

### Does My Anxiety or Depression Invalidate My Christianity? Part I

<u>Isaiah 42:3</u>: (NASB) A bruised reed he will not break and a dimly burning wick he will not extinguish; he will faithfully bring forth justice.

### Guests: Jane Landino, APRN and Joan Landino, APRN

For many of us, daily life is a secret struggle. Some of us go through the motions of our daily routines while inwardly carrying overwhelming fear and anxiety. We do not want to share what we feel, as it is not only embarrassing, it is impossible to describe. For others of us, even our daily routines at times are themselves, overwhelming. We feel as though we are thoroughly alone and relegated to a place of gloom and darkness. There seems to be no answer, and often it feels like there is no hope. I am describing anxiety and depression. While these challenges are incredibly common, they are also incredibly misunderstood. As Christians, we face these kinds of issues just like everyone else. The

question is, what do we expect? Do we expect our faith to be like a magic pill that can make things better? Do we expect ourselves to be diminished in God's eyes because we cannot "feel" our faith? What does God expect? What is possible for us to expect?

May is Mental Health Awareness Month in the United States. For the next three weeks we will be addressing mental health issues.

To understand this difficult subject, we interviewed two APRNs in the field of psychiatry: Jane and Joan Landino. They will provide us with their professional viewpoint and bring us knowledge, expertise, practicality and hope.

Julie: Rick, I have known you for a long time and for not having a mental illness, you've actually spent more time in a psychiatric ward than anyone I know. You have had unusually high amounts of experience with people around

you with anxiety, depression, paranoia, bipolar behavior, PTSD and others. We are looking forward to hearing about some of your personal insights with the disclaimer that you are not a mental health professional. This is just what you have learned from being a husband, father, friend and minister.



Our objective today is to understand and demystify anxiety and depression. By so doing we position ourselves to have a truth-based perspective. This enables us to embark on a godly and truth-based journey towards coping with and even overcoming the dominance that anxiety and depression can exert in our daily experiences.







### B PRE-RECORDED INTERVIEW

[We have intentionally not corrected grammar for this interview transcript.]

### RICK: So, Jane, let's start with you. Just a little bit about your background.

JANE: I've been a registered nurse since 1982, and then I became an advanced practice registered nurse or APRN in 2000. I went to Columbia University in New York, and my background includes some significant intensive care unit nursing as an RN and then a lot of adult and substance abuse/addiction as a nurse practitioner or APRN.

### RICK: Okay. And, Joan, what about you?

JOAN: I followed in Jane's footsteps two years later, became an RN in 1984, and despite everyone saying you

had to do medicine first, I went straight into psychiatry. And in 2005, I became a nurse practitioner in psychiatry, like Jane. And then I don't know why, I also have a degree in forensic science.

Jane and Joan were referred to Rick by an APRN in the field of psychiatry. We asked him about helping us with this podcast, but he preferred to be behind the scenes and recommended Jane and Joan. It is exciting to bring their knowledge to our audience. Jane and Joan are identical twins.

### RICK: We're talking about anxiety and depression. They are two different things. What are they?

JANE: They are both a disorder of the mind, of the thought process, and I don't like that word "disorder," but we'll use it because we're working in the realm of western medicine. We like to say they're like twins, like we are. So, sometimes we'll say, they're like, anxiety and depression are like Harvard and Yale, or twins where THEY ARE SEPARATE ENTITIES, BUT THEY ARE QUITE CONNECTED, or they are like colleagues.



RICK: Okay, separate entities of a "disorder" of the mind; disorder I'm putting in air quotes. Joan, did you want to add something to that?

JOAN: I want to say that sometimes when somebody suffers from anxiety, initially, they wonder why there are depressive symptoms later, as well. They are going together and vice versa. But when you think about it, we like to always give a medical perspective because that's what people understand. We don't have stigma against medical disorders in this country. So, if somebody breaks their arm, maybe they're going to start walking improperly because of the pain and then all of a sudden, their back hurts. Something else is going to be connected, or their neck. So, we like to just say it's a "neck-up checkup." I think Jane thought of that.



Joan

RICK: Okay. So, the two are different, but one, it sounds like, can often lead to the other then.

JOAN: Absolutely.

RICK: So, they're different. What's the difference between someone who suffers from anxiety versus someone who suffers from depression?

JOAN: When somebody suffers from anxiety, and they don't know where this fear or distress is coming from, they often will get up and do things. You know, you like this friend; she or he might start cleaning for you. They're not going to be able to sit down and meditate. They're going to always be doing stuff on the run, always going. They're actually really good parents, too, I think. Maybe not the actual easing the fear, but really, everything is done. With depression, sometimes - maybe Jane's going to comment on this more - sometimes a person can't even get out of bed. They can't even go for a walk; the simplest thing they're incapable of doing.

JANE: And then there are variations of those as well. So, as anxiety is you just witness the lion noticing you in the jungle, and you have all those responses and there's always this "doing." But think about it, there are a few people that are going to freeze when they see that the lion just noticed them. So, there are some people with anxiety where now they're frozen in the corner of their room or in their bed under the covers. And with depression you can also have

an odd presentation. I know we didn't really get into the definitions, and we will. Depression can actually first present as an irritability and a restlessness, so they're doing that as well. But when we think of the typical anxious person versus the typical depressed person, what Joan said pretty much follows, is this fear, and it's like a motor and you're doing, doing, doing and depression is a kind of zoning out of life.



RICK: That makes a lot of sense. My wife has had anxiety for many, many years. She had an experience several years ago, we're not going to talk about this here, but it helps me understand where she had an experience and suffered from PTSD, and depression set in afterwards. And it was a very different look from the anxiety. So, really, anxiety can kind of be on the run, on the go, keeping going. But depression generally - and I know there's always differences in how it expresses itself - but depression generally is kind of curling up and just not being able to even face life then.

JANE: Right.

RICK: So, in explaining - let me throw out the term "clinical." If somebody says there's "clinical depression," what does that mean in relation to anxiety and depression? Is there a normal? Is there a clinical? Help me understand that.

### KOR SHOW NOTES

JANE: So, in order for someone to suffer from clinical depression, that's diagnosed, because someone could never go to a doctor and have it, but nobody really knew it, when we assess that person, there's at least a two-week period. It's often longer than that where there's this profound sadness, this profound hurt and sometimes an emptiness. And you have to have at least one of the following in addition to that: either thoughts of death and suicide or preoccupied with death, often your own, as well as a loss of interest in some of the things that you used to be interested in. Then there's also a few other

symptoms that we look for: too much sleep, not enough sleep, increased appetite, decreased appetite, feelings of exhaustion not explained by any other medical term. And sometimes it comes with some physical pain not explained by anything else, and if you don't have A CLUSTER OF SOMETHING OF THOSE SYMPTOMS, we're not going to diagnose you as "clinically depressed."



RICK: Gotcha, gotcha.

Anxiety is something that happens as you go; depression is more of a full stop. How do you deal with someone who is in a state of depression?

Depression is hard to deal with; when someone is in that stopped state, it is really hard to get something started. It is like trying to start an old gas lawnmower that has not started all winter. The way to help and encourage someone in that situation is through small steps.



I had an experience a few years ago with someone. One of the things I did was give him small books called *Simple Truths*. They are small books with a theme of encouragement, gratitude or success. I would encourage him and say, "Read one page today and we will talk later, and you can tell me about it." It was just one page, not a chapter, something little to begin a process of growing through his experience. To me the key is to start with small things and ALWAYS be encouraging.

We will highlight three examples of individuals who are scriptural heroes and experienced very difficult times.

## Elijah, the mighty miracle working prophet of God, experienced life shattering despair:

<u>1 Kings 19:3-5</u>: (NASB) <sup>3</sup>And he was afraid and arose and ran for his life and came to Beersheba... and left his servant there. <sup>4</sup>But he himself went a day's journey into the wilderness, and came and sat down under a juniper tree; and he requested for himself that he might die, and said, It is enough; now, O LORD, take my life, for I am not better than my fathers. <sup>5</sup>He lay down and slept under a juniper tree...

Elijah felt like his life was over and asked God to take his life from him.



For more on Elijah's story of extreme depression, check out our Episode 1117: How Do I Avoid Burnout? (Part II).



#### King David felt the darkness of death as his own son Absalom turned on him and sought his life:

<u>Psalm 143:3-4</u>: (NASB) <sup>3</sup>For the enemy has persecuted my soul; he has crushed my life to the ground; he has made me dwell in dark places, like those who have long been dead. <sup>4</sup>Therefore my spirit is overwhelmed within me; my heart is appalled within me.

King David's experience showed the imagery of darkness that Joan and Jane were describing to us.

### The Apostle Paul had experiences that were so severe that he himself felt despaired:

<u>2 Corinthians 1:8</u>: (YLT) For we do not wish you to be ignorant, brethren, of our tribulation that happened to us in Asia, that we were exceedingly burdened above our power, so that we despaired even of life;



Life is hard all by itself, and harder when anxiety and depression are added in; it is nice to know we are not alone.

We now know what anxiety and depression are. What do they look like? How are they manifested?

To be able to battle victoriously, we must know our enemy as well as know our allies. While our enemy is the invisible, yet persuasive power of anxiety and depression, our highest ally is also invisible. The difference is that God is sovereign over all things, and His power is unmatched.

As Christians, we want to remember the sovereignty of God in our daily lives so we can understand how He plays a role in the things we need to do to deal with anxiety and depression.



RICK: Give me some feedback on somebody like me who has those feelings but certainly doesn't end up there that easily or that often, versus how somebody copes when they are just sort of trying to tread water and just not seeming to get anywhere.

JANE: Depression is not like normal sadness to life events. In fact, someone who's lost a spouse or a child does not necessarily present with clinical depression because they're supposed to be sad with these great losses. Depression is a little bit more insidious than that. It's almost like it builds a

fence or a wall around you, and the only thing inside there is all the negative emotions, that profound feeling of emptiness and sadness. But, you know, there's this old saying that depression is fear turned inward. And having suffered from depression myself is why I feel like I can say this without people

giving me hate mail. Part of my depression was so much anger, but because I didn't have the ability or the volition to express it, I feel like I planted anger every season and continually watered it and fertilized it, to the point it came out in so many ways that this insidious sadness - anyone actually could notice it. There's this funny story when I was in college, and the



drinking age was 18 back then, and so I was in a bar. I didn't even drink, but I would order, I think, a little bit of brandy and sip on it like it was NyQuil. And I got so excited. This happened to me three times where a nice-looking young man I believed was coming to say hello to me because I was probably attractive, right? Instead, these three men at three different times in my life leaned in and said something like, "It can't be that bad, can it?" You know what I mean? So, it was written all over my face, and that was from untreated depression for years and years and years. And then, of course, I go into psych nursing and most of the staff could see it and would make comments. But we don't want to wait that long to treat people. We want to get it done earlier.

RICK: So, with that, you having the experience is a very valuable piece to this whole thing because you can see it from the inside out. I look at it from the outside in, and I desperately try to understand, but you've been there. You've lived it.

Rick, do you generally see more anger or fear in the people you have had the experience of helping?

RICK: My experience is limited. Fear is the bigger thing. Anger usually seems to come out when there is some kind of trauma. It begins with a knee-jerk reaction and grows and gets out of control. Jane explained that. She kept planting and watering her anger. Anger is not always a symptom, but irrational fear is the overriding factor. The fears are not necessarily rational, but they are very real.

A basic help tool:

## Whether we are the one suffering or someone who cares about the one suffering, this text is a beginning:

<u>Hebrews 10:24-25</u>: (NASB) <sup>24</sup>And let us consider how to stimulate one another to love and good deeds, <sup>25</sup>not forsaking our own assembling together, as is the habit of some, but encouraging one another; and all the more as you see the day drawing near.

This is a basic principle of being helpful and wanting to stimulate another individual toward love and good deeds.

Finding our greatest ally:

## This text sounds like a command that can come across as overwhelming and even out of reach:

Philippians 4:4: (NASB) Rejoice in the Lord always; again I will say, rejoice!

Does that Scripture say, rejoice ONLY when things are going well in the Lord?

It says, ALWAYS. Not only when things are going well, but when they are hard.

Rejoicing is a state of being; it does not necessarily mean bubbling over with happiness.

## Once we consider the context of Paul's writing, we begin to see things more clearly:

<u>Philippians 1:12-14</u>: (NASB) <sup>12</sup>Now I want you to know, brethren, that my circumstances have turned out for the greater progress of the gospel, <sup>13</sup>so that my imprisonment in the cause of Christ has become well known throughout the whole praetorian guard and to everyone else, <sup>14</sup>and that most of the brethren, trusting in the Lord because of my imprisonment, have far more courage to speak the word of God without fear.

The Apostle Paul wrote about rejoicing when he was in house arrest with probably a Roman guard chained to him 24 hours a day. Paul was basically isolated - unable to preach or teach, unable to travel and encourage, and unable to nourish the countless brethren he had established in Christ. He was older and worn as he has been beaten, whipped, scarred, scorned, shipwrecked, stoned and left for dead. By knowing all this, does this now seem like an unattainable command? Or is it more of a secret to surviving the impossible? That is why we say, God is sovereign, and we need to look to Him as our chief ally.

Let's go back to Jane and Joan to help us in understanding the fear factor.

PRE-RECORDED INTERVIEW

RICK: What do you do, (A) if you are inside stuck, trying to find a way to get help or, (B) if you are that person on the outside who loves this person who doesn't want them to suffer and you want to reach out? How do you do that?

JANE: I'll do (Part A) because Joan has to do (Part B). Do anything. Do absolutely anything and, of course, six things you try, and you hate five, hopefully the sixth thing you'll like. One of the things I never did was listen to others because, of course, I thought that I knew myself the best, and if somebody made a comment to me within my family other than those cute guys

at the bar, I would tear them to shreds verbally. I would just say, you know, you don't know anything. Very, very disrespectful. Remember, it was anger turned inward, and it presented in all different kinds of ways, sometimes loving ways as well, but what I would like to say is, do anything. Talk to a friend, family, a clergy person. Pick up a book.



RICK: Okay, so, Joan, what about if you're on the outside looking in. Joan, I think you got cut off right in the middle of the sentence where you were saying you were asking your mother about the future, and she couldn't tell you what the future was.

JOAN: Right, right. So, what I want to say - all anxiety is based on fear, whether it's rational or irrational. And I started asking her to help me with my worry, and she kept saying, "But what are you worried about, Joan?" I couldn't even come up with something and I said, I can make something up. Please help me. What I was trying to say, from somebody coming on the outside looking in, mine is irrational. I just don't know that yet. The person who did some milestones, like getting your license or going on your first job interview at age 16, or getting into college or something like that, you know what some anxiety

is, and if you could sit with the person and say, "When this happened, I was a bit anxious, too," instead of what most people do - and I've done it too - try to fix it. It's unfixable because I don't even know what it is that I'm anxious about; it's so embedded. And it goes to say the same as what Jane had said about depression: Don't wait that long. I didn't even get help until I was 35, and I know better. I was already a nurse.



RICK: That's really important; that one small phrase, "Don't try to fix it." And that is the knee-jerk reaction. Well, can't you just think about something

else? Can't you just rationalize your way through one plus one does equal two? But in the anxious mind, one plus one doesn't mean anything. It's just, it's like a jumble.



Rick, if a suffering person cannot describe what is really happening - their view of their world is distorted; their descriptions are different from reality - how can a professional help them? What do YOU do when you know there is more to the story than that person is able to tell? Do you go with them to their appointments?

RICK: The irrationality is what makes this so difficult on all levels. I am not a professional; I care about people and several people in my life have asked me for help. What I have found through trial and error with several different experiences is to BE AVAILABLE and to SPEAK THE TRUTH TO THOSE WHO CAN DO THE HEALING. We need to listen, but let the professionals apply the fix. We cannot fix it, but we can help the person find professional help. I have found it important to be at the initial professional appointment. As a family member or a pastor, I have been trusted by many individuals to have private conversations with the professional and have been able to tell them the true story. When we know there is more to the story, let those who understand what to do, know the reality. This must be done with tact, respect and caring.

When we are grounded in reality, we can explain it objectively to the professional and let them do the fixing.



# Paul's emphatic plea to *rejoice in the Lord* is a plea to recognize that which is greater than all. By so doing, we can begin to find a source of comfort in the fact that God personally knows who we are:

<u>Psalms 139:1-6</u>: (NASB) <sup>1</sup>O LORD, You have searched me and known me. <sup>2</sup>You know when I sit down and when I rise up; You understand my thought from afar. <sup>3</sup>You scrutinize my path and my lying down, and are intimately acquainted with all my ways. <sup>4</sup>Even before there is a word on my tongue, behold, O LORD, You know it all. <sup>5</sup>You have enclosed me behind and before, and laid Your hand upon me. <sup>6</sup>Such knowledge is too wonderful for me; it is too high, I cannot attain to it.



Each thought in these verses is like a warm blanket of comfort.

The best starting point is to reach up to our God. Honoring Him is the first step to looking outside of ourselves.

### God knowing us does not mean everything is now better! What must we accept and understand?

The pathway through the tangled brush of our own heart and mind is laden with snags and scratches. Believing in God's all-knowing love encourages us to navigate through the disorder. If kept vibrant, this belief can produce the beginnings of positive and transformative behavior.

This reminds us of an urgent appeal for help which is an "S.O.S." Maybe we should change that to S.O.G. - SOVEREIGNTY OF GOD or SEEK OUR GOD. We should turn our minds to God for help to navigate us through our difficulties.





#### Belief precedes behavior. – Max Lucado

Max Lucado wrote an encouraging book written from a Christian perspective called *Anxious for Nothing: Finding Calm in a Chaotic World*.

<u>Proverbs 21:30</u>: (NASB) There is no wisdom and no understanding and no counsel against the LORD.

Believing in God can move us towards behaving with a humble spirit: Philippians 4:5: (NASB) Let your gentle spirit be known to all men. The Lord is near.

This humility can open us up to learning about our challenges rather than fighting with them. Part of dealing with anxiety and depression is understanding the truth about them. Instead of fighting with them, fight through them.



Back to Jane and Joan Landino talking about psychological issues versus physiological issues:

### PRE-RECORDED INTERVIEW

RICK: Is anxiety and depression psychological? Physiological? How does that happen?

JANE: They're both. Just like someone who suffers from a heart attack is more likely to then have depressive symptoms after, because when - you know, I often say the neck - the head is connected to the rest of the body via this thing called the neck. And a lot of times we think that anxiety, depression, any other mood disorder is really just a psychological phenomenon. But remember, I had mentioned that some people who suffer from depression can also have

physical symptoms. They can have body aches. There's a saying, "Depression hurts." So, everything is really connected. So, whether or not my depression happened because I got married, I moved to another state, and I got a brand-new job that was very stressful, so three major stresses, I had a major depressive episode. So, they started with the stressors in my life, and it started as a thinking problem and it



affected me psychologically. But then there are physical changes in the brain. Your body will always work together, and they'll change pathways in the brain. Those pathways will go down to your heart. Here's a famous one: I had a client who was referred to me, with the beginnings of dementia, from the neurologist. And I knew that I'm supposed to assess the person for depression and possibly medicate, and I did it. But kind of in the back of my mind I'm like, well, this isn't going to work. And the patient's mental status improved greatly. So, they were suffering with all these forgetful moments, not being able to play the card game they used to be able to play, and I gave them an antidepressant and the person got significantly better. So, it's very, very connected; this thing called the brain and the rest of the body.

RICK: By saying it's both, it's not just psychological or physiological, and the idea that it can start out as a thinking issue and then create a physiological issue, that's an eye-opener to me because I never thought of it that way. And because a lot of times - again, in my own very, very, very limited experience - it's described that, okay, there's a little bit of a wiring issue kind of in your mind that we want to work on and help connect more fully, so you can be able to cope, and deal with and see things differently. But the idea that it can start out in your thinking process and kind of create that, that's alarming.



Rick, it seems that a big stressor is during times of change - so people can be more susceptible during a liminal period. Knowing this might help to prepare. You have said, "Trust the eyes of the person" - what does that mean? How can we do that without being judgmental?

RICK: Trust the eyes of the person with the issue to show you what their reality looks like. When someone is in either psychological or physiological circumstances, or in a place of being fearful, trust what they tell you as their reality. Identify with them and acknowledge that you understand. Validate what they are saying.

Next week in Part II, Episode 1125, we will feature an interview with a very talented young singer, Kylie Odetta, who has gone through anxiety attacks.

Kylie says, "If you cannot be empathic, at least be sympathetic." Have compassion and help the person find the kind of assistance they need.

## Whether our challenges were always with us or came to us under various circumstances, we still have the teachings of Jesus that provoke steady and daily focus:

<u>Matthew 6:33-34</u>: (NASB) <sup>33</sup>But seek first His kingdom and His righteousness, and all these things will be added to you. <sup>34</sup>So do not worry about tomorrow; for tomorrow will care for itself. Each day has enough trouble of its own.

Jesus' message: Live in the present - the future is not our jurisdiction.



What if we are stuck in the past? A "mental loop" is when you replay events over and over in your mind and build up anxiety and stress. It becomes obsessive and exhausting. We get stuck in a certain line of thought. How do we get past that?

When you replay the past over and over, the past becomes your present, and then that past becomes your future. Get help to redirect your



thinking from either a pastor, friend, family member or a professional. Let's take a look at society-induced stigma:



RICK: Let's talk about the stigma and then let's talk about the treatment. Because in my mind -- and, again, in my very, very limited experience the hard thing to get to was, it's okay if things are like this. It's okay. You're not weird. You're not different. You're not to be shunned by society as somebody less than everyone else. How do you deal with those feelings and reactions?

JOAN: Initially you have a fear, there we go again, of telling people about it, for fear that you're going to be looked at as if you're crazy or what is wrong with you? You're less than a person and you keep striving to be like the well-adjusted other people, and you're incapable of it, so you isolate and there's where the depression comes in. But nowadays I just say if you broke your arm, wouldn't you go to the doctor? If you need eyeglasses, you can't see, why wouldn't you go to the doctor? If you're sad and don't know what it is, why

don't you go to the doctor? If I'm anxious and my mommy can't tell me why, why didn't I? So, I think it's a stigma of society or society's induced stigma.

RICK: What does somebody do when they realize that and have to face that? Because it looks like a big mountain. The stigma looks like a big mountain. Practical input from the standpoint of the person going through it and from those around them. What can we do or say when you're either in it or around it, to just help put that away from you?

JANE: Let me just start with, one of the reasons I didn't seek treatment wasn't because of stigma, initially. It was because I didn't even know I had

depression. I just thought I was the shy kid. I was labeled "shy" a lot. But then, when I did get treatment, I actually was unaware that people would stigmatize me for it, which I found interesting. And some of those people were not who you would think. Some of them were your colleagues. So even in the profession,



there's this, "Shhh! Don't say anything, shhh!" Or even worse, what we've experienced where there's many, many people in the profession that pay cash to a therapist or someone or a prescriber because they don't want it on their records, their health insurance.

JOAN: They don't want a paper trail.



Regarding stigma, on the one hand, it seems like everyone these days goes to a therapist. I was surprised to find out that two teenagers in my circle have therapists to deal with stress and anxiety. So, this is a normal thing these days, not stigmatized. But yet, let's say I am at church and I know someone is suffering from something bigger than that - maybe they are bipolar or have an anger condition. I am a little intimidated because I do not want to say the wrong thing and set them off, so I might avoid them entirely. Is that stigmatizing them?

Yes, that is stigmatization but not on purpose.



My first experience going to a psychiatric ward to support someone was about 42 years ago. I was about 19 or 20 years old. I went to visit someone my own age. I had no idea what to expect. I walked into the common room and there were people literally walking around in straightjackets. There was a lot of mumbling going on and people sitting in a chair slumped over drooling. It made a huge impact on me. I thought, "My friend can't be like that!" Medicine has come so far in the last 40 years. The term mental illness can make us shudder. Fighting mental illness is exactly the same as fighting other medical issues.

When you go to church and someone is bipolar or has an anger issue, you have to assume they are there to gain encouragement. Try to be that person who will smile and engage in a conversation. Say something uplifting or suggest a Scripture. Be a blessing. Someone can gain a lot of strength from a little conversation and compassion.



Not only does God know who we are, He knows every state of our mind and heart.

## <u>Psalm 139</u> continues with the highs and the lows of David's mental state in dealing with his challenges:

<u>Psalm 139:7-12</u>: (NASB) <sup>7</sup>Where can I go from Your Spirit? Or where can I flee from Your presence? <sup>8</sup>If I ascend to heaven, You are there; if I make my bed in Sheol (the grave), behold, You are there. <sup>9</sup>If I take the wings of the dawn, if I dwell in the remotest part of the sea, <sup>10</sup>even there Your hand will lead me, and Your right hand will lay hold of me. <sup>11</sup>If I say, Surely the darkness will overwhelm me, and the light around me will be night, <sup>12</sup>even the darkness is not dark to You, and the night is as bright as the day. Darkness and light are alike to You.

Even the darkness is not dark to You, and the night is as bright as the day - God is bigger than any state of mind or heart!



Repetition of fundamental truths is an important practice. We need to develop muscle memory for our brains.

### It is comforting to know God truly knows His children. But what if we feel like we cannot reach Him?

A relationship with God IS a two-way street. While His love is unconditional, His blessings - His deep appreciation of us does require our efforts. As long as we reach for Him, He can begin to bless us. When we struggle with challenges of the mind, this reaching up to God is rarely an instinctual response.

## Even though we cannot simply turn off our anxiousness, we can turn on prayer and thanksgiving:

<u>Philippians 4:6</u>: (NASB) Be anxious for nothing, but in everything by prayer and supplication with thanksgiving let your requests be made known to God.

The habit of sincere prayer is a habit that reveals conviction. Conviction precedes action. Christian growth is a process.

### PRE-RECORDED INTERVIEW

RICK: So, then what about treatment? And I know it's going to look very different for everybody, but, again, the imagery of treatment is - especially if you go to an APRN in the field of psychiatry - you're lying on a couch and all of this stuff. What does treatment really look like?







JANE: If we back up and go to a different kind of a counselor as your first step - a social worker, a licensed practical counselor, etc., a clergy person, there is something like talk therapy. And so, the person like myself that was bottling up anger so much that I was acting out in other ways can vent all these injustices that I feel. And that's wonderful, and those people though, when it's all done, and that could be very helpful purging. But the thought of purging for ten years or twenty years and what I'd like to say is even four years, maybe one or two years, after a while, if you don't dock that boat and step off onto land again, you're just going to be in a cycle of negativity which, remember, the physiological part of your body will cooperate and relapse things, and you may end up with worse problems. So, there's talk therapy; it's very, very helpful and that can actually resolve a lot of issues for people. There are even cases of people being severely depressed getting through it with just talk therapy. And then when you come to the prescribers, we assess for medication, these foreign molecules, and sometimes they work very, very well. One of my experiences was, each time I was on a medicine, I thought, oh, well, this is what life can be like! But it wasn't until the last medicine where I feel that I'm in full remission where I now know what it's like to be, I like to say, alive and well. But those first initial meds, some worked extremely well on my anxiety. Some helped my insomnia. Some helped my negative thinking, but then there's more than medicine. There's more than talk therapy. There's more than medicine - something called cognitive behavioral therapy, which I find very boring because you might even get homework, and I didn't want to do that.

A musician shared with me that getting treatment for depression is like learning an instrument. He learned an instrument at age seven. And by high school, he had already been engrained in this instrument. And his high school music teacher said that you're holding the instrument wrong. You're playing it incorrectly, and you will never get better than today. You're not even breathing correctly when you're blowing into this instrument. And he was so distraught because that's what he wanted to be was a clarinetist that he learned, and he said it took one full year, he learned to breathe differently, hold the instrument differently. He called it arduous, painful - physically painful and emotionally painful. It was so hard, and he worked at it every day. He said that was my cognitive behavioral therapy, and now he is a professional clarinetist. So, that I find so interesting. That really sunk in that no wonder insurance companies pay for CBT. It works. But a lot of people - including myself - I wanted a pill. I didn't want to work on my fear and anxiety. You told me to meditate, I'll break the tape. I'll grind it up.

Adding onto what Joan is talking about because there was a study done - it's probably 30 years ago now - on all the serotonin medicines like Prozac to Zoloft and ongoing. And what they found - they were looking at treating depression and anxiety. What they found was kind of disturbing, and they were afraid for the public. They found that only about 50 percent of people with depression and anxiety responded to these medicines. Behind the scenes, that number went to 30 percent. Imagine if we told the American public that you get depression and anxiety, you go get treatment and only 30 percent of you are going to get better.

### JOAN: Can you imagine if that was a cancer diagnosis?

JANE: So, there are other things in psychiatry, and if we utilize them, people can get better, kind of like myself. One of the things, remember, I suffered from a lot of depression. And it took my girlfriend, who was one of those people that I respected what came out of her mouth, and she said something to me. And I at first wanted to throw her off the balcony we were standing on, but then I thought, well, you know, Jane, this is the third floor and she might die, and you're going to go to jail.

### **RICK:** Good thinking.

JANE: And what she said to me was, Jane, have you ever considered being grateful for what you have rather than being ungrateful for everything? Now, I hope you could see how I wanted to throw her off the balcony. But I really respected her opinion of me, and I took that seriously. And lo and behold, I found I was very ungrateful for everything. And the other thing I



didn't do is I didn't join community. I was very content with having my family and my two friends and the medicine that I was taking. But I knew through self-help books and self-help groups in psychiatry that there's this thing called service to others and giving back. At first you vent. Then you try to own up to your part in everything. But you have to give back to community as well. If you're - and this is me - I'm not talking about everyone - but if you're a selfabsorbed angry individual, I don't think you're going to get better on Lexapro, which was an amazing med for me, but it did not put me into remission.

RICK: So, medication, yeah, great, but work. And just like with anything else, again, the breaking of an arm or something like that, there's the therapy or the physical therapy of getting it back into working order, that's really what you're saying. It's no different because it's with your mind.



What about medication? Isn't the Bible enough? Won't a prayer for healing be enough? Can we say to someone, "Pray harder; believe in Jesus and this will all go away."

I am very much pro-medication. In my own experience, I have seen the wonders of medication in a lot of different circumstances - taking the edge off of paranoia, taking the edge off the highs and lows, helping someone who went into a deep depression because of a traumatic experience. Medication helped them to be able to find the space to grow back into their own life. In every experience where I tell you medication is wonderful, the individual had to work. Medication is not an excuse to not have faith, to not do the work, to not use the tools. It is simply a tool that helps you go through things.

In some cases, people will be able to overcome without medication. It is not always the answer. Everyone does not always have to have medication, which is why you get professionals involved. They can help you understand what you need and don't need. Medication also is an inexact science in my experience. It may work okay, there may be side effects, so you try something else.

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Jonathan's

Experience

Christianity is not a ticket to have magical healing. That's not part of Christianity. God's place is important. Faith, spirituality and looking up is really important, as it gets us outside of ourselves. God's blessing is bigger than our trials. But sometimes we need medication, just like the person with the broken arm, cancer or diabetes. Medication is appropriate but has to be administered in a way a professional really understands, and you must be willing to do your work.

In making our effort to overcome our challenges, we must always remember that God does know the goodness of your heart and soul.

### He sees through anger and fear and reaches for you:

<u>Hebrews 4:12-13</u>: (NASB) <sup>12</sup>For the word of God is living and active and sharper than any two-edged sword, and piercing as far as the division of soul and spirit, of both joints and marrow, and able to judge the thoughts and intentions of the heart. <sup>13</sup>And there is no creature hidden from His sight, but all things are open and laid bare to the eyes of Him with whom we have to do.

I have a family member who has mental illness and depression. It is frustrating for those around her because she uses her illness as an excuse to behave improperly. She will say, "I can do this or that because I have mental disabilities," or, "They can't talk to me like that because I am entitled to do what I want because I have mental illness." She has many excuses and tries to justify the negative behavior. How do we deal with someone like this?

It is hard because like anything else in life, we can take a physical disability and do exactly the same things, like being born without a limb, and say, "Because of this, I can't." "Because of this, I'm entitled." The problem is, it is all about ME and bringing the world to ME. The key to dealing with anything like this - physical, mental or emotional - is to learn to focus outside of ME.



How do we deal with this? With great patience, knowing we cannot fix it. A practical suggestion might be to ask, "I understand, but do you like being that way? Have you ever thought of anything you could do to make it a little better?"

It is hard because the healing has to begin in our own determination. If we are not determined to rise above where we are - with anything - we are not going to change. God knows who we are. He knows every state of mind and heart we go to. Further than these things, He also knows what we are made of...literally!

The incomprehensible complexity of humanity is a testimony to God's love: <u>Psalms 139:13-18</u>: (NASB) <sup>13</sup>For You formed my inward parts; You wove me in my mother's womb. <sup>14</sup>I will give thanks to You, for I am fearfully and wonderfully made; wonderful are Your works, and my soul knows it very well.

### The complexity of the human form is breathtaking!

<sup>15</sup>My frame was not hidden from You, when I was made in secret, and skillfully wrought in the depths of the earth; <sup>16</sup>Your eyes have seen my unformed substance; and in Your book were all written the days that were ordained for me, when as yet there was not one of them. <sup>17</sup>How

precious also are Your thoughts to me, O God! How vast is the sum of them! <sup>18</sup>If I should count them, they would outnumber the sand. When I awake, I am still with You.

God is incomprehensively bigger than everything in our lives and can be our greatest ally if we would just let Him.

Strength for the Journey V There can be no better source of strength when facing our biggest challenges than turning to our Creator. His everlasting arms will hold us, and His eternal wisdom will guide us – if we let them!

Managing anxiety and depression is like many other things. We need to be willing to do the work consistently.

What is our highest expectation? What can we expect if our issues are an ingrained part of our being?

We have often said that chaos creates clarity, and this is true for the one who can see chaos unfold from a factual perspective. What is also true is that anxiousness is the consequence of perceived chaos. When we are unable to separate fact from fiction, only insecurity will follow.

We asked our Facebook group: How should Christians deal with depression? Does depression or anxiety invalidate your walk with Jesus? We received a lot of great discussion on this and have a short quote from a listener named Owen:

"cqbiblepodcast"



Owen: God does not ask us to feel sad, guilty, dirty or in despair. He tells us we are loved; we are unrighteousness but redeemable; we are nothing without Him...but we are not without Him. He made us, afflicted us, redeemed us, has great plans for us, and though we don't deserve it, we can do all things through Him. We fight depression by allowing God to work in us to will and to do His good pleasure. He takes responsibility for teaching us how to want to move toward the light, and He uses the darkness of depression to help us find that will and tap into His strength.

### To label our highest expectations, we need to review our Philippians text in its entirety, adding on the last verse to conclude its process:

<u>Philippians 4:4-7</u>: (NASB) <sup>4</sup>Rejoice in the Lord always; again I will say, rejoice! <sup>5</sup>Let your gentle spirit be known to all men. The Lord is near. <sup>6</sup>Be anxious for nothing, but in everything by prayer and supplication with thanksgiving let your requests be made known to God. <sup>7</sup>And the peace of God, which surpasses all comprehension, will guard your hearts and your minds in Christ Jesus.

We all want *the peace of God*. God's peace can guard our hearts. The only thing that can penetrate this protection is our own doubts. We can let Him help us guard our hearts if we do the necessary work.



### PRE-RECORDED INTERVIEW

RICK: This is a biblically-based podcast. And our objective is to be able to speak to the Christian community, or people who are around the edges of the Christian community and say, look, the Scriptures really do have, (A), a lot of answers for a lot of the things that are difficult in life, but also, (B), the other aspect, the other side of the issue is, there are many Christians that are going to tell you if you have anxiety and depression, pray and God will take care of it. And that's damaging because if we've got a physiological thing that is happening to us, God's not going to take care of all of your physiological issues because you believe in Him. So, that's one of the reasons we wanted to talk to you guys about this in such depth because we want to avoid, like you're saying, get overly confident in just medication, give me magic bullet and everything's going to be great, and also the, "Well I've got God, so I'm all set." And in one of my own personal experiences in visiting with someone in a psych ward and their initial response to their issues were, "Well, this is Satan." And the psychiatrist is sitting there, and I'm her pastor, and the psychiatrist is sitting there and we're talking. And I said, "Well, wait. Actually, that's not the case." And when I gently tried to explain that - and I used the analogy of, sometimes in our minds there's a wiring issue - and when I finished explaining it to her, the psychiatrist looked at me like with this incredible sigh of relief because the message was, "Give these people a chance to help you. Let them get you back to a place where you can actually flourish in life again." And there's a happy ending to that particular story.



How do we know mental illness is not Satan or his minions at work? In the New Testament, why did demon possession look a lot like some mental illnesses?

It looks the same but is not the same. Demon possession is a different subject. Mental illness is not Satan's minions at work in your mind. If we are a Biblebelieving Christian and have God's spirit working in us, those things cannot touch us. We are all physically or mentally ill in some way. We are all broken because we are all in sin. When someone is working hard to follow Jesus, Satan is not inside of our head doing these things to us.

In the Bible, demon possession never occurred to the followers of Christ. Satan has no place in the mind of a Christian.

For more on this topic, please search our archives for Episode 1044: How Do Demons Influence Our World?

God's influence and satanic possession cannot exist together because God's spirit overrides it.



### PRE-RECORDED INTERVIEW

RICK: Just want to quote something that a young person, 12-year-old who's got anxiety and depression, said to us. And he's working through it, and he's been in a tough spot for a while. But he said, "I don't want to be somebody who has anxiety and depression. I don't want to be that." What do you do with that? What's your response to that?

JOAN: I broke my foot about a year and a half ago, and I would like to say to that child that, just like a physical illness of my broken foot, every day I will help you, just like Jane helped me with my exercises, every day if you need it, I will help you with baby steps.

JANE: I'd like to say for anxiety and depression at age 12, with confidence I can just about say, you don't have to be that person forever. For someone like Joan who got that terrible fracture, she's got that little bit of aches and pains when it rains or snows. So, we don't always have to be that person. We can just be a person who things happen to us, but they don't always have to be permanent. And we can get through it and we can get through it together.



JOAN: Anything that has happened in my life is a gift. I'm alive. It's happening. I am going to even become inventive on ways on how I can deal with this. So, when people have had anxiety and depression, especially at a young age, there's most likely trauma. And that could be a gift.

RICK: As a matter of fact, that's one of the things we were talking about with this 12-year-old, one day you're going to be able to recognize and help somebody else because he is going through the work. He's working really hard, and he's making really great progress, and he's learning the steps, and he's learning the tools that he's being taught through the social worker and everybody else. There can be a really bright future for people who go through anxiety and depression.



JANE: Absolutely.

JOAN: Absolutely.

How can you tell when a child is just doing things for attention versus something is really wrong? Maybe they are just ill-behaved.

When it comes to both children and adults, it can be difficult. I was trying to help somebody through issues. We went down roads that just did not seem quite right, but we didn't know how to help. We finally got the right help in place and it was revealed that the roads we had been going down were not the best roads. There was an attention-getting kind of thing going on, intentional or not. Once you learn what is real by getting professional help, we want to

stand behind that professional help and continue to encourage through their approach. Figuring that out can be difficult with kids or adults. Go slowly, assume the best whenever you can and have the sense of checking it out afterwards.

Always assume the best. When somebody is struggling like this, it is so important to be able to give them the sense of being lifted up. Even if you err on the side of a little bit of attention and even manipulation, I would rather encourage them and figure it out later so that I can still be in their corner. Do not let it deter you from being an encouragement.

## God can and will help us manage our challenges, if we are compliant and do our part:

<u>Psalms 139:19-24</u>: (NASB) <sup>19</sup>O that You would slay the wicked, O God; depart from me, therefore, men of bloodshed. <sup>20</sup>For they speak against You wickedly, and Your enemies take Your name in vain. <sup>21</sup>Do I not hate those who hate You, O LORD? And do I not loathe those who rise up against You? <sup>22</sup>I hate them with the utmost hatred; they have become my enemies. <sup>23</sup>Search me, O God, and know my heart; try me and know my anxious thoughts; <sup>24</sup>and see if there be any hurtful way in me, and lead me in the everlasting way.

We can be available for others. Do not try to fix them; help them get the help they need.



Depression and anxiety can rob us of peace. Through faith, family, friendship, fellowship and sometimes the need for medication and medical science combined, we can deal with something that looks impossible. Look at this with the eyes of understanding and compassion to reach out to one another and to encourage each other to find the help we need.

Anxiety does not empty tomorrow of its sorrows, but only empties today of its strength. – Charles Spurgeon

So, does my anxiety or depression invalidate my Christianity? For Jonathan and Rick (and Julie) and Christian Questions... Think about it...! Does My Anxiety or Depression Invalidate My Christianity? Part I Ep. 1124 - May 4, 2020





Join us next week for our podcast on May 11, 2020 Ep. 1125: Does My Anxiety or Depression Invalidate My Christianity? (Part II)

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## Study QUESTIONS

### Ep. 1124: Does My Anxiety or Depression Invalidate My Christianity? (Part I)

https://christianguestions.com/character/1124-anxiety-depression/



- 1. What are anxiety and depression? What is the difference between the two? What are the symptoms of "clinical depression"?
- 2. What were Elijah's, King David's, and Paul's experiences with anxiety and depression? (See 1 Kings 19:3-5, Psalm 143:3-4, 2 Corinthians 1:8)
- 3. What advice does the Bible give us to help when we are, or someone we know is suffering? (See Hebrews 10:24-25, Philippians 1:12-14, 4:4)
- 4. What can you do to get help when you are experiencing anxiety and depression? How can you help someone else if you are on the outside looking in? (See Psalms 139:1-6)
- 5. How can anxiety and depression be both psychological and physiological in nature? What is Jesus' message for us when we encounter challenges? (See Matthew 6:33-34)
- 6. What can we do to face the stigma surrounding mental health? Why should we be confident when going to God about our mental health problems? (See Psalms 139:7-12)
- 7. What can treatments for anxiety and depression look like? Is medication a valid option for Christians? Why or why not?
- 8. What can we do to strengthen our relationship with God? Why is this so important for a Christian? (See Philippians 4:6, Hebrews 4:12-13, Psalms 139:13-18)
- 9. How does God help us to overcome our anxiety and depression? What do we need to do to receive His help? (See Philippians 4:4-7, Psalms 139:19-24)
- 10. Do you or anyone you know suffer from anxiety and depression? What will you do to make sure that the necessary help is received?

