

Fear, Anxiety, and Depression¹

- I. Introduction – have them intro themselves
 - a. Why are we spending time studying these issues today?
 - b. In 2014, an estimated 15.7 million adults aged 18 or older in the United States had at least one major depressive episode in the past year. This number represented 6.7% of all U.S. adults.²
 - c. According to the National Institute of Health, 20.8% of the population will eventually be diagnosed with depression.³ 18% of adults daily deal with anxiety disorders. 8.7% will struggle with a variety of life-crippling fears.⁴
 - d. In 2008, 13.4 percent of adults in the United States received treatment for a mental health problem. This includes all adults who received care in inpatient or outpatient settings and/or used prescription medication for mental or emotional problems. 71% of these were treated for depression.
 - e. The latest study done on 2002, The National Institute of Mental Health (NIMH) conservatively estimates the total costs associated with serious mental illness, those disorders that are severely debilitating and affect about 6 percent of the adult population, to be in excess of \$300 billion per year⁵. - this does not count

¹ Adapted from class notes by Dr. Stuart Scott, Dr. John Street and Dr. Ernie Baker, from The Masters University

² NIMH Statistics: Major Depression Among Adults, *National Institute of Mental Health*, www.nimh.nih.gov/health/statistics/prevalence (7/28/16).

³ Charles Hodge, *Good Mood, Bad Mood*, (Wapwallopen, PA: Shepherd Press, 2012), 28.

⁴ NIMH Statistics: Any Anxiety Disorder Among Adults, *National Institute of Mental Health*, www.nimh.nih.gov/health/statistics/prevalence (7/28/16).

⁵ NIMH Statistics: Depression Costs, *National Institute of Mental Health*, www.nimh.nih.gov/health/statistics/cost/index.shtml (7/28/16).

the millions of others who treated for non-severe mental disorders, and I am sure that the current cost far exceeds what it was in 2002.

- f. We are looking at these things today because we believe that the Bible hold all of the answers for the issues of life.

II. What Is Cornerstone Discipleship and Biblical Counseling Training Center?

- a. CDBC is a training center that is certified by the Association of Certified Biblical Counselors. ACBC is an internationally recognized certifying origination that has been setting the gold standard in biblical counseling.
- b. CDBC seeks to lay out the distinguishing features of biblical counseling that are distinctly biblical.
- c. We desire that all who take the classes are equipped and live out the central mission of the church so as to be a church where the culture is all about making disciples who make disciples all for the growth of the body.
- d. How does a church develop this culture? By having three things:
 - i. Called and qualified leaders – leading the way in making disciples
 - ii. Sound theology – God, man, sin, the heart, biblical change, etc.
 - iii. A right understanding of the local church

III. Foundations of Biblical Counseling

- a. It is the desire of Cornerstone Church to have Christlike, competent, and compassionate disciple-makers and counselors who use the Bible as the only authority for help and change in the context of the local church. It is our desire that through counseling and counseling training that that we have a church of equipped men and women who are competent to counsel one-another. It is also

our desire that we pass on what we have been given so that other churches in Wyoming and in the world will be filled with competent biblical counselors.

b. What Makes Biblical Counseling Different from Other Methods? - Our

belief system⁶ - Everyone is living out a belief system! Including you! OUR belief system is really robust.

- i. Every belief system has a *source of authority*. Medical model – brain research; Biblical model -the Bible
- ii. Every belief system has an explanation of the world’s “problem” (**sin**). Medical model – chemical imbalance; Biblical Model – sin
- iii. Every belief system has a solution for the problem (**salvation**). Medical model – drugs/medication, you just need to accept this is how you will be; Biblical model – Jesus/ the gospel
- iv. A belief system usually has a way to change (**sanctification**). Medical model – take the drugs, help them cope with the imbalance with the problem; Biblical model – progressive sanctification
- v. There is usually a **support system**—an “institution”. Medical model – doctor; Biblical model – the church
- vi. Every system defends itself (**sparing**). Medical model – journals, schools; Biblical model – we let the Bible defend itself. We don’t need to defend it, because it speaks of its own authority and sufficiency
- vii. Every belief system has **servants** of the system.

c. The Bible is main tool for the counselor and counselee

⁶ I am indebted to Dr. Ernie Baker from The Masters University for this outline.

- i. Biblical counseling is based on fundamental beliefs about the Bible.
 1. Inspired – 2 Tim 3:16-17; 2 Peter 1:16-21
 2. Inerrant – Psalms 19:7-14; Matt 5:17-18; 1 Peter 1:23-25
 3. Authoritative – 1 Thess 2:13; Titus 2:15
 4. Sufficient – Ps 19:7-14; Ps 119; 2 Tim 3:16-17; Phil 4:4-9
 5. Understandable – 2 Peter 3:15-16; 2 Tim 2:15; Ps 119:130

IV. Fear - Mark 5:25-34 Case Study

One thing that should be understood before we begin is that fear and worry cannot be separated. There are a lot of similarities in both the “diagnosis” (the problem) and the solutions. We will first look at fear and then look at worry.

a. Introduction

- i. What are some of the most common fears? Here are some of the more common fears. Heights, needles, paper cuts, cancer, suffocation, terrorism, mice and other rodents, insects, snakes, baldness, body image, germs, flying, vomiting, driving, driving in bad weather, crowds, drowning, spousal problems, financial difficulties, loneliness, diseases, etc...
- ii. How are these often explained or described by medical or mental health professionals? Often as a disease or phobia that is explained in the DSM. In fact, phobias are listed as a form of anxiety disorders.

iii. Where do most people get their information of what fear is and how to treat it? There is often an explanation of what the fear looks like, but there is no method by which they suggest to treat it.

b. What Does the Bible Say About Fear?

i. Godly fear

1. Fear of God (Ps 115:11; 27:1-2; Jer 16:11-13; Rev 2-3) – He is to be feared because He created the universe simply by speaking. He is a kind, good and compassionate God who came down and entered into human flesh to save humanity from sin. The fear of God is the worship of God. What we fear is what our minds turn to and our lives are dictated by.

- Prov 1:7 – the fear of God is the beginning of knowledge and wisdom
- Prov 10:27 – Fearing God lengthens our lives

2. Reasonable fear of danger or difficulty (Ps 56:3)

- We don't jump out of an airplane with a parachute
- We don't go swimming in a pool of great white sharks
- We use caution when doing dangerous things because of a god-given sense of danger.
- However, those reasonable fears can often times be so exaggerated that they lead to sin.

ii. Everyday Fear

1. Definition: Many people would classify it as a feeling of agitation or anxiety because of danger of the unknown. People who are always afraid usually are very scared and anxious people. They will typically not do something they are not familiar with for fear of the unknown outcome.

2. Fear is not a thing but a response to life. Fear grips the lives of many people without them really knowing it. **Fear is a strong emotion and it is often not logical.** However, while we often know that our fears may not be logical, the experience is no less difficult and life is still hard.— like not swimming in Jackson Lake for fear of sharks; or not going outside for fear of being hit by a meteor.

 3. Like a slave master, fear is controlling. “Extreme displays of anxiety are often related to an unfounded fear so overwhelming and so overpowering that it clutches a person’s heart, forces the heart to beat faster, produces chills or perspiration, and makes the person feel completely unable to cope with the moment.”⁷

 4. Paul told Timothy in 2 Tim 1:7, “God has not given us a spirit of fear...” The word for fear means “moral cowardice.” It is referring to something that would keep up from obeying God or fulfilling our responsibilities.
- c. Psychological disorders that are fear based: Agoraphobia; Acute Stress disorder; antisocial personality disorder; codependency; panic attacks; claustrophobia; general phobia; PTSD; forms of schizophrenia; Sleep terror disorder; social anxiety disorder; multiple personality disorder; OCD; paranoid personality disorder; repression; perfectionism; depression; etc...
- d. How Are We To Think Biblically About Fear?
- i. Fears are directly related to our thinking (Gen 12:11-13; Rom 12:1-2; Eph 4:23; Phil 4:8). What we fear shows what we are giving much of thoughts and attention to. Wrong or misinformed thoughts lead to fear.

⁷ John MacArthur, *Found: God's Peace: Experience True Freedom from Anxiety in Every Circumstance*, (Colorado Springs, CO: David C. Cook), location 9, Kindle.

- ii. Our fear focuses on the circumstances rather than on God (Gen 32:7-12; Num 13:25-14:5; Ps 55:22; Mark 4:35-41). God is in complete control of all situations for all people. God is never caught by surprise. Now, this does not mean that we should put ourselves in situations that are not wise. I should not jump off a cliff thinking that God will save me because He is in control. I will die because of the gravity that He controls. I should not put God to the test, but rather trust in Him in the midst of difficult circumstances.

Again, just to be clear, a trust in God does not mean that my circumstances will be changed to how I want them which will alleviate my fear. My situation may even get worse, but I can still trust in God and not give into my fears.

- iii. When we are fearful, we are focusing on self (Deut 7:17-18; Is 51:12-13; Phil 2:4). Especially in this increasingly hostile world we live in, it is easy to get caught in the circumstances and focus on our protection. We may be tempted to just stay inside and never travel for fear of a terrorist attack. This focus on self also means that we are relying on our ability to get out of or not get out of the circumstance or situation without a reliance on God.
- iv. Ungodly fear motivates us to commit other sins (Gen 26:7; 1 Sam 15:24; Matt 26:69-70; Gal 2:12). How? We may not serve, not go to church, give into pleasing people over God, make major decisions that are not best for yourself or your family.
- v. Not being right with God leads to fear (Ps 38:17-18; Prov 4:32; 28:1).
How?

- vi. Being fearful does not change the situation, nor does it accomplish anything worthwhile (Matt 6:27). Similar to that of anxiety, when we are fearful of the unknown, we often are focusing too much on the circumstance. We are trying to think the problem away or dwell on what would it be like if we were not in this situation.

- vii. Ungodly fear is engaged in loving something else other than God (Prov 14:26-17; 29:25; Matt 6:31-33; 10:28; Gal 1:10; 2:12; Heb 13:5-6; 1 Peter 3:13-14). What we fear shows us what we worship. We are all created to worship God, but because of sin, we now naturally worship someone or something else.

TALK ABOUT THE HEART WITH THIS DIAGRAM

| Things we may fear more than God | Things we may want or love more than God |
|---|---|
| Man | Man's approval |
| Unwanted circumstances | Life of ease/comfort with no pain |
| Losing someone or something dear | Money, health, job, people, things |
| Bodily harm | Safety, no pain |

- e. Questions to Ask to Get to the Root of Our Fears
 - i. Is there anything that you are fearful of right now?
 - ii. Recall the last 5 times you where fearful. Explain the situation. Did the situation come about as a result of other sins or yours?
 - iii. How did you respond to your fear? What did you do or not do?
 - iv. What where the results of beings sinfully fearful?
 - v. How were you not trusting God?
 - vi. What have you done about those things, situations, or fears since?
 - vii. What kinds of things typically contribute to your fear?

- viii. What sins do you tend to commit due to fear? Do you lie? Do you fail to do what God wants? Are you irresponsible? Do you choose not to think of others or love others?
 - ix. Are you confident that you are in a right good standing with God because you are in Christ? Are you confident that you are God’s child? On what do you base your confidence?
 - x. Do you have any un-confessed sin in your life?
- f. How Can We Change? (Phil 4:6-9)
- i. Before fear hits again:
 1. Be sure that your salvation is secure and repent of any known sin (Ps 32:5).
 2. Confess and repent of your sin of fear to God and others whom your fear may have affected (Ps 50:1-4; Matt 5:23-24).
 3. Pray to God to work in this area of your life and help you to put forth full effort toward change (2 Cor 9:8).
 4. Determine right thoughts and actions to combat the fears you usually have (see your answers from the questions above). Make your thoughts thankful, hopeful, trusting, and loving. Include scripture in them. Put your new thoughts into prayer (Ps 119:59-60).

| Fearful Thoughts | Thankful, hopeful, Trusting, and Loving Thoughts |
|---|---|
| Oh no! I just know this airplane is going to crash. I can’t do this. I don’t want to die! | Thank you Lord, that I am in your hands. I am just as safe up here as I am on the ground. You are in control of all things. I |

| | |
|---|---|
| | can trust in you no matter what happens. |
| My job is ending soon and I don't have another one yet. What am I going to do? Were going to the poor house! | I thank you Lord, that you know all my needs. I will do all I can to find another job, but I know that you will help me through whatever happens. Please help me find another job. I know that you are in control of all things. I will trust you and be content with what You provide. |
| If I confront her sin, she is going to get really angry, and I don't know what else she will do, but it will be really bad. | If I confront her, she may get angry, but I will endure it in order to do what you want Lord. I ask you to help her respond well, but I will trust You with the outcome. |

5. Memorize some helpful verses to help renew your mind.

6. Do a study of God's Sovereignty (Is 46:9-11; Gen 50:20; Rom 8:28).

7. Do a study of God's sufficient grace in the times of trouble (Heb 4:16; 2 Cor 12:9; Is 41:10).

8. Increase your fear of God. Study, pray, and commit to love God with all your heart (Deut 10:12; Ps 119:2).
 - a. "If you really want to fight fear, learn to fear Someone who captures your attention in such a way that your other fears suddenly seem pedestrian and unimportant."⁸

⁸ Edward Welch, *Running Scared: Fear, Worry, and the God of Rest*, (Greensboro, NC: New Growth Press), 192, Kindle.

b. “The fear of the Lord results from knowing that I always live coram deo— I live before the face of the Holy God. His holiness leaves me amazed at both the magnitude of his forgiveness and the seriousness of my own sins. Because he is holy I want to obey him wholeheartedly. ‘The fear of God will be with you to keep you from sinning’ (Ex. 20: 20). The great blessing in the fear of the Lord is that it gives us a heart to flee from sin and run toward obedience.”⁹

9. Increase your faith/belief in God (Is 41:10, Ps 23; 27:1; 56:3; John 14:1, 27).

10. Be alert, ready to use self-control and do battle with your thoughts (1 Peter 1:13).

ii. During the time of being fearful

1. Earnestly seek the Lord and His help (Ps 34:4; 46:1-3).

2. Put off being sinfully fearful (Is 12:2; 1 John 4:18).

a. Ask yourself. “What am I fearing more than God”

b. Ask yourself “Are my thoughts headed in the wrong direction? Are they:

- | | |
|---|---------------------|
| - on the future? | - On untrue things? |
| - on temporal things? | - focused on me? |
| - void or deficient of God and His truth? | |

3. Put on trust, responsibility, and love (1 John 4:18).

a. Focus most on God and His promises (Ps 18:1-2)

⁹ Edward Welch, *Running Scared: Fear, Worry, and the God of Rest*, (Greensboro, NC: New Growth Press), 197, Kindle.

b. Make yourself dwell on right thoughts and appropriate verses (Eph 4:23)

- stay in the present
- think about eternal things and things that God is concerned with
- think on true thoughts
- think profitable thoughts

c. Ask yourself, “how can I do what is right?”

- What is the responsible thing to do right now?
- What is a loving thing I can do right now?
- What constructive thing would God want me to do about this problem?

4. Be willing to endure the temptation to fear if you must in order to please God and others (2 Tim 2:3-4)

iii. What if I keep failing

1. Ask yourself, “how did I sin?” Be specific about the thoughts and actions.
2. Ask yourself, “If I had to do this over and over again, what would I think and do?”
3. Confess and ask forgiveness of God and anyone else who was affected by or who witnessed your sinful fear (James 5:16; 1 John 1:9).
4. Put on right thoughts (Eph 4:22-24).

| FEAR | LOVING TRUST |
|---|---|
| Focus on self | Focus on others |
| Self-protecting (what will happen to me?) | Self-giving (How can I love and serve others? John 3:16) |
| What will I lose? | What can I give to God and others? |
| Moves away from the problem | Moves toward the problem (seeks resolution) |
| Secludes self | Sacrifices self; reaches out |
| Hesitates | Starts |
| Highly suspicious | Believes all things and thinks no evil (1 Cor 13) |
| I won't try | Acts obediently and is all the while totally dependent on God's grace |
| Might fail | Even if fail, continues to reach out |
| Trust in self and man | Trust in God |

g. Practical Tips to Change

- i. Make a list of all the things that you are afraid of and why you are afraid of those things.
- ii. Learn how to control fear. The fear mechanism we have is not bad, but it must be under control. Keep a journal of all the times you become fearful. List time of day, the place, the occasion, if you are alone or with others, what you do about, and how you are feeling when you become fearful. (Note any similarities among the list).
- iii. Take a look at 1 John 4:18. What does John say about fear. What does it mean that perfect love cast our fear? Study this passage and read the surrounding passages to understand the context. Write out several notes concerning the passage.
- iv. Psalm 27:1,14 tells us to wait for God. What does it look like for a fearful person to wait for God and trust in Him? If God is for us, why

is there fear in us when we know that He has our life under control?

Meditate on this psalm and memorize verses 1 and 14.

- v. Complete the homework on Fear in the *Homework Manual for Biblical Living vol. 1*.
- vi. Read *Courage* by Wayne Mack. Complete one chapter a week and make a list of any questions you might have.
- vii. Read *Trusting God* by Jerry Bridges. Complete the corresponding workbook.
- viii. When you are becoming fearful, pray to your Father who is in heaven. Resting in God during a time of trial is one of the best things we can do. Journal several of these prayers and record any significant change they have seen in the way you react to their fear.
- ix. Read I Kings 18, 19 and look at how fast Elijah was filled with fear after his great victory at Mt. Carmel. How different is your life from his? Do you run at the first sign of you fear even after you have had a victory in the Lord?

V. Anxiety

- a. Introduction – Case Study of me
- b. Definitions – some of the solutions and talking about medication will be seen in the next section on depression.
 - i. What it is not
 1. Worry is not proper care and concern that causes you to attend to business in a responsible way. (2 Cor 11:28; Phil 2:19, 20; Gal 4:19; 1 Cor 12:25)
 2. It is not right planning.
 3. It is not care and concern for the wellbeing of others (2 Cor 11:28).

ii. What it is

1. Worry is over-anxious concern about the future (Matt 6:25).
2. “Anxiety is, at its core, an inappropriate response in light of circumstances; it’s very different from the cares and concerns in life that cause people to attend to business in a responsible way.”¹⁰
3. “Worry is not simply an emotion that erodes our quality of life or a pain to be alleviated. It is a misdirected love that should be confessed. It is trying to manage our world apart from God.”¹¹

iii. Why Do We Get Anxious?

1. Physical Reasons: The most common medical causes of anxiety are heart attack, hyperthyroidism, drug abuse, various medication, high blood pressure, and other hormone conditions. Also, if you are having health issues that you are not certain about, or you are in need of surgery, these are often triggers for someone to be anxious.
 - a. While some physical conditions can lead to being anxious, extreme anxiety can *cause* physical issues which usually leads to greater anxiety. Ulcers, weight loss, headaches, various other stomach issues can be caused by anxiety.
2. Life Circumstances – a new job, losing a job, having children, getting married, getting divorced, having too much money, having not enough money, moving, dating, new technology, doing something new, driving in the Town Square in the summer, etc...

¹⁰ John MacArthur, *Found: God's Peace: Experience True Freedom from Anxiety in Every Circumstance*, (Colorado Springs, CO: David C. Cook), location 20, Kindle.

¹¹ Edward Welch, *Running Scared: Fear, Worry, and the God of Rest*, (Greensboro, NC: New Growth Press), 97, Kindle.

3. Anxiety is not caused by a specific problem, but by the person's reaction to that problem. Ex: Two people may be stuck in traffic but one is super anxious because he is late for work. The other person, however, is on vacation and is no hurry at all.
 - a. "Worry is focused inward. It prefers self-protection over trust. It can hear many encouraging words— even God's words— and stay unmoved. It can be life-dominating. It is connected to your money and desires in that it reveals the things that are valuable to you. It can reveal that you love something more than Jesus. It crowds Jesus out of your life."¹²
 - b. "Some people assume worry is the result of too much thinking. Actually, it's the result of too little thinking in the right direction. If you know who God is and understand His purposes, promises, and plans, it will help you not to worry."¹³

iv. **Psychological disorders that are often associated with anxiety:** anxiety disorder; adjustment disorder; depression; introversion; OCD; paranoid personality disorder; perfectionism; self-disclosure; stress disorder; recovered memories; repression; psychotic disorders; etc...

1. Obsessive-compulsive Disorder (OCD), in its pronounced form, affects about one in fifty people. It is worry run amok. The obsession is an intrusive idea that feels impossible to dislodge. The compulsion is the action intended to neutralize the obsession.

¹² Edward Welch, *Running Scared: Fear, Worry, and the God of Rest*, (Greensboro, NC: New Growth Press), 97, Kindle.

¹³ John MacArthur, *Found: God's Peace: Experience True Freedom from Anxiety in Every Circumstance*, (Colorado Springs, CO: David C. Cook), location 143-144, Kindle.

- c. What the Bible Says About Anxiety
 - i. Valid concern becomes anxiety and therefore is sin when:
 - 1. Thoughts are focused on changing the future.
 - 2. Thoughts are unproductive rather than move to biblical action.
 - 3. It controls you instead of you controlling it.
 - 4. It causes you to neglect other responsibilities and relationships.
 - 5. It damages your body.
 - 6. You lose hope instead of finding answers.
 - 7. You stop functioning.
 - ii. Why Worry is Wrong – Matt 6:21-34
 - 1. The Greek word for “anxious” (merimnao) stresses the action and effects of worry – “To divide, part, rip, tear apart, to be unduly concerned, distract your attention.” (Matt 6:41;12:25; Mark 4:19)
 - 2. It is unproductive - a lack of faith
 - a. Accomplishes nothing – v. 27
 - b. Thief of time – v. 34
 - c. Controls your mind
 - d. Blurs vision – v. 22, 23
 - e. Wastes energy
 - f. Damages your body
 - g. A worrier usually stops functioning in many areas of life
 - h. Worry is actually laziness – Matt 25:14-30

3. It is unnecessary
 - a. God is able and trustworthy – v. 28-30
 - b. He loves you – v. 26; Matt 10:28-30

4. It is unbecoming - This is what unbelievers do
 - a. Focuses on what one does not have – v. 31
 - b. Focuses on earthly values, not eternal – v. 25
 - c. Focuses on the gift and not the Giver
 - d. It is what those who have no hope do

5. It is sinful
 - a. Worry is unbelief - v. 25, 26, 34
 - b. Worry is idolatry - v.24, 33

6. Hope comes from seeing anxiety as sin because God has saved us from our sin.
 - a. Christ's death on our behalf has paved the way for us to be able to not merely cope with, but to overcome our anxiety (2 Cor 5:21).
 - b. If anxiety is something that God has been commanded us not to do, He will give us the grace to overcome it (1 Cor 10:13; 2 Tim 3:16-17).

- d. Getting to the Heart of Anxiety
 - i. Is there anything that you are presently anxious about?
 - ii. Recall the last three to five times you anxious or fearful. Explain the situation that was involved.
 - iii. What was your thinking for each of the situations in #2?
 - iv. How did you respond to your anxieties? What did you do or not do?
 - v. What were the results of being sinfully anxious (if you were)?
 - vi. How were you not trusting God?

- vii. What have you done about those things, situations, or anxieties since?
 - viii. What kinds of things typically contribute to your anxiety?
 - ix. What sins do you commit due to anxiety? Do you lie? Do you fail to do what God wants? Are you irresponsible? Do you become angry? Do you choose not to think of others or love others?
 - x. Are you sure that you are in good standing with God because you are in Christ? Are you confident that you are God's child? On what do you base your confidence?
 - xi. Do you have any un-confessed sin in your life?
 - xii. Keep track of when and why you become anxious in the next two weeks.
- e. Overcoming Anxiety
- i. Wrongs ways
 - 1. minimize
 - 2. pious wishing
 - 3. own effort
 - 4. manipulate
 - 5. activity
 - 6. talk about it
 - 7. doing activities
 - 8. selfish praying
 - ii. Right ways – Matt 6:33; Phil 4:6-9
 - 1. Right praying - Phil 4:6-7
 - a. Recognize and confess worry as sin
 - b. Thank God for His goal in trials and problems
 - c. Use specific requests when praying
 - d. Cast your anxiety on God - 1 Peter 5:6-7

2. Right thinking – Phil 4:8; Is 26:3
 - a. Remind yourself of God’s bounteous provision
 - b. Think list – Phil 4:8
 - c. Biblical planning – James 4:13-16
 - d. Find solutions to problems
 - e. Think on the character of God – Is 40-48
 - f. Remember that all that God gives you is for your good and to make you more like Christ (Rom 8:28-30).
 - “If you understand that God is using all the difficulties you face to perfect you, you’ll be at peace. It is not all for nothing. You may not always know why you’re going through this or that, but be encouraged that there is a good reason. Turning to the New Testament, Paul said that if you want peace, do good (Rom. 2: 10).”¹⁴
 - g. Redirect faith in self or other people to faith in God
 - “Faith, according to our Lord’s teaching ... is primarily thinking.... We must spend more time in studying our Lord’s lessons in observation and deduction. The Bible is full of logic, and we must never think of faith as something purely mystical. We do not just sit down in an armchair and expect marvelous things to happen to us. That is not Christian faith. Christian faith is essentially thinking. Look at the birds, think

¹⁴ John MacArthur, *Found: God's Peace: Experience True Freedom from Anxiety in Every Circumstance*, (Colorado Springs, CO: David C. Cook), location 443-445, Kindle.

about them, and draw your deductions. Look at the grass, look at the lilies of the field, consider them.... Faith, if you like, can be defined like this: It is a man insisting upon thinking when everything seems determined to bludgeon and knock him down.... The trouble with the person of little faith is that, instead of controlling his own thought, his thought is being controlled by something else, and, as we put it, he goes round and round in circles. That is the essence of worry.... That is not thought; that is the absence of thought, a failure to think.”¹⁵ – Martyn Lloyd Jones

3. Right Action

- a. Putting on right thinking, right choices, right praying, and right actions, puts off worry.
 - b. Faithfully do what God has called you to do despite your feelings.
- f. Homework
- i. Make a list of all the things that make you anxious.
 - ii. Look up ten verses that speak about being anxious and study two of them.
 - iii. Memorize Philippians 4:6,7.
 - iv. Complete the Overcoming Worry homework assignment in the *Homework Manual for Biblical Living vol. 1*.
 - v. Make a list of all the things that you are thankful for. List the things that God has given you and look at all the blessings you have been given.
 - vi. Take a look at Psalm 62 and find how many different words David uses for God (i.e. Rock, Fortress). What is David saying about God? What is the difference from verses 1, 2 to 5, 6?

¹⁵ Ibid, locations 386-398, Kindle.

- vii. Whenever you are becoming anxious stop what you are doing, if possible, and pray to God. Ask Him to be your Rock, your Fortress, you Redeemer. When praying, tell God everything that you are thankful for that He has given you. Thank Him for His provision, His security... Ask Him to take away your anxious thoughts and replace them with thoughts of Him. Write down one of these prayers.
- viii. Keep a journal of your prayers at least once a day. At the end of every week reflect back on the previous week and see how (or if) your prayers have become less self-focused and more God and others focused.
- ix. Work through the Psalm 18 sheet. While answering the questions, be alert to see what some of your functional gods might be that are causing you to become anxious.
- x. Read *Trusting God* by Jerry Bridges. In each chapter that you read highlight 10 key points that stand out to you. Out of those ten pick one that you will seek to apply to your life this next week.
- xi. Read *Anxiety Attacked* by John MacArthur. In each chapter that you read highlight 10 key points that stand out to you. Out of those ten pick one that you will seek to apply to your life this next week.
- xii. Read *Overcoming Fear, Worry, and Anxiety* by Elyse Fitzpatrick. In each chapter that you read highlight 10 key points that stand out to you. Out of those ten pick one that you will seek to apply to your life this next week.

VI. Depression

a. Introduction

Depression is not something that is the same for everyone. It can be caused by one thing for someone and other for someone else. As we will see, it may be the symptoms caused by a physical disease. Since we live in a fallen world with fallen bodies, there will be times where our bodies hurt and there is no physical explanation for why. At times one may feel down and blue and the person is not in sin nor is there a physical reason.

- b. Case Study – Susan** – went to the dr. for pain in places that did not hurt before. After x-rays and blood tests, there was nothing physically wrong with her. After many more tests, she received the diagnosis of depression. Her dr. talked with her about having a chemical imbalance in her brain.

Susan began the medication and almost immediately began to feel better. However, she began to feel restless during the night. She was now anxious over things that never used to bother her. She was more on edge with others.

She returned to the dr. who switched her to a different drug. Two weeks later she was still not able to sleep so she again went to her dr. for help. He gave her a second anti-depressant to take in the evening.

6 weeks later she returns with the same issues she first had when she began taking the medication. She wanted a new drug she saw on TV, but she had to go to a psychiatrist for the prescription. She was told by the psychiatrist that she has bipolar disorder. The new diagnosis led to new medication.

She began taking the new medication with the previous two others. She also started taking anti-anxiety pills. These new drugs caused significant weight gain, diabetes, and involuntary jerking and tics.

For the next four years, this process of going to the dr. and getting more medication continued. One day, five after her first visit, she realized that she was no better off, and in fact felt worse than when she first started. She wanted to get off her medication, which her dr. reluctantly agreed to. A year later, she was off her meds and was feeling better.

Susan's story is very common.

c. Identifying Depression – we will be spending a lot of time looking at the problem of depression before we start talking about solutions and answers.

d. Definition

Common – a debilitating (weakening) mood, feeling, or attitude of hopelessness. See below on the DSM-IV criteria.

Biblical - a debilitating (weakening) mood, feeling, or attitude of hopelessness which becomes a person's reasons for not handling the most important issues of life.

- i. This is different from discouragement: in depression, a person stops functioning; in discouragement, a person keeps going
- ii. Depression is a contemporary term. Only used in the last 100 years or so. In the bible, it can be called fainthearted, hopelessness, etc...

- 1. 1 Thess 5:14 – the word fainthearted literally means to be “little” or “puny.” You can say that the one who is

fainthearted is literally small souled or little souled. This is the term that was used by the puritans.

- iii. In fact, prior to about 1980, most people, when they felt down, would say that they were sad and no one used the word depressed. Now, no one says they are sad but rather they are depressed.¹⁶

- e. Who Does Depression Affect?
 - i. The answer to this question depends on who you ask and what criteria you use to determine depression.

 - ii. If you were to go strictly by the DSM-V criteria you could say that at least of 80% of us will be diagnosed with depression at some point in our lives.¹⁷ Parker goes on to say that the “reasons for the over-diagnosis of depression included lack of reliable and valid diagnostic model...”¹⁸ Charles Hodge, commenting on this states, “Simply put, the criteria we use simply do not work well. The problem is that the ‘DSM-III’s operational criteria were set at the lowest order to inference.’ This means that the bar to justify a diagnosis of depression was set so low that almost anyone could meet it at some time in life.”¹⁹

 - iii. However, the National Institute of Health estimates that 20.8% of all people will actually be diagnosed.²⁰

- f. Description
 - i. Depression that is sinful has two aspects

¹⁶ Charles Hodge, *Is It A Sin to Be Sad*, www.biblicalcounseling.com/2016/07/is-it-a-sin-to-be-sad (7/20/20016).

¹⁷ Gordon Parker, *Is Depression Over-Diagnosed? Yes*, *British Medical Journal*, 355 (August 18 2007).

¹⁸ Ibid.

¹⁹ Charles Hodge, *Good Mood, Bad Mood*, (Wapwallopen, PA: Shepherd Press, 2012), 27.

²⁰ Ibid, 28.

1. Usually has strong feeling orientation. “I feel ...”
 2. The feelings become the basis for their actions, either what the person does or does not do. Thus depression is present when a person uses bad feelings as a reason to not live according to biblical principles.
- ii. Normal sadness from loss
1. This kind of depression is not in and of itself sinful. Yet, we can quickly turn the sadness of life to making it all about how we feel and therefore we stop functioning as we should.
 2. Whether it be from the loss of a loved one, a job, a relationship, of a number of other reasons, we all experience sadness from loss.
- iii. How they describe themselves
1. Moody, often blue, serious, shy, introvert, easy going, quiet, self-conscious, lonely, sensitive, suicidal, nervous.
 2. Not always like this. Used to be outgoing.
- iv. How they look to someone else
1. What’s-the-use attitude (they will try to convince you life is pointless)
 2. May cry easily, sighs, looks down, sits motionless
 3. General drooping of face muscles, unkempt appearance

4. Physical slowdown

v. Common Complaints

1. Tired often, don't sleep well or sleep too much, go to bed tired and get up tired. Fatigue is increased by worry about unfinished tasks, lack of sleep, overeating dieting, drugs, dread of work
2. Many become immobile in dealing with top priority problems
3. Never enough time to get things done
4. More than normal sickness, backaches, headaches
5. Loss of appetite; may overeat occasionally
6. They only talk about the problem, never do anything about it
7. Shuts down spiritually

g. Diagnosis

- i. The diagnosis in the DSM and from the medical community is made on the basis of the person's feelings, thinking or actions. Most people who are diagnosed with depression undergo no medical testing. There is no clear diagnosis as there is for Strep, cancer, diabetes, Parkinson's, etc.

- ii. As we saw above, far too many people are being diagnosed for depression. Many medical practitioners (1 in 4) admit to not even using the DSM criteria when diagnosing depression.²¹
- iii. “What would happen if the diagnostic standard for pneumonia included everyone who coughs? You would have a lot more people diagnosed with pneumonia-wrongly. If you lower the standard for a diagnosis, you increase the number of people who qualify for it. The suggestion that the criteria used for depression might be inflating the numbers of people diagnosed is not new.”- Charles Hodge, “Good Mood, Bad Mood,” 2012, 28.
- iv. Far too many people, like Susan, are being diagnosed for depression. “Instead of assuming that everyone with a depressed mood has a disease that requires medical attention, it could be that we are looking at people who are simply sad for a variety of identifiable reason.”²²
- v. Depression, by definition, is not a disease. The dictionary defines a disease as “a pathological condition of a part, organ, or system of an organism resulting from various causes, such as infection, genetic defect, or environmental stress, and characterized by an identifiable group of signs or symptoms.”²³ Meaning that when you exam some part of the body, there is clear and objective change in the tissue.
- vi. One of the reasons that depression is called a disease is because it seems “the only logical explanation for people who have no

²¹ Mark Zimmerman, *Psychiatrists’ and Non-psychiatrist Physicians’ Reported Use of the DSM-IV Criteria for Major Depressive Disorder*, *Journal of Clinical Psychiatry* 2010;71(3):235-238.

²² Charles Hodge, *Good Mood, Bad Mood*, (Wapwallopen, PA: Shepherd Press, 2012), 36.

²³ *Ibid*, 39-40.

apparent reason for feeling depressed. People who feel depressed but don't want to feel that way, so they think that the problem must be physical. They feel so bad that something *must* be wrong with the body: it is sick. When the person really wants to be responsible, but believes he cannot be because of how he feels, he is sure that something in the body is causing it. It only seems logical that when one has great difficulty being responsible, it must be because something is wrong with the body, not with motivation.”²⁴ – Dr. Smith, “,” p. 195.

vii. There is no proven medical problem. No physical deformity is present in the body. There are no blood tests that can be done that show any pathology for depression. Now, when there is an organic problem then the diagnosis goes from depression to that specific disease (example: an underactive thyroid can cause behavior resembling that of depression. However, when that is the case, it is not called depression, but hypothyroidism). “No disease exists in the human body without some kind of change at the cell level, which results in an abnormal function.”²⁵

viii. The diagnosis is based on the subjectivity of the person. Just look at what the DSM-IV says.

ix. The DSM-IV:

A. Five (or more) of the following symptoms have been present during the same 2-week period and represent a change from previous functioning; at least one of the symptoms is either (1) depressed mood or (2) loss of interest or pleasure.

²⁴ Robert D. Smith, MD, *Christian Counselors Medical Desk Reference*, (Stanley, NC: Timeless Texts, 2000), 195.

²⁵ Charles Hodge, *Good Mood, Bad Mood*, (Wapwallopen, PA: Shepherd Press, 2012), 38.

Note: Do not include symptoms that are clearly due to a general medical condition, or mood-incongruent delusions or hallucinations.

(1) depressed mood most of the day, nearly every day, as indicated by either subjective report (e.g., feels sad or empty) or observation made by others (e.g., appears tearful). **Note:** In children and adolescents, can be irritable mood.

(2) markedly diminished interest or pleasure in all, or almost all, activities most of the day, nearly every day (as indicated by either subjective account or observation made by others)

(3) significant weight loss when not dieting or weight gain (e.g., a change of more than 5% of body weight in a month), or decrease or increase in appetite nearly every day. **Note:** In children, consider failure to make expected weight gains.

(4) insomnia or hypersomnia nearly every day

(5) psychomotor agitation or retardation nearly every day (observable by others, not merely subjective feelings of restlessness or being slowed down)

(6) fatigue or loss of energy nearly every day

(7) feelings of worthlessness or excessive or inappropriate guilt (which may be delusional) nearly every day (not merely self-reproach or guilt about being sick)

(8) diminished ability to think or concentrate, or indecisiveness, nearly every day (either by subjective account or as observed by others)

(9) recurrent thoughts of death (not just fear of dying), recurrent suicidal ideation without a specific plan, or a suicide attempt or a specific plan for committing suicide

B. The symptoms do not meet criteria for a Mixed Episode.

C. The symptoms cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.

D. The symptoms are not due to the direct physiological effects of a substance (e.g., a drug of abuse, a medication) or a general medical condition (e.g., hypothyroidism).

E. The symptoms are not better accounted for by Bereavement, i.e., after the loss of a loved one, the symptoms persist for longer than 2 months or are characterized by marked functional impairment, morbid preoccupation with worthlessness, suicidal ideation, psychotic symptoms, or psychomotor retardation.

- x. According to Horwitz and Wakefield, “90 percent of those diagnoses with depression are simply sad because of a significant loss...and that ‘talk therapy’ is just as effective as medication.”²⁶

h. Manic Depression (Bi-Polar)

- i. Description – strange, bizarre behavior which goes from extreme elation (euphoria) to extreme blueness (depression).
- ii. Bizarre behavior is often used as a camouflage to throw others off the track.

²⁶ Charles Hodge, *Good Mood, Bad Mood*, (Wapwallopen, PA: Shepherd Press, 2012), 68, 180.

- iii. Unhelpful and often sinful solutions are already being used by the depressed to attempt to handle depression
 - 1. Elation as an over-correction (reaction, response) – like over correcting a car on a skid, the depressed person seeks to get out of his funk and goes to the extreme
 - 2. Elation as solution – this is the way to solve the depression
 - 3. Elation as denial – “I’m not really depressed.” No one will ever know
 - 4. Elation as frantic straw grasping – they keep grabbing for anything that can help, but nothing is solid
 - 5. Elation as one part of pendulum living way of life – this is just part of their normal way of living

iv. Symptoms

| Manic | Depressive |
|---|--|
| Emotional, Effective Manifestations | Emotional, Effective Manifestations |
| Elation Increased gratification Likes self Increased involvement Increased sense of humor | Depressed Loss of gratification Disgust with self Loss of involvement Loss of humor |
| Cognitive Manifestation | Cognitive Manifestation |
| Positive self-image Positive expectations Blames others | Negative self image (remember that no one has ever hated his own flesh) Negative expectations |

| | |
|--|--|
| Denial of personal problems, mistakes Arbitrary decision making Delusions: self –enhancing, prestige | Blames self Exaggeration of problems Indecisive Delusions: self-degrading |
| Motivational Manifestation | Motivational Manifestation |
| Driven and compulsive Action-oriented wishes Drive for independence Desire for self-enhancement | Devoid of motivation Wishes to escape Excessively dependent Death wishes |
| Physical Manifestations | Physical Manifestations |
| Hyperactivity Indefatigable Appetite variable Increased sexual interest Insomnia | Retardation Fatigability Loss of appetite Loss sexual interest Insomnia or excessive sleep |

i. Some physical causes for depression *symptoms*: hypothyroidism, Parkinson’s, cancer, AIDS, illegal drug ingestion, brain tumors and diseases, mono, lupus, heavy metals, toxins, kidney failure, etc... See list on 365 of the *Christian Counselors Medical Desk Reference*.

i. Reasons to get them to see a doctor because their depression may be caused by a physical issue: advanced age; the lack of any traumatic event; a track record of usually being secure, stable, confident; no history of chronic illness; functioning biblically and really trying to do the godly thing; use of prescription, over-the-counter, or illegal drugs

ii. Some physical causes *from* depression: serious impairment of intellectual abilities; extreme, inexplicable delusions

j. What About Chemical Imbalance?

- i. The word imbalance means the chemicals are out of balance and not normal. It also implies they can be measured and the normal levels determined.
- ii. The term chemical imbalance is communicating the idea that one of the chemicals is too high or too low in this synaptic junction.
- iii. How can a chemical imbalance be proved?
 1. There is no instrument that will measure this synapse so it can be proved.
 2. The term chemical imbalance is only a theory not fact. “There has never been a peer-reviewed, published journal article that proves that a serotonin deficiency is the cause of any mental disorder. Further, even today we do not know what the correct balance of serotonin, dopamine, or norepinephrine should be in the human brain.”²⁷
 3. It is interesting and revealing to hear what the non-Christian community has to say about this theory. There are medications in France that we doing the exact opposite of the medications in the US to treat depression. There is no consistency in the medication.
 - a. Several leading experts, H. Ruhe, N. Mason, and A Schene say, Although previously the monoamine systems were considered to be responsible for the development of major depressive disorder (MDD), the available evidence to date does not support a direct casual relationship to MDD. There

²⁷ Ibid, 45.

is no simple direct correlation of serotonin or norepinephrine levels in the brain and mood.”²⁸

b. Thomas Indel, the director of the National Institute of Mental Health, says, “There is no biochemical imbalance that we have even been able to demonstrate.”²⁹

4. True proven chemical imbalances in the body are not called chemical imbalance but terms or labels are used that describe the physical condition.

5. The benefit from chemicals used to treat these conditions is used as support for the theory of chemical imbalance.

k. What About Medication?

i. How do these drugs work?

1. The theory is that the medications somehow restore the balance but there is no proof.

2. “Well maybe the behavior has produced a chemical imbalance in the body and medication is needed to restore it.”

3. Since we cannot prove the chemical imbalance such a concept cannot be proved.

ii. Drugs are used to alter and improve the feelings

²⁸ Ibid, 46.

²⁹ Ibid.

1. They reduce the bad feelings and thus help the person function better.
2. Even though feelings are improved, this does not get at the heart of the problem. Feeling better does not solve the problem but by-passes the use of the Bible to deal with those problems

iii. Is Medication Needed?

1. “A faulty theory will lead to faulty treatment. But, even more important, when a theory is held to be true, it shapes our thinking about how to respond to the problem. Knowing that the chemical imbalance theory is not fact drives us to look elsewhere for better answers as physicians and counselors.”³⁰
2. The argument for the use of medication is often this, “I felt terrible. I took the medicine. It made me feel better. I must have a disease and the medicine works.” “The argument boils down to something like this: If I have a disease, take medicine, and recover, it proves two things. (1) I have a disease and (2) the medicine works.”³¹
3. As stated above, around 90% of people diagnosed are experiencing normal life sadness. Meaning, that the medication they are taking is just as effective as a placebo. This also means that biblical counseling is in a unique to help since we are able to talk to people about the real solutions to their problems.
4. Doesn’t the fact that people feel better on depression medication mean that there is something wrong with the body? - the same could be said for people diagnosed with anxiety disorders. The simple answer is not necessarily. Just because the medication helps

³⁰ Ibid, 47.

³¹ Ibid.

the feelings, does not mean that something is the body is wrong. When a person takes drugs, they feel better. But that does not mean that there is something wrong in their brain. *It's like giving someone a pain pill when he is sitting on a tack. It will relieve the symptoms, but not the cause.*

5. Placebos have yielded similar results as the real medication. “In research that examined forty-seven studies of antidepressants conducted or sponsored by the makers of the medicines, Irving Kirsch found that 82 percent of the benefit of taking them came from placebo effect. In over half the studies, published and unpublished, the antidepressants worked no better to relieve depression than the placebo did and in 87 percent of patients with depression, the difference between the active drug and placebo was ‘non-existent.’ What does this mean?... The simple message from these studies was that in 82-87 percent of those treated, the drugs themselves were not the source of the benefit. The greatest benefit came to those who believed in the drug and gained hope from that belief.”³²

6. There may be a need for someone to be on medication for a time in order to help keep them alive and functioning enough to get them to apply biblical principles, but long term use have not been proven to be helpful.

1. Symptoms of Depression

| Physical | Spiritual |
|---------------------------------|--|
| Insomnia or hypersomnia | Shame |
| Significant weight loss or gain | Guilt (Depressed people are often guilty people because of their |

³² Ibid, 48-49.

| | |
|--|--------------------------|
| | passivity towards God.) |
| Feeling of being restless or slowed down | Fear |
| Fatigue, loss of energy | Thanklessness |
| Problems concentrating | Unforgiving spirit |
| Sense of alienation from things once deemed beautiful and pleasant | Hopelessness Unbelief |
| Feeling sad, blue, down in the dumps | Anger |

m. Development of Depression: Why Do We Get Depressed

i. Popular Theories

1. Psychoanalytic school– anger and resentment turned inward, object loss, loss of self-esteem
2. Behavior school – learned helplessness and hopelessness; lack of positive reinforcement
3. Cognitive school – faulty, dysfunctional way a person views himself, his world, or experience and the future; he processes information incorrectly
4. Sociological school – loss of role, status, prestige, power, integrity
5. Existential school – loss of meaning of existence
6. Biological school – genetics, chemical imbalance, neurotransmitter malfunction, physical illness, vitamin or trace element deficiencies or abnormalities, reaction to medicine or drugs.

ii. Biblical Perspective

1. Depression is only possible in a fallen world (Gen 3; Rom 5). One day depression, along with anxiety and fear will be done away with.
2. Depression is the only logical, rationally consistent conclusion of living without God (Eph 2:11; Titus 1:2; 1 Tim 1:2; Rom 15:4, 13).
3. Deliverance from depression, which is one of the effects of the fall, is made possible through the redeeming work of Jesus Christ for us and the work of the Holy Spirit in us (2 Cor 7:6-7).
4. Practical and experiential deliverance from depression and many of the other effects of the fall is not the automatic, involuntary result of regeneration. The process of growth into the image of Christ takes a lifetime (Phil 2:12-13; Gal 5:22, 23; 1 Cor 3:16; 2 Cor 3:17).
5. Depression is possible even for believers because we still:
 - a. Struggle with indwelling sin.
 - b. Have not perfectly put off the old man with its corrupt patterns and practices and put on the new man which is renewed in true righteousness and holiness.
 - c. Live with the reality of difficult circumstances and people.
– Maybe it’s a rebellious child, the pressures of ministry, the pressures of your family, etc.
 - d. Struggle with the world, the flesh and the devil.

- e. We still live with fallen bodies in a fallen world. At times, our depression may not be explainable. Also, our sadness must be recognized as part of being human. It can lead to change in our lives. According to 2 Corinthians 7:8-11, sadness can lead to repentance and salvation. Nehemiah 2:2-5 says that the sadness that was present on Nehemiah's face led to him asking the foreign king to go a rebuild the wall in Jerusalem.
 - f. We care for people which at times this leads to depression. (2 Cor 11:28-29)
6. In this life, we may never be completely free from the feeling and effects of depression. Sometimes, there is no logical reason for our sadness. At times we are sad over our own sin, over the sin of others, and many other various discouragements that happen in life. However, we see in Scripture and in the life of faithful men in the past that though they were often depressed, they continued to do great things for God. Their depression spurred them on to a more intimate relationship with God. There is hope in the promises of God. We must not be seeking for relief because it may not come in this life. Those who are not yet saved need to see their depression as God calling them to salvation. "We need to God-given ability to be sad."³³
- a. 1 Cor 10:13; Heb 4:14-16; Ps 18:4-6; 2 Cor 4:16-18; Rom 8:28-29 – he hears our cries. He loves and cares for us and will use the momentary affliction of depression for our good and growth.

³³ Ibid, 92.

- b. John Bunyan was a man known to be discouraged often. It has been said that if Bunyan took anti-depressants then he never would have written Pilgrims Progress.

- c. C.H. Spurgeon said, “Knowing by most painful experiences what deep depression of spirit is, being visited therewith at season by no means few between, I thought it might be consolatory to some of my brethren if I gave my thoughts thereon, that younger men might not fancy that some stranger things had happened to them when they became for a season possessed by melancholy; and that sadder men might know that one upon whom the sun has shone right joyously did not always walk in the light... The Life of Luther might suffice to give a thousand instances, and he was by no means of the weaker sort. His great spirit was often in the seventh heaven of exultation, and as frequent on the borders of despair, his very deathbed was not free from tempest, and he sobbed himself into his last sleep like a greatly wearied child.”³⁴

- d. David Brainerd wrote, “My soul was in such anguish that I could not eat, but felt as I supposed a poor wretch would, that is just going to the place of execution... My mind was remarkably free from melancholy damps and animated in my work. I found such fresh vigor and resolution in the service of God what the mountains seemed to become a plain before me. Oh, blessed be God, for an interval of refreshment, and fervent resolution in the Lord’s work.”³⁵

³⁴ Robert Somerville, *If I Am A Christian, Why Am I Depressed?*, (Xulon Press, 2014), 23.

³⁵ Ibid.

7. Believers will eventually experience complete and continuous, uninterrupted deliverance from depression and all other effects of the Fall (Rev 21-22).

8. Depression in the life of Cain (Gen 4)
 - a. Cain's offering – v. 3-4

 - b. God's rejection – v.5

 - c. Cain's response – v. 5
 - i. Angry, countenance fell, proud
 - ii. Didn't repent, no sign of remorse

 - d. God's Counsel – v. 6-7
 - i. Why are you dejected, down
 - ii. If you do right, you will be accepted
 - iii. Sin lies at the door

 - e. Cain's Murder – v. 8

 - f. God's intervention – v.9

 - g. Cain's defiance – v. 9
 - i. Am I my brother's keeper?

 - h. God's punishment – v. 11-12

 - i. Cain's depression
 - i. Anger → wrath → bitterness → excuses → “more than I can bear”

- ii. I can't bear this punishment (saying to God "You are being too hard on me.")
- iii. "Everyone will be out to get me"

9. Elijah – 1 Kings 19

10. The Psalmist - Ps 42, 43

11. Jonah – ch. 4

12. Job

13. David – Ps 32, 38

14. Paul – 2 Cor 4

n. **The Downward Spiral (draw diagram)**

- i. Depression is often the result of responding to an awareness of personal sin and failure in an unbiblical way.
- ii. Depression is often the result of a failure to realize certain goals that are deemed to be highly desirable and necessary for life to be worthwhile and happy. Many people seek happiness as the goal in life.
- iii. Depression, therefore, is often the result of unbiblical thinking.
- iv. Depression is often the result of unbiblical responses or reactions to hard and unpleasant circumstances.

o. **How to Help the Depressed**

- i. How not to help
 - 1. Only be supportive = God has no answers
 - 2. Minimize thoughts of hostility and guilt = counselor does not understand

3. Notes: both of the above fail to treat the counselee as responsible before God and thus remove hope: when hope is gone, the depression leads to despair and then to suicide.
- ii. Get plenty of information
 1. Know the problem to them
 2. Gain involvement
 3. Use journals
 4. Make sure that they had a recent medical exam
 - iii. Explain the dynamics of depression and how they lead into the downward spiral
 1. Study lives of Cain, Saul, Elijah – God’s solution for Elijah was to reveal Himself to him. That was all Elijah needed. He did not need a better self-image or medication.
 2. Give much hope from God and His Word– 1 Cor 10:13; 2 Peter 1:3
 - iv. Getting to the Heart
 1. Presentation Problem
 - a. Their understanding of the problem
 - b. Example – ‘I’m tired most of the time. I cry a lot. I’m nervous. I never get anything done. My husband just doesn’t understand. I lost my job. I’m lonely.’
 - c. Note – this information is presented by the counselee as the cause of the problem, but the counselor must see this as the effect rather than the cause
 2. Performance Problem

- a. Look for thinking and actions producing feelings.
- b. Example – “I’ve stopped working. The ironing is not done. Dishes are in sink. I spend my day off watching Netflix. I’m not preparing meals anymore. I’m yelling more. Haven’t read the Bible in weeks.”
- c. Note – part of the cause of depression is that performance has ceased to be right; consequently, feelings are not right.
- d. Look for wants and desire, idols

3. Pre-Conditioning Problem

- a. How far back does the problem extend? What habits have been formed that make it easy to respond as they are now? What are they wanting that they are not getting? What are they getting that they do not want These questions will help to identify what or who they are worshipping rather than God.
- b. Example – “I started tapering off on my housework three years ago.” Discouraged in her marriage, she formed an “I don’t feel like it” approach to her work. Now she only talks about the problems and desires ease and comfort.
- c.

v. Apply the Put Off/Put On Principle (Eph 4:22-32) – there are answers from God

1. Desire (motives)

- a. Change starts at the heart level.
- b. Worship of God must take place no matter what feelings are involved.
- c. Replace worship of self/feelings/comfort/ease of life/etc, with the worship of God.

2. Thinking

- a. About feelings – remember, sadness is normal and is given by God for us. We cannot live to be happy and feel good all the times.
 - b. About problems
 - c. About depression and the response to it. Remember that we all experience sadness in life. Often times this sadness is meant to lead us to Christ. We need to see that our only hope is found in him and not in trying to get relief from our sadness. If you know people who are sad or depressed, point them to Christ to find hope and comfort.
 - d. Find biblical responses. Most often we live based on how we feel. However, when we start to obey Christ, more often than not, we will begin to feel better.
 - e. Plan ahead to focus on praise and thanksgiving
 - f. Know that God comforts (Matt 5:4; 2 Cor 1:3-7; 7:6)
3. Actions –get depressed people sweating physically and spiritually
- a. Live by biblical principles no matter how you feel. Again, obedience leads to joy.
 - b. Work on right acting with biblical steps of actions.
 - c. Start doing the work you have listed on your to do list. Begin small and work your way up. Do the hardest thing

first. Start to exercise just 15 minutes a day. Do one load of laundry. Read one chapter in the Bible a day. Pray for one minute day.

- d. Establish accountability; watch out for excuses for not getting things done.
- e. Reverse the spiral – right desires, thinking; repent of your idols; if you get behind allow yourself no privileges until it get done; avoid all day dreaming, excessive TV watching, pity parties.
- f. Address the real cause of the down feelings and do right about it: define problem → what does the Bible say to do? → When, where, how do I begin? → how do I schedule to finish.

p. Homework

Make sure that you minister holistically: physically, behaviorally, theologically, cognitively, emotionally, socially/relationally

- i. Read Psalms 6; 18:1-6; 37; 73; 130; Romans 8:28-30; 1 Corinthians 10:13; 2 Corinthians; 1 Samuel 1-2; Isaiah 40-48. If needed, listen to these verses with an audio bible.
- ii. Read prayers from the Valley of Vision on the comfort of God.
- iii. Read hymns on the greatness of Christ.
- iv. Write 1 Corinthians 10:13; Hebrews 4:14-16; and 1 John 1:9 on 3x5 cards. Write a prayer on the back of the cards based on each verse. Read daily and answer the following questions. What had God promised you? What hope do you find in the passages? How will you respond to God's promises in your situation?

- v. Read *If I Am a Christian, Why Am I Depressed* by Robert Somerville.
Read one chapter a week and complete the assignments at the end of the chapters. Meet with a friend of counselor to review the chapter each week and to keep you accountable to the homework.
- vi. Read *Good Mood, Bad Mood* by Charles Hodge. Read one chapter a week and pick 1-2 principles that you will choose to apply each week. Meet with a friend of counselor to review the chapter each week and to keep you accountable to the homework.
- vii. If you are not currently exercising, start a small, basic routine. Start by walking 15 minutes a day.
- viii. Eat healthy. Limit your junk food intake each day.
- ix. Get a medical checkup if you have not done so recently.
- x. Attend a sound biblical church each week. Also attend a weekly home group. Doing so will fill your mind and heart with truth.
- xi. Serve in at least one ministry and serve at least once a week.

