

Article: Depression/Therapy

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Treating Depression Without Medication

A former client who used anti-depressant medication for years to cure her severe depression invited me to write this article about the ways to recover from depression without medicating for a lifetime.

My message is impacted by who I am, which includes, in no small measure, my personal journey. I grew up in a very small town (smaller than you can imagine!) in upstate New York. My mother's family of fourteen brothers and sisters provided me with plenty of cousins to fill my world. In complete freedom, we roamed the woods; caught minnows; shot marbles; and invented a world that was free, creative and connected. From my strong family background, I learned the value of caring; good food; and family love that is never ending. Sounds perfect, right? No, it wasn't perfect. Woven into this richness were tremendous losses. The loss of my patriarchal grandmother when I was three years old lay in my subconscious mind until I was in my fifties. After spending every day and many nights with her, her sudden disappearance left a permanent expectation of loss in my subconscious. The silent, distant presence of my father was a pain that I didn't understand until my early thirties. My decision to leave my religious vocation as a Roman Catholic Nun felt like a near-death experience. My lost lovers broke my world into tiny pieces. I wasn't sure I could ever put myself together again. My adopted son's terrible addiction, that I couldn't fix, brought me to my knees and forced me to learn the vulnerability of powerlessness. The depression of my adopted daughter made me question my mothering. I questioned myself as my life was challenged over and over again. I asked myself very basic questions about my 'rightness;' my 'normalcy;' my 'goodness;' my 'lovableness;' my 'intelligence;' and, of course, my 'worthiness.' Like a vulture, 'shame' chased me down every path attempting to consume me. But, it didn't win in any substantial way, because the lessons I learned from loves, in the freedom of my childhood, made me unafraid of life... even the darkest moments.

In pursuit of my own healing, I attended many workshops; therapies; and spiritual experiences that put me in touch with my emotional life. I knew early on that the expression of my feelings were important, honest and relieved me. Making friends with my own depression helps me to lead clients into their depression, even when they are afraid. Depression forces us to pay attention to our inner self and enter a dialogue with our personal history to learn what it has to say. The therapist can assist you. Healing is about questioning what you thought was unquestionable. Healing is about a change in your consciousness. Eastern philosophy states that *consciousness precedes reality*.

Many years ago, I read a quote that I totally believe and it describes beautifully the way I work as a therapist. It said, "Kneel at the altar of your own life in the pursuit of wisdom."

The depression that most of us struggle with is a consequence of the life we have lead and the cultural environment in which that life existed. The events of our life must be approached by the therapist, as if they were a 'best seller.' The therapist must be systematic, interested, and insightful as guide you in telling your story

As children, we internalize the brokenness of our parents and the unhealthy expectations of the world around us. We have no choice. Our parents; the institutions that shape us; the media and those we love are all collaborating to demand our conformity to what they believe is normal. We adjust to their demands as we struggle to survive. We do survive, but our survival tactics became the depression of our adulthood.

Who comes to therapy?

Usually a crisis brings us to therapy. Whatever level of severity the crisis is creating in our life... we want relief, so we call a therapist. A crisis may send us into therapy, but it will never keep us there. The crisis will never create 'healing.' The purpose of therapy is to address:

- What caused the crisis?
- What does the crisis mean?
- How is the crisis leading you into a bigger picture that you must address, if your life is going to be better.
- Addressing a 'crisis' brings momentary relief. Deep psychotherapy brings permanent changes to who you are.

Before you enter therapy, ask yourself this simple question... What do I want from therapy? How motivated am I to spend time and money on myself? What do I want to be different in my life?

What is depression?

The term 'depression' is derived from the Latin verb 'deprimo,' which means 'to press down or to press under.' Let me offer you some non-academic explanations. Depression is the 'non-becoming' of your life. It is being 'over shadowed' by the 'shadows' (a Jungian term that refers to our unhealed pain). Depression is our life screaming out to be understood. Depression is our pain, screaming out to be 'felt.' Depression is our 'frustration' that wants 'resolution.' Depression is inner 'silence' that wants a 'voice.'

Pathetically, depression is generally misunderstood and too many professionals treat the symptoms of depression with the many medications available today, without ever addressing its causes. The long term effect of these medications is not yet known. Many psychiatrists believe that depression can be cured with medication. This medical model is becoming more and more acceptable by clients/patients who want a 'quick fix' and by the insurance companies, who always support the medical model for healing.

A lot of research supports the combined use of medication, if it is necessary, and psychotherapy. Without deep psychotherapy, the client may become medication dependant, because, I believe the causes of depression can only be treated in psychotherapy.

So now you might ask, what is deep psychotherapy? How does it address the underlying causes of depression in such a way that medication is no longer necessary.

How is psychotherapy effective?

You begin to 'heal' by engaging an effective 'healer'... your therapist. Selecting a therapist is not an easy task, however. Use many resources. Ask your friends for a referral. See what name keeps being mentioned. Trust your instincts and use the internet:

- Locate private practices in your area.
- Check out the Psychology Today website @ www.psychologytoday.com.
- Read the biographical description of each therapist.
- Call to interview the therapist... have specific questions prepared to guide your inquiry.
- If you feel interested, make an appointment. The first visit is very important for lots of reason.

First appointment

Points of interest:

- Do you like the appearance of your therapist.
- Does the therapist seem sensitive and approachable?
- Are you comfortable with the physical settings of the office?
- Does the therapist listen well? (This is a very important point)
- Does the therapist give you insights as you relate your story? (This is a sign they are listening)
- Does the therapist believe in the mind/body connection? "It's all in your head" philosophy will never heal you.
- Is the therapist able to isolate for you (even during the first visit) possible sources of your depression? (This is another sign of a good listener)
- Is the therapist intelligent, sensitive, and insightful enough to pay attention to all of your symptoms?
- Does the therapist discuss with you a treatment plan that addresses how your emotional life will be included in your healing?
- Does the therapist explain your financial responsibility?
- At the end of the first session, do you know more about yourself than you did when you walked in?
- Did the therapist tell you how they could be contacted after hours and if there is a charge for after hour calls?
- Did you feel that you could establish a strong therapeutic relationship with this therapist as you concluded your first session?
- Do you feel the therapist can listen to you without judgment? Can they guide you without imposing their personal agenda? Are they excited about the work you will do together and the sacred thrust you share?

How a therapist invites you to tell your story

I believe that learning a person's life must be done systematically. That means that the therapist will gently invite the client to tell their story. This systematic story-telling begins on the second visit. It is the therapist's job to identify what is 'pressing you down.' This is accomplished through meaningful and purposeful conversations. An outline of such a discussion might be:

Tell me about your mother's family

- Number of children?
- Where was your mother in the sibling line?
- How many children were there?
- What was their relationship with your grandparents?
- Was your mother close to her parents?

- Were your grandparents significant in your life? How? What did you do with them? What did they cook for you?
- Were your grandparents close by?
- Was there any substance abuse or traumas in the family? Examples would be unexpected deaths, losses, disabilities, mental illnesses, etc.
- Did your mother carry the burden of your grandmother's life?

The discussion of your mother's life will be an indicator of your mother's psychological styles that impacted your life. You will then tell the story of your father's life using the same guidelines. This type of discussion helps you to realize the relational legacy that surrounds your life. One of the facts we know from researching the lives of the 'very old' is that 'connectedness' makes us healthy in every way.

Grandparents are often an important part of a client's childhood. If they were available, they could be a source of love and comfort. Remembering in fine detail (because that is the way our lives are lived) will be helpful to the therapist. As the therapist listens to your story, it should be their 'gift'... as a skilled practitioner, to give you insight that helps you make connections and find meaning in your story.

Our psychology is not a 'mystery!' It is understood as you tell your story. It may take many visits for your therapist to know your story and to identify with the sources of your childhood confusion; childhood pain; disappointments; traumas and losses. Once they are identified, then you can go deeper into each story to identify the schemas (or styles) that you developed to survive. Now begins the hard part...

Grieving

Unless you grieve in therapy, no real change will occur. Many clients that have entered my office have been in therapy for years and years. I always admire their determination, but feel badly about the ineffective treatments that I hear about.

Grieving makes us honest. It mercilessly unmask the deep aspects of our psyche that we have long kept hidden. As we grieve, we become softer, kinder, freer, and, of course, healthier.

Grieving strips away the false-self we constructed long ago to conceal our pain. It brings us back to our central, real-self. Grieving has its own beauty, because, as it connects us to ourselves, and we eventually connect us with others. Our world starts to expand. As we grieve, we may feel afraid that the 'pain' may over-whelm and control us. May I remind you, I have never known anyone who died from actually grieving. We, however, die when we don't grieve! Consider Dr. Douglas Brodie, M.D., who has treated cancer patients for over 50 years. He states "suppressed anger" seems to be, by far, the most common emotional feature of cancer patients, in general. "This anger," he continues, "has been a suppression for many years." Dr. Brodie calls "the unwillingness to expose and address deep-seated emotions to resolve long-standing conflicts" the key to true and lasting healing. Grieving makes visible the pain we have long tried to dismiss, disown, deny, and escape. As we grieve, we will feel exhausted and need to sleep much more than usual.

Candace Pert, Ph.D., states in her ground-breaking work Molecule of Emotion: The Study of Mind/Body Connection... "Your body is your subconscious mind and you can't heal it by talk alone."... "almost every other culture but ours (Western culture) recognizes the role played by some kind of emotional catharsis

or energy release in healing.” “In patients, we are the perpetrator and victim rolled into one... constantly suffering from nothing more than our own unconsciousness.” (Healing Power of Illness, (Dethlefsen and Dahlke, M.D.) When we grieve, we are ‘letting go’ of our resistance and making room for love. We are opening ourselves up to new frontiers of possibilities.

I use journaling with guided-imagery to help my clients grieve. There is much research on the curative nature of journaling. It sends us into our ‘inner life.’ Journaling assignments, specific to your life, are given at the end of each session. I usually create these journaling assignments from our discussions during the session, so they are relevant and specific. The client stores them in their journal and writes during the week. I encourage clients to journal as soon after their therapy, as possible. Light a candle and just ‘WRITE!’ Don’t pay attention to spelling, punctuation, or neatness ... only the natural flow of your thoughts and feelings matter. Even if the thoughts and feelings don’t make sense to you as you write them down ... write them anyway! Those misunderstood thoughts and feelings could be your subconscious mind wanting to be heard.

During the next session, the client sits in a swivel chair that faces another empty chair and candle. With their eyes closed, I speak to them about the meaning of their childhood as it relates to their assignment. At the end of the prologue, they use their imagination to summon the presence of the person they have written to in their assignment. They read the assignment on a particular theme (which is usually in the form of a letter) to the person they are spiritually addressing in the room. If the client is able to access their feelings, these experiences are very moving. Clients can grieve safely and privately as they read and follow with extemporization. The room becomes a sacred space during this time usually lasting 10-15 minutes.

The combination of discussion and grieving is an essential component of therapy for permanent change. No medication can take away the childhood hurt that is stored for a lifetime. As the grieving progresses, it is easy to see the change clients make. They look younger and freer. They start doing things they love. They are much more animated and honest in their sharing. In short, they start to BECOME!

When a client resists writing and grieving, I know they may never be fully healed. I continue my work with them as I continually explain the mind/body connection that makes us whole. As our relationship develops, I hope their fear will subside.

I hope this very abbreviated description of meaningful therapy will ignite our interest to heal yourself. You are a healer that begins this scared mission by healing yourself.