Christ-Centered Healing From Depression and Low Self-Worth

(1ST presented at Education Week 2004)

1. Choosing Complete Healing, Not Just Symptom Relief

2. Silencing the Negative Chatterbox Within

3. Overcoming Perfectionism, Procrastination, and Paralysis

4. Leaving the Past Behind, and Moving Forward with Joy.
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1. Choosing Complete Healing, Not Just Symptom Relief

1. Depression is an increasingly common problem in our time.
   a. Depression has become “the common cold of psychiatric disturbances,” “the world’s number one public health problem,” affecting youth and children as well as adults, increasingly leading to the grim side effect of suicide. (David D. Burns, MD, *Feeling Good: The New Mood Therapy* (1980) p. 9)
   b. In the last days, “Satan is increasingly striving to overcome the Saints with despair, discouragement, despondency and depression.” (Pres. Ezra Taft Benson, *Do Not Despair*, *Ensign*, Oct. 1986, 2)
   c. These trends continue to intensify, as evidenced by a relentless flood of clients seeking help for depression at LDS Family Services and other agencies.

2. The world’s therapy contrasted with Christ-centered healing.
   a. The grand welfare principle of building self-reliance applies also to solving emotional problems. In contrast, the adversary encourages instant gratification, instant solutions to problems. (Boyd K. Packer, *Solving Emotional Problems in the Lord’s Own Way*, *Ensign*, May 1978, 91)
   b. Instant solutions and outside intervention not encouraging self-reliance can relieve some symptoms, but do not change habits of thought, behavior, physical self-care, pain over past experiences, and other factors that often contribute to depression. In addition, negative side effects may appear. “Healing” achieved this way tends to be piecemeal and time-limited.
   d. In contrast, the Lord seeks to guide us toward “complete healing,” making us “whole,” “strong in every place,” “strengthened with might in the inner man.” (Richard G. Scott, *To Be Free of Heavy Burdens*, *Ensign*, Nov. 2002, p. 88; Mark 5:25-34; D&C 66:8; Eph. 3:16)
   e. The Savior is the ultimate healer, the great physician. (Is. 61:1-3) However, in an age of advanced technologies and countless experts, he is often the last source we look to for relief and healing. This may be for the same reason the ancients didn’t look to the brass serpent: “Because they did not believe that it would heal them.” (Alma 33:20) We may thus be tempted to “look beyond the mark” in dealing with our emotional problems. (Jac. 4:14)
   h. Symptom-centered therapy can never bring the complete relief that Christ-centered change can. “Let it rather be healed.” (Heb. 12:13).

3. Emotional healing can come as we correctly apply gospel principles to:
   a. **Identify and assess** multiple areas of life contributing to depression, including problem thoughts, behaviors, relationship patterns, and past issues.
   b. **Replace** these problem areas with Christ-centered patterns of thought/behavior.
   c. **Assimilate** these changes over time, so we become followers of Christ in our very hearts, “that my joy might be in you, that your joy may be full.” (Jn.15:11)
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2. Silencing the Negative Chatterbox Within

1. Negative thoughts, often referred to as the Internal Critic” or “Chatterbox”, are a universal, central feature of depression - a dimension we can learn to master.

   a. Negative thoughts about oneself, the world and other people, and the future, are a central feature of depression.

   b. A team of mental health experts at the University of Massachusetts found that such thoughts are not merely a symptom of, but are largely a cause of depression. They found that when they helped people identify and replace their negative thoughts, depressive symptoms improved significantly. (David D. Burns, MD, Feeling Good: The New Mood Therapy, p. 9-18.)

   c. This system of treatment came to be called “cognitive therapy,” and in clinical trial has proved by every measure to be more effective, both immediately and long-term, than chemical treatment of depression. (Burns, ibid, 14-15)

   d. Cognitive therapy is widely used by therapists, including many LDS therapists, because it builds self-reliance in people. That self-reliance can be applied to effectively treat not only depression, but also anxiety, anger, and other problems. (Burns, The Feeling Good Handbook, 1989)

   e. Cognitive therapy has also been used effectively by many people on a self-help basis, without professional counseling.

   f. It can also be taught to children and to families, thus helping to prevent multi-generational depression that can otherwise often result from a depressive atmosphere in the home. (Michael Yapko, Hand-Me-Down Blues: How to Stop Depression From Spreading in Families, 1999.)

2. Cognitive therapy researchers identified common patterns of negative thoughts:

   a. These include: All-or-nothing thinking; Mental filter (noticing only the negative); discounting the positive, mind-reading, and comparing self to others.

   b. The researchers found that when people identified and replaced such patterns in their own thinking, deep, long-lasting relief was the result.


   a. What the researchers didn’t identify was - Where do these negative thoughts come from? What is the source of these destructive internal messages that generate such misery, disruption, and sometimes even untimely death?

   b. One possible explanation: The scriptures teach that Satan is the father of lies, creating misery wherever he can; and that he operates through whispering untruths to our spirit. (Moses 4:4; 2 Ne. 2:18; 2 Ne. 28:22; Rev. 12:9)

   c. We can learn to discern and delete “spiritual junk mail” (negative thoughts) from our minds, just as we eliminate junk mail from our inboxes and mailboxes.

   d. The most powerful thought replacements come from gospel principles; eg., replacing mental filter with gratitude; replacing the tendency to compare with awareness of the value and individuality of every soul. (D&C 46:11-12)
3. Overcoming Perfectionism, Procrastination, and Paralysis

1. Negative thoughts, as discussed yesterday, lead to negative behaviors.
   a. Among the most common depressive behaviors are “The 3 P’s” listed above.
   b. These nearly always result from negative thought patterns, particularly:
      1) All-or-Nothing Thinking: “If I’m not perfect in every area, I’m worthless.” “To maintain worth, I must be totally perfect in all things, at all times.” (Which is virtually impossible to maintain constantly, leading to procrastination and paralysis: “Since I can’t do everything, I’ll do nothing,” or “I’ll wait till I feel that I can do what I need to perfectly.”)
      2) Should’s: These are legion, especially for Latter-day Saints, who have so many good standards and ideals that it’s virtually impossible to accomplish them all simultaneously, often leading to discouragement

2. The best defense against these destructive thoughts is pure doctrine.
   a. Satan loves to twist truth into half-truth and deception, bringing misery, captivity, and destruction. (Moses 4:4; Rev. 12:9)
   b. He frequently sends “fiery darts” of discouragement to the faithful (whom he cannot deceive with more obvious temptations such as immorality or drug abuse), leading them to believe that with all their goodness, they aren’t good enough. He twists the true doctrine of eternal progression and the perfecting of the saints into a demoralizing message, “If you’re not perfect now, you’re nothing, and you’ll never measure up.” (Eph. 6:16, Matt. 5:48)
   c. The best defense against half-truth is pure truth, pure scriptural doctrine.
   d. The doctrine of perfection is very clear in the scriptures and the writings of the prophets. For example, “Perfection is a process, not an event.” (M. Russell Ballard, Do Things That Make a Difference, Ensign, June 1983, 68; see also Russell M. Nelson, “Perfection Pending”, Ensign, Nov. 1995, 86)
   e. The scriptures and modern revelation teach that a major reason for the Church’s existence is “the perfecting of the saints.” (Eph. 4:12; 3-fold mission of the Church). If we were all supposed to be perfect already, such a goal would be meaningless. Instead, it is glorious!
   f. We are all growing, a little at a time, grace for grace, line upon line - even as the Savior himself did. (D&C 93:12-13, 19-20; Isaiah 28:10)
   g. In the process of time, we may become “perfect in Christ” (Moro. 10:32) Indeed, there is no other way in which mortal man can achieve perfection.

3. We can replace depressive behaviors with positive ones.
   a. We can overcome the three P’s with a simple principle: Do Something! (Don’t try to do everything; don’t just do nothing - Do something!
   b. Incremental improvement and progress is just fine. We are all growing and learning to walk as beloved children of God, step by step. (D&C 50:40-42)
4. Leaving the Past Behind, and Moving Forward With Joy

1. Painful past events are often the bedrock of depression:
   a. These are, appropriately, called “core issues.” They tend to be at the very core of our negative thinking, behavior, and interaction patterns.
   b. People often get “stuck” in thinking and behavior that developed to deal with a negative situation in the past, but that is dysfunctional in the present.
   c. We often learn negative thinking and behavior patterns from those around us, particularly when we are impressionable children.
   d. Frequently, the more severe the past pain, the more debilitating the depression; the darker the view of oneself, the world, and the future.
   e. Painful past events include abuse, loss, and disappointment in those around us.
   f. These old events can hold us emotionally captive, even long after the situation has resolved itself and life is better in the present.
   g. Fortunately, there is One who long ago was “anointed...to bind up the broken-hearted, to proclaim liberty to the captives...to comfort all that mourn.” (Is. 61:1–2) He, the Living Christ, lives still to dry our tears and comfort our grieving hearts. (Hymn #136; Rev. 7:13-17)
   h. If we invite Him to do so, He can and will be a very active resource in our healing process - indeed, the central activating element.

2. Christ-Centered healing from past events has three primary dimensions:
   a. Repentance: leaving our errors and shortcomings behind, step by step, and moving forward into a better way of life. This process occurs throughout our lives. We never outgrow the need for it, and can therefore throughout our lives partake of the sweet peace and relief it brings. (Alma 36:19-21)
   b. Forgiveness: choosing to let go of bitterness and recrimination towards those that have offended us in the past (whether or not they actively repent.) This can be a difficult, multi-layered process, particularly for those deeply offended (such as victims of serious abuse.) However, forgiving others frees us to move on to a happier life, unbound by the weaknesses of others
   c. The Infinite Atonement: (2 Ne. 9:7) The great and precious gift extended to us specifically to heal that which we cannot heal, fix that which we cannot fix, and restore that which we cannot restore (Boyd K. Packer, The Brilliant Morning of Forgiveness, Ensign, Nov. 1995, 18) The healing power of the atonement extends not just to our sins, but also to our pains and sorrows, sicknesses and shortcomings. (Alma 7:11-12) Nothing is too big or too small, too serious or too trivial, to fall within its merciful reach.

3. We can draw upon the power of the Atonement in very simple, practical ways, with immediate, practical impact in our lives. (Boyd K. Packer, The Touch of the Master’s Hand, May 2001, Ensign, 22) In so doing, we can experience the fulness of peace and joy promised by the Master. (John 14:27, 15:11; 16:33)