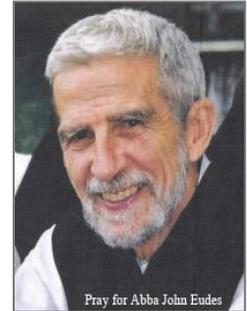


2007: REFLECTIONS ON DEPRESSION: THE ROLE OF MEANING
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Depression as used in medical literature first appeared in reference to physiological function, in the year 1803 in the sense of 'a state of reduced vitality'. It had already been employed as the designation of a psychological state as early as 1660 with the meaning of diminished sense of liveliness of spirit. However, it took on fresh significance later in the history of psychiatry when in 1911 it was clearly distinguished by Eugen Bleuler a Swiss psychiatrist who was instructor to Karl Jung from Schizophrenia and applied to a specific kind of psychic disorder called bipolar disease or manic-depression. These diseases of the mind and emotions have a profound effect on behavior and are of a serious nature. They can best be treated in another context, in that their influence on the spiritual and social life is so grave as to require altogether particular and specialized understanding and care. Here we shall concern our self with the milder states of depression that range from a temporary state in which one's mood and thought are unequal to their usual level of performance and decidedly less than their customary sense of well-being to various states of physical and mental impairment that inhibit the adequate functioning of one's powers and often enough cause such symptoms as fatigue, sense of inadequacy, confusion of thought, negative thinking and other manifestations of similar emotional malaise.

The challenge of depression, under various names, is not new nor is it specific to our times. However, it has become unusually common among the young in more recent decades. A comparison with University students of a couple generations earlier indicates that its incidence is strikingly and increasingly heightened in this period. Interestingly, just recently a very broad study by five psychologists on the mores and attitudes of more than 16,000 university students, finds that the current generation has become accustomed to forms of pampering that create unreal expectations in life. Unmerited affirmation of worth, lack of responsible demands, providing for creature comforts excessively, use of drugs and sexual freedoms have had a notable and deleterious effect on character and mature performance. [A report in the NY Times for February 27th of a long-term study of 16,475 University students between 1982 and 2006 indicates that there has been a marked and progressive increase in the percentage of students characterized by narcissistic self-centeredness consisting in selfishness, lack of empathy and negative reaction to criticism, that is to say attitudes that make for irresponsible and unreliable social and inter-personal commitments. This report cites a book treating of problem by Twenge: "Generation Me: Why Today's Young Americans Are More Confident, Assertive, Entitled- and More Miserable Than Ever Before." The climate of permissiveness present in society, many families, and in the universities is what has led to these attitudes that are inimical to long-term relations and bode ill for a vigorous society. The effect of such a state of affairs on the incidence of depression has not been studied but is bound to be considerable and deserves serious investigation.

Of course, there are varying and multiple degrees of this disorder. In fact, depression is a term, like a number of others, that psychiatry and medicine have adopted from general usage while assigning it a whole series of rather specific disorders. It is used relative to mild despondency and passing moods of discouragement occasioned by disappointment, failure of some less grievous sort; it also includes incapacitating states of mind that render the individual incapable of functioning in society, physically sick and in need of vigilant care and observation. Severe depression can result in death through suicide. In the recent past such deaths have increased alarmingly; among the young suicide is now a major cause of death, and is ominously more recently has been occurring with a certain frequency even in pre-adolescent children. All of this points to dysfunctional social attitudes and values in current Western society. One of the clearest manifestations of this degeneracy is the high incidence of addiction of which the fastest

growing is addiction to pornography although the most common at present is obesity which affects upward of 30% + of the US population, young included.

There exists then a broad variety of types of depression, many of which are sufficiently identifiable as to merit a specific name. Some forms of this disorder are caused then by exterior causes which place a heavy burden on the subject; grieving at the death of a loved one is commonly accompanied by some of the signs and symptoms of depression for a limited time, for instance. Such temporary and limited depression is quite within the range of normal human behavior. Reactive depression in the wake of catastrophe when it is a temporary state is quite explicable by the intensity of the loss acting on persons predisposed by their character and temperament. Such exterior causes may, however, so affect some as to lead to a chronic, persistent state and require more energetic treatment. [Think of the millions of refugees in the last hundred years and the stresses they are subject to.] But much that is designated as depression is but a variant of human response to the more distressing events and situations in the broad course of life. Depression is commonly accompanied by physiological disturbance and even clinical symptoms. At times it results in psychosomatic illness. I recall an instance that quite strikingly illustrated such an eventuality. I was called by a senior medical student to the medical clinic at the University Hospital where I served as psychiatric consultant. He was perplexed by the case of a middle-aged woman whose presenting complaint was distress in the epigastric region. He could find no physical cause or obtain clues as to the possible nature of the persistent and painful feelings she complained of. While I listened to his presentation of her case I took the opportunity to look attentively at the patient's visage. After he completed his report I commented to her sympathetically: "Life is very hard on you isn't it." She looked at me and saying nothing immediately broke out in copious uncontrolled tearful crying. The student was deeply moved by this demonstration of the cause of her abdominal pains that brought her to a medical clinic. When we were alone he asked: "How did you know that?" "I observed her face carefully; the corners of her mouth were clearly depressed. And she seemed sad." She felt alone in the world; when I showed that I understood her she felt enough security to allow the unhappiness that plagued her to rise to the surface and could show it without excessive embarrassment." Simply being understood and recognized is often the best alleviation of depression, just as the sense of rejection and of being unappreciated can be the cause of even serious depression.

The other type of depression is endogenous in origin, arising from a variety of internal causes, some of them genetic with accompanying disorders of a chemical nature. Bi-polar depression is one such type of affliction; it assumes various expressions. Often enough it is not accompanied by alternating manic and depressive phases but expresses itself only as depression. Such cases are commonly alleviated by the use of drugs, notably lithium. The use of this remedy may be required for a long period, even permanently though it can prove effective for a time and no longer be required. In some instances, the onset of such a state is precipitated by circumstances from the environment but persists due to endogenous causes.

The fact is that the understanding of depression remains far from complete. The same can be said of other psychic disorders such as schizophrenia of which there are four major types. About 1 % of the population suffers from this disorder worldwide. The use of drugs is often helpful when symptoms warrant it. In less serious forms of depression, such as reactive and neurotic, while drugs may be of temporary help, counseling and psychotherapy is also necessary. Certain forms of depression are so incapacitating as to require more intensive care, even hospitalization and cause such a state that the sufferer is not accessible to verbal treatment and insight. But the milder forms lend themselves to influence by psychotherapy and by spiritual practices.

One of the major factors influencing and accompanying depression is the weakness or relative loss even of a sense of meaning and purpose in one's life. While there are any number of ways of reacting to a life

that supplies but a scanty sense of meaning and purpose yet a good number of them are of only temporary benefit and often have long-term harmful consequences. In any case, once youth passes and the superficial satisfactions that provide but passing solace to the craving for a more personal sense of significance in the larger scheme of things either one cultivates a sense of dedication to a worthy absolute or it becomes increasingly burdensome to face the limits of life in this world. Karl Jung, the Swiss psychoanalyst, observed that after one attains to the age of 40 it is necessary to commit oneself to some transcendent, religious value in order to maintain psychic health. Let us consider then the ways in which religious practice and belief give meaning and significance to all of life and contribute to the capacity to deal fruitfully with "the slings and arrows of outrageous fate" that each of us must encounter sooner or later and so avoid the defeats attendant upon reacting with depression. For one of the deleterious effects of depression is the tendency to assume a passive stance before challenges that otherwise could be occasion for developing new assets and resources that allow us to make fuller use of our potential for enhanced life.

"Man lives in the meanings he is able to discern. He extends himself into that which he finds coherent and is at home there.", comments Michael Polyanyi, the philosopher. He also noted that it is only a person who can mean or intend something; nothing said, written or printed can mean anything by itself. However, we can hardly discern meanings at sufficient depth to prove effective in carrying forth our personal development until we know by insight who and what we are as persons. To diminish meaning is to lessen human experience of life. This introduces us into the very center of our topic today. For, as we noted earlier on, depression is defined as "a state of diminished vitality", that is liveliness. The depressed has less life than she feels the need for; with that she experiences her very self as inadequate and unlovable. For the human person the sense of being alive is a function of the sense of the self. All human consciousness takes place against this awareness of an "I", of what has been called "the true self", "the real me". This sense is not sharply defined so as to stand out with distinctly marked borders from the surrounding relations into which we have been inserted by birth into the world. It is more distinct in some of us than in others, but in all humans it blends at the borders with the surround world and with significant persons. It is rather indistinct and poorly marked off from the exterior world. Strangely, it does not limit itself within the outlines of our body. The best artists have realized this and in depicting the human form suggest an aura at its borders that is somehow blurred, not so sharply outlined as to cause it to stand out as a foreign object inserted into an unrelated space. Commonly we humans have a certain rather strong ambivalence about our inner self. On one hand we feel it the most significant reality in existence, deserving of special recognition, attention even devoted service and loving affection. In the earliest stages of life we react as if nothing else is real except to the extent it serves the wishes and needs of this self. Later we feel it is basically good, lovable and means well; we are convinced it is capable of greater good than so far realized, of being creative, original and marked with a decided beauty. This real self is not always accessible, however; it lies hidden within, is elusive not readily perceived by others, for it differs from the experience that marks our spontaneous daily self. Its existence is real but what is best in it is more a matter of belief in something invisible, intangible than the roles we play in our various situations.

On the other hand, the same "I" is not always what it is believed to be; it does not always measure up; even is felt as not good enough, suspected of not being worthwhile. It is even felt as defective, lacking in attractiveness. Nobody who really knows me intimately, as I really am when off guard would hold me in regard or even like me, much less be lovingly devoted to me. I am not in point of fact what I should be, much less what I could be. Thus we are forced in varying degrees in different situations and with various persons, to present ourselves in a certain role. With some we feel immediately quite vulnerable, unable to be our self, to allow our real qualities to come to the surface; we even feel they grow pale, feeble, and even repellant. We have learned by unpleasant experience to put a certain face on while dealing with most people.

The great challenge addressed to each of us is to find the source of strength needed to free this intimate self from the bonds in which it is held by attachment to certain external realities and by the behavior and opinion of others. This is the great work of the ascetic and spiritual life. As it is undertaken at first progress is paradoxical in that as we find more resources within we are able to encounter tendencies present all along and actively influencing us but unconscious. Some of these are in conflict with the idea we had formed of our self as with the ideal we set for our self. As we persevere in this work of confronting the inner world we become aware after a time of the great mystery of the self that we are and the important issue is expressed in the question: "Who Am I?". Before long we realize that we cannot answer this without dealing with the broader but related question: "What is Man?"
[See my conference on this theme.]

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