

Leader's Guide

Episode 19

Good News: Hope in Depression

Summary

All creation groans (Romans 8:22) as it waits for redemption to be completely applied to this crazy world. Sometimes the groaning is a response to our environment, and sometimes it's within us. In either case, we are all overwhelmed at times by the real and perceived challenges we periodically face. This episode recognizes the legitimacy of both physiologic and spiritual treatment modalities, and how the gospel can be foundational in the treatment we provide for all patients, both believers and non-believers.

Speaker



Thomas H. Okamoto, MD, is a board certified adult psychiatrist. After previously serving as Medical Director of the Minirth-Meier Clinic West Adult and Adolescent programs, he is currently an Assistant Clinical Professor of Psychiatry at the University of California Irvine School of Medicine. He is Co-chair of CMDA's Psychiatry Section, married with three grown children and practicing in Santa Ana, California. Dr. Okamoto can be reached at his office at 714-558-2460.

Discussion Questions

1. **What from this video inspired, edified or challenged you?**
2. **Dr. Okamoto mentioned the importance of discovering a patient's spiritual values. What questions might you ask to help do that?**
 - When you become discouraged, how do you attempt to deal with it?
 - Do you have friends or family that help to provide support for you?
 - Are you part of a faith community?
 - Do you ever pray?
 - May I pray for you?

3. Dr. Okamoto suggested that we need to “represent” Christ’s love to our patients, especially those struggling with depression. What are some of the ways we can do this?

- Giving them hope that their condition can get better (John 15:11)
- Avoiding judgment regarding their depression (John 9:1-3)
- Encouraging them to pursue the peace He can give them (John 14:27)
- Compassionately explaining the details regarding what could be a perplexing diagnosis (Luke 24:27)
- Providing encouragement even in difficult times (John 11:25-26)
- Showing compassion on their situation (Matthew 9:26)

4. In treating patients with depression, how might your approach be different for those who seek to walk with Christ, compared to those without an active faith?

Those who do not look to Christ in faith may look upon the Christian faith as mere foolishness (1 Corinthians 2:14), or they may be apathetic toward the wisdom and power of the gospel. For this reason, they are not as likely to embrace spiritual interventions the way a person of faith could. This does not mean spiritual issues should not be addressed, but it may be wise to tread gently in the spiritual realm until a degree of credibility is established. It is not hard to imagine how the Lord could use depressing circumstances to draw a person to faith in Christ, and what a privilege it would be for us to play a role in this process!

On the other hand, patients with a faith perspective can be reminded of the numerous ways in which their beliefs can encourage and sustain them during rough times. The Bible illustrates how all of us—including David, Elijah, Job and the apostles—can at times find ourselves depressed. Alongside these stories, we read of how God can deliver like no one else! Also, it is more likely that Christian patients will welcome our offers to pray for them with open arms. We cannot predict how the Holy Spirit might work, but we can have great hope, since He indwells every Christian!

5. Would you seek out professional treatment for depression if you knew you had the disease? Why or why not?

Being a healthcare professional can be spiritually and personally challenging, putting us and our families at risk of reverse stigma and privilege. As a Christ follower, we are called to humility, surrender and dependence on the Lord. As healthcare professionals, we are trained to make split-second, life determining decisions. This can be a spiritual liability if we allow ourselves to believe we are in control of our professional gifts and not God. Pride and narcissism, encouraged by our society and profession, can become a spiritual weight around our neck and can damage our witness and therapeutic effectiveness as Christian healers.

The acknowledgement and acceptance of our vulnerability to depressive illness and/or our denial and resistance to accepting treatment for depression in our life can reveal areas of personal or spiritual weakness, as it does in other conditions such as burnout, substance use disorders or other mental health disorders.

As Christians, we are led to foster gratitude and thankfulness for the gift to be healers in a profession that provides privilege. However, as much is given, much can be required. When we experience illness such as depression, we can choose to demonstrate humility and accept suffering and weakness in our lives. Demonstrating our faith can be a powerful witness to healthcare professionals, friends, family and patients. We can allow our lives to become an embodiment of Christ's work for restoration and healing.

6. How might you use these verses to specifically encourage patients in their struggle with depression?

- a. "Do not fear, for I am with you; Do not be afraid, for I am your God. I will strengthen you, I will also help you, I will also uphold you with My righteous right hand" (Isaiah 41:10, NASB).
- b. "Who comforts us in all our affliction so that we will be able to comfort those who are in any affliction with the comfort with which we ourselves are comforted by God" (2 Corinthians 1:4, NASB).
- c. The story of Elijah and his depression – 1 Kings 19
 - i. For the person who is walking with the Lord, this is a beautiful promise that can remind them of the frequent difference between the fact of God's presence and our perception of that presence. Also, there is a promise of God's help here. This help may come through healing, or it may come through endurance, but as we believe the Lord gives us eyes to see.
 - ii. Every person who belongs to Christ has been comforted in various afflictions by the love of God. Though we may not be able to fully identify with a patient suffering from depression, we can certainly attest to the power of God to deliver us from situations that at times seemed hopeless.
 - iii. Elijah feared for his life, and he mistakenly believed he was the only person remaining who was seeking to be faithful to the Lord. God personally refreshed him with food, and then with the truth that there were many others besides him who were still seeking to be faithful. It should be a great encouragement to us to see that even a brave prophet like Elijah had his moments of despair.

7. Although Christians are certainly susceptible to bouts with depression, Dr. Harold Koenig states that they "certainly seem to have the resources to get through these times better than those who don't have a faith." What are examples of some of the resources to which Christians may have access?

- Strong family relations
- A faith community
- Prayer and fellowship opportunities
- The constant presence of a loving God
- The wisdom of the Bible

8. Dr. Karl Benzio references how the wisdom of the Bible can be a great asset in treating depression, and this is true even for those who may not have a personal faith. He also mentions the possibility of biblical wisdom leading someone to consider the ultimate

Author of the Bible and what He has done for His people. Have you ever seen a patient or colleague come to faith in Christ? What humbled them, and how did they discover God's grace in Jesus Christ?

It is hoped that stories from group members will inspire all present to realize how God frequently opens the eyes of the blind by using medical challenges and faithful healthcare professionals.

- 9. Dr. Timothy Allen, in reference to Elijah, suggests sharing with patients, “Just because you feel like a failure doesn’t mean that God thinks that you are.” How could such a statement open the door for the gospel?**

The common attitude in our country among those who think there might be a God is that they have to earn His favor through their own merit, or that they have to meet His standards, whatever they might be. Dr. Allen’s statement blows this heresy to smithereens and creates an opportunity to present Jesus as the evidence that God sees His people as worth saving, as evidenced by the fact that He sent us His only Son.

- 10. What is one take-home item from today’s session that you hope to implement?**

Additional Resources

1. *Changes That Heal* by Henry Cloud