

I Have Become Like Broken Pottery

By Larry Augsburg

Psalm 31:9-13

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- I. I'm a pretty even tempered guy, and I can think of only one time when I was significantly depressed in the last ten years.
 - A. That was September, 2002, the month after we took Miriam to Goshen College.
 1. I didn't know what was going on, but it was the longest month of my life.
 2. Now I knew I missed Miriam. I understood that fully.
 3. But I failed to understand that my getting up in the morning and wishing it was bed time & my getting ready for bed and wishing it was morning, and my wishing I was at work when I was at home, and my wishing I was at home when I was at work and my general blahness pointed to depression.
 4. It wasn't until I was writing my pastor's report for the October church council meeting that it dawned on me that I was depressed.
 - B. Now I suspect many of you know what I'm talking about.
 1. And I further suspect that some of you are saying, "Depression? -----That wasn't depression. Hey, If you want to know about depression I could tell you a thing or two. I've got a doctor's degree in depression."
 2. I suspect some of you could lead a seminar on the topic.
 - a. Now I don't have any one person in mind when I say that.
 - b. It's just that I know that the incidence of depression in our society and in the church is much higher than most people are aware.
 - c. Back at Oak Grove I did a Sunday morning dialogue sermon with a young mother who had had a major depressive episode.
 - (1) Several weeks later she told me she was amazed at how people came out of the woodwork and shared their stories with her once they knew she could understand them.
 - (2) She was not allowed to say who some of them were because they didn't want just anyone to know.
 - (3) But now that she had told her story, she had become a safe person to whom they could tell theirs.
 - C. Depression is another of those things that we carefully hide behind Sunday smile.
 1. And we really do try to hide depression behind a smile.
 - a. We know that joy is supposed to be a given in the Christian life.
 - (1) Jesus said, *Ask and you will receive, and your joy will be complete. John 16:24*
 - (2) Paul said, *For the kingdom of God is not a matter of eating and drinking, but of righteousness, peace and joy in the Holy Spirit, Romans 14:17*

- (3) It is axiomatic that one of the characteristics of Xns is joy, so many Xns conclude that there's something wrong with a Christian who's depressed.
 2. So we hide depression behind our Sunday smile as much as we can.
 3. And it's for that reason that we are going to address it here today.
- II. Now first, let's look at what depression is.
 - A. Depression is a disruption in one's life in which one experiences feelings of sadness, listlessness, hopelessness, worthlessness, inadequacy, shame, guilt, difficulty concentrating, insomnia, oversleeping, and possibly suicidal thoughts.
 - B. Now it's important to distinguish between short term and clinical depression.
 1. We all suffer short term depression from time to time when we're experiencing difficulties or loss in life.
 - a. Generally it's tied to some identifiable factor such as Miriam's leaving, an unstable work situation, being a Cleveland Indians fan.
 - b. Often we can address this kind of depression by changing the situation or by addressing our attitude.
 - (1) For example when I struggled with my sadness over Miriam's leaving I constantly reminded myself that it's the parents' job to enable their children to fly.
 - (2) What a tragedy if they don't make it out of the nest.
 - c. Generally short term depression releases within a reasonable time.
 2. Clinical depression is much more intense and much longer in duration.
 - a. Often you have no idea of any situation or loss that has sparked it.
 - b. It can come out of nowhere and hammer you big time.
 - (1) I once read an account of a pastor who felt some kind of change come over him as he sat at a traffic light.
 - (2) He immediately became severely depressed and spent years getting back on top.
 - c. Depression can debilitate you and immobilize you.
 - d. It can wring all hope out of you and make the future seem like a bottomless pit.
 3. The Psalmist captured this so well in *Psalms 31*.
 - a. *I am in distress; my eyes grow weak with sorrow, my soul and my body with grief. My life is consumed by anguish and my years by groaning.*
 - b. He sums it up especially well with the phrase, *I have become like broken pottery*. That says it all.
 4. Depression is a dreadful and difficult thing to deal with, and despite the biblical assurances of joy, it certainly does happen to Xns.
- III. The causes of depression are complex but there is usually some combination of situational factors and biological factors.
 - A. Situational factors consist of the ups and downs and losses and stresses of life.
 1. We call these the psychosocial stressors of life.
 2. Examples include the death of a spouse, loss of a job, economic stress, the

stress of being a long time caregiver, injury to ourselves or those we love, having been abused, a hopeless situation from which we feel no escape.

3. There often are significant identifiable psychosocial reasons for the depressions we experience.

B. Now the biological causes of depression are more technical and more complex.

1. Depression can be a side effect of a physical problem we're having—Diabetes, Parkinson's, Multiple Sclerosis.

2. It can be because of a tumor or malfunction in our body that is upsetting our body's hormonal balance.

3. Or it can be the result of a biological illness of the brain.

a. Often we fail to take into account that our brain can get sick just the same as the rest of our body can get sick.

b. Our brain runs on a finely tuned balance of chemicals.

c. And this can get out of balance and create havoc with our thinking and our emotional status

C. Now an important observation that we need to highlight is that depression is not the result of a spiritual fault within the person.

1. Unfortunately that's what depressed Christians often conclude.

a. "I have gotten this way because I'm not really saved or because I haven't been faithful enough with my devotions."

b. When Xns start thinking like that it's the result of the depression they're already experiencing not the source of the depression.

2. Christians experiencing depression are likely to be dealing with issues of psychosocial stress or biological malfunctioning not a spiritual deficit.

IV. This now brings us to the issue of what to do about depression?

A. The first step is to report your depression to your doctor and to accept his or her testing and referrals for further evaluation and treatment.

1. Now in many cases we may actually begin with a pastor, a friend or a counselor we might contact on our own, but ultimately, if there's a significant problem, you need to be seen by a doctor.

2. He or she can determine if you are depressed and begin exploring ways of addressing it.

3. One thing he or she will want to do is to check to make sure that you have no physical problem contributing to being depressed.

4. And then will begin working at finding ways to relieve the depression which might include either or both medication and counseling.

B. The second step may be to accept medication, which I know many of us resist.

1. But if the problem is biological, treatment with medication is likely the only possible treatment available and it is entirely appropriate.

a. We don't resist antibiotics for infections.

b. Neither should we resist medications for depression.

2. If the problem is biological, the solution needs to be biological also.

3. And even if the depression is the result of psychosocial stressors, you can work on those issues much better if medication has relieved depression.

C. The third step then may be to accept counseling with a qualified counselor.

1. Again, I know many resist counseling, but it can be most helpful.
2. Need to explore the stressors of our life and how those stressors have created unhealthful patterns of thought and behavior.
 - a. And then we need to analyze those unhealthful patterns and work toward better ways of thinking and behaving.
 - b. That's really all a counselor does—to help us discover, explore and analyze our unhealthy patterns and find more healthful ways of thinking and behaving.
3. Now we've got to be careful to find a counselor with whom we “click.”
 - a. It's okay to say, “I just can't connect and need to look elsewhere.”
 - b. Friend had a counselor with whom he made no progress.
 - c. So he went looking and found another counselor who helped him immensely.
 - d. A lot of the bad press counseling gets is because this particular counselor was not the right one for this particular person.
 - e. If the person would have just looked further they would likely have found a counselor with whom they could have a better experience.
4. There's been a lot of distrust among Xns when it comes to counseling.
 - a. Because our mental processing lies so close to our spirituality.
 - b. It's true that counselors who don't share our faith can do harm.
 - (1) What happens is that they consider our faith to be part of our unhealthful thinking and try to heal it—Problem!
 - (2) But it's not axiomatic that non-Christian counselors will view our faith in that way.
 - (3) There are some excellent non-Christian counselors who respect faith and work well with it.
 - c. But what is most helpful is a Christian counselor who has mastered academic psychology and applies it out of a Christian mind-set.
5. Now here I want to say a word about academic psychology.
 - a. It sometimes gets a bad name because of misunderstandings and because of practitioners who use it in questionable ways.
 - b. But in the right hands, it is a powerful tool for great good.
 - c. It contains incredible insight into how people work and think and offers wonderful resources for healing when used judiciously.
6. Now I have a concern that some who hang out their shingles as Christian counselors can fail to offer adequate assistance.
 - a. What happens is that some counselors' definition of “Christian” means that they reject the insights of academic psychology.
 - (1) They see Christian faith and psychology as mutually exclusive and actively resist the insights of psychology.
 - (2) Often these people can provide very good care.
 - (a) Christian love, compassion and listening are powerful tools.
 - (b) But they fall short of the full tool box available to one trained in academic psychology.

- (3) When people need what academic psychiatry offers, this kind of “Christian” counselor can stand in the way of their getting the help they need.
 - (4) That’s what happened with my father four years ago.
 - b. My sister is one of those who distrust psychiatry and she wanted to use a “Christian” counselor she knew and valued when Dad could not adjust to life after Mom was admitted to the nursing home.
 - (1) This man was well-intentioned and very biblically based.
 - (2) What he was doing with Dad was using the scriptures to tell Dad how he ought to feel—joyful and triumphant and exulting in the promises of God.
 - (3) He had Dad looking up and memorizing all kinds of passages on Christian joy and God’s gracious promises.
 - (4) The more Dad worked at it the more depressed and guilty he felt since he couldn’t force himself to feel the way that a good Christian exulting in the promises of God should feel.
 - (a) He had lost his wife of 60 years to Alzheimers and was trying to live alone, for the first time in his life, in the house they had shared for the last 37 years, and he just did not experience “his joy being complete” like he was supposed to.
 - (b) It made him feel like a dismal spiritual failure.
 - (c) He began to question his salvation.
 - c. When my sister conceded that Dad was getting worse rather than better, she reluctantly agreed to a psychiatrist.
 - (1) He asked Dad what he was feeling, rather than telling him what he should feel.
 - (2) He diagnosed Dad’s problem in just a few minutes.
 - (3) He prescribed medication for Dad’s depression, anxiety and inability to sleep.
 - (4) He told us on no uncertain terms that we had to get Dad out of the house and into an assisted living facility immediately
 - d. And that’s when things began to look up.
 - (1) Now it’s still been a long haul.
 - (2) But Dad was immensely benefitted by the psychiatric diagnosis, the medication and the intervention in his life.
- D. There is no reason why Christian people should not be able to lay hold of the resources available to them in today’s medical and psychiatric climate.
 - 1. Yes, there are dangers to watch for.
 - 2. But significant help is available through adequate diagnosis, medication and counseling.
- V. I would like to close with several lessons for the church.
 - A. First, we need to treat depression as a disease and not as a spiritual problem or any kind of a failure on the person’s part.
 - B. Second, we need to destigmatize medication, counseling and academic psychiatry.

1. They may have shortfalls. So do regular medicine, automobile mechanics, and computer diagnostics.
 2. But the resources they bring greatly outweigh the problems they present.
- C. Third, we need to be willing to tell our stories about our own struggles in this area so that persons experiencing depression don't feel so unique and alone.
1. It was a huge breath of fresh air when that young woman stood up at Oak Grove and told her story.
 - a. Now it wasn't easy. It was her idea. She wanted to do it. But still I had to walk with her through it.
 - b. And she did it. And it blessed many people.
 2. She became a magnet for others and she gave them permission to tell their stories and to get help.
- D. Fourth, it seems consistent in a body defined by God's love that we be understanding of and reach out to those who feel like broken pottery.
1. God intends for us to be whole pots. And we can be whole pots.
 2. And it's okay if we need the help of a doctor, medication and counseling to get there.
 3. It's okay if we lean on each other and support each other as we struggle with the broken-pottery-ness of our lives.
- E. There aren't a lot of hymns that deal with depression, but I think that hymn number 307 does a good job of laying out the support we need to be offering each other.