## **Against Depression**

Rev. Paul Beckel Bellingham Unitarian Fellowship April 10, 2016

"If there is a single definition of healing it is to enter with mercy and awareness those pains, mental and physical, from which we have withdrawn in judgment and dismay."

— Stephen Levine,

A Year to Live: How to Live This Year as If It Were Your Last

"Oh God just look at me now... one night opens words and utters pain... I cannot begin to explain to you... this... I am not here. This is not happening. Oh wait, it is, isn't it?

I am a ghost. I am not here, not really. You see skin and cuts and frailty...these are symptoms, you known, of a ghost. An unclear image with unclear thoughts whispering vague things...

If I told you what was really in my head, you'd never let me leave this place...."

— Emily Andrews,

The Finer Points of Becoming Machine

## **WELCOME**

All who come in the spirit of goodwill are welcome here. Today we're going to speak about mental illness — a topic that doesn't need to be awkward, but because it has been taboo for so long, our ignorance and denial persist in a self-perpetuating cycle. Let's begin by reminding ourselves and one another of the spirit in which we come together: Love is the spirit of this fellowship and service gives it life. Celebrating our diversity, and joined by a quest for truth, we work for peace, and honor all creation. This is our covenant.

**GATHERING SONG** *I Wish I Knew How* #151

**CHILDREN'S CHOIR** How Can I Keep from Singing?

**REFLECTIONS** Rev. Paul Beckel

I've been taking medication for depression for over 10 years. It has not eliminated my bouts with unexplainable lethargy, despair, and self-doubt, but it has made a tremendous difference. When I say "unexplainable" what I mean is that there is insufficient circumstantial cause for these feelings. Whereas sometimes there is a reason for any of us to feel terrible, sad, discouraged, even immobilized by grief—this is perfectly normal and not a medical malady when circumstances might reasonably lead us to feel this way.

Those who experience the disease, categorized of course as a mental disease, may have mild symptoms or severe. It can be long lasting or intermittent. Very often it responds well to

medication and therapy. When it doesn't the results can be catastrophic, both for the patient and for families and friends.

Weirdly enough, though, a prominent psychiatrist, Peter Kramer, who writes and gives public lectures on depression, has found that whenever he takes questions after a talk, someone will <u>always</u> ask some version of the question: "Well, but would you have treated Van Gogh?"

The question popped up so many times that Kramer ended up writing another book with an extraordinarily straightforward title: he called it *Against Depression*. He writes about the pervasive and maddening hesitation he encounters in society about treating depression as a disease...or, even if it is a disease, the perception that maybe it's ok to leave untreated.

When he lectured in Scandinavia Kramer would repeatedly get the question, "Well, what about Kierkegaard?" Apparently no one wanted to lose the great cultural contribution fed by the disabling existentialist angst of their most famous writer — Kierkegaard's personal agony be damned.

This is a puzzling social response to disease. Not always, I should be clear—for the most part family and friends of the depressed, people directly impacted, would like to see depression eradicated as surely as smallpox.

But society at large looks at mental illness not only with stigma but with some weird forms of denial. And this makes it challenging not only to develop systematic medical responses, it also exacerbates the internal conundrum for patients attempting to decide for themselves: what is happening here? Is this just my personality and my most authentic self? Should I do something about this or not?

Depression can be perceived, perniciously, as not so bad when it takes the arrogant or the hyperactive down a few notches. It can be romanticized as an artist's unflinching insight into the tragic nature of reality or the alienation of modern life.

And on a completely different front, Kramer felt the need to make an argument "against" depression because it is so often thought of as simply a character flaw or moral weakness, not something to elicit compassion or empathy.

But more than anything, I think, depression and other mental illnesses are just hard to talk about, and therefore not talked about, resulting in a self-perpetuating cycle of ignorance, denial, and disconnection.

Which is depressing. Really, our collective response is like a social disease: in that there is no reason it has to be this way. And there are tremendous social and economic costs for our persistent unwillingness to see what is real. For individuals, the cost can be agitation, numbness,

paralysis of action, or self-destructive behaviors. And the longer it goes without treatment, the more likely it is to recur down the line.

The National Alliance on Mental Illness has a Washington State chapter as well as a Whatcom County chapter. Our collection today will go to support the local chapter which provides support, education, and advocacy for all affected by mental illness through Education, Support Groups, Referrals to resources, and opportunities to volunteer so that those with mental illness and their families can be of mutual aid to one another.

I should also mention in this context the BUF Pastoral Care Team. We do not provide long term or professional counseling, but sometimes you might just need someone to listen, to step with you through a crisis situation, or someone to help you find courage to take the step you need toward other professional resources. I, along with BUF's seven pastoral care ministers are available for confidential support through visits at your home, at BUF, in the hospital, or even on a walk around the neighborhood.

Contact information for me and for the Pastoral Care team is on the inside of your order of service today. Or just call the BUF office.

**SINGING TOGETHER** Blessed Spirit of my Life #86

**MEDITATION / SILENCE (3:00)** 

**REFLECTIONS – NAMI** 

A representative from the National Association on Mental Illness spoke about her own struggles with bipolar disorder—as a medical, family, and social challenge, and also as a quandary of perspective and meaning.

## SOCIAL & ENVIRONMENTAL JUSTICE COLLECTION - for NAMI

**SENDING SONG** *To Mercy, Pity, Peace and Love* #93

## **BENEDICTION**

Throughout the history of our Unitarian Universalist movement we have upheld a vision of hope overcoming fear. Whether it is through god standing with us, or community encircling us, or a tiny spark of dignity within us, we have known the power of love. Let us continue to respond to its yearning.