

Defeating Depression

LESLIE VERNICK



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ADVISORY

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What Is Happening to Me?

*My heart is stricken and withered like grass,
so that I forget to eat my bread. Because of the
sound of my groaning my bones cling to my skin.*

PSALM 102:4-5 NKJV

Puffy red blotches covered Mary's creamy porcelain skin. As she spoke, tears ran down her nose. Embarrassed, she quickly brushed them away. "I don't know what is wrong with me! I'm not myself. I used to be a capable person, but I can't seem to do the simplest things anymore. I cry at the drop of a hat. I can't sleep. I don't even enjoy my kids."

I asked Mary how long she had been feeling this way. She told me that over the past few months she had noticed a gradual change in herself. At first she felt sad, then empty and sort of lost, and finally she grew more and more numb. She wasn't sure why. "I don't care about anything anymore. Am I going crazy? I'm so scared. I want to feel like my old self again."

"No, Mary, you're not crazy," I responded. "I think you're depressed. I'm glad you've come for help."

What Is Depression?

Depression is a physical, mental, spiritual, and emotional response to something that is wrong. The million-dollar question is, "What

is wrong?”—and sometimes there are no simple answers. We will tackle this question of *what is wrong* and the causes and triggers of depression more thoroughly in chapter 2. For now, understand that most often what is wrong is multifaceted. One thing is certain, though. Whatever the cause, depression can be devastating and impacts our whole person, as well as those we love.

Once Mary understands that the symptoms she experiences have a name—major depression—it is crucial that she also takes the time to decipher what her depression is telling her. If she doesn't give her symptoms the attention they deserve, she will not be able to identify the underlying problem(s), learn the skills, or make the changes she needs to make that will allow her to be less vulnerable to depressive episodes in the future.

First, let's look at the symptoms of depression.

How Do I Know I Am Depressed?

For many women, depression is a generic word we use to describe how we feel when we're down in the dumps, stressed-out, overwhelmed, hurt, or sad. Many of us have had bad days or even a bad couple of days, but then we start to feel better and our *depressed mood* passes. Those who lean toward a melancholy temperament or struggle with bouts of depressed feelings for a few days will benefit greatly from reading this book and practicing the exercises in it. Doing so can help you prevent your symptoms from becoming more severe or lasting longer.

Unfortunately, there are no blood tests to determine if you are depressed. Below is a general checklist of the physical, emotional, mental, and spiritual manifestations of depression that most physicians and mental health professionals would use to determine if a person was clinically depressed. As you read through all the symptoms below, place a check mark next to the symptoms that describe you. If you are averse to writing directly in your book, make a photocopy of this page and the next page to mark.

Physical Symptoms of Depression

- Chronic aches and pains that are not explained by other medical conditions
- Sleep disturbances (waking early, insomnia, extreme fatigue)
- Not taking care of your appearance the way you used to
- Eating disturbances (excessive overeating, loss of appetite and weight)
- Loss of sexual interest
- Low energy, feeling of heaviness, lethargy, slowed speech

Emotional Symptoms of Depression

- Feeling guilty
- Feeling worthless and undeserving of anything good
- Feeling disappointed in oneself
- Feeling sad for no apparent reason, excessive crying
- Feeling numb, as though the plug has been pulled out and there is no “life” in you
- Loss of interest in things previously enjoyed
- Feeling hopeless or pessimistic about the future
- Irritability, restlessness, agitation
- Anxiety, possibly with panic symptoms

Mental Symptoms of Depression

- Inability to concentrate
- Can't make decisions the way you used to
- Recurrent thoughts of death and/or suicide
- Difficulty thinking and remembering
- Negative view of self, others, and life
- Attitude of “it doesn't matter” and “I don't matter”

Spiritual Symptoms of Depression

- Morbid preoccupation with faults and/or failures
- Excessive guilt, with no relief through prayer and forgiveness
- Hopelessness
- Feeling abandoned or rejected by God
- Lack of meaning or purpose in life; sense of emptiness
- Loss of interest in spiritual things that were once meaningful (prayer, Bible reading, church, worship, and/or Christian music)

Relational Symptoms of Depression

- Withdrawal from friends, church, work colleagues, and family

Now that you have checked all the symptoms that apply to you, go back over your check marks and evaluate whether you experience each checked symptom in a mild, moderate, or severe way. Write your answer down next to your check mark. As you do this, also note about how long you have had each symptom. Has it been a few days? Weeks? Months? Years?

Here's an example:

- Feeling worthless and undeserving of anything good—*moderate intensity, felt this way all my life*

After you have finished, step back and take a big picture perspective. Look at how many symptoms you checked, how severe your symptoms are, and how long they have lasted. Are your check marks more densely clustered in one category over another? Evaluating your symptoms and answering these questions are important keys that can begin to unlock the mystery of your depression. Your unique responses begin to give you some clues as to what might be wrong.

Every symptom will not apply to everyone, even if you are seriously depressed. You may only have a few of these symptoms and still

be depressed, especially if your symptoms have persisted longer than two weeks and are moderate to severe. If you answered yes to some of the questions and your symptoms have lasted longer than two weeks, I highly recommend that you make an appointment to see a Christian counselor for a professional opinion. You may also want to take a confidential depression screening test online through The National Mental Health Association. (You will find them at www.nmha.org.)

Professionals consider many factors when making the diagnosis of clinical depression. Sometimes it isn't easy to diagnose because there are other problems that can coexist with depression. For example, some women are depressed but don't realize it because they also struggle with an anxiety disorder, drug or alcohol abuse, marital problems, or a physical illness that can mask a coexisting depression. Some of the signs professionals look for to ascertain whether someone is depressed or not are how long the symptoms have persisted, how severe they are, and whether the person is having trouble functioning at home or at work. The presence of suicidal and/or self-destructive thoughts is a clear indicator of depression.

Some symptoms of depression are easier to notice than others. Women have described feeling hopeless, sad, numb, or anxious. They find no pleasure in things they once enjoyed. Others say they can't concentrate, make decisions, or think clearly. When depression is severe, a person finds it hard to do the basics of self-care, such as shower, eat, or get dressed, and thoughts of death or suicide are common.

Listen to how some women who were depressed felt:

I lost interest in everything. It was difficult for me even to do the things I enjoyed the most. I also withdrew from everyone. I didn't want to talk on the phone or do anything with others. It became a chore to go to work. I didn't want to get out of bed. On the weekends I preferred to stay in my pajamas and remain in bed for as long as possible. Even the easiest things became chores.

It happened so slowly that I didn't even know it until one day when I couldn't get out of bed and I couldn't stop crying. It was then I knew I needed help. ~Donna

I had been sad for a long time, but this was way past sad. I had trouble getting out of bed. I was extremely tired and exhausted. I cried constantly. Yes, I did have reasons to be sad and to cry, but I couldn't stop crying. I had trouble deciding what to wear and would break down and cry over little everyday decisions I never used to think twice about making. ~Cindy

It is difficult to describe the state of depression to someone else, especially if that person has never experienced it. The severity differs from feeling like something is just not right in the world to feeling like nothing is right in the world. The range of emotion is anywhere from sad to suicidal. I think I have experienced all of these. Depression can be utterly debilitating and it can be deadly. It is soul destroying. ~Cheryl

We can all experience these feelings from time to time, but to lesser degrees and for less time. It is the intensity and duration of these symptoms that may indicate you are experiencing a more serious depression.

Seeing yourself in some of these symptoms may feel frightening to you. Many times we don't want to admit that we're slipping over the edge of a steep cliff and we can't stop it. Maybe you can identify with Diane or Gwen:

Intellectually, I think I knew I was depressed far sooner than I chose to admit, but I wasn't of the mindset that depression was actually a real issue. Even though I could answer yes to most, if not all, of the questions on depression surveys, I still wouldn't and/or couldn't admit it to myself, let alone someone else. ~Diane

During my first incident with depression, I didn't initially label the symptoms as depression. I had several physical and emotional symptoms that I later realized were characteristic of depression: difficulty concentrating, memory lapses, sadness, loss of interest in previously enjoyed activities, frequent thoughts of suicide or wishing I were dead, fatigue, hopelessness, and weight gain. I knew I was not my normal self but did not want to consider the possibility of depression. However, the most current episode of depression was more recognizable. Although it was not as severe, I was more aware of the characteristics that had accompanied the previous episode. And yet there is still the desire to not label it as depression and, consequently, a denial of the symptoms.

~ Gwen

Don't Ignore Your Depressive Symptoms

God has led you to read this book for a reason, and he wants you to get the help you need to get better. If you are experiencing some of these symptoms, especially if they have lasted longer than two weeks, please don't ignore them, hoping you'll get better or they'll go away on their own. Psychiatrist Dr. Michael Lyles says, "The impact of untreated depression on the brain is enormous. There is an area of the brain that generates new brain cells, a sort of neuronal 'greenhouse' called the hippocampal gyrus. Untreated depression has been associated with irreversible damage and atrophy to this area, thus depriving the brain of the ability to replace aging and dying cells." He also adds, "The brain effects of untreated depression can affect other organs of the body."¹

In addition to the physical consequences of untreated depression, there are serious emotional and relational consequences. Untreated depression accounts for 10 to 13 percent of all suicides. A depressed woman may resort to self-medication through alcohol, drug abuse, or other addictions in an attempt to ease her pain. Divorce, abuse, job loss, and financial ruin can often be traced back to untreated depression.

Listen to Sarah's experience:

My resentment of the lack of support and friendship with my husband has taken me to many, many dark and lonely places in addiction. Resentment and fear in general have fueled these addictions. I have sought to relieve my depression and lost dreams through alcohol, cigarettes, and food.

~ Sarah

If you recognize several of the symptoms of depression in yourself, please make an appointment with your medical doctor for a checkup and evaluation in addition to seeing a Christian counselor. You may have one of several medical conditions that mimic the symptoms of depression and that medication will easily remedy. One of the most common and underdiagnosed conditions for women is hypothyroidism (an underactive thyroid), which is detected through a simple blood test. If your doctor rules out a medical condition and thinks you are depressed, he or she may recommend that you begin taking some antidepressant medication.

Many Christian women have ambivalent feelings about antidepressant medications as well as about personal counseling. They may see such things as yet more evidence of personal failure. Or they may have been told that with enough faith they wouldn't need those things. For others, the financial cost of the medication and counseling are prohibitive, especially if they don't have medical insurance. Some women fear that taking medicine will make them feel like a zombie or that they will become addicted to their medication.

Here are the words of some women who struggled with this issue:

I was leery about taking medication because I did not know if it was biblical. Once I received peace from God that it was okay, I still struggled on and off for seven months in my commitment to taking medication. My pride did not want to accept the fact that I needed to be dependent on something in addition to God. I felt weak.

~Stacy

The first time the medication was prescribed, I didn't get it filled right away. I really felt like I had failed. I was embarrassed...and ashamed. It even took me awhile to begin taking it once I did finally get the prescription filled. I made sure I took it to a different pharmacy than the one where I got all of the other family medications. I was so afraid someone (even my husband) would find out. There are only a few people who know I'm taking it. ~Diane

We will talk more about how depression affects our body, and the pros and cons of taking medication, later in chapters 2 and 3. For certain types of depression, medication is a necessary part of the healing process.

Types of Depression

Depression doesn't look the same for everyone, and sometimes it is useful in making sense of your particular depression to understand how mental health professionals classify the most common types of depression.

Major Depression—Clinical Depression

Major depression is the most familiar kind of depression, where a person has a depressed mood and a decreased ability to go about normal life. It characteristically manifests itself in a loss of pleasure in previously enjoyed activities and feelings of hopelessness or worthlessness that are present for at least two weeks. Major depression may come back again once you've experienced it. That is why it is important to recognize and minimize your particular vulnerabilities so that you will lessen the possibility of recurrence.

I lost interest in things I usually enjoy. I had a lack of physical energy and didn't want to do anything. I felt sad, discouraged, and hopeless. ~Anna

Chronic Depression—Dysthymia

Chronic depression may go undiagnosed because it is so long-standing that a woman often believes her experience is just how she is. Chronic depression has the same symptoms as major depression, but they are less severe, usually enabling a woman to function in an empty sort of way. In order for the diagnosis of chronic depression to be made, a person must experience the symptoms of depression for at least two years, without a break lasting longer than two months. Such women can also experience major depression at the same time, making it a double depression.

I have suffered most of my life with a mild form of depression. I experienced a lethargic, indifferent, groggy, and numb state in which I could function and carry on, but with no enthusiasm. About five times in the last 20 years I got worse. I was crying all the time and would withdraw and isolate myself from outside activities, preferring to be alone.

~Brenda

Bipolar Depression

Bipolar depression is less common and used to be called manic depression. It is characterized by cycling mood swings with lows and highs that can last from several days to months. Euphoric and/or irritable feelings, reckless acting out or spending (not normally characteristic of the person), and a decreased need for sleep characterize the highs and mania phase and, without medical intervention, often worsens to a psychotic state. Untreated, a person with bipolar depression has a 20 to 25 percent risk of suicide.²

If you've ever experienced a manic episode, or a decreased need for sleep combined with a high daytime energy level, be sure to disclose this to your physician, even if you are currently only feeling depressed. Your doctor needs this information so that he or she can correctly prescribe the right medicine or combination of medicines for your condition.

Seasonal Affective Disorder (SAD)

This year in Pennsylvania, winter was long, unusually cloudy, and harsh. Toward the end of January, calls began pouring in to my office from women who were feeling depressed. SAD is related to a lack of sunlight and an associated buildup of the sleep hormone, melatonin. Women are more prone to SAD than men are, and the most effective treatment is light therapy to simulate sunlight. My husband and I turned down a great job offer in overcast Oregon because of my need for regular sunshine. One of my clients always scheduled a two-week vacation in a sunny climate in the middle of January to boost her mood.

Hormone-Related Depression

Women face particular vulnerabilities to depression because of the ways their bodies work. About 20 percent of women will experience some postpartum depression, and it can occur anytime throughout the first year after delivery. Hormonal fluctuations that occur during a woman's menstrual cycle may, for some women, cause more serious physical, cognitive, and emotional upsets than are usual and are related to premenstrual syndrome (PMS), or premenstrual dysphoric disorder (PMDD), as well as some of the problems women experience during menopause. A drop in estrogen levels causes these mood changes, and where severe, medical intervention may be necessary.

Vickki understood her depression better when she realized that it began after her child was born:

When I was first diagnosed as depressed, I felt relief. WHEW! This is what's wrong. THIS is why life is so hard. I sought a counselor specializing in depression because although I have a strong faith in God, I was unable to hear him anymore. Nothing made sense, the Bible was dry, and I couldn't hear what I needed to get from my reading and prayer time. As I looked back over the past

years I felt grief. I realized I had been suffering from post-partum depression that went undiagnosed for four years before I got help. Life has been crazy since the day I gave birth.
~ Vickki

Remember, not all types of depression look the same or have the same causes. The symptoms are on a continuum and may range from quite mild to very severe. Don't dismiss or minimize your symptoms because they aren't disabling you yet. A sprained ankle isn't as serious as a broken leg and a broken leg isn't as serious as a severed one. But in each case, the person requires wise and specialized care in order to maximize healing and to minimize further chances of damage, disability, or even death.

God cares about how you feel. He has compassion for your suffering. He wants to help you (Hebrews 2:16-18).

How God Sees the Person Who Is Depressed

Much more about our relationship with God will be covered in subsequent chapters, and especially in chapters 10 and 11, but for the moment I want you to know a few things that God says to you. In your present state these verses may sound hollow to you. For now, try to read them out loud to yourself and listen to them. Don't worry or feel bad if you find them hard to believe.

Depression screams, "God has forgotten me."

God says, "I have not forgotten you."

Those who suffer can feel as if God has forgotten them. The psalmist often describes those feelings, and even Jesus experienced God's absence when dying on the cross. Although our feelings are powerful, they don't always tell us the truth. For example, listen to the dialogue between God and Israel in these verses:

Yet Jerusalem says: "The LORD has deserted us; the Lord has forgotten us" (Isaiah 49:14 NLT).

God responds:

Never! Can a mother forget her nursing child? Can she feel no love for a child she has borne? But even if that were possible, I would not forget you! See, I have written your name on my hand. Ever before me is a picture of Jerusalem's walls in ruins (Isaiah 49:15-16 NLT).

In these verses Israel struggled between believing what God said and her own subjective feelings—and so do we. Here are a few passages of Scripture reassuring us that God sees and knows our pain:

My eyes grow weak with sorrow; they fail because of all my foes. Away from me, all you who do evil, for the LORD has heard my weeping. The LORD has heard my cry for mercy; the LORD accepts my prayer (Psalm 6:7-9).

But you, O God, do see trouble and grief; you consider it to take it in hand. The victim commits himself to you; you are the helper of the fatherless (Psalm 10:14).

Depression screams, "No one cares!"
God says, "I care about you."

God is not a passive observer of our suffering. He entered our world and knows what life is like. The Bible tells us that Jesus knew heartache and sorrow (Isaiah 53:3).

In my distress I called to the LORD; I cried to my God for help. From his temple he heard my voice; my cry came before him, into his ears (Psalm 18:6).

A Message from the high and towering God, who lives in Eternity, whose name is Holy: "I live in the high and holy places, but also with the low-spirited, the spirit-crushed. And what I do is put a new spirit in them, get them up and on their feet again" (Isaiah 57:15 MSG).

Depression screams, "You're all alone."

God says, "I will not abandon you."

When Lazarus died, his sisters, Mary and Martha, were heart-broken. Not only had their beloved brother died, but their dearest friend, Jesus, didn't seem to care about their need (see John 11 for the story). When they informed him that Lazarus was sick, Jesus didn't respond and Lazarus died. Perhaps Mary and Martha thought Jesus was too busy with more important matters, healing others or teaching in the synagogue, to be available in their time of need. When we're desperate and God feels far away and doesn't seem to hear our cry for help, we feel the same way.

As we read the story we know, however, that Jesus *did* care. The Bible says, "Jesus loved Martha and her sister and Lazarus. Yet, when he heard that Lazarus was sick, he stayed where he was two more days" (John 11:5-6). Although Mary and Martha didn't know it, Jesus knew exactly what he was doing and why he didn't come immediately to meet their cry for help. He felt their grief and shed tears, even knowing he would raise Lazarus from the dead.

It is hard to figure out what God is doing much of the time. He knows we don't always understand the big picture and that when life gets difficult we become filled with fear, doubt, and even anger. He reassures us in those times that he is near, even if we don't *feel* his presence.

Here are a few verses to remind us again and again of that important truth:

The LORD is close to the brokenhearted and saves those who are crushed in spirit (Psalm 34:18).

Even though I walk through the valley of the shadow of death, I will fear no evil, for you are with me (Psalm 23:4).

I am convinced that nothing can ever separate us from his love. Death can't, and life can't. The angels can't, and the demons can't. Our fears for today, our worries about

tomorrow, and even the powers of hell can't keep God's love away. Whether we are high above the sky or in the deepest ocean, nothing in all creation will ever be able to separate us from the love of God that is revealed in Christ Jesus our Lord (Romans 8:38-39 NLT).

Depression screams, "No one hears me."

God says, "Talk to me."

When Jesus finally arrived at Mary and Martha's home four days after Lazarus had been in the tomb, you can imagine how upset and hurt they were. Martha, the first to greet Jesus, blurted out her true feelings: "Lord, if you had been here, my brother would not have died" (John 11:21). I can almost hear her gasp as she realized she was scolding Jesus for neglecting them. Quickly she recovers her religious language and adds, "But I know that even now God will give you whatever you ask" (verse 22). Jesus didn't bristle at Martha for her honest talk. Instead, he invited her into a dialogue with him about what happened and how she felt.

I see the same thing when I read Job questioning God as he pours out his complaint again and again, looking for answers to *why* his whole life was falling apart (Job 10). Jeremiah, the weeping prophet, angrily accuses God of being unfair and cruel (Lamentations 3), and the psalmist regularly pours out his heartfelt emotions and thoughts to God. He said,

I cried out to God for help; I cried out to God to hear me. When I was in distress, I sought the Lord; at night I stretched out untiring hands and my soul refused to be comforted (Psalm 77:1-2).

Why, O LORD, do you reject me and hide your face from me? From my youth I have been afflicted and close to death; I have suffered your terrors and am in despair. Your wrath has swept over me; your terrors have destroyed me. All day long they surround me like a flood; they have completely engulfed me. You have taken my companions

and loved ones from me; the darkness is my closest friend
(Psalm 88:14-18).

For Mary and Martha, Jeremiah, Job, the psalmist, and all of us who seek God in the depths of despair, God always hears our cries. He answers us by drawing us into deeper awareness of who he is and a greater capacity to know him.

“Trust in him at all times, O people; pour out your hearts to him, for God is our refuge” (Psalm 62:8).

Facing Your Pain and Problems

Something to Think About

Recently my daughter, Amanda, needed to buy another car. Her car's engine died. It was an expensive lesson in learning to pay attention to the warning lights on the dashboard. Over the past year, Amanda noticed that her "check oil" light would flash, but she reasoned to herself that because her car ran and she was a college student who had little money for extras, she could ignore the light for the time being. That is, until the car stopped running.

Similarly, one of my clients told me, "I get busy so I don't have to look at myself. I'm afraid to see my pain, my sadness, my anger, and my guilt for everything. I'm afraid to see the wrong things I've done and the wrong things done to me. It's terrifying. I shut down."

Like the lights on the dashboard of a car, our emotions are often the first warning signals that something is wrong and we'd better pay attention.

Just as my daughter tried to avoid the reality of her car problems by ignoring her oil light flashing, my client viewed painful feelings as an enemy to be avoided at all costs. But her pain was trying to warn her of deeper problems. Just as physical pain is a signal that something is wrong with our bodies, emotional pain is a warning that there are deeper problems brewing. If we don't pay attention to what our pain is trying to tell us, the pain starts to get louder and louder until we either pay attention or break down.

Psychologist Dan Allender said, “Pain is not the enemy, denial is.” Ask yourself this question: Do you think your depression has anything to do with avoiding something that is painful in your life?

Something to Do

To put what you are learning into practice, I want you to grab a piece of paper or, if you prefer, purchase a special journal, and begin talking to God. Write out your true thoughts and feelings the way the psalmist did. Admit them to yourself and to God. Do this every time you feel upset—even if it’s about the smallest thing. Don’t allow busyness, fear, or shame stop you from taking this first step.

If you have trouble getting started, read through some of the psalms mentioned in this chapter or Lamentations 3, where Jeremiah angrily pours his heart out to God. God doesn’t want you to pretend you’re fine or that nothing’s bothering you. Talk to him honestly about what’s wrong and how you feel, even if you wish you weren’t feeling that way.

It takes courage to admit how you feel to yourself and to God. It also takes courage to be able to acknowledge the problems behind your pain. To heal, we must start to pay attention to what our feelings are saying. But here is one word of caution. Dallas Willard wisely warns in his book *Renovations of the Heart*, “Feelings are, with a few exceptions, good servants. But they are disastrous masters.”³

After writing in your journal, finish up by reading aloud this important truth: *God is always with me, even if I don’t feel him right now.* This is what he says to you, “Don’t panic. I’m with you. There’s no need to fear for I’m your God. I’ll give you strength. I’ll help you. I’ll hold you steady, keep a firm grip on you” (Isaiah 41:10 MSG).