

Making Sense of Sadness: Depression and Pastoral Care in the Prozac Age

Aaron Klink, M.Div., M.A.R.

aaron.klink@duke.edu

Christian theologians have described symptoms contemporary “depression” for ages. Early church fathers spoke of *acedia*. Martin Luther spoke of curing through trusting God’s promises. Contemporary scholars struggle to understand depression believing it to arise from both life history and biology. Are psychotherapy or medication the best treatment, and what does a combination of those treatments say about human personhood?

The number of Americans on mood-stabilizing drugs skyrocketed from 51,003,000 in 1991 to 133,782,000 in 1998.¹ When reports of violence and suicidal thoughts increased among antidepressants users, prescriptions among youth dropped and suicide rates rose. Cultural forces independence, outgoing personalities, and constant cheerfulness also contribute to depression.

This paper explores a Christian understanding of the role of faith and community in healing depression and the implications of that work for theological anthropology. I will navigate two accounts of depression, one claiming that depression is simply a spiritual matter, and the other claiming that depression is all biological. It will argue that Christians can and should in certain circumstances in order to restore them to communion, and relationships of the struggle, joy, and sorrow of Christian discipleship. The church and faith should create and sustain a vision of “the good life” focused on interdependence, relationality, and service.

¹ Martin, Emil *Bipolar Expeditions: Mania and Depression in American Culture* (Princeton: Princeton University Press 2007) p. 13