was her interior life marked by an experience of a deep, painful and abiding feeling of being separated from God, even rejected by Him, along with an ever-increasing longing for His love. This “painful night” of her soul began around the time she started her work for the poor and continued till the end of her life, and it led Mother Teresa to an ever more profound union with God. It was almost as if Jesus’ “I thirst”, which she had experienced on the inspirational journey from Calcutta to Darjeeling in 1946, was accompanied all through her life with the same Jesus’ “My God, my God, why have you forsaken Me?” Through this darkness she rose to heights of sanctity and mystically participated in the thirst of Jesus on the Cross, in His painful and burning longing for love, and shared in the interior desolation of the poor. And yet, she went about boldly with a smile, carrying out her normal activities in favor of the poorest of the poor, meeting with popes and kings, rulers and commoners, and receiving innumerable awards, including the prestigious Nobel Peace Prize in 1979.

6. **Christian meditation.** There is an important development with regard to spiritual therapy for depression. The world over people are trying to achieve peace of mind by practising yoga, vippassana, zen and transcendental meditation and even resorting to superstitious and pseudo-religious New Age practices propagated by fengshui, vaatsu, reiki, etc. All these are mere palliatives in comparison with what the Church can offer. The Catholic Church has its own well tried out practices which would help solve cases of depression, or prevent them. I am speaking of Christian meditation which leads people to a deep personal union with the Triune God, in contrast with the aforementioned non Christian practices which speak of a union with an unknown and impersonal being or force. Unfortunately, in today’s hectic lifestyle, the meditative and contemplative dimension of our Christian identity are sadly missing. Christians must be taught the art of Christian meditation so as to be able to face the ups and downs of everyday life and to meet the challenge “to be in the world but not of it”. Christian meditation could be used with much success by pastoral agents both as preventive therapy, and also as a curative one for depressed cases.

## **Conclusion**

Our Lord Jesus Christ described the role which Christian faith and trust in life can play in a person in the parable of the house built on a rock, in contrast with the one built on sand. The house built on a rock, says Jesus, can withstand the rains, floods, winds - and we can add, even earthquakes - while the one built on

sand collapses at the least provocation. As an antidote to depression in some cases and a cure for it in others, this parable underscores the importance of giving our spiritual lives a strong faith and hope foundation.

Pastoral care for the depressed is a must today: it must enter every home, parish, community, diocese and society at large. It is not a passive apostolate, just helping people to accept their situation with resignation, but requires a pro-active attitude which helps people to get out of their shackles of negativity and to breathe the freedom of the sons of God. It requires pastoral agents who are patient listeners and have a compassionate heart, who lovingly persevere in their determination to help a depressed brother or sister to come out of the dungeon of one's seclusion. Much will depend on the spiritual and moral strength of the pastoral agent, and his/her capacity to instill hope and confidence in the person being assisted. Only then will the agent be able to discern the causes of the problem assailing the depressed person and help in solving it with the spiritual resources we have mentioned earlier, of course in tandem with other means available, like medication, therapy, counseling, and loving moral support. Spiritual therapy must go hand in hand with other therapies. The sturdier the rock on which the agent will rebuild the life of a depressed person, the easier will it be to accompany him from "cursing the darkness" to "lighting a candle" of hope, and the more such candles are lit, the faster will be the recovery of the depressed person from emotional chaos to a life truly worth living.